



Republic of the Philippines
SOCIAL SECURITY SYSTEM

East Ave., Diliman, Quezon City
Tel. Nos. (632) 920-6401 • (632) 920-6446
E-mail: member_relations@sss.gov.ph • Web site: <http://www.sss.gov.ph>

CIRCULAR NO. 2022-013

TO : ALL SSS MEMBERS, CLAIMANTS, PENSIONERS AND EMPLOYERS

SUBJECT : UPDATED LIST OF DOCUMENTARY REQUIREMENTS FOR SICKNESS AND DISABILITY BENEFITS IN LINE WITH BUSINESS PROCESS RE-ENGINEERING

Pursuant to Social Security Commission (SSC) Resolution No. 339-s.2022 dated 18 May 2022 in support of the digitalization of SSS benefit processes and in compliance with the zero-contact policy under Republic Act (RA) 11032 or the Ease of Doing Business and Efficient Government Service Delivery Act of 2018, the List of Documentary Requirements for Sickness and Disability Benefits, SS and EC, are hereby issued.

I. SICKNESS BENEFIT

A. Basic Documents

1. SS Medical Certificate; or
2. Attending physician's Medical Certificate with the following information:
 - a. Full Name,
 - b. PRC Number,
 - c. Clinic Address,
 - d. Contact information (such as but not limited to landline/mobile number),
 - e. History of Present Illness and Complete Diagnosis, and
 - f. Recommended number of days convalescence including recuperation

Note: Attending physician's information is not to be verified in case physician is practicing abroad.

B. Supporting Medical Documents

1. Certified true copy of laboratory/diagnostic results, if any

Note: For medical documents electronically issued with or without signature of issuing officials, Official Receipt of procedure done shall be submitted.

2. Certified true copy of records of confinement
 - a. Hospital/Medical Abstract
 - b. Discharge Summary

Handwritten signatures and initials in the bottom right corner.

C. Additional Supporting Documents

1. For EC, above Basic and Supporting documents **PLUS** applicable documents
 - a. SSS Form B-309 (Accident/Sickness Report)
 - b. Pre-employment Physical Examination (PE) Report
 - c. Employment History
 - d. Complete Job Description
 - e. Certified true copy of Police Report (if applicable)
 - f. Certified true copy of logbook entry
2. For Self-Employed (SE), Voluntary Member (VM), above Basic and Supporting Documents **PLUS**
 - a. Certified true copy of Police Report (if applicable)
 - b. Certificate of Livelihood issued by the Barangay (For SE member)
3. Newly Separated – above Basic and Supporting documents **PLUS**
 - a. Certification of Separation/Affidavit of Undertaking
 - b. Certificate of No Advance Payment

II. DISABILITY CLAIM

A. Basic Documents

1. Disability Claim Application (DisCA) Form
2. Member's/Claimant's Photo and Signature Form

Note: For initial claims only and claims filed Over the Counter.

3. SS Medical Certificate or Attending Physician's personal Medical Certificate issued within six (6) months from date of filing with the following information:
 - a. Full Name;
 - b. PRC Number;
 - c. Clinic Address;
 - d. Contact information (such as but not limited to landline/mobile number); and
 - e. History of Present Illness and Complete Diagnosis.

Note: Attending physician's information is not to be verified in case physician is practicing abroad

B. Supporting Medical Documents (See checklist below)

Checklist

1. Amputation*
 - a. Record of Operation (if operated) indicating the level of amputation and specific body part involved.
2. Cataract Operation
 - a. Record of Operation*; and
 - b. Recent visual acuity issued by Ophthalmologist.

3. Cerebrovascular Accident (CVA)*
 - a. Hospital Abstract/Discharge Summary or CT scan/MRI result or Record of operation (if operated) clearly indicating onset of illness; and
 - b. Medical Certificate indicating present neurologic condition/status signed by the attending physician within six (6) months from date of filing of claim
4. Coronary Artery Disease/Heart Attack*
 - a. Record of Consultation/Hospital Abstract/Discharge Summary/ Record of Operation (if operated); and
 - b. ECG/2D Echo result (if any).***
5. Diabetes Mellitus
 - a. Recent and serial FBS results taken during the last two (2) years before date of filing***
 - b. Hospital Abstract/Discharge Summary (if confined)*
6. Fracture**
 - a. Record of consultation;
 - b. Hospital Abstract/Discharge Summary,
 - c. Record of Operation (if operated); or
 - d. Official X-ray result.
7. Hearing Loss*
 - a. Audiogram result***
8. Kidney Diseases*
 - a. Laboratory results;
 - b. Hospital Abstract (if confined); or
 - c. Certificate of dialysis treatment (if any).
9. Malignancy (Cancer)*
 - a. Hospital Abstract/Discharge Summary/Record of Operation (if operated);
 - b. Histopathologic result/CT Scan/MRI Result (if any).*
10. Mental Illness
 - a. Complete Psychiatric Evaluation Report*; and
 - b. Hospital Abstract/Discharge Summary (if confined).
11. Parkinson's Disease
 - a. Medical Certificate indicating present neurologic condition/status signed by a duly certified neurologist within six (6) months from date of filing of claim.
12. PTB, Far Advanced
 - a. Recent Chest X-ray plate with official result*
13. PTB, Minimal
 - a. Chest X-ray plate with official result* (taken recently **AND** at least 2 years before date of filing)

Handwritten initials and signature in blue ink.

14. PTB, Moderate
 - a. Chest X-ray plate with official result* (taken recently **AND** at least six (6) months before date of filing
15. Pulmonary Diseases (COPD)***
 - a. Recent Chest X-ray plate with official result; and
 - b. Pulmonary Function Test result (if any).
16. Removal of Organ**
 - a. Hospital Abstract/Discharge Summary/Record of Operation; and
 - b. Histopathological result.

* Certified true copy

** Certified true copy of ANY of the following

*** Taken within the last six (6) months before

Notes:

1. For medical documents electronically issued with or without signature of issuing officials, Official Receipt of procedure done shall be submitted.
2. For medical documents issued abroad
 - a. Must be in English translation
 - b. Certified true copy not required
3. Medical Specialist may require additional medical records/documents to be submitted.

This Circular shall take effect immediately following its publication in a newspaper of general circulation and the registration and filing of three (3) copies of the published circular with the Office of the National Administrative Register.

Please be guided accordingly.


MICHAEL G. REGINO
President and CEO 

01 JUN 2022

Date

(Policy – Medical)

Prepared by: Medical Program Department