

2 Health Insurance

There are two major health insurance systems in Japan: Employees’ Health Insurance, which is a workplace-based health insurance system for company employees and their dependents, and National Health Insurance, which is operated by municipalities and is designed for people who do not have Employees’ Health Insurance. Mid- to long-term foreign residents, special permanent residents and those with a resident status specified by the Minister of Health, Labour and Welfare who cannot enroll in the health insurance at their workplace due to their employment conditions need to join the National Health Insurance.

For detailed information on health insurance systems, application procedures, benefits, insurance claims or payment, contact your municipal government office.

(1) Outline of Health Insurance Systems

① National Health Insurance (NHI)

A	Enrollment procedures	When a member in the household becomes eligible for NHI, the head of the household should submit an application to the NHI section of the municipal government office of their residence.
B	Matters requiring notification	Departure from Japan, moving-in/moving-out, enrollment/withdrawal from NHI, childbirth, death, change of address/name/nationality/head of household, loss of NHI certificate, etc.
C	Health insurance card	A health insurance card will be issued to each individual in the household (or a non-card type certificate for the entire household). You must present your insurance card when receiving treatment at a medical institution.
D	Insurance premium (tax)	The head of the household is responsible for the payment of premiums. The amount of the premiums is determined by the number of NHI members in the household and the previous year’s family income. In the case that insurance premiums are not deducted from your pension, you can pay premiums at a financial institution or your municipal government office using payment notices sent to you, or through automatic debit through your bank account.

② Employees’ Health Insurance

A	Enrollment procedures	When employing a full-time employee—regardless of nationality, age or salary—the employer must submit an application to the Social Insurance Office (or Health Insurance Association).
B	Matters requiring notification	The employer must notify the Social Insurance Office (or Health Insurance Association) when an insured employee leaves the company, dies, changed his/her name, loses his/her health insurance certificate, etc.
C	Health insurance card	A health insurance card will be issued to the insured person and his/her dependents (some health insurance associations will issue non-card type insurance certificates). You must present your insurance card when receiving treatment at a medical institution.

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D	Insurance premium	Premiums are determined in accordance with an insured person's salary and are shared equally between the employer and the insured person. The employer pays the premiums (the amount paid by the insured person plus the amount paid by the employer) to the insurer.
E	Voluntary and continuous insured person (voluntary enrollment after retirement)	When an insured person who has been enrolled in the employees' health insurance program continuously for more than two months leaves the company, he/she is entitled to continue to be enrolled in the insurance program for another two years. An application must be made to the Health Insurance Association within 20 days after retirement. Unlike while you were in the company, you must pay the entire amount of the premiums.

③Latter-Stage Elderly Healthcare Insurance

A	Eligible persons	Persons aged 75 years and older (all persons aged 75 and older enroll in the Latter-Stage Elderly Healthcare System on the day when they reach 75 years of age; application not required) Those aged 65 to 74 are also eligible to be covered by the system if approved as suffering specified disabilities by Hiroshima Prefecture Wide-Area Association of Latter-Stage Healthcare (application required)
B	Matters requiring notification	Departure from Japan, moving-in/moving-out, death, change of address/name/nationality, loss of an insurance certificate, etc.
C	Health insurance certificate	A health insurance certificate will be issued for each person. A health insurance certificate must be presented when receiving medical services.
D	Insurance premium	The insurance premium is determined based on the insured person's income. In the case that insurance premiums are not deducted from your pension, you can pay the premiums at a financial institution or your municipal government office using payment notices sent to you, or through automatic debit through your bank account.

(2) Benefits of National Health Insurance (NHI), Employees' Health Insurance, and Latter-Stage Elderly Healthcare Insurance

①	General Medical Benefits	<p>Insured persons can receive medical treatment for their illnesses and injuries at the medical institution of their choice by paying only a portion of the medical expense (work-related illnesses and injuries are not covered by Employees' Health Insurance).</p> <p>The proportion of the cost to be borne by an insured person (copayment rate) is as follows:</p> <ul style="list-style-type: none"> • Those who enroll in Employees' Health Insurance and their family members (dependents): 30% • Those aged 70 or older: 20%*¹ (30% for those who earn above a certain level of income) • Children under six years of age*²: 20% <p>The same rate is applied to those enrolled in NHI.</p>
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	<p>For those covered by the Latter-stage Elderly Healthcare Insurance Plan, the copayment rate is 10% (30% for those who earn above a certain level of income). Your health insurance plan—NHI, Employees' Health Insurance or Latter-Stage Elderly Healthcare Insurance—will pay the rest of the costs for the medical service.</p> <p>*1 10% for those who were born before April 2, 1944 and whose income does not exceed a certain level *2 Until March 31 immediately following the day when they reach six years of age</p>
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②	<p>Refund on Medical Expenses</p> <p>If you receive medical treatment without your health insurance card, you will be required to pay the entire amount of the bill. However you can file for a refund pro rata (standard fees for the treatment received minus the copayment amount). (Corset, blood transfusion, treatment by a judo bonesetter or other oriental treatment, treatment by a doctor who does not accept insurance, treatment without presenting your health insurance card, etc.)</p>
③	<p>High-cost Medical Care Benefit</p> <p>If the copayment amount for the medical care costs paid during the same month exceeds a specified amount, the excess amount will be reimbursed upon application.</p>
④	<p>Childbirth and Childcare Lump-Sum Allowance (Dependent's Childbirth and Childcare Lump-Sum Allowance)</p> <p>When an insured person or dependent gives birth to a baby after four months (85 days) of pregnancy, 404,000 yen will be provided for each newborn baby (420,000 yen for a person who gives birth at a childbirth facility that participates in the Japan Obstetric Compensation System for Cerebral Palsy*).</p> <p>*The Japan Obstetric Compensation System for Cerebral Palsy is a system that provides compensation payments promptly for children who suffer from severe cerebral palsy related to childbirth. Medical institutions providing childbirth services can join the system.</p>
⑤	<p>Funeral Allowance *except Employees' Health Insurance</p> <p>When an insured person dies, an allowance for funeral expenses will be given to the person in charge of the funeral.</p>
⑥	<p>Funeral Expenses (Dependent's Funeral Expenses) *Employees' Health Insurance only</p> <p>When an insured person dies, funeral expenses of 50,000 yen will be paid to the family member who handles the burial. If the deceased person has no family members, the actual cost of the burial will be paid to the person who handles the burial, up to the amount of the funeral expenses benefit (50,000 yen). In the event of the death of a dependent family member, 50,000 yen will be given to the insured person as the dependent's funeral expenses.</p>
⑦	<p>Childbirth Allowance * Employees' Health Insurance only</p> <p>When an insured woman takes time off from work for childbirth and is not paid a salary by her employer, an amount equal to two-thirds of her standard daily wage will be paid daily (for a maximum period from 42 days prior to the (expected) date of delivery [98 days prior to the date of delivery in the case of multiple pregnancy] to 56 days after the day following the day of birth).</p>
⑧	<p>Injury and Sickness Allowance *Employees' Health Insurance only</p> <p>When an insured person is absent from work due to illness or injury and is not paid salary by the employer, an amount equal to two-thirds of his/her standard daily wage will be paid for each absent day (for a maximum of 18 months reckoned from the fourth day of the absence from work).</p>

⑨	Others
	Meal expenses during hospitalization, special medical expenses, medical expenses for home nursing, transportation expenses, etc.

Type of insurance	Contact
National Health Insurance	Municipal government office
Employees' Health Insurance	<ul style="list-style-type: none"> • Japan Health Insurance Association • Health Insurance Association
Latter-Stage Elderly Healthcare Insurance	<ul style="list-style-type: none"> • Municipal government office • Wide-Area Association of Latter-Stage Elderly Healthcare