[9] Health Care and Welfare Measures for Persons with Disabilities

Benefits for Welfare Services and Supports for Persons with Disabilities

Overview

Structure of Benefits for Welfare Services and Supports for Persons with Disabilities (As of December 2011)

| Services | Number of offices | Number of users | Contents of services | | |
|--|-------------------|-----------------|---|-------------------------|--|
| In-home long-ter care (home help) | 15,961 | 127,714 | Provide in-home care for bathing, elimination, meals, etc. | | |
| Home-visit care for persons with severe disabilities | 5,402 | 8,691 | Provide comprehensive support to persons with severe physical disabilities, who need nursing care continuously with care in their residences, to support meals, bath, elimination and nursing care during transportation when they go out | | |
| Accompanying support services | 2,971 | 11,992 | Provide persons with visual disabilities who have significant difficulties transporting themselves with support when they go out, including provision of necessary information for transportation (including writing/reading for them) and care during transportation, etc. | | |
| Activity support services | 1,112 | 6,282 | Provide persons with insufficient judgment with necessary support for avoiding danger which could occur when such persons conduct by themselves and care during transportation when they go out | ts | |
| Comprehensive support for persons with severe disabilities | 9 | 34 | Provide persons whose degrees of necessity for nursing care are very high with comprehensive welfare services such as home help service and other various services | e benei | |
| Day services for children | 2,432 | 73,214 | Provide children with disabilities with instruction about basic actions in daily life, adaptive trainings to group living, etc. | n car | |
| Short-stay service 3,308 | | 30,632 | Provide persons who need nursing care with short-time placement in support facilities including nighttime, due to sickness of their in-home caretakers or other reasons, to offer care for bath, elimination, meals, etc. | Long-term care benefits | |
| Medical Ing-term care 36 | | 2,120 | Provide persons with disabilities who need medical and continuous nursing care with functional training, care management, nursing care, daily care, etc. in medical institutions | | |
| Care for daily life | 6,157 | 192,177 | Provide persons with disabilities who need nursing care continuously with care for bath, elimination, meals as well as opportunities for creative or productive activities mainly in the daytime | | |
| Nighttime support, etc. in support facilities for persons with disabilities (support for residential care) | 1,892 | 102,820 | Provide persons with disabilities living in support facilities with care for bath, elimination, meals, etc. during nighttime and holidays | | |
| Group home with care (care home) | 3,771 | 46,551 | Provide persons leading a communal life with care for bath, elimination, meals, etc. in their residence during nighttime and holidays | | |
| Rehabilitation service (trainings for improving physical function and social abilities) | 1,250 | 14,167 | Provide persons with disabilities with trainings for improving physical function or social abilities for a certain period so that they can live independent daily and social life | etc. | |
| Transition support for employment | 2,206 | 22,696 | Provide persons with disabilities who desire to work in a private company, etc. with necessary trainings for improving knowledge and skills needed to enter the work-force for a certain period | training, | |
| Continued employment support for employment (type A/B) | 7,143 | 149,355 | Provide persons with disabilities who have difficulties to work in a private company, etc. with opportunities for employment as well as necessary trainings for improving knowledge and skills needed to enter the work-force | Benefits for training, | |
| Group home with aid (group home) | 3,214 | 23,181 | Provide persons leading communal lives in with consultation and other aid in their daily lives in their residence during nighttime and holidays | Bene | |

^{*} The number of offices and users are obtained by extraction and counting on the basis of the actual payment data of the Federation of National Health Insurance Associations as of December 2011.

Combination of Daytime Activity and Living Place

Service combination is available as an option by dividing services of living facilities into daytime service (daytime activity program) and nighttime service (housing support program).

In using the program, personalized support plan shall be made to provide services that meet respective purpose of use.

Place of daytime activity Select one or more programs below

Medical long-term care (medical type) *

Rehabilitation service (training for improving physical function and social abilities)

Transition support for employment

Care for daily life (welfare type)

Continued employment support (type A/B)

Local activity support center (community life support services



Place of living

Support for placement at support facilities for persons with disabilitie

or

Housing support services (functioning of care homes, group homes, and welfare homes)

^{*} The existing rehabilitation facilities for persons with physical disabilities, care facilities for persons with mental retardation, social rehabilitation facilities for persons with mental disorders, etc. had all been shifted to the new type of system services by March 2012.

^{*} In accordance with the Act on Partial Revision of the Services and Supports for Persons with Disabilities Act, etc., day services for children shall be reorganized into development support for children or after school day services in April 2012 under the Child Welfare Act.

^{*} Medical care shall be implemented in combination with admission to medical institutions

Community Life Support Services and Individual Benefits

| | Community life support services | Individual benefits |
|-------------------------------------|--|---|
| Characteristics | Services that can be implemented by local governments in a flexible manner according to the actual situation in regions | Benefits that correspond to specific and individual needs such as nursing care, training for employment, etc. |
| Flow of costs | Implemented by municipalities (municipalities shall implement services for themselves or by delegating to businesse operators, etc.) | Benefits to individual users (business operators receive benefits by procuration in practice) |
| Users | Discretion of implementing body | Recognition of classification of disability levels (for long-term care benefits, recognition is required only for persons aged 18 and older; unnecessary for payment for training, etc.) and grant decision are necessary |
| Usage fee | Discretion of implementing body | Fixed rate burden (reduced burden measure available for low-income people) |
| Criteria of servioce implementation | Discretion of implementing body (management criteria partly apply: community activity support centers, welfare homes) | Designated criteria (criteria of staff, facility, and management), etc. shall be applied |
| Financial resource | Subsidy (local allocation tax measures partly apply) subsidy ratio: National up to 50% for prefectural services National up to 50%, prefecture up to 25% for municipal services | Subsidy (burden ratio: national 50%, and prefectures and municipalities 25% each) |

Reformation toward User-oriented Service Provision Systems

<Before reformation: former system> <After reformation: new system> Activity place for daytime Supporting life Institutions for severely-retarded children (Over aged children) Transfer to new Selecting one or more services from Medical care benefits for progressive systems the following muscular atrophy Nursing care homes for persons [1] Unification of three disorders[2] Separation of day and night time[3] Promotion of transfer to communities, [Long-term care benefits] Housing support with physical disabilities [1] Long-term care (medical type) services * Operation at medical facilities Rehabilitation facilities Care homes [2] Life Care (welfare type) (physical, mental retardation) Group homes Vocational facilities Welfare homes [Rehabilitation benefits, etc.] (physical, mental retardation/disorders) [3] Rehabilitation services (trainings for improving physical or Small-scale vocational facilities function and social abilities) (physical, mental retardation/disorders) Placement in facilities [4] Transition support for Welfare workshops employment (physical, mental retardation/disorders) [5] Continued employment support Daily life training facilities for persons with mental disorders [Community life support services] [6] Local activity support centers Community life support centers for persons etc with mental disorders (day service portion) Day services for persons with

 $^{^{\}star}$ Transfer of the former system to the new system was completed on April 1, 2012.

System of Certification for Persons with Disabilities

| | Number of certificates issued (thousand) | Verification provisions | Responsible entities | Application desk |
|---------------------------------|--|--|---|--|
| Physical disability certificate | 5,109 | Article 15 of the Act on Welfare of Physically Disabled Persons | Prefectural governors Mayors of designated cities, Mayors of core cities, | Directors of welfare offices that administers place of residence (or mayors of towns and villages in the case a town or a village has no welfare office) |
| Medical rehabilitation handbook | | | Prefectural governors Mayors of designated cities | Directors of welfare offices that administers place of residence (or mayors of towns and villages in the case a town or a village has no welfare office) |
| Mental disability certificate | 595 (The number registered in the benefit payment book as of the end of fiscal years deducted by the number expired) | Article 45 of Act on Mental Health and Welfare for the Mentally Disabled | Prefectural governors Mayors of designated cities | Mayors of municipalities that administers place of residence |

Source: "Report on Social Welfare Administration and Services FY2010" for the number of physical disability certificates and that of medical rehabilitation handbooks, and

"Report on Public Health Administration and Services FY2010" for the number of mental disability certificates issued.

(Note) The figures exclude the following due to the impact of the Great East Japan Earthquake:

- · Municipalities of Fukushima Prefecture apart from Koriyama City and Iwaki City for the figures for physical disability certificates
- All municipalities of Fukushima Prefecture for the figures for medical rehabilitation handbooks
- · Municipalities of Miyagi Prefecture apart from Sendai City for the figures for mental disability certificates

Detailed Data Number of Persons with Disabilities (estimate)

| | | Total | Persons living at home | Persons accommodated in facilities |
|--|-----------------|----------------|------------------------|------------------------------------|
| | Younger than 18 | 98,000 | 93,000 | 5,000 |
| Children/adults with physical disabilities | 18 or older | 3,564,000 | 3,483,000 | 81,000 |
| priyolodi diodoliitico | Total | 3,663,000 (29) | 3,576,000 (28) | 87,000 (1) |
| | Younger than 18 | 125,000 | 117,000 | 8,000 |
| Children/adults with | 18 or older | 410,000 | 290,000 | 120,000 |
| mental retardation | Unknown age | 12,000 | 12,000 | 0 |
| | Total | 547,000 (4) | 419,000 (3) | 128,000 (1) |

| | | Total | Outpatient | Inpatient |
|------------------|-----------------|----------------|----------------|-------------|
| | Younger than 20 | 178,000 | 174,000 | 4,000 |
| Persons with | 20 or older | 3,054,000 | 2,725,000 | 329,000 |
| mental disorders | Unknown age | 6,000 | 5,000 | 1,000 |
| | Total | 3,233,000 (25) | 2,900,000 (23) | 333,000 (3) |

Source:

"Persons with physical disabilities"

Persons living at home: "Survey on persons with physical disability" (2006), MHLW

Persons accommodated in facilities: "Survey of Social Welfare Institutions" (2006), MHLW, etc.

"Persons with mental retardation"

Persons living at home: "Survey on persons with intellectual disability" (2005), MHLW

Persons accommodated in facilities: "Survey of Social Welfare Institutions" (2005), MHLW

"Persons with mental disorders"

Outpatients: Dept. of Health and Welfare for Persons with Disabilities, Social Welfare and War Victims' Relief Bureau, MHLW based on the "Patient Survey" (2008), MHLW

Inpatients: Dept. of Health and Welfare for Persons with Disabilities, Social Welfare and War Victims' Relief Bureau, MHLW based on the "Patient Survey" (2008), MHLW

- (Note) 1. The figures in parentheses indicate the number of persons per population of 1,000 (base on 2005 Population Census).
 - 2. The number of persons with mental disorders is calculated by adding the number of epilepsy and Alzheimer patients to the number of patients of "V Mental and behavioural disorders" of ICD-10 with mental retardation excluded. In addition, the number for each age group is rounded, thus the sum of breakdowns may not equal the total.
 - 3. The number of persons with physical disabilities who are accommodate in facilities do not include those accommodated in facilities for the elderly.
 - 4. The number of persons is rounded, thus the sum of breakdowns may not equal the total.

Medical System for Services and Supports for Persons with Disabilities

Overview

Medical System for Services and Supports for Persons with Disabilities

Objective

Medical system bearing public expenses that aims to reduce the amount of co-payment of medical costs concerning medical services for persons with disabilities to ease and reduce their physical disabilities and mental disorders

- * Insurance precedes medical payment for services and supports for persons with disabilities; practically this system shall cover the difference between self-pay burden prescribed by this system and thirty-percent-self-pay- burden after insurance payment. (Burden ratio: national 50%, prefectures 50%)
- Covered
 - · Outpatient mental medical service: Persons with mental disease such as mental disorders prescribed in Article 5 of Act for the Mental Health and Welfare of the Persons with Mental Disorders who needs outpatient mental treatment continuously
 - · Medical rehabilitation service: Persons to whom a physically disabled certificate is issued pursuant to the Act on Welfare of Physically Disabled Persons and to whom result is assured by medical service such as an operation, etc. to ease and reduce those disorders (aged 18 and older)
 - · Medical aid for children with potential disability: Children with physical disabilities to whom result is assured by medical service such as an operation, etc. to ease and reduce those disabilities (aged younger than 18)
- o Intended main disorders and remedial example
 - · Outpatient mental medical service (mental disease) : Psychotropic, psychiatry day care, etc.
 - Medical rehabilitation service, medical aid for children with potential disability:

Physical disability: arthrogryposis → artificial joint replacement

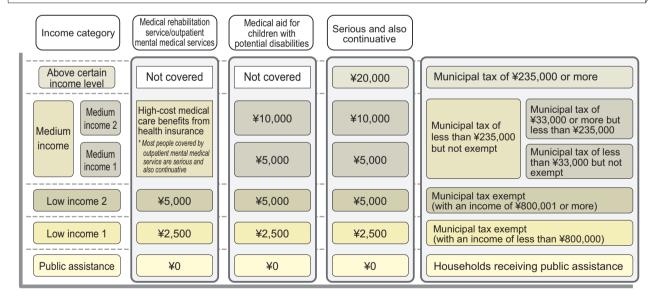
Visual disability: cataract → cataract extraction

internal impediment: impaired cardiac function \rightarrow valve replacement, pacemaker implantation

Kidney dysfunction → liver transplantation, dialysis treatment

Basic Framework of Co-Payment of Medical Systems for Services and Supports for Persons with Disabilities

- [1] In order to avoid the co-payments from becoming extremely large the monthly co-payment amount shall be established according to their incomes. (10% for below this amount)
- [2] Further reduction measures are being taken for those requiring continued long-term high-cost treatment (serious and also continuative) and people with medium incomes covered by medical aid for children with potential disabilities.



The range of "serious and also continuative"

Persons covered on the ground of diseases and symptoms

[Medical rehabilitation service/medical aid for children with potential disabilities]

People with kidney, small intestine, immune system, cardiac (limited to anti-immune therapy after cardiac transplantation), or liver (limited to anti-immune therapy after liver transplantations) dysfunctions

[Outpatient mental medical services]

- [1] People with cerebral dysfunctions such as schizophrenic disorder, bipolar disorder/depression, epilepsy, dementia, etc., and drug-related disorders (addiction, etc.)
- [2] People who have been judged by a doctor with above a certain level of experience with metal treatment
- People covered on grounds of continuous burden of expensive cost, regardless of the disease

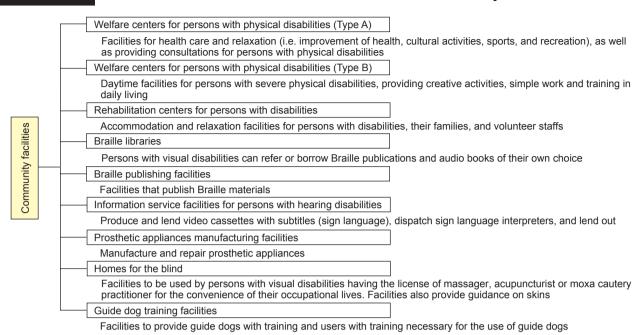
[Medical rehabilitation service/medical aid for children with potential disabilities/outpatient mental medical services]

People who have qualified to utilize a variety of medical insurances

Welfare Measures for Persons with Physical Disabilities

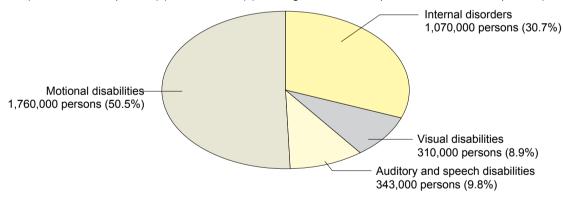
Overview

Outline of Institutional Welfare Measures for Persons with Physical Disabilities



Detailed Data 1 Number of Persons with Physical Disabilities by Disability Type (In-Home)

(Total: 3,483,000 persons) (2006 estimates) (including those with multiple disabilities: 310,000 persons)



Detailed Data 2 Changes in Number of Persons with Physical Disabilities by Age Group (per 1,000 population)

| Year | Total | Age 18-19 | Age 20-29 | Age 30-39 | Age 40-49 | Age 50-59 | Age 60-64 | Age 65-69 | 70 or older |
|------|-------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-------------|
| 1955 | 14.5 | 5.3 | 7.1 | 14.5 | 16.0 | 20.6 | 25.4 | 25.4 | 29.4 |
| 1980 | 23.8 | 3.5 | 4.9 | 7.0 | 16.0 | 33.7 | 55.8 | 68.7 | 87.6 |
| 2006 | 32.7 | 4.5 | 4.1 | 6.1 | 11.6 | 24.4 | 48.9 | 58.3 | 94.9 |

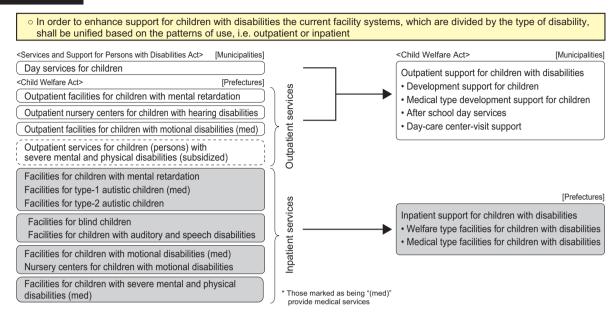
Source: "Survey on persons with pyhsical disability", Department of Health and Welfare for Persons with Disabilities, Social Welfare and War Victims' Relief Bureau, MHLW

(Note) The population aged 18 or older taken from the "National Census" and "Population Estimate" of Statistics Bureau, Management and Coordination Agency was used as the base population for calculating the number of persons with physical disabilities per 1,000 population.

Welfare Measures for Children with Disabilities and Persons with Mental Retardation

Overview

Unification of Facilities and Services for Children with Disabilities (Image)



(Note) Facilities and services for children with disabilities were reorganized on April 1, 2012 in accordance with the Act on Partial Revision of the Services and Supports for Persons with Disabilities Act, etc.

Detailed Data

Changes in Number of Children/Adults with Mental Retardation by Age Group (per 1,000 Population)

| | Age 0-9 | Age 10-19 | Age 20-29 | Age 30-39 | Age 40-49 | Age 50-59 | 60 or older |
|------|---------|-----------|-----------|-----------|-----------|-----------|-------------|
| 1995 | 2.8 | 4.1 | 4.1 | 2.1 | 1.7 | 1.2 | 0.5 |
| 2005 | 4.9 | 6.6 | 5.7 | 4.8 | 2.8 | 1.6 | 0.7 |

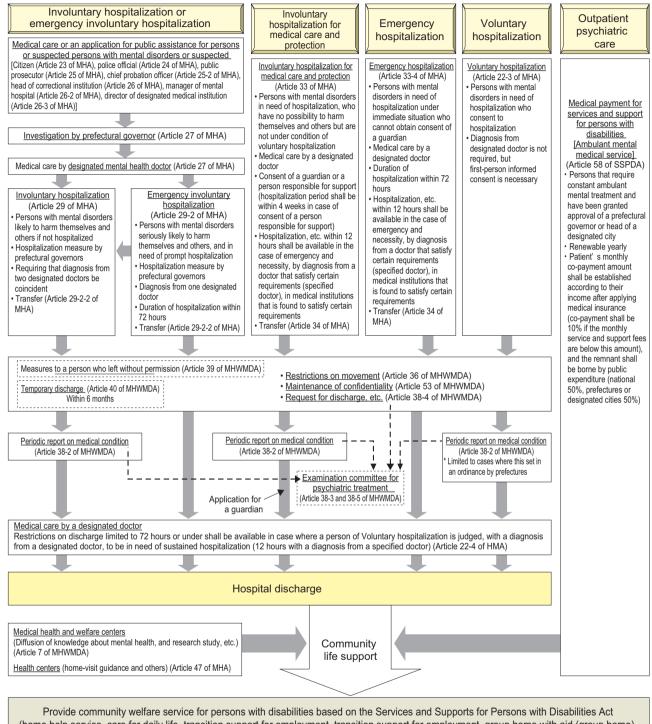
Source: "Survey on persons with pyhsical disability", Department of Health and Welfare for Persons with Disabilities, Social Welfare and War Victims' Relief Bureau, MHLW

(Note) The population aged 18 or older taken from the "National Census" and "Population Estimate" of Statistics Bureau, Management and Coordination Agency was used as the base population for calculating the number of chldren/adults with mental retardation per 1,000 population.

Mental Health and Medical Welfare Measures

Overview

Outline of Mental Health and Medical Welfare System



Provide community welfare service for persons with disabilities based on the Services and Supports for Persons with Disabilities Act (home help service, care for daily life, transition support for employment, transition support for employment, group home with aid (group home), local activity support center, etc.)

(Note) In this table, the following terms shall be abbreviated as follows:

Act on Mental Health and Welfare for the Mentally Disabled (1950; Law No.123): MHWMDA, Services and Supports for Persons with Disabilities Act (2005; Law No.123): SSPDA.

In the table, the term "prefectural governors" shall be deemed to be replaced with "prefectural governors or mayors of designated cities".

Detailed Data

Changes in Number of Hospitals with Mental Beds, Number of Mental Beds, Number of Inpatients and Bed utilization Rate at the End of Month

(As of the end of June of each year)

| | Number of boosit-1- | Bed utilization rate | | | |
|------|--------------------------------------|-----------------------------|---|-------------------------|--|
| Year | Number of hospitals with mental beds | Total number of mental beds | Number of inpatients at the end of month | at the end of month (%) | |
| 1965 | 1,069 | 164,027 | 177,170 | 108.0 | |
| 1970 | 1,364 | 242,022 | 253,433 | 104.7 | |
| 1975 | 1,454 | 275,468 | 281,127 | 102.0 | |
| 1980 | 1,521 | 304,469 | 311,584 | 102.3 | |
| 1985 | 1,604 | 333,570 | 339,989 | 101.9 | |
| 1990 | 1,655 | 358,251 | 348,859 | 97.4 | |
| 1995 | 1,671 | 362,154 | 340,812 | 94.1 | |
| 1996 | 1,668 | 361,073 | 339,822 | 94.1 | |
| 1997 | 1,669 | 360,432 | 336,685 | 93.4 | |
| 1998 | 1,670 | 359,563 | 335,845 | 93.4 | |
| 1999 | 1,670 | 358,609 | 333,294 | 92.9 | |
| 2000 | 1,673 | 358,597 | 333,328 | 93.0 | |
| 2001 | 1,669 | 357,388 | 332,759 | 93.1 | |
| 2002 | 1,670 | 356,621 | 330,666 | 92.7 | |
| 2003 | 1,667 | 355,269 | 329,555 | 92.8 | |
| 2004 | 1,671 | 354,923 | 326,613 | 92.0 | |
| 2005 | 1,671 | 354,313 | 324,851 | 91.7 | |
| 2006 | 1,668 | 352,721 | 321,067 | 91.0 | |
| 2007 | 1,671 | 351,762 | 317,139 | 90.2 | |
| 2008 | 1,667 | 350,353 | 314,251 | 89.7 | |
| 2009 | 1,667 | 348,129 | 312,681 | 89.8 | |
| 2010 | 1,671 | 347,281 | 311,007 | 89.6 | |

Source: "Hospital Report", Statistics and Information Department, Minister's Secretariat, MHLW

Measures for Persons with Developmental Disorders

Overview

Outline and Aims of the Act on Support for Persons with Developmental Disorders

I Aims

- O Definition of developmental disorders and promotion of its understanding
- O Promotion of support for persons with developmental disorders throughout their lives
- O Achieve close cooperation among mutual section in charge of support for persons with developmental disorders

II Outline

Definition:

Developmental disorders: Brain dysfunction that is generally expressed during earlier age such as pervasive developmental disorder (autism, etc.,) learning disability, attention deficit hyperactivity disorder, etc.

Preschool age (infant)

School attendance age (school child)

After graduate age (middle-aged and young people)

- O Early development support
- Early detection by health examination for infants
- Physical Examinations for Newly Enrolling Students
- Establishment of appropriate educational support and support system
- Use of after-school child sound upbringing services
- O Specialized development support
- Achieve adequate employment opportunities according to the respective characteristics of persons with developmental disorders
- O Community life support
- Advocacy for the persons with developmental disorders

Developmental disorder support centers, Ensure specialized medical institutions (prefectures)

Ensure human resources who have professional expertise, Research study (national government)