

Overview

Outline of Health Care Insurance System

(As of April 2009)

System		Insurer (as of the end of March 2008)	Number of subscribers (as of the end of March 2008) [Insured families] 1,000 people	Insurance benefits				Financial sources				
				Medical care benefits				Cash benefits	Premium rate	State subsidy		
				Partial cost-sharing	High-cost medical care benefit system, high-cost medical care/long-term care unitary system	Inpatient dietetic treatment fee	Inpatient resident treatment fee					
Health Insurance	Association-Kempo	Japan Health Insurance Association	36,294 [19,807] [16,488]	<p>After entering school age to 69 years old 30%</p> <p>Before entering school age 20%</p> <p>People aged 70 to 74 20% (*) (30% for those earning full salaries)</p> <p>(*) For those aged 70 to 74, partial cost-sharing remain 10% for 1 year from April 2008 to March 2010</p>	<p>(High-cost medical care benefit system) • Cost-bearing limit (People aged 69 or younger) (High-income) ¥150,000 + (medical expense - ¥500,000) x 1% (General) ¥80,100 + (medical expense - ¥267,000) x 1% (Low-income) ¥35,400 (People aged 70 to 74) (Earning full salaries) ¥80,100 + (medical expense - ¥267,000) x 1% (General) (*) ¥62,100 Outpatient treatment (per person) ¥24,600 (Low-income) ¥24,600 Outpatient treatment (per person) ¥8,000 (Especially low-income) ¥15,000 Outpatient treatment (per person) ¥8,000</p> <p>• Family package standard amount For people aged 69 or younger, if two or more people each pay ¥21,000 or above in a single month, benefits are provided subject to the total amount of such payment.</p> <p>• Reduced payment for multiple high-cost medical care Cost-bearing limit for persons having received the high-cost care three times within a twelve-month period: From the fourth time, the co-payment will be: (People aged 69 or younger) (High-income people) ¥83,400 (General people) ¥4,400 (Low-income people) ¥24,600 (People aged 69 who are earning full salaries or general-income) ¥44,400</p> <p>• Reduced payment for persons receiving high-cost medical care for a long period: Cost-bearing limit for people suffering from hemophilia and chronic renal insufficiency with essential artificial dialysis: ¥10,000 (for high-income people aged 69 or younger receiving artificial dialysis: ¥20,000)</p> <p>(*) For general people aged 70 to 74, cost-bearing limit remains at ¥44,400 (¥12,000 for outpatient treatment), thus reduced payment for multiple high-cost medical care does not apply.</p> <p>(High-cost medical care/long-term care unitary system) Reduced payment for persons whose total cost-bearings of health care insurance and long-term care insurance for a year (from August to June every year) is extremely high. Cost-bearing limit is determined carefully according to their income and age.</p>	<p>(Standard payment amount for dietetic treatment)</p> <p>• General people ¥260/meal</p> <p>• Low-income people up to 90 days ¥210/meal after 90 days ¥160/meal</p> <p>• People with especially low-income ¥100/meal</p>	<p>(Standard payment amount for resident treatment)</p> <p>• General people (I) ¥460/meal + ¥320/day</p> <p>• General people (II) ¥420/meal + ¥320/day</p> <p>• Low-income people ¥210/meal + ¥320/day</p> <p>• People with especially low-income ¥130/meal + ¥320/day</p> <p>• Subjects are people aged 65 or older who are hospitalized in long-term care beds</p> <p>• For patients with intractable diseases who are likely to require hospitalization, amount of payment is same as standard payment amount for dietetic treatment</p>	<p>• Sickness and injury allowance • Maternity and childcare lump sum allowance, etc.</p> <p>Same as above (with additional benefits)</p> <p>• Sickness and injury allowance • Maternity and childcare lump sum allowance, etc.</p> <p>Same as above</p> <p>Same as above (with additional benefits)</p> <p>• Maternity and childcare lump sum allowance • Funeral expenses</p>	8.2%	13.0% of benefit costs (16.4% as support coverage of medical care system for elderly in the latter stage of life)		
	Society-managed	Health Insurance Societies 1,541	30,860 [15,871] [14,989]								Depends on each Health Insurance Societies	Fixed amount (subsidy from budget)
	The insured under Article 3-2 of the Health Insurance Act	Japan Health Insurance Association	18 [11] [7]								Class 1: ¥150/day Class 13: ¥3,010	13.0% of benefit costs (16.4% as support coverage of medical care system for elderly in the latter stage of life)
Seamen's Insurance	National	157 [63] [95]	None	9.1% (Out of duty)	Fixed amount							
Mutual aid associations	National public employees	21 mutual aid associations	9,374 [4,397] [4,977]	Same as above (with additional benefits)	None	None						
	Local public employees, etc.	55 mutual aid associations										
	Private school teachers and staff members	1 corporation										
National Health Insurance (NHI)	Farmers, self-employed, etc	Municipalities 1,804 NHI associations 165	50,724 46,881 3,843	Health insurance premiums comprise 1) fixed amount portion and 2) variable amount portion depending on ability to pay.	43% of benefit costs, etc. 32-55% of benefit costs, etc.	None						
	Retirees formerly under Employees' Health Insurance	Municipalities 1,804										
Long life medical care system (medical care system for elderly in the latter stage of life)	[Implementing bodies] Long life medical care partial-affairs association	13,075 (as of the end of April 2008)	10% (30% for those earning full salaries)	<p>Cost-bearing limit (per person)</p> <p>(People earning full salaries) ¥80,100 + (medical expense - ¥267,000) x 1% ¥44,400 (multiple high-cost medical care) ¥44,400 (General people) ¥44,400 ¥12,000 (Low-income people) ¥24,600 ¥8,000 (Especially low-income) ¥15,000 ¥8,000</p>	Same as above	Same as above, except for recipients of Old-age Welfare Pension ¥130/meal +¥0/day	Premium rate is calculated by per capita basis and per capita income basis provided by each partial-affairs association	<p>• Premium 10%</p> <p>• Support coverage approximately 40%</p> <p>• Public fund approximately 50%</p> <p>(Breakdown of public fund) National : Prefecture : Municipality 4 : 1 : 1</p>				

(Notes)

1. People covered by the long life medical care system (medical care system for elderly in the latter stage of life) are those aged 75 or older and also those aged 65 to 74 with disabilities certified by partial-affairs associations.
2. People earning full salaries are those with taxable income ¥1.45 million or more (monthly income ¥280,000 or more), those in households of two or more elderly with taxable income ¥5.20 million, and those in households of single elderly with taxable income ¥3.83 million. High-income people are those with monthly income ¥530,000 or more (For NHI, annual income more than ¥6 million). Low-income people are those who belong to municipal-tax exempt household. People with especially low-income are those with pension income 800,000 or less.
3. Fixed-rate state subsidy for National Health Insurance associations for the people and their dependents newly joining the system on September 1, 1997 or later should be the same as that for Government-managed Health Insurance.
4. The numbers of subscribers are all prompt figures except for Mutual Aids, and the number of the end of March 2008 includes those who transformed to Long Life (Elderly in the Latter Stage of Life) Medical Care System after April 2008. In addition, the sums of total and break-down may not correspond due to the rounding-off.