2 Health and Medical Services

Overview

Overview of Health Care Insurance System

(As of April 2009)

											(As of April 2009)		
			Insurer (as of the end of March 2009)	Number of subscribers		Insurance benefits				Financial sources			
System		/stem		(as of the end of March 2009)	Medical care benefits High-cost medical care benefit Inpatient Inpatient Partial cost-sharing system, high-cost medical dietetic resident			Cash benefits	Premium rate	State subsidy			
Health Insurance	General employees	Association- Kempo	Japan Health Insurance Association	1,000 people 34,705 [19,496 15,210]	After entering school age to 69 years old 30% Before entering school age 20% People aged 70 to 74 20% (*) (30% for those earning full salaries) - (*) For those aged 70 to 74, partial cost-sharing remain 10% for 1 year from April 2008 to March 2011	Care/long-term Care unitary system (High-cost medical care benefit system) • Cost-bearing limit (People aged 60 or younger) (High-ncome) ¥150.000 + (medical excense - ¥500.000) x 1%	treatment fee treatment (Standard payment amount for dietetic treatment) I(Standard payment amount for mexident treatment) I(Standar payment amount for amount for secolet ¥260/meal - General people ¥260/meal • Genera people ¥320/da 90 days ¥160/meal • Genera people ¥320/da * People with especially low- income ¥100/meal • Genera people ¥320/da • Deople with especially low- income ¥100/meal • Source people especia income \$320/da • Subject people 65 or ol who are nospital long-ter beds • Subject people 65 or ol who are nospital long-ter beds • For pat mount dietetic • For pat mount dietatic	treatment) General people (I) General people (I) General people (I) Labor Status Labor Status Low-income people Labor Status Deventor Status People with especially low- income Labor Status People aged for older who are hospitalized in long-term care beds For patients with intractable diseases who are likely to	Sickness and injury allowance Maternity and childcare lump sum allowance, etc.	9.34%	13.0% of benefit costs (16.4% as support coverage of medical care system for elderly in the latter stage of life)		
	General	Society- managed	Health Insurance Societies 1,497	30,337 [15,906] 14,431]					Same as above (with additional benefits)	Slightly different depending on each Health Insurance Societies	Fixed amount (subsidy from budget)		
	T und of	he insured er Article 3-2 the Health urance Law	Japan Health Insurance Association	17 □ 11 □ 6 □					Sickness and injury allowance Maternity and childcare lump sum allowance, etc.	Class 1: ¥360/day Class 13: ¥3,020	13.0% of benefit costs (16.4% as support coverage of medical care system for elderly in the latter stage of life)		
		amen's urance	National	144 [62 82]					Same as above	9.25% (Out of duty)	Fixed amount		
aid associations	e L em	tional public mployees ocal public ployees, etc.	21 mutual aid associations 55 mutual aid associations	9,023					Same as above (with additional benefits)	-	None		
National Health Insurance (NHI) Mutual	teac	ivate school hers and staff members	1 corporation	└ 4,629 ┘						-			
		armers, self- mployed, etc	Municipalities 1,788 NHI associations 165	39,492 Municipalities					Maternity and childcare lump sum allowance • Funeral	Health insurance premiums comprise 1) fixed amount portion and 2) variable amount portion depending on ability to pay. Premium rate calculation formula is slightly different depending on insurers.	43% of benefit costs, etc. 32-55% of benefit costs, etc.		
	f En	Retirees ormerly under nployees' Health Isurance	Municipalities 1,788	35,970 NHI associations 3,522		(H) The remains at ¥44,400 (¥12,000 for outpatient treatment), thus reduced payment for multiple high-cost medical care does not apply. (High-cost medical carelong-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.		amount of payment is same as standard payment amount for	expenses		None		
(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	13,458	10% (30% for those earning full salaries)	Cost-bearing limit Outpatient reatment (per person) (People earning full salaries) %00,100 + (medical expense - ¥267,000) x 1% ¥44,400 (multipe high-cost medical expense - ¥267,000) x 1% ¥44,400 %12,000 (General people) ¥44,400 ¥12,000 (Low-income people) ¥24,600 ¥8,000 (Especially low-income) ¥15,000 ¥8,000	Same as above	Same as above, except for recipients of Old-age Welfare Pension ¥ +¥0/day	Premium rate is calculated by per capita basis and per capita income basis provided by each partial-affairs association	40% • Public fund app (Breakdown of p	ublic fund) cture : Municipality		

(Notes)

1. 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 for health insurances, and the sums of total and break-down may not correspond due to the rounding-off.

5. National Treasury subsidy ratio for National Health Insurance Association (General employees and the insured under Health Insurance Law, Article 3, Section 2) is 16.4% of the benefits from July FY2010 to FY2012