

[2] Health and Medical Services

(1) Health Care Insurance

Health Care Insurance System

Overview		Outline of Health Care Insurance System					(As of June 2011)																	
System	Insurer (as of the end of March 2010)	Number of subscribers (March 2010)	Insurance benefits				Financial resources																	
			Medical care benefits			Cash benefits	Premium rate	State subsidy																
		Co-payment	High-cost medical care benefit, Unitary high-cost medical/long-term care system	Hospital meal expenses	Hospital living expenses																			
Health Insurance General employees	JHIA-managed Health Insurance	34,828 [19,517] 15,311	After reaching compulsory education age until age 70 30%	(High-cost medical care benefit system) • Maximum co-payment (Persons younger than 70) (High income) ¥150,000 + (medical fee - ¥500,000) × 1% (General) ¥80,100 + (medical fee - ¥267,000) × 1% (Low income) ¥35,400 (Persons 70 or older but younger than 75) (More than a certain level of income) ¥80,100 + (medical fee - ¥267,000) × 1%, outpatient (per person) ¥44,400 (General (*)) ¥62,100, outpatient (per person) ¥24,600 (Low income) ¥24,600, outpatient (per person) ¥8,000 (Extremely low income) ¥15,000, outpatient (per person) ¥8,000 • Per-household standard amount If more than one person younger than 70 pay ¥21,000 or more in a single month, per-household standard amount is added to the benefits paid • Reduced payment for multiple high-cost medical care For persons who have received high-cost medical care three times within a twelve-month period, the maximum co-payment of the fourth time and up will be reduced to: (Persons younger than 70) (High income) ¥83,400 (General) ¥44,400 (Low income) ¥24,600 (Persons aged 70 or older with general or more than a certain level of income (**)) ¥44,400 • Reduced payment for persons receiving high-cost medical care for a long period Maximum co-payment for patients suffering from hemophilia or chronic renal failure requiring dialysis, etc.: ¥10,000 (high-income patients younger than 70 receiving dialysis: ¥20,000) (*) For persons with general income aged 70 to 74, maximum co-payment remains ¥44,400 (¥12,000 for outpatient medical care), thus reduction for multiple high-cost medical care does not apply. (Unitary high cost medical/long-term care benefit system) Reduced payment for persons whose total co-payments of health care and long-term care insurances for a year (from August to June every year) is extremely high. Maximum co-payment is determined carefully according to their income and age.	(Co-payment for meal expenses) • General Per meal ¥260 • Low income Per meal first 90 days ¥210 Per meal after 90 days ¥160 • Extremely low income Per meal ¥100	(Co-payment for living expenses) • General (I) Per meal ¥460 + Per day ¥320 • General (II) Per meal ¥420 + Per day ¥320 • Low income Per meal ¥210 + Per day ¥320 • Extremely low income Per meal ¥130 + Per day ¥320 * Applicable to those aged 65 or older in long-term care beds * For patients with intractable diseases, etc. and thus in high need for inpatient medical care, the amount of co-payment is the same as standard co-payment for meal expenses	• Sickness and injury allowance • Lump-sum birth allowance, etc.	9.50% (national average)	16.4% of benefit expenses (16.4% for Support coverage for the late-stage elderly)															
	Society-managed Health Insurance	29,951 [15,722] 14,228								Same as above (with additional benefits)	Different among health insurance associations	Fixed amount (subsidy from budget)												
	The insured under Article 3-2 of the Health Insurance Act	17 [11] 6											• Sickness and injury allowance • Lump-sum birth allowance, etc.	Per day Class 1: ¥360 Class 11: ¥3,070	16.4% of benefit expenses (16.4% for Support coverage for the late-stage elderly)									
Seamen's Insurance	Japan Health Insurance Association	141 [61] 80 (March 2009)	Before reaching compulsory education age 20%	70 or older but younger than 75 20% (*) (30% for persons with more than a certain level of income) (*) For those aged 70 or older but younger than 75, co-payment remains 10% for the period between April 2008 and March 2012	• Per-household standard amount If more than one person younger than 70 pay ¥21,000 or more in a single month, per-household standard amount is added to the benefits paid • Reduced payment for multiple high-cost medical care For persons who have received high-cost medical care three times within a twelve-month period, the maximum co-payment of the fourth time and up will be reduced to: (Persons younger than 70) (High income) ¥83,400 (General) ¥44,400 (Low income) ¥24,600 (Persons aged 70 or older with general or more than a certain level of income (**)) ¥44,400 • Reduced payment for persons receiving high-cost medical care for a long period Maximum co-payment for patients suffering from hemophilia or chronic renal failure requiring dialysis, etc.: ¥10,000 (high-income patients younger than 70 receiving dialysis: ¥20,000) (*) For persons with general income aged 70 to 74, maximum co-payment remains ¥44,400 (¥12,000 for outpatient medical care), thus reduction for multiple high-cost medical care does not apply. (Unitary high cost medical/long-term care benefit system) Reduced payment for persons whose total co-payments of health care and long-term care insurances for a year (from August to June every year) is extremely high. Maximum co-payment is determined carefully according to their income and age.	Same as above	Same as above	Same as above (with additional benefits)	-	-	-	43% of benefit expenses, etc. 32.55% of benefit expenses, etc. None												
National public employees	20 mutual aid associations	9,118	Municipalities 1,723 NHI associations 165 Municipalities 35,665 NHI associations 3,433										Same as above	Same as above	Same as above	Same as above	-	-	-	-	-	-		
Local public employees, etc.	62 mutual aid associations	[4,465] 4,653																					Private school teachers/staffs	1 Corporation
Farmers, self-employed, etc.	Municipalities 1,723 NHI associations 165	39,098		Retired persons under Employees' Health Insurance	Municipalities 1,723	-	-	-	-	-	-	-												
Late-stage medical care system for the elderly	[Implementing bodies] Wide area unions for the late-stage medical care system for the elderly	13,894	10% (30% for persons with more than a certain level of income)										Maximum co-payment Outpatient (per person) (Persons with more than a certain amount of income) ¥80,100 + (medical fee - ¥267,000) × 1% ¥44,400 (Multiple high-cost medical care) ¥44,400 (General) ¥44,400 ¥12,000 (Low income) ¥24,600 ¥8,000 (Extremely low income) ¥8,000 ¥8,000	Same as above except for • Recipients of old-age Welfare Pensions Per meal ¥100	• Funeral expenses, etc.	Calculated using the amount of the per capita rate and income ratio of insured persons provided by wide area unions	• Premium Approx. 10% • Support coverage Approx. 40% • Public funding Approx. 50% (Breakdown of public funding) National: Prefectural: Municipal 4 : 1 : 1							

- (Note) 1. Insured persons of the late-stage medical care system for the elderly includes those aged 75 or older or 65-75 certified as having a specific disability by a wide area union.
2. Persons with a certain amount of income include those with a taxable income of ¥1.45 million (monthly income of ¥280,000) or more, those in households of two or more elderly with a taxable income of ¥5.20 million, and those of a single elderly household with a taxable income of ¥3.83 million. Persons with a higher income are considered to be those with a monthly income of ¥530,000 or more (annual income of more than ¥6 million for NHI). Persons with a low income are considered to be those who belong to a municipal-tax exempt household. Persons with an extremely low income are considered to be those with a pension income of ¥800,000 or less, etc.
3. Fixed-rate national subsidy for National Health Insurance shall be at the same level as that for the Japan Health Insurance Association-managed Health Insurance for those exempt from application of Health Insurance and that newly subscribed to the National Health Insurance on and after September 1, 1997 and their families.
4. The numbers of Health Insurance subscribers are preliminary figures. The sums in the breakdown may not equal the total due to rounding.
5. National subsidy rate for the Japan Health Insurance Association (general insured persons and insured persons under item 2, Article 3 of the National Health Insurance Act) is 16.4% for the period between July 2010 and FY 2012.

Detailed Data

**Provision of Unitary High-Cost Medical/Long-Term Care Benefits
(Enforced in April 2008, provision commenced gradually from August 2009)**

<Reduced co-payments for households receiving both medical and long-term care services>

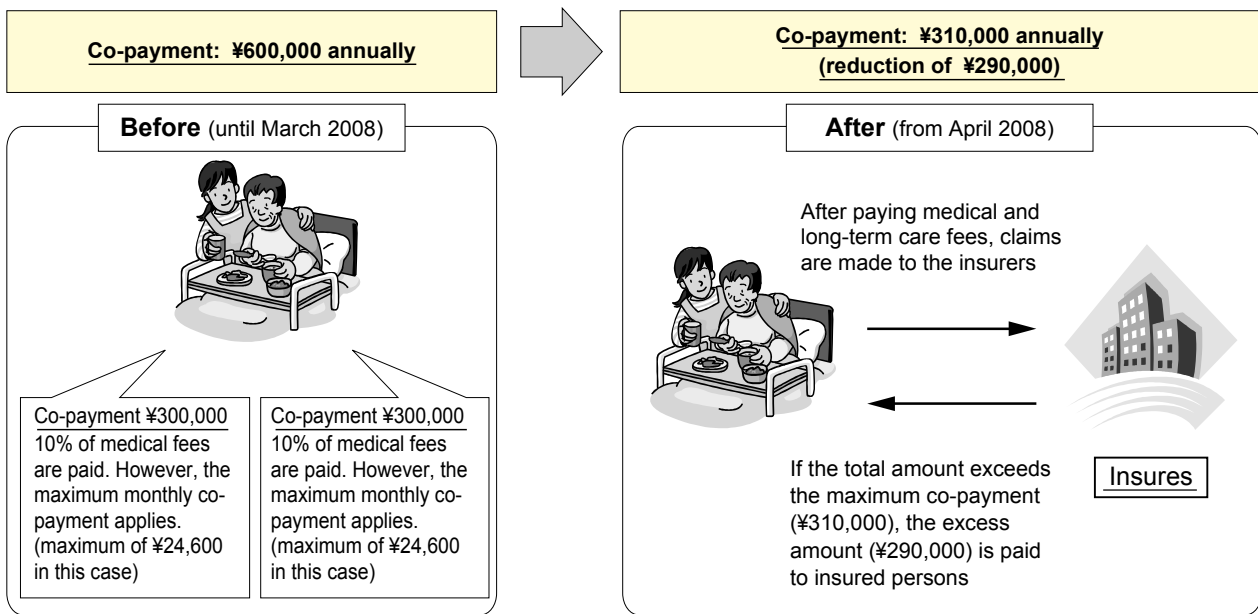
- Conventional maximum monthly co-payment is individually set for health care insurance and long-term care insurance systems
- In addition to these limits, new maximum co-payment is also set for the total annual co-payments for both systems

- * Maximum co-payment is set carefully according to age and income levels.
- * Diet/residence expenses need to be paid separately.

Reference case of the unitary high cost medical/long-term care system

○ Household with a husband receiving medical services and a wife receiving long-term care services, both 75 or older (exempted from residence tax)

- (Medical care services) Being hospitalized (*)
- (Long-term care services) Using multifunctional long-term care in a small group home
- (Pension income) ¥2.11 million or less for a couple



(*) In case of being hospitalized in long-term care beds, hospital meal/living expenses and bed surcharges, etc. need to be paid separately (same as the current high cost medical care system, etc.)