

**For Persons aged 75+  
65+ who are certified  
as being disabled**

**— Preventing the spread of COVID-19  
and other infectious diseases —**

Please be careful to prevent infections by practicing cough etiquette, washing hands, and avoiding crowded places. The basic measures against COVID-19 and other infectious diseases are hand washing and cough etiquette (including wearing face masks).

# Medical Care System for Elderly People



The Medical Care System for Elderly People covers persons aged 75+ and 65+ who are certified as being disabled.

The program is designed to support medical care for elderly people with the cooperation of all generations. Thank you for your understanding.

The Wider-Area Union for the Medical Care  
System for Elderly People in Osaka Prefecture

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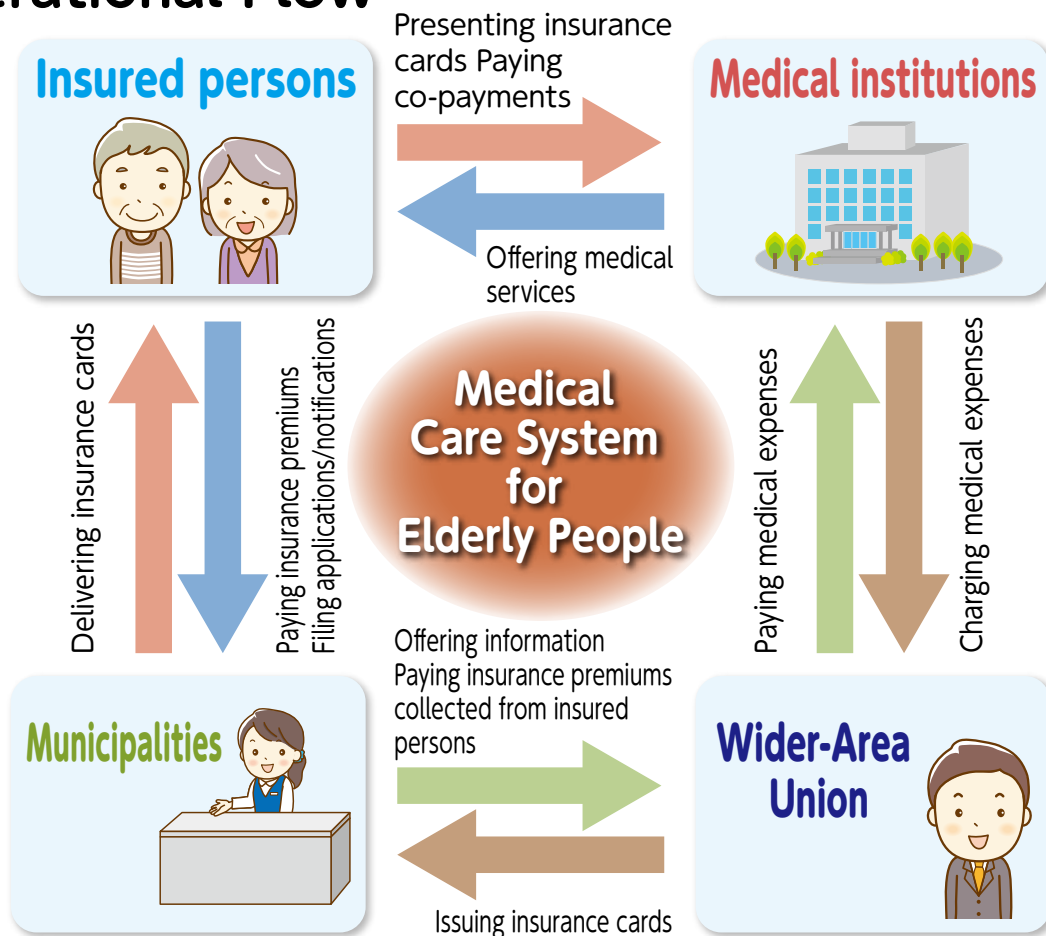
In Osaka Prefecture, the Medical Care System for Elderly People is operated by the Wider-Area Union for the Medical Care System for Elderly People in Osaka Prefecture (the Wider-Area Union), comprising all municipalities within Osaka Prefecture.

Meanwhile, each municipality offers various counter services, such as the acceptance of applications and notifications.

Wider-Area Union	Municipalities
<p>Operates the Medical Care System for Elderly People</p> <ul style="list-style-type: none"> <li>● Authorizes eligibility status for the medical care program and certifies insured persons</li> <li>● Issues insurance cards and related certificates</li> <li>● Determines the amounts of insurance premiums</li> <li>● Provides various medical and other related benefits</li> <li>● Implements various healthcare programs, including medical examinations</li> </ul>	<p>Collect insurance premiums and provide various counter services, such as the acceptance of applications and notifications</p> <ul style="list-style-type: none"> <li>● Collect insurance premiums</li> <li>● Deliver and collect insurance cards and related certificates</li> <li>● Accept notification regarding acquisition/loss of eligibility</li> <li>● Offer consultation services on the program</li> </ul>

# Operational Flow and Financial Sources

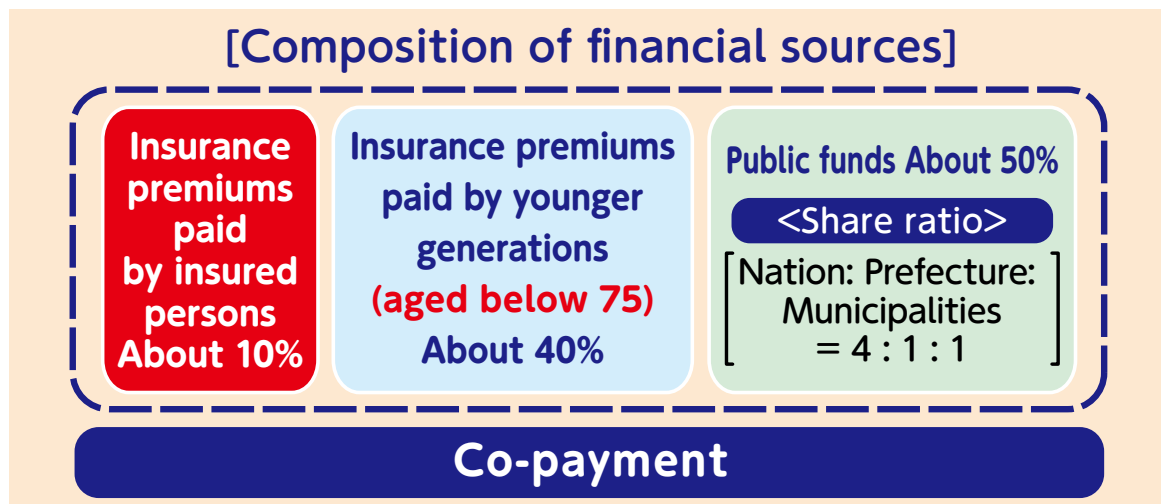
## Operational Flow



## Financial Sources

### The Whole Society Supports Medical Expenses for the Elderly

The Medical Care System for Elderly People is the scheme under which the whole nation supports medical care for the people aged 75 and over. The expense of medical care, from which the co-payment portion is excluded, is paid out of public fund, financial support from the younger generations (people aged below 75), and insurance premium paid by insured persons.



# Persons to Be Insured

Who will be insured by this program?		When to start?
①	Persons aged 75 or over	On their 75th birthday
②	Persons aged 65 - 74, who filed an application and are certified as being disabled by the Wider-Area Union	On the day of certification by the Wider-Area Union

## ① Persons aged 75 or over

Basically, all persons aged 75+ are insured, regardless of the types of medical insurance programs they were previously covered, by the Medical Care System for Elderly People.

\* Note, however, that welfare recipients are not covered.

### ○ To those who had enrolled in medical insurance programs other than National Health Insurance

When the persons previously covered by employee's health insurance or their dependents enroll in the Medical Care System for Elderly People, they must submit a notification regarding the loss of eligibility for the employee's health insurance. The notification must be submitted to the municipal office through the place of employment.

In such a case, dependent family members aged below 75 need to enroll in the National Health Insurance or similar other programs. If this is applicable to your case, please take the necessary procedures at your local municipal office. For details about the procedures, please contact the division in charge at your local municipal office.

## ② Persons aged 65 - 74, who filed an application and are certified as being disabled by the Wider-Area Union

Persons aged 65 - 74 having a specific disability can enroll in the Medical Care System for Elderly People by filing an application (disability certification).

### ○ To those who are intending to receive disability certification

#### Eligibility for disability certification

- Recipients of the disability pension (classes 1, 2) based on the National Pension Act
- Holders of physical disability certificates (classes 1, 2, 3 and part of class 4)
- Holders of mental disability certificates (classes 1, 2)    ● Holders of intellectual disability certificates (class A)

#### <Necessary items for filing an application>

- National pension certificate, certificate of physical disability, etc.
- Documents regarding your Individual Number ( "My Number" ) (For details, see page 27.)

Those who have once received disability certification **can withdraw from the Medical Care System for Elderly People** until they are 75 years old **by submitting a notification of withdrawal**. Withdrawal comes into effect from the day following the submission date. If you switch to another social insurance plan, submit a notification of withdrawal before the date of your enrolment in the new insurance. Withdrawal does not mean loss of physical or other disability certificates or loss of eligibility for disability pensions. **Those who have become ineligible for the disability certification after receiving the certification are required to submit a notification for loss of eligibility**. For details about the procedure, please consult the division in charge at your local municipal office.

If persons covered by the Medical Care System for Elderly People in one prefecture move into another prefecture, they will basically need to enroll in the program operated by the Wider-Area Union of that prefecture. If such a change in residence results from admission to nursing homes, long-term hospitalization or similar reasons, the persons will continue to be covered by the Wider-Area Union for the Medical Care System for Elderly People in Osaka Prefecture. In addition, if persons who enroll in the Medical Care System for Elderly People by the above ① or ② after April 1, 2018 have addresses in nursing homes or hospitals in other prefectures and had enrolled in the National Health Insurance Program of Osaka Prefecture, they will be covered by the Wider-Area Union for the Medical Care System for Elderly People in Osaka Prefecture. (Special residence regulation)

# Insurance Card

## ① Insurance card

One card is issued to each insured person. To receive medical treatment at a medical institution, insured persons must be electronically authenticated or present this card to the institution. (The medical institution may require you to present a photo ID, such as a driver's license, along with your insurance card if the institution determines that it is necessary.)

## ② Expiration date

As a general rule, the insurance card is valid until July 31 every year. The color of the insurance card will be changed at the time of renewal. The new insurance card is delivered by late July, which can be used from the day of arrival. (When you become insured by turning 75 years old, it will be effective from your birthday.)

## ③ Old insurance card

The old insurance card cannot be used after August 1 every year. We ask you to visit the local municipal office to return it or to destroy it by yourself.

後期高齢者医療被保険者証									
有効期限 令和 4 年 7 月 31 日									
交付年月日 令和〇〇年〇〇月〇〇日									
被保険者番号	〇 〇 〇 〇 〇 〇 〇 〇								
住所	△ △ 市 △ △ 町 △ △ 丁目 △ 番 △ 号								
氏名	広域 太郎								
生年月日	□ □ 〇 〇 年 〇 〇 月 〇 〇 日								
資格取得年月日	□ □ 〇 〇 年 〇 〇 月 〇 〇 日								
発効期日	□ □ 〇 〇 年 〇 〇 月 〇 〇 日								
一部負担金の割合	〇割								
保険者番号並びに保険者の名称及び印	<table border="1"> <tr> <td>×</td><td>×</td><td>×</td><td>×</td><td>×</td><td>×</td><td>×</td><td>×</td> </tr> </table> 大阪府後期高齢者医療広域連合 電話：06-4790-2028 <div style="border: 1px solid red; padding: 2px; display: inline-block;">印</div>	×	×	×	×	×	×	×	×
×	×	×	×	×	×	×	×		

\* If you turn 75 years old, your insurance card is to be delivered in the previous month of your birthday. After the 75th birthday, you will not be able to use any insurance card issued by the National Health Insurance Program, employee's health insurance program or others by which you had been covered previously. Please check with the issuer regarding the handling of the old insurance card.

## Notice

- Upon receipt of an insurance card, please check the information written on the card. If you find any errors, please ask for correction at the division in charge at your local municipal office.
- Never use another person's insurance card. (You will be punished by law.)
- You cannot use copies of your insurance card.
- Ask for reissue, if necessary.  
If you lose or accidentally destroy the card, ask the local municipal office to reissue the card.
- If any change in your co-payment rate, your address or other important matters has been made, a new insurance card that carries the revised information will be delivered. Please be sure to use the new insurance card.  
When you receive the new card, please return the old one to the division in charge at your local municipal office.
- If you move into another prefecture, please return your insurance card.  
Upon loss of eligibility due to moving into another prefecture, please return your insurance card immediately to the division in charge at your local municipal office.



# Insurance Card

## ■Section for Indicating Intention to Donate Organs

According to a revision of the Act on Organ Transplantation, national and local public authorities are required to take measures for education and diffusion of knowledge concerning medical transplantations, and as a result, the "Section for indicating intention to donate organs" has been added to health insurance cards, driver's licenses, etc. starting in July 2010.

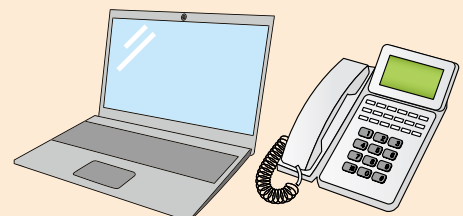
The Wider-Area Union for the Medical Care System for Elderly People in Osaka Prefecture has included a section for indicating intention to donate organs on the back of its insurance card to promote better understanding of medical transplantation. We would like to ask for your understanding and support.

### ◎Indication of intention to donate organs

- Whether or not to indicate intention to donate organs is left to the judgment of each insured person and therefore we do not require you to fill out that section. Furthermore, whether you fill out the section and what you fill in do not affect the contents of treatment, etc.
- There is no age limit for indicating intention to donate organs. Anyone, including old persons and those on medication due to illness, can fill out the section. Organs have previously been donated by persons in their 70s. However, there is a possibility that those who die of cancer or other specific illness cannot donate their organs. Whether organs can be donated or not is judged by medical tests after extraction of organs.
- Organs are donated on a bona fide basis and without compensation. Donors do not have to bear any costs regarding donation.
- For those who would like to keep the contents of their intention confidential, stickers to hide the section are provided at the counter in charge of the Wider-Area Union for the Medical Care System for Elderly People in Osaka Prefecture and the local municipal offices. (In cases where the insurance card is mailed, a sticker is enclosed.)

For details of organ donation,  
please contact the Japan Organ Transplant Network.

Japan Organ Transplant Network  
Toll-free: 0120-78-1069  
Website: <https://www.jotnw.or.jp>



## ◎How to fill out the section



### ①Selecting intention

Please circle only one number in accordance with your intention.

- If you intend to donate your organ(s), please circle 1 or 2.  
⇒ To ②, ③ and ④
- If you do not intend to donate your organ(s), please circle 3.  
⇒ To ④

①

②

③

④

#### 注 意 事 項

- 1 この証は、大切に保管してください。
- 2 保険医療機関等において診療を受けようとするときは、電子資格確認を受けるか、この証を窓口で渡してください。

備考

※ 以下の欄に記入することにより、臓器提供に関する意思表示することができます。記入する場合は、1から3までのいずれかの番号を○で囲んでください。

1. 私は、脳死後及び心臓が停止した死後のいずれでも、移植の為に臓器を提供します。
2. 私は、心臓が停止した死後に限り、移植の為に臓器を提供します。
3. 私は、臓器を提供しません。  
《1又は2を選んだ方で、提供したくない臓器があれば、×をつけてください。》

【心臓・肺・肝臓・腎臓・<sup>じん</sup>膵臓・<sup>すい</sup>小腸・眼球】  
〔特記欄：〕

署名年月日： 年 月 日

本人署名(自筆)：

家族署名(自筆)：

### ②Selecting organs that you do not want to donate

If you circled 1 or 2 and you do not want to donate any particular organs, mark with a × the organs that you do not want to donate.

Organs that you can donate are as follows:

[ After brain death: heart, lung, liver, kidney, pancreas, small intestine and eyeball ]

[ After heart stoppage: kidney, pancreas and eyeball ]

### ③Filling out the special note section

- If you circled 1 or 2 and intend to donate other tissues such as skin, cardiac valve, blood vessel and bone, you can write "All" or name specific organ(s), such as "skin," "cardiac valve," "blood vessel" and "bone."
- If you want to donate your organs preferentially to a relative, you can write "Give preference to my relative."

(Since some requirements are necessary to donate your organs preferentially to a relative, your organs may not necessarily be transplanted to the relevant relative.)

### ④Signature, etc.

Please sign your name and write the date of signature by yourself. If possible, please have one of your family members who knows your intention to donate your organs sign his/her name for confirmation.

# Insurance Premiums

## ■ Method of Calculating Insurance Premiums

An insurance premium is charged to each insured person, and consists of the per capita amount and income ratio amount. The former comprises a fixed amount to be paid by all insured persons; the amount of the latter is determined based on the income of respective insured persons.

The Wider-Area Unions of respective prefectures determine insurance premium rates every other year by ordinances. Within Osaka Prefecture, insurance premium rates are uniform, regardless of the municipality where the insured person lives.

### ◎ Method of calculating insurance premiums (fiscal year 2020 and 2021)

$$\begin{array}{|c|} \hline \text{(*1)} \\ \hline \text{Annual} \\ \text{insurance} \\ \text{premiums} \\ \hline \end{array} = \begin{array}{|c|} \hline \text{Per capita amount} \\ \hline \text{54,111 yen} \\ \hline \text{per insured person} \\ \hline \end{array} + \begin{array}{|c|} \hline \text{Income ratio amount} \\ \hline \text{Assessable income (*2)} \\ \hline \times \text{income ratio } \text{10.52\%} \\ \hline \end{array}$$

\*1 Annual insurance premiums are up to 640,000 yen.

\*2 Assessable income denotes the amount remaining after deducting the basic exemption from the total of net income, forestry income and other separately calculated incomes (stock transfer income, dividend income, property transfer income, etc., subject to separate self-assessed taxation) in the previous year. (Carryforward of casualty loss is not deducted. The amounts for the basic exemption and other items may change due to the revision of tax laws and other applicable laws.)

\*3 The basic exemption is as defined by Paragraph 2, Article 314-2 of the Local Tax Act. (Example: If the total of the previous year's income is 24 million yen or below, the basic exemption is 430,000 yen.)

## Calculation method of major assessable incomes

- 1) Employment income: (Employment revenue – employment income deduction) – basic exemption
- 2) Public pension income: (Public pension revenue – public pension deduction) – basic exemption
- 3) Other incomes: (Revenue – necessary expenses) – basic exemption

\* Insured persons who have multiple income sources can deduct the basic exemption from only one of the sources.

### If you earn public pension income and employment income totaling over 100,000 yen

- An income adjustment deduction will be added to the employment income deduction.

(How to calculate the income adjustment deduction)

**Income adjustment deduction = insurance pension income\* + employment income\* – 100,000 yen**

\* If each of these items exceeds 100,000 yen, an amount of 100,000 yen must be substituted for the actual amount.

<Reference> Example of the calculation of income adjustment deduction

In the case of a public insurance pension income of 1 million yen and an employment income of 1.05 million yen

Employment income deduction: 550,000 yen

Income adjustment deduction = [100,000 yen (upper limit of pension income) + 100,000 yen (upper limit of employment income) – 100,000 yen] = 100,000 yen

How to calculate assessable employment income in the case of employment revenue of 1.6 million yen:

1.6 million yen (employment revenue) – 550,000 yen (employment income deduction) – 100,000 yen (income adjustment deduction) = 950,000 yen (estimated assessable employment income)



## ■ Reduction of Insurance Premiums

### Per capita amount for insured persons with low incomes (fiscal year 2021)

The per capita insurance premium will be reduced by any of the following rates in accordance with the income level of an individual household.

Income level (Level of the total net income of all insured persons within a household including the householder)	Per capita income reduction rate	Annual per capita amount after reduction for fiscal year 2021
Total income amount equal to or lower than [basic exemption (430,000 yen) + 100,000 yen × (number of persons with employment income* – 1)]	<b>70%</b>	<b>16,233 yen</b>
Total income amount equal to or lower than [basic exemption (430,000 yen) + 285,000 yen × (number of insured persons) + 100,000 yen × (number of persons with employment income* – 1)]	<b>50%</b>	<b>27,055 yen</b>
Total income amount equal to or lower than [basic exemption (430,000 yen) + 520,000 yen × (number of insured persons) + 100,000 yen × (number of persons with employment income* – 1)]	<b>20%</b>	<b>43,288 yen</b>

\* The number of persons with employment income denotes the number of insured persons including the householder who fall under any of the following conditions within a household that has two or more members.

- (1) Persons with employment and other revenues of over 550,000 yen
- (2) Persons aged below 65 with public pension revenue of over 600,000 yen
- (3) Persons aged 65 or over with public pension revenue of over 1,250,000 yen

\* Reduction rates will be determined based on the household status as of April 1 (if you enrolled in the System on or after April 2, the date of enrollment).

\* The amounts of basic exemption and other items may change, subject to revisions of the tax law and other relevant laws.

\* Special deduction in capital gains and that for family employees is NOT applicable to the calculation of total net income, based on which to determine reduction rates.

\* For the time being, 150,000 yen will be deducted from the income of pensioners (limited to those aged 65+) who have a public pension deduction for their pensions.

\* The reduction rate is determined in accordance with the householder's income, whether or not the householder is insured by the Medical Care System for Elderly People.

\* In fiscal 2021, the regular reduction rate of 70% defined by the applicable government ordinance also applies to households that were eligible for a 77.5% reduction in fiscal year 2020.

### Notify the local municipal office of your income

Since co-payment rates and insurance premium reduction rates are determined in accordance with your income levels, please notify your local municipal office of your income. **Even if you have no income, please notify the office all the same.**



## One Point Q&A

**Q** If I enroll in the Medical Care System for Elderly People during a fiscal year, how much insurance premiums should I pay?

**A** In such a case, insurance premiums will be calculated on a monthly basis, and you have to pay the premiums from the month of your enrollment.

Also, if you lose eligibility for the System during a fiscal year, you will be charged a monthly premium up to one month before your withdrawal.

If you do not know the amount of income due to moving in, etc., the per capita amount will be determined as the insurance premiums. If the amount of income is known by referring to the municipality where you previously lived, etc., the amount will be recalculated and the insurance premiums may change after the next month.

# Insurance Premiums

## Those who were dependent family members

Dependent family members who were covered by the employee's health insurance, mutual aid associations or seamen's insurance programs until the day before the enrollment in the Medical Care System for Elderly People should also pay insurance premiums. **No income ratio amount will be levied for the time being, and 50% of the per capita amount will be reduced for two years after enrollment.**

Income ratio amount	Not levied
Per capita amount	<b>2 years after enrollment 50% reduction</b>

- \* Persons who were covered by the National Health Insurance Program or the National Health Insurance Association Program until the day before the enrollment in the Medical Care System for Elderly People are not eligible.
- \* To former dependent family members in households eligible for a 70% reduction of insurance premiums (see page 8), the per capita reduction rate of 70% applies.

## One Point Q&A

**Q** I heard that dependent family members who were covered by their children's company's employee health insurance until the day before the enrollment in the Medical Care System for Elderly People will have to pay only 50% of the per capita amount as the insurance premiums of the Medical Care System for Elderly People for two years. However, I received a notice of the insurance premiums to which no deduction was applied. Why did I receive such a notice?

**A** Even if you are a dependent family member who was covered by company's employee health insurance, the insurance premiums of the Medical Care System for Elderly People indicated in the first notice you receive is the amount to which no deduction is applied. This is because two to three months are required to confirm the notification of the change (eligibility loss) of dependent family members submitted by the former insurer. As soon as the change is confirmed, the insurance premiums will be reduced and its notification will be sent to you.

If you already paid the insurance premiums by the payment slip enclosed in the first notice, the excess payment will be reimbursed as soon as the fact that you were a dependent family member of company's health insurance is confirmed.

- \* If you request for a notification form regarding dependent family members of employee's health insurance and submit it to the local municipal office, the period to confirm the deduction of insurance premiums will be shortened.



## ■ Example of Calculating Insurance Premiums (fiscal year 2021)

### ◎ Single-person household (revenue comprising pension only)

Pensions	1,530,000 yen	1,680,000 yen	1,965,000 yen	2,200,000 yen	3,000,000 yen
After withdrawing pension deduction	430,000 yen	580,000 yen	865,000 yen	1,100,000 yen	1,900,000 yen
Assessable income	0 yen	150,000 yen	435,000 yen	670,000 yen	1,470,000 yen
Income ratio amount ①	0 yen	15,780 yen	45,762 yen	70,484 yen	154,644 yen
Reduction rate of per capita amount	70% reduction	70% reduction	50% reduction	20% reduction	
Per capita amount after reduction ②	16,233 yen	16,233 yen	27,055 yen	43,288 yen	54,111 yen
Total insurance premiums ①+②	16,233 yen	32,013 yen	72,817 yen	113,772 yen	208,755 yen

\* Each of the premiums shown is an annual amount.

\* The above amounts have been calculated using 54,111 yen as the per capita amount and 10.52% for income ratio.

\* Fractions below 1 yen have been rounded down for both per capita amount and income ratio amount.

#### [Reference]

Example of income ratio amount calculation (When pension revenue is below 3.3 million yen)  
 $(\text{Pension revenue} - 1.1 \text{ million yen} - 430,000 \text{ yen}) \times 10.52\%$   
 (Public pension deduction) (Basic exemption) (Income ratio)

\* For public pension deduction, please refer to the table below.

\* Bereaved family pensions and other nontaxable pensions are excluded from the amount of revenue based on which insurance premiums are determined.

Public pensions	Public pension deduction
Below 3.3 million yen	1.1 million yen
3.3 million yen – below 4.1 million yen	Public pensions $\times$ 0.25 + 275,000 yen
4.1 million yen – below 7.7 million yen	Public pensions $\times$ 0.15 + 685,000 yen
7.7 million yen – below 10 million yen	Public pensions $\times$ 0.05 + 1,455,000 yen
10 million yen or above	1,955,000 yen

\* The public pension deductions in the table above are for pension recipients aged 65 or over as of December 31 of the year they received the pension, who had a total income of 10 million yen or less excluding miscellaneous income from public pensions.

# Insurance Premiums

◎ Two-person household of wife and husband who are both aged 75 or over (revenue comprising pension only)

● For wife's pension, the amount of basic pension (780,000 yen) is used.



Pensions			Husband	1,530,000 yen	1,680,000 yen	2,250,000 yen	2,720,000 yen	3,000,000 yen
			Wife	780,000 yen	780,000 yen	780,000 yen	780,000 yen	780,000 yen
After withdrawing pension deduction			Husband	430,000 yen	580,000 yen	1,150,000 yen	1,620,000 yen	1,900,000 yen
			Wife	0 yen	0 yen	0 yen	0 yen	0 yen
Income ratio amount	Assessable income		Husband	0 yen	150,000 yen	720,000 yen	1,190,000 yen	1,470,000 yen
			Wife	0 yen	0 yen	0 yen	0 yen	0 yen
	Income ratio amount	①	Husband	0 yen	15,780 yen	75,744 yen	125,188 yen	154,644 yen
			Wife	0 yen	0 yen	0 yen	0 yen	0 yen
Per capita amount	Reduction rate of per capita amount			70% reduction	70% reduction	50% reduction	20% reduction	
	Per capita amount after reduction	②	Husband	16,233 yen	16,233 yen	27,055 yen	43,288 yen	54,111 yen
			Wife	16,233 yen	16,233 yen	27,055 yen	43,288 yen	54,111 yen
Total insurance premiums ①+②			Husband	16,233 yen	32,013 yen	102,799 yen	168,476 yen	208,755 yen
			Wife	16,233 yen	16,233 yen	27,055 yen	43,288 yen	54,111 yen
			Total	32,466 yen	48,246 yen	129,854 yen	211,764 yen	262,866 yen

\* Each of the premiums shown is an annual amount.

\* The above amounts have been calculated using 54,111 yen as the per capita amount and 10.52% for income ratio.

\* Fractions below 1 yen have been rounded down for both per capita amount and income ratio amount.

## ■ How to Pay Insurance Premiums

Please pay insurance premiums to your local municipality office.

As a general rule, insurance premiums are collected by the special payment method (automatically collected from public pensions).

### Special payment method

- Persons annually receiving 180,000 yen or above as public pensions\*.
- Persons whose long-term care insurance premiums have been collected by the special payment method, and whose total amount of the premiums for the Medical Care System for Elderly People and those for long-term care insurance does not exceed 1/2 of the amount of public pensions\* subject to the special payment method.

\* For those who receive multiple kinds of pensions, the amount of pension with the highest priority determined by Cabinet Order.

● The premiums will be automatically collected from the public pensions provided six times a year.

April (1st term)	June (2nd term)	August (3rd term)	October (4th term)	December (5th term)	February (6th term)
Provisional collection			Finalized collection		
Until the income of the previous year is finalized, insured persons will be required to pay the insurance premiums provisionally calculated based on the insurance premiums of the previous year.			Insured persons are required to pay the finalized amount of insurance premiums (after deducting the provisionally collected amount) in three installments.		

\* In some municipalities, the amount for the provisional collection of premiums in the first term may differ from those for the second- and third-term provisional collections.

### Ordinary payment method

- Persons to whom the special payment method is not applied.
- Persons who have just turned 75 years old or have just moved in.  
(They have to pay insurance premiums by the ordinary payment method for a certain period until the special payment starts.)

● Payment should be made by account transfer or with the payment notice sent from your local municipality office.

Please note that information about the transfer account used to pay the National Health Insurance premium (tax) will not be inherited. You need to newly apply for the account transfer.

Please ask how to file an application at the division in charge at your local municipal office.

- You may select account transfer instead of the special payment method by filing an application. If you desire to pay through account transfer instead of the special payment method (when you have been paying the insurance premiums by the special payment method or you have been notified of the start of the premium payment by the special payment method), your payment method can be changed after you file an application. The time to stop the payment by the special payment method is determined according to the time of the application. Please ask how to file an application at the division in charge at your local municipal office.

\* Changes may not be accepted due to past payment status or other reasons.

\* If you fall behind in the payment several times after selecting account transfer, you may be required to pay with the special payment method again.



# Insurance Premiums

## Example of Determining Insurance Premiums Payment Method

Mr. A receives the Old-Age Basic Pension (0.78 million yen) and the Old-Age Employees' Pension (2.0 million yen; total 2.78 million yen) and has income from real estate (1.2 million yen). His premiums for long-term care insurance (140,000 yen/year\*) are automatically collected from his pensions.

\* Premiums for long-term care insurance differ depending on the municipality you live in.



- ① Based on the pension revenue of 2.78 million yen and real estate income of 1.2 million yen, Mr. A's insurance premiums for the Medical Care System for Elderly People amounts to 311,851 yen.
- ② Mr. A receives two types of annual pensions, both exceeding 180,000 yen. Since the Old-Age Basic Pension has the highest priority among the pensions subject to the special payment method, payment method (special payment method or ordinary payment method) is determined based on the Old-Age Basic Pension.
- ③ To determine the payment method, the amount of the Old-Age Basic Pension (0.78 million yen) is compared with the total of the insurance premiums for the Medical Care System for Elderly People and the premiums for long-term care insurance (total: 451,851 yen).

**451,851 yen**

(premiums for the Medical Care System for Elderly People + premiums for long-term care insurance)

>

**390,000 yen**

(Old-Age Basic Pension [780,000 yen] × 1/2)



**Result: Ordinary payment method will be applied to Mr. A.**

### — Deduction for Social Insurance Premiums —

Those who have paid insurance premiums for the Medical Care System for Elderly People may receive deduction for social insurance premiums at the time of income tax/individual residence tax filing. By this, the amounts of income tax and individual residence tax for the whole household may change.

Regarding details in income tax filing, please contact the relevant tax office, while regarding details in individual residence tax filing, please contact the relevant municipal office.



## ■ Insurance Premiums Exemption/ Reduction and Postponing of Collection

If the insured persons or their joint guarantors\* are certified as being unable to pay part or all of the insurance premiums for reasons specified below (❶ to ❸), part of their insurance premiums may be exempted, or reduced up to the amount that they are unable to pay.

If the insured persons or their joint guarantors are certified as being unable to pay part or all of the insurance premiums for the same reasons as above, their payment of the portion they are unable to pay may be postponed by up to one year.

For details, please consult the division in charge at your local municipal office.

\* Joint guarantors: Either the householders of the insured persons or spouses of the insured persons

- ❶ The insured persons' houses, household goods or other properties have been significantly damaged by an earthquake, storm, fire or other similar disasters.
- ❷ The revenue of either the insured persons or their joint guarantors has remarkably diminished due to failure, suspension or closing of their businesses, or loss of their jobs.
- ❸ The insured persons are detained at a prison or similar facility.

## ■ What Happens if I Fall behind in Paying Insurance Premiums?

- When you are behind on a payment, a reminder notice will be delivered to you based on relevant laws.  
Delinquent charge may be added to ensure fairness for those who made payment by the deadline.
- If you continually fall behind in paying premiums, you will receive a demand for payment by phone or mail, or in person. In addition, you may be subject to enforcement measures, and your property, such as pension benefits, deposits and savings, salaries, and real estate, may be confiscated after a property inspection.
- If you continue falling behind in paying without exceptional circumstances that make payments difficult, a short-term insurance card (which expires earlier than an ordinary insurance card) will be issued to you.
- If premiums are past due for one year, the individual's insurance card may have to be returned and replaced with an Eligibility Certificate for the Insured.  
If you receive medical treatment by presenting your Eligibility Certificate for the Insured, you must pay the full amount (100%) at one time.
- If premiums are unpaid for one year and a half without any specific reason, part or all of the insurance benefits may be suspended.



Therefore, please pay premiums before the due date.

If you find it difficult to pay the insurance premiums, consult the division in charge at your local municipal office at the earliest possible occasion.

# Medical Treatments

## ■ Co-payment Rates of Medical Expenses

Ordinary insured persons

10%

Persons with more than a certain amount of income

30%

The co-payment rates of medical expenses is 10% for ordinary insured persons, and 30% for persons with more than a certain amount of income. Your co-payment rate, 10% or 30%, for April to July is determined based on your residence-tax taxable income in the previous fiscal year, while that for August to next March is determined based on your residence-tax taxable income in the reference fiscal year. \* Determination based on the income of the reference fiscal year is made on August 1 every year.

Even before the expiration date, your co-payment rate is subject to change due to changes in the composition of your household, adjustments of your assessable income, or other circumstances. Accordingly, you may be charged or reimbursed for the 20% difference later.

### ◎ The persons with more than a certain amount of income

Insured persons in the Medical Care System for Elderly People, whose residence tax taxable income (income after various deductions) is 1.45 million yen or more, and all other insured persons who belong to the same households should pay 30% as the persons with more than a certain amount of income.

If the total of assessable income (see \*2 on page 7) of insured persons born on or after January 2, 1945 and the insured persons who belong to the same households is 2.1 million yen or lower, the co-payment rate would be 10%.

### Your co-payment rate may be changed from 30% to 10%

Even if you are certified as being a person with more than a certain amount of income, if you satisfy the conditions stated below, you can file an application to your local municipal office to change your co-payment rate to 10% from the following month of the application.

- If there is only one insured person in the same household
  - When the amount of revenue\* of the insured person is less than 3.83 million yen
- If there are more than one insured person in the same household
  - When the total amount of revenue of the insured persons is less than 5.2 million yen
- If there is only one insured person in the same household, and is/are a person(s) aged between 70 and below 75 in the same household
  - When the amount of revenue\* of the insured person is 3.83 million yen or more, and the total amount of the revenue of the insured person and other family member(s) aged between 70 and below 75 is less than 5.2 million yen.

\* "Amount of revenue" means the sum of the amount that should be included in revenue when calculating the amount of various incomes (excluding retirement income) that are stipulated in the Income Tax Act. The amount of revenue is the amount before withdrawing public pension deduction and necessary expenses, not the amount of income. Even when your income is zero or negative after subtracting necessary expenses and/or the special exemption, you should calculate your revenue by totaling up all revenues notified in your final return. (However, if you have chosen not to notify your income from dividends on and/or transfer of listed shares concerning the individual residence tax, this will not be included.)  
(e.g., operational revenue, termination amount of life insurance, sell-out price of listing shares etc. for which separate taxation is applied by filing a final tax return)

<Necessary items for filing an application>

- Application form
- Documents indicating the amount of revenue
- Insurance card

## ■ High-Cost Medical Care Benefit

If you have paid significantly high medical expenses in a single month (exceeding the specified monthly cap for co-payment), you will be reimbursed by the amount exceeding the cap for co-payment after filing an application for High-Cost Medical Care Benefit.

For co-payment at a single medical institution, outpatients need to pay up to the co-payment cap on the basis of each individual and inpatients need to pay up to the co-payment cap on the basis of each household. However, dental/non-dental and hospitalization/outpatient treatments will be calculated separately.

The meal fees at the time of hospitalization and the room charges not covered by insurance are not included in the calculation.

Income-based Category		Monthly Cap for Co-payment	
		Outpatient (on the basis of an individual)	Outpatient + inpatient (on the basis of a household)
Persons with more than a certain amount of income	Assessable income 6.9 million yen or more	252,600 yen + 1% <sup>(*)1</sup> (140,100 yen <sup>(*)4</sup> )	
	II Assessable income 3.8 million yen or more	167,400 yen + 1% <sup>(*)2</sup> (93,000 yen <sup>(*)4</sup> )	
	I Assessable income 1.45 million yen or more	80,100 yen + 1% <sup>(*)3</sup> (44,400 yen <sup>(*)4</sup> )	
Ordinary insured persons		18,000 yen (Up to 144,000 yen per year)	57,600 yen (44,400 yen <sup>(*)4</sup> )
Low-income class <sup>(*)5</sup>	II	8,000 yen	24,600 yen
	I		15,000 yen

\*1 "1%" means the amount equivalent to 1% of the excess when medical expense exceeds 842,000 yen.

\*2 "1%" means the amount equivalent to 1% of the excess when medical expense exceeds 558,000 yen.

\*3 "1%" means the amount equivalent to 1% of the excess when medical expense exceeds 267,000 yen.

\*4 This is the monthly cap to be paid on the fourth time and after, when the household had received high-cost medical care benefit three times or more in one year from the month when the insured person used high-cost medical care. (Number of times of benefit of other medical insurance is not included.)

\*5 For the description of low income classes II & I, see page 17.

For insured persons with a co-payment rate of 10% as of the reference date (the last day of the calculation period), the co-payment amount for each month when their co-payment rate was 10% within the calculation period of one year (August 1 to July 31 of the following year) will be added up (excluding the high-cost medical care benefit already provided), and when the amount exceeds 144,000 yen, the excess amount will be refunded at a later date.

[Persons with more than a certain amount of income II & I]

Persons with more than a certain amount of income II & I can apply for an Eligibility Certificate for the Application of the Ceiling-Amount. If you obtain the Certificate, present it with your insurance card to the reception at the medical institution to receive medical treatment.

\* The application form for issuance is to be taken to the division in charge at your local municipal office.

[Necessary items for an application for issuing the Eligibility Certificate for Ceiling-Amount Application]

● Insurance card

(Note) If you do not present the certificate at a medical institution, the co-payment cap for "taxable income of 6.9 million yen or more" will be applied, and the difference between "II & I" will be refunded as the high-cost medical care benefit at a later date.

# Medical Treatments

- \* When you are receiving high-cost medical care benefit for the first time, file an application for it to the division in charge at your local municipal office as the Wider-Area Union will send you the application form in or after three months from when you received the medical care.
- \* You do not have to file an application again, as long as your account number and related information remain unchanged.
- \* Provision of information regarding application and reimbursement may be delayed due to late submission of certificates of medical remuneration from medical institutions, re-examination, or other reasons.
- \* Even after you receive the high-cost medical care benefit, the amount of the benefit may be reduced due to re-examination of certificates of medical remuneration or other reasons. In this case, the reduced amount may be deducted from the following benefits or you may be required to repay the reduced amount.

## [Low-income classes II & I]

Insured persons who meet the following conditions can apply for the **Eligibility Certificate for the Application of the Ceiling-Amount and Reduction of the Standard Amount of Patient Liability**.<sup>\*1</sup> If you obtain the Certificate, **present it with your insurance card to the reception at the medical institution to receive medical treatment.**

Low-income class II	Insured person who is in a household where every household member is exempt from residence tax, and who is not categorized in class I
Low-income class I	<ul style="list-style-type: none"><li>• Insured person who is in a household whose members are all exempt from residence tax and have zero income<sup>*2</sup> (A public pension deduction of 800,000 yen is included in the calculation.)</li><li>• Insured person who is in a household where every household member is exempt from residence tax, and receives Old-Age Welfare Pensions</li></ul>

- \* For the judgment of low-income classes II and I, periodical judgment shall be conducted based on the income and taxation situation of total household members as of August 1 every year. The judgment may be changed due to changes of household composition and correction of income besides the periodical judgment. The income subject to the judgment is the taxable situation of the residence tax of the previous fiscal year for April to July, and that of the relevant fiscal year for August to next March.
- \* **The application form for issuance is to be taken to the division in charge at your local municipal office.**

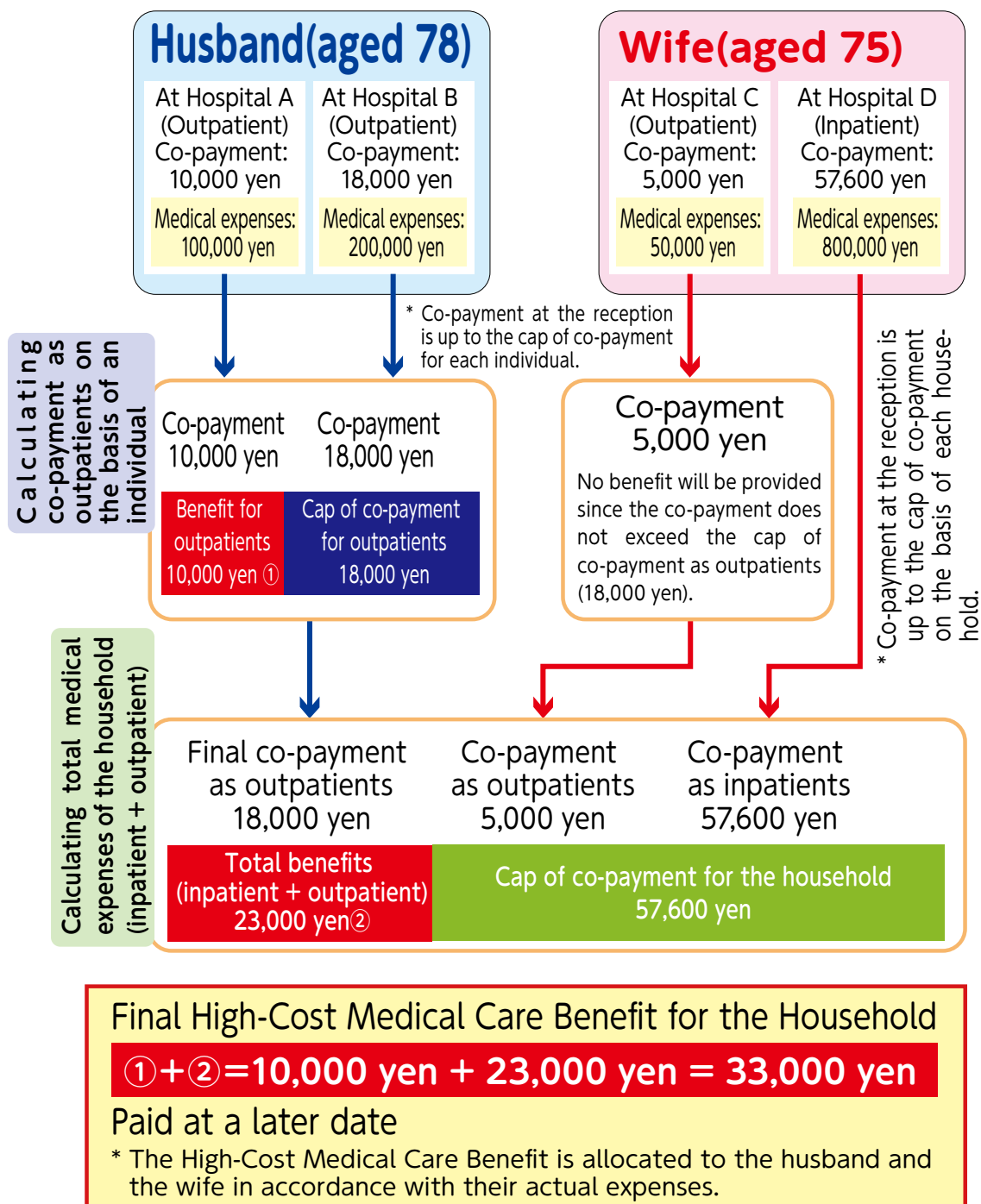
### [Necessary items for an application for issuing the Eligibility Certificate for Ceiling-Amount Application and Reduction of the Standard Amount of Patient Liability]

- Insurance card
- Old-Age Welfare Pension Certificate if you are applying for low-income class I (recipient of Old-Age Welfare Pensions)

- <sup>\*1</sup> If you do not present the certificate at a medical institution, the co-payment cap for "ordinary insured persons" will be applied, and the difference between "II & I" will be refunded as the high-cost medical care benefit at a later date.
- <sup>\*2</sup> From August 2021 on, when insured persons with employment income receive medical treatment, their co-payment amount will be calculated with a 100,000-yen deduction from their employment income.



## Example (in the case of a household whose income-based category is “ordinary”)



## ◎ In your 75-year-old birth month

When you become 75 years old and enroll in the Medical Care System for Elderly People in the month of your 75th birthday, the cap for the co-payment in that month will be halved for the health insurance program you were covered by before your birthday and for the Medical Care System for Elderly People (see page 16).

\* Special amounts in the 75-year-old birth month are applied on the basis of an individual. However, if there is an amount that other insured persons should bear in the same household, the amount will be calculated using the usual household unit cap.

# Medical Treatments

## ■ Hospital Meal Fees

Inpatients must pay the standard meal fees as shown below.

Income-based Category		Meal fee (per meal)
Persons with more than a certain amount of income		460 yen
Ordinary insured persons	Designated intractable/rare disease patients <sup>*1</sup>	260 yen
Low-income class II	Hospitalization within 90 days (in the past 12 months)	210 yen
	Hospitalization exceeding 90 days <sup>*2</sup> (in the past 12 months)	160 yen <sup>*3</sup>
Low-income class I		100 yen

\* To receive benefits for low-income classes II & I, "Eligibility Certificate for Ceiling-Amount Application and Reduction of the Standard Amount of Patient Liability" is necessary.

For the description of low income classes II & I, see page 17.

\*1 Those who have been hospitalized continuously for one year or longer in a psychiatric ward as of March 31, 2016 and will continue to be hospitalized in a medical institution will also be eligible for this category.

\*2 It is required that hospitalization period has exceeded 90 days from the day when you are certified as low income class II.

\*3 The price will become 160 yen from the following month of the application date.

### [Necessary items for filing an application]

- Insurance card
- Eligibility Certificate for Ceiling-Amount Application and Reduction of the Standard Amount of Patient Liability
- Any document attesting that hospitalization period has exceeded 90 days (receipt, for instance)

\* The applicant's personal seal will be necessary if a bank account of a person other than the applicant is used for bank transfer and if the applicant does not fill in the application form himself/herself.

## ■ Inpatients Using Long-Term Care Beds

Inpatients using long-term care beds must pay part of the meal fees and room charge.

\* Intractable/rare disease patients will have their fee reduced to the meal fee only. For persons with substantial needs for hospitalization, the meal fee listed above and the room charge will also be applied.

### Standard Meal Fees and Room Charge

Income-based Category		Meal fee per meal	Room charge per day
Persons with more than a certain amount of income		460 yen*1	370 yen
Ordinary insured persons			
Low-income class II		210 yen	
Low-income class I		130 yen	
	Recipients of Old-Age Welfare Pensions	100 yen	0 yen
	Persons on the boundary*2	100 yen	0 yen

\*1 Applied to the case where nutrition management is implemented by Registered Dietician or Dietitian prescribed in the Dietitians Act. For other cases, it is 420 yen.

\*2 A person who does not need welfare stipulated in the provisions of the Public Assistance Act (Act No. 144 of 1950) when this is applied.

## ■ Unitary High-Cost Medical/Long-Term Care System

A household that has to pay co-payment under the Medical Care System for Elderly People and the Long-Term Care Insurance Program respectively can file an application for benefits for overruns beyond the combined annual total of specified annual cap for the co-payment (August to the end of July of the following year; indicated in the table below).

Income-based Category		Annual cap for the co-payment of [Medical Care System for Elderly People + Long-Term Care Insurance Program]
Persons with more than a certain amount of income	Assessable income 6.9 million yen or more	2,120,000 yen
	II Assessable income 3.8 million yen or more	1,410,000 yen
	I Assessable income 1.45 million yen or more	670,000 yen
Ordinary insured persons		560,000 yen
Low-income class	II	310,000 yen
	I	190,000 yen <sup>*1</sup>

<sup>\*1</sup> For households categorized into the low-income class I with more than one person who receives long-term care service, benefit from the long-term care insurance program will be based on the co-payment cap of 310,000 yen (the cap for households categorized into the low-income class II).

### Encouragement to use generic drugs

Generic drugs are drugs sold when original drugs (drugs that have been used) have lost their patent. Generic drugs have been recognized by the government as having the same efficacy and constitution of the original drugs. Since the development period of generic drugs are short and therefore the development costs are low, they are cheaper and more economical than the original drugs.

#### Notes

- Not all original drugs have corresponding generic drugs.
- Some patients cannot switch to generic drugs because, for example, some generic drugs are different in illness to which the relevant drugs are effective (efficacy) from original drugs.
- Some generic drugs are different in color, size, shape, etc. from original drugs.
- Since there is a limit to drugs that a single medical institution or pharmacy can stock regularly, it may take some time to obtain generic drugs.

☆ **If you prefer generic drugs, please ask your doctor or pharmacist.**  
**We recommend generic drugs because they will reduce the burden of medications, improve medical insurance finances, and reduce the increase in insurance premiums.**

# Medical Treatments

## ■ When You Need to Receive High Cost Medical Treatment for a Long Period

For patients with diseases specified by the Ministry of Health, Labour and Welfare, the maximum co-payment of medical expenses is up to 10,000 yen/month per medical institution (total of treatment and medicine costs; counted separately as outpatient and inpatient at one medical institution). However, these fees must be paid normally at the pharmacy and hospital reception.

### [In your 75-year-old birth month]

The maximum co-payment in your 75-year-old birth month is 5,000 yen/month for the Medical Care System for Elderly People.

### [Diseases specified by the Ministry of Health, Labour and Welfare]

- Part of congenital disorders of blood coagulation factor (resulting from Factors VIII or IX)
- Chronic renal failure entailing artificial dialyses
- HIV-infection caused by blood coagulation factor products

To receive the benefit, please present the **Certificate for a Patient with Specified Disease** at the medical institution. To have this certificate issued, please file an application to the division in charge at your local municipal office.

### [Necessary items for filing an application for the Certificate for a Patient with Specified Disease]

- Insurance card
- Medical rehabilitation service coupon or other materials that attest to the applicant being inflicted by a specified disease
- “Certificate for a Patient with Specified Disease” used by the applicant before enrolling in the Medical Care System for Elderly People (if available)

## ■ Traffic Accidents

You can receive medical care under the Medical Care System for Elderly People, should you become injured by a third party in a traffic or other accident. In this case, the Wider-Area Union advances the medical expense temporarily (excluding co-payment), and will charge the third party (perpetrator) with it.

- ① Go to the police and ask for the issuance of an Accident Certificate.
- ② Bring the Traffic Accident Certificate, your personal seal and insurance card to **the division in charge at your local municipal office and follow the procedures for “Notification of Injury or Sickness due to a Third-party Act.”**

### **Precaution** !

If you receive cost of treatment from perpetrator or settle a case out of court, you might not be able to receive medical care by the Medical Care System for Elderly People.

Hence, you are strongly advised to consult with the division in charge at your local municipal office before settling out of court.

## ■ Reimbursement of Medical Expenses (Medical Expense Benefit)

If you pay the full amount of medical expenses as in the cases listed below (①–⑤), and file an application to the division in charge at your local municipal office, part of the expenses (after deducting co-payment) is reimbursed at a later date by the Wider-Area Union, provided that it approves the reimbursement. Your application, however, must be filed within two years from the day after completion of the full-amount payment.

① If you have a compelling reason (acute illness, for instance) for being unable to fetch your insurance card before receiving medical treatment  
\* The Wider-Area Union reimburses only when it certifies that the situation is compelling.

② When you receive treatment by judo therapists due to bruise, ligament rupture, etc.

③ When you receive treatment by acupuncturists, moxibustion practitioners, or massage/shiatsu practitioners in accordance with doctor's instructions

④ When you buy braces, such as corsets or casts, in accordance with doctor's instructions, or when you receive a blood transfusion

⑤ When you necessarily receive medical services outside Japan

<Necessary items for filing an application for ① to ⑤>

- Insurance card ● Application form ● Receipt for the fee
- Account information of the applicant

\* The applicant's personal seal will be necessary if a bank account of a person other than the applicant is used for bank transfer and if the applicant does not fill in the application form himself/herself.



- |                        |  |
|------------------------|--|
| In the case of ① above | ● Statement of medical expenses or attending doctor's statement  |
| In the case of ② above | ● Detailed statement, etc.   |
| In the case of ③ above | ● Detailed statement, etc. ● Doctor's statement of opinion   |
| In the case of ④ above | ● Detailed statement, etc. ● Doctor's statement of opinion   |
|                        | * When applying for shoe-type orthotic equipment, it is necessary to attach a photo of the equipment to be worn. |
| In the case of ⑤ above | ● Attending doctor's statement (with Japanese translation attached)  |
|                        | ● Letter of consent to the investigation   |
|                        | ● Itemized receipt (with Japanese translation attached)  |
|                        | ● Documentation of travel records (passport, etc.)   |



# Medical Treatments

## ■ How to Receive Treatment by Judo Therapists, Acupuncturists, Moxibustion Practitioners, and Massage/Shiatsu Practitioners

### ① When you receive treatment by judo therapists

#### [Cases covered by health insurance]

- Fracture    • Dislocation
- Bruise, ligament rupture, etc. (including so-called muscle strain)
- \* In case of fracture or dislocation, except for first aid, prior approval by the doctor is required.

#### [Precautions in receiving the treatment]

- Treatment cost for shoulder discomfort, muscle fatigue and other minor symptoms is not covered by health insurance; all costs for such treatment must be paid by the patient.
- Since it is approved that judo therapists make insurance claims on behalf of their patients, you can receive treatment by paying the co-payment.

### ② When you receive treatment by acupuncturists, moxibustion practitioners, or massage/shiatsu practitioners that the doctor deems necessary

#### [Cases covered by health insurance]

##### ● Acupuncture and moxibustion

- Nerve pain    • Rheumatism    • Cervico-omo-brachial syndrome
- Frozen shoulder syndrome    • Low back pain    • Aftereffect of cervical sprain
- Other conditions whose main symptom is chronic pain

##### ● Massage/shiatsu

Cases where massage is required for medical reasons, including muscle paralysis and articular contracture

#### [Precautions in receiving the treatment]

- To have treatment covered by health insurance, you need to obtain a certificate of consent or a medical certificate issued by the doctor beforehand.
- Cost for treatment or massage aimed at mere recovery from fatigue, consolation or disease prevention is not covered by the health insurance; all the cost for such treatment must be paid by the patients.
- While you receive treatment for a condition or symptom at an authorized insurance medical institution (hospital, clinic, etc.), receipt of acupuncture, moxibustion treatment, etc., for the same condition elsewhere is not covered by the health insurance.

The cost for judo therapy etc. is subject to medical expenses deduction.  
Please make sure to receive receipts.

Since judo therapists are permitted to make insurance claims on behalf of their patients, you can receive judo therapy by making the co-payment. When you receive judo therapy, check the description of the therapy on the Application for Medical Expense Grant and affix your signature and seal to the application.

## ■ Other Benefits

For details, please consult the division in charge at your local municipal office.

### ◎ Home nursing care medical expense benefit

If insured persons use home nursing care services in accordance with doctor's instructions, they can receive medical expense benefit by presenting their insurance cards.

### ◎ Uncovered medical treatment-related expense benefit

When insured persons receive advanced medical treatment, part of the advanced treatment that is common to ordinary medical treatments is covered by the Medical Care System for Elderly People. To receive the benefit, please present your insurance card at the medical institutions concerned.

### ◎ Funeral expense benefit

When an insured person dies, 50,000 yen is provided as part of the funeral fee.

\* Please note that eligibility for this benefit expires after two years from the day after the funeral.

#### <Necessary items for filing an application>

- Insurance card ● Application form ● Account information of the applicant
- Receipt for the funeral fee
- Document attesting that the applicant held the funeral (if the applicant's name is not on the receipt of the funeral fee)

\* The applicant's personal seal will be necessary if a bank account of a person other than the applicant is used for bank transfer and if the applicant does not fill in the application form himself/herself.

### ◎ Transfer expense benefit

When a person with serious illness with difficulty of travel is transferred urgently by doctor's instruction, the cost is paid if the Wider-Area Union deems the transfer to be necessary and the following three reasons are met.

- ① When the necessary treatment at the destination is covered by health insurance.
- ② When transfer is extremely difficult due to the disease or injury that requires the treatment.
- ③ In case of emergency or absolute necessity

#### <Necessary items for filing an application>

- Insurance card ● Application form ● Account information of the applicant ● Receipt
- Doctor's statement of opinion ● Document indicating the transfer route (map, etc.)

\* The applicant's personal seal will be necessary if a bank account of a person other than the applicant is used for bank transfer and if the applicant does not fill in the application form himself/herself.

### ◎ Exemption from part of the premiums (up to 6 months)

The insured persons may be exempt from part of the premiums if the household that they belong to fall under any of the following conditions ① to ③ within the past one year and meets certain conditions.

- ① When the house, household goods or other properties have been damaged significantly due to a natural disaster
- ② When revenue has been reduced significantly due to the closing of a business or loss of employment
- ③ When the householder or equivalent has died or suffered significant physical or mental damage or has had to be hospitalized for a long period

# Healthcare Programs

« Note on use of healthcare programs » Please be sure to make a prior inquiry to the medical or dental institution you plan to visit on whether it implements healthcare programs. Some institutions may have stopped implementing healthcare programs in response to the COVID-19 pandemic.

## ■ Medical Examinations

The healthcare examination program aims to detect not only lifestyle-related diseases, such as diabetes and hypertension, but also mental and physical frailty caused by aging. Therefore, it is highly recommended that lifestyle-related disease patients who now regularly visit medical institutions also have a medical examination. The examination card will be delivered to all insured persons in late April every year. Those who reach 75 years of age in the current year will receive the examination card in the month after their birthday.

Those who have had a comprehensive medical examination within the current year do not have to undergo a medical examination as described in this paragraph.

Target person	Insured persons of the Medical Care System for Elderly People provided by the Wider-Area Union for the Medical Care System for Elderly People in Osaka Prefecture * Those who have been in support facilities for persons with disabilities or facilities covered by long-term care insurance, or those who have been hospitalized at hospitals or other medical institutions for consecutive six months or longer are not subject to this program.
Examination items	<Basic items> ◎ Questionnaire ◎ Physical measurement ◎ Blood pressure measurement ◎ Physical examination ◎ Urinalysis ◎ Blood test (lipid test, blood sugar test, liver function test, renal function test) <<Detailed examination items (Implemented at the doctor's discretion)>> ◎ ECG ◎ Fundus examination ◎ Anemia examination
How to receive the examinations	Present your insurance card and examination card at a registered medical institution. * Please check the list sent with the guidance or the website of the Wider-Area Union.
Expense	Free
Valid period	From the time when you receive the delivered examination card to March 31 of the fiscal year (once a year)

## ■ Dental Examinations

The dental examination program aims to check not only the condition of the teeth and gums but also oral functions. Therefore, it is highly recommended that those with prosthetic teeth also undergo a dental examination. Guidance is delivered to all the insured persons annually in late April. For those who become 75 years old during the fiscal year, it will be delivered in the month following their birthday. (There are no examination cards.)

Target person	Insured persons of the Medical Care System for Elderly People provided by the Wider-Area Union for the Medical Care System for Elderly People in Osaka Prefecture * Those who have been in support facilities for persons with disabilities or facilities covered by long-term care insurance or those who have been hospitalized at hospitals or other medical institutions for six consecutive months or longer are not subject to this program.
Examination items	◎ Interview ◎ Teeth condition ◎ Periodontal tissue condition ◎ Occlusion condition ◎ Oral hygiene condition ◎ Oral dryness ◎ Chewing ability ◎ Tongue and lip functions ◎ Swallowing function ◎ Temporomandibular joint ◎ Oral mucosa
How to receive the examinations	Visit a registered dental clinic and present your insurance card there. (No examination card is issued.) * Please check the list sent with the guidance or the website of the Wider-Area Union. * Please note that house call dental examinations are not covered by this dental examination program.
Expense	Free
Valid period	From April 1 to March 31 of the following year (once a year)

## ■ Subsidy Program of Comprehensive Medical Examinations

The Wider-Area Union subsidizes part of the cost for comprehensive medical examinations for insured persons.

Please apply to the division in charge at your local municipal office.

Please note that eligibility for this subsidy expires after two years from the day following the date when you received medical examinations.

Target person		Persons who are insured by the Wider-Area Union for the Medical Care System for Elderly People in Osaka Prefecture at the time of undergoing a comprehensive medical examination		
Examination items	Physical measurement	Body height, weight, obesity, BMI, abdominal circumference	Hematology	Red blood cells, white blood cells, hemoglobin, hematocrit, platelet count, MCV, MCH, MCHC
	Physiology	Blood pressure, ECG, heart rate, fundus, intraocular pressure, visual acuity, hearing, respiratory function	Serology	CRP (blood type and HBs antigen)
	X-ray, ultrasound	Chest X-ray (or chest CT scan), upper GI X-ray (or endoscopy), abdominal ultrasound (or abdominal CT scan)	Urine	Protein, urinal sugar, occult blood (urinary sediment)
	Biochemistry	Total protein, albumin, creatinine, eGFR, uric acid, TC, HDL-C, neutral fat, total bilirubin, LDL-C, Non-HDL-C, AST, ALT, γ-GT, ALP	Other	Fecal occult blood, questionnaire, interview, explanation of results, health guidance
Necessary items for filing an application		<ul style="list-style-type: none"> <li>● Receipt for the comprehensive medical examination</li> <li>● All sheets of the examination report (photocopy accepted)</li> <li>● Insurance card ● Information on the bank account to be used</li> </ul> <p>* The applicant's personal seal will be necessary if a bank account of a person other than the applicant is used for bank transfer and if the applicant does not fill in the application form himself/herself.</p>		
Subsidy		Up to 26,000 yen		
Valid period		From April 1 to March 31 of the following year (once a year)		
Notes		<p>(1) The cost of medical examinations of the brain as well as various kinds of cancers (including those using PET) and additional examinations and other related costs are not subject to the subsidy.</p> <p>(2) If the comprehensive medical examinations lack more</p>		

### Let's make good use of the medication record book

The medication record book is a notebook for recording the medicines you are using. Checking of this record book by doctors or pharmacists will help prevent damage to your health.

If you do not have a record book, please request the pharmacist to issue one.

- You can check for duplicate medication and reduce the risk of side effects and drug interaction.
- You will be able to accurately convey your drug information when traveling or in the event of a disaster.

**Be sure to bring the medication record book to the medical institutions.**

**Do not have it for each hospital/pharmacy; have one record book per person.**

# About Individual Number Card ( “My Number Card” )

## ■ The Individual Number Card is planned to serve as an insurance card.

The Individual Number ( “My number” ) is a 12-digit number assigned to each resident in Japan.

You can apply to have your Individual Number Card issued for free by the division in charge at your local municipal office. **The Individual Number Card is planned to subsequently serve as an insurance card at medical institutions and pharmacies.**

If you do not have your Individual Number Card yet, please file an application. For application, please use the QR code on the right or contact the division in charge at your local municipal office.



- Your insurance card will continue to be issued whether or not you apply for an Individual Number Card and use it as your insurance card.
- You need to prepare an electronic certificate. If you did not acquire your electronic certificate when your Individual Number Card was issued, please contact your local municipal office.
- Pre-registration for use of the Individual Number Card as a health insurance card is accepted on the Myna Portal website.
- Necessary equipment will subsequently be installed at medical institutions and pharmacies.

### About the “Documents regarding your Individual Number ( “My Number” )”

Of the items required when submitting a notification to the municipal office, please bring both documents ① and ② below as “Documents regarding your Individual Number ( “My Number” ).”

#### ① Documents to confirm your Individual Number ( “My Number” )

<One of the following>

Individual Number Card, notification card, copy of the certificate of residence (with the individual number listed)

#### ② Identity verification documents

<One item required if you select this group>

Individual Number Card, driver's license, passport, physical disability certificate, mental disability certificate, intellectual disability certificate, residence card, documents with a face photo issued by government/public offices, etc.

<Two items required if you select this group>

Insurance card (The Medical Care System for Elderly People, The National Health Insurance, The Long-Term Care Insurance, etc.), The National Pension Handbook, documents without a face photo issued by government/public offices with which the holder's name and date of birth or address can be confirmed, etc.

**The Individual Number Card will serve as both ① and ②.**



## ● Medical visit and drug preparation

These days, more and more mildly ill patients are visiting the emergency room on holidays and during nighttime, which makes it harder to give medical treatment to patients with urgency and serious illness. To ensure to every citizen an appropriate medical care, we will ask you for careful attention to the following.

- ☆ Reconsider whether you can see a doctor during regular hours on weekdays.
- ☆ Find your family doctor and consult with him/her first if you have any concerns.
- ☆ Duplicate examination and medication may worsen your physical conditions.  
Avoid visiting several medical institutions to treat the same disease.
- ☆ When you have surplus drugs or you would like to use generic drugs (which are cheaper in most cases), please consult with a doctor or pharmacist.



## Please Contact the Local Municipal Office on the Following Occasions

Occasions	Procedures/What to Take	When
Moving to another municipality	Return of insurance card	Upon decision to move out
Moving in from another municipality	Certificate of burden class (futan kubun to shomeisho) (if you moved in from a municipality outside Osaka Prefecture)	Within 14 days from the day you started to reside in your new residence
Becoming disabled (For persons aged 65 - 74) (See page 3)	National pension certificate/physical disability certificate, etc., personal seal, documents regarding your Individual Number ( "My Number" )	When you desire a disability certificate given by the Wider-Area Union
Withdrawing the disability certification (For persons aged 65 - 74) (See page 3)	Return of insurance card, documents regarding your Individual Number ( "My Number" )	When you desire to withdraw disability certificate given by the Wider-Area Union
Death of insured person	Return of insurance card	After submitting a notification of death
	Application for the funeral expense benefit (see p. 24)	After the funeral
Receiving welfare	Return of insurance card, certificate of welfare reception, documents regarding your Individual Number ( "My Number" )	Within 14 days from the day you started receiving welfare
Stopping receiving welfare	Notification of welfare suspension/discontinuance decision, documents regarding your Individual Number ( "My Number" )	Within 14 days from the date of welfare suspension/discontinuance

\* Confirm with the division in charge at your local municipal office, in case that the requisite or necessary proceeding other than what is mentioned above might be needed.

# List of municipal offices

\*The division in charge and the telephone number are subject to change due to organizational reforms.

Municipality	Division in charge	Phone	Municipality	Division in charge	Phone
Osaka City	Health Insurance & Pension Div.	06-6208-8038			
Kita Ward	Health Insurance & Pension Div.	06-6313-9956	Miyakojima Ward	Counter Services Dept.	06-6882-9956
Fukushima Ward	Counter Services Dept.	06-6464-9956	Konohana Ward	Counter Services Dept.	06-6466-9956
Chuo Ward	Counter Services Dept.	06-6267-9956	Nishi Ward	Counter Services Dept.	06-6532-9956
Minato Ward	Counter Services Dept.	06-6576-9956	Taisho Ward	Counter Services Dept.	06-4394-9956
Tennoji Ward	Counter Services Dept.	06-6774-9956	Naniwa Ward	Counter Services Dept.	06-6647-9956
Nishiyodogawa Ward	Counter Services Dept.	06-6478-9956	Yodogawa Ward	Counter Services Dept.	06-6308-9956
Higashiyodogawa Ward	Counter Services Dept.	06-4809-9956	Higashinari Ward	Counter Services Dept.	06-6977-9956
Ikuno Ward	Counter Services Dept.	06-6715-9956	Asahi Ward	Counter Services Dept.	06-6957-9956
Joto Ward	Counter Services Dept.	06-6930-9956	Tsurumi Ward	Counter Services Dept.	06-6915-9956
Abeno Ward	Counter Services Dept.	06-6622-9956	Suminoe Ward	Counter Services Dept.	06-6682-9956
Sumiyoshi Ward	Health Insurance & Pension Div.	06-6694-9956	Higashisumiyoshi Ward	Counter Services Dept.	06-4399-9956
Hirano Ward	Health Insurance & Pension Div.	06-4302-9956	Nishinari Ward	Counter Services Dept.	06-6659-9956
Sakai City	Medical Assistance & Pension Div.	072-228-7375			
Sakai Ward	Health Insurance & Pension Div.	072-228-7413	Naka Ward	Health Insurance & Pension Div.	072-270-8189
Higashi Ward	Health Insurance & Pension Div.	072-287-8108	Nishi Ward	Health Insurance & Pension Div.	072-275-1909
Minami Ward	Health Insurance & Pension Div.	072-290-1808	Kita Ward	Health Insurance & Pension Div.	072-258-6740
Mihara Ward	Health Insurance & Pension Div.	072-363-9314			

Municipality	Division in charge	Phone	Municipality	Division in charge	Phone
Kishiwada City	Health Insurance Div.	072-423-9468	Habikino City	Health Insurance & Pension Div.	072-958-1111
Toyonaka City	Insurance Delivery Div.	06-6858-2295	Kadoma City	Health Insurance Div.	06-6902-5697
	Insurance Qualification Div.	06-6858-2301	Settsu City	National Health Insurance & Pension Div.	06-6383-1387
Ikeda City	Health Insurance & Medical Welfare Div.	072-754-6258	Takaishi City	Health Promotion Div.	072-275-6392
Suita City	National Health Insurance Div.	06-6384-1239	Fujiidera City	Health Insurance & Pension Div.	072-939-1186
Izumiotsumi City	Health Insurance & Pension Div.	0725-33-1131	Higashiosaka City	Insurance Management Div.	06-4309-3051
Takatsuki City	National Health Insurance Div.	072-674-7178	Sennan City	Health Insurance & Pension Div.	072-483-3455
Kaizuka City	Elderly Care Div.	072-433-7042	Shijonawate City	Health Insurance & Pension Div.	072-877-2121
Moriguchi City	Health Insurance Div.	06-6992-1545	Katano City	Medical Assistance & Health Insurance Div.	072-892-0121
Hirakata City	National Health Insurance Office (Section for the Medical Care System for Elderly People)	072-841-1221	Osakasayama City	Health Insurance & Pension Group	072-366-0011
Ibaraki City	Health Insurance & Pension Div.	072-620-1630	Hannan City	Health Insurance & Pension Div.	072-471-5678
Yao City	Health Insurance Div.	072-924-3997	Shimamoto Town	Health Insurance Div.	075-962-7462
Izumisanomiyama City	National Health Insurance & Pension Div.	072-463-1212	Toyono Town	Health Insurance Div.	072-739-3422
Tondabayashi City	Welfare & Medical Assistance Div.	0721-25-1000	Nose Town	Citizens Affairs Div.	072-731-3202
Neyagawa City	Citizens Service Dept. (Section for the Medical Care System for Elderly People)	072-813-1190	Tadaoka Town	Health Insurance Div.	0725-22-1122
Kawachinagano City	Health Insurance & Medical Welfare Div.	0721-53-1111	Kumatori Town	Health Insurance & Pension Div.	072-452-6195
Matsubara City	Medical Assistance Div.	072-334-1550	Tajiri Town	Citizens Affairs Div., Citizens Affairs Dept.	072-466-5004
Daito City	Health Insurance & Pension Div.	072-870-9629	Misaki Town	Health Insurance & Pension Div.	072-492-2705
Izumi City	Health Insurance & Pension Office	0725-99-8127	Taishi Town	Health Insurance & Medical Welfare Div.	0721-98-5516
Minoh City	Long-Term Care Insurance, Medical Subsidies & Pension Div.	072-724-6739	Kanan Town	Health Insurance & Pension Div.	0721-93-2500
Kashiwara City	Health Insurance & Pension Div.	072-972-1580	Chihaya-akasaka Village	Citizens Affairs Div.	0721-72-0081

## ◇Attention◇

### ● Information from the Osaka Prefectural Police

Phone scams are increasing!

Osaka Prefecture has seen a surge of phone scams. Swindlers make fake calls, pretending they are the police or bank officers, and as a result, many elderly people are cheated out of a large amount of money.

(The provisional total amount of monetary losses caused by communications fraud in Osaka Prefecture in 2020 has reached approximately 2.24 billion yen to date.)

Do not assume that this will never happen to you. Take countermeasures against fraud, including leaving your answering machine on or using a telephone with an automatic recording function and other anti-crime functions.

## Emergency Consultation Center Osaka

**Sudden illness and injury... Should I go to the hospital right now or call an ambulance? Call us when you need help.**



# #7119

(Available from mobile phones, PHS, and touch-tone lines)

## Or 06-6582-7119

\*We cannot provide consultations on health, nursing care, medicines, etc.

**In case of an emergency, call 119 without hesitation.**

### Contact Information

The Wider-Area Union for the Medical Care System for Elderly People in Osaka Prefecture

Insurance cards, services concerning insurance premiums, etc.	Eligibility Information Management Div.	Phone: 06-4790-2028
Services concerning high-cost medical care benefit, medical examinations, notification of medical expenses, etc.	Benefit Service Div.	Phone: 06-4790-2031
Information relating to Wider-Area Union budgets, public relations, council, etc.	General Affairs & Planning Div.	Phone: 06-4790-2029

8F Chuo-odori FN Bldg., 1-3-8 Tokiwa-machi, Chuo-ku, Osaka 540-0028

Fax: 06-4790-2030 (common to all divisions)

Website: <https://www.kouikirengo-osaka.jp/>

**Or contact the division in charge of the Medical Care System for Elderly People in your local municipal office** (see pages 29 and 30)

The information in this booklet is current as of May 1, 2021. Please note that, if any revision is made to the program in the future, this booklet may not be accurately describing the program contents.



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