

## The National Health Insurance (NHI) Guide

### 1 What is the National Health Insurance (NHI) System?

Japan adopts a universal healthcare coverage system that requires all of its citizens to enroll in a health insurance program so that they can receive medical services without worry.

National Health Insurance (NHI) is one such program operated by municipalities.

NHI is a mutual aid system in which the members of the insurance pay premiums (tax) to receive medical treatment without financial concern in case of an illness or injury.

This guide is designed to provide foreign nationals who reside or will reside in Wakayama Prefecture with detailed information about the system of and procedures for NHI in Japan.

### 2 Foreign Nationals Required to Be Enrolled in NHI

Foreign nationals with granted permission to stay in Japan for three months or longer are required to enroll in NHI.

However, those who fall into the following categories are excluded:

- Those who are enrolled in an employment-based health insurance program
- Those who are covered by a family health insurance program as a dependent
- Those aged 75 or older (This age bracket is covered by the Medical Care System for the Elderly Aged 75 and Over.)
- Those who are receiving welfare payments
- Those who entered Japan with a medical visa; those who accompany such person(s)
- Those who have a Long Stay for Sightseeing and Recreation Visa

### 3 Notification for NHI

#### (1) When enrolling in NHI

Applications for NHI must be submitted by the head of household. In any of the following cases, you need to visit the municipal office in your area of residence with your Residence Card within 14 days to file a notification.

- When you have entered Japan
- When you have moved in from another municipality in Japan
- When you have discontinued healthcare insurance other than NHI
- When a child is born
- When you stop receiving welfare payments
  
- If the notification is delayed...
  - You are required to bear the full medical expenses incurred before the notification, except when there is a specific reason.
  - You are required to pay insurance premiums (tax) retroactively to the month in which you become eligible for NHI.

#### (2) When withdrawing from NHI

In any of the following events, you are required to submit a notification of withdrawal from NHI and return your NHI card to the municipal office in your area of residence.

- When leaving Japan
  - When moving out to another municipality in Japan
  - When enrolling in other healthcare insurance, such as company health insurance
  - When an NHI-insured member has died
  - When starting to receive welfare payments
- If you fail to file the notification...
- When you lose eligibility for NHI, your NHI card becomes invalid. If you use the invalid NHI card inadvertently at a medical institution, you must reimburse the portion of medical expenses borne by NHI.
  - Unless the notification of withdrawal is filed, you will continue to be charged for the premiums (tax) that you are not obliged to pay.

## 4 NHI Benefits Payable

### (1) Medical Expenses Payable

When you are sick or injured, you can receive medical services by paying a portion of the medical fees by presenting your NHI card at a hospital or a medical institution. Please be aware that the percentages of the personally borne amount differs according to age or other conditions as below.

- Those under the age of starting compulsory education: 20%
- Those from compulsory education age to 69 years old: 30%
- Those aged between 70 and 75: 20% or 30%

■ If involved in a traffic accident or other accident...

When you are injured due to an action of a third party, such as a traffic accident, you can also receive medical services under NHI. In this case, medical fees that should be borne by the party at fault are paid temporarily by NHI, and NHI then charges the actual cost to the party at fault or other relevant party. Please make sure to file a notification with the NHI section of your municipal office.

■ Cost of meals during hospitalization

When you are hospitalized, you are required to bear meal expenses up to the pre-fixed standard ceiling amount, apart from the costs of medical treatment and medication.

The cost of meals is further reduced for the members of the households exempted from resident tax or the households with low income Levels I and II. In this case, you have to present “Reduction of the Standard Amount of Patient Liability” or “Eligibility Certificate for Ceiling-Amount Application and Reduction of the Standard Amount of Patient Liability” at your medical institution. You can apply for the certificates in the NHI section of your municipal office.

## (2) Medical expenses

In the following cases, you have to pay in full at first. However, if you make an application in the NHI section and it is approved, the amount calculated by subtracting your copay from the amount you had paid will be reimbursed later.

- Received medical services without showing your NHI card due to sudden illness or other unavoidable reasons
- Purchased a corset or other therapeutic equipment as instructed by your doctor
- Blood costs for a transfusion performed as instructed by your doctor (costs paid through a medical institution)
- Received medical services overseas due to sudden illness or other unavoidable reasons (except when traveling abroad for receiving medical treatment)

## (3) Expensive Medical Cost

In cases where the personally borne medical expenses at medical institutions within a single calendar month become expensive, the expenses in excess of your payment limit are to be reimbursed as Expensive Medical Cost.

If you foresee high medical costs due to hospitalization or other reason, please make an application for “Eligibility Certificate” (“Eligibility Certificate for Ceiling-Amount Application” or “Eligibility Certificate for Ceiling-Amount Application and Reduction of the Standard Amount of Patient Liability”) at your municipal office and obtain the certificate in advance. By presenting the certificate at your hospital, your medical expenses are reduced to the limit of your copayment amount.

## (4) Lump-sum allowance for childbirth and child-rearing

A lump-sum allowance will be paid to mothers under NHI for newborn child. This allowance will be also paid in the case of stillbirth or miscarriage, with the condition that they have been pregnant for 85 days or longer.

## (5) Funeral expenses

When an individual enrolled in NHI has died, funeral expenses will be paid to the person who arranges the funeral service.

## (6) Transportation costs

When transportation costs are incurred due to hospital admission or changing hospitals required by order of the attending physician in emergent and unavoidable circumstances, these expenses will be covered by NHI if you make an application in the NHI section and it is approved.

\* Note: You cannot apply for the allowance described in sections (2) to (6) when two years have passed from the relevant day.

## 5 Making Payment of Insurance Premiums (tax)

The insurance premiums you pay are an important resource that is used to cover medical fees of the NHI members. We ask that premiums be paid by the due date without fail. The head of household is responsible for paying the premiums (tax).

■ How to determine the amount of your insurance premium (tax)

Insurance premiums are determined on a household basis in each fiscal year. If there are any changes related to the members in your household, the amount of the premium (tax) will be revised.

These premiums (tax) are calculated based on your income level of the previous year. We ask you to accurately declare your income for the calculation of the exact amount of premiums.

■ Details of insurance premiums (tax)

Insurance premiums (tax) are the sum of amounts calculated with rates fixed for each category below.

Individuals up to 39 years of age: Medical Insurance portion and Support for the Elderly Aged 75 or Over portion.

Individuals between 40 to 64 years of age: Medical Insurance portion, Support for the Elderly Aged 75 or Over portion, and Nursing Care portion.

Individuals between 65 and 74 years of age: Medical Insurance portion and Support for the Elderly Aged 75 or Over portion.

■ If you fail to make payments...

If you do not pay premiums without any specific reason, the following actions may be taken.

- If you have not paid insurance premiums by the deadline, you will be sent a Collection Notice and be subject to coercive collection. Delinquent charges may be imposed.
- If you still fail to pay the premiums after receiving the Collection Notice, you will be issued a “Short-term Health Insurance Card” with a limited effective term.
- If you leave premiums unpaid, “Eligibility Certificate for Health Insurance” will be issued, and you will have to pay 100% of your medical treatment expenses.
- After a certain period, all or a portion of your insurance benefits will be temporarily suspended.
- If you fail to pay the premiums in full by 10 days from the day on which the Collection Notice was sent and leave them unpaid without responding to the municipal office about the payment, seizure of assets or other enforcement measures may be executed.

## 6 Keep Your Insurance Card at Hand

Your National Health Insurance card (NHI card) verifies that you are enrolled in NHI. You need to present it at a medical institution or other facility when receiving healthcare services. Please keep it at hand.

■ Use the NHI card properly

- Please check the details on your NHI card carefully when you first receive it.
- A photocopied or expired NHI card cannot be used.
- When you withdraw from NHI, please notify the NHI section and return your NHI card.
- If you lose or damage your NHI card, please arrange to have your card re-issued in the NHI section of your municipal office.

- The following actions are prohibited: modifying the information on the NHI card; lending your NHI card to another person; and using another person’s NHI card.

- You cannot use your NHI card in the following cases.

Treatments for a situation not considered an illness:

- Health checkups, complete medical checkups, protective inoculation
- Normal pregnancy and childbirth
- Abortion due to financial reasons
- Plastic surgery, orthodontics
- Fatigue, languor, etc.

The below cases are covered by workers' compensation insurance.

- An injury or a disease at a workplace or while commuting

Payment of insurance premiums may be restricted in the following cases.

- Injuries or illnesses caused by physical altercations, deliberate accidents, or criminal acts (For injuries caused by a third party, see page 2, “Section 4: NHI Receivable Benefits.”)
- Failing to follow instructions from doctors and NHI

## 7 Other

- Making use of generic medicines

- Generic medicines refer to prescription drugs that are allowed for sale after the exclusive marketing period of their original drugs (new drugs) expires.

Generic medicines are inexpensive compared to the cost of new drugs. Making use of generics helps streamline medical expenses nationwide.

- Specific Health Checkups

Specific Health Checkups are effective in detecting invisible or abnormal physical conditions and identifying a risk factor for a lifestyle disease. Be sure to undergo a checkup once a year.

- Specific Health Guidance

Specific Health Guidance is offered to those who are detected to be a high risk of lifestyle disease by the Special Health Checkup. In the guidance, advice for lifestyle improvement will be received from a professional staff member. If this applies to you, please make sure to receive the guidance.