

Chapter 4

Health Insurance and Medical Treatment



Saitama's Prefectural Mascot
Kobaton

- 1 Medical Insurance System
- 2 National Health Insurance (Regional Social Insurance)
- 3 Health Insurance (Employee's Health Insurance)
- 4 Health Check-ups (*Tokutei Kenko Shinsa*)
- 5 Cancer Screenings
- 6 Medical Care System for the Elderly
- 7 Long-term Care Insurance
- 8 Medical Institution Information
- 9 Medical Examinations at a Hospital
- 10 Hospitalization
- 11 Adult Guardianship System

1 Medical Insurance System

The Japanese Medical Insurance System is a system in which individuals pay premiums in advance so that they can use insurance when they require medical care for illness or injury. In principle, all residents of Japan, regardless of their nationality, are required to enroll in public health insurance.

There are 3 systems: the National Health Insurance system for company employees and their families, a health insurance system for the self-employed, and a medical system for elderly persons aged 75 and older.

2 National Health Insurance (Regional Social Insurance)

Foreign nationals who hold a residency status of more than 3 months and have a Resident Record, or those who can prove that they will reside in Japan for more than 3 months are required to enroll in the National Health Insurance system. However, those who are already enrolled in health insurance through their workplace, persons who enter the country only to receive medical treatment, and tourists are excluded from this requirement. There are 2 types of National Health Insurance: one is co-administered by the 47 prefectures of Japan and their municipalities, while the other is administered by National Health Insurance Unions for certain occupations.

(1) Enrollment

To join the National Health Insurance system which is co-administered by the 47 prefectures of Japan and their municipalities, apply at the division in charge of National Health Insurance at your local municipal or ward office. To enroll in a National Health Insurance Union, you must apply at the office of the union. Please consult with the office you will be applying at regarding application requirements.

(2) Insurance Premium (Tax)

The insurance premium (tax) is calculated according to the number of people in your family, and the income you earned the previous year. Consequently, this amount may change every financial year. For households with individuals ages 40 to 64, a nursing care insurance premium (tax) will also be added. Each municipality and National Health Insurance Union sets its own premiums (tax rates). You will pay your insurance premium (tax) for the financial year in multiple installments. You can make your payment at a local municipal or ward office, bank, or post office.

(3) Insurance Card

Enrollment in National Health Insurance is by household, and the head of the household is responsible for submitting notifications and paying insurance premiums and other fees. However, each household member is insured, and is issued a separate insurance card. Be sure to take it with you when you go to a medical institution that accepts insurance.

You must notify the National Health Insurance Department of your local municipal or ward office or your National Health Insurance Union in the following cases:

A Guide to Living in Saitama

- ① When you enroll in or withdraw from another public health insurance system;
- ② When you move;
- ③ When an insured person has a child;
- ④ When an insured person dies;
- ⑤ When your name, address, or head of household changes;
- ⑥ When turning 75 years old; or
- ⑦ When you lose your Health Insurance Card

(4) Benefits

- ① **Medical Expenses:** When an insured person receives a medical examination or treatment at a hospital or clinic and shows their health insurance card, they will pay 30% of the cost. (This amount is 20% for children who are yet to enroll in school, and 20% to 30% for people over 70 years of age.) The remaining cost is paid by the National Health Insurance to the hospital or clinic.
- ② **Childbirth and Childcare One-time Payment:** When an insured person has a baby, a designated amount is paid by insurance.
- ③ **Funeral Expenses:** When an insured person dies and a funeral is held, a designated amount is paid by insurance to assist with the costs of the funeral.
- ④ **Medical Treatment Assistance:** When an insured person's payments to medical institutions for 1 month exceed the designated level, the excess amount is paid by insurance.
- ⑤ **Medical Treatment Cost:** In the following events, if you file the necessary documents with the division of your local municipal or ward office in charge of National Health Insurance and your application is accepted, the payment amounts, minus the co-payment for the service cost, will be reimbursed.
 - a. When, for unavoidable reasons, you receive care at a medical institution without your insurance card;
 - b. When you undergo a blood transfusion (cost of blood);
 - c. When you pay for medical equipment (corset, etc.) that is deemed necessary by the physician;
 - d. When you undergo treatments such as acupuncture, Chinese heat treatment (moxibustion), massage, etc. that are deemed necessary by a physician;
 - e. When you visit a judo therapist to receive medical treatment in the event of sprains, bone fractures, etc.; or
 - f. When, for unavoidable reasons, you receive treatment at overseas medical institutions during overseas travel (the amount corresponding to expenses that would have been incurred in Japan will be reimbursed).

(5) Cases Not Covered by Insurance

Ordinary health checks, vaccinations, cosmetic surgery, orthodontics (tooth realignment), normal childbirth, and work-related illness or injury are not covered by National Health Insurance (you cannot use your insurance card).

For more information, contact the division of your local municipal or ward office in charge of National Health Insurance or the National Health Insurance Union you belong to.

3 Health Insurance (Employee's Health Insurance)

Employee's Health Insurance is a system that employees of certain companies and their families enroll in.

(1) Insurance Premium

Your insurance premium is calculated by multiplying your salary (including allowances), the standardized monthly amount of remuneration based on bonuses, and the standardized amount of bonuses by the insurance premium rate. Your employer bears half of the monthly premium while the remaining half is borne by you (the person to be insured). It is usually deducted from your monthly salary and bonus(es) and paid on your behalf.

For insured people ages 40 to 64 years old, the additional nursing care payments are added to this amount.

(2) Benefits

- ① Medical Expenses: When an insured person receives a medical examination or treatment at a hospital or clinic and shows their health insurance card, they will pay 30% of the cost. (This amount is 20% for children who are yet to enroll in school, and 20% to 30% for people over 70 years of age.) The remaining cost is paid by the health insurance provider to the hospital or clinic.
- ② Childbirth and Childcare One-time Payment: When an insured person has a baby, a designated amount is paid by insurance.
- ③ Funeral Expenses: When an insured person dies, a designated amount is paid by insurance to assist with the costs of the funeral.
- ④ Medical Treatment Assistance: When an insured person's payments to medical institutions for 1 month exceed the designated level, the excess amount is paid by insurance.

- ⑤ Medical Treatment Cost: When the whole medical expense is paid by an insured person for unavoidable reasons, medical equipment is made, etc., an amount determined by the insurer is paid by insurance.
- ⑥ Sickness and Injury Allowance: When an insured person becomes unable to work due to an illness or injury, roughly two-thirds of their wages are reimbursed by insurance.
- ⑦ Maternity Allowance: When an insured person is absent from work in excess of 4 months (85 days) during pregnancy, roughly two-thirds of their wages are paid to them by insurance for a certain period before and after the delivery.

(3) Cases Not Covered by Insurance

Ordinary health checks, vaccinations, cosmetic surgery, orthodontics (tooth realignment), normal childbirth, work-related illness or injury, and illness and injuries incurred during your commute are not covered by Employee's Health Insurance (you cannot use your insurance card).

If you receive medical treatment as a result of a traffic accident, you need to report the accident to your insurer (Japan Health Insurance Association or Health Insurance Union). Contact the insurer printed on your insurance card.



Consultation and Inquiries

Office	Phone	Address	Hours
Japan Health Insurance Association Saitama Branch (For those enrolled in this association)	048-658-5919 A call menu will direct your call to the relevant department.	16F Omiya Information Culture Center (JACK Omiya) 682-2 Nishiki-cho, Omiya-ku Saitama-shi	Mon - Fri 8:30 - 17:15 (Excluding National Holidays and the period from Dec. 29 to Jan. 3)
Other (Health Insurance Union / Mutual Aid Association, etc.)	Please refer to the insurer information printed on your insurance card for the phone number and address.		

4 Health Check-ups (*Tokutei Kenko Shinsa*)

Health check-ups (*tokutei kenko shinsa*) are done for people enrolled in health insurance who are between the ages of 40 and 74 (including persons who will turn 40 in the relevant fiscal year). For more information, please contact your health insurance provider.

For example, the Japan Health Insurance Association provides preventative screenings for adult lifestyle-related diseases targeting those who are covered by health insurance (insured individuals) between the ages of 35 and 74 (including persons who will turn 35 in the relevant fiscal year), and health check-ups (*tokutei kenko shinsa*) for their dependents (family members supported by insured members) between the ages of 40 and 74 (including persons who will turn 40 in the relevant fiscal year).

For more information, please contact the insurer specified on your insurance card.

5 Cancer Screenings

Cancer screenings are separate from regular health check-ups. If your workplace does not offer opportunities for cancer screenings, please consult with the municipality you live in.

The following people are eligible for cancer screenings:

- Stomach cancer: Men and women 50 years and older (once every 2 years)
- Lung cancer: Men and women 40 years and older (once a year)
- Colorectal cancer: Men and women 40 years and older (once a year)
- Cervical cancer: Women 20 years and older (once every 2 years)
- Breast cancer: Women 40 years and older (once every 2 years)

Please consult with the municipality you live in for details and information on how to apply for cancer screenings

Website: <https://www.pref.saitama.lg.jp/a0705/gantaisaku/gankenshin-city-madoguchi.html>

6 Medical Care System for the Elderly

Persons aged 75 and older (including persons aged 65 and older who have certain disabilities and are certified by the Saitama Prefecture Association of Medical Care Services for Older Senior Citizens) will be eligible to enroll in the Medical Care System for the Elderly.

However if the person does not have Japanese citizenship, and is (1) a person with no status of residence as set forth by the Immigration Control and Refugee Recognition Act, (2) a person who holds a period of stay of 3 months or less, (3) a person who is not subject to the Basic Resident Registration Act, or (4) a person residing in Japan who entered the country for the express purpose of receiving medical treatment, they will not be eligible to enroll in the system.

(1) Filing for Enrollment

When a person reaches the age of 75 or when a person moves to Saitama Prefecture, in general, an insurance card will be sent to them from the municipality where they live, and therefore there is no need to file for enrollment.

(2) Insurance Premium

The insurance premium is made up of the base amount which all subscribers bear, and the income-based amount which coincides with one's income level (reductions may be available). In general, the insurance rate is the same for all of Saitama Prefecture.

(3) Insurance Card

Each enrollee is given an insurance card. Please present this card when seeing a doctor.

In the following cases, please return your insurance card to the division in charge of the Medical Care System for the Elderly at your local municipal or ward office:

- ① When items listed on your insurance card have changed
- ② When your insurance card is damaged
- ③ When you lose your right to receive benefits

(4) Description of Benefits

- ① Medical Expenses: When an insured person receives a medical examination or treatment at a hospital or clinic and shows their insurance card, they will pay 10% of the cost (20% - 30% for those who have an income which exceeds the specified level). The remaining cost is paid by the insurance provider to the hospital or clinic.

- ② Medical Treatment Assistance: When an insured person's payments to medical institutions for 1 month exceed the designated level, the excess amount is paid by insurance.
- ③ Medical Treatment Cost: In the following cases, if you submit the necessary documents to the division in charge of the Medical Care System for the Elderly at your local municipality and your application is accepted, the amount you paid, minus the co-payment, will be reimbursed.
 - a. When, for unavoidable reasons, you receive care at a medical institution without your insurance card;
 - b. When you undergo a blood transfusion (cost of blood);
 - c. When you pay for medical equipment (corset, etc.) that is deemed necessary by the physician;
 - d. When you undergo treatments such as acupuncture, Chinese heat treatment (moxibustion), massage, etc. that are deemed necessary by a physician;
 - e. When you visit a judo therapist to receive medical treatment in the event of sprains, bone fractures, etc.; or
 - f. When you receive treatment at overseas medical institutions during overseas travel
- ④ Funeral: When an insured person dies and a funeral is held, a designated amount is paid by insurance to assist with the costs of the funeral.

(5) Cases Not Covered by Insurance

Cases not covered by insurance are the same as for the National Health Insurance.

For details regarding the Medical Care System for the Elderly, please inquire at your local municipal or ward office.

7 Long-term Care Insurance

Long-term Care Insurance is designed to assist elderly persons who require nursing care in remaining as independent as possible. This insurance and its benefits are administered by local municipalities. All individuals aged 65 and above, as well as those aged from 40 to 64 who are enrolled in medical insurance programs, are enrolled in this insurance. If you do not have Japanese citizenship, you are able to enroll if you have been granted a period of stay in Japan of 3 months or longer, or if you can prove that you will reside in Japan for more than 3 months. For details, please visit the division in charge of Long-term Care Insurance at your local municipal or ward office.

(1) Insurance Premiums

- ① For people 65 and over, premiums are determined by the municipality they live in as well as by their income level and other factors.
- ② For people between 40 and 64 who are enrolled in medical insurance, premiums are calculated according to the terms of their medical insurance policy.

(2) Application for Certification of Needed Long-Term Care

To receive the services of Long-term Care Insurance, it is necessary to obtain certification (Certification of Needed Long-Term Care) that determines your eligibility to receive the services.

To apply for Certification of Needed Long-Term Care, please visit the division in charge of Long-term Care Insurance at your local municipal or ward office.

(3) Benefits

There are services offered for people certified as a Person Requiring Support and for people who have obtained a Certification of Needed Long-Term Care, depending on their situation.

There are limits to the use of services depending on the individual's nursing care needs, so necessary services are selected during a consultation with a nursing care support specialist (care manager).

- ① Home Services (This includes services where a helper visits the person's home, services where the person commutes to a facility from their home, services where the person stays at a facility, services that utilize welfare equipment to prepare a suitable living environment at the person's home, financial assistance to cover funds necessary to repair or improve homes, etc.)
- ② Facility Services (Care received while admitted to an intensive care nursing facility, senior rehabilitation facility, or long-term care facility, etc. As a general rule, people certified as a Person Requiring Support cannot use these services.)
- ③ Community-based Services (Services that aim to support patients to continue living independently in an environment that they are used to, as much as possible)

(4) Cost for the Beneficiary

Persons receiving benefits from Long-term Care Insurance are, as a general rule, responsible for 10% (20% or 30% for those with incomes above a certain amount) of the cost of the services received.

8 Medical Institution Information

(1) Medical Services Search System

This system allows users to search online for hospitals, health clinics, dentists, midwife centers, pharmacies, etc., within Saitama Prefecture with various criteria. Users can also search for hospitals that will treat patients in a foreign language. (Machine translation available in English, Simplified and Traditional Chinese, and Korean.)

About the Medical Services Search System (Website of the Medical Advancement Division, Saitama Prefectural Government)

Website: <https://www.pref.saitama.lg.jp/a0703/iryo-kinou/>

(2) Saitama Emergency Phone Consultations (① Emergency Phone Consultations for Children, ② Emergency Phone Consultations for Adults, ③ Medical Institution Guidance)

The following consultation centers are set up in case of sudden illness or injury (in Japanese only).

Phone Number: #7119 or

048-824-4199 (for rotary dial phones, IP phones, or when calling from the border area between Saitama and Tokyo).

*The phone numbers below are still available to use as before,

#8000 or 048-833-7911 (consultation for children)

Consultation Times

24 hours, 365 days a year

How to use

Please follow the voice guidance to select the service you would like to consult.

① Consultation for children (emergency phone consultation for children)

② Consultation for adults (emergency phone consultation for adults)

③ Medical institution guidance (for both children and adults)

※Attention: when using ③ Medical institution guidance:

- Dentistry, oral surgery, and psychiatry are excluded.
- This service cannot provide medical consultations.
- Please call the medical institution referred to you by the service to confirm the details before you go.

- Please understand that there may be cases in which the service cannot refer you to any medical institutions based on your inquiry.

※A fax service is available in Japanese at 048-831-0099 for the hearing impaired. Please download a request form from the Saitama Emergency Phone Consultations page on the Saitama Prefectural Government website.

(3) Saitama Prefectural AI Emergency Consultation

If you suddenly become ill or injured and are unsure whether you should go to a doctor, please consult with “Saitama Prefectural AI Emergency Consultation” (This service is in Japanese)

<https://www.pref.saitama.lg.jp/a0703/aikyukyu.html>

9 Medical Examinations at a Hospital

When you need to see a doctor for an illness or injury, go to a clinic or hospital near you. If you require advanced treatment from a specialist, the doctor examining you will give you a letter of reference (*shokai jo*) which you can then take to a hospital with the necessary facilities. If you go to a hospital larger than a specified scale without a letter of reference, you may be charged more than the regular fee.

(1) Reception Procedures

The procedures at reception differ between medical institutions. The following is an example:

- ① Submit your insurance card to the reception desk for new patients and tell them which unit you would like to go to for treatment.
- ② Follow the instructions of staff and go to the appropriate unit.
- ③ You will be required to submit a form at the unit's reception desk. Then, wait to see the doctor.
- ④ After your consultation with the doctor, pay at the cashier.
- ⑤ If you require medication, you can go to the pharmacy within the medical institution if there is one, or go to a separate pharmacy and present the prescription written by your doctor. They will then prepare the medication for you.

10 Hospitalization

There are various kinds of hospital rooms: private rooms, four-bed rooms and six-bed rooms, etc. Health insurance generally covers the cost of hospitalization. However, if you request to stay in a private room, there will be an additional fee which you will be responsible for paying.

11 Adult Guardianship System

The adult guardianship system supports and protects the legal rights of individuals whose capacity for judgment is limited due to reasons such as dementia, intellectual, or mental disabilities. It is broadly divided into two systems: legal guardianship and voluntary guardianship.

(1) Legal Guardianship

- ① An adult guardian is selected by the family court to support an individual who does not have sufficient capacity to make judgments for acts such as entering into long-term care insurance or welfare service contracts, managing bank accounts and assets, and making payments.

There are three possible systems depending on the individual's capacity: assistance, curatorship, and guardianship.

	Assistance	Curatorship	Guardianship
Individual	Capacity for making judgments is insufficient	Capacity for making judgments is significantly insufficient	Capacity for making judgments is lacking in their normal state
Type of guardian	Assistant	Curator	Adult Guardian

② Making a Petition to the Family Court

A petition can be made by the individual themselves, their spouse, relatives within four degrees of kinship, a public prosecutor, or the mayor of the municipality.

Generally, the petition must be made to the family court (or branch office) with jurisdiction over the area where the individual resides*1.

If you do not know which family court has jurisdiction over your area, ask your nearest family court.

Website: <https://www.courts.go.jp/saitama/saiban/madoguti/index.html>

③ Consultation

Please contact the relevant division of your local municipal office or an adult guardianship center, etc.

(See the Saitama Prefectural Government Regional Comprehensive Care Systems Division's website for the contact information of each municipality.)

Website: <https://www.pref.saitama.lg.jp/a0609/3-seinen-kouken/3-seinen-kouken-senmonsyoku-soudan.html>

④ Procedures

Saitama Family Courts, Guardian Website:

<https://www.courts.go.jp/saitama/saiban/tetuzuki/kouken/index.html>

(For calls or in-person visits, contact your nearest family court listed in ②.)

*1 Procedures for petitioning for a guardianship will be conducted by a Japanese court even for foreign residents while they are residing in Japan. (Article 5, Act on General Rules for Application of Laws (Act No. 78 of 2006))

(2) Voluntary Guardianship

In this system, an individual appoints someone while they still have sufficient capacity for judgment through a contract (voluntary guardianship contract) to perform duties as their representative. When the individual's capacity for judgment has declined, the contract will go into effect after a petition has been filed with the family court to appoint the voluntary guardian*2.

① Regarding the Voluntary Guardianship Contract

This contract must be concluded by notarized document created by a notary at a local public notary office.

② Regarding Making a Petition to the Family Court

A petition can be made by the individual themselves, their spouse, relatives within four degrees of kinship, or the voluntary guardian.

Generally, the petition is made to the family court (or branch office) with jurisdiction over the area where the individual resides.

(If you are unsure of which family court has jurisdiction over your area, ask your nearest family court.)

Website: <https://www.courts.go.jp/saitama/saiban/madoguti/index.html>

*2 It is also possible to petition a Japanese court to appoint a foreign resident as a voluntary guardian. Contact your nearest family court as outlined in ② for more information.