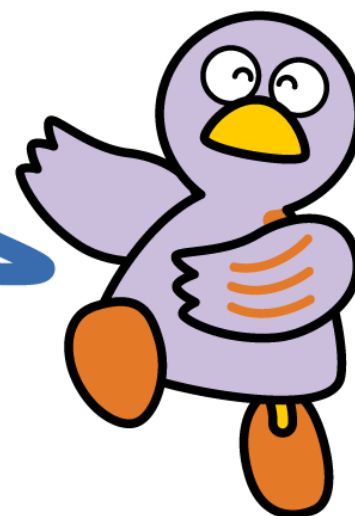


## Chapter 4

# Health Insurance and Medical Treatment



Saitama's Prefectural Mascot  
Kobaton

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### 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 public health insurance systems: one for employees and their families, one for the self-employed, and one for elderly persons aged 75 and older.

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## **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 for the purpose of receiving medical treatment and their carers, and tourists are excluded from this requirement. There are 2 types of National Health Insurance: one is co-administered by prefectures and 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 prefectures and municipalities, apply at the division in charge of National Health Insurance at your ward or municipality of residence. 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 your ward or municipality of residence, bank, or post office.

### **(3) Myna (My Number) Insurance Card, Eligibility Verification Certificate (*Shikaku Kakuninsho*)**

Enrollment in National Health Insurance is by household, and the head of the household is responsible for submitting notifications and paying insurance premiums as well as other fees. However, each household member is insured.

People who have a My Number Card and have registered it to be used as a health insurance card can use it as a "Myna Insurance Card" at medical institutions. People with a Myna

## A Guide to Living in Saitama

Insurance Card will be issued a "Notice of Eligibility Information" (*shikaku joho no oshirase*) after enrolling.

If you do not have a My Number Card, or if you have one but it is not registered to be used as a health insurance card, you can continue to use your current paper Health Insurance Eligibility Certificate until it expires. If you have a Myna Insurance Card, please use the card reader at the reception of the medical institution when you go for an examination or treatment. If you have a Health Insurance Eligibility Certificate, please show it to the receptionist.

You must notify the National Health Insurance Department at your ward or municipality of residence or your National Health Insurance Union in the following cases:

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

\*If you lose your Myna Insurance Card, please contact your municipality of residence.

### **(4) Benefits**

- ① Medical Expenses: When you have an examination or receive treatment and show your Myna Insurance Card or Health Insurance Eligibility Certificate, you will pay 30% of the medical costs (20% for children yet to enroll in school, and 20% or 30% for persons aged 70 years and above). The remaining cost is paid by the National Health Insurance to the hospital or clinic.
- ② Childbirth Lump-Sum Allowance: Paid when a child is born.
- 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 High-Cost Medical Expenses: When the upfront payments to a medical institution within one month exceed the threshold, you will be reimbursed the excess amount.
- ⑤ Medical Treatment Cost: In the following events, if you file the necessary documents with the division in charge of National Health Insurance at your ward or municipality of residence and your application is accepted, the payment amounts, minus the co-payment, will be reimbursed.
  - a. When, due to unavoidable circumstances, you receive care at a medical institution without your Myna Insurance Card or other proof of insurance;

- b. When you undergo a blood transfusion (cost of blood);
- c. When you pay for orthopedic equipment (brace, etc.) that is deemed necessary by a physician;
- d. When you receive *anma* (traditional Japanese massage), acupuncture, Chinese heat treatment (moxibustion), or massage treatments that are deemed necessary by a physician;
- e. When you visit a bone-setter to receive medical treatment in the event of injuries such as sprains or bone fractures; or
- f. When, due to unavoidable circumstances, 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 check-ups, 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 Myna Insurance Card or other proof of insurance.).

For more information, contact the division in charge of National Health Insurance at your ward or municipality of residence, or the National Health Insurance Union you belong to.

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## **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, additional nursing care payments are added to this amount.

### **(2) Benefits**

- ① Medical Expenses: When you have an examination or receive treatment and use your Myna Insurance Card or Health Insurance Eligibility Certificate, you will pay 30% of the medical costs. (20% for children yet to enroll in school, and 20% or 30% for persons

aged 70 years and above.) The remaining cost is paid by the health insurance provider to the hospital or clinic.

- ② Childbirth Lump-Sum Allowance: Paid when a child is born.
- ③ Funeral Expenses: When an insured person dies, a designated amount is paid by insurance to assist with the costs of the funeral.
- ④ High-Cost Medical Expenses: When the upfront payments to a medical institution within one month exceed the threshold, you will be reimbursed the excess amount.
- ⑤ Medical Treatment Cost: You will be reimbursed an approved amount by your health insurance provider in situations such as when you have paid the full cost of medical expenses upfront due to unavoidable circumstances, or have had orthopedic equipment made.
- ⑥ Sickness and Injury Allowance: When you are unable to work and receive wages due to illness or injury, you can receive approximately two-thirds of your wages.
- ⑦ Maternity Allowance: When an insured person takes leave from work for childbirth 4 months (85 days) or more into their pregnancy and cannot receive a salary, an amount roughly two-thirds of their salary will be paid for a specified period before and after giving birth.

### (3) Cases Not Covered by Insurance

Ordinary health check-ups, vaccinations, cosmetic surgery, orthodontics (tooth realignment), fees for 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 Myna Insurance Card or Eligibility Verification Certificate, etc.).

If you receive medical treatment as a result of a traffic accident, you should first contact your insurer (Japan Health Insurance Association or Health Insurance Union), as you are required to report the incident to them.



### Consultations 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)
For inquiries regarding other health insurance unions or mutual aid associations, please contact them directly.			

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

There are specialized health check-ups (*tokutei kenko shinsa*) provided for people enrolled in health insurance who are aged 40 - 74 years old.

For example, the Japan Health Insurance Association provides preventative screenings for lifestyle-related diseases for insured individuals aged 35 - 74 years old (including persons who will turn 35 in the relevant year), and health check-ups for their dependents (family members who are receiving support from an insured individual) aged 40 - 74 years old.

For more information, please contact your insurer.

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#### **5 Cancer Screenings**

Cancer screenings are separate from regular health check-ups. If your workplace does not provide opportunities to get screened, please contact your municipality of residence.

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)
- Bowel 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)

For more information, including on how to apply, please contact your municipality of residence.

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

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#### **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) are 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) Enrollment**

Individuals with a Myna Insurance Card can continue to use their card as is, even after they turn 75 years old or move to Saitama Prefecture. Persons who have a Myna Insurance Card will also be sent a Health Insurance Eligibility Certificate by their municipal (ward) office of your residence when they newly join. (From August 2026, you will be sent a "Notice of Health Insurance Eligibility" instead of a Health Insurance Eligibility Certificate.)

When a person without a Myna Insurance Card turns 75 years old or moves to Saitama Prefecture, in general, they will be sent an Health Insurance Eligibility Certificate from their municipality of residence, so it is not necessary to apply for enrollment.

\*This information is accurate as at November 2025, and may be subject to change.

### **(2) Insurance Premium**

The insurance premium consists of the base premium which is paid by all members, and the income-based taxes and levies (reductions may be available). In general, the insurance rate is the same across Saitama Prefecture.

### **(3) Myna (My Number) Insurance Card, Health Insurance Eligibility Certificate (*Shikaku Kakuninsho*)**

If you do not have a My Number Card, or if you have one but it is not registered to be used as a health insurance card, you can continue to use your current Health Insurance Eligibility Certificate until its date of expiration.

If you have a Myna Insurance Card, please use the card reader at the reception of the medical institution when you go for an examination or treatment. If you have a Health Insurance Eligibility Certificate, please show it to the receptionist.

### **(4) Benefits**

- ① Medical Expenses: When you have an examination or receive treatment and show your Myna Insurance Card, valid health insurance card, or Eligibility Verification Certificate, you will pay 10% of the medical costs (20% or 30% depending on your income for individuals earning over a specified amount). The remaining cost is paid by the health insurance provider to the hospital or clinic.
- ② High-Cost Medical Expenses: When the upfront payments to a medical institution within one month exceed the threshold, you will be reimbursed the excess amount.

- 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 ward or municipality of residence, you will be reimbursed the amount you paid, minus the co-payment.
- a. When, due to unavoidable circumstances, you receive care at a medical institution without your Myna Insurance Card, or other proof of insurance;
  - b. When you undergo a blood transfusion (cost of blood);
  - c. When you pay for orthopedic equipment (brace, etc.) that is deemed necessary by a physician;
  - d. When you receive acupuncture, Chinese heat treatment (moxibustion), or massage treatments that are deemed necessary by a physician;
  - e. When you visit a bone-setter to receive medical treatment in the event of injuries such as sprains or bone fractures; or
  - f. When, due to unavoidable circumstances, 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).
- ④ Funeral: When an insured person dies and a funeral is held, a specified 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 National Health Insurance.

For more information regarding the Medical Care System for the Elderly, please contact the office at your ward or municipality of residence.

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## **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. Even if you do not have Japanese citizenship, you are generally required 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 municipality or ward of residence.

### **(1) Insurance Premiums**

- ① For people 65 and over, premiums are determined by their municipality of residence, 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 ward or municipality of residence.

## **(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 individuals with an income over a certain amount) of the cost of the services received.

### **(1) Medical Services Search System**

This system allows users to search for hospitals, health clinics, dentists, midwife centers, pharmacies, etc., throughout the country with various criteria online. Users can also search for hospitals that can provide services in foreign languages. (Machine translation of this website is available in English, Simplified and Traditional Chinese, and Korean.)

Medical Information Net (Navii)

Website: <https://www.iryuu.teikyouseido.mhlw.go.jp/znk-web/juminkanja/S2300/initialize>

### **(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 (when calling from the border area between Saitama and Tokyo using a rotary dial phone, IP phone, a fiber optic phone line, or mobile phone).

\*You can still continue to use the phone numbers below.

#8000 or 048-833-7911 (consultations 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 Consultations for children (emergency phone consultations for children)
- ② Consultations for adults (emergency phone consultations for adults)
- ③ Medical institution guidance (for both children and adults)

※ Please note, 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 people with hearing, speech or language impairments. Please download a request form from the Saitama Emergency Phone Consultations page on the Saitama Prefectural Government website.

### **(3) Saitama Prefectural AI Emergency Consultations**

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

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

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## **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 department you would like to go to for treatment.
- ② Follow staff instructions and go to the appropriate department.
- ③ You will be required to submit a form at the department's reception desk. Then, wait to see the doctor.
- ④ After your consultation with the doctor, pay at the cashier.
- ⑤ If you are prescribed medication by your doctor, you can either collect it from the pharmacy within the medical institution, or you can go to an external pharmacy and present the prescription to purchase the medication.

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## **10 Hospitalization**

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

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## 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 disability, or mental illness. It is broadly divided into two systems: legal guardianship and voluntary guardianship.

### (1) Legal Guardianship

- ① If an individual 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, an adult guardian can be appointed for them through a petition to a family court.

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 Consultations

Please contact the relevant division at your municipality of residence 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 In some cases, it is possible to petition a Japanese court to appoint a voluntary guardian for a foreign resident. Contact your nearest family court as outlined in ② for more information.