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1. What is the National Health Insurance System?

Even healthy people can fall ill or suffer an injury at any time. If you are ill or injured and need to visit a medical institution or a doctor and receive treatment, it costs money. It would be terrible if you could not do this because treatment was too expensive.

For this reason, everyone living in Japan must be covered by some type of public health insurance. In these health insurance systems, members contribute according to the level of their income to lighten the burden of medical expenses in the event of illness or injury. The insured (the enrolled) are obliged to pay premiums and consequently are entitled to receive treatment covered by the health insurance plan when sick or injured.

National Health Insurance (NHI) is one such system.

Please be sure to follow the proper procedures when you enroll (moving into the city) and withdraw (moving out of the city). If you wait too long to enroll or withdraw, you may not receive treatment at medical institutions covered by the insurance system or the insurance fees may not be calculated accurately. After receiving treatment, members pay a percentage of the expense at the accounts/reception desk of the medical institution depending on their age and income as explained below.

2. How NHI works

Each city, town and village runs an NHI system. The insurer (in our case, Nerima City) collects premiums from the insured (the members). When a member receives treatment, the insurer pays 70 to 80% of the expenses to medical institutions on behalf of the member. Members pay a percentage of the medical expense at the accounts/reception desk of the medical institution according to their age and income as written in the chart below.

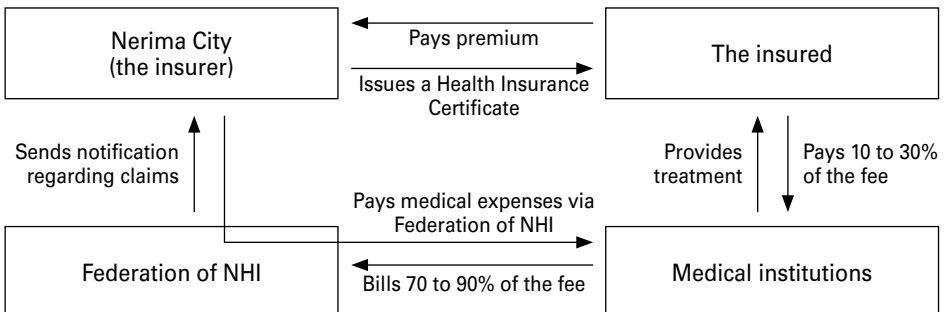
Age	Individual's Share
0 to 6 years old	20% ※ (1)
7 to 69 years old	30% ※ (2)
70 to 74 years old	20% (However, 10% until March 31, 2012) ※ (3)

* (1) If the member shows his/her Infant/Toddler Medical Certificate at the medical institution before receiving treatment, all fees will be covered by the insurance plan.

* (2) For children up to the third year of junior high school, there is no personally-borne expense if you show the medical institution your Children's Medical Certificate.

* (3)-1 The figure is 30% for those whose income is higher than the workforce average (taxable income of ¥1,450,000 or more) and those living in the same household. Those between 70 and 74 years old, are issued a Elderly Recipient Certificate, which explains what percentage the member should pay for medical expenses.

* (3)-2 However, some of those with personally-borne expense at 20% will be subsidized at 10% for medical treatment received from April 2011 to March 2012.



3. National Health Insurance certificate

(1) Take good care of your National Health Insurance certificate

The NHI certificate is a document proving that you are a member of NHI. You will need to show it when you receive treatment at a medical institution.

(2) The NHI certificate comes in the form of a card that is issued to each member

(3) Do not lend/borrow health insurance certificates

Never lend/borrow a health insurance certificate to/from another person. Such action is punishable by law.

(4) When using a medical institution

When you use a medical institution, please show your NHI certificate to the attendant at the reception desk. This will confirm that you are a member of NHI and can be treated under the scheme.

*To receive treatment under NHI, the medical institution you use must accept NHI.

If you receive treatment at an institution that does not accept NHI, you will not be able to use your NHI certificate and will have to pay all the expenses. (The majority of medical institutions do accept NHI.)

(5) Expiration

In October 2011, there will be a complete renewal of health insurance certificates, which takes place once every two years across Japan. The new health insurance certificate will be valid until September 30, 2013.

*For Enrollment of One Person Alone

Health insurance certificates are valid until September 30, 2011 (until September 30, 2013 for those from October 2011), or until the last date of the period of stay indicated on your visa, whichever comes first.

*For Enrollment of a Family (Two Persons or More)

Health insurance certificates are valid until September 30, 2011 (until September 30, 2013 for those from October 2011), or until the last date of the period of stay indicated on the visa of the family member with the longest period of stay, whichever comes first. Please note that even if there is time remaining in the certificate valid period, you will no longer be eligible for NHI past the deadline of period of stay indicated on your visa.

*If you have extended your period of stay, please bring your foreign registration card with the extended deadline written on it, and complete the appropriate procedures at the National Health Insurance and Pension Section of the Nerima City Office. If the valid period of your NHI certificate is to be changed (extended), then a new certificate will be processed and handed to you.

(6) National Health Insurance certificate

1. Check that the personal information (such as your name, address, date of birth, male/female, etc.) contained on your certificate is correct.
2. Go to **the National Health Insurance and Pension Section in Nerima City Office** to register any changes in the information contained on your certificate.
3. If your certificate is damaged or lost, apply for a new one to be issued.
4. If you no longer qualify for membership, return the certificate.
5. Only registered members are allowed to use the certificate .

(7) Medical care certificates for the elderly

Those between 70 and 74 years old are issued an Elderly Recipient Certificate.

Medical care certificates for the elderly can be used from the month following one's 70th birthday (the same month if the birthday falls on the 1st of the month). Please show this certificate together with your health insurance certificate when receiving treatment at a medical institution.

The "Percentage of Personally Borne Cost" will be either 20% (however, 10% until March 31,

2012) or 30%. Those living in the same household as someone whose income is higher than the workforce average must pay 30% of the cost at the medical institution. The standards are reconsidered every year on August 1, and a new medical care certificate for the elderly is issued.

*Those who are determined as having an income that is above average of the active workforce include those who have a taxable income subject to resident's tax for the applicable fiscal year of ¥1,450,000 or more and are National Health Insurance members who are 70 years old or older.

Inquiries: KOKUHO SHIKAKU KAKARI

4. Membership

(1) Those who must join National Health Insurance

By law, every registered foreigner residing in Nerima City (except those listed below) must join NHI. It is not up to the individual to decide to join the program or to withdraw.

(2) Those who cannot join National Health Insurance

Even though they are registered, those foreigners residing in Nerima City who fit in the following categories cannot join NHI:

1. Those who have joined, or can join, another public health insurance system (employees' health insurance programs or insurance program by the Japan Health Insurance Association and dependents of these program members)
2. Those receiving social security benefits
3. Those whose visa will expire in less than one year. (However, those who will be residing in Japan for more than one year for designated activities can join.)
4. Those with a medical services visa, and accompanying persons.
5. Those who are 75 years old or older (or 65 years old or older with a designated level of disability) must enroll in Latter-Term Elderly Medical Insurance.

(3) How to apply for membership

Those who must join NHI, must go to **the National Health Insurance and Pension Section in Nerima City Office** within 14 days of the following (Application cannot be processed at Shakujii Government Office, residents offices or branch city offices.):

1. Moving into Nerima City

You need to bring your foreign registration card.

(If this is being processed, please ask the staff at the Foreign Registration Section for a copy of your application form to bring to the National Health Insurance and Pension Section.)

2. Termination of membership in another public health insurance system

You need to bring your foreign registration card and a certificate showing you are no longer a member of the previous health insurance system.

3. Birth of a child

You need to bring your baby's foreign registration card, the parent's NHI certificate and maternity pass-book. (Please refer to page 28.)

4. No longer eligible for social security benefits

You need to bring your foreign registration card and notification of termination of social security benefits.

* You will be billed for membership from the day you were eligible to join the system, even if you apply late. Also, as a rule, you will have to pay the full cost of medical expenses incurred during that time.

(4) Visa extensions

Please notify the Foreign Registration Section, Nerima City Office after you extend your visa. Then, complete the necessary paperwork at the National Health Insurance and Pension Section. Your NHI certificate will not be valid during the period your old visa expired and informing the NHI Section of your visa extension. (See p. 4.)

Inquiries: KOKUHO SHIKAKU KAKARI

5. Withdrawing from the system

Within 14 days of the following, you must complete procedures to withdraw from the system at **the National Health Insurance and Pension Section in Nerima City Office** and hand over your Nerima City NHI certificate (Application cannot be processed at Shakujii Government Office, residents offices or branch city offices.) .

1. When leaving Japan

Please be sure to bring your NHI certificate and complete the stipulated membership withdrawal procedures. If you plan to leave Japan for a period of less than one year for leisure or business purposes and have obtained a re-entry permit, your membership is considered valid during the time spent outside Japan and insurance premiums continue to be charged. If you receive medical treatment overseas while your membership is valid, you are eligible to apply for the Overseas Medical Expenses benefit. (See p. 22.)

2. When moving out of Nerima City

Complete the change of address procedures and enroll in the National Health Insurance system at your new municipal office. After completing these procedures, return the Nerima City NHI certificate to Nerima City and enclose a photocopy of your new certificate.

3. Joining another public health insurance system (employees' health insurance programs or insurance program by the Japan Health Insurance Association)

(Please note: If you do not complete procedures to withdraw from NHI, you will be a member of both health insurance systems and, as such, charged premiums for both.)

You need to bring your foreign registration card and both health insurance certificates.

- * Even if you have health insurance for overseas students, belong to a life insurance plan that includes health insurance, or travel insurance that you signed up for in your home country, you cannot withdraw from NHI. (These types of insurance do not correspond to health insurance systems in Japan.)

4. Death

Lump-sum benefit for funeral will be paid. Please refer to page 28–30.

5. Commencement of social security benefits

You need to bring your foreign registration card and notification of commencement of social security benefits.

6. Upon turning 75 years old

Enroll in Latter-Term Elderly Medical Insurance. You do not need to complete any procedures.

7. Those 65 years of age or older who have been authorized as having a designated level of disability

Please bring your foreign registration card and Latter-Term Elderly Medical Insurance card.

- * If you move out of Nerima City, or join another public health insurance system (employees' health insurance programs or insurance program by the Japan Health Insurance Association), you are not allowed to use the Nerima City NHI certificate. If you do use it, you will have to pay the entire bill.

- * Please note that you cannot withdraw from the NHI program because the premiums are too expensive, or

because you do not use the NHI certificate.

Inquiries: KOKUHO SHIKAKU KAKARI

6. Other procedures

Within 14 days of the following, you must report to **the National Health Insurance and Pension Section in Nerima City Office**. You will need to bring your foreign registration card and NHI certificate. (Application cannot be processed at Shakujii Government Office, residents offices or branch city offices. Those who have completed foreign resident registration may file changes at Nerima Government Office also.)

1. Change of address within Nerima City
2. Change in the head of the household, or the individual's name
* Please report to the Foreign Registration Section first.
3. NHI certificate becomes damaged or lost

Inquiries: KOKUHO SHIKAKU KAKARI

7. Premiums

Premiums are calculated from the month a person becomes a member. When a person moves into Nerima City (arrives in Japan) or withdraws from another public health insurance system (such as an employees' health insurance program or insurance program by the Japan Health Insurance Association) and joins National Health Insurance, insurance premiums are billed from the time of eligibility for membership (the date you moved into the city or the date you withdrew from the other health insurance system).

Even if you do not receive medical treatment at a medical institution, you must pay the insurance premiums. In addition, as designated by law, insurance premium invoices and notification will be sent to the head of the household.

Originally, insurance premiums for the 23 cities of Tokyo, including Nerima City, were calculated by multiplying the resident's tax amount by an income percentage. However, since this formula is directly influenced by any revisions in the resident's tax system, there were cases in which the insurance premiums changed significantly from the previous fiscal year, even though there was no change in the income amount.

For this reason, the special city mayors' convention decided to switch to an "Adjusted Calculation Formula" which most of the insurers of National Health Insurance across Japan are currently using as a calculation method of insurance premiums starting from FY2011.

"Adjusted Calculation Formula" is a method of calculating using the income (adjusted income) that deducts necessary expenses such as public pension and the basic deduction from the gross income. This formula keeps insurance premiums stable as long as there is no change in the income and medical health insurance.

(1) How insurance premiums are calculated

The annual health insurance premium consists of (1) the medical treatment portion and (2) the letter-term elderly support portion and (3) the long-term care portion (only for those between 40 and 64 years of age). Each of these portions is the sum of (1) an income-derived amount based on the adjusted income amount and (2), a per capita amount for each household member.

Calculation of Premiums for Fiscal Year 2011

1. Premiums for the medical treatment portion for households that join the medical program

<p>(1) Income-derived amount for the medical treatment portion:</p> <p>Total adjusted income amount of all household NHI members x 6.13/100</p>	<p>(2) Per capita amount for the medical treatment portion:</p> <p>¥31,200 x number of NHI members in household</p>	<p>You pay:</p> <p>Premiums for the portion of medical treatment for the period from April to March of the following year: (Maximum amount: ¥510,000)</p>	Total amount = NHI premium
<h3>2. Premiums for the latter-term elderly support portion for households enrolled in National Health Insurance</h3>			
<p>(1) Income-derived amount for the latter-term elderly support portion:</p> <p>Total adjusted income amount of all household NHI members x 1.96/100</p>	<p>(2) Per capita amount for the latter-term elderly support portion:</p> <p>¥8,700 x number of NHI members in household</p>	<p>You pay:</p> <p>Premiums for the latter-term elderly support portion for the period from April to March of the following year: (Maximum amount: ¥140,000)</p>	
<h3>3. Premiums for the portion of Long-term Care only for households with Category 2 subscribers (40 to 64 years of age)</h3>			
<p>(1) Income-derived amount for the Long-term Care portion:</p> <p>Total adjusted income amount of all category 2 members x 1.41/100</p>	<p>(2) Per capita amount for the Long-term Care portion:</p> <p>¥13,200 x number of Category 2 subscribers in the household</p>	<p>You pay:</p> <p>Premiums for the Long-term Care portion for the period from April to March of the following year: (Maximum amount: ¥120,000)</p>	

Concerning the Insurance Premium Control Measure with the Switch to the Adjusted Calculation Formula

The following deductions apply to the calculation of the adjusted income, which serves as the base for calculating the income-derived amount for National Health Insurance premiums:

- (1) Those exempt from resident's tax
75% will be deducted from the adjusted income
- (2) Those with a taxable income of ¥1,000,000 or less, and if the adjusted income is over 1.5 times the taxable income
50% of the difference between the adjusted income and the amount exceeding 1.5 times the taxable income, will be deducted
- (3) Those with a taxable income of over ¥1,000,000, and if the adjusted income is over 1.5 times the taxable income
25% of the difference between the adjusted income and the amount exceeding 1.5 times the taxable income, will be deducted

What is Adjusted Income?

Adjusted income is the income amount used for calculating the income-derived amount of insurance premiums. Adjusted income is amount remaining after the basic deduction of ¥330,000 is subtracted from the gross income, forestry income, and long-term (short-term) capital gains earned during the previous year. (However, carryover deductions of miscellaneous losses are not deducted.)

When you join or withdraw from the NHI system in the middle of the fiscal year:

Premiums will be calculated on a monthly basis.

Number of membership months/12 x the premium for the fiscal year.

(2) Premium notifications

Insurance premium notification forms are mailed in June, after the yearly premium is calculated based on the applicable income amount (adjusted income), which is finalized in June. Since insurance premiums are paid in 10 installments from June through March of the following year, no payments are made in April and May. If changes occur during the fiscal year in June or thereafter—such as joining, withdrawing or readjustments to the income amount, then the insurance premium will be adjusted accordingly and another notification form will be sent.

However, if the insurance premiums before the previous fiscal year change, notification forms will be sent in April or May.

(3) Premium readjustments

If your premiums change due a change in the number of household members that are members of the insurance plan or if your the applicable income amount (adjusted income) is readjusted you will be sent a notice of change. If it turns out that you have overpaid, you will receive a refund; if you have underpaid, you will be invoiced accordingly.

*** Regarding refunds**

You will receive a refund notice by mail. For more information on the procedures, please read “Refund of Premiums” on page 18.

*** Additional balance due**

After recalculation, you will receive a payment slip in the mail. In this case, please use the new slip to pay the insurance premiums starting with the month marking the change.

(4) What happens to the premium when you withdraw?

Premiums must be paid up to the month prior to the date of withdrawing from the National Health Insurance system. (For details concerning the method of calculation, please see above.) If there is a balance due as a result of calculations, you may have to pay insurance premiums even after you are no longer enrolled. If members withdraw in April or May, they will be invoiced for the applicable months of membership in June or thereafter.

If members move to another country or return to their home country in the middle of the fiscal year, they may have to pay whatever balance is due when they complete the withdraw procedures.

Inquiries: KOKUHO SHIKAKU KAKARI

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8. Reduction in and exemption from paying the premium

(1) Exemption

If you are temporarily suffering financial hardship due to special circumstances such as a disaster, and cannot pay the premium, please consult us. Depending on your circumstances, you may be given a reduction in or an exemption from paying the premium. This will be effective from the month after you applied (Maximum of premium for 3 months can be exempted per year.).

(2) Reduction in the per capita amount (reduction due to an ordinance)

If your household income for 2010 (between January and December) was below a certain amount, you may be eligible for programs that reduce the per capita amount of the insurance premium by 70, 50 or 20%. Insurance premiums for those who are eligible for these programs (as judged from the filed tax report) are automatically reduced.

Since those who have not filed a tax report will not be eligible for a reduction, please be sure to file a tax report.

(Those who cannot file their resident's tax report (for reasons such as living abroad as of January 1) should submit "National Health Insurance Premium-Related Report (Simplified Report)." The premium will be deducted if you are eligible for the reduction.)

(3) Reduction for those who are unemployed involuntarily

For those who became unemployed because of bankruptcy or layoff, insurance premiums may be reduced. Those 64 years of age and younger who are involuntarily unemployed due to layoff with an "Employment Insurance Recipient Certificate" issued by Hello Work, should bring their health insurance card and their "Employment Insurance Recipient Certificate". Please complete the designated procedures at the **National Health Insurance and Pension Section of Nerima City Office (Nerima Government Office)**.

Inquiries: KOKUHO SHIKAKU KAKARI

9. Paying the premium

(1) Using the payment slip

Payment slips are mailed to you twice a year: once in June (covering the June to October period, or you can make a lump-sum payment covering June to the following March), and once in November (covering the November to March period). You can pay your premiums at Nerima City Office, Shakujii Government Office, Hikarigaoka Residents Office, Oizumi Residents Office or a branch office, or any nearby financial institution, post office or convenience stores (including "mobile regi*" mobile cash desk). Premiums must be paid by the last day of each month. (If financial institutions are closed on the last day of the month, then the deadline is extended to the next business day.) Payment slips are not sent to households which pay the premium by bank transfer.

If you lose your payment slips, bring documentation showing your NHI ID number (your NHI certificate or a premium payment receipt, etc) to Nerima City Office, Shakujii Government Office, Hikarigaoka Residents Office, Oizumi Residents Office or a branch office and you will be able to pay your premium there. In addition, payment slips can be mailed to you again if you contact the Nerima City Office.

*What is "Mobile Regi" Mobile Cash Desk?

This is a method of paying premiums by reading the bar-code on the insurance premium payment slip with your cell phone and using mobile banking services. For details, please refer to the Nerima City website.

Only payment slips with a bar-code printed on the front can be paid at convenience stores.

(2) Bank transfer

This procedure is the most convenient. The premium will be automatically debited from your account on the last day of each month. (If this day is a holiday for your particular financial institution, the premium will be debited on the next business day.) Be sure that you deposit enough money into your account no later than the business day before the premium is deducted.

[How to have premiums deducted from your bank account]

1. If applying by using an application form

Complete the application form available at Nerima City Office, Shakujii Government Office, Hilarigaoka Residents Office, Oizumi Residents Office or branch office; stamp it with the same stamp (or signature) you used to open your bank account; and send it to the City Office. If you call the City Office, an application form can be mailed to you.

2. If you are applying at the bank or post office

Bring (1) your bankbook, (2) the name stamp (or signature) you used to open your account and (3) your NHI certificate or payment slip.

(3) Special Collection (Deducted from Public Pension)

This is a system by which National Health Insurance premiums are deducted from the pension. There are designated requirements for special collection. Those who are eligible will be notified in advance. Those who are eligible for special collection can choose between having the premiums debited from their financial account, or deducted from their pension (special collection).

Refund of Premiums

If you paid premiums in excess of the charged amount, the city will refund the excess to your bank account. Nerima City will send a notification to overpaid individuals. If you received the notification, please fill it in and send it back to the city. It takes about one to two months to transfer to your bank account after receiving it by Nerima City.

Inquiries: KOKUHO SHUNO KAKARI

(4) For individuals who cannot pay their insurance premiums

If you are unable to pay the insurance premium, please consult the Kokuho Seiri Kakari as early as possible. If you do not inform the City Office that you may be late in paying the premium, or if you do not pay the premium for a long period without reason, the period your NHI certificate is valid may be shortened, your insurance benefit may be limited, or your property may be seized. (In some cases, city office personnel may visit you for to request or collect payment).

• If you have not paid your insurance premiums for one year or longer

You will be asked to return your health insurance certificate to the City Office, and in its place, you will be issued a Proof of Eligibility Certificate. During this period, you must temporarily pay all medical costs, and then apply for a refund to cover the portion picked up by the insurance program.

However, the refund may be applied to the balance owned on your unpaid premiums.

Inquiries: KOKUHO SEIRI KAKARI

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10. Insurance benefits

When you are ill or injured, you can receive the necessary treatment at a medical institution which accepts NHI (the vast majority of medical institutions accept NHI). When you receive treatment, pay 10 to 30% of the medical expenses at the reception/accounts desk. The other will be paid by Nerima City.

If you do not show your NHI certificate, you will have to pay the full amount.

If you use a NHI certificate even though you have moved out of the city or are no longer eligible to be a member because your visa expired, etc., Nerima City will bill you for all expenses the city covered on your behalf.

Furthermore, using someone else's NHI certificate will be reported to the police.

Inquiries: KOKUHO KYUFU KAKARI

11. Treatment not covered by insurance

The following treatments are not covered by insurance, so you will have to pay the full amount:

1. General medical checkups and complete physical examinations (ningen dokku)
 2. Inoculations/preventative vaccinations
 3. Normal pregnancy and delivery
 4. Cosmetic surgery or treatment
 5. Work-related injuries or diseases (these are covered by the workers' accident compensation insurance plan)
 6. Injuries or illnesses that are the result of criminal or intentional actions of the insured
- * Insurance payments are limited for injuries and illnesses resulting if the insured member was in a fight or drunk.

Inquiries: KOKUHO KYUFU KAKARI

12. Medical expenses

In the following cases, the insured must initially pay full cost, however, a portion will be refunded after filing an application. This program is limited to those who are approved by an inspections committee. The term of application is for two years from the day after payment of medical expenses is made and the applicant should be a householder. It will take three months for the refund to be paid after application.

- (1) If you receive medical treatment when you do not have your NHI certificate because of an emergency or for similar reasons.
- (2) If you purchase medical items, such as a brace or corset, on the recommendation of a physician.
- (3) If you receive acupuncture, moxa treatment, massage, etc. on the recommendation of a physician after undergoing conventional treatment without result. (Please inquire in advance.)

[To apply]

In addition to the application form (available at Kokuho Kyufu Kakari), you will need the following documents in addition to the NHI certificate, the head of household's financial account number and a name stamp:

If you fall under no. (1) above: you will need (a) a medical fee receipt for the general medical/den-

tal examination or prescription; (b) relevant receipts (copies are available). * If you do not have any invoices as described in (a), you will be given a Nerima City-designated form on which you will need to write all relevant information, such as the name of the medical facility where you received treatment.

If you fall under no. (2) above: you will need (a) A physician's letter recommending the medical apparatus (examination certificate is also acceptable); (b) relevant receipts (issued by the manufacturer describing the merchandise).

If you fall under no. (3) above: you will need (a) a physician's note (describing the name of the illness, symptoms, dates of illness and date of first treatment); (b) relevant receipts (copies are available); (c) an invoice for the treatment fee.

Overseas medical expenses

You can receive insurance benefits for medical treatment received for injuries and illnesses while overseas if your membership of the National Health Insurance in Nerima City is active. National Health Insurance may be applicable for medical treatment received for injuries obtained and illnesses contracted while overseas, if the medical service is recognized as a standard health insurance service in Japan. In such a case, you would have to pay the initial bill and, upon re-entering Japan, could apply for a refund for the portion that is usually paid by the insurance program. However, those who travel overseas for the specific purpose of receiving medical treatment are not eligible to avail of this benefit.

[To apply for a refund]

In addition to the application form (available at Kokuho Kyufu Kakari), you will need the following documents:

- 1) Documentation describing the type of medical treatment, such as a Detailed Statement of Medical Treatment (If the document is written in a foreign language, then a Japanese translation is required.)
- 2) Invoices and receipts (If the document is written in a foreign language, then a Japanese translation is required.)
- 3) NHI certificate
- 4) Copy of the head of household's financial account number
- 5) Head of household's regular name stamp (signature of the head of household is also permitted)

Please ask for Detailed Statement of Medical Treatment and Invoices at the Kokuho Kyufu Kakari.

Transport to a hospital or medical facility

As a rule, hospitalization or transferring to another hospital is done under instructions and in agreement with a physician. In addition, transportation expenses are provided if all the following conditions are met and if the inspections committee approves the expense:

- (a) The NHI must approve of the reason for the transfer for treatment.
- (b) It is difficult to transport the patient due to the nature of the illness or injury.
- (c) Emergencies or other unplanned incidents.

[To apply for transport expenses]

In addition to the application form (available at the Kokuho Kyufu Kakari), the following documents are required:

- Physician's letter recognizing the need for transportation (Nerima City-designated form)
- Receipt from the vehicle used

- NHI certificate
- Copy of the head of household's financial account number
- Head of household's regular name stamp (signature of the head of household is also permitted)

Inquiries: KOKUHO KYUFU KAKARI

13. High medical expenses

If you incur high medical costs, such as for hospitalization, it is possible to receive a partial refund as a High Medical Expense benefit. However, medical costs are calculated for the month of treatment (in one-month units), and costs incurred in other months may not be included. In addition, in-patient and out-patient expenses are handled separately. For those who are 69 years of age or younger, personally-borne expenses under ¥21,000 cannot be included. Furthermore, expenses not covered under the NHI system, such as for certain beds and meals, may not be included.

The term of application is for two years from the day after payment of medical expenses is made and the applicant should be a householder.

[To apply]

Three or four months after treatment, a notice is sent to those who are eligible to receive refunds for high medical expenses. Please follow the instructions that are included on the notice.

* Please keep your receipts.

The designated amount of personally-borne medical costs for one month varies according to the income of the household as described in the chart below.

For households with members who are under 70 years old

Number of People	Households exempt from resident's tax	Households that pay resident's tax, General Households	Households that pay resident's tax, High Income Households*
Up to three bills that can be considered "High Medical Expenses."			
For the same household (this also applies to one-person household)	¥35,400	¥80,100 + (1% of the difference, if total medical fees exceed ¥267,000.)	¥150,000 + (1% of the difference if total medical fees exceed ¥500,000.)
From the fourth bill that can be considered "High Medical Expenses" in the past 12 months.			
For the same household (this also applies to one-person household)	¥24,600	¥44,400	¥83,400

* "High Income Households" refers to those households whose total income after basic deductions is over ¥6,000,000. Please note that households with members who do not file an income tax report are considered "high income earners."

• The calculation method of the personally-borne expense ceiling is different for households with

members who are 70 years old or older than for households with both members who are under 70 years old, or for households with members who are both older and younger than 70 years old. Please call for more information.

For those who are having difficulty paying medical expenses

It takes approximately five to six months from the time you receive medical treatment to receive a refund for high medical expenses. If it is difficult for you to bear the cost, please consult us.

○For those whose medical expenses may be high due to hospitalization

By submitting your Maximum Amount Authorization Certificate, you will not be charged the usual partial expense (30%), but rather the designated maximum amount permissible during hospitalization, in addition to the cost of meals. However, you must pay for expenses not covered by the NHI system. To obtain Maximum Amount Authorization, you must complete the designated application procedures. Please call for more information.

○For those who paid high medical expenses for hospitalization and out-patient treatment

Financial loans for high medical expenses are available. Please call in advance as this system operates on a reservation basis.

- Benefit amount: 80% or less (85% in some cases) of the estimated high medical cost
- Interest: None

14. Fees for meals while hospitalized

You will be charged part of the cost for each meal while hospitalized (standard personal expense: ¥260). The NHI will pay the remainder of the cost.

If all members of the household are exempt from paying resident's tax, all household members are eligible for a reduction in meal expenses while hospitalized (¥260, before deductions) in accordance with Chart (1) and (2) below, by applying for a Maximum Amount/Standard Personally-Borne Amount Reduction Authorization Certificate.

Even if authorization is not received before receiving hospital treatment, personally-borne expenses incurred during hospitalization can be retroactively reduced as high medical expenses. However, since the cost of meals during hospitalization cannot be retroactively reduced without prior authorization, please apply for authorization upon being admitted to hospital.

(1) Maximum Personally-Borne Expense/Meals Expense for Those 70 to 74 Years Old

Income Category		Cost for Meals/meal		
		Type of Illness	General	Recuperation*
Households that are taxed		Regardless of hospitalization period	¥260	¥460 (or ¥420)
Households exempt from Resident's Tax	Low Income Earner II	Up to 90 days of hospitalization	¥210	¥210
		From 91 days of hospitalization	¥160	
	Low Income Earner I	Regardless of Hospitalization Period	¥100	¥130

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(2) Meals Expense for Those under 70 Years Old

Income Category	Cost for Meals/meal		
	Type of Illness	General	Recuperation*
Households that are taxed	Regardless of hospitalization period	¥260	¥460 (or ¥420)
Households exempt from Resident's Tax	Up to 90 days of hospitalization	¥210	¥210
	From 91 days of hospitalization	¥160	

* In the case of hospitalization of those 65 years old or older for recuperation, a separate personally-borne cost of ¥320 per day is incurred as a residence fee in addition to the meals expense (for ingredients and preparation). Please call for more information.

In the cases of (1) and (2), if the 12 month hospitalization term (including the month of application) exceeds 90 days, re-application is required for a fee deduction for households exempt from resident's tax. Please call in advance.

Inquiries: KOKUHO KYUFU KAKARI

15. High Medical Expense and Nursing Care Total Program

If there are personally-borne expenses for medical treatment and nursing care during the year, and if the total exceeds the designated ceiling for the household, then the difference is reimbursed according to the percentage of the personally-borne amount for NHI out of the total amount. Please call for more information.

Inquiries: KOKUHO KYUFU KAKARI

16. Lump-sum allowance for childbirth and funeral benefits

Childbirth and funeral benefits are paid to Nerima City NHI subscribers.

1. If You Want to Use the Direct Payment System of Lump-sum Benefit for Childbirth

Please show your NHI certificate to the medical institute where you intend to give birth and make application to use the system. The NHI office will pay the Lump-sum Benefit for Childbirth directly to the institute.

2. If You Want to Use the Proxy Recipient System of Lump-sum Benefit for Childbirth (Advance Notification is Required)

By completing designated procedures in advance, you can have your Lump-sum Benefit for Childbirth paid directly from NHI to the medical institute.

Since an application must be filed in advance, please notify Kokuho Kyufu Kakari two months before your due date.

If you are unable to take advantage of the above-mentioned System 1 or 2, if the cost of delivery using System 1 was less than ¥420,000 and there was a difference from the benefit, or if you gave birth abroad (*1), please inform Kokuho Kyufu Kakari to make special arrangements.

In addition, if you are scheduled to give birth at a medical institute where System 1 or 2 cannot be used, you can still take advantage of the Childbirth Expense Loan System. Please call for more information.

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Category	Benefit Amount	Applicant	Necessary Documents
Childbirth Lump-sum Benefit	¥420,000	Head of the household	NHI certificate, name stamp of the head of household (*3), maternity passbook (which proves the birth registration) or birth certificate, and the head of household's financial institution passbook, the agreement document on the Direct Payment System, and receipts/breakdown statement for childbirth. (*1) The agreement on Direct Payment System is not required. (*2) A medical certificate instead of the maternity passbook.
	The same benefits apply for stillbirths and miscarriages of pregnancies 85 days or more (*2).		
Funeral Benefit	¥70,000	Person responsible for funeral	NHI certificate, funeral bereavement card or relevant receipts for the funeral with the name of the person responsible, name stamp of the person responsible (*3) and the financial institution passbook of the person responsible for paying for the funeral.

(※ 3) The signature of the head of household or the person responsible for the funeral is also accepted when the person files the application in person.

Eligibility for these benefits depends on the NHI subscription period, so please call in advance.

* The application period is two years from the following day the child was born or the date the funeral was held.

* If required documents, such as birth certificates, are written in foreign languages, they must be submitted with Japanese translations.

* The amount of lump-sum allowance is as of April 2011.

17. When you are involved in a traffic accident (injuries resulting from the actions of a third party)

Traffic accidents (including bicycle accidents) and accidents which cause injury for which you are not responsible are called “injury by a third party.”

If the injured person is not at fault, the costs for treating the injury (medical expenses) are borne by the person who caused the injury. Also, if the injured person is somewhat at fault, the person who is mainly responsible for the injury pays according to the percentage of responsibility.

The NHI certificate can only be used in the following situations:

- 1. The police are notified immediately after the accident/incident occurs**
- 2. The Nerima City National Health Insurance and Pension Section is notified (by telephone) and asked whether it is all right to receive medical treatment with the NHI certificate before treatment is received at a hospital.**

In this program, Nerima City NHI temporarily covers the cost which the person causing the injury is responsible for according to the percentage of responsibility, so that the injured person can receive medical treatment. Nerima City NHI will later recover the cost for medical treatment from the person who caused the injury.

Inquiries: KOKUHO KYUFU KAKARI

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18. When you are unable to pay your medical expenses

Whenever you are treated at a hospital or clinic, you need to pay a portion of the medical cost. However, if due to unusual circumstances, such as a disaster or even when all family members help pay the cost of medical treatment, and the fees still cause financial difficulty for your daily livelihood, the family can apply for a reduction or exemption in premiums for a maximum of three months. You must apply in advance to take advantage of this program.

Inquiries: KOKUHO KYUFU KAKARI

19. Long-term Care Insurance

The Long-term Care Insurance Program is a program in which society as a whole supports nursing care services, due to the acute increase in the number of elderly people and the growing number of elderly people who need nursing care.

Everyone who is 40 years old or older is considered a member of this insurance plan, and nursing care benefits are allocated upon approval from the City Office.

Membership is divided according to age: Category 1 Subscribers and Category 2 Subscribers.

Members whose need is approved for nursing care or support can receive nursing care service by paying 10% of the cost for care.

	Category 1 Subscribers	Category 2 Subscribers
Who can enroll	Those who are 65 years old or older	Those who are between 40 and 64 years of age, and are members of a medical health insurance plan
Who can receive service	Those who are certified as needing nursing care or assistance	Those certified as needing nursing care or assistance due to a specified disease associated with aging
How to pay premiums	For those who receive an old age-, retirement- or bereaved family- pension of ¥180,000 or more per year, the premiums are deducted from the pension. For others, the premiums are paid individually	Long-term Care Insurance premiums are included in the medical health insurance premiums and billed together.*

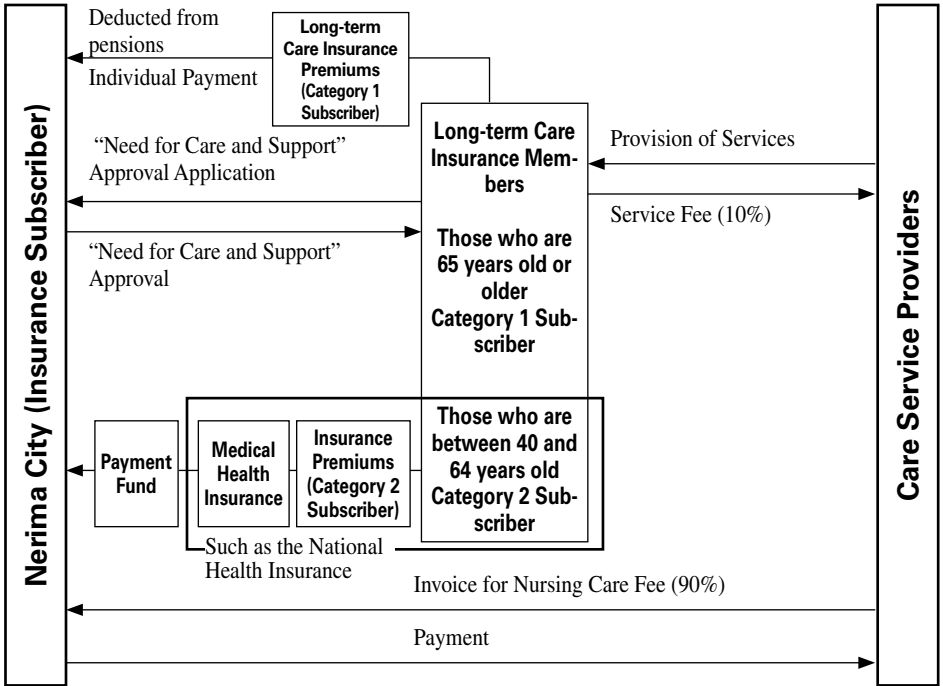
* For those who are enrolled in the National Health Insurance program

You will be sent a bill for Nursing Care insurance premiums from the month of your 40th birthday. You will be required to make payments from the following month.

Until the month before your 65th birthday, Nursing Care insurance premiums are added and then divided into 10 payments.

(From the month of your 65th birthday, you should pay Long-term Care Insurance premiums as a Category 1 Subscriber to the Long-term Care Insurance Section)

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To take advantage of Long-term Care services, you must file an application with Nerima City and obtain “Need for Nursing Care” approval. For more information, please contact the **Long-term Care Insurance Section**.

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