

NATIONAL HEALTH INSURANCE GUIDEBOOK

—2019—

English version

NERIMA CITY

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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, to lighten the burden of medical expenses in case of an illness or injury as much as possible, a system of mutual aid was developed in Japan in which people pool their finances on a regular basis according to the level of their income. This is Japan's health insurance system. The members (the insured) 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.

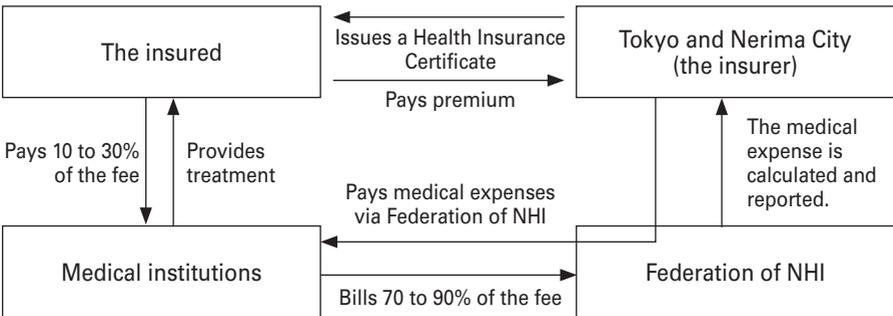
Please be sure to follow the proper procedures when you enroll and withdraw. If you wait too long to enroll or withdraw, you may not receive treatment at medical institutions covered by the insurance system or the insurance fees may not be calculated accurately.

2. How National Health Insurance works

Each city, town and village (Nerima City in this case) cooperates with the prefecture it is located in (Tokyo in this case) to run the local NHI system.

Tokyo primarily handles the fiscal management of the system. Nerima City handles services pertaining to membership applications and withdrawals, issues health insurance certificates, sets and collects premiums, and pays the medical expenses of members from the premiums collected from all NHI members and subsidies received from Tokyo.

When a member shows his/her health insurance certificate when receiving treatment at a medical institution, he/she only needs to pay a portion of the medical expenses. NHI pays the remaining portion of the expenses to medical institutions.



* To heads of households who are not National Health Insurance members

Japan's National Health Insurance is a system that treats households as units and is based on the National Health Insurance Act. This law designates the head of the household as the representative of the household responsible for completing such procedures as applying for enrollment, filing various notification forms, and paying insurance premiums.

Thus, please note that even though the head of the household may not be a NHI member, the notification and insurance premium invoices are mailed to him/her in accordance with the NHI Act, Articles 9 and 76. Only the premiums for NHI members will be calculated and charged.

3. National Health Insurance procedures after the launch of the individual number (“My Number”) system

For any procedures related to the NHI, please bring documentation that shows your individual number (see 1. below) and some form of official personal ID (see 2. below).

If a proxy (excluding anyone from the same household) is to complete the procedure, he or she will need a letter of proxy. Please inquire in advance.

1. Documentation that shows the individual numbers of the head of the household and all household members that require notification

Individual number card or individual number notification card

2. The person submitting the documents must also present some official personal ID

Individual number card, residence card, special permanent resident certificate, passport, etc.

4. Membership

Those to whom (1) applies must complete enrollment procedures within 14 days, bringing the required documents for the procedures along with 1) documentation that shows the individual numbers of the head of the household and all household members that require notification and 2) some official personal ID of the person submitting the documents listed in 3. above.

*You will be billed for membership from the day you were eligible to join the system, even if you apply late. In addition, you must bear the entire cost of medical expenses during this time, except in cases when the delay in filing for enrollment was unavoidable.

(1) Those who must join National Health Insurance

By law, every registered resident of Nerima City (except those listed in (2) 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

The following persons are not eligible for enrollment in NHI even though they may be registered residents of Nerima City. Those with a certificate issued by a country with a social security agreement with Japan do not need to enroll.

1. Those who have joined, or can join, another public health insurance system, such as employees' health insurance programs
2. Those whose visa category is “designated activities” for “medical stay,” “daily life assistants of those staying for medical reasons” or “sightseeing/convalescence”
3. Those with a visa period of stay of three months or less. (However, those with a visa for “entertainer,” “technical intern training,” “dependent,” or “designated activities” [except for “medical stay” and “sightseeing /convalescence”] who have official documents indicating that they are going to stay in Japan for more than three months are eligible for enrollment.)
4. Those with a visa status of residence that is “short-term,” or “diplomat.”
5. Those receiving social security benefits
6. Members of the Latter-Term Elderly Medical Insurance plan (75 years old or older or 65 years old or older with a designated level of disability)

*** Optional continuation insurance system**

When someone with health insurance from his/her place of employment retires, he/she can opt to continue that enrollment instead of enrolling in NHI for two years (as a rule).

The premiums are different than for NHI. For inquiries and procedures for the optional continuation insurance system, please ask the health insurance union you are currently enrolled in or

the Japan Health Insurance Association.

Please note that the enrollment application period for the optional continuation insurance system is within 20 days after retirement, and must be strictly observed. If you are eligible, please consider this plan in advance and completed the designated procedures.

*** To those moving out of Nerima City because they are entering a school or institution**

When a Nerima City NHI member moves out of Nerima City because he/she is entering college or high school, or being institutionalized in a child welfare facility, etc., he/she will continue to be a Nerima City NHI member. Please be sure to bring your NHI certificate and any documents required—such as a student enrollment or admission certificate—and complete the designated procedures at Kokuho Shikaku Kakari service counter.

*** Date of enrollment in National Health Insurance**

1. Date of moving into Nerima City (entering Japan)
2. Date of termination of membership in another public health insurance system, such as the health insurance plan of your place of employment
3. Date of birth of a child
4. Date of loss of eligibility for social security benefits
5. Date of acquiring a mid- or long-term stay status of residence

*** Required documents for enrollment**

1. Moving into Nerima City (entering Japan)
Please file a notification of moving into Nerima City for your residence record at your local residents office. If you have a visa for “designated activities,” the relevant document of your passport will be checked to make sure it is not for a medical stay, assisting those staying for medical reasons, or for sightseeing/convalescence.
2. Termination of membership in another public health insurance program, such as the place of employment
You need to bring a certificate showing you are no longer a member of the previous health insurance system.
3. Birth of a Child (Please refer to the section about lump-sum allowances for childbirth on page 15.)
The parent must bring his/her NHI certificate and the maternity passbook.
* Enrollment in NHI can be completed since residence record procedures can be done even without a visa for up to 60 days after the date of birth. However, since the residence record will be deleted after 60 days, NHI eligibility will be lost. Please complete the necessary procedures to acquire the child’s visa status of residence within 30 days.
4. Loss of eligibility for social security benefits
You need to bring your Social Security Benefits Termination Certificate.
5. Acquiring a mid- or long-term stay status of residence
Please complete the designated procedures to register your address at the local residents office.

(3) Reception Counter

Please complete the designated procedures at Kokuho Shikaku Kakari (Nerima City Office Main Bldg. 3F), Kokuho Shakujii Kakari (Shakujii Government Office 2F), or local residents office (excluding Nerima and Shakujii).

* The NHI certificate will be mailed to the head of your household by simple registered mail about one week after the NHI enrollment application is filed. (Please make sure the name plate at the entrance of your home or on your mailbox shows your name.)

* If you would like an NHI certificate issued on the same day, please bring your residence card, special permanent resident certificate or passport and complete the designated procedures at Kokuho Shikaku Kakari or Kokuho Shakujii Kakari.

(4) Visa extensions

If the visa you had at the time of enrollment is not extended, you will lose your NHI eligibility the day after your visa period of stay expires. A new NHI certificate will be mailed by simple registered mail to you when your visa is officially extended. However, please consult Kokuho Shikaku Kakari (Nerima City Office Main Bldg. 3F) in the following cases:

If your health insurance certificate expires before your visa extension has been finalized

Please bring your residence card and your passport that shows you have filed an application, as well as your health insurance certificate, and ask for advice on extending the valid period of your health insurance certificate (maximum of two months).

If your new residence period of stay becomes short-term or three months or less

Please bring your passport, as well as your health insurance certificate, and ask for advice.

If there is a short-term between your current status of residence and your newly acquired status of residence

Please bring your residence card, your passport, and your health insurance certificate, and complete the designated procedures for continuing your NHI membership during the short-term.

Inquiries: KOKUHO SHIKAKU KAKARI

5. Withdrawing from the system

Within 14 days of the following, you must complete procedures to withdraw from the NHI system and return your Nerima City NHI certificate. Bring the required documents, along with 1) documentation that shows the individual numbers of the head of the household and all household members that require notification and 2) some official personal ID of the person submitting the documents listed in 3. on page 3.

- * Please note that if you delay completing the withdrawal procedures, you will continue to be invoiced for insurance premiums. If you delay withdrawal for one year or longer, the premiums you paid may not be adjusted later. In addition, if you continue to use your NHI certificate for medical treatment, you must pay back the amount NHI pays for medical expenses at a later date.
- * 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.

*** Date you withdrew from the National Health Insurance plan:**

1. The day after you leave Japan
2. The date you move out of Nerima City to another municipality in Japan
3. The date after you join another public health insurance system, such as an employees health insurance program (or the day of enrollment, in the case of an NHI union)
4. The day after the date of death
5. The day social security benefits commence
6. The day after your 75th birthday (you will automatically be transferred to the Latter-Term Elderly Medical Insurance [see page 25])
7. The day after those who are younger than 75 years of age enroll in Latter-Term Elderly Medical Insurance
8. The day after your visa period of stay has expired, or the day after residence records have been deleted upon notification from the Immigration Bureau

* Required procedures for withdrawal

1. When leaving Japan
Before leaving Japan, please complete the designated notification procedures for moving out for the residence records at the residents office.
If you do not file a notification that you are leaving Japan, your membership will continue while you are overseas, and health insurance premiums will continue to be charged. When you re-enter Japan, a loss of membership cannot be backdated. If you receive medical treatment while overseas, please see page 11 concerning the overseas medical expense system.
2. When you are moving out of Nerima City
Please complete the designated notification procedures for moving out for the residence records at Nerima City Office, and the designated notification procedures for moving in at the residence records desk of the municipal office administering your new address. Your Nerima City NHI membership will be withdrawn on the date you move to your new address.
You will be sent a notification concerning the calculation of your health insurance premiums at your new address.
3. Joining another public health insurance system, such as employees' health insurance programs
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. Please bring the health insurance certificate for the program you have just enrolled in at your place of employment (for all family members enrolled), as well as your Nerima City NHI certificate(s), and complete the designated procedures.
4. Death
No procedure is required. Lump-sum benefit for funeral will be paid. (Please refer to page 15.)
5. Commencement of social security benefits
Please bring notification of commencement of social security benefits or Social Security Benefits Recipient Certificate and complete the designated procedures.
6. Enrollment in Latter-Term Elderly Medical Insurance
 - (1) The day after your 75th birthday. No procedure is required. You will automatically be transferred to Latter-Term Elderly Medical Insurance (see page 25).
 - (2) Those 65 years of age or older who have been authorized as having a designated level of disability
Please bring the slip that was issued to you when you completed procedures for Latter-Term Elderly Medical Insurance, or your Latter-Term Elderly Medical Insurance card, and complete the designated procedures.
7. When your visa has expired, or has been changed to short-term stay and your residence record has been deleted
See page 5 concerning visa extensions.
*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

In any of the following cases, please bring either your residence card or special permanent resident certificate and complete the designated notification procedures at local residents office within 14 days.

1. Change of address within Nerima City
2. Change in the head of the household
3. Change in nickname

Inquiries: KOKUHO SHIKAKU KAKARI

7. 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. Please be careful not to lose your NHI certificate.

(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) Please be sure to show your NHI certificate when receiving treatment at 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

The health insurance certificate is renewed every two years. The expiration date of the current certificate is September 30, 2019, except for the following cases:

- For Enrollment of One Person Alone
Health insurance certificates are valid until September 30, 2019 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, 2019 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.
- Enrolling Newborn Children Who Do Not Have Visas
Your baby's health insurance certificate is valid until the sixtieth day after birth. Please apply for a visa for him/her within thirty days. Once the Kokuho Shikaku Kakari confirms that your child

has obtained a visa and is eligible for NHI, a new health insurance certificate will be prepared and mailed to you. New health insurance certificates are valid until September 30, 2019, or until the end date of the visa of the family member with the longest period of stay, whichever comes first.

* If you have extended your period of stay, please see the section on visa extensions on page 5.

If you are behind on your insurance premium payments

If you are behind on your insurance premium payments, the period of validity of your NHI certificate may be shortened. Please also see the section “For individuals who cannot pay their insurance premiums on page 23.

(6) Reissue or Return of Your Health Insurance Certificate

If your certificate is damaged or lost, apply for a new one to be issued. In order to do so, bring 1) documentation that shows individual numbers of the head of the household and all household members that require notification and 2) some official personal ID of the person submitting the documents listed in 3. on page 3.

Please return your NHI certificate when you move out of Nerima City, you enroll in some other form of public health insurance—such as employees’ health insurance—and completed NHI withdrawal procedures, or your visa expires. In addition, please be sure to discard/destroy your expired NHI certificate (such as by cutting it up with scissors) or return it to Kokuho Shikaku Kakari (Nerima City Office Main Bldg. 3F), Kokuho Shakujii Kakari (Shakujii Government Office 2F) or local residents office (excluding Nerima and Shakujii).

(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 first of the month). Please show this certificate together with your health insurance certificate when receiving treatment at a medical institution.

For more information on the percentage of personally-borne costs, please see the section on Insurance Benefits on page 10.

1. Those who are eligible

From the month following the member’s 70th birthday (or the same month, if the member’s birthday falls on the first of the month) until the day before the member’s 75th birthday.

* An Elderly Recipient Certificate for those who will be eligible will be mailed to the head of the household toward the end of the month of the member’s 70th birthday (the month before if the member’s birthday falls on the first of the month). There is no need to file a notification form.

2. Concerning the personally borne expensed percentage

The percentage of personally borne expenses written on the Elderly Recipient Certificate is either 20% or 30%.

The percentage of personally borne expenses is determined every year depending on the levels of the resident’s tax (special city resident’s tax and metropolitan resident’s tax), and renewed on August 1.

3. Evaluation standards for the percentage of personally borne expenses

NHI members of the same household who are 70 years of age or older will be eligible for evaluation.

Percentage of Personally-Borne Expense	Evaluation Standards
20%	(1) All NHI members who are 70 years of age or older whose taxable income for resident's tax is less than ¥1,450,000
	(2) A household with an NHI member who is 70 years of age or older, born on or after January 2, 1945, with a total adjusted income of all NHI members who are 70 years of age or older being ¥2,100,000 or less
30%	Other than the above

However, even if a member is evaluated as 30% according to the abovementioned standards, the percentage can be adjusted to 20% upon application if the following standards are met:

No. of NHI Household Members	Annual Income Amount
One household NHI member 70 years of age or older	(1) The NHI member's annual income is under ¥3,830,000
	(2) The total annual income of the NHI member and former NHI members (*1) is under ¥5,200,000
Two or more household NHI members 70 years of age or older	Total annual income is under ¥5,200,000

* “Taxable income for resident’s tax” refers to the figure after necessary expenses and deductions are subtracted from revenues. Resident’s tax is calculated based on this figure.

* “Adjusted income” refers to the gross income earned during the previous year (January through December) plus any forest income or money from stocks or long-term (short-term) capital gains, subtracting the basic resident’s tax deduction of ¥330,000. However, the carry-over deduction for miscellaneous losses does not apply.

* “Annual income” refers to the total income amount before deducting necessary expenses and deductions.

(*1) “Former NHI members” refers to those who have withdrawn from NHI to join Latter-Term Elderly Medical Insurance, and continue to be in the same household with members who are enrolled in NHI.

Inquiries: KOKUHO SHIKAKU KAKARI

* Concerning the section to declare your intention to be an organ donor

On the back of the health insurance certificate is a space for to declare your intention to be an organ donor. Filling in the space is voluntary. A sticker to cover what you have written in this space is available at Kokuho Shikaku Kakari (Nerima City Office Main Bldg. 3F), Kokuho Shakujii Kakari (Shakujii Government Office 2F), or local residents office (excluding Nerima and Shakujii).

For information on organ donation, please read the Japan Organ Transplant Network website (<http://www.jotnw.or.jp/>).

8. 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.

Percentage of Personally-Borne Cost of Medical Expenses

Preschoolers (0 through 6 years of age)	20% (*1)
Children of compulsory education age through 69 years of age	30% (*1)
Those between 70 and 74 years of age	20% (or 30% for those with an income similar to the actively employed, and members of the same household)

(*1) For children up to the third year of junior high school, there is no personally-borne expense if you show your Infant/Toddler Medical Certificate or Children's Medical Certificate with your NHI certificate.

Inquiries: KOKUHO KYUFU KAKARI

9. 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

10. Medical expenses

In the following cases, the insured must initially pay full cost, however, a portion will be refunded after filing an application. Please note that 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 to four 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 medical treatment. (Please inquire in advance.)

[To apply]

In addition to the application form (available at the Kokuho Kyufu Kakari or Kokuho Shakujii Kakari), bring the patient's NHI certificate, the head of household's financial account number and a name stamp (or be prepared to sign, if the head of the household is not Japanese):

If you fall under no. (1) above: you will need (a) a detailed statement of medical fees for general medical/dental examinations or prescription (medical statements given with the receipt is not allowed); (b) relevant receipts. * 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; (b) relevant receipts (issued by the manufacturer describing the merchandise); (c) photograph of orthopedic shoes (a photo needs to be attached for orthopedic shoes)

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) or a letter of recommendation; (b) relevant receipts; (c) an invoice for the treatment fee; (d) statement indicating the reason for receiving treatment for sixteen or more times per month in a period of one year or longer, and the patient's current condition (only needed if a year or more has passed since your first treatment and you have received treatment sixteen or more times a month); (e) a copy of the treatment report (only needed if you will be applying for a treatment report issuance fee)

Overseas medical expenses

In some cases, you can receive insurance benefits for medical treatment received for injuries and illnesses even while overseas if your membership of the NHI in Nerima City is active. NHI 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 or Kokuho Shakujii Kakari), you will need all of the following documents:

- 1) Detailed Statement of Medical Treatment (Form A) (Since screening is conducted in Japanese, if the document is written in a foreign language, then a Japanese translation is required.)
- 2) Detailed Statement of Receipts (Form B) (Since screening is conducted in Japanese, if the

document is written in a foreign language, then a Japanese translation is required.)

- 3) Receipts (Since screening is conducted in Japanese, if the document is written in a foreign language, then a Japanese translation is required.)
- 4) Health insurance certificate of the patient
- 5) Copy of the head of household's financial account number (Note that the money cannot be sent to overseas bank accounts.)
- 6) Head of household's regular name stamp (if the head of the household is not Japanese, his/her signature is also acceptable)
- 7) Passport that shows proof of travel (the airline ticket stub is needed if there is no immigration stamp)
- 8) Letter of consent for inquiries and investigations

*Please obtain the forms for Detailed Statement of Medical Treatment (Form A) and for Detailed Statement of Receipts (Form B) before traveling abroad at the service counter of Kokuho Kyufu Kakari or Kokuho Shakujii Kakari, or download the forms via the Nerima City website; when receiving medical treatment overseas, please be sure to have the medical institution complete and sign the forms. A separate form is needed for each month and medical institute, and by in-patient and out-patient treatment.

Note: The application will not be accepted if any of the documents are missing or incomplete.

Note: Please include the name and address of the translator for documents translated into Japanese.

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 or Kokuho Shakujii Kakari), the following documents are required:

- 1) Physician's letter recognizing the need for transportation (Nerima City-designated form)
- 2) Receipt from the transportation method used (the breakdown and details must be listed)
- 3) Health insurance certificate
- 4) Copy of the head of household's financial account number
- 5) Head of household's regular name stamp (if the head of the household is not Japanese, his/her signature is also acceptable)

Inquiries: KOKUHO KYUFU KAKARI

11. 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, expenses not covered under the NHI system, such as for certain beds and meals during hospitalization, will not be included.

Furthermore, if the personally-borne expenses for the same medical institute is under ¥21,000 for one month, it cannot be included for those who are 69 years of age or younger. In this case, in-patient and out-patient expenses are handled separately even for the same medical institution.

As a rule, the term of application is for two years from 1st of the month after the month of medical treatment, and the applicant should be the head of the household.

[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

Income Category	Ceiling Amount for the Entire NHI Household	
	Up to 3 Times	4 or More Times
A	$¥252,600 + (\text{Total medical expense} - ¥842,000) \times 1\%$	¥140,100
B	$¥167,400 + (\text{Total medical expense} - ¥558,000) \times 1\%$	¥93,000
C	$¥80,100 + (\text{Total medical expense} - ¥267,000) \times 1\%$	¥44,400
D	¥57,600	¥44,400
E	¥35,400	¥24,600

Concerning Income Categories

• A^{*1}

Households with NHI members whose total adjusted income^{*2} is over ¥9,010,000.

• B

Households with NHI members whose total adjusted income^{*2} is between ¥6,000,000 and ¥9,010,000.

• C

Households with NHI members whose total adjusted income^{*2} is between ¥2,100,000 and ¥6,000,000

• D

Households with NHI members whose total adjusted income^{*2} is ¥2,100,000 or less.

• E

Households with NHI members who are exempt from resident's tax.

*1. Households with members who have not filed a resident's tax report will be evaluated as category A. Please file a resident's tax report regardless of whether or not you have an income.

*2. Adjusted income: The gross income of NHI members, such as from wages and miscellaneous income, minus the basic resident's tax deduction.

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 whose medical expenses will become high (issuance Maximum Amount Authorization Certificate)

It takes approximately five to six months from the time you receive medical treatment to receive a refund for high medical expenses.

By submitting your Maximum Amount Authorization Certificate, you will not be charged the usual partial expense (10%–30%), but rather the designated maximum amount permissible, 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. As a rule, a Maximum Amount Authorization Certificate cannot be issued to those who are behind in payments of NHI premiums.

○ 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

Inquiries: KOKUHO KYUFU KAKARI

12. Fees for meals while hospitalized

You will be charged part of the cost for each meal while hospitalized (standard personal expense: ¥460). 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 (¥460, before deductions) in accordance with Chart (1) and (2) below, by applying for a Maximum Amount/Standard Personally-Borne Amount Reduction Authorization Certificate.

Please apply for authorization upon being admitted to hospital because the cost of meals during hospitalization cannot be retroactively reduced without prior authorization.

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

Income Category		Number of days of hospitalization (for the past 12 months)	Cost for meals (per meal)
Households that are taxed		Regardless of hospitalization period	¥460
Households exempt from Resident's Tax	II	Up to 90 days of hospitalization	¥210
		From 91 days of hospitalization	¥160
	I	Regardless of hospitalization period	¥100

(2) Meals Expense for Those under 70 Years Old

Income Category		Number of days of hospitalization (for the past 12 months)	Cost for meals (per meal)
A through D		Regardless of hospitalization period	¥460
E		Up to 90 days of hospitalization	¥210
		From 91 days of hospitalization	¥160

* 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

13. 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

14. Lump-sum allowance for childbirth and funeral benefits

Childbirth (including stillbirths or miscarriages that occurs on the 85th day of pregnancy or beyond) and funeral benefits are paid to Nerima City NHI subscribers. The application period is two years from the following day the child was born (including stillbirths or miscarriages) or the date the funeral was held.

* Please realize that simply because your spouse is an NHI member does not necessarily mean that this benefit applies.

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 Application is Required)

By submitting application form in advance, you can have your Lump-sum Benefit for Childbirth paid directly from NHI to the medical institute.

Application can be filed 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, 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 may still be able to take advantage of the Childbirth Expense Loan System. Please call for more information.

3. Funeral Benefits

When a NHI member passes away and a funeral is held, a funeral benefit will be paid to the person who held the funeral service (chief mourner).

Category	Benefit Amount	Applicant	Necessary Documents
Childbirth Lump-sum Benefit	¥420,000 (The same benefits apply for stillbirths and miscarriages of pregnancies 85 days or more.)	Head of the household at the time of childbirth	NHI certificate, name stamp of the head of household (*1), 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. Passports are required for overseas childbirths (please apply after returning to Japan). The agreement on Direct Payment System is not required. A medical certificate instead of the maternity passbook for stillbirths and miscarriages.
Funeral Benefit	¥70,000	Person responsible for funeral	NHI certificate of the deceased, funeral bereavement card or relevant receipts for the funeral with the name of the person responsible, name stamp of the person responsible (*1) and the financial institution passbook of the person responsible for paying for the funeral.

(*1) 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.

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

Inquiries: KOKUHO KYUFU KAKARI

15. 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 Kokuho Kyufu Kakari 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

16. When you are unable to pay your medical expenses

If you are suffering from financial difficulty in paying personally-borne expenses due to special circumstances, such as a disaster, illness, or injury, you may be able to receive a reduction or exemption.

Eligibility is determined by adding up the total assets—such as the average household income and savings—and comparing the sum with 115/100 of the standard income amount for receiving social security benefits.

Please call for consultation in advance so that you can be informed about documents required and other information.

Inquiries: KOKUHO KYUFU KAKARI

17. 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, and joins NHI, 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, notification and insurance premium invoices will be sent to the head of the household.

Insurance premiums are calculated for the household as a unit, based on the number of NHI members, the number of category 2 subscribers of Long-Term Care Insurance (between 40 and 64 years of age), and the adjusted income.

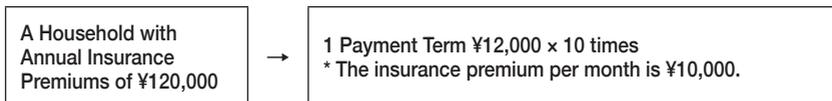
(1) Insurance premiums are determined in June and notification is sent

Annual insurance premiums (for April through March of the following year) are calculated based on reported income earned during the previous year (January through December), and notification is sent in mid-June (because the determination of the income earned during the previous year by the city Taxation Section is made in mid-June).

For this reason, annual insurance premiums are paid in 10 installments from June through March of the following year.

No insurance premium payments are made in the months of April and May. For this reason, there may be a gap between the month written on the invoice and the actual month of the premiums.

Example



* Please note that amounts less than ¥10 are all included in the first payment period. For those who pay premiums by having them deducted from the pension (special collection), the amounts less than ¥100 are all included in the October payment period.

* Although there are no insurance premium payment invoices for April and May, if there are changes in the insurance premiums for the previous fiscal year, a notification may be sent in April and May.

Insurance premium notification/invoice mailing period

June	After the insurance premiums for FY2019 have been determined, notification and insurance premium invoices are mailed in mid-June. (As a rule, only notification is mailed to the households that pay by bank transfer or pension deduction [special collection].) Two types of invoices are enclosed, one covering the first half of the fiscal year for June through October and the other for single annual payment.
November	In mid-November, invoices for the second half of the fiscal year for November through March are mailed. As a rule, these are not mailed to households that pay by bank transfer or deduction from the pension (special collection).

■ Let's file tax reports

Insurance premiums are calculated based on the report for tax. In addition, it is necessary to report the household income amount to make calculations for such benefits as reduction of premiums, or subsidiary for meal expenses while hospitalized and high medical expenses.

Although it is not necessary for those who did not have an income to file an income report (*Kakutei Shinkoku*) with a tax office, we recommend that those who are exempt from resident's tax file a resident's tax report with the municipal office of resident registration as of January 1.

(2) How insurance premiums are calculated

The annual health insurance premium consists of (1) the basic (medical treatment) portion and (2) the letter-term elderly support portion and (3) the long-term care portion (only for households with 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 2019

Adjusted income = Gross income amount for the previous year – Basic deduction for resident’s tax, ¥330,000

What is Adjusted Income?
 Adjusted income is amount remaining after the resident’s tax 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.

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

(1) Income-derived amount for the basic (medical treatment) portion: Total adjusted income amount of all household NHI members x 7.25%	+	(2) Per capita amount for the basic (medical treatment) portion: ¥39,900 x number of NHI members in household	=	Premiums for the basic (medical treatment) portion for the period from April to March of the following year: (Maximum amount: ¥610,000)	Total amount = NHI premium
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2. Premiums for the latter-term elderly support portion for households enrolled in National Health Insurance

(1) Income-derived amount for the latter-term elderly support portion: Total adjusted income amount of all household NHI members x 2.24%	+	(2) Per capita amount for the latter-term elderly support portion: ¥12,300 x number of NHI members in household	=	Premiums for the latter-term elderly support portion for the period from April to March of the following year: (Maximum amount: ¥190,000)	Total amount = NHI premium
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3. Premiums for the portion of Long-Term Care only for households with Category 2 subscribers (40 to 64 years of age)

(1) Income-derived amount for the Long-term Care portion: Total adjusted income amount of all category 2 members x 1.62%	+	(2) Per capita amount for the Long-term Care portion: ¥15,600 x number of Category 2 subscribers in the household	=	Premiums for the Long-term Care portion for the period from April to March of the following year: (Maximum amount: ¥160,000)	Total amount = NHI premium
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* Notification of the portion for Long-Term Care for those between 65 and 74 years of age will be sent separately as Long-Term Care Insurance premiums from the Long-Term Care Insurance Section.

■ Insurance premiums for those who turn 40 or 65 years of age during the fiscal year

A resident who reaches 40 years of age must pay Long-Term Care Insurance premiums from the month of his/her 40th birthday. You will be required to make payments from the following month.

For those who reach 65 years of age, the Long-Term Care Insurance premiums until the month before the 65th birthday are calculated and the premiums are required to be paid in installments by the end of the fiscal year.

■ Insurance premiums for those who turn 75 years of age during the fiscal year If a person who reaches 75 years of age in the middle of the fiscal year enrolls alone

Insurance premiums for the period up to the month before the 75th birthday will be calculated from June up to the month before the birthday month, and divided into equal installments. If a member reaches 75 years of age before June, the premiums will be invoiced and must be paid in a lump sum in June.

For households with two or more members having partial eligibility

The insurance premiums for the period up to the month before the 75th birthday will be calculated, and divided into equal installments for payment until March of the following year.

If the member pays by having premiums deducted from his/her pension (special collection)

Those who reach 75 years of age by the last day of October must pay by regular collection. Those who reach 75 years of age in or after November can pay by having premiums deducted from the pension (special collection) until the month before their 75th birthdays.

(3) Insurance premiums for those who enroll in the middle of the fiscal year

For those who enroll in the middle of the fiscal year, insurance premiums are charged not from the date notification forms are submitted, but from the month NHI eligibility begins.

Insurance premiums are calculated in monthly units. If a member joins in the middle of the month, the premiums are not calculated in daily units. If you are a NHI member as of the last day of the month, Nerima City (the insurer) will charge insurance premiums for that month.

The premium for the fiscal year x No. of months from the month of eligibility
for enrollment until March/12.

Insurance premiums for those who move into Nerima City

Those who move to Nerima City from another municipality may tentatively receive a notification or insurance premium invoices for only the per capita amount for insurance premiums. Later, when information on the income for the previous year is confirmed, premiums are recalculated. For this reason, insurance premiums may change. In this case, please read the following section (4) “Premium readjustment.” Please note that the method of calculation may vary depending on the insurer (municipality).

(4) 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 23.

*** 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.
- In the case of bank transfer, the amount after the change will be debited from your account.

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

Insurance premiums are recalculated for those who withdraw in the middle of the fiscal year. If adjustments need to be made, a notification will be mailed to the head of the household.

1. If all household members withdraw

In the NHI system, premiums are recalculated for up to the month prior to the month of loss of eligibility. If there is a balance due as a result of these calculations, you may have to pay insurance premiums even after you have lost eligibility.

Insurance premiums are calculated and payments begin in June. Since there are no payments made in April and May, if you withdraw in the middle of the fiscal year, there may be a balance due even with payments made to date. If you have overpaid, you will receive a refund by financial transfer to your bank account. (Please do not close your Japanese financial account.)

2. If some household members withdraw

The annual premiums for the household will be recalculated. As a result, the remaining insurance premiums from the month withdrawal procedures were completed (or the following month) until March (the end of the fiscal year) will be adjusted, and notification of the change and invoices will be mailed.

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.

3. If the head of the household who has premiums deducted from the pension (special collection) withdraws

Special collection will be terminated. The annual premiums for the household will be recalculated and you will be informed of any changes by mail. Please note that if there is a balance due, the member must pay the balance with an invoice.

Inquiries: KOKUHO SHIKAKU KAKARI

18. Reduction in and exemption from paying the premium

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

If the income of the household (head of household, all enrolled household members, and former NHI household members*1) during 2018 is below a designated amount, the per capita amount for the basic (medical treatment) portion, latter-term elderly support portion, and long-term care portion can be reduced. The rate of reduction is by 70, 50, or 20%.

Please note that the reduction is evaluated based on the content of the tax report. If you were not able to file a resident's tax report (for such reasons as living overseas on January 1), please submit the "National Health Insurance Premium-related Report (Simplified Report)" the city mailed to you. If you didn't receive a simplified report, please contact the Kokuho Shikaku Kakari.

Households who are eligible for a reduction will automatically receive a reduction.

Furthermore, if you have filed a "National Health Insurance Premium-related Report (Simplified Report)" upon moving into Nerima City, and if you plan to live in Nerima City from the following year on as well, please file your resident's tax report at the Nerima City Taxation Section even if you have no income.

* If the head of the household or any one of NHI enrolled household members or former NHI enrolled household members (*1) has not filed a tax report or a "National Health Insurance Premium-related Report (Simplified Report)," the household is not eligible for evaluation for a deduction.

* If a tax report was filed after the deadline, or if a "National Health Insurance Premium-related Report (Simplified Report)" has been filed, and a reduction is deemed applicable, the annual

premiums are recalculated and notification of the adjustment from the month the reduction is authorized will be mailed.

*1 “Former NHI household members” refers to those who have withdrawn from NHI to join Latter-Term Elderly Medical Insurance, and continue to be in the same household with members who are enrolled in NHI.

(2) Reductions of the reduction program for those who are unemployed involuntarily

This premiums reduction system has been in effect since FY2010 for those who have become unemployed involuntarily due to bankruptcy or layoff. The insurance premiums are calculated from the time of unemployment until the end of the fiscal year the following year reducing the salaried income for the previous year to 30/100.

Please note that designated procedures must be completed to receive a reduction.

Those who are eligible (fulfill all of the following requirements):

- (1) Those with a reason code on their Employment Insurance Recipient Certificate of 11, 12, 21, 22, 23, 31, 32, 33, or 34. (Even if they fall under any of these categories, this excludes those with a “special recipient” status.)
- (2) Those who were 64 years of age or younger on the date of unemployment.

Required documents

Employment Insurance Recipient Certificate (original) issued by Hello Work and NHI certificate

Service counter

Kokuho Shikaku Kakari (Nerima City Office Main Bldg. 3F) or Kokuho Shakujii Kakari (Shakujii Government Office 2F)

(3) Exemption and reduction

If you are suffering from financial difficulty in paying premiums due to special circumstances, such as a disaster, illness, or injury, you may be exempted from the premium or the premium may be reduced.

Eligibility is determined by adding up the total assets—such as the average household income and savings—and comparing the sum with 115/100 of the standard income amount for receiving social security benefits.

Please call for consultation in advance so that you can be informed about the documents required. At most, premiums can be exempted or reduced for up to three months.

Application service counter

Kokuho Shikaku Kakari (Nerima City Office Main Bldg. 3F)

* Please read the section “When you are unable to pay your medical expenses” on page 16 concerning the reduction of medical expenses.

(4) For those 65 years of age or older who were dependents in the health insurance of their spouse’s place of employment and are now enrolling in NHI

When a person enrolled in the insurance at his/her place of employment (employee’s health insurance) is transferred to Latter-Term Elderly Medical Insurance, dependents lose their eligibility and must enroll in some other form of public health insurance.

If a dependent who is 65 years of age or older enrolls in NHI, the income-derived amount is exempted and the per capita amount is reduced by 50%.

Please note that you must apply to receive a reduction.

Required documents

A certificate showing you are no longer a member of the previous health insurance system*

and the name stamp of the head of the household

* Limited to certificates showing you are no longer a member of the previous health insurance system issued by a health insurance union or the Japan Pension Service. Certificates issued by your company are not acceptable.

Application service counter: Kokuho Shikaku Kakari (Nerima City Office Main Bldg. 3F) or Kokuho Shakujii Kakari (Shakujii Government Office 2F)

Inquiries: KOKUHO SHIKAKU KAKARI

19. 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, your local residents office (excluding Nerima and Shakujii), or any nearby financial institution, post office, convenience stores (including “mobile regi*” mobile cash desk) or supermarkets and drugstores that have Shinkin Information Service Ltd.’s MMK terminals (ATMs) installed. Payment slips are not sent to households that pay premiums by automatic 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, your local residents office (excluding Nerima and Shakujii), 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.

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

* 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 online banking services. For details, please refer to the Nerima City website.

(2) Automatic 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 or your local residents office (excluding Nerima and Shakujii); stamp it with the same stamp (or signature) you use for 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 in Nerima City

Bring (1) your bankbook, (2) the name stamp you use for your account and (3) your NHI certificate or payment slip to complete the designated procedures.

(3) Special Collection (Deducted from Public Pension)

This is a system by which NHI 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). Please note that payment slips cannot be used under this system.

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 your insurance premiums, please contact the Kokuho Seiri Kakari as soon as possible to discuss payment options. If you have no acceptable reason for failing to pay your premiums by the deadline, the period your NHI certificate is valid for will be shortened and your assets may be assessed and seized according to the law.

* Since there may be certain conditions set for some payment options, you may not be able to use your desired payment option.

- If you have not paid your insurance premiums due a year ago or more

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.

* As a rule, refunds for high medical expenses or expenses you paid yourself will be applied to the balance owed on your unpaid premiums.

Inquiries: KOKUHO SEIRI KAKARI

20. Specially-Designated Health Checkups and Specially-Designated Health Classes

Specially-designated health checkups are health checkups with the objective of preventing/detecting lifestyle-related illnesses. NHI members between 40 and 74 years of age are eligible. If the results exceed a designated standard, specially-designated health classes to improve lifestyle habits will be conducted. Since a health checkup ticket will be sent to those who are eligible, please undergo a health checkup before the deadline.

If you become disqualified for membership in NHI, then you may not undergo a specially-designated health checkup.

Inquiries: HOKEN JIGYOU TANTO KAKARI

21. Health maintenance and improvement

(1) Health resorts

There are inns in Tokyo's neighboring prefectures which have contracts with Nerima City, enabling NHI members to use their services at discounted rates.

(2) Distribution of Discount Tickets for Day Hot Springs Facilities

Discount tickets for day use of hot springs facilities are available.

Inquiries: HOKEN JIGYOU TANTO KAKARI

22. 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 must enroll and pay insurance premiums. Those who are authorized by the City Office can receive necessary nursing care services. (To receive authorization, you must file an application.)

Members who are authorized as needing nursing care or support, or become eligible to receive nursing care prevention or lifestyle assistance services can receive nursing care benefits by paying 10 to 30% of the cost for care.

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

	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 authorized as needing nursing care or support, or become eligible to receive nursing care prevention or lifestyle assistance services	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, using a payment slip or by automatic bank transfer.	Long-term Care Insurance premiums are included in the medical health insurance premiums and billed together.*

* For those who are enrolled in the NHI 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 separately from NHI premiums as a Category 1 Subscriber to the Long-term Care Insurance Section)

Inquiries: KAIGO HOKEN-KA, Tel: 03-3993-1111

23. Latter-Term Elderly Medical Insurance

Latter-Term Elderly Medical Insurance is a health insurance program for those who are 75 years of age or older (includes those between 65 and 74 years of age with a designated level of disability who have filed an application and received authorization). Starting from the 75th birthday, a member automatically becomes enrolled in Latter-Term Elderly Medical Insurance after withdrawal from NHI or the worker's health insurance of membership. A health insurance certificate will be mailed by registered mail in the month before the 75th birthday. (For those with authorization for disability, the certificate will be mailed after the authorization.)

Please call for more information, such as concerning the personally borne cost that must be borne at the service counters of such medical institutions as hospitals, the health insurance certificate, benefits, or health insurance premiums.

Inquiries:

Concerning the personally-borne cost that must be borne at the service counter, the health insurance certificate or benefits: KOKI KOREISHA SHIKAKU KAKARI, Tel: 03-5984-4587

Concerning health insurance premiums: KOKI KOREISHA HOKENRYO KAKARI, Tel: 03-5984-4588

National Health Insurance and Pension Section/Premium Collection Section
NERIMA CITY OFFICE
6-12-1 Toyotama-kita, Nerima-ku, Tokyo

Please make inquiries in Japanese.

Kanri Kakari (Nerima City Office Main Bldg. 3F)	Tel: 03-5984-4551
Hoken Jigyuu Tanto Kakari (Nerima City Office Main Bldg. 3F)	Tel: 03-5984-4551
Kokuho Kyufu Kakari (Nerima City Office Main Bldg. 3F)	Tel: 03-5984-4553
Kokuho Shikaku Kakari (Nerima City Office Main Bldg. 3F)	Tel: 03-5984-4554
Kokuho Shuno Kakari (Nerima City Office Main Bldg. 3F)	Tel: 03-5984-4559
Kokuho Seiri Kakari (Nerima City Office Main Bldg. 3F)	Tel: 03-5984-4560
Kokuho Shakujii Kakari (Shakujii Government Office 2F)	Tel: 03-3995-1114

April 2019