

*In Japan there are two types of medical institutions: insured medical institutions that are covered by health insurance programs; and those uncovered by such programs, such as massage parlors, etc.



This part is devoted to explaining about the medical systems in Japan. Topics include how to receive clinical examinations at medical institutions, about hospitalization, ambulance services and pharmacies, as well as public health insurance systems.

1 Medical institutions

When you are sick or injured, you receive treatment at medical institutions. The following explains the different types of medical institutions, rules, etc.

1-1 Basic knowledge about medical institutions

(1) Types of medical institutions

Medical institutions in Japan are divided into: hospitals, or large-scale medical institutions capable of hospitalizations and check-ups; and clinics individually run by doctors, individual offices and clinics where you can consult doctors on minor conditions on a daily basis.

Doctor's offices and clinics are medical institutions with hospitalization facilities of 19 beds or fewer. Many of them have no hospitalization facilities at all. They are suitable for minor conditions.

Large hospitals are equipped with hospitalization facilities and check-up tools. National and public hospitals maintain high level medical systems for each of their specialized medical departments. At hospitals with 200 beds or more, patients may be charged extra fees unless they visit with a referral by a doctor.

It is advised to visit a clinic (doctor's office) first and further receive specialized treatment at a large hospital upon necessity. It is ideal to check medical institutions in your neighborhood so that you can take adequate action once you need any medical attention.



Personal physician on a daily basis

minor conditions such as colds and stomachache



Doctor's offices, clinics

Large hospitals for possible major problems

serious sickness, conditions or injuries



Large hospitals (general hospitals)

Referrals

When any serious condition is discovered
When an operation or hospitalization is required

(2) Departments

Clinics and hospitals determine which department patients must go to depending on their sickness or injuries. General hospitals cover almost all departments, while some other hospitals and clinics cater to a limited number of departments or are specialized in certain departments. These institutions are chosen depending on specific conditions of sickness and injuries. Major departments include internal medicine, surgical medicine and pediatric. The larger hospitals are, the more sub-divided their departments are, with the aim of offering more specialized treatment. The following list shows some of the actual clinical departments and what can be handled at each of them.

Departments

Internal medicine	A department that treats conditions using medication. It covers colds and other sickness in general. If you have no idea what disease you are suffering from, you should visit this department first.
Surgical medicine	This department is for external injuries. It basically treats cases that require operations.
Pediatric	Dedicated to children up to elementary schoolers, for general sicknesses.
Orthopedics	It deals with problems of bones, joints and muscles such as fractures, sprains and back pains.
Ophthalmology (eye clinic)	It focuses on eye diseases in general, while performing sight tests as well.
Dentistry	It treats problems related to teeth, such as cavities.



Other departments include: otorhinolaryngology (ear, nose and throat); dermatology; obstetrics and gynecology; urology; psychiatry; neurosurgery (brain surgery).

When you visit a large hospital and do not know which department to go, enquire, explaining your condition, at the reception.

(3) First-come system and appointment system

The first-come system is employed at many clinics and hospitals in Japan. This could mean you have to wait for one to two hours before you see the doctor. However, the appointment system is common among dentists. Some other clinics and hospitals also require appointments. You are advised to confirm the system used by an institution before you visit it.



1 Medical institutions

1-2 How to obtain an examination

In Japan few medical institutions are capable of communicating in languages other than Japanese. You are advised to visit an institution with someone who understands Japanese, if you have difficulties in the language. If your religious faith requires certain restrictions in your daily life or treatment you receive, or if you have any allergic symptoms, please tell that to the reception staff or nurses.

(1) What to bring

Patients must carry their health insurance card when they visit hospitals and clinics. In many cases you bear part of the medical costs incurred to your treatment. If you do not carry your health insurance card or if you have not contributed to health insurance, you will have to bear all of the medical costs, which can be very expensive. In addition, it is favorable to carry some document to prove your identity, such as the alien registration certificate and passport. You should also carry any medicines you have been taking, if any.

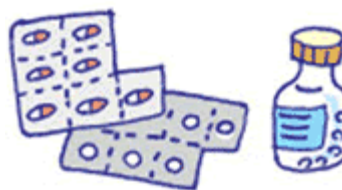
About health insurance cards, please see [4 Public medical insurance](#), [4-2 Health insurance \(3\)](#) and [4-3 National health insurance \(3\)](#).

1 Health insurance card

2 Alien registration certificate or passport

3 Medication you have been taking

4 Doctor's letter of introduction (if you have one)



(2) Hours

Open hours are different among institutions. But many institutions are open during weekday mornings and afternoons, open only in the morning on Saturdays and closed on Sundays and public holidays. Prior telephone confirmation is advised. For after-hour services, please see [Emergencies 2-2 During holidays/nighttime](#).

Multilingual Living Information



F Medical

[Back to the top of F Medical](#)

<example>

	月 Mon	火 Tue	水 Wed	木 Thu	金 Fri	土 Sat	日 Sun
午前 morning	○	○	○	○	○	○	×
午後 afternoon	○	○	○	×	○	×	×

Typically, in front of a medical institution, you see the signboard shown on the left. "X" means no service; in this example, on Thursday afternoons and Saturday afternoons and entire Sundays, there is no service.

祝日は休み
No service on public holidays

(3) Finding an institution

To find institutions, you can refer to the newsletters issued by your local municipality, the internet and telephone directories. You could also ask your neighbors for information.

For people having difficulties in Japanese, local international exchange associations, etc. may be available for consultation about interpreters, institutions capable of foreign language communication, and other matters.

Telephone consultation is available in the following languages:

AMDA International Medical Information Center

AMDA introduces medical facilities with staff who speak the patient's language and explains the healthcare system in multiple languages.

Center Tokyo TEL 03-5285-8088	Available languages	English; Thai; Chinese; Korean; Spanish....Monday through Friday, from 9:00 to 17:00
		Portuguese....Monday, Wednesday and Friday, from 9:00 to 17:00 Filipino....Wednesday from 13:00 to 17:00
Center Kansai TEL 06-4395-0555	Available languages	English and Spanish.... Monday through Friday from 9:00 to 17:00 Chinese.... Monday from 10:00 to 13:00 and Portuguese.... Monday from 10:30 to 14:30.... Please enquire beforehand or see the center's website.

Tokyo Metropolitan Medical Institution Information "Himawari"

Provides multi-lingual information on medical institutions with staff who speak foreign languages and about the medical and health insurance systems in Japan.

telephone 03-5285-8181	Available languages	English; Chinese; Korean; Thai; and Spanish
---	------------------------	---



Multilingual Living Information



F Medical

[▲ Back to the top of F Medical](#)

You can search medical institutions with staff who speak foreign languages at the following website:<http://www.himawari.metro.tokyo.jp/qq/qq13to16sr.asp>





1 Medical institutions

1-3 Process of examination

(1) General process of the initial examination

You should first search for a hospital/clinic that caters to the sickness/injury you want to have treated. You should present your health insurance card at the reception of the hospital/clinic. After that you wait at the waiting room, before you proceed to a clinical examination, followed by payment and receipt of your prescription medicines. The illustration below describes the process more specifically.

After that you wait at the waiting room, before you proceed to a clinical examination, followed by payment and receipt of your prescription medicines. The illustration below describes the process more specifically.

1. You wish to have treatment for sickness or injury

You search for a clinic/hospital that caters to your sickness/injury



2. You visit the clinic/ hospital

You present your health insurance card at the reception, saying “Shoshin desu” (this is my initial visit). In many cases you are then asked to fill in necessary information on an examination application form (jushin moshikomi sho) or medical chart (monshin hyou). On a medical chart (monshin hyou), you write about the condition of your current sickness and your clinical history, whether or not you have any allergic reactions and so on. When you have filled it in, you return it to the reception and then wait at the waiting room.

3. Clinical examination

When your name is called, you enter the clinical room and receive an examination. When necessary, you also receive check-ups and certain treatment. Also when necessary, you will arrange the next appointment.



4. Payment

Generally speaking medical fees must be paid for in cash (credit cards may be used at some institutions). At some institutions, a nurse hands





out a payment slip to you after you finish the examination. In this case, you bring the slip to the payment counter. Please keep the bill of receipt for your payment for the following reason: When your monthly medical payments exceed a certain level (depending on your income; normally 80,100 yen), you may be paid back part of the fees you have paid. When your annual medical payments exceed 100,000 yen, you may have a reduction of tax payments. In both cases you need to present the relevant bills of receipt.

5. Receipt of prescription medicines

Take the prescription you receive at the time of payment to a prescription pharmacy (chozai yakkyoku) and receive your medicine. You must pay for the medicines separately from the clinical fees (this is called external pharmacy or ingai yakkyoku). Some hospitals/clinics have a medicine counter within their facilities, in which case the medicine costs are included in the payment at the hospital/clinic (this is called internal pharmacy, or innnai yakkyoku).

* When you visit the clinic/hospital again after the initial time (soshin), you check in at a vending machine for repeated visitors (saishin-ki), or alternatively you check in directly at the department that takes care of your case. At some institutions, you check in at the reception counter. After the check-in, the following process is the same as for the initial examination.





1 Medical institutions

(2) Multilingual medical chart

Multilingual medical charts, or multilingual medical questionnaire, are available from the Kanagawa International Foundation's homepage. Also, multilingual registration forms are available at the AMDA International Medical Information Center. Both documents can be downloaded on the internet. The addresses are as follows:

Kanagawa International Foundation
http://www.k-i-a.or.jp/medical/index.html
On this site, you can search by the medical department you wish to visit. The questionnaires are available in 14 languages for 10 departments:

■ Ophthalmology			
Indonesian Ophthalmology	English Ophthalmology	Cambodian Ophthalmology	Spanish Ophthalmology
Thai Ophthalmology	Tagalog Ophthalmology	Chinese (Mandarin) Ophthalmology	Korean Ophthalmology
Vietnam Ophthalmology	Persian Ophthalmology	Portuguese Ophthalmology	Lao Ophthalmology
Russian Ophthalmology	French Ophthalmology		

■ Surgery			
Indonesian Surgery	English Surgery	Cambodian Surgery	Spanish Surgery
Thai Surgery	Tagalog Surgery	Chinese (Mandarin) Surgery	Korean Surgery
Vietnam Surgery	Persian Surgery	Portuguese Surgery	Lao Surgery
Russian Surgery	French Surgery		



■ Obstetrics and gynecology			
Indonesian Obstetrics & Gynecology	English Obstetrics & Gynecology	Cambodian Obstetrics & Gynecology	Spanish Obstetrics & Gynecology
Thai Obstetrics & Gynecology	Tagalog Obstetrics & Gynecology	Chinese (Mandarin) Obstetrics & Gynecology	Korean Obstetrics & Gynecology
Vietnam Obstetrics & Gynecology	Persian Obstetrics & Gynecology	Portuguese Obstetrics & Gynecology	Lao Obstetrics & Gynecology
Russian Obstetrics & Gynecology	French Obstetrics & Gynecology		

■ Dentistry			
Indonesian Dentistry	English Dentistry	Cambodian Dentistry	Spanish Dentistry
Thai Dentistry	Tagalog Dentistry	Chinese (Mandarin) Dentistry	Korean Dentistry
Vietnam Dentistry	Persian Dentistry	Portuguese Dentistry	Lao Dentistry
Russian Dentistry	French Dentistry		

■ Otolaryngology			
Indonesian Otolaryngology	English Otolaryngology	Cambodian Otolaryngology	Spanish Otolaryngology
Thai Otolaryngology	Tagalog Otolaryngology	Chinese (Mandarin) Otolaryngology	Korean Otolaryngology
Vietnam Otolaryngology	Persian Otolaryngology	Portuguese Otolaryngology	Lao Otolaryngology
Russian Otolaryngology	French Otolaryngology		

Multilingual Living Information



F Medical

[Back to the top of F Medical](#)

■ Pediatrics			
Indonesian Pediatrics	English Pediatrics	Cambodian Pediatrics	Spanish Pediatrics
Thai Pediatrics	Tagalog Pediatrics	Chinese (Mandarin) Pediatrics	Korean Pediatrics
Vietnam Pediatrics	Persian Pediatrics	Portuguese Pediatrics	Lao Pediatrics
Russian Pediatrics	French Pediatrics		

■ Orthopedics			
Indonesian Orthopedics	English Orthopedics	Cambodian Orthopedics	Spanish Orthopedics
Thai Orthopedics	Tagalog Orthopedics	Chinese (Mandarin) Orthopedics	Korean Orthopedics
Vietnam Orthopedics	Persian Orthopedics	Portuguese Orthopedics	Lao Orthopedics
Russian Orthopedics	French Orthopedics		

■ Internal Medicine			
Indonesian Internal Medicine	English Internal Medicine	Cambodian Internal Medicine	Spanish Internal Medicine
Thai Internal Medicine	Tagalog Internal Medicine	Chinese (Mandarin) Internal Medicine	Korean Internal Medicine
Vietnam Internal Medicine	Persian Internal Medicine	Portuguese Internal Medicine	Lao Internal Medicine
Russian Internal Medicine	French Internal Medicine		

■ Neurosurgery			
Indonesian Neurosurgery	English Neurosurgery	Cambodian Neurosurgery	Spanish Neurosurgery
Thai	Tagalog	Chinese (Mandarin)	Korean



Multilingual Living Information



F Medical

[Back to the top of F Medical](#)

Neurosurgery	Neurosurgery	Neurosurgery	Neurosurgery
Vietnam Neurosurgery	Persian Neurosurgery	Portuguese Neurosurgery	Lao Neurosurgery
Russian Neurosurgery	French Neurosurgery		

■ Dermatology			
Indonesian Dermatology	English Dermatology	Cambodian Dermatology	Spanish Dermatology
Thai Dermatology	Tagalog Dermatology	Chinese (Mandarin) Dermatology	Korean Dermatology
Vietnam Dermatology	Persian Dermatology	Portuguese Dermatology	Lao Dermatology
Russian Dermatology	French Dermatology		

AMDA International Medical Information Center
http://amda-imic.com/
There are Web pages translated into the following languages: English, Chinese, Korean, Spanish, Thai, Portuguese and Tagalog.

(3) Medical terminology

For terminology of conditions and clinical record, please refer to the above-listed questionnaires by language and department provided by the Kanagawa International Foundation.





1 Medical institutions

1-4 Process of hospital stay

Your doctor will determine whether or not you should stay at the hospital and how long, depending on your clinical condition. If your doctor instructs you to stay at the hospital, you normally go to the in-house consultation counter for hospitalization, where you talk with a counselor to decide when to start your stay and learn what items you have to prepare.

(1) Room

There are rooms with a single bed, two beds, four, six, etc., of which four and six beds are most common. To stay at a single or two-bed room, you will have to pay extra, unless the hospital/clinic decides this due to medical reasons. The extra fee varies among institutions, from about 2,000 yen to over 10,000 yen per day.



1 Medical institutions

(2) General process of a hospital stay

Generally, you receive beforehand documents describing when to start the stay, items you need to bring in, a guarantee sheet and rules to observe. You start your stay after completing a hospitalization procedure. Your doctor will see your condition to decide when you leave the hospital. More specifically the process goes as follows:

1 Hospitalization procedure

You fill in the application form for hospitalization and submit items you need to bring in (health insurance card, patient's registration card, deposit money, etc.). If necessary you should talk with a hospital nutritionist, etc. about your diet and religious needs. If this information must be shared with other patients in your room, you could ask a nurse, etc. to tell it to them. Some hospitals/clinics may also ask you to prepare your private items such as underwear and toilet articles.



2 During hospital stay

Inpatients must observe visitors' hours and other rules and refrain from acts that could disturb others. At children's hospitalization compounds, visitors' hours may be restricted. When you undergo an operation, your doctor will explain about the procedure beforehand and ask you to sign to confirm your will to have the operation. If you find any unclear points, you must ask for explanation until you understand clearly. When a medical social worker is in place, you should consult her/him.



3 Discharge from hospital

You pay your hospitalization fees and return home.





1 Medical institutions

1-5 Points to be aware of

(1) Points to be aware of at medical institutions

There are restrictions on the use of mobile and PHS phones inside hospitals/clinics. The appointment time and visitor's hours must be observed. It is also important to ask your doctor about examination results, medication, etc. if you do not understand clearly enough.



(2) Concerns about the language

If you feel difficulties in Japanese communication, you are advised to use an interpreter service or have someone who interprets for you. In some areas, international exchange associations and relevant groups offer interpreter services. If your hospital/clinic has medical social workers, you could consult them.



(3) Lack of understanding about the Japanese medical system

In many cases in the Japanese medical system, you will not receive benefits unless you apply for them. Having knowledge about the system and its structures is therefore important. You could ask for information at the reception or talk with a medical social worker, if one is available. Consultation with a medical social worker is free of charge and confidentiality is preserved. Feel free to use the system of medical social workers and counselors so that you can benefit from the medical systems without worries.



2 Emergencies

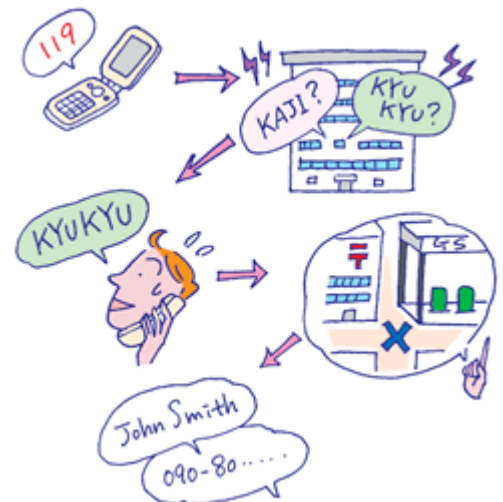
You may unexpectedly encounter sickness or injuries. What can be done in such circumstances? This part introduces services to cope with these difficulties, such as the dispatch of an ambulance, or night-time and holiday medication.

2-1 When you need an ambulance due to acute sickness or serious injury

You dial 119. You can reach this number from a fixed-line telephone, public telephone (see [P Emergencies/disasters, 1-1 \(2\) How to communicate from a public telephone](#)), mobile phone or PHS. Dialing 119, you will reach the fire department. A fire department worker will ask you whether you are calling for a fire (kaji) or ambulance (kyukyu). You should answer “kyukyu,” keeping calm. You should then notify the location of the sickened/injured and any landmark for it. Next, you should state the details, efficiently describing “who” is the subject, “where,” “when,” and “how.” When necessary, you should also tell the number of the sick/injured, their ages and gender. Lastly, you should tell your name and the telephone number from which you are calling (see [P Emergencies/disasters, 1-2 \(2\) Sample answers and questions for calling an ambulance](#)).

Both the 119 calls and use of an ambulance are free of charge. However, neither services can be used when the sickness or injury is so minor that the patient can be transferred by taxi or personal car.

You are advised to make an emergency individual card (see [P Emergencies/disasters, 1-2 \(1\)](#)) in advance and carry it with you.





2 Emergencies

2-2 During holidays/nighttime

You can use local emergency medical facilities. These facilities include: clinics for holiday/nighttime acute patients (kyujitsu kyukan shinryojo), which can also be used during the year-end and new year period; emergency medical centers (kyukyu iryou center) and nighttime emergency centers (yakan kyubyo center) for acute problems occurring at night or other irregular settings; dental health medical center (shika hoken iryou center) for toothaches during holidays; and emergency medical information centers (kyukyu iryou jouhou center) and stand-by doctor shift system (zaitaku touban-i seido).

Please note that these services have different names, different content and available hours in different areas. You can learn about emergency medical services in your local area through bulletins issued by the municipal administrative office. Enquiries can also be made by telephone at the same office. You are advised to check the information by the bulletins and telephone in advance.



3 Pharmacies

While medicines are used to cure sickness, their intake requires much precaution since they are often accompanied by side effects. This part introduces prescription medicines, over-the-counter (OTC) medicines and how to use them.

3-1 The differences between a pharmacy (yakkyoku), prescription pharmacy (chozai yakkyoku) and drugstore (yakuten)

In Japan, medicine can be purchased at pharmacy (yakkyoku), prescription pharmacy (chozai yakkyoku) and drugstore (yakuten). The differences between these are explained below.

pharmacy (yakkyoku)	This type of store sells general medicines.
prescription pharmacy (chozai yakkyoku)	This type of store sells general medicines and can prepare medicines prescribed by doctors.
drugstore (yakuten)	This type of store sells general medicines as well as sanitary products and daily necessities (washing powder and so on), cosmetics, etc.

3-2 Purchasing medicines

When you experience mild sickness that does not apparently require a doctor's attention, you can buy generic medicines to alleviate headache, symptoms of colds and stomach problems. OTC medicines are not covered by health insurance and their prices must be fully borne by purchasers.

To have your prescribed medicines prepared, you go to a prescription pharmacy (chozai yakkyoku). In this case, if you belong to a health insurance program, you only pay part of the medicine price, while the program covers the rest. However, unless otherwise specified, the effective period of a prescription is four days including the day of handover to the patient. When the effective period lapses, you have to undergo a clinical session to have the prescription issued again. Even if you have had a medicine prescribed in the past, you have to undergo a clinical session to get the prescription again, once you need to buy the medicine anew.

3-3 Usage of medicines

At a pharmacy and drugstore, a pharmacist explains to you about how to take the medicines, notes for intake, possible side effects, etc. No interpreter is available at those places and if necessary, you must be accompanied

Multilingual Living Information



F Medical

[▶ Back to the top of F Medical](#)

by someone who understands Japanese. Explanatory notes attached to the medicine are written only in Japanese. If you do not understand, please have someone translate them for you.





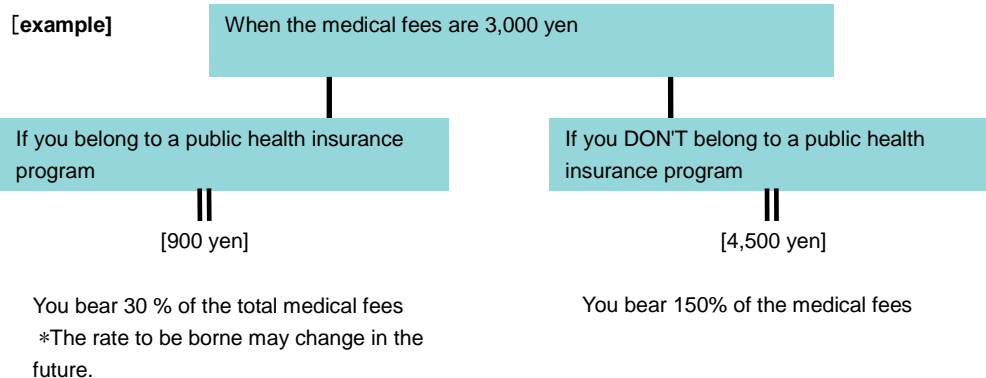
4 Public medical insurance

Any resident in Japan must belong to a public health insurance program. In Japan, public health insurance programs are divided into “health insurance” participated in by employees of companies and other business entities, and “national health insurance” participated in by other people.

4-1 Medical fee and public medical insurance

(1) Medical fees and public medical insurance

If you belong to a public health insurance program, you pay only 30% of the medical fees that have been charged to you based on a single set of rules nationwide. Otherwise, if you receive medical services without public health insurance coverage, you have to bear the total fees, which, in this case, can be freely determined by the medical institutions and thus be highly expensive (Usually, you will have to bear 150% of the cost.)





(2) Treatment not listed under coverage

While, basically, contributors of public health insurance programs pay 30% of the total medical fees charged to them, there are exceptional types of treatment as listed below:

Treatment not listed under coverage

For injuries caused by traffic accidents or criminal cases	If someone is injured due to a third person's negligence or illicit acts, the wrongdoer pays for the medical fees incurred. Medical fees incurred for hit-and-run accidents, or when compensation for injuries is difficult to obtain, the government provides assistance within the legally stated limit through a government run damages support system (seifu hosho jigyo seido).		
For normal pregnancy and birth cases	Pregnancy terminations for reasons other than sickness	Health check-ups, comprehensive medical check-ups Some municipalities subsidize part of the expenses for such check-ups	Vaccinations (except vaccinations prescribed by law)
Cosmetic surgeries and orthodontics	For injuries and accidents occurred during commutation to work and during work (to be covered by workers' accident insurance)	Extra bed fees incurred in cases such as a stay at a single room	Application of examinations, operations, treatment and medicines that are excluded from insured clinical services

(3) Private medical insurance

Medical insurance programs include private insurance products sold by life insurance firms and other companies. Customers pay a certain amount of contributions and receive payments when they stay or visit medical facilities due to sickness or injuries or undergo certain designated operations. If you contribute to a private medical insurance program and not to a public health insurance one, you have to pay the entire sum of your medical fees at some point, before the private program pays you back at a later time.



4 Public medical insurance

4-2 Health insurance

(1) Eligibility

Employees of companies and other business entities are eligible for health insurance programs.

(2) Entry procedures

The procedures differ among companies and business entities. Please enquire at your workplace.

(3) Insurance cards (health insurance card: kenkou hoken hihokenshashou)

After you have completed the entry procedure, you receive your health insurance card. As a card that proves your membership to an insurance program, it must be kept with care. An insurance card bears the holder's name and address. It must be shown at the reception of a medical institution every time you receive clinical services there. It is advised to carry it when you travel inside Japan. No borrowing, lending, sale or purchase may be made with an insurance card.

(4) Obligation fees at medical institutions

When you receive medical care due to sickness or injuries, your portion of the cost is 30% of the whole medical fees spent for your treatment. However, for insured persons aged 70~74, whether the contributors or their dependents, the portion of the cost borne by the contributor is 10% or 30% depending on their incomes. The portion borne by the contributor is 20% of the medical fees spent for his/her dependent children from birth up to starting compulsory education.



•Health Insurance obligation rates (by the contributor, contributor's dependents)

Up to entering compulsory education	high-income / average / low-income	20%
After entering compulsory education ~ 69 years old	high-income / average / low-income	30%
70 years old ~ 74 years old	income similar to an employed person	30%
	average / low-income	20% 10% of the cost to be paid by the contributor is being frozen for a period of 2 years from April 2008 until March 2010

(Note) Persons over 75 years old (or those 65~74 years old who have certain disabilities) are eligible to be covered by the medical treatment system for senior citizens (koki-koreisha iryo seido)

Reference: Social Insurance Agency, etc.



(5) Insurance contributions

Insurance contributions are deducted directly from the salaries of the contributor. The amount depends on the size of the salary and other factors, and is borne evenly by the contributor and his/her employer.

(6) Types and contents of health insurance payments

(From the Social Insurance Agency's homepage) <http://www.sia.go.jp/seido/iryo/kyufu/kyufu01.htm>

Classification	Types of payment	
	Contributor	Dependent
In cases of sickness and injuries		
In cases of receiving treatment with the insured card →	Medical benefit Medical expenses for food during hospitalization Medical expenses for food, heating, etc. during hospitalization Medical expenses for treatment outside that covered by insurance Expenses for home visiting nursing service expenses	Family medical expenses Expenses for home visiting nursing service for the family
In cases of paying the entire medical expenses →	Medical expenses Sizable medical expenses Sizable medical and nursing expenses	Family medical expenses Sizable medical expenses Sizable medical and nursing expenses
In cases of being transported for emergency, etc. →	Transportation fees	Family transportation fees
In cases of taking leave from work due to medical necessity →	Invalidity benefit	
In cases of childbirth →	Lump-sum payment of childbirth and childcare	Family lump-sum payment of childbirth and childcare*
In cases of death →	Burial fees	Family burial fees
After retirement (continuous or fixed period benefits) →	Invalidity benefit Lump-sum payment of childbirth and childcare Burial fees	



4 Public medical insurance

4-3 National health insurance

(1) Eligibility

National health insurance programs cater to people who do not belong to workplace health insurance programs. Non-Japanese people are required to enter national health insurance programs, if they have made the alien registration, are entitled to stay in Japan for one year or longer and do not belong to workplace insurance programs (except for those who are on the status of “short-term stay.”) Even though people enter Japan with a permit to stay for shorter than one year, if they are later allowed to stay for one year or longer, they must enter into the national health program.

* Note: To prevent dual membership of social security, people from countries which have joined a social security agreement with Japan are exempt from entering the national health insurance program. (Proof of having relevant insurance to cover the cost of medical treatment received in Japan is required.) For details, please see the Social Insurance Agency’s homepage.

<http://www.sia.go.jp/seido/kyotei/system/index.html>

(2) Entry procedures

Each resident makes the entry procedures at the municipal administrative office where he/she registered as an alien.

Required documents	Alien registration certificate
	For people who have been staying in Japan for less than one year: a document certifying that they will stay in Japan for one year or longer (a letter of acceptance from a school, student registration certificate, etc.)

(3) Insurance cards (insured certificate card of national health insurance: kokumin kenkou hoken hihokensha shou)

After you have completed the entry procedure, you receive your health insurance card. As a card that proves your membership to an insurance program, it must be kept with care. An insurance card bears the holder’s name and address. It must be shown at the reception of a medical institution every time you receive clinical services there. It is advised to carry it when you travel inside Japan. No borrowing, lending, sale or purchase may be made with an insurance card.



(4) Obligation fees at medical institutions

When you receive medical care due to sickness or injuries, your portion of the cost is 30% of the whole medical fees spent for your treatment. However, for insured persons aged 70~74, whether the contributors or their dependents, the portion of the cost borne by the contributor is 10% or 30% depending on their income. The portion borne by the contributor is 20% of the medical fees spent for his/her dependent children from birth up to starting compulsory education.

●National Health Insurance obligation rates

Up to entering compulsory education	high-income / average / low-income	20%
After entering compulsory education ~ 69 years old	high-income / average / low-income	30%
70 years old ~ 74 years old	income similar to an employed person	30%
	average / low-income	20% *10% of the cost is being frozen until March 2010

(Note) Persons over 75 years old (or those 65~74 years old who have certain disabilities) are eligible to be covered by the medical treatment system for senior citizens (koki-koreisha iryo seido)

(5) Insurance contributions

Contributors of national health insurance programs pay insurance contributions by themselves through financial institutions and by other means. They can bring the payment document sent from the municipal administrative office to a financial institution or the municipal administrative office and pay there or use an account transfer at financial institutions. In some cases, collectors visit contributors for the contribution payment.

The amount of insurance contributions differs among municipalities. It is determined every year based on the income level of the contributor's household and the number of family members. However, non-Japanese contributors in their first year in Japan are charged with the minimum level of the insurance contribution since these people have no income record in Japan. They are charged with different levels of contribution in their second year and afterwards of their residence in Japan. Contributors aged 40 or older and below 65 years pay an amount including the nursing care insurance (see [I Other welfare 2-1](#)).

If a contributor defaults in the contribution payment, he/she will return his/her insurance card and instead receives a certificate of the insured status. During his/her holding of the certificate, he/she will have to pay all of the medical fees incurred to him/her (at later times, he/she can claim what is dubbed "medical costs payments" at the municipal administrative office or at his/her workplace.) It is advised to pay the contribution regularly without default. In some cases, the contributor is exempted from the contribution payments when he/she is unable to pay due to a disaster, unemployment, bankruptcy of his/her workplace, etc. In such cases, the



contributor is advised to consult staff in charge of national health insurance at the local municipal administrative office.

(6) Types and contents of national health insurance

Classification	Types of payment
In cases of sickness and injuries	
In cases of receiving treatment with the insured card	→ Medical benefit
In cases of paying the entire medical expenses	→ Medical expenses
In cases of bearing medical fees above a certain level	→ Sizable medical expenses
In cases of being transported for emergency, etc.	→ Transportation fees
In cases of taking leave from work due to medical necessity	→ Invalidity benefit
In cases of childbirth	→ Lump-sum payment for childbirth and childcare
In cases of death	→ Burial fees

(7) What notifications to make in various cases.

Once you enter into a national health insurance program, you will not be withdrawn from it automatically. If you have entered into your workplace health insurance program, you should notify this at the national health insurance counter of your local municipal administrative office within 14 days of its occurrence. Likewise a notification within 14 days is also necessary for events including the following: when insured persons have lost their insurance card or have it damaged; birth of a child; change in the head person of the household; death.

Notification is furthermore necessary when contributors have changed their address as a result of moving out from one place and moving into another place. When they move out, they present their insurance card at the local municipal administrative office governing the place they are to move out from and notify the date of moving out. When they have moved into a new place, they notify it at the local municipal administrative office governing their new address within 14 days of their moving in.

When you move out of Japan, you notify it in advance, bringing your insurance card, seal (if you have one), alien registration certificate, airplane ticket, etc.

(For people aged over 75 years old who are covered by health insurance or the national health insurance there is the medical treatment system for senior citizens - koki-koreisha iryo seido)

Multilingual Living Information



F Medical

[▲ Back to the top of F Medical](#)

