Chapter **6**

Medical Services





Medical institutions

I-1 Types of medical institutions

- There are a variety of medical institutions in Japan and each one has its own role. If your medical concern is not severe, visit a local clinic.
 - i. Doctor's offices, clinics: For treatment of mild symptoms and slight injuries.
 - ii. Middle-scale hospital: For surgeries, hospitalization and emergency care
 - iii. Large-scale hospital: For critical emergencies and advanced medical treatment
- Present your health insurance card at the hospital or clinic, or otherwise you will cover the full amount of medical expenses.
- Find a doctor depends on your symptoms of illness or injuries. Here are some examples:

Internal Medicine	Diagnosis and treatment of diseases affecting the internal organs (digestive, respiratory, circulatory, and urinary organs, blood, endocrine, nerves, etc.) mainly with medication without operations. You can also see them when you catch a cold or have general health problems
Surgery.	Surgical treatments mainly by oerations for internal organs damaged by cancer and injuries
Pediatrics	Treatment of children's illness
Orthopedics	Treatment of the locomotive systems such as bones, joints, muscles, tendons and its related nerves
Ophthalmology	Diagnosis and treatment of eye disorders
Dentistry	Treatment of teeth; endodontics, orthodontics, etc.
Obstetrics	Treatment of pregnancy, childbirth, newborns and related disorders etc.

1-2 How to find medical institution

- You can search for one using any of the following:
 - i. Municipal newsletters issued by the municipal office in your area
 - ii. Online
 - iii. Medical Information Net, which is provided online by your prefectural government
 - * In addition, you can also search for medical institutions (hub medical institutions and other medical facilities that can accept foreign patients, selected by prefectures) in foreign languages on the website of the Japan National Tourism Organization (JNTO) for foreign travelers visiting Japan.

https://www.jnto.go.jp/emergency/jpn/mi_guide.html

- It is also possible to consult at the following:
 - i. The municipal office in your area
 - ii. A Medical Safety Support Center (*)
- * Medical Safety Support Centers are located in about 390 in prefectures, municipalities with public health centers and wards in Tokyo.

See the following URL for details:

https://www.anzen-shien.jp/center/



- If you do not speak Japanese, you can consult at the following:
 - i. The municipal office in your area
 - ii. International associations near you
 - iii. NPOs (they may speak your language)



2

Medical Insurance

No matter where you are from, you are obliged to enroll in public medical insurance in Japan. This is a Japanese social system to guarantee that any resident can equally receives medical services at a high standard at low cost by sharing the cost across the whole of society.

2-1

Health Insurance

(1) Enrollment Requirements

Those who work for a company which is obliged to have their employees enroll in the health insurance and are obliged to enroll in the health insurance:

- . Regular employees, chief executives, board of directors
- ii. Those who fulfill all of the following:
 - who work during office hours for over 20 hours a week;
 - who are expected to work for more than a year for the company;
 - who earn more than 88,000 yen a month;
 - who are not students; and
 - who work for a company with more than 501 employees.
- iii. Those who work as a part-time worker or a temporary staff for less than 30 hours a week but work over three fourths of the weekly labour hours of a regular employee at the same company (work place)





(2) Insurance premiums

As a rule, both the companies (employers) and the insured pay half of the health insurance premiums. Dependents of the insured do not need to pay premiums.

(3) Benefits

Copayment of medical expenses

The copayment ratio of medical expenses for the insured is as follows:

- Preschool infants under six years old 20%
- School-age children through adults up to

Medical expenses

In the following cases, you will need to pay the full amount of expenses by yourself; however, once your application is approved, you will be eligible for reimbursement of the expenses minus your copayment:



- When you have just been employed by a company and not received an insurance card yet;
- When you purchase medical devices such as a cast;
- When you have received an acupuncture, moxibustion or massage which your doctor deems medically necessary; or
- When you have received medical services outside of Japan.

High-cost medical care expenses

The high-cost medical treatment system is a financial support system for cases where the total amount of medical expenses during a month that are paid for treatment or medications (except the cost for food and bed during in hospital) exceeds a certain limit. In such cases, the over-the-limit amount will be covered. The fixed monthly copayment limit varies with age (whether the insured is under 70 years old or not) and the income level of the insured.

Medical transportation expenses

If a patient has a difficulty in moving due to illness or injury, but get transferred due to a temporary and emergency need as instructed by a doctor, he/she will be eligible for reimbursement of his/her medical transportation expenses in cash in cases where the following requirements are fulfilled:

- You have been properly treated at the medical institution where you had been transferred to;
- The reason why the patient has difficulties in transportation is his/her injury or illness which is the cause of the transportation;
- It was an emergency and unavoidable.

Accident and Sickness Allowance

When the insured is unable to work due to illness or injury and have been absent from work for three consecutive days, accident and sickness allowance will be paid from the fourth day of absence.

The duration of payment will be onward for up to 18 months in total counting from the first day of payment.

Childbirth and Childcare lump-sum grant

This is a benefit for an insured or his dependent to help cover expenses related to childbirth. As a general rule, the allowance per child is 420,000 yen.

Maternity Leave Allowance

An insured of health insurance will be eligible to receive Maternity Leave Allowance when she takes leave for give birth. The allowance is paid for the days the insured is away from work during a period starting 42 days (98 days in the case of multiple pregnancies) before the estimated delivery day and 56 days afterward.

Family Medical Expenses

If the dependents of an insured get ill or injured, the insured will be eligible to receive Family Medical Expenses. The range, measure and duration of the payment are the same as that of Medical Expenses for the insured.

2-2

National Health Insurance

(1) Enrollment requirements

- All registered residents who are under 75 and are not in Employees' Health Insurance are obliged to get enrolled in National Health Insurance.
- Foreign nationals are obliged to join National Health Insurance except in the following cases:
 - i. The period of stay is less than three months (*);
 - ii. The status of residence is "Temporary Visitor";
 - iii. The status of residence is "Designated Activities" and the activities are specified as "to receive medical treatment" or "to provide everyday assistance for someone who is engaged in the activities meantioned above";
 - v. The status of residence is "Designated Activities" and the activities are specified as "sightseeing, recreation or other similar activities";
 - v. The status of residence is "Diplomat";
 - vi. Persons who do not have a valid status of residence; or
 - vii. Persons who are from a country with which the Japanese government has a social security agreement with including health insurance, and have an official certificate issued by the government to show their membership of the social insurance system in their home country.
 - Even if your period of stay is shorter than three months, you can join the National Health Insurance if your status of residence is one of the following and if you have any document to certify that your stay will be longer than three months:
 - "Entertainer"
 - "Technical Intern Training"
 - "Dependent"
 - Designated Activities (except iii. and iv. above)

(2) Enrollment and withdrawal application

You can join in or withdraw from National Health Insurance at the municipal office in your area. Ask the municipal office for more details.

- (*) You must withdraw from National Health Insurance in the following cases:
- i. When you move to a different municipality; or
- ii. When you join Employee's Health Insurance.

(3) Insurance premiums

Insurance premiums are calculated on a per-household basis and decided according to the insured's income or the number of the household. This amount is paid by the head of the household.

* Insurance premiums may be reduced in accordance with income and other circumstances. Ask for further information at the municipal office in your area.

(4) Benefits

Copayment of medical expenses

The copayment ratio of medical expenses for an insured is as follows:

- Preschool infants under six years old 20%
- School-age children through adults up to
 - 69 years old 30%

income level: 30%)

Medical expenses

In the following cases, you will need to pay the full amount of expenses by yourself; however, once your application is approved, you will be eligible for reimbursement of the expenses minus your copayment:

- When you have just been employed by a company and not yet received an insurance card;
- When you purchase medical devices such as a cast;
- When you have received an acupuncture, moxibustion and massage which your doctor deems medically necessary; or
- When you have had medical services outside of Japan.

High-cost medical care expenses

The high-cost medical treatment system is a financial support system for cases where the total amount of medical expenses during a month that are paid for treatment or medications (except the cost for food and bed during in hospital) exceeds a certain limit. In such cases, the over-the-limit amount will be covered. The fixed monthly copayment limit varies with age (whether the insured is under 70 years old or not) and the income level of the insured.

Medical transportation expenses

If a patient has a difficulty in moving due to illness or injury, but get transferred due to a temporary and emergency need as instructed by a doctor, he/she will be eligible for reimbursement of his/her medical transportation expenses in cash in cases where the following requirements are fulfilled:

- You have been properly treated at the medical institution where you had been transferred to;
- The reason why the patient has difficulties in transportation is his/her injury or illness which is the cause of the transportation;
- It was an emergency and unavoidable.

Childbirth and Childcare lump-sum grant

This is a benefit for an insured or his dependent to help cover expenses related to childbirth. As a general rule, the allowance per child is 420,000 yen.

2-3

Medical Care System for Elderly in the Latter Stage of Life

(1) Enrollment Requirements

When you become 75 years of age

- All registered residents in Japan aged 75 years or older must join the Medical Care System for Elderly in the Latter Stage of Life.
- Those who are between 65 and 74 years old and have been approved as having certain disabilities can also join this program.
- You have to withdraw from other insurance programs (National Health Insurance, Health Insurance Associations, Japan Health Insurance Association, or Mutual Aid Association, etc.)
- All foreign nationals aged 75 years or older, except in the following cases, must join this program as well:
 - i. The period of stay is less than three months (*);
 - ii. The status of residence is "Temporary Visitor";
 - iii. The status of residence is "Designated Activities" and the activities are specified as "to receive medical treatment" or "to provide everyday assistance for someone who is engaged in the activities meantioned above";
 - The status of residence is "Designated Activities" and the activities are specified as "sightseeing, recreation or other similar activities";
 - v. The status of residence is "Diplomat";
 - vi. Persons who do not have a valid status of residence; or
 - vii. Persons who are from a country with which the Japanese government has a social security agreement including health insurance, and have an official certificate issued by the government to show their membership of the social insurance system in their home country.
 - * Even if your period of stay is shorter than three months, you can join the program if your status of residence is one of the following and if you have any document to certify that your stay will be longer than three months:
 - "Entertainer"
 - "Technical Intern Training"
 - "Dependent"
 - "Designated Activities" (except iii. and iv. above)

(2) Enrollment and withdrawal application

Your application can be submitted at the municipal office in your area. Ask the municipal office for more details. Those who move to another municipality in another prefecture should withdraw from this program.

(3) Insurance Premiums

Insurance premiums are the total amount of per-capita base and income-base charges.

There are cases in which the premiums are reduced for dependents in the employees' health insurance or for the insured in accordance with their income level and life status. Ask for more details at the municipal office in your area.

(4) Benefits

Copayment of medical expenses

When you receive medical treatment under the insurance coverage, your copayment ratio is 10%. However, if you have an income at a preretirement level, your portion is 30%.

Medical expenses

In the following cases, you will need to pay the full amount of expenses by yourself; however, once your application is approved, you will be eligible for reimbursement of the expenses minus your copayment:



- When you have just been employed by a company and not yet received an insurance card;
- When you purchase medical devices such as a cast;
- When you have received an acupuncture, moxibustion and massage which your doctor deems medically necessary; or
- When you have had medical services outside of Japan.

High-cost medical care expenses

The high-cost medical treatment system is a financial support system for cases where the total amount of medical expenses during a month that are paid for treatment or medications (except the cost for food and bed during in hospital) exceeds a certain limit. In such cases, the over-the-limit amount will be covered. The fixed monthly copayment limit varies with the income level of the insured.

Medical transportation expenses

If a patient has a difficulty in moving due to illness or injury, but get transferred due to an instruction by a doctor, he/she will be eligible for reimbursement of his/her medical transportation expenses in cash in cases where the following requirements are fulfilled:

- You have been properly treated at the medical institution where you had been transferred to;
- The reason why the patient has difficulties in transportation is his/her injury or illness which is the cause of the transportation;
- It was an emergency and unavoidable.



Medicine

- Medicine can be purchased at pharmacies and drugstores.
- Medicine is often used to cure diseases and injuries. However, bear in mind that any medicine has side effects and that it should be handled with care.
- If you have any questions about any medicine, consult a pharmacist or a registered drug seller at the drugstore.
 - * A registered drug seller offers some over-the-counter (OTC) drugs as well.

3-1

Pharmacies

A pharmacy is a shop where pharmacists prepare and compound prescription medications for you. OTC drugs are also available.

3-2

Drugstores

OTC drugs are available at drug stores. However, prescription medications cannot be prepared at drugstores.

