

## Okinawa Prefecture Elderly Healthcare Association

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#### Introduction

The Healthcare System for the Elderly Aged 75 and Over was made to clarify the obligations of the elderly and of the working generation, and for society as a whole to support healthcare expenses of the elderly. It is operated by the local elderly healthcare association to which all municipalities from each prefecture belong to.

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## Roles of municipalities and local associations

The healthcare system for the elderly aged 75 and over is operated by a local association established in each prefecture. Municipalities carry out reception operations.



#### **Roles of municipalities**

#### The contact point for applications and other notifications

- Handing over of Eligibility Confirmation Certificate
- Health insurance premium collection
- Applications and notification processing
   Etc.

#### Roles of local associations

#### Operate the system

- Issuance of Eligibility Confirmation Certificate
- Health insurance premium determination
- Benefit provision when receiving medical care Etc.





## Where should I submit notifications to?



Please submit notifications to your local municipality's reception desk.

The local association is the main operator, and the municipality is the reception desk. For more information, please contact your local municipality (see the list of municipalities on the back cover).

"Frailty" refers to a state of decline in both physical and mental functions brought about by old age. It lies between being in a "healthy state" and a "state requiring nursing care", where there is a risk of becoming dependent on nursing care. However, it is possible to revert to a healthy state just by readjusting lifestyle habits at an early stage. Let's review our lifestyle habits and stay healthy!

# Those covered by the system

## People over the age of 75

Starting on the day of your 75<sup>th</sup> birthday



## People between the ages of 65 and 75 with certain disabilities

(\*Must apply and receive approval from your local association.)

To receive coverage, you must transfer from your currently-enrolled healthcare provider such as National Health Insurance, Health Insurance Association, Mutual Aid Association, etc., to the healthcare system for the elderly.



My husband is insured by the healthcare system for the elderly. Which healthcare insurance system will I (70 years old), a dependent of my husband's social insurance, be covered by?

Please enroll in a medical insurance, such as National Health Insurance, from the social insurance you are currently enrolled in.

\* If you have other family members who have healthcare insurance other than National Health Insurance, you can also become their dependents. Please contact the applicable healthcare insurance company.

(Let's get started today! Measures against frailty

## My Number

The My Number Card can be used as an insurance card at medical institutions, etc., by applying to use it as an insurance card (My Number Health Insurance Card).

#### Application to use the My Number My Number Ortal **Health Insurance Card**

 Application to use the My Number Card as an insurance card may be done using a card reader provided at the reception desk of medical institutions, etc., or through the My Number Portal site.



#### Eligibility Information Notice (Notification of Eligibility Information) (Issuance is scheduled to start in August 2025)

My Number Health Insurance Card holders who fall under the following will be issued an Eligibility Information Notice (Notification of Eligibility Information) which lists the insured person's eligibility status (insured person's number, insurer name, name, copayment ratio, etc.).

- Those acquiring new eligibility
- Those whose eligibility information has changed (in case of change in name or copayment ratio, etc.)
- \* Even when falling under the above, issuance will not be made if an Eligibility Confirmation Certificate has been issued.

If the scanner at medical institutions, etc., is unable to read the My Number Health Insurance Card, medical treatment can still be received by presenting the My Number Health Insurance Card along with the "Notification of Eligibility Information" or the "My Number Portal Eligibility Information Screen."

## Confirmation Certific

For those who do not have a My Number Health Insurance Card, an Eligibility Confirmation Certificate will be issued (no application is required).

By presenting the Eligibility Confirmation Certificate at the counter of medical institutions, etc., medical treatment may be received at a certain copayment amount, as before.

However, even My Number Health Insurance Card holders will be issued an Eligibility Confirmation Certificate in the following cases (application is required):

- Those who have lost their My Number card or are in the process of renewing it
- Those having difficulty receiving medical treatment using the My Number Health Insurance Card, requiring assistance from a third party such as a caregiver to accompany them to help with eligibility confirmation

Furthermore, Eligibility Confirmation Certificates will also be issued to My Number Health Insurance Card holders until July 31, 2025.

This particularly includes walking indoors and doing step exercises, eating three well-balanced meals a day, keeping the mouth clean, as well as strengthening the muscles in the mouth and tongue, etc., to enable proper chewing when eating.

## **Insurance Premiums**

### Those who must pay insurance premiums

All persons insured by the healthcare system for the elderly aged 75 and over must pay for their health insurance card. After turning 75 years old (65 for those with certain disabilities), even those who were dependents of employee insurance (medical insurance such as that of health insurance associations and mutual aid associations) who previously had not paid insurance premiums must also pay them.

### How insurance premiums are determined

An insurance premium is determined by the elderly healthcare association based on the total amount of the insured's per capita rate paid equally by the insured and the amount of their income paid according to their previous year's income.



<sup>\*</sup> Carryover deductions for miscellaneous losses do not apply.

#### The basic deduction amounts are as follows:

Total income amount	Basic deduction amount
24 million yen or less	430,000 yen
24 million yen to 24.5 million yen or less	290,000 yen
24.5 million yen to 25 million yen or less	150,000 yen
Over 25 million yen	0 yen

- Note 1) Insurance premiums have a levy limit (maximum amount of insurance premiums).

  The levy ceiling amount for FY 2025 is 800,000 yen.
- Note 2) The premium amount determined is valid from April 1 of the same year to March 31 of the following year.
- Note 3) Various deductions such as healthcare expense deductions and social insurance deductions, life insurance deductions, spouse and child deductions are not applied like taxable income tax and municipal tax (resident tax).
- Note 4) The criteria for determining the amount of your insurance premium (per capita rate, income rate) are set every two years.



### When you can receive a reduced insurance premium

Reduction measures for those with a low income

#### Reduced per capita rate

The per capita rate of your insurance premium (56,400 yen) is reduced as follows according to the income level of the household (head of household and the insured).

Criteria for reducing the per capita rate burden of insurance premiums

#### Total income of the household (head of household and the insured)

Reduced rate

Households that do not exceed the basic deduction amount (430,000 yen)\*

**70**% eduction

Basic deduction amount (430,000 yen) ★ + 305,000 yen A household that does not exceed the number

**50**% reduction

of insured persons belonging to the household Basic deduction amount (430,000 yen) ★ + 560,000 yen

A household that does not exceed the number of insured persons belonging to the household reduction

★ For households with two or more people receiving income, the following amount is added to the basic deduction amount (430,000 ven).

(Number of people receiving income -1) × 100,000 yen

#### Who qualifies as a person receiving income?

- Those with salary income of more than 550,000 ven (excluding salary) for full-time employee)
- Those under 65 years old with public pension income of more than 600,000 yen, and those at 65 years old and above with more than 1,250,000 yen.
- \* As of January 1, for public pensioners aged 65 and over, 150,000 yen is deducted from their pension income in the reduction judgment.
- \* The head of the household is subject to the reduction judgment even if they are not insured by the healthcare system for the elderly.
- \* The reduction judgment will be made based on the situation of the household as of April 1st (or the qualification acquisition date if a new qualification is acquired after April 2nd).
- \* Full-time employee salary deductions and special deductions for capital gains are not applicable.

#### Be careful, with signs like these!

- Not doing exercises (decreased level of activity)
- Have fallen within the past year

## Reduction measures for those who were employee insurance dependents

If you were a dependent of an insured person's insurance (health insurance association, mutual aid association, etc.) medical insurance (municipal national insurance or national insurance association is not covered) on the day before joining the Health Care System for the Elderly, the per capita amount will be reduced by 50% (for 2 years after joining the Medical Care System for the Elderly), and no per income amount will be imposed.

\* When qualifying for the 70% reduction in the per capita ratio amount under the reduction measures for those with lower incomes (see page 7), the 70% reduction in the per capita ratio amount will take priority.

#### How to pay your insurance premium

As a general rule, your insurance premium is deducted (**special collection**) from your pension (those with an annual amount of 180,000 yen or more).

\* If you are newly enrolled or change addresses in the middle of the year, your premium will be temporarily charged through general collection.

#### **Deducted from your pension**

#### **Special collection**

#### Persons who are eligible

Those with an annual pension of 180,000 yen or more (when the total amount combined with your long-term care insurance premium does not exceed half of the annual amount)



#### How to pay your insurance premium

Your insurance premium is deducted from your pension when the pension is paid.

Provisional collection		Regular collection			
April (1 <sup>st</sup> term)	June (2 <sup>nd</sup> term)	August (3 <sup>rd</sup> term)	October (4 <sup>th</sup> term)	December (5 <sup>th</sup> term)	February (6 <sup>th</sup> term)
The provisionally calculated premium will be deducted until the previous year's income is confirmed (in principle, the same amount deducted in February will be deducted).			confirmed, subtracting amount from	orevious year the amount of the provision the annual insur	obtained by al collection rance premium

You can request to have the amount transferred directly from your bank account. If you wish to do so, please inform the local office in your municipality.

Let's get started today! Measures against frailty

Improve the balance of meals!

Getting enough nutrition is vital to strengthening the muscles. Eat well to maintain physical strength and immunity. If you cannot have the amount deducted from your pension, you will have to pay the insurance premium by payment slip sent from your local municipality or by account transfer (general collection).

#### By payment slip/account transfer general collection

#### Persons who are eligible

- Those whose annual amount of long-term care insurance deducted is less than 180,000 ven
- Those whose total amount combined with their long-term care insurance premium exceeds half of the pension amount



- Those whose long-term care insurance premium is not deducted from their pension
- Those who are newly enrolled or who change addresses in the middle of the year

#### How to pay your insurance premium

Payment slips must be paid by the due date set by the municipality.

For those paying by direct transfer, amounts will be deducted from the account registered on the date set by the municipality.



#### Direct transfer is **CONVENIENT**!

You don't have to worry about forgetting to pay or carrying cash with you, making it simple, safe, and convenient.



To apply, fill out the "Direct Transfer Request Form" at the financial institution designated by your local municipality.

#### About social insurance deductions

Those who have paid the premium for the healthcare system for the elderly aged 75 and over qualify for the social insurance deduction for income tax and personal residence tax. For more information, please contact the tax office or the reception counter at your municipality.

#### Be careful, with signs like these!

- Not eating 3 meals a day properly
- Have lost weight (2-3 kg or more in 6 months)

## Consequences of not paying your insurance premium

A reminder will be sent in case of failing to pay insurance premiums without a valid or special reason. Continued delinquency in payments will be subject to "special medical expenses," which means all medical expenses will be shouldered by the insured person. Make sure to pay the insurance premiums before the deadline.

## Insurance premium reduction and exemption system

In Okinawa Prefecture, those who meet the following conditions may be eligible for an insurance premium reduction or exemption if they meet certain criteria.

★ A dramatic reduction in income as a result of damage to housing and other property due to disasters such as earthquakes, fires, storms and floods, poor crops due to a drought, unemployment, suspended business operations, etc.





\* If you cannot pay your insurance premium due to unavoidable circumstances, please contact the office in charge of your municipality as soon as possible.



Q

I paid for my national health insurance by direct transfer, so I shouldn't have to set it up again, right?



They are different systems, so your national health insurance account information does not transfer over automatically.

To set up direct transfer, you must apply for it again.





I think my son (head of household) is the one paying...



The person enrolled is obliged to pay, not the head of the household.

For national health insurance, the person who is obliged to pay the insurance premium is the head of the household or the one insured by a company, but for the healthcare system for the elderly aged 75 and over, the person enrolled is responsible for payment.

#### For inquiries

- About payment of insurance premiums Please contact the municipality where you currently live (see the list of municipalities on the back cover).
- About the contents of your insurance premium

Please contact your local elderly healthcare association.



#### Be careful, with signs like these!

- It has become difficult to eat solid foods in the past six months.
  \*Dried squid, pickled radish, etc.
- Have experienced choking on tea or soup.

## When visiting the doctor

The out-of-pocket rate depends on your income category. Income category is determined by factors such as your residential taxable income\* (income after various deductions) for the year (April to July counts as the previous fiscal year).

- If you make an income revision, your income category may change from August 1st (base date).
- If you visit a large hospital without a letter of referral, you will be charged a separate fee.
- Patients may be able to receive combined medical treatment not covered by insurance (patient-requested medical treatment) if they request it.

Out-of-pocket expense ratio	Income category		
	Category (comparable to current workforce) III Insured persons with resident taxable income of 6,900,000 yen or more and insured persons in the same household as the insured.		
<b>30</b> %	Category (comparable to current workforce) II Insured persons with resident taxable income of 3,800,000 yen or more and insured persons in the same household as the insured.		
, •	Category (comparable to current workforce) I Insured persons with resident taxable income of 1,450,000 yen or more and insured persons in the same household as the insured.		
<b>20</b> %	General II  An insured person in the same household with a taxable income of 280,000 yen or more, who falls under ① or ② below.  ① There is only one insured person in the same household, and the total amount of pension income + other total income is 2,000,000 yen or more ② There are 2 or more insured persons in the same household and the total amount of pension income + other total income is 3,200,000 yen or more		
10	General I  Persons other than those with income comparable to current workforce General II, Category (low income) II, Category (low income) I. Those born on or after January 2, 1945 whose residential taxable income is 1,450,000 yen or more and whose total old proviso income combined with that of an insured person of the household to which they belong is 2,100,000 yen or less.		
10 %	Category (low income) II  Those whose household members are all exempt from residence tax [Persons not from category (low income) I ]		
	Category (low income) I  Those whose household members are all exempt from residence tax, and		

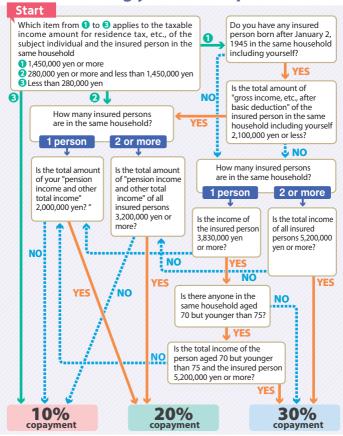
whose income after deducting necessary expenses and deductions from each income of the household is 0 yen (The amount deducted for pension is calculated as 800,000 yen. 100,000 yen is deducted from salary income)

Out of nacket

<sup>\*</sup> If the head of the household is the insured as of December 31 of the previous year (including those to be insured after December 31 of the previous year) and there are people under the age of 19 who have a total income (for salaried workers, 100,000 yen is deducted from salary income) of 380,000 yen or less in the same household, a certain amount (amount multiplied by 330,000 yen for those under 16 years old, 120,000 yen for those 16 years old or older and under 19 years old) will be deducted from the insured's income.

- ★Those who have a copayment ratio of 30% whose total income during the previous year is less than the following standard amount, should submit a "Standard income amount application form" to the person in charge of the local municipality, and if approved by the local association, the co-payment ratio will be 10% or 20%.
  - There is one insured person in the same household and your income is less than 3,830,000 yen
  - There are multiple insured persons in the same household and your income is less than 5,200,000 yen
  - There is one insured person in the same household and your income is 3,830,000 yen or more, but there is a person between the ages of 70 and 75, and your total income combined is less than 5,200,000 yen.
- ★For those who pay 20% copayment, measures are in place to limit the monthly outpatient medical burden increase up to 3,000 yen compared to 10% (medical expenses for hospitalization are not covered) from October 1, 2022 until September 30, 2025.

### Determining your out-of-pocket ratio



Note 1) An insured person refers to someone who is insured for healthcare for the elderly.

Note 2) Income refers to the amount written in the **payment amount** column of withholding

slips for public pensions, the **sales** column for business, the **total income** column for rent and other real estate, and the **sales price** column for the transfer of shares.

# When you have high medical expenses

If the copayment for medical expenses at one medical institution exceeds the monthly limit or ceiling, the amount that exceeds the limit will not be paid. If the total amount at two or more medical institutions exceeds the monthly limit, the difference after combining them will be paid at a later date as High-cost Medical Expense.

- The ceiling burden category may be presented to a medical institution by either "indicating it as an optional item on the Eligibility Confirmation Certificate (if it is not indicated, it can be added at the city's Late-stage Elderly Medical Insurance counter)" or "agreeing to provide category information on the My Number Health Insurance Card (online eligibility confirmation)." If the burden category is not provided, payment for the maximum category for each burden ratio will be required, and any payment exceeding the actual burden category will be paid at a later date as High-cost Medical Expense.
- If you turn 75 in the middle of the month and switch to the healthcare system for the elderly aged 75 and over, the maximum amount of both your previous medical insurance and the healthcare system for the elderly will be halved.

#### **Procedure flow**

- If the medical expenses for one month (from the 1st to the end of the month) become high, the portion exceeding a certain amount (out-of-pocket limit) will be paid as a high-cost medical care expense.
- On your first time, we will send you a recommendation notice (postcard) so that you can complete the procedure at the office in charge of your municipality.
- Once you complete the procedure, you will be automatically paid (via bank transfer) every time you incur a high-cost medical expense.
  - The total is calculated regardless of hospital, clinic, or clinical department.
  - Meals during hospitalization and differential bed charges that are not covered by insurance are not covered by such payments.

#### Out-of-pocket limit amount (monthly) Scheduled for revision in FY 202:

Income category (refer to P12)		Outpatient (calculated for each individual)	Outpatient + hospitalization (by household)*5
•••••••	Category (comparable to current workforce)	252,600 yen + [(total medical expense (140,100 yen) *1	s – 842,000 yen) x 1%]
Active income earners	Category (comparable to current workforce)	167,400 yen + [(total medical expenses – 558,000 yen) x 1 (93,000 yen) *1	
	Category (comparable to current workforce) I	80,100 yen + [(total medical expenses (44,400 yen) *1	– 267,000 yen) x 1%]
General II		18,000 yen *2 or [6,000 yen + (medical expenses – 30,000 yen) x 10%], whichever is lower is applied *3	57,600 yen (44,400 yen) *4
General I		18,000 yen*2 (44,400 ye	
Category (low income) $II$		8,000 yen*2 24,600	
Category (low income) I		8,000 yen*2	15,000 yen

<sup>\*1</sup> The maximum amount from the 4th month when the same household has 3 or more months to pay high-cost medical expenses within 12 months.

\*2 The annual limit (August to July) is 144,000 yen.

- \*3 If the medical cost is less than 30,000 yen, it will be calculated as 30,000 yen. If the total copayment for outpatient care for one month exceeds 6,000 yen, the increase in copayment will be limited to 3,000 yen. If applicable, it will be reimbursed at a later date as High-Cost Medical Expense. The transitional measure covers medical treatment from October 2022 up to September 2025.
- \*4 The maximum amount from the 4th month when the same household has 3 or more months of high-cost medical expenses that exceed the outpatient + hospitalization (by household) limit within 12 months.
- \*5 This is different from the household unit on the Resident Register. Only those enrolled in the same public health insurance can combine their contributions as a household.

#### When receiving high-cost treatment for a prolonged period of time

Those who require long-term, continuous, and expensive treatment for a specific disease designated by the Minister of Health, Labor and Welfare (including those undergoing treatment for specific diseases, who have subscribed for the Late-stage Elderly Medical Insurance), can apply for a "Certificate of Medical Treatment for Specified Diseases" at the local municipal office and present it at the counter of the medical institution. By presenting this certificate, the monthly copayment amount will be capped at 10,000 yen per medical institution (inpatient/outpatient) or pharmacy.

#### Specific diseases designated by the Minister of Health, Labor and Welfare

- ① Some congenital coagulation disorders caused by a blood factor deficiency
- 2 Chronic renal failure with artificial kidney
- ③ HIV infection caused by administration of blood coagulation factor preparation

#### Items needed to apply

- Eligibility Confirmation Certificate
   Individual number card or notification card and identity verification documents. etc.
- A seal is required when application is done by a family member, etc.

\*Monthly refers to the period from the 1st to the end of the month.

#### Be careful, with signs like these!

- Getting comments from people around about being forgetful, and "always asking the same questions"
- Sometimes forgetting what day it is

# High-cost medical care // long-termcare combined system

The high-cost medical care/long-term care combined system provides payments when the annual limit is exceeded by adding up the out-of-pocket costs of both the healthcare system for the elderly and long-term care insurance.

#### Maximum amount when added up (annual amount/ per household)

(Applicable every year from August to July of the following year.)

Ir	Limit	
Active	Category (comparable to current workforce)	2,120,000 yen
income	Category (comparable to current workforce)	1,410,000 yen
earners	Category (comparable to current workforce)	670,000 yen
General I • II		560,000 yen
Category (low income) II		310,000 yen
Category	190,000 yen	

 Out-of-pocket payments do not include meals, extra beds, and other non-insurance payments. In addition, if a large amount of medical expenses is paid, the amount will be deducted.



(Let's get started today! Measures against frailty

# Meal expenses, etc. when hospitalized

You are responsible for paying the standard cost of meals (per meal) out of pocket.



Income category (refer to P12)	Per meal expense
Active income earners	<b>510</b> yen* <sup>1</sup>
General I • II	510 yen*1
Category Days hospitalized in the last 12 months is within 90	240 yen
(low income) II Days hospitalized in the last 12 months is 91 or more*2	190 yen
Category (low income) I	110 yen

<sup>\*1</sup> Some may be 300 yen

#### Meal and living expenses when admitted to a long-term care bed

You are responsible for paying standard meal and living expenses out of pocket.

Income category (refer to P12)	Per meal expense	Living expenses per day
Active income earners	510 yen*3	370 yen
General I • II	510 yen* <sup>3</sup>	370 yen
Category (low income) II	240 yen	370 yen
Category (low income) I	140 yen	370 yen
Old-age welfare pension recipient	110 yen	0 yen

<sup>\*3</sup> May be 470 yen at some medical institutions (according to facility standards, etc.)

#### Be careful, with signs like these!

Not going out even once a week

Decrease in social interactions with family and friends

<sup>\*2</sup> Application may be made to have the amount reduced to 190 yen in case of being hospitalized for more than 90 days in the past 12 months. Please apply at your local municipal office.

Those in category (low income) I and II can have their standard copayment amount reduced by using the My Number Health Insurance Card or presenting a document that can confirm the standard copayment amount applicable category. If the above-mentioned document is not available, please apply at the relevant office.

Costs may be reduced depending on income and illness.

# You can also receive benefits in these cases

### When using a home-visit nursing station, etc.

The use of visiting nursing station services, etc., at the direction of a physician, will be handled in the same way as visiting a medical institution as long as the My Number Health Insurance Card is used or an Eligibility Confirmation Certificate is presented.

\* No municipal procedures are required.



## Combined medical treatment not covered by insurance

When receiving advanced medical treatment, etc., insurance will apply to the areas that are common to general medical treatment, and the My Number Health Insurance Card or Eligibility Confirmation Certificate may be used to receive treatment.

#### **When an insured dies**

If the insured dies, the person who arranges the funeral can apply to receive a funeral expense payment of 20,000 yen.





## When in a traffic accident

If you become ill or injured by the actions of a third party due to a traffic accident or an accident at a facility, etc., you can receive medical treatment under the healthcare system for the elderly aged 75 and over by notification. In

such a case, the healthcare system for the elderly aged 75 and over will reimburse the medical expenses and later charge the perpetrators for the expenses.



#### Make sure to notify the office in charge of your municipality.

Bring your Eligibility Confirmation Certificate, seal, and accident certificate (this can be done at a later date. Please report it to the police and get it issued) and go to the office in charge of your municipality to complete the procedure for "Report of injury or illness caused by a third party".



#### → Proceed with settlements carefully ◆

If you receive medical treatment expense payments from the perpetrator or complete a settlement, you may not be able to receive medical treatment under the healthcare system for the elderly aged 75 and over. Please be sure to consult with the office in charge of your municipality before making a settlement.



## Reimbursable costs

### Medical expenses

In the following cases, you will first need to pay the full amount out of pocket, but if you apply for reimbursement at your municipal office and the local association approves, you will be reimbursed for the amount excluding the out-of-pocket portion you are responsible for.

◆When forced to receive medical treatment without having My Number Health Insurance Card or Eligibility Confirmation Certificate due to an accident or sudden illness, or when receiving medical



- treatment due to sudden illness while traveling overseas. \* Not applicable if your purpose of traveling
- abroad is to receive treatment.
- When you incur costs for transfused blood or prosthetics that the doctor deems necessary for treatment such as corsets



### **Transportation costs**

If the local association deems that costs were incurred for an urgent and unavoidable transfer of a seriously ill person at the direction of a doctor, such costs will be reimbursed.



\* Voluntary transfer due to a personal reason is not acknowledged.

Please contact us in advance so that we can tell you what documents you need for your application.





Includes exercise videos You can do it at home! 30-minute daily exercises 2

# Massage and acupuncture treatment

In order to receive treatment using health insurance, a written consent or medical certificate issued by a doctor in advance is required. To continue receiving treatment, it is necessary to see your doctor regularly and get a consent again.

### **Massages**

#### Cases that can be covered by health insurance

Cases requiring medical massages due to muscle paralysis or joint contracture

### Acupuncture

#### Cases that can be covered by health insurance

Diseases that are accompanied by chronic pain such as neuralgia, rheumatism, cervicobrachial syndrome, frozen shoulder, lower back pain, and sequelae of cervical spinal cord contusion

#### Attention

#### Cases that cannot be covered by health insurance

- Those for diseases which you are being treated for at an insurance medical institution (hospital, clinic, etc.)
- Those which are simply for recovery from fatigue and for comfort
- Those which are for disease prevention
- Home-visit fees are covered by insurance only if you cannot go out due to injury or illness. This does not apply for reasons such as when it is troublesome to go to the practitioner, you have no means of transportation, or it is difficult for you to walk.
- Please keep your receipt in a safe place as you will need it when you receive a medical expense deduction. In addition, your partial collection status may be checked. Your cooperation is appreciated.



## Judo therapy (orthopedia clinic/) treatment

Judo therapy (osteopathic/orthopedic/bone-setting) treatment is for addressing **traumatic** injuries (those caused by slips, falls, or hits).

#### When health insurance can be used

- When the cause of injury is clearly due to a bone, muscle, or joint injury.
- When you receive treatment for a fracture, dislocation, bruise or sprain (including so-called muscle strain) diagnosed by a doctor or a judo therapist. (For fractures and dislocations, the consent of a doctor is required in advance, except in cases requiring first aid treatment.)

## Attention Examples of when health insurance cannot be used

- Treatment for mere stiff shoulders and muscle fatigue (caused by fatigue and chronic factors).
- Long-term treatment that does not improve chronic diseases such as sequelae of brain diseases and symptoms.
- When receiving treatment for the same injury at an insurance medical institution (hospital, clinic, etc.).
- Discounts on partial coverage are not permitted, and receipts are assumed to be issued free of charge. Be sure to receive and keep the receipt, and check the amount in your medical expense notification.



### To optimize medical expenses

The medical expenses incurred for acupuncture, massage, and judo therapy are paid from your insurance premiums, etc.

Please do the following to ensure proper medical expenses.

- Explain exactly what caused the injury (when, where, what you did, what symptoms you have).
- Carefully check the contents of the medical treatment fee payment application (cause of injury, name of injury, number of days, amount of money), and sign.



- Be sure to receive and keep the receipt, and check the amount and number of days in your medical expense notification.
- If a procedure is long-term, it may be due to medical factors, so consult your doctor.

You may be asked about your treatment date and treatment details.



If treated by a Judo therapist, please note the injured body part, treatment details, record of the treatment date, receipt, etc., so that you can cooperate in answering any questions asked.



## About the insurance business (longevity health checkups)

Local elderly healthcare associations conduct health checkups for the early detection and treatment of lifestyle-related diseases. Even if you don't have any subjective symptoms, you should receive an annual longevity checkup. You can choose between a mass screening or an individual screening.

#### 1 Those eligible

Persons insured by the healthcare system for the elderly aged 75 and over (people aged 75 and over and those aged 65 and under 75 who have certain disabilities)

\*Those who have been hospitalized for more than 6 months or who have been admitted to a facility are not eligible for a checkup.

#### Date and place of checkups

The date and place of group checkups differ depending on the municipality, so please contact the office in charge of checkups in your municipality for details. You can also receive an individual checkup at a medical institution (please ask your municipality or local association for the medical institution).

#### Checkup expenses

Examination is done free of charge once a year. However, from the second time onwards, self-payment of full amount may be required.

#### 4 Application/consultation tickets

The medical examination ticket as well as the My Number Health Insurance Card or Eligibility Confirmation Certificate are necessary when having a health checkup. For information on how to apply and receive a consultation ticket, please contact the office in charge of municipal health examinations in your area.

#### → Health checkup items ◆

- Body measurement (height, weight, BMI, abdominal circumference)
- Medical examination by a doctor
- Blood pressure measurement
- Blood test (including uric acid and serum creatinine)
- Urinalysis (urine sugar, urine protein, urine occult blood)
- Anemia test, electrocardiogram test, fundus test (Detailed items at the discretion of the doctor)



The basic method for the prevention of infection is hand washing. Wash your hands thoroughly with soap!

## **Use generic medicine!**

### What is generic medicine?



Cheaper medicine with the same ingredients and efficacy as the original kind

It is medicine that has been recognized to have the same effect as the original version of certain medicine.

Medicine that is easier on both medical expenses and household budgets

Since they are made based on original medicine whose patent period has expired, their prices are lower, reducing the burden of medicine expenses.

Of course, their safety is guaranteed

They are safe because they are made from the ingredients of the original medicine that has been used for a long time. In addition, their quality and safety are thoroughly inspected.

**When using generic medicine** 

Please consult your doctor or pharmacist and receive sufficient explanation before use.

## About the organ donation column

The Eligibility Confirmation Certificate and My Number Card have a "section for expressing intent regarding organ donation." Both your willingness and your family's willingness is important when it comes to organ donation. Please take the opportunity to discuss this with your family and fill out the column according to your views.

\* If you do not wish to express your intention, you may choose to leave it blank.

#### For questions and inquiries regarding organ donation

**Japan Organ Transplant Network** 

Toll-free

Website

https://www.jotnw.or.jp/

0120-78-1069

instructions on how to wash your hands.

Make sure to wash your hands after returning home, before and after meals, after coughing or sneezing, after touching something outside, etc. Please watch the video for detailed

hing ailed

## The Healthcare System for the Elderly Aged 75 or Older - Supported by Everyone

Under the current system, as a general rule, all insureds pay about 10% of medical expenses as insurance premiums, and the remaining 90% is funded by financial resources from public expenses of the national, prefectural, and municipal governments and insurance premiums of the working generation.

Measures are being taken to reduce the per capita rate of insurance premiums by 70%, 50%, and 20% for low-income earners, and to reduce the per capita rate by 50% for dependents.

The future of the healthcare system for the elderly aged 75 and over is currently under discussion by the government.



National 4/12 Prefectural 1/12 Municipal 1/12

Support fund for the elderly aged 75 and over Insurance premiums of

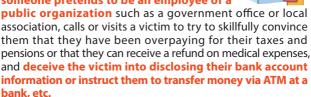
the working generation

#### **Beware of refund fraud**

#### There have been many reported cases of financial fraud

Be careful, as cases of refund fraud have been reported all over the country.

Refund fraud refers to fraudulent acts in which someone pretends to be an employee of a



To avoid being deceived by such tricks, avoid judging the situation on you own, and rather, consult with your family, or contact your local municipality, police, or elderly healthcare association.

Gather information on how to make your mind and body healthy

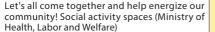
# Be sure to report the following situations

 Your individual number (My Number) is required to make a report.
 Please bring your individual number card or notification card and any identity verification documents.

Situation	Required items	When
You are between the ages of 65 and 75 with a certain disability and wish to enroll	Eligibility Confirmation Certificate, national pension certificate, disability certificate, or any other document that shows the degree of disability, seal	When trying to get a disability certification
You can no longer receive welfare	Suspension of public welfare notice, seal	Within
You moved from another prefecture	Eligibility Confirmation Certificate, cost category certificate, seal	14 days
You are an insured with a certain disability between the ages of 65 and 75 and intend to withdraw from healthcare for the elderly	Eligibility Confirmation Certificate, seal	When you want to withdraw your disability certification
You start to receive welfare	Eligibility Confirmation Certificate, start of welfare notice, seal	
You are moving to another prefecture	Eligibility Confirmation Certificate, seal	
You have passed away	Eligibility Confirmation Certificate of the deceased, seal of the reporter	Within 14 days
Your address has changed within the prefecture	Eligibility Confirmation Certificate, seal	
Your name has changed	Eligibility Confirmation Certificate, seal	
Your Eligibility Confirmation Certificate is lost or damaged and unusable	Eligibility Confirmation Certificate, seal	Immediately

<sup>\*</sup> Items other than the above may also be needed. Please contact the office in charge of your municipality.

<sup>\*</sup> If signing by hand, a seal may not be needed.







## List of municipalities

Municipality	Contact 🏗	Municipality	Contact 🕿
Naha-shi	098-917-0410	Kadena-cho	098-956-1111 (Main)
Ginowan-shi	098-893-4411 (Main)	Chatan-cho	098-936-1234 (Main)
Ishigaki-shi	0980-87-9040	Kitanakagusuku- son	098-935-2267
Urasoe-shi	098-876-1717	Nakagusuku- son	098-895-2171
Nago-shi	0980-53-1212 (Main)	Nishihara-cho	098-911-9163
Itoman-shi	098-840-8127	Yonabaru-cho	098-945-2204
Okinawa-shi	098-939-1212 (Main)	Haebaru-cho	098-889-1798
Tomigusuku- shi	098-850-0160	Tokashiki-son	098-987-2322
Uruma-shi	098-973-3177	Zamami-son	098-896-4045
Miyakojima- shi	0980-72-3751 (Main)	Aguni-son	098-988-2017
Nanjo-shi	098-917-5327	Tonaki-son	098-989-2317
Kunigami-son	0980-41-2765	Minamidaito- son	09802-2-2036
Ogimi-son	0980-44-3003	Kitadaito-son	09802-3-4055
Higashi-son	0980-43-2202	Iheya-son	0980-46-2142
Nakijin-son	0980-56-4189	Izena-son	0980-45-2819
Motobu-cho	0980-47-2701	Kumejima-cho	098-985-7124
Onna-son	098-966-1217	Yaese-cho	098-998-2210
Ginoza-son	098-968-3253	Tarama-son	0980-79-2623
Kin-cho	098-968-2116	Taketomi-cho	0980-83-7415
le-son	0980-49-2002	Yonaguni-cho	0980-87-3575
Yomitan-son	098-982-9213		

This pamphlet was published in March, 2025. Its contents are subject to change in the future.

