

# A Guidebook for Kyoukai Kenpo



P.3 Receiving examinations from medical institutions, etc. using a My Number Card as your Health Insurance Certificate

P.9 Structure of medical insurance

At the beginning of each section, the following symbols are used to indicate whom the information introduced is for.

- S** For insured persons (yourself)
- D** For dependents (family members)
- E** For employers

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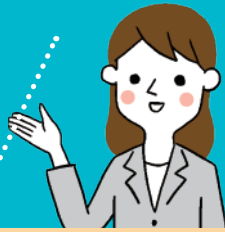
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Changing your health insurance card to a My Number Card as your Health Insurance Certificate



# Receiving examinations at medical institutions, etc.

## What are the benefits of using The My Number Health Insurance Card ?

Advantage  
**1**

You can receive good-quality medical care through the sharing of medical information!!

You can use your My Number Card to receive an examination, and even at medical institutions, etc. you are visiting for the first time you can share information about specific checkups, medications, and treatments with the doctors to receive more appropriate medical care. (Only in the case that you have consented)

With a health Insurance eligibility certificate	If using a My Number Card
<p>Are you taking any medicines now?</p> <p>Ummm... what was it again?</p>	<p>You have been prescribed painkillers at another hospital, haven't you?</p> <p>Yes!</p> <p>So it is not necessary to get a prescription for painkillers at this hospital.</p> <p>Avoid the risk of duplicate prescriptions</p>

Comment by a doctor



**Q** What advantages have you felt from the introduction of online eligibility verification using My Number Cards?

**A** With more information, we can make more accurate diagnoses and provide more appropriate treatment (prescriptions).

If we prescribed the same type of medicine at this hospital to a patient who had been prescribed a painkiller at another hospital, this could lead to health damage. We view the medicines and treatment information in advance, so we are able to avoid duplicate prescriptions.

**Q** Why is online eligibility verification using a My Number Card?

Place your My Number Card on the scanner for personal identification



**A** This leads to **alleviation of the work burden of medical care professionals.**

The My Number Card can be used to carry out quick personal identification, ascertain the most recent eligibility information, and improve operational efficiency at medical institutions, etc.

For details on how to use your My Number card, please confirm the QR code. Video produced by the Ministry of Health, Labour and Welfare

▶ [How Do I Use the My Number Card? A Practical Guide]



# Using a My Number Card

\*My Number Card... a My Number Card registered for use as a health insurance card



Advantage  
**2**

**No need to go through any procedures or to pay an expensive amount at the counter!!**

If you receive an examination using a My Number Card, then you do not need to pay your medical expenses exceeding your co-payment limit in advance.

**With a health Insurance eligibility certificate**

I would like to apply for an Eligibility Certificate for Ceiling-Amount Application...

Please fill out the application form. It will take a week for the certificate to be delivered to you.

As long as a week...

**If using a My Number Card**

Since you are using a My Number Card, you can check your payment limit.

It was a big help that my co-payments were instantly reduced!

OK even without an Eligibility Certificate for Ceiling-Amount Application!

Comment by  
a patient



**Q** What advantages have you felt from using the online eligibility verification with your My Number Card?

**A** My payment at the counter was reduced even without making an application.

If we prescribed the same type of medicine at this hospital to a patient who had been prescribed a painkiller at another hospital, this could lead to health damage. We view the medicines and treatment information in advance, so we are able to avoid duplicate prescriptions.

Please confirm the detailed advantages of the My Number Card from the QR code on the right.  
Video produced by the Ministry of Health, Labour and Welfare ▶ [What Will be Convenient? Guide to Advantages]



The procedures are simple!

**What are the procedures for enabling use of My Number Card as a health insurance card?**

To use your My Number Card as a health insurance card, you must register it yourself. Even if you do not have plans to use it immediately, completing the registration early can provide peace of mind.

You can carry out the registration of health insurance card use here.

Simple with a smartphone!

**Mynaportal**

Can be done simply when receiving an examination!

**Card reader at the counter of a medical institution, etc.**

Just hold the card over the card reader and enter your four-digit personal identification number (PIN)!

**Seven Bank ATM**

You can confirm your "Medical expenses information" and "Eligibility information" in Mynaportal. You can also utilize Mynaportal for tax returns and applications for benefits.

For more information about registering your My Number Card for use as a health insurance card, please scan the QR code.


▶ [How Do I Apply? You Can Do It Instantly! Simple Application Guide]



People who do not have a My Number Card should begin by obtaining a My Number Card.  
◀ My Number Card Comprehensive Site


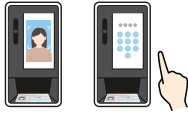
# Method of receiving an examination



Main ways to receive medical care	If your My Number Card is	Documents to Medical Institutions, etc.
	<p><b>Not registered</b> for use as a health insurance card</p> <p>Present your <b>health insurance eligibility certificate</b></p>	 <p>Health insurance eligibility certificate</p>
<p><b>Registered</b> for use as a health insurance card</p> <p>Present your <b>My Number health insurance card</b></p>	 <p>My Number health insurance card</p>	

Easy check-in!

### Using your "My Number health insurance card" at medical facilities

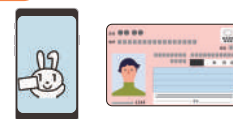
- 1 Scan the card**  
 Insert your My Number Card into the card reader.
 
- 2 Verify identity**  
 Select facial recognition or PIN authentication.
 
- 3 Confirm consent**  
 Indicate whether you agree to share your information.
 

Agree
Do not agree
- 4 Check-in complete**  
 Check-in is complete.

When you use your My Number health insurance card at a medical facility, your health checkup results, medication records, and treatment information can be shared with doctors and other medical professionals, even if it is your first visit. This allows for more appropriate medical care. (Information is shared only with your consent.) We recommend using your My Number health insurance card when seeking medical care.

## If online eligibility verification is not available at a medical institution


- Present your My Number Portal screen with your My Number health insurance card
- Present your eligibility information notice with your My Number health insurance card



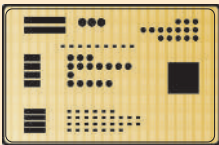


# Differences between the My Number Card, Health Insurance Eligibility Certificate, and Notice of Eligibility Information


## 1 My Number Card

Form	Acquisition method	Use situation	Use method
<p>My Number Card</p> 	<p>After obtaining the My Number Card, you can use it as a My Number Card by carrying out the health insurance card use registration.</p>	<p>When receiving examinations from medical institutions, etc.</p>	<p>Read with the card reader installed in medical institutions, etc.</p>

## 2 Health insurance eligibility certificate

Form	Acquisition method	Use situation	Use method
<p>Plastic card type</p> 	<ul style="list-style-type: none"> <li>• Issued to people who check the Health Insurance Eligibility Certificate issuance required box in the Notice of Acquisition of Eligibility or the Notice of Change of Dependent.</li> <li>• Issued to people who do not check the box who do not have a My Number Card 30 to 50 days after eligibility acquisition.</li> </ul>	<p>When people who cannot use a My Number Card receive examinations from medical institutions, etc.</p>	<p>Show to medical institutions, etc.</p>

## 3 Notice of Eligibility Information

Form	Acquisition method	Use situation	Use method
<p>Paper card type</p> 	<p>Automatically issued to all people who newly subscribe to the Kyoukai Kenpo.</p>	<ul style="list-style-type: none"> <li>• When confirming the symbol numbers, etc. necessary for application for the full range of benefits</li> <li>• When receiving an examination from a medical institution, etc. in the case that you cannot use the card reader at the medical institution, etc.</li> </ul>	<p>Show both the My Number Card and the Notice of Eligibility Information to the medical institution, etc. (You can also use "My information," which can be confirmed from Mynaportal, instead of the Notice of Eligibility Information.) *You cannot receive an examination with only the Notice of Eligibility Information or "My information."</p>



## Confirm the registration information before receiving an examination using My Number health insurance card !

Please confirm whether your own health insurance card information is correctly registered.



Please log in to **Mynportal** to confirm this.

 **Confirmation method** (This is the display screen as of December 6, 2024. The display screen may be changed.)



1 Log in to Mynportal.



2 After login, scroll down the screen and press "Health insurance card."



3 The health insurance card is displayed. You can confirm your registered health insurance card information from "Eligibility information."



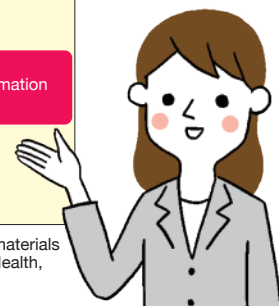
When registering health insurance card use on **card readers with facial recognition** in medical institutions, etc., this kind of screen is displayed.

In the case of carrying out the use registration procedure on card readers with facial recognition installed in medical institutions and pharmacies, you can confirm whether or not the use registration has been completed normally.

- ▶ In the case that the registration has been completed normally, "Registration of your My Number Card for use as a health insurance card has been completed" is displayed on the screen.

Registration of your My Number Card for use as a health insurance card has been completed.

Acquire the eligibility information



\*Partly processed version of materials published on the Ministry of Health, Labour and Welfare website

# Online application system

## Complete various applications more easily online.

An online application system is now available, enabling procedures that were previously submitted using paper forms to be completed online from a computer or smartphone at home or work.

### About the online application system

#### Secure



System checks help prevent errors such as **missing information**.



On-screen system details and FAQs help ensure **accurate completion of applications**.

#### Convenient



Reduces the **time, effort, and costs** previously required for mailing and other procedures.



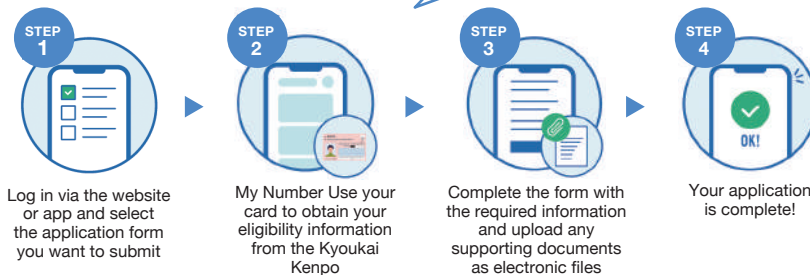
Check the status of your **application** from a computer or smartphone.

### Documents eligible for online application

- Application Form for Payment of Injury and Sickness Allowance
  - Application Form for Payment of Childbirth Allowance
  - Application Form for Payment of Lump-Sum Allowance for Childbirth and Childcare
  - Application Form for Payment of High-Cost Medical Expenses
  - Application Form for Payment of Burial Charges (Expenses)
  - Application Form for Medical Care Allowance (Advance Payment, etc.)
  - Application Form for Medical Care Allowance (Therapeutic Devices)
  - Application Form for Acquiring Optional and Continued Coverage Eligibility
  - Specific Health Checkup Voucher (Application Form)
  - Application Form for Specific Health Guidance Voucher
- , etc.

### Using the system

#### Apply in 4 easy steps



To use the online application system, scan the QR code below or search for "Japan Health Insurance Association online application."

Japan Health Insurance Association online application



# Kenpo App

The Kenpo App, a smartphone application for all insured members, is now available. Through the app, you can use the online application system and receive helpful health information. Please take this opportunity to start using the Kenpo App!



# Request to employers



When submitting the Notice of Acquisition of Eligibility and the Notice of Change of Dependent, please state your My Number and submit them to the Japan Pension Service **within five days of starting work.**

In most cases, the My Number health insurance card can be used within 2–5 business days after the Japan Pension Service receives your application to enroll. However, if your My Number is not provided or in certain other cases, it may take longer before the card can be used. Note that in that case we will send you a “Notice of Incomplete Data Registration” to notify you that it may take some time before you become able to use your My Number Card.

Please state your My Number.



Please actively encourage all of your employees to use a My Number Card when receiving examinations at medical institutions and pharmacies.

## Contact Information

### My Number general toll-free telephone number (established by the Digital Agency)

Toll-free telephone number ☎0120-95-0178

Weekdays: 9:30 to 20:00

Weekends and public holidays: 9:30 to 17:30

\*Excluding the year-end and New Year holiday period

\*24-hour reception for inquiries concerning the loss or theft of My Number Cards and smartphones with electronic certificates installed.

#### Inquiries received

- Inquiries concerning My Number Cards and notification cards
- Inquiries concerning the loss or theft of My Number Cards and smartphones with electronic certificates installed
- Inquiries concerning the My Number system and Mynportal

### Kyoukai Kenpo dedicated My Number phone line

☎0570-015-369

8:30~17:15

\*Excluding weekends, public holidays, the year-end and New Year holiday period

\*The Kyoukai Kenpo's My Number inquiry helpline will discontinue its service at the end of May 2026. Please contact your local branch for inquiries from June 2026 onward.

#### Inquiries received

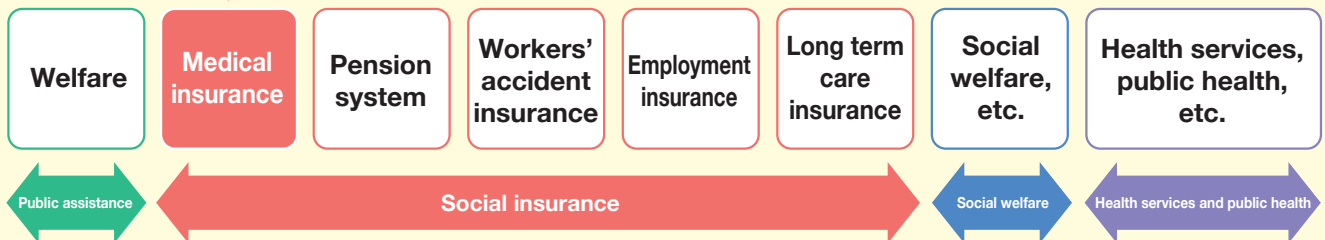
- Inquiries concerning the My Number Card, online eligibility verification, Notice of Eligibility Information, and health insurance eligibility certificate

# Universal medical care insurance system

Medical insurance is one of the social security systems that aims for mutual support for the financial costs caused by sudden illness or injury.

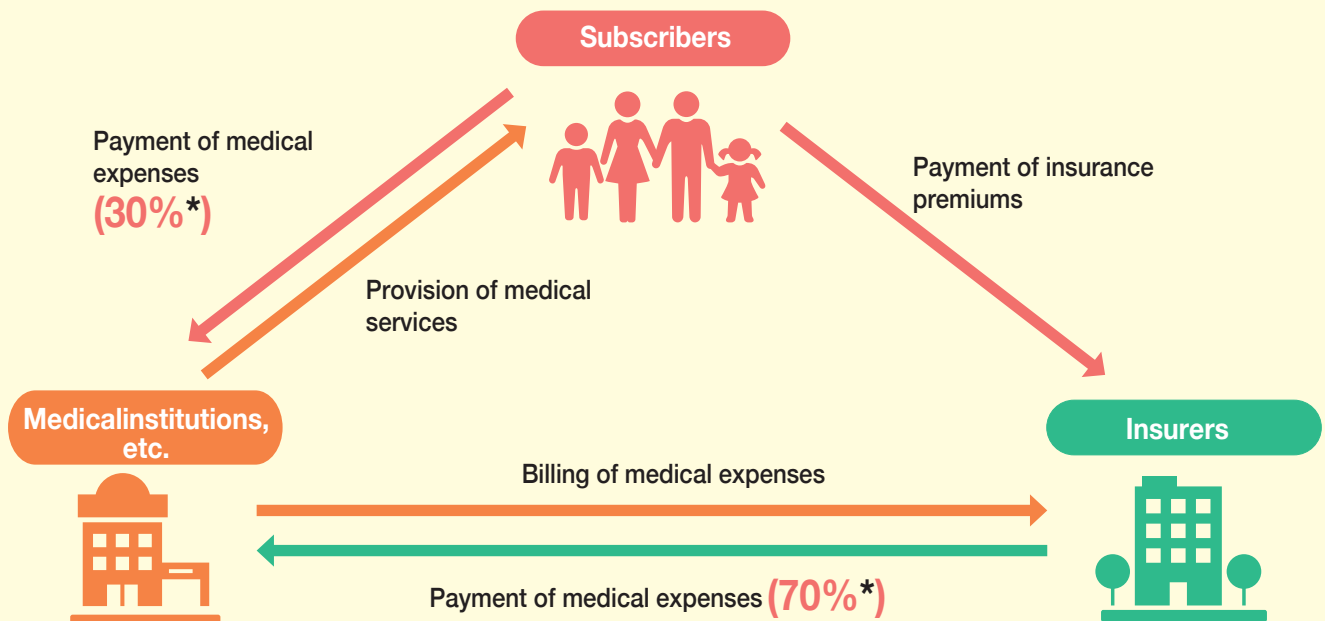


The universal medical care insurance system in which all citizens are covered by some kind of medical insurance and mutually support medical expenses



## Structure of medical services provision

When you receive an examination from a medical institution, etc. with the My Number Card, etc., you can receive medical services by paying only 30% of the medical expenses (co-payment).

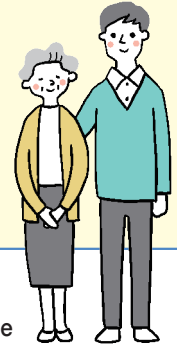


\*The co-payment rate is set according to age and other factors, and may be 10% or 20%. The amount of medical expenses billed to the insurer by the medical institution, etc. would be 90% or 80% accordingly.

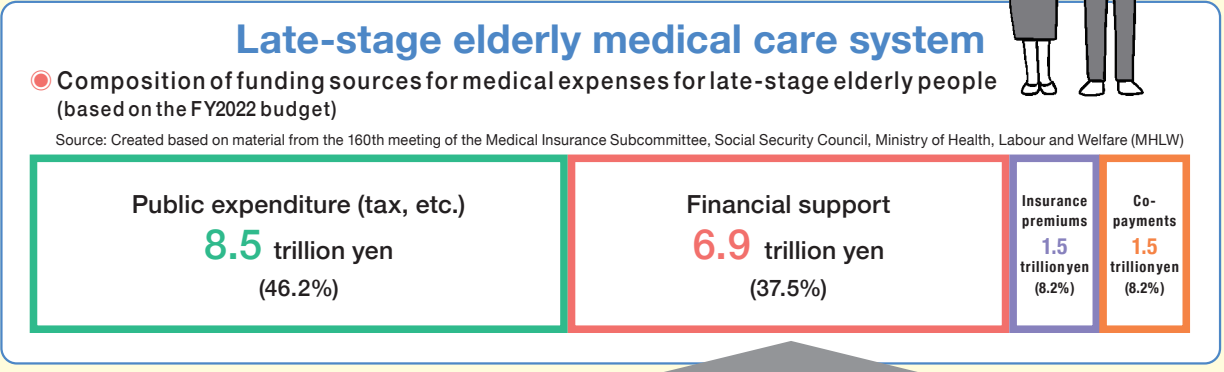
If the amount paid to a medical institution, etc. in the same month becomes so high that it exceeds the maximum amount of co-payment, the excess amount can be reimbursed as "high-cost medical expenses" at a later date by submitting an application. (See p.52)

# Classification of medical insurance

The medical insurance you subscribe to depends on your age, occupation, region, etc. The structure is designed so that the medical expenses of the elderly are supported by the working-age population.



Over 75 years old



Under 75 years old

Type of insurance	Japan National Health Insurance Association (Kyoukai Kenpo)	Health insurance societies	Mutual aid associations	National health insurance
Main subscribers	Mainly employees of SMEs and their families 	Employees of large companies and their families 	Public employees and their families 	Self-employed persons 

**Check**

## Effects of the low birth rate and aging population on medical insurance

Medical expenses will increase as the number of elderly people increases. In addition, as the number of working-age people supporting the elderly declines, the burden on the working-age population will increase.



Source: Created based on the "Population Projections for Japan (2017)" by the National Institute of Population and Social Security Research, and the population projections of the Ministry of Internal Affairs and Communications

# Chapter 1

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# About the Kyoukai Kenpo





## Outline of the Kyoukai Kenpo

# Supporting the medical care and health of 40 million people nationwide

### What is the Kyoukai Kenpo?

The Kyoukai Kenpo operates medical insurance aimed mainly at SMEs. Its mission is to provide “peace of mind” to enrolled employees and their families as the “last medical insurance provider for working people.”



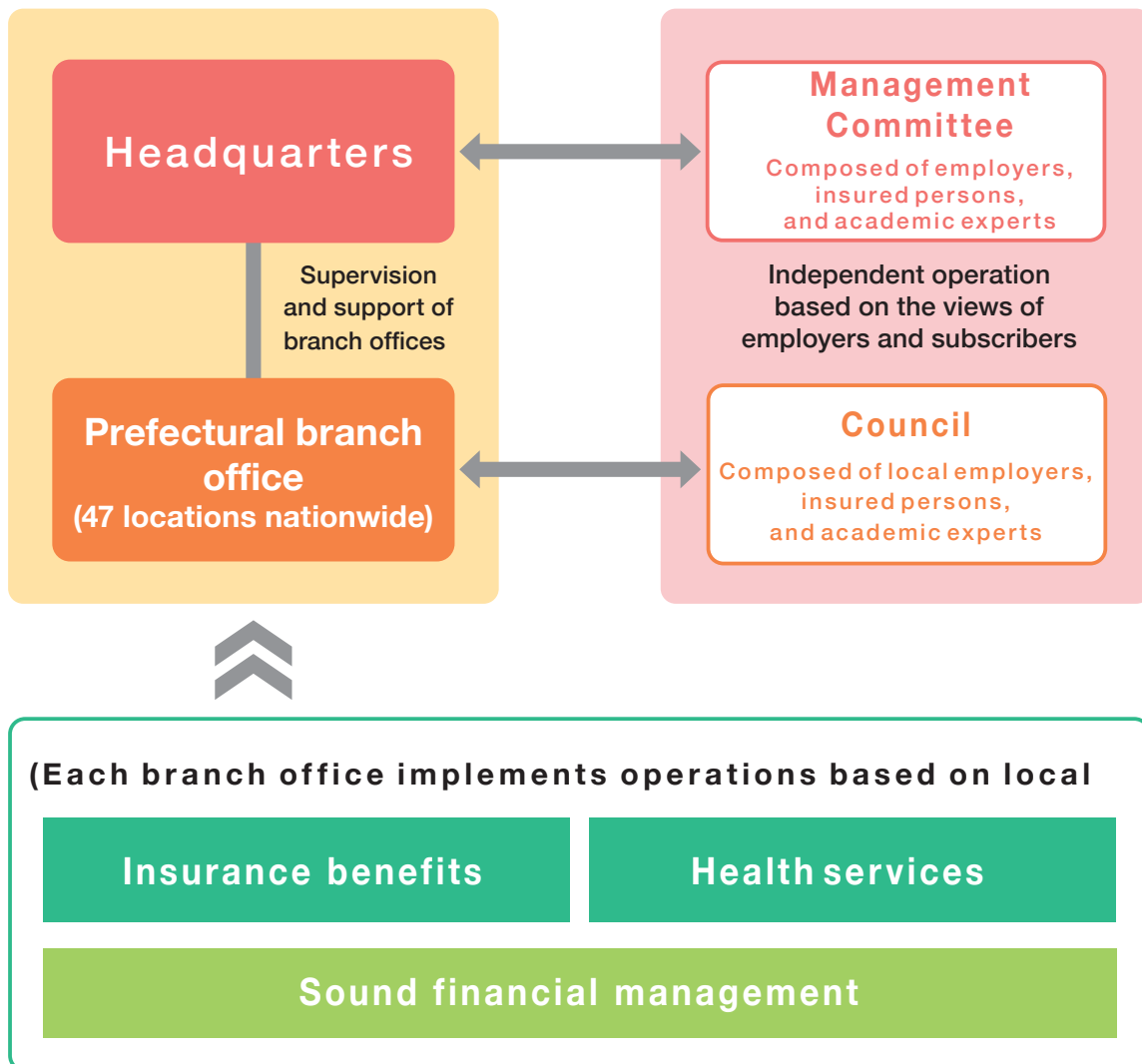
### Basic mission

As an insurer, the Kyoukai Kenpo conducts health insurance operations and seamen’s insurance operations to promote the health of our subscribers and enable them to receive high-quality and efficient medical care, and thus provide benefits to our subscribers and employers.



## Management system of the Kyoukai Kenpo

There is a headquarters as well as branches in each of the 47 prefectures, and each branch office implements initiatives according to local conditions.





## What are the characteristics of the Kyoukai Kenpo?

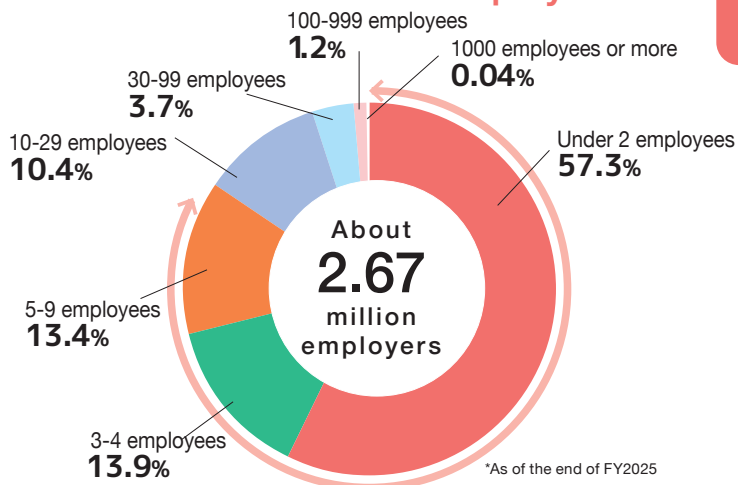
### Characteristic 1

Japan's largest medical insurer, with about **40 million people** one in three citizens, enrolled



### Characteristic 2

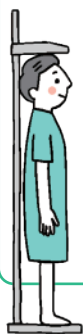
About **80%** of subscriber employers are SMEs with **nine or fewer employees**



## What is the Kyoukai Kenpo working on?

### We support your healthy life!

#### Health services, from p.20



- Health checkups and health guidance for the prevention of lifestyle diseases
- Notice for Those Who Need to Receive an Examination at a Medical Institution
- Improvement of health in the workplace in cooperation with employers
- Other activities

### Let's learn! How to take charge of your medical care well

#### Efforts to optimize medical expenses, from p.38

- Guidance on how to take charge of your medical care well
- Promotion of the use of generic drugs
- Other activities

### If you're facing difficulties, apply!

#### Insurance benefits, from p.44

- If you are unable to receive an examination using a My Number Card as your Health Insurance Certificate
- If you are absent from work for more than 4 days due to injury or sickness
- If you give birth
- Other activities



### Check

## Communication Logo and Tagline

At the Kyoukai Kenpo, we have created a communication logo and tagline as a new point of connection that will strengthen communication with members and businesses. They are being utilized across various public relations materials.

The communication logo is based on the kanji for "kyou" in "Kyoukai Kenpo (Japan Health Insurance Association)," which means "working together." It features three blue birds working together to build healthy, secure lives and flying toward a brighter future.

The main color, blue, symbolizes sincerity and calmness, conveying the trust and reliability expected of a public institution. The slightly green-tinted, light shade also gives a clean, refreshing feel and evokes a sense of health and transparency.

The tagline is a short phrase that clearly communicates the Kyoukai Kenpo's role and functions. By replacing the terms "insurance" and "health" with the simple, easy-to-understand words "just in case" and "always," we have made the message accessible to everyone.

「もしも」と「いつも」に安心を。





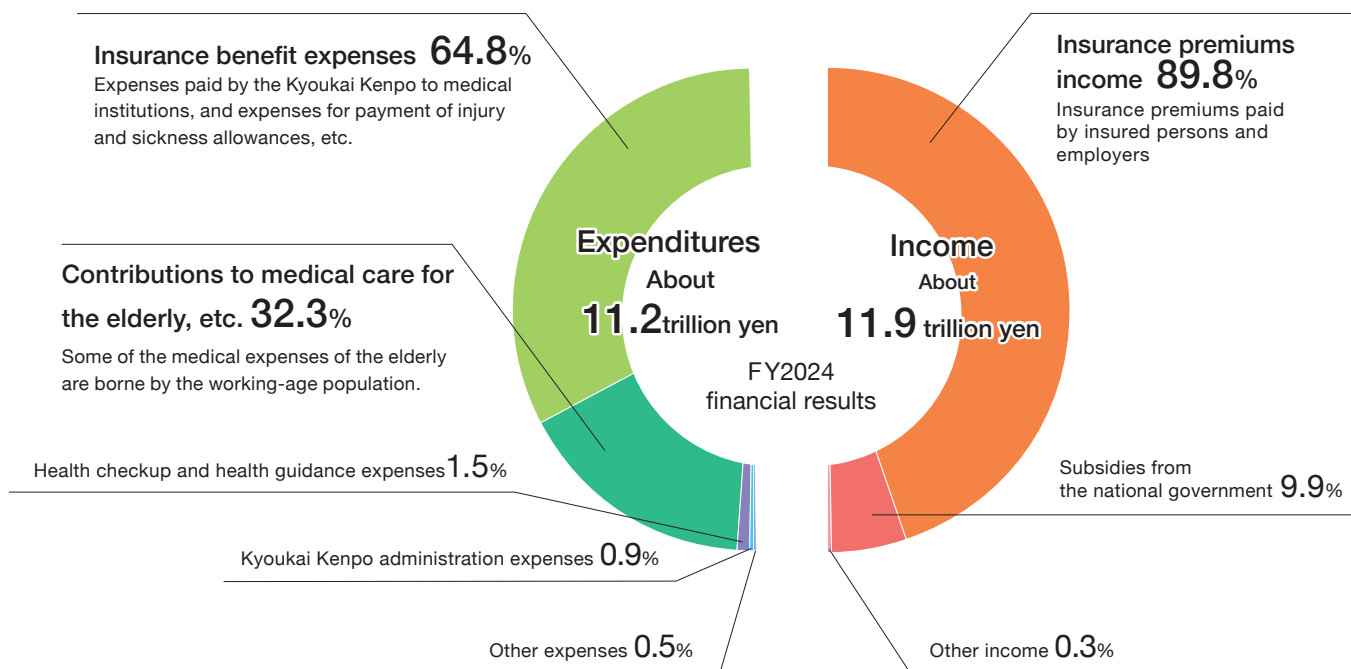
## Financial situation of the Kyoukai Kenpo

### We aim to keep finances stable over the medium and long term

### Financial structure of the Kyoukai Kenpo

The main source of income of the Kyoukai Kenpo is the insurance premiums paid to us by insured persons and employers. In addition, about two-thirds of the expenditures are used for medical expenses when people receive examinations at medical institutions and various benefits.

On the other hand, about one-third is used for contributions to medical care for the elderly, which is a heavy burden.



### How each 10,000 yen of your insurance premiums is used



Medical expenses of subscribers  
**About 5,840 yen**



Allowances when subscribers are absent from work due to illness and benefits when subscribers give birth  
**About 640 yen**



Medical expenses of the elderly (contributions)  
**About 3,230 yen**



Expenses for health checkups and health guidance for subscribers  
**About 150 yen**



Office expenses of the Kyoukai Kenpo  
**About 140 yen**

## Overview of the FY2024 financial results

In FY2024, revenue was ¥11.8525 trillion, expenditures were ¥11.1939 trillion, and the surplus increased by ¥192.3 billion from the previous fiscal year to ¥658.6 billion.

Premium revenue increased by ¥349.2 billion year over year, driven by wage increases that raised standard monthly remuneration and growth in the number of insured individuals. Meanwhile, insurance benefit payments grew by ¥104.0 billion, as the rise in medical expenses remained relatively moderate. The increase in medical expenses has been restrained by special factors, including the termination of temporary COVID-19 measures (which ended at the end of March 2024). Future trends will need careful monitoring.



### ■ FY2024 financial results

#### Medical portion

(Unit: 100 million yen)

Income	Insurance premiums income	106,490 (+3,492)
	State subsidy, etc.	11,690 (▲1,184)
	Others	346 (+113)
	<b>Total</b>	<b>118,525 (+2,421)</b>

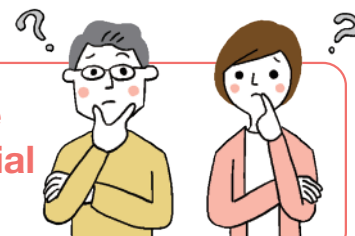
Expenditures	Insurance benefit expenses	72,552 (+1,040)
	Contributions, etc.	36,195 (▲1,030)
	Others	3,193 (+487)
	<b>Total</b>	<b>111,939 (+497)</b>

<b>Single fiscal year expenditure differences</b>	<b>6,586 (+1,923)</b>
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\* Figures in parentheses are year-on-year comparisons.  
 \*\*"Other" in expenditures represents the total of "health checkup and health guidance costs," "association administrative expenses," and "other expenditures" shown in the pie chart on p.15.

Q

The FY2024 financial results showed an increase in the surplus, but is the Kyoukai Kenpo's financial situation stable?



A

While the Kyoukai Kenpo's finances have remained relatively stable in recent years, medical expenses have grown faster than wages in most fiscal years since its establishment, and the following factors should also be considered.

- Insurance benefit payments are expected to continue rising as members age and medical care advances
- As the baby boomer generation enters the late-stage elderly category, contributions to the support system for the late elderly are expected to stay high in the medium to long term
- Although wages are expected to rise in the short term, it is difficult to predict how premium revenue will change in the future

In light of this situation, the Kyoukai Kenpo is looking to the future and further promoting efforts to improve the health of its subscribers and the optimization of medical expenses, while also setting insurance premium rates from a medium- to long-term perspective in order to ensure the sustainability of the insurance finances of the Kyoukai Kenpo.



## Insurance premium rates of the Kyoukai Kenpo

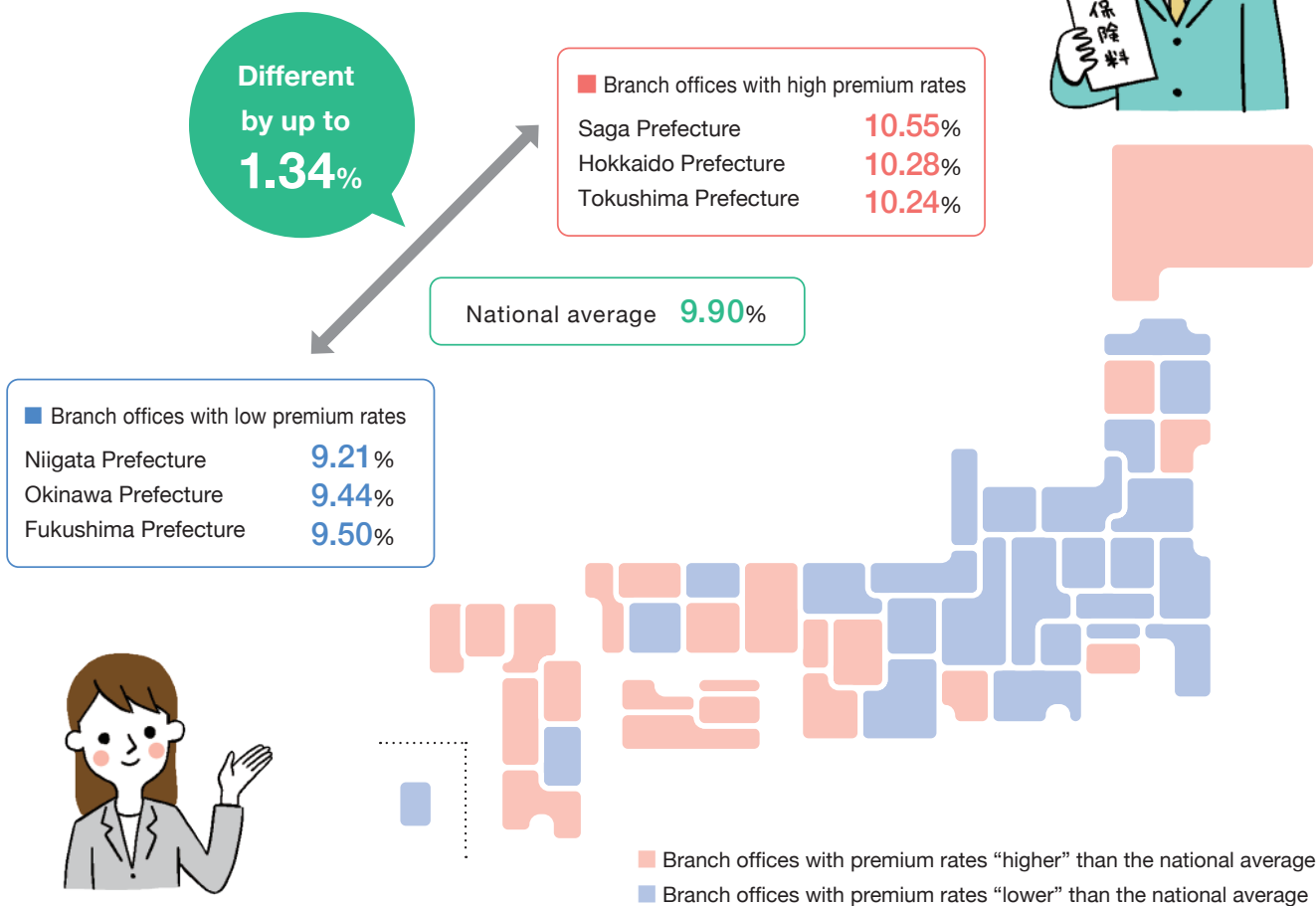
### Your efforts will be reflected in the insurance premium rates

#### What is the insurance premium rate for each prefecture?

The Kyoukai Kenpo sets a premium rate for each prefectural branch office.



#### Insurance premium rates for each prefectural branch office in FY2026



Hokkaido	10.28%
Aomori	9.85%
Iwate	9.51%
Miyagi	10.10%
Akita	10.01%
Yamagata	9.75%
Fukushima	9.50%
Ibaraki	9.52%
Tochigi	9.82%
Gunma	9.68%
Saitama	9.67%
Chiba	9.73%

Tokyo	9.85%
Kanagawa	9.92%
Niigata	9.21%
Toyama	9.59%
Ishikawa	9.70%
Fukui	9.71%
Yamanashi	9.55%
Nagano	9.63%
Gifu	9.80%
Shizuoka	9.61%
Aichi	9.93%
Mie	9.77%

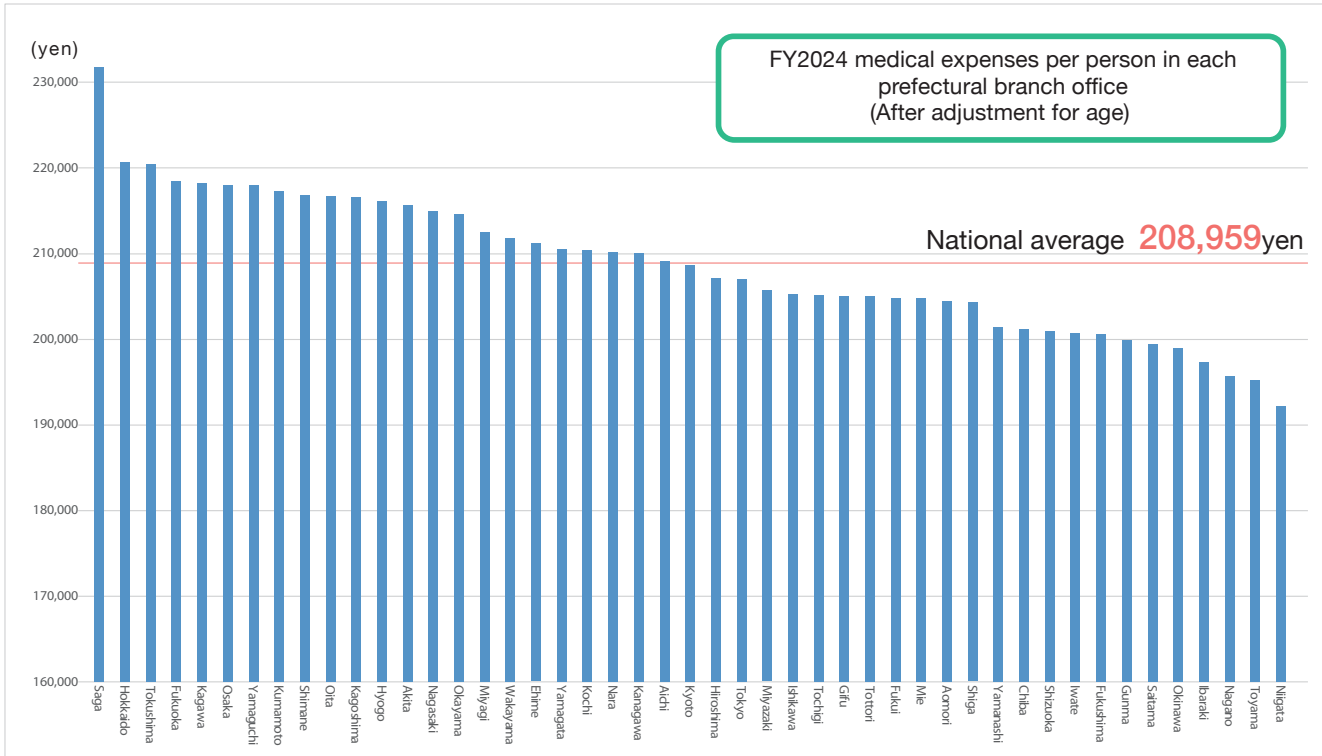
Shiga	9.88%
Kyoto	9.89%
Osaka	10.13%
Hyogo	10.12%
Nara	9.91%
Wakayama	10.06%
Tottori	9.86%
Shimane	9.94%
Okayama	10.05%
Hiroshima	9.78%
Yamaguchi	10.15%
Tokushima	10.24%

Kagawa	10.02%
Ehime	9.98%
Kochi	10.05%
Fukuoka	10.11%
Saga	10.55%
Nagasaki	10.06%
Kumamoto	10.08%
Oita	10.08%
Miyazaki	9.77%
Kagoshima	10.13%
Okinawa	9.44%



## Why are there differences between the prefectural branch offices?

The insurance premium rate for each prefecture is calculated based on the medical expenses per subscriber in the prefectural branch office, after adjusting for differences in age composition and income levels in each prefectural branch office. If each person takes efficient and reasonable care of his or her medical care, it will be possible to reduce the growth of medical expenses, which in turn will lead to curbing the growth of the insurance premium rate.



In response to the health issues of each branch office, the Kyoukai Kenpo will work on various operations, such as health improvement, to curb the growth of medical expenses.



### Incentive system

The Kyoukai Kenpo has an incentive system to reflect the efforts of its subscribers and employers in the insurance premium rate. Under this system, branch offices are ranked based on five indicators, and the insurance premium rate is reduced for the branch offices with the highest rank.

The health efforts of all subscribers and employers lead to the optimization of medical expenses.

The Kyoukai Kenpo will do all we can to support your efforts, so let's work together.



● Five indicators

1

Implementation rate of specific health checkups, etc.

2

Implementation rate of specific health guidance

3

Rate of decrease in the number of people subject to specific health guidance

4

Rate of examinations for those who need quick tests based on recommendations by medical facilities.

5

Rate of generic drug usage



## Sixth Period Action Plan for Strengthening Insurer Functions

### For the peace of mind and health of all subscribers and employers

We have formulated the Sixth Period Action Plan for Strengthening Insurer Functions as a medium-term plan for the three-year period from FY2024 to FY2026, under which we will aim for the enhanced health level of our subscribers and optimization of medical expenses. In particular, we will work to enhance the quality of our operations, implement business reforms, promote digital transformation (DX), and enhance and strengthen our business deployment through collaboration and cooperation utilizing a “face-to-face regional network” based on the evidence obtained through data analyses.

The Kyoukai Kenpo supports **everyone’s health** by focusing on **six** key points.

#### 1 Promotion of health guidance

Health checkups are conducted for the early detection of lifestyle diseases. Based on the results of the health checkups, public health nurses and other professionals carefully provide tailored specific health guidance to those who need to improve their lifestyles in order to prevent lifestyle diseases.

- [Goals]**
- To achieve a rate of health checkups implementation of 65.7% or higher
  - To achieve a rate of specific health guidance implementation of 26.8% or higher



#### 4 Promotion of DX

To advance digital transformation (DX), we are promoting the use of the My Number health insurance card and sharing information about the system.

We also launched an online application system in January 2026 to improve the efficiency of administrative processes.



#### 2 Prevention of worsening of lifestyle diseases and the like

People who need to receive an examination from a medical institution as a result of health checkups are sent a letter informing them to receive an examination as soon as possible. Through this, we strive to prevent worsening of illnesses such as diabetes and cardiovascular disease.

- [Goals]**
- To increase the percentage of people who received an examination at a medical institution within ten months after the month in which they received the health checkup above the percentage in the previous fiscal year



#### 5 Optimized use of medical care resources, communication of opinions

In addition to health improvement, we will encourage the use of generic drugs, raise awareness of how to receive medical care skillfully (such as refraining from receiving non-urgent examinations outside consultation hours, etc.), and communicate effective evidence-based opinions utilizing data, so that we can advance optimization of medical expenses, which are increasing due to the aging of the population, and reduce the insurance premium burden as much as possible.

- [Goals]**
- To increase the percentage of generic drug use of the Kyoukai Kenpo to 80% or higher for all branch offices



#### 3 Collaborative health

The Kyoukai Kenpo and employers collaborate for health improvement (collaborative health).

We provide each employer with “workplace clinical records” so they can understand their health conditions, and support health promotion at employers through health management declarations.

Furthermore, we will engage in effective approaches to our subscribers that focus on health issues based on data analysis, such as region, business type, and age group.

- [Goals]**
- To increase the number of offices with health management declarations to 110,000 or higher



#### 6 Enhancement of services by improving efficiency

By advancing our responses from the perspective of internationalization while further improving the efficiency of operations, we provide necessary services (injury and sickness allowances, childbirth benefits, etc.) to our subscribers in a prompt and reliable manner.

- [Goals]**
- Payment of injury and sickness allowances, childbirth benefits, etc. to be made within 10 business days of receipt of application



# Chapter 2

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## About health services





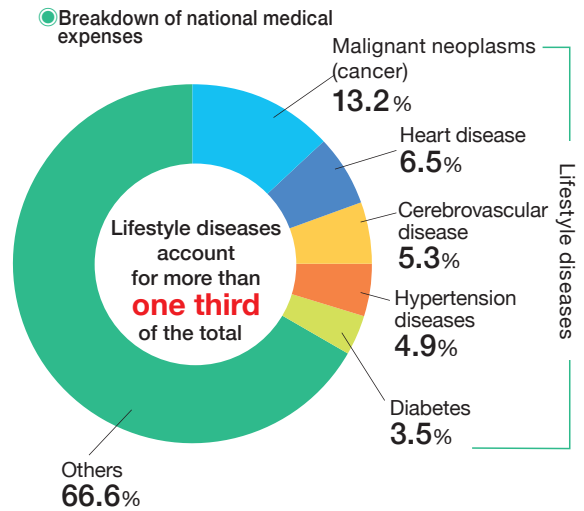
## Background of health services (health checkups, health guidance, etc.)

Health improvement on a daily basis is important to maintain and improve health.

### Do you know about lifestyle diseases?

Lifestyle diseases are not only greatly related to our health, but also have a significant impact on national medical expenses. Most of the diseases are caused by the prolonged build-up of inappropriate lifestyle habits such as lack of exercise, inappropriate diets, smoking, excessive drinking, etc., which leads to metabolic syndrome.

Looking at the breakdown of national medical expenses shown in the figure on the right, lifestyle diseases account for about one third of the total. Differentiating by illness, malignant neoplasms (cancer) account for the largest share of about 4.6 trillion yen (13.2%), followed by heart disease at about 2.3 trillion yen (6.5%), and cerebrovascular disease at about 1.8 trillion yen (5.3%).



Lifestyle diseases

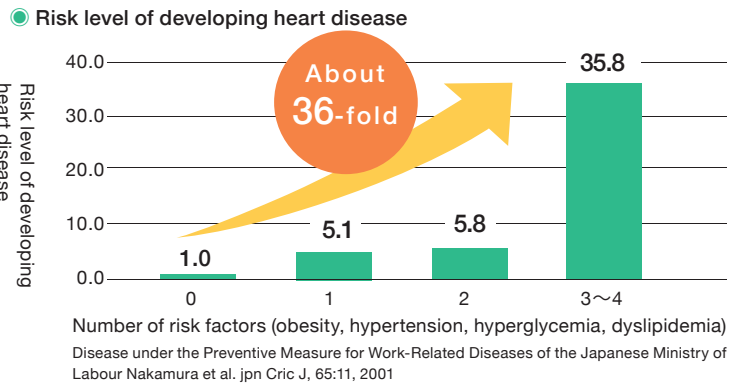
Metabolic syndrome is a condition in which visceral fat accumulates around the abdomen, causing bad hormones to be secreted and hypertension, hyperglycemia, and dyslipidemia, making it easy to develop lifestyle diseases.

Source: Created based on the "Overview of National Medical Care Expenditure, FY2023," MHLW

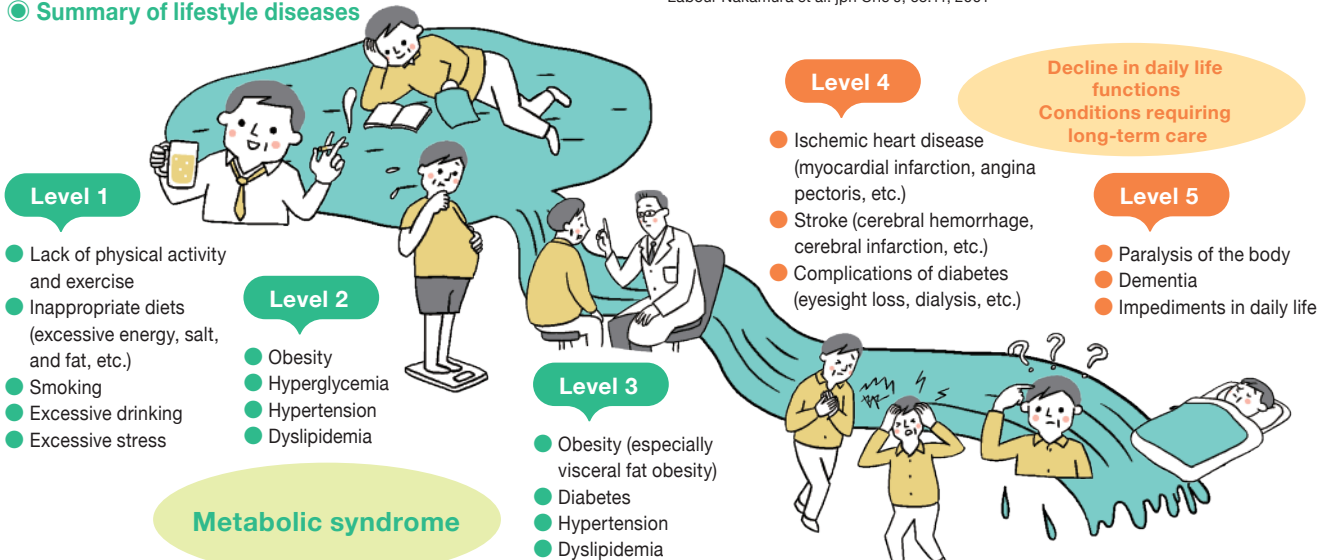


### What happens if metabolic syndrome is left untreated?

If metabolic syndrome is left untreated, even if obesity, hypertension, hyperglycemia, and dyslipidemia are mild, the risks pile up, which causes arteriosclerosis and other issues to rapidly progress, and raises the risk of developing cerebrovascular disease, heart disease, and other diseases. As shown in the figure below, the symptoms of lifestyle diseases worsen as the level of the disease increases, and it is considered difficult to return to the original healthy state.



#### Summary of lifestyle diseases



Source: Created based on "Summary of Lifestyle Diseases" by the MHLW



## How can I prevent metabolic syndrome, a cause of lifestyle diseases?

Visceral fat accumulates due to various factors such as lack of exercise and inappropriate diet.

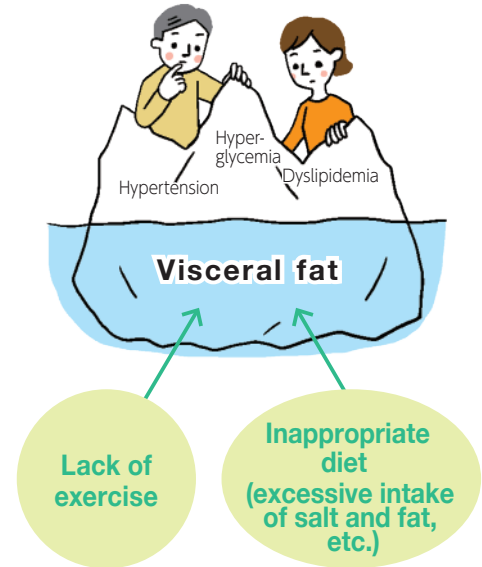
The accumulation of visceral fat is one of the major factors that cause hypertension, hyperglycemia, and dyslipidemia.

If the accumulation of visceral fat, hypertension, hyperglycemia, and dyslipidemia are compared to an iceberg, it would have multiple chunks (hypertension, hyperglycemia, and dyslipidemia) on the surface of the water formed from one large chunk (accumulation of visceral fat) under the surface of the water. Even if each chunk on the surface of the water is small, if the entire combined iceberg becomes large, it can cause cerebrovascular disease and heart disease.

For that reason, even if you treat each chunk on the surface of the water (hypertension, hyperglycemia, and dyslipidemia) with their respective medicines, it will not fundamentally solve the problem as long as there is a large chunk under the water (accumulation of visceral fat). What is important is to reduce the size of the large chunk hidden under the water, in other words, to reduce the accumulation of visceral fat.

In order to reduce visceral fat, it is vital to review your lifestyle, get moderate exercise, eat a well-balanced diet, and quit smoking.

● If metabolic syndrome is compared to an iceberg...



## What should I do to avoid metabolic syndrome and lifestyle diseases?

Please take the following three measures.

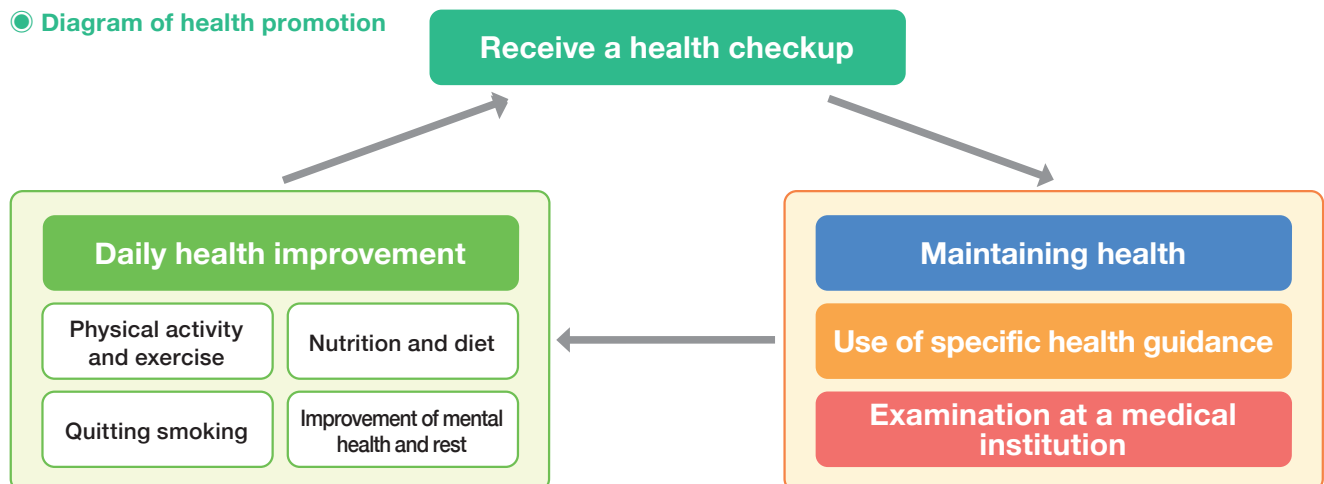
- 1 Make efforts to improve your health in your daily life, and have a health checkup every year to check your health conditions. (See p.25)
- 2 If you need to improve your lifestyle, use specified health guidance. (See p. 32)
- 3 Those who need an examination at a medical institution should receive one as soon as possible. (See p. 35)

Health checkups are only a means to detect the need for lifestyle improvement and diseases, and it is important to use specific health guidance based on the health checkup results and to receive an examination at a medical institution as soon as possible.

About 11.17 million of the insured persons aged 40 and over who are subscribers of the Kyoukai Kenpo have received health checkups, and about 430,000 are using specified health guidance. (\*1)  
 In addition, about 310,000 people who were diagnosed the need to receive an examination at a medical institution as a result of the health checkups have received one. (\*2)

\*1 Data for the end of FY2024 \*2 FY2023 data

● Diagram of health promotion





## Collaborative health

### Protecting the health of employees through collaboration with employers

#### Why implement health improvement for the entire workplace?

In Japan's super-aged society, the risk of lifestyle diseases and other illnesses is increasing as the average age of employees rises, and there are concerns that poor health may reduce labor productivity.

Amidst this, there is now a greater need than ever before for employers as a whole to work on health improvement efforts to maintain and improve the health of their employees.

Health improvement efforts also have a variety of benefits for employers.

The Kyoukai Kenpo is actively promoting the "health management declarations," which encourage employers to declare their commitment to workplace health improvement and to make it known in their workplaces so that workplaces and the Kyoukai Kenpo can collaborate to solve health issues in the workplace.



**"Improve the health and vitality of employees"**

**"Increase organizational activities and productivity"**

**"Recruit excellent human resources and improve their retention rate"**

**"Improve the performance and value of the company"**

Investing in maintaining and improving the health of employees is a great asset to employers.



#### What are health management declarations?

The foundation of health improvement is as follows: (1) receiving health checkups to monitor your health conditions, (2) using health support (specified health guidance) to review your lifestyle if you need to improve your lifestyle, and (3) receiving an examination at a medical institution as soon as possible if you need to receive an examination at a medical institution.

Health management declarations have a structure in which employers make a declaration that they are working on improving health in the entire workplace, and the Kyoukai Kenpo provides support and follow-up for those efforts. They are an initiative (collaborative health) that aims to maintain and improve the health of subscribers (employees) through collaboration and cooperation between the Kyoukai Kenpo and employers.



#### What is declared?

Employers declare the following for working on health improvement.

- The "rate of health checkups" and the "rate of implementation of specific health guidance" are declared items.
- The declared items should be as focused and quantitative as possible (including numerical values).
  - ➔ You are requested to work on health improvement with specific goals, such as "increase the rate of health checkups to x%" or "increase the rate of implementation of specific health guidance to over x%."
- Select one or more areas from categories such as "physical activity and exercise," "nutrition and diet," "rest and sleep," "tobacco," and "alcohol," and set them as your declaration items.
  - ➔ It is recommended that you choose an item that you can work on continuously with a sense of satisfaction that you can achieve it.



I'm worried that my workplace may not undertake these efforts by ourselves even if we make a declaration...

The Kyoukai Kenpo will firmly support you.

- We provide “workplace clinical records” that allow you to check the health conditions in your workplace.
- Public health nurses or certified dietitians provide health support (specific health guidance) and recommend medical examinations at medical institutions.
- Health improvement lectures, health seminars, and the like are held for employers to help them promote good health.

In order to effectively promote health improvement in the entire workplace, you should use the support of the Kyoukai Kenpo, examine the content of efforts, and work while using a PDCA cycle.



Where should we start?

- In order to help you grasp the health issues specific to your workplace, we provide workplace clinical records\* that help you visualize the implementation rate of health checkups and specific health guidance at each workplace, as well as the results of health checkups and the diets and lifestyle habits of the subscribers, using numerical values, graphs, radar charts, etc. First, you should grasp the health issues at your company.

\*Depending on the size of the workplace and other aspects, there are cases in which “health level clinical records [for each business category]” are provided.

**事業所カルテ**

●1ヶ月現在の情報をもとに作成しています。

事業所名称 サンプルデータ様 (26033108)

業 態 鉱業、採石業、砂利採取業

**1. 医療費等の状況**

生活習慣病は、国民医療費にも大きな影響を与えており、その多くは、メタボリックシンドロームが原因であるといわれています。メタボリックシンドロームは、日常生活の中で適度な運動、バランスの取れた食生活、禁煙等を実践することによって予防することができるものです。日常の運動習慣や食習慣に普段から気を付けることの積み重ねが、健康づくりや健康寿命の延伸、医療費の適正化につながります。

**1人当たり医療費** 対象：全被保険者

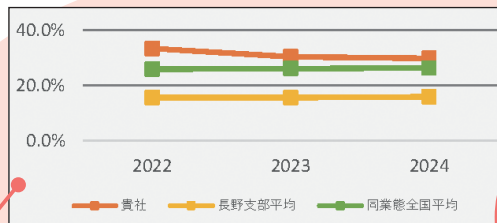
年度	貴社	長野支部平均	同業態全国平均
2022	0円	185,473円	245,091円
2023	0円	191,302円	256,242円
2024	0円	167,031円	215,850円

**メタボリックシンドロームの該当状況**

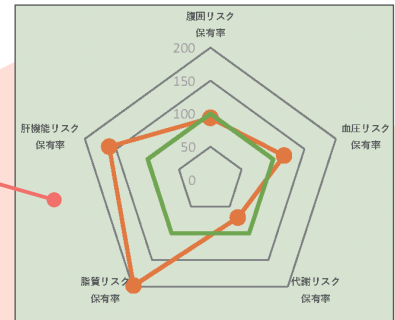
年度	貴社	長野支部平均	同業態全国平均
2022	33.3%	15.6%	25.8%
2023	30.3%	15.5%	26.0%
2024	29.7%	15.8%	26.3%

**メタボリックシンドローム予備群該当率**

年度	貴社	長野支部平均	同業態全国平均
2022	22.2%	12.3%	16.1%
2023	21.2%	12.2%	16.0%
2024	16.2%	12.2%	16.7%



Visualization of changes in medical costs, etc. over time



Visualization of the risk retention rate of lifestyle diseases

**脂質リスク保有率**

年度	貴社	長野支部平均	同業態全国平均
2022	55.6%	33.0%	48.3%
2023	51.5%	33.7%	48.2%
2024	46.0%	34.1%	48.1%

**血圧リスク保有率**

年度	貴社	長野支部平均	同業態全国平均
2022	70.4%	47.1%	59.4%
2023	69.7%	47.1%	59.7%
2024	70.3%	47.2%	59.8%

Check

**Inquiries about health management declarations and workplace clinical records**

Applications for health management declarations and workplace clinical records are accepted at each branch office. For details, please contact the branch office or visit the branch office's website.

\*The content of the health management declarations and the workplace clinical records differs from branch to branch.

**If you have any difficulties, such as not knowing where to start, please feel free to consult with us!**



## Health checkups for prevention of lifestyle diseases, etc. [for insured persons (the person themselves) of the applicable age]

**Don't forget to have one once per year!**  
Comprehensive medical checkups (ningen dock), etc.,  
have been added starting in FY2026

### Is a health checkup necessary?

In many cases, lifestyle diseases such as diabetes do not cause subjective symptoms in their early stages, and have already progressed by the time symptoms appear.

Having a health checkup **is a good opportunity to review your own lifestyle and make improvements. It can also lead to early detection of disease and early treatment.**



### What are checkups for prevention of lifestyle diseases?

Checkups for prevention of lifestyle diseases are health checkups that insured persons (yourself) can receive, including blood tests, urinalysis, and cancer screening, for the purpose of preventing the onset and severity of lifestyle diseases. A portion of the cost of the checkup is subsidized once per person during the fiscal year.

\*You must be an insured person at the time of checkup. \*If you will turn 75 in the current fiscal year, you need to complete the checkup by the day before your birthday.



## What is examined in checkups for prevention of lifestyle diseases?

Item	Test content	Item	Test content
Blood pressure measurement	Measure blood pressure to check the condition of the circulatory system	Electrocardiogram	Check for heart diseases such as arrhythmia and angina pectoris
Urinalysis	Check for kidney and urinary tract conditions, diabetes, etc.	Chest x-ray	Check for lung and bronchial tube conditions
Fecal occult blood test	Check for bleeding from the colon	Gastric x-ray	Checking the conditions of the esophagus, stomach and duodenum
Blood test	Check for arteriosclerosis, conditions such as liver function, diabetes, gout, etc.		



## What kind of health checkups can I receive?

Type of checkup	Test content	Eligible people	Co-payment
General checkup	This health checkup includes general tests such as blood and urine tests, as well as cancer screenings for the stomach, colon, and lungs. *Individuals aged 35–39 may choose to omit stomach and colon cancer screenings.	People aged 35 to 74 years (until the day before your 75th birthday)	Up to <b>5,500</b> yen
	An eye fundus examination may also be included if the doctor deems it necessary.		Up to <b>80</b> yen
	Based on questionnaire results, if an individual aged 50 or older has a smoking index (cigarettes per day × years of smoking) of 600 or higher, they may request an additional sputum test.		Up to <b>590</b> yen
Cervical cancer screening (Single checkup)	This screening aims to detect cancer and other abnormalities at an early stage by examining cells from the opening of the uterus (the cervix).	Women aged 20 to 38 years whose age is an even number	Up to <b>990</b> yen
General checkup (Youth)	This health checkup for younger individuals includes the standard general health checkup tests, excluding stomach and colon examinations.	20 years of age, 25 years of age, and 30 years of age	Up to <b>2,500</b> yen
Milestone health checkup	This detailed health checkup, available once every five years, includes additional tests such as a detailed urine analysis, an abdominal ultrasound, and a fundus examination, in addition to the standard general health checkup tests.	40 years of age, 45 years of age, 50 years of age, 55 years of age, 60 years of age, 65 years of age, and 70 years of age	Up to <b>8,250</b> yen

● **Screening and tests that can be added to general health checkups or milestone health checkups (standalone examinations are not available)**

Type of checkup	Test content	Eligible people	Co-payment
Osteoporosis screening	This screening aims to help prevent and detect osteoporosis at an early stage by conducting a questionnaire and measuring the levels of calcium, magnesium, and other minerals in the bones.	Women aged 40–74 of even-numbered ages receiving the general or milestone health checkup	Up to <b>1,390 yen</b>
Cervical cancer screening	This screening aims to detect cancer and other abnormalities at an early stage by examining cells from the opening of the uterus (the cervix).	Women aged 36–74 of even-numbered ages receiving the general health checkup *Women aged 36 or 38 may receive the cervical cancer screening as a standalone examination *Women aged 20 or 30 may add this screening to the general health checkup (young adults)	Up to <b>990 yen</b>
Breast cancer screening	This screening aims to detect lumps and other abnormalities at an early stage through breast X-ray imaging (mammography).	Women aged 40–74 of even-numbered ages receiving the general or milestone health checkup	[Over aged 50] Up to <b>980 yen</b> [Aged 40 to 48] Up to <b>1,700 yen</b>
Hepatitis virus test	This test checks for hepatitis B and hepatitis C infections through a blood test.	Individuals receiving the general or milestone health checkup who have never had a hepatitis C virus test	Up to <b>540 yen</b>

## What is a comprehensive medical checkup (ningen dock)?

This is the most comprehensive health checkup available, offering detailed blood tests, intraocular pressure testing, and an explanation of the results by a doctor, in addition to the standard general health checkup tests, to provide a more thorough evaluation of your health.

Eligible people	Co-payment
Individuals aged 35–74 (available until the day before their 75th birthday)	Please contact the health checkup provider. (The Kyoukai subsidy is up to 25,000 yen per person.)

## Health checkups for prevention of lifestyle diseases, etc. have been further enhanced.

At the Kyoukai Kenpo, we promote everyday health awareness to help members continue leading active lives and prevent illness. Starting in April 2026, we introduced comprehensive medical checkups (ningen dock) and added milestone health checkups and osteoporosis screenings to health checkups for prevention of lifestyle diseases, etc.

To encourage individuals in their 20s, whose lifestyles often change due to work and other factors, to adopt healthier habits early on, we added the general health checkup (young adults) to health checkups for prevention of lifestyle diseases, etc., also in April 2026.

Please take advantage of these services to support your everyday health.



## Where can I receive a health checkup?

- You can receive a checkup at one of the health checkup institutions throughout Japan with a contract with the Kyoukai Kenpo.
- Please check the Kyoukai Kenpo's website or contact your branch office for information on health checkup institutions throughout Japan where you can receive a checkup.



## What is the process to receive a checkup?

1

### Information about health checkups for prevention of lifestyle diseases, etc. is sent to your workplace

Employers are sent information on checkups (list of eligible employees, etc.) around April annually.

2

### When employers receive the information, inform employees about receiving a checkup

Please be sure to inform those who are eligible.

3

### Eligible employees make an appointment at the health checkup institution they wish to visit

Applying to Kyoukai Kenpo is not needed.

### Receive a checkup

On the day of the checkup, please receive confirmation of your insurance eligibility using any of the following. (\*)

4

Also, don't forget to bring the information from the checkup institution and the containers for testing if there are any.

- \* Online eligibility verification using My Number Cards (in the case that the facility where you are receiving an examination supports this function)
- Show your insurance eligibility screen on Mynaportal
- Show your My Number Card and Notice of Eligibility Information
- Show your health insurance eligibility certificate



I would like to make an appointment for a checkup for prevention of lifestyle diseases by the Kyoukai Kenpo. My preferred date for the checkup is [month] [date].



### Use health support (specific health guidance) or receive an examination at a medical institution

5

Those who are at risk of metabolic syndrome from the results of their checkup will be advised to use health support (specific health guidance) and work on improving their lifestyle. (See p. 32)

If the checkup results indicate a need for receiving an examination from a medical institution, it is recommended that the employee receives an examination quickly.

For those who are judged to be in need of receiving an examination but have not yet received an examination, the Kyoukai Kenpo will send them information. (See p. 35)

Check

## Request to employers

When the health checkup information arrives, please ensure that eligible individuals are informed and encouraged to receive the checkup.

Are there any employees who have not followed up on their health checkup results?

If health checkup results indicate that an employee needs to improve their lifestyle habits, please encourage them to use health support services (specific health guidance). (See Page 32)

If they are advised to visit a medical institution, please encourage them to do so and provide support, such as allowing visits during working hours. (See Page 35)





## Request for provision of data on results of periodic health checkups (employer health checkups)

### Is it enough to conduct periodic health checkups ?

#### What is the provision of data on the results of employer health checkups?

In accordance with the Industrial Safety and Health Act, employers are required to conduct periodic health checkups (employer health checkups) for their employees. But is it enough to conduct periodic health checkups, etc?

If you do not use “the health checkups for prevention of lifestyle diseases,etc.” (see p. 25), please provide the data of the results of the employer health checkups. The following are the advantages of providing the data.

\* It is required by law to provide the data of the results of employer health checkups to the Kyoukai Kenpo. Employers will not be held legal liability for providing personal information.



#### What are the advantages of providing data on the results of employer health examinations?

- It will enable employees to receive health support (specific health guidance) to improve the condition of metabolic syndrome by public health nurses or dietitians, etc., who are experts in health improvement (See p. 32)
- It makes it possible to reflect the data of the results of the employer health checkups in the workplace clinical records (see “workplace clinical records” on p. 24), which enables employers to better grasp the actual health conditions of their workplace.
- People who have registered their My Number Card for use as a health insurance card can view their own health checkups, etc results on Mynportal.



#### Who is eligible to be provided with data on the results of employer health checkups?

- Subscribers of the Kyoukai Kenpo who have received an employer health checkup.

\* People who will turn 75 in the current fiscal year who have completed the examination by the day before their birthday are eligible.

\* People who have received checkups for prevention of lifestyle diseases, etc. (see p. 25) do not need to provide data.

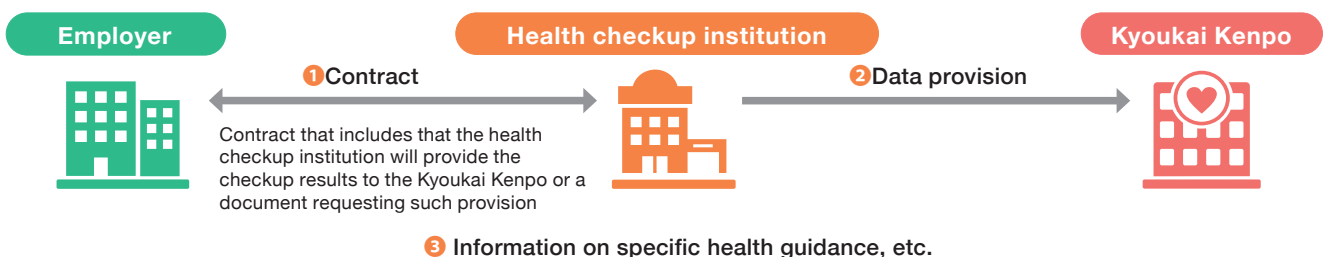


#### What is the method for providing data on the results of employer health checkups?

Employers are requested to conduct the following three points.

- 1 When applying to a checkup institution for employer health checkups, please make a contract that includes “the health checkup institution will submit the health checkup results to the Kyoukai Kenpo.”
- 2 If the agreements in 1 is not entered into, please submit a request document (information provision request) to the Kyoukai Kenpo or the health checkup provider, authorizing the provider to share the checkup results with the Kyoukai Kenpo.
- 3 Please explain to your employees that they should bring documents showing their symbol number, such as the Notice of Eligibility Information, etc., when they receive health checkups.

By agreeing in advance in the contract or requesting that the health checkup institution will provide the results of the employer health checkups to the Kyoukai Kenpo on behalf of the employer, the health checkup institution will provide the data on the health checkup results directly to the Kyoukai Kenpo without troubling the employer.



If you have any questions concerning data provision, please contact your branch office.



Please consider using checkups, etc. for prevention of lifestyle

The figure below compares the test items of periodic health checkups (employer health checkups) and checkups for prevention of lifestyle diseases (see p. 25) based on the Industrial Safety and Health Act.

In addition to the test items of the specific health checkups, the checkups for prevention of lifestyle diseases include the test items of the employer health checkups. They also include cancer screening items (stomach and colon) to make it a full examination.

Please consider using the health checkups, etc. for prevention of lifestyle diseases to maintain and improve the health of your employees (35 years old and above).

Comparison of test items		Health checkups for prevention of lifestyle diseases	Employer health checkups	
Examination, etc.	Medical interview	○	○	
	Measurements	Height	○	□
		Weight	○	○
	BMI	○	○	
	Abdominal circumference	○	■*	
	Physical examination (bodily examination)	○	○	
	Blood pressure (seated)	○	○	
	Eyesight	○	○	
Hearing	○	○		
Lipids	Total cholesterol	○	○	
	Fasting neutral fat	▲	▲*	
	Casual neutral fat	▲	▲*	
	HDL-Cholesterol	○	■	
	LDL-Cholesterol	▲	▲	
	Non-HDL-cholesterol*1	▲	▲	
Liver functions	ASST (GOT)	○	■	
	ALT (GPT)	○	■	
	γ-GT (γ-GTP)	○	■	
	ALP	○	○	
Metabolic system	Fasting blood glucose	▲	▲	
	Casual blood glucose*2	▲	▲	
	Urinary glucose (semi-quantitative)	○	○	
	Hemoglobin A1c	▲	▲	
	Uric acid	○	○	
General blood	Hematocrit value	○	○	
	Hemoglobin	○	■	
	Red blood cell count	○	■	
	White blood cell count	○	○	
Kidney functions	Urine protein (semi-quantitative)	○	○	
	Urine occult blood	○	○	
	Serum creatinine (including assessment of renal function by eGFR)	○	□	
Cardiac function	12-lead electrocardiogram	○	■	
Lungs	Chest x-ray	○	○	
	Sputum examination	◎	□	
Fundoscopy		□	○	
Stomach	Gastric x-ray *3	○	○	
Colon	Occult blood	○	○	

- .....Required field
- .....Item to be given based on the judgment of the physician
- ◎.....Required for people aged 50 or older with a smoking index of 600 or higher who wish to be tested.
- .....Required for people aged 35 and 40 or older. However, it is optional based on the judgment of the physician for pregnant women and other people whose abdominal circumference is judged not to reflect the accumulation of visceral fat, people whose BMI is less than 20, and people who measure their own abdominal circumference and report the value (limited to those whose BMI is less than 22)
- ▲.....Any of the items are acceptable
- ▲\*.....For people aged 35 and 40 or older, implement any of the items, and optional for others based on the judgment of the physician
- .....Required for people aged 35 and 40 or older, and optional for others based on the judgment of the physician
- \*1.....If fasting neutral fat or casual neutral fat is 400 mg/dL or higher or in the case of postprandial blood sampling, it is possible to carry out the blood lipid test using non-HDL-cholesterol instead of LDL-cholesterol
- \*2.....At least 3.5 hours after starting a meal
- \*3.....A gastric endoscopy can be performed instead if you desire



Request for provision of data on results of periodic health checkups (employer health checkups)

\*For more information about the examinations included in the comprehensive medical checkup (ningen dock), please contact the health checkup provider.



## Specific health checkups [for dependents (family members) over 40 years old]

**Don't forget to have one once per year!**

### Specific health checkups (specific checkups) are important!

Specific checkups are sometimes called “metabolic checkups” because they focus on metabolic syndrome (see p. 21), but they do not only detect metabolic syndrome. The checkups also include items checking for hypertension, diabetes, dyslipidemia, kidney and liver diseases without obesity. By undergoing a checkup, you will have an opportunity to review your own lifestyle and work on improving it. It can also lead to early detection of diseases and early treatment.



### What is a specific checkup?

\*Specific checkups are health checkups that dependents (family members) receive for the purpose of preventing lifestyle diseases such as diabetes and dyslipidemia, which account for about 60% of deaths in Japan. The Kyoukai Kenpo subsidizes most of the cost of one checkup per person during the fiscal year.

\*Must be a dependent at the time of checkup.

\*If you will turn 75 in the current fiscal year, you need to complete the checkup by the day before your birthday.



### What is checked during a specific checkup? (Basic checkup)

Item	Test content
Body measurements	Measurement of height, weight, and abdominal circumference
Blood pressure measurement	Measure blood pressure to check the condition of the circulatory system
Blood lipid test	Measurement of neutral fat and good/bad cholesterol to check for atherosclerosis and dyslipidemia
Liver function test	Measurement of enzymes in liver cells to check liver function conditions, etc.
Blood glucose test	Measurement of fasting blood glucose or HbA1c, and casual blood glucose to check for diabetes, etc. (When measuring casual blood glucose, at least 3.5 hours must have passed since starting eating a meal)
Urinalysis	Examination of kidney and urinary tract conditions, diabetes, etc.



### What kind of health checkup can I receive?

Type of health checkup	Test content	Eligible people	Kyoukai Kenpo subsidy
Basic health checkup	Examination, etc., medical interview, body measurements, blood pressure measurement, blood lipid test*, liver function test*, blood glucose test*, urinalysis	People aged 40-74 years old (up to the day before your 75th birthday)	Up to <b>7,150 yen</b>
Detailed health checkup	Electrocardiogram, funduscopy, anemia test*, serum creatinine test* (including evaluation of renal function by eGFR)	To be determined by a physician based on the checkup results, etc.	Up to <b>3,400 yen</b>

\*This is a test using blood sampling.

#### Amount subsidized by the Kyoukai Kenpo

Example: In the case that the basic health checkup cost is 8,000 yen (the examination cost varies depending on the checkup institution you visit)

Basic health checkup cost ▶ **8,000 yen**

Co-payment ▶ **850 yen**

Kyoukai Kenpo subsidy ▶ **7,150 yen**



### How can I receive a cancer screening?

Cancer screenings are carried out by municipalities based on the Health Promotion Act and other regulations. Please check your municipality's website or public relations magazine, etc. for more information.

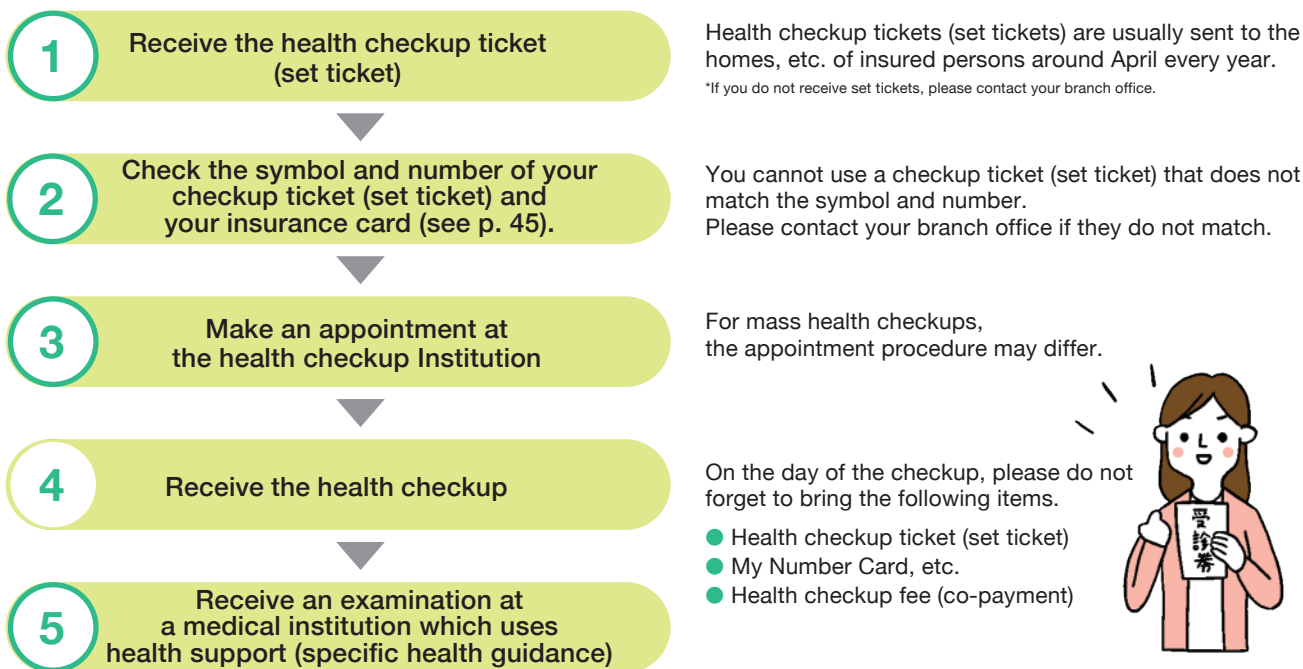


## Where can I receive a health checkup?

- Checkups are available at health checkup providers nationwide that have contracts with the Kyoukai Kenpo.
- You can receive a health checkup near your home or workplace.
- In some cases, mass health checkups are carried out at shopping centers or community centers, etc.
- For information on health checkup institutions throughout Japan, please check the Kyoukai Kenpo's website or contact your branch office.



## What is the process to receive a health checkup?



Please note that if you receive a health checkup by the Kyoukai Kenpo after you lose your eligibility as a dependent due to employment, etc., you will be asked to pay back the checkup fee subsidized by the Kyoukai Kenpo at a later date.

Those who are found to be at risk of “metabolic syndrome” as a result of their health checkup are encouraged to use health support (specific health guidance) to work to improve their lifestyles. (See p. 32)

If the checkup results indicate a need for receiving an examination from a medical institution, it is recommended that the employee receives an examination quickly. (See p. 35)

In order to protect your own life from serious life-threatening diseases and to live your daily life to the fullest, please receive an examination at a medical institution right away.



### Request to employers

Employees are able to work with vigor, precisely because of the support of family members. In order for employees to continue working with peace of mind, it is requested that you actively encourage your employees' family members to undergo health checkups as well.



## Specific health guidance

# Health support for the prevention of lifestyle diseases

### What should I do after receiving a health checkup?

If you need to improve your lifestyle after this was confirmed by your checkup results, it is important to review your lifestyle such as moderate exercise, eating a well-balanced diet, and quitting smoking. If you need to improve your lifestyle, public health nurses or dietitians, etc., who are experts in health improvement, will support you in your efforts to review your lifestyle, so please make use of the health support (specific health guidance).

### What is specific health guidance?

It is health support for people between the ages of 40 and 74 who are found to be at risk of “metabolic syndrome” as discovered at health checkups. In the specific health guidance, public health nurses or dietitians, etc. will support you to understand the results of your health checkup, notice changes in your body, reflect on your lifestyle, and set and practice action goals to improve your lifestyle, so that you can practice self-care (self-management) of your health. There are two types of specific health guidance: “motivational support” for people with relatively low risk of metabolic syndrome and “active support” for people with high risk.

If metabolic syndrome is left untreated, even if obesity, hypertension, hyperglycemia, and dyslipidemia are mild, the risks pile up, which causes arteriosclerosis and other issues to rapidly progress, and raises the risk of developing cerebrovascular disease, heart disease, and other diseases. (See p. 21)

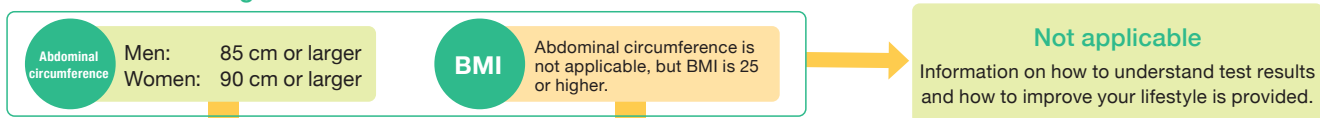
#### Diagram of specific health guidance



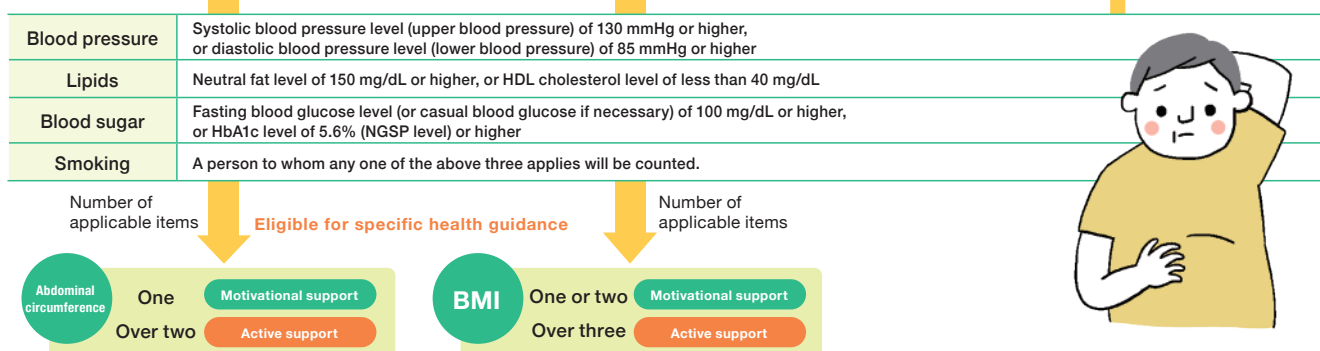
### How are people eligible for motivational support and active support identified?

As shown in the flowchart below, visceral fat accumulation and the number of additional risks determine whether motivational or active support is provided.

#### STEP.1 Determining the risk of visceral fat accumulation



#### STEP.2 Determining the number of additional risks





## How can I receive specific health guidance?

The method of receiving specific health guidance differs for insured persons and dependents.

Insured persons	There are two ways to receive the guidance: “1 Information from the health checkup institution” and “2 Information from the Kyoukai Kenpo via the workplace”
Dependents	There are two ways to receive the guidance: “1 Information from the health checkup institution” and “3 Information from the Kyoukai Kenpo to the eligible dependent’s home”

### 1.If you receive specific health guidance on the day of the health checkup

#### Insured persons and dependents

##### 1 Information from the health checkup institution

In the case of health checkup institutions that provide specific health guidance on the day of health checkup, those who are eligible will receive information at the time of the health checkup.

\*If you are not able to have an interview at the checkup institution on the day of your checkup, you can have an interview at a later date.



##### Interview at the health checkup institution

The amount differs for insured persons and dependents.

**There is no charge for insured persons.**

**Dependents are responsible for the amount beyond the amount subsidized by the Kyoukai Kenpo.**

- In the case of motivational support, there is a subsidy of up to 9,290 yen.
- In the case of active support, there is a subsidy of up to 27,500 yen.

### 2.If you are unable to receive specific health guidance on the day of the health checkup

#### Insured persons

##### 2 Information from the Kyoukai Kenpo via the workplace

The Kyoukai Kenpo will compile the information for each and every one of those who are eligible and send it to the employer.

\* In some cases, information will be provided by a company contracted by the Kyoukai Kenpo.



##### Interview at your workplace

In addition to face-to-face meetings, interviews can also be conducted online in some cases. The specific health guidance received by insured persons is free of charge.

#### Dependents

##### 3 Information from the Kyoukai Kenpo sent to your home

The Kyoukai Kenpo will send you the specific health guidance ticket along with a list of health checkup institutions and medical institutions, etc. where you can receive the specific health guidance.



##### Interview at an institution providing health guidance

The amount to be subsidized is the same amount as for the specific health guidance on the day of the health checkup.

Check

### Request to employers

In order for employees to work vigorously, they above all need to be healthy. This is one of the essential factors for creating a cheerful atmosphere and comfortable workplace, as well as for improving the productivity of the workplace. However, if people who should receive specific health guidance as a result of health checkups do not improve their lifestyle, they may develop serious life-threatening diseases.

In the health checkup institutions that provide specific health guidance on the day of health checkup, those who should receive specific health guidance have the information, **so employers are requested to encourage their employees to actively use specific health guidance.** If you are unable to receive it on the day of the health checkup, Kyoukai Kenpo will send the information about the specific health guidance to your employer. Employers **are requested to be sure to inform** those who should receive specific health guidance to take such action



## What kind of health support can I receive?

### STEP.1

#### Think about your goals and action plan together (initial interview)

The initial interview will cover the following content in 20 to 30 minutes.

- Explanation in a careful and easy-to-understand manner that metabolic syndrome is a cause of lifestyle diseases, and that daily lifestyle habits affect the results of health checkups.
- Proposal of individual specific efforts to improve your lifestyle related to exercise, diet, smoking, drinking, etc. based on your lifestyle and physical condition, and work together to develop a goal and action plan for your health.

Example: If your goal is to lose 2 cm of abdominal circumference and 2 kg of body weight in 3 months.

In order to lose 1 kg, you need to expend about 7,200 kilocalories. Therefore, you need to burn 160 kilocalories per day, or reduce your intake.

#### ▼ Action plan to achieve the goal

You can achieve your goal with a combination of actions such as the following: cut the amount of rice to 2/3, walk briskly for 20 minutes, drink 350 ml of beer instead of 500 ml, and jog for 10 minutes.

### STEP.2

#### Challenge for 3 to 6 months

You will be asked to put into practice the specific action plan you came up with in STEP 1. In the case of active support, a public health nurse or dietician will support you to see if your efforts are working. Also, if you have put a pause in taking action, he or she will work with you to come up with a new action plan so that you can continue.



### STEP.3

#### GOAL!

There will be a check on whether you have achieved your goals, such as weight loss, etc., and you will receive advice on how to continue to improve your health.



## Stories of people who actually received the specific health guidance

### [Male in his 40s]

I worked three shifts and tended to have irregular meal times. During a health checkup, I was diagnosed as obese, with high blood sugar and liver dysfunction. When I felt that I needed to improve my lifestyle, I received information on specific health guidance through my workplace, so I decided to receive it. At the time of the first meeting, I had already lost 3 kg of my body weight by taking measures such as cutting back on sweetened beverages, so the public health nurse provided an addition boost to my efforts.

The nurse also checked my lifestyle habits and worked with me to come up with and implement new ideas, such as starting to eat with vegetables first and reducing my main meals by half.

The public health nurse called me once a month and encouraged me to continue my efforts and thanks to this, after six months, I lost about 8 kg of my body weight, and my blood sugar and the level of my liver functions were back to normal according to the results of my health checkup the following year.



### Check

## Check if your numbers have improved in your health checkup next year.

Even after the specific health guidance has been completed, it is important to continue to work on improving your lifestyle, including exercise, a well-balanced diet, and quitting smoking, etc., and to check if your numbers have improved in your health checkup results next year.





## What are the criteria for receiving information?

### Advised to seek medical care based on blood pressure, blood glucose, and lipid test results

Information will be sent to those who meet all the criteria from 1 to 3.

- 1 People who have undergone health checkups for prevention of lifestyle diseases, etc., those who have provided employer health checkup data, and those who have undergone specific health checkups.
- 2 People who could not be confirmed to have visited a medical institution in the month prior to the date of the checkup or within 3 months after the checkup (including the month of the checkup).
- 3 People who meet any one of the following criteria.

#### Recommended criteria values for receiving an examination

Blood pressure		Blood sugar		Lipids
Systolic blood pressure level	Diastolic blood pressure level	Fasting blood glucose level	HbA1c (NGSP level)	LDL cholesterol level
Over 160 mmHg	Over 100 mmHg	Over 126 mg/dL	Over 6.5 %	Over 180 mg/dL

### Advised to seek medical care based on chest X-ray test results

Information will be sent to those who meet all the criteria from 1 to 3.

- 1 People who have undergone health checkups for prevention of lifestyle diseases, etc.
- 2 People whose chest X-ray results indicate “treatment required” or “further examination required”.
- 3 People who could not be confirmed to have visited a medical institution in the month prior to the date of the checkup or within 3 months after the checkup (including the month of the checkup).



# Chapter 3

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## Initiatives to address rising medical expenses





## Efforts to optimize medical expenses

# What you can do to help control rising medical expenses

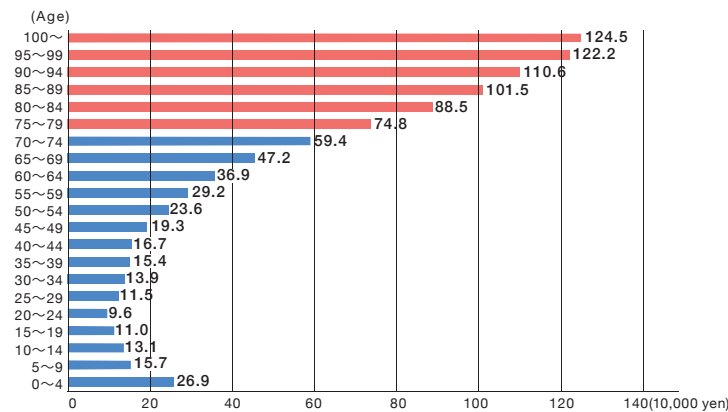
### Medical expenses in Japan

In Japan, **medical expenses per person tend to increase with age**. With the entire baby boomer generation turning 75 or older by 2025 and the population aged 65 and over expected to peak in 2040, total medical expenses across the country are **projected to continue rising**. Meanwhile, the working-age population (ages 15–64) is expected to decline rapidly by 2040.

At the Kyoukai Kenpo, **medical expenses (insurance benefit expenses) are expected to continue increasing** due to the rising average age of members, advances in medical care including high-cost medications, and the effects of rising prices and wage increases. About one-third of the Kyoukai Kenpo's expenditures cover medical expenses for older adults, and this level of spending is expected to remain high (see Page 16).

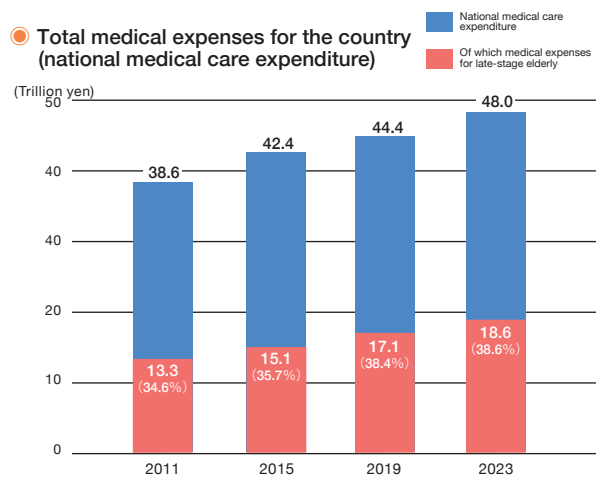
Even under these circumstances, to maintain the health insurance system and pass it on to the future, each individual must take steps to help control medical expenses.

#### Per-person medical expenses



Source: FY2023 figures compiled based on the "Survey on Medical Care Benefit" (Ministry of Health, Labour and Welfare) and "Population Estimates as of October 1, 2023" (Ministry of Internal Affairs and Communications).

#### Total medical expenses for the country (national medical care expenditure)



※Figures in parentheses indicate the share of national medical expenditure accounted for by medical expenses for late-stage elderly  
Source: Compiled based on "National Medical Expenditure, FY2023" (Ministry of Health, Labour and Welfare).

## Each person can do something

### Stop "Doctor Shopping"

Visiting multiple medical institutions for the same illness or injury is known as "Doctor Shopping."

Each visit may result in additional initial consultation fees and similar examination fees, increasing both the physical burden of testing and medical expenses. It may also lead to duplicate prescriptions for medications with similar effects or harmful interactions between multiple medications, which can cause side effects.

To avoid doctor shopping, it is important to have a primary care doctor you can consult about any concerns or questions regarding your treatment.

### If it is not an emergency, try to visit medical institutions during weekday daytime hours.

Holidays and nighttime hours are primarily meant for patients who require urgent care or are already hospitalized. Visiting during these hours for non-urgent reasons increases your co-payment, adds to the burden on medical staff, and may limit access to care for patients who truly need urgent treatment. Please try to visit medical institutions during regular hours whenever possible.

Visits on holidays or outside regular hours may result in additional charges and higher co-payment.

	(If you have a 30% co-payment)	
	Three visits to the same medical institution	Doctor-hopping at three different medical institutions
First visit	Initial examination fee 870 yen + Test fee, etc.	Initial examination fee 870 yen + Test fee, etc.
Second visit	Re-examination fee 230 yen	Initial examination fee 870 yen + Test fee, etc.
Third visit	Re-examination fee 230 yen	Initial examination fee 870 yen + Test fee, etc.
Total of first to third visits	Initial and re-examination fees 1,330 yen + Test fee, etc. x 1	Initial and re-examination fees 2,660 yen + Test fee, etc. x 3

		(If you have a 30% co-payment)		
		Medical institution		
		Initial examination fee	Re-examination fee	
Additional fee for weekends	Sundays and holidays	+750 yen	+570 yen	Add 1.4 times the technical fee for dispensing
Additional fee for outside consultation hours	Generally before 8:00 a.m. and after 6:00 p.m., and before 8:00 a.m. and after 12:00 a.m. on Saturdays	+260 yen (+690 yen)*	+200 yen (+540 yen)*	Add the same amount as the technical fee for dispensing
Additional fee for late night hours	10 p.m. to 6 a.m.	+1,440 yen	+1,260 yen	Twice the amount of the technical fee for dispensing

\*The amounts in parentheses are the amounts for emergency hospitals, etc.

## Have a family doctor and a family pharmacist and pharmacy!

Your primary care doctor is the doctor you consult for everyday illnesses and ongoing health management.

- Seeing the same doctor regularly helps ensure that your treatment and advice are based on a clear understanding of your medical history, physical condition, and lifestyle.
- If more detailed examinations or advanced treatment are necessary, your doctor can refer you to an appropriate major hospital or specialist.
- If you visit a large hospital, such as a university hospital, without a referral, you will be charged a special fee of 7,000yen or more in addition to the consultation fee. When patients with minor conditions concentrate at large hospitals, it may interfere with care for seriously ill patients and emergency services. Please obtain a referral from your primary care doctor before visiting a large hospital.



Your regular pharmacist or pharmacy keeps track of your medications and can advise you about drug interactions and possible side effects.

- They keep track of the medicines you are using and regularly check whether they are working properly, whether there are any side effects, and whether any medicines remain unused.
- Even if you have multiple conditions and receive prescriptions from several medical facilities, having your medicines dispensed at the same regular pharmacy allows the pharmacist to check for duplicate medications and possible drug interactions.
- You can also consult your pharmacist by phone about how to use your medicines, possible side effects, and other medication-related concerns, even outside pharmacy hours, such as on holidays or at night.



### Have you ever heard of “polypharmacy”?

This refers to a situation in which taking many medications leads to side effects or makes it difficult to take medicines properly.

If this happens, consult your doctor or pharmacist. Having a primary care doctor and a regular pharmacist or pharmacy can help reduce this risk.

Please visit RAD-AR Council website for more information ▶



Check

### Utilize the dedicated consultation hotline

#### What is “#8000”?

- This service allows parents or guardians to consult a pediatrician or nurse by phone when they are unsure how to respond to a child’s symptoms at night or on a holiday, or whether they should visit a hospital immediately.
- By dialing the nationwide short number #8000, your call will automatically be connected to the consultation service in your prefecture. A pediatrician or nurse will provide advice on how to respond to your child’s symptoms and whether medical care is needed.

#### What is “#7119”?

- This service allows you to consult a doctor, nurse, or other medical professional by phone when you are unsure whether you should go to a hospital immediately or call an ambulance.
- By dialing #7119 in participating areas, you will be connected to a consultation service where doctors, nurses, or trained advisors will ask about your symptoms and assess whether the condition is urgent or whether you should visit a hospital immediately. If the situation is deemed urgent, they will help arrange emergency services. If it is not urgent, they will advise you on where and when to seek care.



#7119  
in participating areas

(Quote) Jozunairyounokarikata.jp

## Choose generic drugs to reduce co-payments at medical institutions and pharmacies.

Drugs prescribed by medical institutions are divided into brand-name drugs and generic drugs. The Kyoukai Kenpo promotes the use of generic drugs because they reduce the co-payments of its subscribers and also have an effect on the finances of the medical insurance.

### Efficacy equivalent to that of brand-name drugs

Generic medicines contain the same active ingredients in the same amounts as brand-name medicines, and are recognized by the government as having equivalent effectiveness and safety.

### Lower co-payments than brand-name drugs

Generic medicines use the same active ingredients as brand-name medicines after the patent period has expired. Because development costs are lower, they are available at a lower price.



## Choosing brand-name medicines will increase your co-payment.

Since October 2024, a selective treatment system has been introduced under which patients who choose certain brand-name medicines, even when generic equivalents are available, must pay a “special fee” in addition to their usual co-payment.

Please take this opportunity to consider using generic medicines, which are more affordable than brand-name medicines.

Please visit the Kyoukai Kenpo's website for more information. ▶



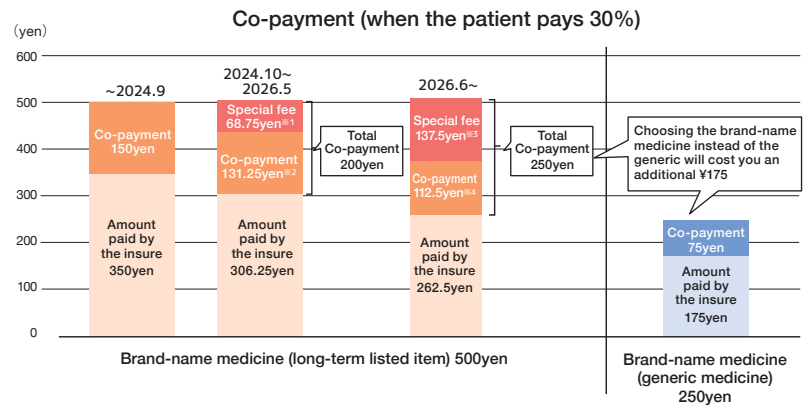
The “special fee” charged at the counter is equivalent to one-quarter of the price difference between brand-name and generic medicines. From October 2026 (P), this amount will be increased to one-half of the price difference.

The “special fee” is also subject to consumption tax, and the applicable tax will be added to the total payment.

● Example: Choosing a 500yen brand-name medicine instead of a 250yen generic medicine

	~2024.9	2024.10 ~2026.5	2026.6~
Co-payment	150yen	200yen	250yen
Special fee	—	68.75yen	137.5yen

Increase



\*1  $(500\text{yen} - 250\text{yen}) \times 1/4 = 62.5\text{yen} \rightarrow 62.5\text{yen} \times 1.1$  (consumption tax) = 68.75yen  
 \*2  $500\text{yen} - 62.5\text{yen}$  (special fee, excluding tax) = 437.5yen  $\Rightarrow 437.5\text{yen} \times 0.3 = 131.25\text{yen}$   
 \*3 Same as \*1 (using 1/2 instead of 1/4)  
 \*4 Same as \*2 (using the result from \*3)

Check

## Have you heard of “regional formularies”?

A regional formulary is a list of standard medicines for a specific region, together with guidelines on their use, compiled by medical professionals. Medicines included in the formulary are selected through collaboration among local doctors, pharmacists, and related organizations based on overall considerations such as effectiveness, safety, and cost-effectiveness.

The development of regional formularies supports high-quality medication therapy and helps ensure the continued availability and use of medicines during disasters. It also helps optimize medical expenses by promoting the use of generic medicines and appropriate medication use. The number of regions developing regional formularies is gradually increasing.

Check

## Do you know about “biosimilars (follow-on biologics)”?

A biosimilar is a medicine produced by another pharmaceutical company after the patent for a biopharmaceutical expires, and can be used in the same way as the original medicine at a lower cost.

### ● What are biopharmaceuticals?

Biopharmaceuticals are medicines that use proteins produced through biotechnology as their active ingredients. Biosimilars offer the same effectiveness and safety as biopharmaceuticals while being more affordable for patients.

### ● What are the benefits of using biosimilars?

Biopharmaceuticals and biosimilars are expected to be effective in treating diseases that were previously difficult to treat.

If you are receiving treatment with a biopharmaceutical, please consider consulting your doctor or pharmacist.



Biosimilars are medicines that have the same level of quality, safety, and effectiveness as the original biopharmaceutical.

### Examples of conditions treated with biopharmaceuticals and biosimilars

- Cancer ● Diabetes ● Rheumatoid arthritis
- Renal anemia ● Short stature
- Crohn's disease ● Ulcerative colitis
- Age-related macular degeneration ,etc.

Please visit the Kyoukai Kenpo's website for more information. ▶



## Practice self-medication by using OTC (over-the-counter) medicines!

OTC medicines (over-the-counter medicines) are medicines that can be purchased without a prescription at pharmacies and drugstores.

By making good use of OTC medicines (including medicated patches) to ease mild symptoms such as colds, stomachaches, hay fever, lower back pain, and shoulder stiffness, you can practice self-medication and take charge of your health.

- If you spend more than ¥12,000 a year on OTC medicines, you may qualify for a tax deduction under the Self-Medication Tax System. To apply, you must keep your receipts.
- Medicines that are prescribed by doctors and dispensed with a prescription are called prescription drugs. Some of these medicines also have OTC versions with the same active ingredients and are known as “OTC-like drugs.”
- OTC-like medicines (prescription drugs) are covered by health insurance, so patients usually pay only 30% of the cost. On the other hand, OTC medicines are not covered by insurance and may cost more even if they contain the same active ingredients. However, OTC-like medicines (prescription drugs) require a medical consultation and a doctor's prescription, which can involve additional medical expenses such as consultation fees. In some cases, purchasing OTC medicines may result in lower overall costs.
- Because it may be considered unfair that medicines with the same active ingredients can have different costs depending on whether they are OTC-like medicines (prescription drugs) or OTC medicines, the government is currently considering increasing the patient's co-payment for OTC-like medicines.

このマークが目印!

セルフメディケーション  
税 控除 対象

Because OTC medicines are easy to purchase at pharmacies and drugstores, they are convenient even for those with busy lifestyles.



Please take this opportunity to consider purchasing OTC medicines for mild illnesses or symptoms.

If your symptoms worsen or persist, please consult a pharmacist at a pharmacy or drugstore, or seek advice from a medical institution.

Please visit the Ministry of Health, Labour and Welfare's website for more information. ▶



# MEMO

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# Chapter 4

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## About health insurance benefits, etc.



## Health insurance eligibility

### When you have acquired health insurance eligibility

#### The process for acquisition of eligibility

- 1 Submission of the Notice of Acquisition of Eligibility, etc. to the Processing Center of the Japan Pension Service within five days from the day of the fact of eligibility acquisition
- 2 Review and input at the Processing Center is completed
- 3 It takes about two weekdays from preparation to dispatch of the “Notice of Eligibility Information” at the Kyoukai Kenpo
- 4 Arrival at your workplace

For example, if the review and input is completed at the Processing Center on Monday, the “Notice of Eligibility Information” will be delivered to your workplace as early as Thursday.

From December 2, 2024 onward, we have transitioned to a structure based on the My Number Card as your Health Insurance Certificate.  
Note that people who have not registered their My Number Card as a health insurance card may receive examinations from medical institutions, etc. using a health insurance eligibility certificate newly issued by the Kyoukai Kenpo.

#### Notice of Eligibility Information

資格情報のお知らせ

記号 21700023 番号 1 支店 00

氏名 協会 太郎

生年月日 昭和 61年 1月 22日

資格取得年月日 令和 5年 1月 1日

保険番号 99999999

保険者名称 全国健康保険協会 ○○支部

Please enter the symbol and number in the “symbol and number” field of each application form.

#### Please carefully store your Notice of Eligibility Information together with your My Number Card!

- ① Please check the information on the card when you receive it.
- ② You cannot receive examinations from medical institutions, etc. with only the Notice of Eligibility Information.  
\*See p.5 regarding the method of receiving an examination from medical institutions, etc.
- ③ If you damage or lose your Notice of Eligibility Information, please get it reissued.  
\*See p.49 regarding the reissuance of the Notice of Eligibility Information.

\*The Notice of Eligibility Information will be sent to your workplace. If your workplace has moved, please complete the procedure for the change of location with the Japan Pension Service.



#### When is the acquired health insurance valid until?

The insured person can use their health insurance at the time of employment until the day of retirement or resignation (the day before the date of loss of eligibility). Furthermore, your family members (dependents) cannot use the health insurance from the date of removal from support due to employment, etc. or later

(Example) When an insured person retires or resigns on March 20



Period of enrollment in the Kyoukai Kenpo

(Example) When a dependent starts working on April 1



Use the health insurance as a dependent until March 31

Use the health insurance through the place of employment on April 1 and later

#### The day on which you become unable to use your health insurance at the time of employment

Insured person	Dependent
<ol style="list-style-type: none"> <li>① The day following the date of retirement or resignation, etc. (the day following the date when the insured person is no longer employed at the applicable workplace)</li> <li>② The day of becoming insured under the late-stage elderly medical care system due to reasons such as turning 75 years old</li> <li>③ The day after the date of death</li> </ol>	<ol style="list-style-type: none"> <li>① The same day as the insured person loses eligibility</li> <li>② Date of removal from support due to employment, marriage, etc.</li> <li>③ Date of becoming insured under the late-stage elderly medical care system due to reasons such as turning 75 years old</li> <li>④ The day after the date of death</li> </ol>



## If you resign or retire



### What should I do with my health insurance when I resign or retire?

- When an insured person resigns or retires, all the health insurance eligibility certificate, etc. (only those people who possess them) of the insured person and his/her family (dependents) should be returned to the employer.
- When a dependent person is no longer supported due to employment, marriage, etc., the dependent's health insurance eligibility certificate, etc. (only those people who possess them) should be returned to the employer of the insured person.
- The employer should promptly collect the health insurance eligibility certificate, etc. (only those people who possess them), and submit them to the Processing Center of the Japan Pension Service along with the Notice of Loss of Eligibility and the Notice of Change of Dependent.
- Be sure to collect the health insurance eligibility certificate, etc. (only those people who possess them) that cannot be attached to the Notice of Loss of Eligibility or Notice of Change of Dependent, and promptly return them to the Processing Center of the Japan Pension Service or the Kyoukai Kenpo.

Check

### If you use ineligible health insurance, you will have to pay the entire amount

If you visit a medical institution, etc. after the date of loss of eligibility by using ineligible health insurance, you will be responsible for the full amount of the medical expenses and will be asked to repay the medical expenses paid by the Kyoukai Kenpo.

(Example) In the case that Mr. A receives medical care and treatment worth 10,000 yen (100%) after the date of loss of eligibility

- |                       |  |
|-----------------------|--|
| 1 Mr. A               | ▶ If Mr. A receives insured medical treatment at a medical institution by using ineligible health insurance, he will pay 3,000 yen (30%) as a partial payment. |
| 2 Medical institution | ▶ Claim of 7,000 yen to the Kyoukai Kenpo as the insurance portion.  |
| 3 Kyoukai Kenpo       | ▶ Payment of 7,000 yen (70%) to the medical institution.   |
| 4 Kyoukai Kenpo       | ▶ Request for refund of the 7,000 yen paid to the medical institution (expenses that were not rightfully required to be paid) to Mr. A.                        |

#### Medical expenses that do not need to be borne by the Kyoukai Kenpo have been incurred.

If a person who has lost his/her health insurance eligibility due to retirement or resignation, etc. visits a medical institution, etc. by using ineligible health insurance, the Kyoukai Kenpo will be responsible for medical expenses that do not rightfully need to be borne by the Kyoukai Kenpo, which may result in an extra premium rate. If people who have resigned/retired or who have been removed as dependents have health insurance eligibility certificate, etc. please collect and return them.

#### ● To employers

##### We reconfirm the eligibility of dependents.

At the Kyoukai Kenpo, we confirm each year whether individuals registered as dependents remain eligible. As this confirmation is an important process for ensuring the proper provision of insurance benefits, we appreciate your understanding and cooperation.

Employers will receive a "Dependent Status List." Please confirm whether the dependents listed still meet the eligibility requirements.

If a dependent should be removed, please complete the enclosed "Dependent Report and Change Notification (for Cancellation)," attach any health insurance eligibility certificates (if applicable), and submit them together with the list to the Kyoukai Kenpo. (To help ensure prompt processing, please use the online application system to complete the dependent cancellation procedure with the Japan Pension Service whenever possible.)

#### [Reference]

##### Results of reconfirmation in FY2024

###### Persons no longer supported as dependents

.....About 63,000 people in Japan (as of the end of March 2024)

###### Reduction in the burden of payments to the early-stage elderly

..... About 1.1 billion yen

##### ▼ Flow of reconfirmation of dependent status

- 1 The "Dependents Status List" is sent to your workplace
- 2 Check the relevant person(s) and fill in the necessary information on the "Dependents Status List"
- 3 Return the "Dependents Status List" to the Kyoukai Kenpo  
<If there is a person(s) who is no longer a dependent>  
Submit the "Record of Dependent Status and Notice of Change" (for Cancellation) and "health insurance eligibility certificate, etc. (Only those people who possess them)"



## Receiving the examinations of medical institutions, etc.

### If you visit a medical institution for illness or injury

#### What changes when you use your health insurance?

When an insured person or his/her dependent gets sick or injured for reasons unrelated to work, they can receive medical treatment and medication by using their My Number Card, etc. at medical institutions, etc., and paying the co-payment. The percentage of the co-payment is divided according to the patient's age, etc. If the patient is hospitalized, he or she must also pay the standard co-payment for meals.



\*See Page 5 for more information on visiting medical institutions

#### Percentage of co-payment

Before compulsory education		20% co-payment
After entering compulsory education and under 70 years old		30% co-payment
70-75 years old (Excluding those who are eligible for late-stage elderly medical care)	General	20% co-payment
	Income-earners at the same level as the active workforce*	30% co-payment

\*Income-earners at the same level as the active workforce means insured persons and dependents who have standard monthly remuneration above 280,000 yen. However, if the total annual income of an elderly insured person and dependents is less than 5.2 million yen (3.83 million yen if there are no dependents), the insured person is classified in the general category upon application.

#### Standard co-payment for meals during hospitalization

Category		Co-payment per meal	
		May 31, 2026 or earlier	June 1, 2026 or later
General (if none of the following apply)		510 yen	550 yen
Households with low income*	Hospitalization up to 90 days	240 yen	270 yen
	Hospitalization after 91 days	190 yen	220 yen
Elderly beneficiaries aged 70 and over who belong to households exempt from municipal tax and whose income does not meet certain standards		110 yen	130 yen

\* If the insured person is exempt from municipal tax, etc.



#### What if I get sick or injured due to work?

As a general rule, illnesses and injuries caused by work-related accidents, disasters on the way to work, and the like are covered by workers' accident insurance and cannot be covered by health insurance. However, if the insured person is an executive at a corporation with less than five employees and is engaged in the same work as that of general employees, illness or injury resulting from that work is covered by health insurance. For more information, please contact the Labor Standards Supervision Office, as they will certify whether or not an illness or injury is covered by workers' accident insurance.

#### Cases in which health insurance cannot be used (examples)

- Plastic surgery for cosmetic purposes
- Surgery for myopia
- Orthodontic treatment
- Preventive injections
- Periodic health checkups (*kenko shindan*) and comprehensive examinations (*ningen dokku*)
- Normal pregnancy and childbirth
- Abortion for financial reasons
- Treatments or medicines that are not covered by insurance (Advanced medical treatment, etc.)
- Illness or injury unrelated to the aims of health insurance

#### Check

#### Non-insured medical treatment that is allowed to be combined with insurance

Under the health insurance system, if you receive non-insured medical treatment that is not covered by insurance, you will be responsible for the full amount of medical expenses, including medical care that is covered by insurance. However, even in the case of receiving non-insured treatment, if the treatment is approved as "evaluation treatment," "patient-proposed healthcare services," or "treatment of patients' choice," the part of the treatment that is common to normal treatment (examination, tests, medication, hospitalization fees, etc.) is handled in the same way as general insurance treatment. The patient pays the co-payment, and the remaining amount is paid by the health insurance as a "special or specified medical care coverage."

#### Main items of evaluation treatment and treatment of patients' choice

- Advanced medical treatment
- Provision of a special environment for treatment
- Medical examination and treatment with an appointment / medical examination and treatment outside consultation hours
- First medical examination of a non-referred patient in a hospital with more than 200 beds
- Hospitalization for more than 180 days
- Differences in materials for anterior teeth



## When visiting an osteopathic clinic, orthopedic clinic, etc.



### Can I use my health insurance at places other than medical institutions, etc.?

Although the scope of health insurance coverage is limited, there are cases in which it may be used at osteopathic and orthopedic clinics where judo therapists provide treatment, and for acupuncture, moxibustion, massage, and the like. In principle, when using health insurance at these facilities, the patient must temporarily pay the full amount and then apply to receive benefits. However, registered practitioners are allowed to claim insurance benefits from the insurer on behalf of the patient. Therefore, by using your health insurance, you can receive treatment with only a co-payment in the same way as when you receive treatment at a medical institution.

### Cases in which health insurance can be used in osteopathic and orthopedic clinics

\* Health insurance cannot be used for stiff shoulders, massage for the purpose of relieving fatigue, etc.  
\* A doctor's consent is required for bone fractures and dislocations. (Except for emergency treatment)

Injuries that have a clear cause of injury and have not yet become chronic, such as the following:

- Bone fractures and dislocations
- Bruises
- Sprains
- Contusions (pulled muscles, etc.)

### Cases in which health insurance can be used for acupuncture and massage

\*A doctor's consent is required.

#### Cases of acupuncture and moxibustion

Mainly:

- Neuralgia
  - Rheumatism
  - Cervicobrachial syndrome
  - Stiff shoulders
  - Lower back pain
  - Cervical sprain sequelae
- \*Chronic pain that is considered to be in the same category as neuralgia, rheumatism, etc. may also be covered.

#### In the case of massage

When there are symptoms such as muscle paralysis or joint contracture and it is deemed medically necessary



Check

### Q&A

Q<sub>1</sub>

What should I do if I paid the entire amount of the medical expenses at a medical institution, etc. soon after enrollment?

A<sub>1</sub>

If you have paid the entire amount of your medical expenses, you can file a claim for the medical care expenses, and you **will be reimbursed** at a later date for the amount you paid to the medical institution, etc. **other** than your co-payment.

\*Applicable only to services covered by insurance.

Q<sub>2</sub>

How can I use my My Number Card to receive an examination?

A<sub>2</sub>

Please register to be able to use your My Number Card as an insurance card through **Mynportal**, and use your My Number Card at the counter of a medical institution, etc. that supports online eligibility verification.



## Notice of Eligibility Information and application for issuance of a health insurance eligibility certificate

### If you are unable to receive an examination using a My Number Card

#### What if you cannot use your My Number Card?

If you do not have a My Number card, have not registered to use a My Number Card, or need a family member or helper, etc to accompany you to assist with eligibility verification, submit an “Application Form for Issuance of Health Insurance Eligibility Certificate” to receive issuance of the Health Insurance Eligibility Certificate.



### When reissuance of the Notice of Eligibility Information is necessary

#### What if reissuance of the Notice of Eligibility Information is necessary?

If you have lost (damaged) the Notice of Eligibility Information issued to you when you acquired health insurance eligibility, or if a new Notice of Eligibility Information is necessary due to a name change, etc., submit an “Application Form for Issuance of Notice of Eligibility Information” to be issued a Notice of Eligibility Information.



### Notice of cause of injury

### If you apply for benefits due to an injury

#### How do I receive benefits when I am injured?

When you apply for various benefits due to an injury, you must submit a “Notice of Cause of Injury.” If the illness/injury was caused by an act of a third party, you must submit a “Notice of Injury or Illness Caused by a Third Party Act” as well. (See p. 50)



The “Notice of Cause of Injury” is necessary when applying for the following payments due to an injury.

- Transport expenses
- Overseas medical expenses

\*However, even for applications other than the above, when an executive of a corporation is injured at work (or when commuting to work) and benefits from health insurance are to be paid, there are cases in which attachment of the “Notice of Cause of Injury” is necessary, so please consult with the Kyoukai Kenpo regarding the details.



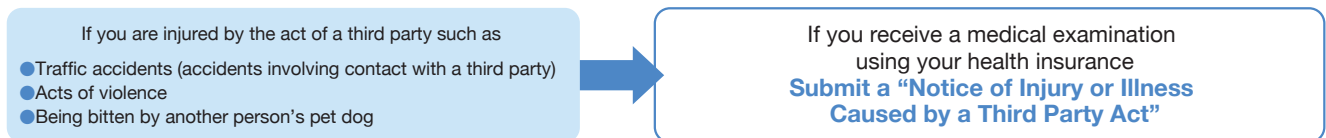
## Notice of Injury or Illness Caused by a Third Party Act

### If you are injured in a traffic accident, etc.



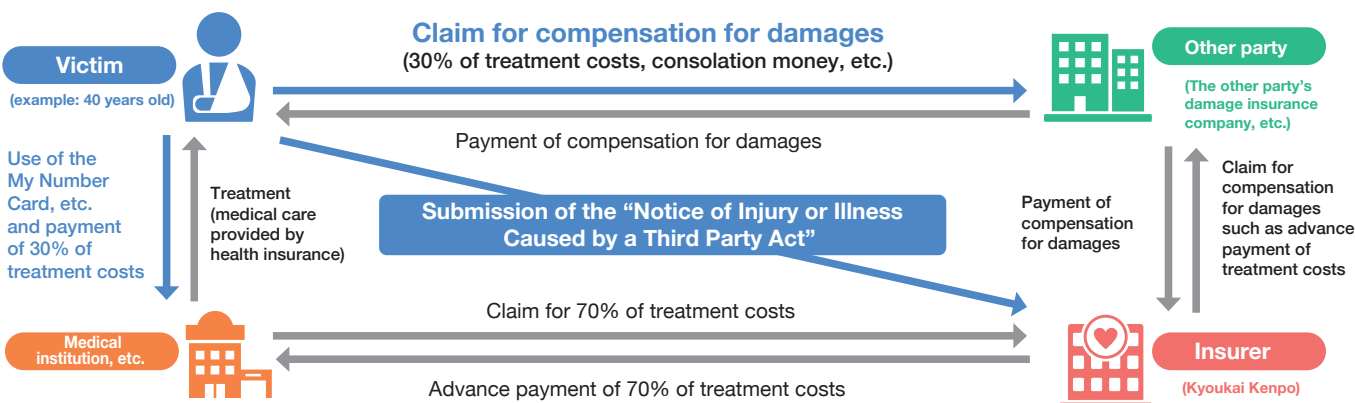
#### What happens if I am injured in a traffic accident, etc.?

If you are injured due to the act of a third party, such as in a traffic accident, you can still receive medical treatment under your health insurance, as long as your injury was not caused by an accident at work (work injury) or when commuting to work. However, in this case, it is necessary to submit a “Notice of Injury or Illness Caused by a Third Party Act.”



#### What is the flow of health insurance benefits?

The Kyoukai Kenpo (health insurance) will temporarily pay the treatment costs that should be paid by the other party (perpetrator), and then claim compensation from the other party (perpetrator). For this reason, it is necessary to submit a “Notice of Injury or Illness Caused by a Third Party Act.”



Submission of the “Notice of Injury or Illness Caused by a Third Party Act”



#### Necessary documents in case of traffic accidents, etc.

The following documents are required, including the “Notice of Injury or Illness Caused by a Third Party Act.”

##### ① “Notice of Injury or Illness Caused by a Third Party Act”

Basically, the insured person, etc. fills in the form, but if the other party (damage insurance company, etc.) can be asked to fill in the form, it can be done by the other party. Please fill in the form with reference to the traffic accident certificate.

##### ② “Report on Situations of Accident”

In the case of a traffic accident, this is an important document in determining the situation of the accident and the percentage of fault, so please provide as much detail as possible.

##### ③ “Agreement”

When the Kyoukai Kenpo makes a claim for damages to the other party’s insurance company, etc., a breakdown of medical expenses (copy of medical fee statement, etc.) is attached. Since personal information will be provided to the other party, the consent of the person concerned is required. In addition, this document asks for clarification of the Kyoukai Kenpo’s acquisition of the right to claim for damages and a report on the progress of the settlement in the future.

##### ④ Other documents to be submitted

In the case of a traffic accident, please be sure to attach a “Traffic Accident Certificate” (issued by the Japan Safe Driving Center).

\*In the case of an accident causing property damage, etc., a “Statement of Reasons for Not Being Able to Obtain a Personal Injury Certificate” is also required.



Eligible for online application

- Application form for an eligibility certificate for ceiling-amount application
- Application form for an eligibility certificate for ceiling-amount application and reduction of the standard amount of patient liability
- Application form for the issuance of the certificate of medical treatment for specified diseases



## Eligibility Certificate for Ceiling-Amount Application

If your medical expenses are likely to be high due to hospitalization, etc.

### What is the Eligibility Certificate for Ceiling-Amount Application?

Health insurance has a “high-cost medical expense benefit” (see p.53) that allows you to be reimbursed at a later date for the excess amount above your co-payment limit (see p.52) when you pay for high-cost medical expenses. However, even with this reimbursement, paying for expensive medical expenses can be a huge burden.

Therefore, if you have to pay a large amount of money at the medical institution, you can apply for and receive an “Eligibility Certificate for Ceiling-Amount Application” in advance and present it at the counter of the medical institution. The amount you have to pay at the counter at each medical institution (per month) is limited to the legal co-payment limit.

If you are between 70 and 75 years old, your standard monthly remuneration is between 280,000 yen and 790,000 yen, and your Elderly Insurance Certificate covers 30% of costs, you are eligible to receive the Eligibility Certificate for Ceiling-Amount Application.

For those whose standard monthly remuneration is 830,000 yen or more, and whose Elderly Insurance Certificate covers 20% of costs, the payment at the counter will be up to the co-payment limit if you use your My Number Card, etc. at medical institutions, etc.

If you use your My Number Card, you will only have to pay up to your co-payment limit, so application for the Eligibility Certificate for Ceiling-Amount Application is not required. (It is necessary for insured persons who are exempt from municipal tax, etc. to apply for the “Eligibility Certificate for Ceiling-Amount Application and Reduction of the Standard Amount of Patient Liability.”)

### How to submit the application for the Eligibility Certificate for Ceiling-Amount Application

- 1 Submit the “Eligibility Certificate for Ceiling-Amount Application” in advance
- 2 The “Eligibility Certificate for Ceiling-Amount Application” is issued
- 3 Show the “Eligibility Certificate for Ceiling-Amount” issued in 2, and the “health insurance eligibility certificate, etc.” to the medical institution, etc.



#### ●Period of validity

The period of validity is up to one year from the first day of the month of application (month when received) (or the date of eligibility acquisition if the application is received in the month in which the applicant enrolled in health insurance). This is the period of validity for people who reach the age of 70 during the application period, and insured persons with optional and continued coverage whose coverage period expires.

Note that the period of validity of the “Eligibility Certificate for Ceiling-Amount Application and Reduction of the Standard Amount of Patient Liability,” which is used by insured persons who are exempt from municipal tax, is from the first day of the month of application until the last day of the next July.

#### Cases in which an Application Form for Payment of High-Cost Medical Expenses is also required

In the following cases, even if you present the Eligibility Certificate for Ceiling-Amount Application, you also need to submit the Application Form for Payment of High-Cost Medical Expenses.

(Please fill out the application form for what you present as well.)

- 1 Cases in which the applicant visits or is hospitalized at two or more medical institutions in one month and incurs high costs.
- 2 Cases of application of the co-payment limit before the reduction upon presentation of the relevant certificate, even when the co-payment limit is reduced from the fourth month due to the multiple application of high-cost medical expenses

\* Insured persons who are exempt from municipal tax, please apply for the “Eligibility Certificate for Ceiling-Amount Application and Reduction of the Standard Amount of Patient Liability.” In this case, people who are between 70 and 75 years old also need to apply.

### The “Certificate of Medical Treatment for Specified Diseases” in the case of long-term treatment

Check

If you are diagnosed with a disease that requires high medical expenses over a long period of time, such as dialysis or hemophilia, you can apply for and receive a “Certificate of Medical Treatment for Specified Diseases” and present it at the counter to have your monthly co-payment limit set to the following amounts for each medical institution (hospitalization, outpatient visits, and pharmacy). The period of validity of the “Certificate of Medical Treatment for Specified Diseases” is the first day of the month of application (or the date of acquisition of eligibility if the application is made during the month of enrollment in health insurance). Since it is not possible to apply the certificate retroactively, please apply as soon as possible.

Eligible diseases	Co-payment limit
<ol style="list-style-type: none"> <li>1 Chronic renal failure that requires dialysis treatment</li> <li>2 Hemophilia</li> <li>3 Acquired immunodeficiency syndrome (AIDS) for which antiviral drugs are administered</li> </ol>	10,000 yen (However, with regard to (1), people under 70 years old and whose standard monthly remuneration is 530,000 yen or more as well as their dependents will have a maximum amount of 20,000 yen)

\* If the Kyoukai Kenpo has issued you a Certificate of Medical Treatment for Specified Diseases based on this application, using the My Number Card means that you are not required to show the Certificate of Medical Treatment for Specified Diseases at the counters of medical institutions, etc., and your payment at the counter for insured medical care for any diseases which have received certification will be no more than a certain co-payment limit.

- Application form for payment of high-cost medical expenses
- Application form for high-cost long-term care unitary medical care benefits and issuance of a co-payment certificate
- Application form for payment of annual high-cost medical expenses and issuance of a co-payment certificate



## High-cost medical expenses

# If you have to pay high-cost medical expenses due to sudden injury, hospitalization, etc.

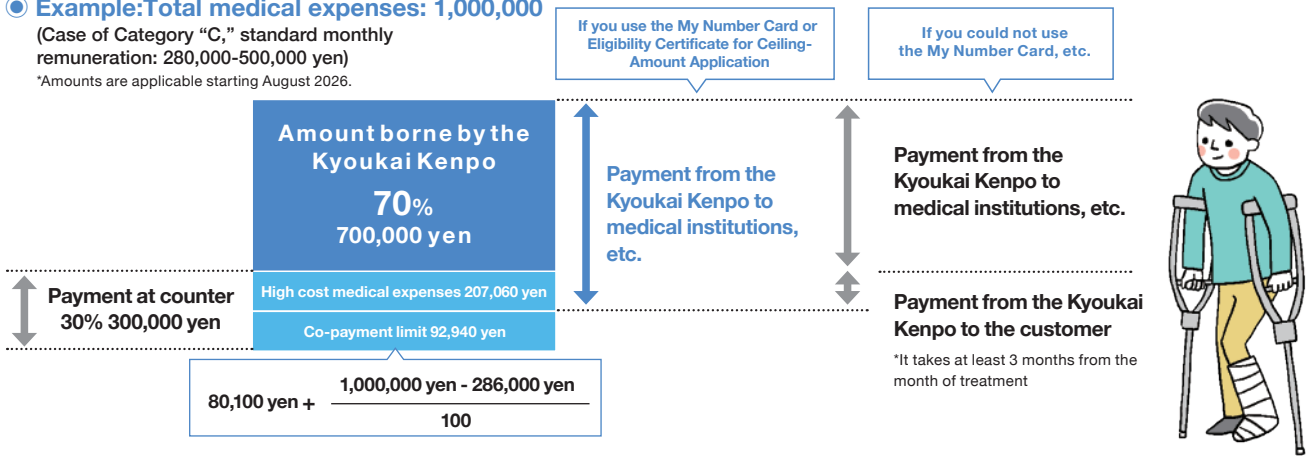
### What are high-cost medical expenses?

When the amount of partial payment (co-payment) at a medical institution, etc. in the same month becomes so high that it exceeds the co-payment limit, the excess amount can be reimbursed as “high-cost medical expenses” at a later date upon application.

If you know in advance that your medical expenses will be high, it is convenient to use your My Number Card or present the Eligibility Certificate for Ceiling-Amount (see p.51) to the medical institution, etc.

#### Example: Total medical expenses: 1,000,000

(Case of Category “C,” standard monthly remuneration: 280,000-500,000 yen)  
\*Amounts are applicable starting August 2026.



### Application process



\*If the month ends and new one begins, an application form is required for each month.  
Example: Hospitalized from January 15 to February 15 → Applications are required for both January and February



### What are the points to note when calculating the co-payment amount?

- Calculations are made on a monthly basis (from the 1st to the last day of the month)  
For example, if a patient receives medical treatment from January 10 to February 10, there will be two claims, one from January 10 to January 31 and the other from February 1 to February 10, and each claim will be calculated separately.
- Calculation by patient    • Calculation by medical institution
- Calculation separated by medical institution and dental institution
- Calculation separated by inpatient and outpatient services  
Inpatient and outpatient charges are calculated separately even at the same medical institution. The amount of outpatient prescriptions for outpatient visits is added to the total for hospital visits. If the date of the visit to the medical institution and the date of the dispensing at the pharmacy are different months, they will be calculated separately.
- Costs eligible for insurance are covered  
The cost of meals, certain beds, and the like are not covered.

**Calculation in the case of adding up medical treatment at multiple medical institutions, etc. and for other patients in the same household**

〈People under 70 years old〉  
Only people whose co-payment is 21,000 yen or more can be added up.

〈People between 70 and 75 years old〉  
Everything can be added up.

### Costs covered and not covered for high-cost medical expenses

Covered costs		Non-covered costs	
• Partial payment for medical treatment benefits	• The amount equivalent to the co-payment for medical expenses combined with treatment outside insurance coverage	• Standard amount of the payment of dietary treatment expenses for inpatients	• Out of pocket amount for medical expenses combined with treatment outside insurance coverage
• The amount equivalent to the co-payment for medical treatment expenses	• Basic usage fee of medical expenses for home nursing	• Standard amount of the living support expenses for inpatients	• Non-insurance usage fee for home nursing

Check

## About the co-payment limit (standard amount for reimbursement)

### 1 The co-payment limit varies depending on the age and income category of the insured person

#### ● People under 70 years old (Table I)

Figures in <> indicate cases of multiple applications

Insured person's income category		Co-payment limit
A	Standard monthly remuneration 830,000 yen or more	252,600 yen+ (total medical expenses - 842,000 yen) × 1% <140,100 yen>
B	530,000-790,000 yen	167,400 yen+ (total medical expenses - 558,000 yen) × 1% <93,000 yen>
C	280,000-500,000 yen	80,100 yen+ (total medical expenses - 267,000 yen) × 1% <44,400 yen>
D	Less than 260,000 yen	57,600 yen <44,400 yen>
E	*Low-income earners	35,400 yen <24,600 yen>

Applicable starting August 2026 Figures in <> indicate cases of multiple applications

Insured person's income category		Co-payment limit
A	Standard monthly remuneration 830,000 yen or more	270,300 yen+ (total medical expenses - 901,000 yen) × 1% <140,100 yen>
B	530,000-790,000 yen	179,100 yen+ (total medical expenses - 597,000 yen) × 1% <93,000 yen>
C	280,000-500,000 yen	85,800 yen+ (total medical expenses - 286,000 yen) × 1% <44,400 yen>
D	Less than 260,000 yen	61,500 yen <44,400 yen>
E	*Low-income earners	36,900 yen <24,600 yen>

\*If the insured person is exempt from municipal tax and does not fall under categories A or B.

#### ● People who are between 70 and 75 years old (Table II)

Figures in <> indicate cases of multiple applications

Insured person's income category		Co-payment limit	
		Per individual (outpatient)	Per household (including hospitalization)
Standard monthly remuneration income at same level as current workforce	830,000 yen or more	252,600 yen+ (total medical expenses - 842,000 yen) × 1% <140,100 yen>	
	530,000-790,000 yen	167,400 yen+ (total medical expenses - 558,000 yen) × 1% <93,000 yen>	
	280,000-500,000 yen	80,100 yen+ (total medical expenses - 267,000 yen) × 1% <44,400 yen>	
General (standard monthly remuneration of 260,000 yen or less)		18,000 yen (annual limit:144,000 yen)	57,600 yen <44,400 yen>
Low-income earners II *1			24,600 yen
Low-income earners II *2		8,000 yen	15,000 yen

Applicable starting August 2026 Figures in <> indicate cases of multiple applications

Insured person's income category		Co-payment limit	
		Per individual (outpatient)	Per household (including hospitalization)
Standard monthly remuneration income at same level as current workforce	830,000 yen or more	270,300 yen+ (total medical expenses - 901,000 yen) × 1% <140,100 yen>	
	530,000-790,000 yen	179,100 yen+ (total medical expenses - 597,000 yen) × 1% <93,000 yen>	
	280,000-500,000 yen	85,800 yen+ (total medical expenses - 286,000 yen) × 1% <44,400 yen>	
General (standard monthly remuneration of 260,000 yen or less)		22,000 yen (annual limit:216,000 yen)	61,500 yen <44,400 yen>
Low-income earners II *1		11,000 yen (annual limit:96,000 yen)	25,700 yen <24,600 yen>
Low-income earners II *2		8,000 yen	15,700 yen

\*1 Insured persons exempt from municipal tax who do not fall under the category of income-earners at the same level as the active workforce

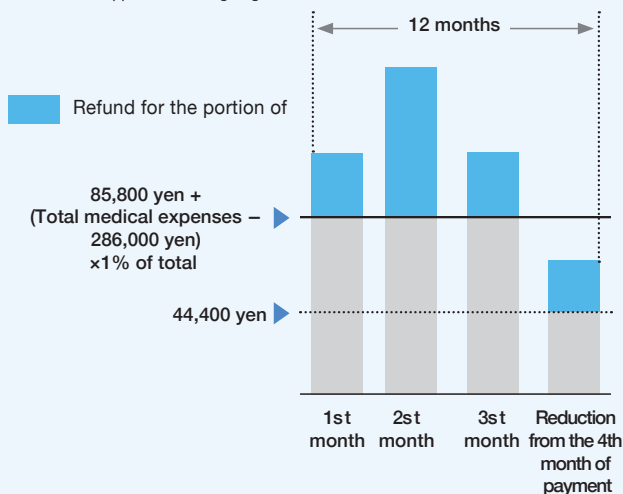
\*2 People who have no income after deducting necessary expenses and deductions from the income of the insured person and all his/her dependents, and who do not fall under the category of income-earners at the same level as the active workforce

### 2 Co-payment limit is reduced in the case of multiple applications

If a household has received payment of high-cost medical expenses for a total of three or more months in the last year prior to the month of application for high cost medical expenses, the co-payment limit will be reduced from the fourth month.

#### Cases of standard monthly remuneration

\*Amounts are applicable starting August 2026.



### 3 Cases of households with patients who are "people under 70 years old" and "people between the ages of 70 and 75" (The highest allowance amount will be paid by comparing the following 1, 2, and 3)

- 1 For each individual subscriber between the ages of 70 and 75, the portion of the co-payment for outpatient visits that exceeds the co-payment limit amount shown in Table II will be reimbursed.
- 2 For subscribers between the ages of 70 and 75, the amount of outpatient and inpatient co-payment is totaled, and the portion that exceeds the co-payment limit per household shown in Table II will be reimbursed.
- 3 The "co-payment amount for each household between the ages of 70 and 75 that remains after the calculation in 2" and the "co-payment amount for subscribers under 70 years old\*" are added up, and the portion that exceeds the "co-payment limit shown in Table I" will be reimbursed.

\*The co-payment amount over 21,000 yen only

## What are “Expenses for High-Cost Medical Treatment Combined with Long-Term Care”?

This is a system for cases of a recipient of long-term care insurance in a household covered by health insurance, in which the total of the amount of partial contributions paid by the health insurance (excluding high-cost medical expenses) and the amount paid by the long-term care insurance user (excluding high-cost nursing care service expenses) during one year (from August 1 to July 31 of the following year) will be reimbursed for the portion that exceeds the standard amount for calculating the amount of combined long-term care expenses. However, this is limited to cases where the excess portion is higher than 501 yen.

If the total annual amount of the household’s co-payment for medical care and nursing care exceeds the standard amount shown in the table below, the amount paid will be divided proportionally according to the ratio of the co-payment for both systems.

### Standard amount for calculating the total amount combined with long-term care

#### ●People under 70 years

Income category of insured persons		Standard amount
A	Standard monthly remuneration	830,000 yen or more
B		530,000-790,000 yen
C		280,000-500,000 yen
D		Less than 260,000 yen
E		Low-income earners (exempt from municipal tax)
		Standard amount
		2.12 million yen
		1.41 million yen
		670,000 yen
		600,000 yen
		340,000 yen

#### ●People between the ages of 70 and

Income category of insured persons		Standard amount
Standard monthly remuneration	For 830,000 yen or more, 30% of the cost burden will be borne with the Elderly Insurance Certificate (equivalent to active work force III)	2.12 million yen
	For 530,000-790,000 yen, 30% of the cost burden will be borne with the Elderly Insurance Certificate (equivalent to active work force II)	1.41 million yen
	For 280,000-500,000 yen, 30% of the cost burden will be borne with the Elderly Insurance Certificate (equivalent to active work force I)	670,000 yen
	For 260,000 yen or less (general income earner)	560,000 yen
Exempt from municipal tax	Low-income earners II	310,000 yen
	Low-income earners I	190,000 yen

## What are “annual high-cost medical expenses”?

For insured individuals aged 70 to under 75 whose income category is classified as general (20% copayment) or low income, an annual cap is set on the total out-of-pocket expenses for outpatient care incurred over a one-year period (from August 1 of the previous year to July 31).

If the income category as of the reference date (July 31 each year) is classified as general or low income, the amount exceeding the annual cap for outpatient out-of-pocket expenses incurred during months within the calculation period (August 1 of the previous year to July 31) that fall under the general or low-income category will be reimbursed as annual high-cost medical expenses.

Annual high-cost medical expenses are paid on an individual basis. Out-of-pocket expenses of insured persons and their dependents are not combined.

Starting with medical care provided from August 2026, individuals under age 70 will also be subject to an annual cap on the total out-of-pocket expenses incurred over a one-year period (from August 1 of the previous year to July 31), based on their income category as of the reference date (July 31 each year).

\*Applications are scheduled to start in August 2027 or later.



Eligible for online application

- Application form for Reimbursement of Medical Care Expenses(Paid in Advance)
- Application form for Reimbursement of Medical Care Expenses(Therapeutic Orthotics)
- Application form for Reimbursement of Overseas Medical Expenses



## Medical expenses and overseas medical expenses

### If you have paid the full co-payment of medical expenses and the manufacturing cost for therapeutic orthotics

#### What are medical expenses?

Under the health insurance system, you may apply afterward to receive reimbursement for medical care expenses or overseas medical care expenses in cases such as when you had to pay the full cost of insured medical treatment because health insurance could not be used due to unavoidable circumstances (reimbursement), when a medical device was made for treatment, or when you received medical care locally due to sudden illness or injury while traveling abroad.



#### Main cases in which you can receive reimbursement for medical expenses

- 1 If you are unable to use your My Number Card, etc. due to unavoidable circumstances, and you have to pay the entire amount of the health insurance portion of medical expenses
- 2 If you receive an examination from a medical institution, etc. based on the eligibility of an insurer you previously subscribed to, and later refunding the medical expenses
- 3 If a corset or other therapeutic orthotic is made and worn under the direction of a doctor
- 4 If fresh blood is purchased through a hospital and transfused
- 5 If you have received acupuncture, moxibustion, or massage treatment with the approval of a doctor
- 6 If you receive medical treatment at a medical institution, etc. overseas (Injuries caused by work-related accidents are excluded. Cases of going abroad for the purpose of medical treatment are also excluded)
- 7 If you receive treatment from a judo therapist (osteopathic clinic or orthopedic clinic)

#### Judo therapists (osteopathic clinics or orthopedic clinics)

##### Cases in which health insurance can be used

Bone fractures, dislocation, sprains, bruises, pulled or torn muscles, etc., where the cause of injury is clear and the injury is not chronic (with the exception of emergency treatment, bone fractures and dislocation that require a doctor's approval)

##### Cases in which health insurance cannot be used

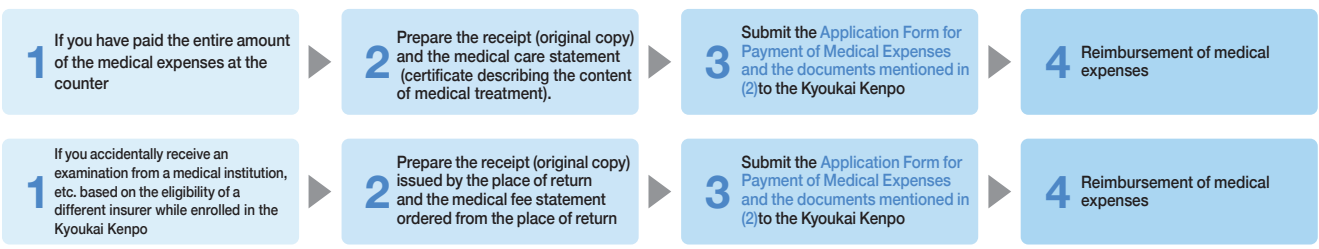
- Fatigue caused by daily life, mere stiffness in the shoulders, poor health, etc.
- Muscular fatigue caused by sports



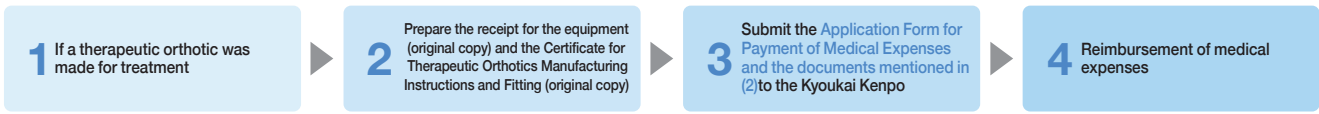
### What is the procedure for reimbursement of medical expenses?

Medical expenses that have been paid are not fully reimbursed. Rather, the amount calculated based on the case of receiving treatment through insurance minus the amount equivalent to partial payment will be reimbursed. Expenses that are not covered by health insurance will be excluded.

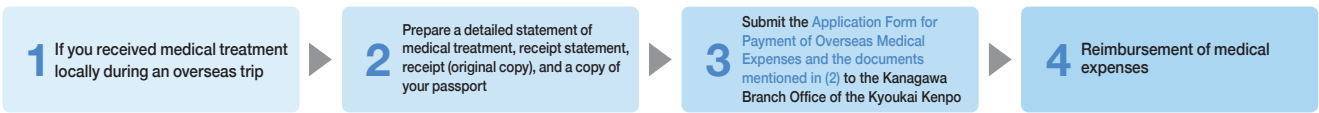
#### Payment in advance in advance



#### Therapeutic orthotic



#### Overseas medical treatment



Medical expenses and overseas medical expenses

## ● Attached documents required for application

Payment in advance	If you receive out of pocket medical treatment	Original copies of receipts (receipt statements) (receipts proving the expenses incurred for medical treatment)
		Original copies of medical statement issued by the medical institution, etc. (a certificate stating the details of medical treatment)
	If you received an examination from a medical institution, etc. based on the eligibility of another insurer, such as national health insurance, etc., and returned the medical expenses	Original copies of receipts issued by the municipality or other place of return
		Original copies of medical fee statements (claims) ordered from the municipality or other place of return (If the envelope is sealed, please attach the entire envelope without opening it)
Equipment	Original copy of the Certificate for Therapeutic Orthotics Manufacturing Instructions and Fitting	
	Original copy of the receipt (stating the names and types of equipment and the cost amount by breakdown, the equipment maker's name (their official seal is also allowed), and whether the product is order-made or an off-the-shelf product (if an off-the-shelf product, the product name and manufacturer's name))	
	If there is no breakdown on the receipt, a copy of the document with the breakdown (such as a copy of the invoice, etc.)	
Amblyopia in children, etc. Eyeglasses for treatment	A photograph of the actual orthopedic shoes (if making an application for payment for orthopedic shoes)	
	Order for the production of eyeglasses, etc. (results of eye examination, certificate from a doctor stating the name of the injury or illness*) *Name of injury/illness: Amblyopia, strabismus, or refractive correction after congenital cataract surgery in children	
	Examination report (if the results of the eye examination are not clearly indicated in the "Instructions for Eyeglasses, etc.," a copy of the results of the eye examination)	
	Original copies of receipts (with a breakdown)	
Elastic garments, etc.	If there is no breakdown on the receipt, a copy of the document with the breakdown (such as a copy of the invoice).	
	Original copy of the instructions for wearing elastic garments, etc.	
	Original receipts (with a breakdown)	
Overseas medical expenses	If there is no breakdown on the receipt, a copy of the document with the breakdown (such as a copy of the invoice).	
	Original copy of the medical statement prepared by an overseas doctor	
	Original copy of the overseas receipt statement	
	Original copy and Japanese translation of the receipt	
	Japanese translations of documents written in foreign languages (include the translator's signature, address, and contact information)	
	A copy of your passport (the page that shows the photo of the overseas traveler and the page that shows the country entry and exit confirmation)	
A letter of consent to refer to the medical institution, etc. that provided the medical treatment overseas		

Please note that original documents that you attached cannot be returned.

Eligible for online application  
 • Application Form for Payment of Injury and Sickness Allowance



## Injury and sickness allowance

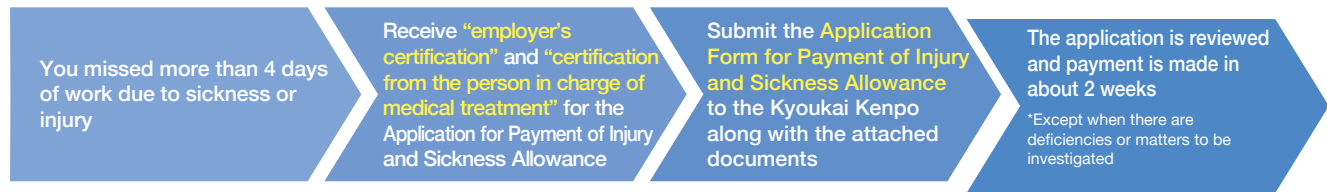
### If you are absent from work for more than 4 days due to injury or sickness

#### What is injury and sickness allowance?

It is a benefit paid when an insured person is absent from work due to sickness or injury and cannot receive wages during the period. If you are unable to work for more than 4 days due to sickness or injury, please submit the “Application Form for Payment of Injury and Sickness Allowance” to the Kyoukai Kenpo with certification from your employer and the person in charge of your medical treatment (doctor, etc.).



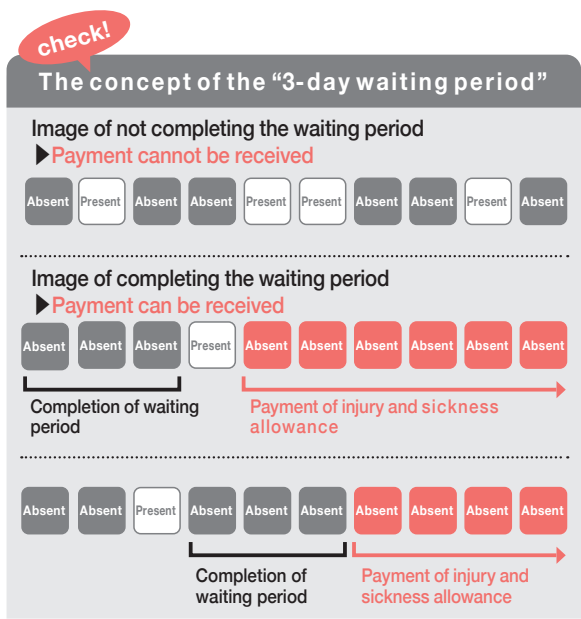
#### Application process



#### What are the conditions for receiving the injury and sickness allowance?

The injury and sickness allowance is paid when all of the following conditions of ① to ④ are met.

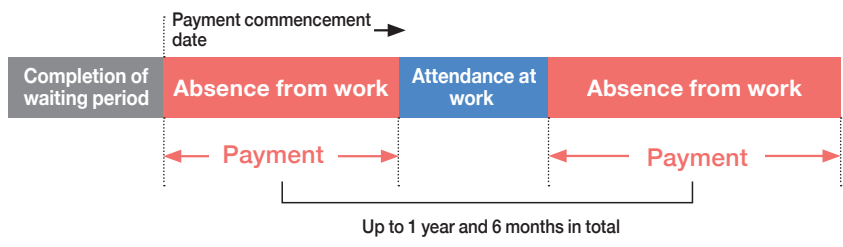
- ① **The absence from work for medical treatment of a sickness or injury unrelated to work**  
 For employment injuries or injuries when commuting to work, please file a claim for worker's accident insurance.
- ② **Unable to work at the job you had been employed at**  
 This will be determined based on the opinion of the person in charge of medical treatment (doctor, etc.).
- ③ **Unable to work for 4 days or more (including 3 consecutive days of absence)**  
 After taking 3 consecutive days off work to recuperate from a sickness or injury (waiting period\*, see the figure on the right), payment will be made for the 4th and subsequent days that the employee was unable to work. The waiting period includes paid vacations, weekends, national holidays, and other legal holidays.
- ④ **No wages are paid for the period of absence (If any part of the salary is paid, such as an allowance, the amount will be reduced)**  
 If the wages are paid in full, the injury and sickness allowance will not be paid. However, if the daily amount of wages is less than the daily amount of the injury and sickness allowance, the difference will be paid.



Injury and sickness allowance

#### What is the period of payment for the injury and sickness allowance?

The injury and sickness allowance will be paid up to one year and six months for the total from the payment commencement date for the payment period (the actual payment period).





## What is the amount of the injury and sickness allowance?

The daily amount of the injury and sickness allowance is equal to two-thirds of the amount equivalent to 1/30 of the average amount of the standard monthly remuneration for each month during the most recent consecutive 12 months of the insured period of the Kyoukai Kenpo (including the period of optional and continued coverage) prior to the month when the allowance begins. If wages or allowances are paid, they will be deducted from the amount paid. If wages or allowances are paid in excess of the amount paid, the allowance will not be paid during that period.

\*The payment commencement date refers to the date when the injury and sickness allowance is first paid.

$$\text{Total payment amount} = \left( \frac{1}{30} \text{ of the average of the standard monthly remuneration for the most recent year} \right) \times \frac{2}{3} \times \text{Number of payment}$$

If you have been insured for less than one year, the amount will be based on either the average amount after you became eligible or the average amount of all insured persons of the Kyoukai Kenpo, whichever is lower.

### Example of the daily amount of the injury and sickness allowance

- 1 Payment commencement date for the injury and sickness allowance: February 15, 2024
- 2 Standard monthly remuneration  
March to August 2023: 160,000 yen  
September 2023 to February 2024: 180,000 yen
- 3 Average of the amounts in 2  
 $(160,000 \text{ yen} \times 6 + 180,000 \text{ yen} \times 6) \div 12 = 170,000 \text{ yen}$
- 4 Amount equivalent to 1/30 of the amount in 3  
 $170,000 \text{ yen} \div 30 \approx 5,670 \text{ yen}$   
(rounded to the nearest 10 yen)
- 5 Amount paid per day for the injury and sickness allowance  
 $5,670 \text{ yen} \times 2/3 = 3,780 \text{ yen}$  (rounded to the nearest 1 yen)



## What happens if I lose my eligibility due to retirement or resignation, etc.?

You can continue to receive the injury and sickness allowance after resignation only if all of the following requirements of 1 to 5 are met. The period during which the allowance can be received is one year and six months in total. However, as shown in 5 below, the period of payment after the loss must be continued.

The injury and sickness allowance is not paid for sickness or injury that occurred during the period of being an insured person with optional and continued coverage.

- 1 By the day before the date of loss of eligibility (the day of retirement, etc.), you must have been insured by the health insurance system for at least one year (excluding the period of optional and continued coverage) (including the period of enrolment in the Kyoukai Kenpo or a health insurance society, but not including national health insurance, etc.).
- 2 You must have been absent from work for at least 3 consecutive days by two days before the day you lost your eligibility (the day before your retirement date), and must have been absent from work on the day before the day you lost your eligibility (your retirement date, etc.).
- 3 You must not be receiving unemployment benefits (cannot be paid in combination, as unemployment benefits are provided to those who are able to work.)
- 4 You must continue to be unable to work due to the same injury or sickness for medical treatment after losing your eligibility
- 5 The period of inability to work must be continuous (intermittent receipt of the allowance is not possible)

Check

### Cases in which the amount of the injury and sickness allowance is adjusted

In the following cases, the amount of the injury and sickness allowance will be adjusted.

- 1 When wages or allowances are being paid
- 2 If a person is entitled to a disability pension or disability allowance for the same injury or sickness as the injury and sickness allowance
- 3 If a person is entitled to an old-age retirement pension after retirement
- 4 When a person is unable to work due to a sickness or injury outside of work while receiving compensation for absence from work from workers' accident compensation insurance
- 5 When a person is receiving a childbirth allowance

When the amount per day of the allowance, etc. in 1 to 5 is:

**Less than the amount per day of the injury and sickness allowance**

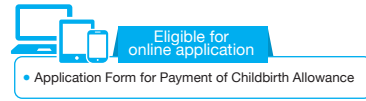
Amount per day of the allowance, etc. in 1 to 5 < Amount per day of the injury and sickness allowance

The difference in the amount per day will be calculated and the injury and sickness allowance will be paid.

**Higher than the amount per day of the injury and sickness allowance**

Amount per day of the allowance, etc. in 1 to 5 > Amount per day of the injury and sickness allowance

The injury and sickness allowance will not be paid for that period.



## Childbirth allowance

### If you take a leave of absence from work for childbirth



#### What is the childbirth allowance?

The childbirth allowance is a benefit paid to an insured person who is absent from work due to childbirth and is unable to receive wages during the period. Please receive certification from your employer, doctor, etc. and submit the "Application Form for Payment of the Childbirth Allowance" to the Kyoukai Kenpo.

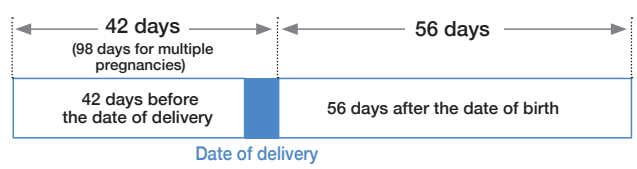
#### Application process



#### What is the claimable period?

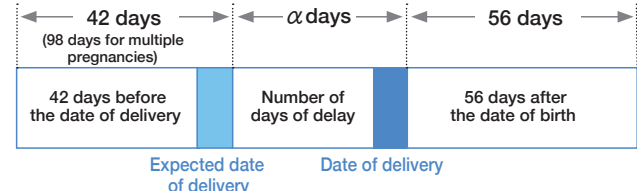
The claimable period is from "42 days (98 days in the case of multiple pregnancies) before the date of delivery (or the expected date of delivery if the delivery is after the expected date)" to "56 days after the date of delivery." The day of delivery is included in the period before the day of delivery. If the delivery is later than the expected date, the childbirth allowance will also be paid for the delayed period.

##### Delivery on or before the expected delivery date



Application period = 42 days (98 days for multiple pregnancies) + 56 days

##### In the case of delivery later than the expected



Application period = 42 days (98 days for multiple pregnancies) + alpha days + 56 days

#### How to calculate the amount of the childbirth allowance payment

Total amount paid =  $\frac{1}{30}$  of the average of the standard monthly remuneration for the most recent year  $\times \frac{2}{3} \times$  Number of days paid

If you have been insured for less than one year, the amount will be based on either the average amount after you became eligible or the average amount of all insured persons of the Kyoukai Kenpo, whichever is lower.

#### Cases where you can receive the injury and sickness allowance

If the amount of the injury and sickness allowance is more than the amount of the childbirth allowance, you can receive the difference.

For an example of calculation, please refer to the amount of the injury and sickness allowance (p.56).



#### Can I receive the allowance even after I lose my eligibility due to retirement or resignation?

You can continue to receive payment of the childbirth allowance after retirement or resignation only if all of the following conditions of 1 to 3 are met.

- 1 You must have been an insured person continuously for at least one year (excluding the period of being an insured person with optional and continued coverage\*) by the day before the day you lost your eligibility (date of retirement or resignation, etc.). (Including the period of enrolment in the Kyoukai Kenpo or a health insurance society, but not including national health insurance, etc.)
- 2 You must not have gone to work on the day before the day you lost your eligibility (date of retirement or resignation, etc.)
- 3 The day before the day you lost your eligibility (date of retirement or resignation, etc.) must be during the period in which the childbirth allowance can be claimed.

\*The childbirth allowance will not be paid to those insured on a voluntary basis, except in cases where it is paid as an allowance after the loss of eligibility.



# Lump-sum allowance for childbirth and childcare

## If you give birth



### What is the Lump-Sum Allowance for Childbirth and Childcare?

The Lump-Sum Allowance for Childbirth and Childcare is paid when an insured person gives birth. The Lump-Sum Allowance for Dependent's Childbirth and Childcare is paid when a dependent gives birth.

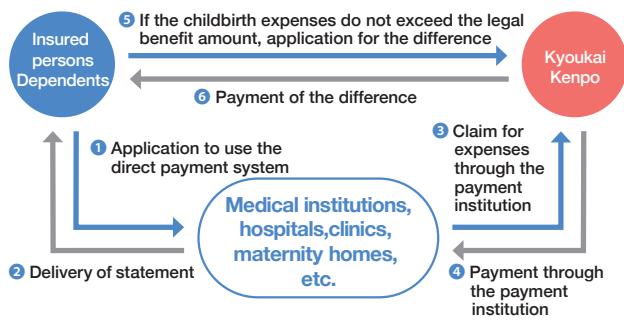


### What is the payment method?

In order to allocate the Lump-Sum Allowance for Childbirth and Childcare for expenses related to childbirth, there is a system (direct payment system) in which the Kyoukai Kenpo pays the Lump-Sum Allowance for Childbirth and Childcare directly to medical institutions, etc. For people who do not wish to have the Lump-Sum Allowance for Childbirth and Childcare directly paid to the medical institution, etc., it is possible to have the Lump-Sum Allowance paid after the insured person applies to the Kyoukai Kenpo following the birth.

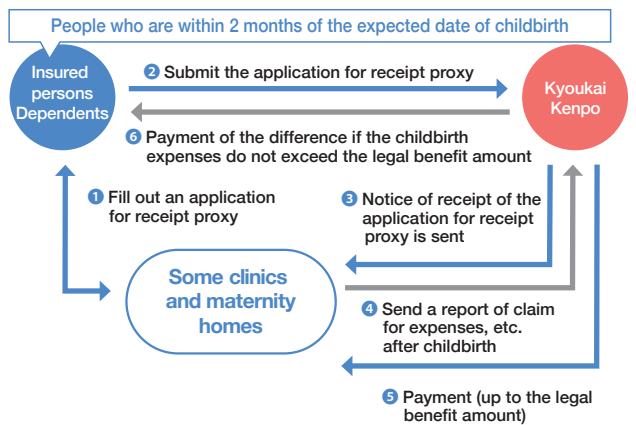
Furthermore, in regard to medical institutions, etc. for which notification has been provided to the Ministry of Health, Labour and Welfare (MHLW), the "receipt proxy" system can be used in which the medical institution, etc. receives the Lump-Sum Allowance for Childbirth and Childcare on behalf of the insured person.

#### Flow of the direct payment system

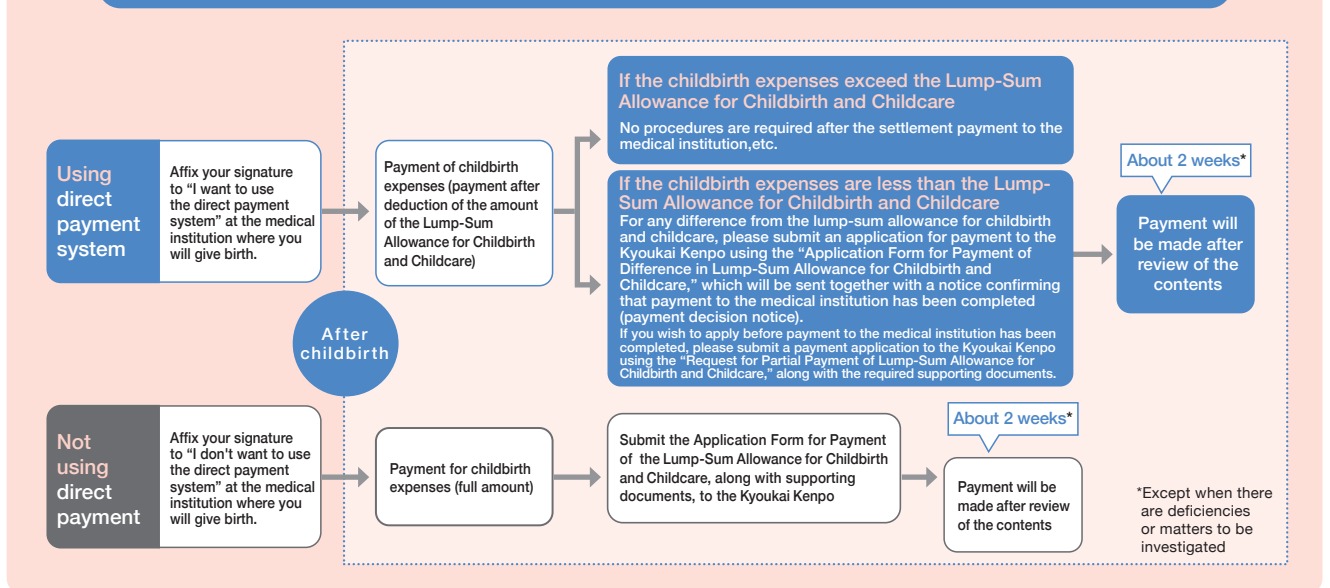


\*If the childbirth expenses exceed the legal benefit amount, the insured person, etc. will pay the difference to the medical institution, etc.  
 \*If the childbirth expenses are less than the legal benefit amount, the Kyoukai Kenpo will pay the difference to the insured person.

#### Flow of the receipt proxy system



### Procedures for the payment of the Lump-Sum Allowance for Childbirth and Childcare



Childbirth allowance



## What are the amounts of the Lump-Sum Allowance for Childbirth and Childcare and the Lump-Sum Allowance for Dependent's Childbirth and Childcare?

The amount of the Lump-Sum Allowance for Childbirth and Childcare and the Lump-Sum Allowance for Dependent's Childbirth and Childcare (the legal benefit amount) for childbirth is 500,000 yen per child (488,000 yen if the child is born at a medical institution, etc. that is not part of the Japan Obstetric Compensation System, or if the child is born in less than 22 weeks of pregnancy). In the case of the birth of multiple children, the amount will be paid for each fetus.

Amount of the Lump-Sum Allowance for Childbirth and Childcare and the Lump-Sum Allowance for Dependent's Childbirth and Childcare	Per child
Childbirth at an institution that is part of the Japan Obstetric Compensation System*1 at 22 weeks of pregnancy or later*2	500,000 yen
Childbirth at an institution that is part of the Japan Obstetric Compensation System at under 22 weeks of pregnancy	488,000 yen
Childbirth at an institution that is not part of the Japan Obstetric Compensation System	

*1 What is the Japan Obstetric Compensation System?	The Japan Obstetric Compensation System is a system that medical institutions, etc. are part of. It provides compensation for the financial burden of the baby and the family in the event that the baby is born at a participating institution and suffers from severe cerebral palsy for some reason during childbirth. If it is a covered childbirth, it will be clearly indicated on the receipt/statement.
*2 What is childbirth?	Live birth (premature birth) after 85 days (4 months) of conception, stillbirth (miscarriage), and induced abortion are applicable.

### Childbirth expenses when using the direct payment system

(If the baby is born after 22 weeks of pregnancy at an institution that is part of the Japan Obstetric Compensation System on April 1, 2023 or later)

#### ● If the childbirth expenses exceed the amount of the Lump-Sum Allowance for Childbirth and Childcare

(Example) If the childbirth expenses are 550,000 yen

Childbirth expenses 550,000 yen	—	Lump-Sum Allowance for Childbirth and Childcare 500,000 yen	=	Amount to be paid to the medical institution 50,000 yen
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Payment of the outstanding amount at the counter of the medical institution

#### ● If the childbirth expenses are less than the amount of the Lump-Sum Allowance for Childbirth and Childcare

(Example) If the childbirth expenses are 400,000 yen

Lump-Sum Allowance for Childbirth and Childcare 500,000 yen	—	Childbirth expenses 400,000 yen	=	Difference in payment 100,000 yen
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Please apply to the Kyoukai Kenpo for the difference in payment (see p.60)



## What about childbirth by cesarean section, etc. (covered by insurance)?

Childbirth by cesarean section, etc. is covered by health insurance, so if your medical expenses (health insurance portion) are high-cost, they will be covered as high-cost medical expenses. (See p.52)



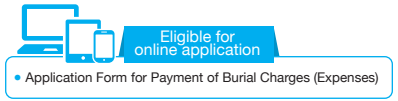
## Can I receive the Lump-Sum Allowance even after I lose my eligibility due to resignation/retirement, etc.?

Insured persons can receive the Lump-Sum Allowance for Childbirth and Childcare even if they give birth after losing eligibility (not applicable for birth by a dependent), only if they meet the requirements of ① and ② below.

\*This is limited to cases where you do not claim the Lump-Sum Allowance for Childbirth and Childcare with the health insurance you joined after you lost your eligibility.

- ① You must have been an insured person for at least one year (excluding the period of being an insured person with optional and continued coverage) by the day before you lost your eligibility (the day you resigned/retired, etc.). (This includes the period of subscription to the Kyoukai Kenpo and health insurance society, but does not include national health insurance, etc.)
- ② Birth takes place within 6 months of losing eligibility

# Burial charges (expenses) and dependent's burial charges

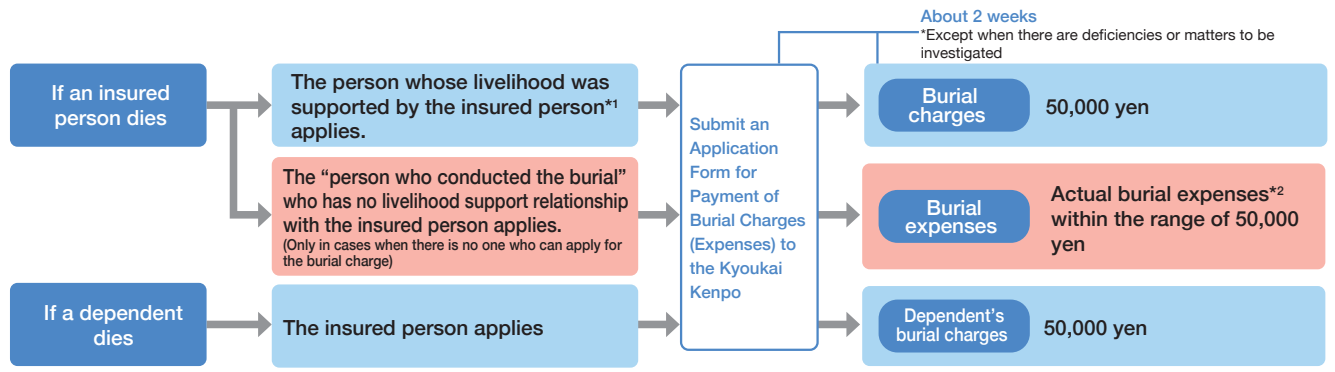


## If you or your family member passes away



### What are burial charges (expenses)?

When an insured person or dependent dies due to reasons other than work, burial charges (expenses) will be paid. Depending on the “deceased person” and the “person who makes the application,” payment is divided into “burial charges,” “burial expenses,” and “dependent’s burial charges.”



\*1 Person whose livelihood was supported

Individuals whose living expenses are wholly or partially supported by the insured person may qualify, regardless of whether they are relatives under the Civil Code, whether the insured person is the head of the household, or whether they live in the same household.

\*2 Expenses actually required for burial

The actual costs of the hearse, coffin transportation, memorial offerings, cremation fee, priest's remuneration, etc.



### What should I do with the health insurance eligibility certificate, etc.?

When an insured person or dependent dies, please return their health insurance eligibility certificate (only those people who possess them) to the employer. The employer should submit the following notification to the Processing Center of the Japan Pension Service with the returned health insurance eligibility certificate, etc.

#### Items to be submitted by employers to the Processing Center of the Japan Pension Service

If an insured person dies	① Notice of Loss of Eligibility as an Insured Person (the date of loss of eligibility is the day after the date of death) ② Insurance card and health insurance eligibility certificate (only those people who possess them; for the insured person and all dependents)
If a dependent dies	① Notice of Change of Dependent (the date of termination of support is the day after the date of death) ② Insurance card and health insurance eligibility certificate (only those people who possess them; for the deceased dependent)

\*The burial charges (expenses) will be paid after processing of the loss of eligibility and termination of dependency at the Japan Pension Service is completed.



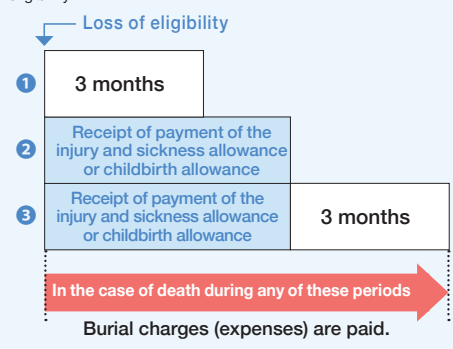
### Payment may be made even after loss of eligibility

If an insured person dies after losing his/her eligibility and any of the following apply, burial charges or burial expenses will be paid.

\*Only in cases in which the burial charges have not been claimed to the health insurance subscribed after loss of eligibility.

- ① When the insured person dies within 3 months of losing his/her eligibility
- ② When the insured person dies while receiving continued payment of the injury and sickness allowance or maternity allowance after losing eligibility
- ③ When the insured person dies within 3 months after ceasing to receive the continued payment of benefits described in 2

In the case of ①, the length of the insured period prior to the loss of qualification of the deceased is not relevant. If a family member, who was a dependent, dies after loss of the eligibility of the insured person, the dependent's burial charges will not be paid.



Burial charges (expenses) and dependent's burial charges



Eligible for online application

- Application Form for Optional and Continued Coverage
- Application Form for Loss of Optional and Continued Coverage
- Notification of Dependents (Change) for Optional and Continued Coverage

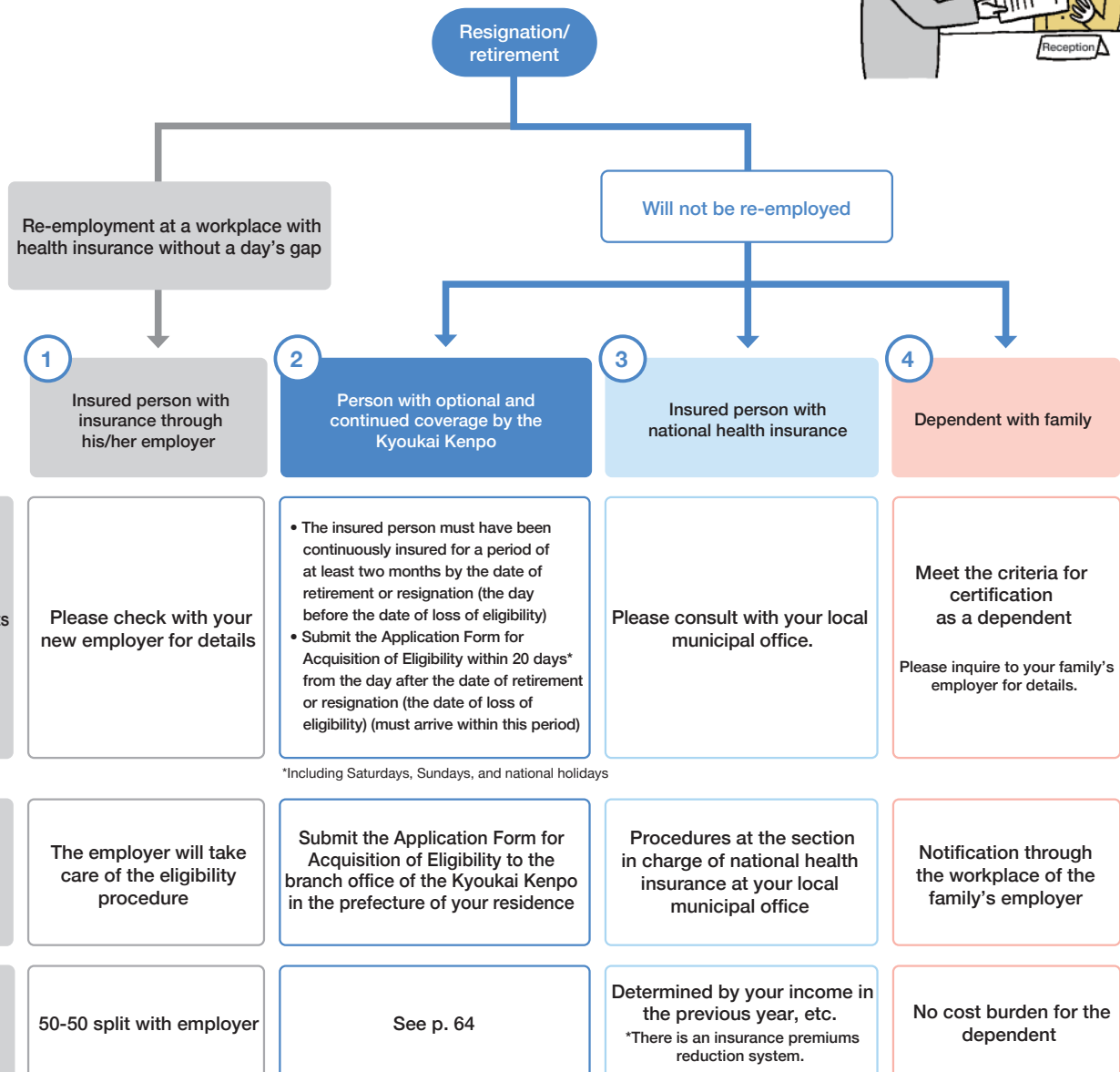


## Insured persons with optional and continued coverage

# If you want to continue enrollment in health insurance after resignation/retirement

### What about health insurance after resignation/retirement?

If an insured person who is insured up to the age of 74 loses that eligibility due to resignation/retirement or other reasons, the person is required to continue to be enrolled in some type of health insurance system. After resignation/retirement, the person will need to undergo the procedure to subscribe to health insurance under one of the following options, depending on the person's situation.



There is a system to reduce the national health insurance premiums for "insured persons subject to special exceptions"

There is a system to reduce national health insurance premiums for people who are unemployed due to bankruptcy, dismissal, etc. (people eligible for specified benefits and people who have left their jobs for specified reasons). Please confirm the details with your local municipal office.

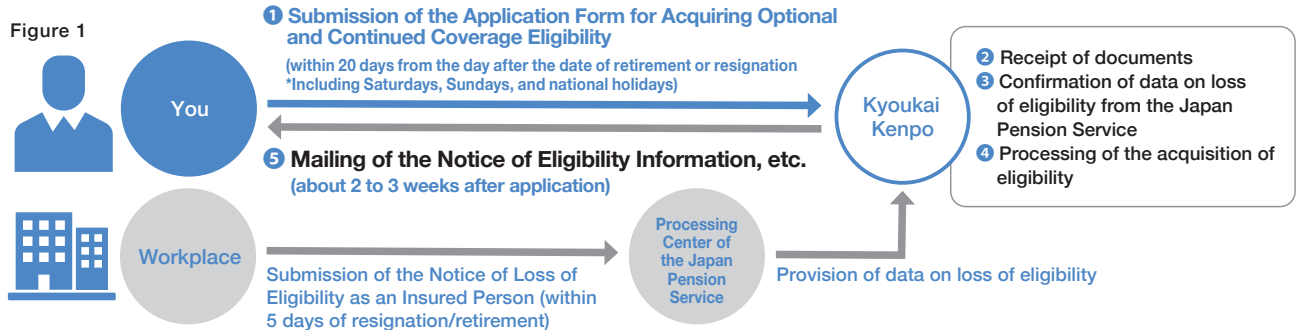


## What is the process from application for optional and continued coverage to acquisition of health insurance eligibility?

Process until acquisition of health insurance eligibility

After confirming the data on loss of eligibility provided by the Japan Pension Service, acquire eligibility for optional and continued health insurance.

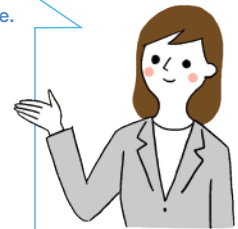
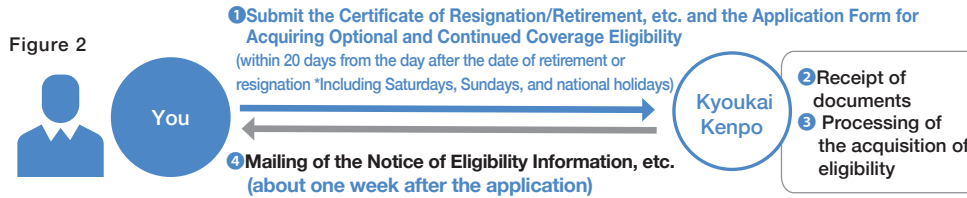
Figure 1



### If you are in a hurry to acquire eligibility

You can apply to the Kyoukai Kenpo by attaching your Certificate of Resignation/Retirement, etc. for processing of the acquisition of eligibility without waiting for provision of data on loss of eligibility from the Japan Pension Service.

Figure 2



\*If there is a discrepancy between the Certificate of Resignation/Retirement, etc. prepared by the employer and the data on loss of eligibility provided by the Japan Pension Service, the eligibility record for optional and continued coverage will be corrected at a later date. The Notice of Eligibility Information after the correction will not be sent to you. If you want the changed Notice of Eligibility Information to be issued to you, please submit the "Application Form for Issuance of Notice of Eligibility Information."  
 \*If you do not submit a Certificate of Resignation/Retirement, the processing of your acquisition of eligibility will be carried out after the Japan Pension Service confirms your data on loss of eligibility (the process is the same as in Figure 1).

Check

## About joining and losing eligibility

Joining

You can join for a maximum of two years. (You can join from the day after your resignation/retirement.)

Losing eligibility

If you are an insured person with optional and continued coverage, you will lose your eligibility only if you fall under one of the following conditions.

### Loss of eligibility as an insured person with optional and continued coverage

- 1 If you fail to pay the insurance premiums by the due date
- 2 When two years have elapsed from the date of becoming an insured person with optional and continued coverage
- 3 When the insured person with optional and continued coverage dies
- 4 When the insured person becomes insured by a health insurance or mutual aid association due to employment, etc.
- 5 When the insured person becomes insured under the late-stage elderly medical care system
- 6 If you wish to lose your eligibility

\*In the cases of 3, 4, 5, and 6, submission of a written request for loss of eligibility is required.

### ● Premiums per month

Standard monthly remuneration at the time of resignation/retirement

The maximum amount is 320,000yen (subject to revision)

Insurance premium rates by the Kyoukai Kenpo prefectural branches (address) and child and child-rearing support contribution rates

Long-term care insurance premiums are added for those aged 40 to 64

Premiums for optional and continued coverage

All expenses paid by the person

\*The insurance premiums will be charged from the month in which the eligibility is acquired (for one month).

The deadline for payment of the insurance premiums is the 10th of every month (or the next business day if the 10th falls on a Saturday, Sunday, or national holiday), and failure to pay by the deadline will result in loss of eligibility for optional and continued coverage. Note that for the first payment of insurance premiums, a payment form is enclosed in the envelope sent with your Notice of Eligibility Information, and you are required to pay by the deadline indicated on the form.

### Convenient account transfer and prepayment system (payment in advance)

In order to avoid forgetting to pay insurance premiums, it is convenient to use account transfer. In addition, there is a prepayment system (6 months or 12 months) that offers discounts on premiums.

### ● Health insurance benefits during optional and continued coverage

If you become a person with optional and continued coverage, in principle, you are entitled to the same insurance



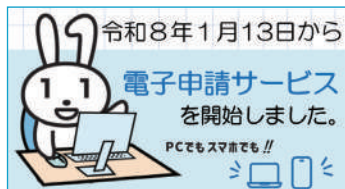


# You can also apply online!

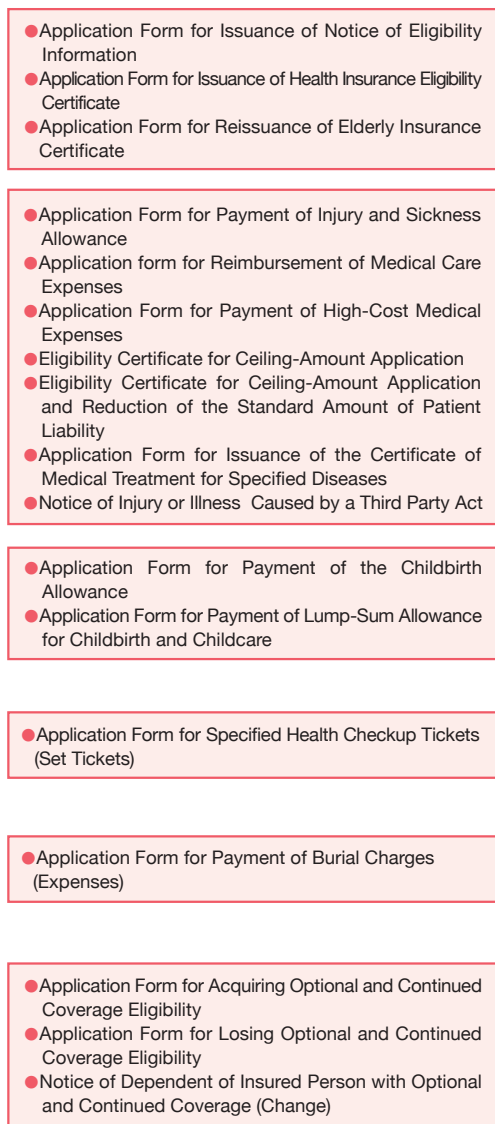


## Depending on the documents, there are two places to submit them.

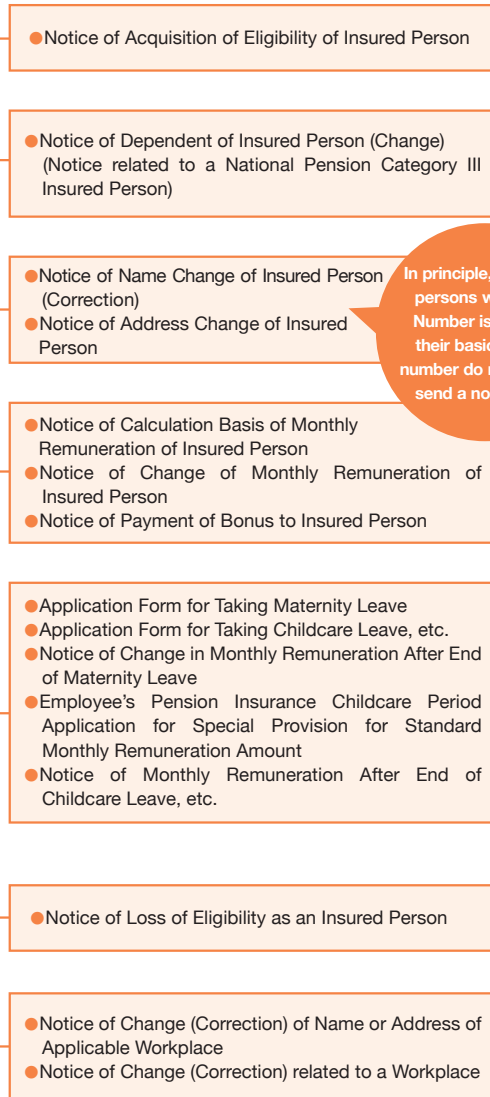
Where to submit your health insurance application depends on the type of application. Applications can be sent online or by mail. If you choose to mail your application, you can download and print the necessary forms from the website. For a faster and more convenient process, we recommend applying online. For more information about electronic applications, please visit the websites of the Kyoukai Kenpo and the Japan Pension Service.



### Application forms to be submitted to the **Kyoukai Kenpo**



### Application forms to be submitted to the Processing Center of the **Japan Pension Service**



In principle, insured persons whose My Number is linked to their basic pension number do not need to send a notification.