

NATIONAL HEALTH INSURANCE GUIDEBOOK

—2024—

English version

NERIMA CITY

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1. What is the National Health Insurance System?

Even if you are generally in good health, you never know when or how you may become ill or injured. It costs money to receive treatment for an illness or injury at a medical facility. You would be in trouble if high medical bills prevented you from receiving treatment.

Thus, in order to maximize a reduction of the medical bill burden, Japan developed a system of mutual aid that enables people to prepare for an illness or injury by making regular contributions based on their level of income. This is the system of health insurance. Members (the insured) are obliged to pay premiums for the right to receive treatment for an illness or injury under the health insurance system.

The National Health Insurance (NHI) is one of these health insurance systems.

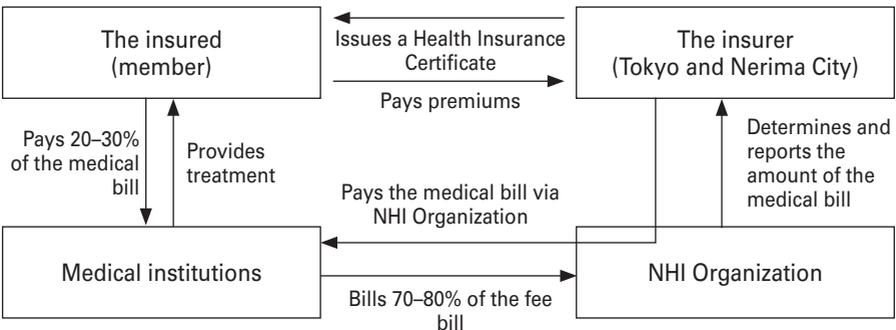
Please ensure that you follow the correct procedures for enrolling in and withdrawing from the NHI. If you wait too long to enroll or withdraw, you may not be eligible to receive treatment at medical facilities under the insurance system, or your insurance premiums may not be calculated correctly.

2. How National Health Insurance works

The NHI is run by each city, town, or village (Nerima City in this case) in cooperation with the prefecture in which the municipal government is located (Tokyo in this case).

Tokyo is primarily responsible for the fiscal management of the system. Nerima City provides services related to qualifying or disqualifying insured persons and issuing health insurance certificates, as well as assessing and collecting premiums. It also pays medical bills using the premiums collected from all NHI members and subsidies received from Tokyo.

When members show their health insurance certificate to receive treatment at a medical facility, they need to pay only a portion of the medical bills. The NHI pays the medical facilities for the remainder of the billed expenses.



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

The NHI system considers a household as a unit in accordance with the National Health Insurance Act.

The Act stipulates that the head of household is responsible for completing enrollments, submitting any notifications, making insurance premium payments, and completing other procedures.

This means that even if the head of household is not an NHI member, insurance premium notifications and payment slips are mailed to the head of household in accordance with Articles 9 and 76 of the NHI Act. However, premiums will be calculated and invoiced only for the NHI members in the household.

3. National Health Insurance notifications

When submitting any notifications related to the NHI, please bring documents that show the My Number (the number for individuals) as indicated below in 1, and a form of official ID for the person submitting the notification as indicated below in 2.

If a proxy (someone from another household) is to submit the notification, a proxy letter is required. Please inquire in advance.

1. Documents that show the My Number of the head of household and of each household member who needs to give notification (unless applying for a reissuance of health insurance certificates)
E.g., the My Number card or My Number notification card
2. The person submitting the notification must also present an official personal ID E.g., the My Number card, residence card, special permanent resident certificate, or passport

Inquiries: KOKUHO SHIKAKU KAKARI

4. Enrollment

Those individuals to whom (1) below applies must bring, within 14 days, the required documents for the procedures (refer to (4) of page 4). They must also bring (1) documents showing the My Number of the head of household and of each household member who needs to give notification, and (2) a form of official ID for the person submitting the notification, as listed on page 3.

*Even if your enrollment is delayed, insurance premiums must be paid retrospectively from the date you should have enrolled in the system. The insured must bear the entire amount of medical bills incurred before enrollment, unless the delay in enrollment was unavoidable.

(1) Those required to join the National Health Insurance

Each and every registered resident of Nerima City (except those listed below in (2)) must join the NHI. It is not possible for an individual to decide, of their own free will, to join or leave the program.

(2) Those who cannot join the National Health Insurance

The individuals listed below are not eligible to enroll in the NHI, even if they are registered residents of Nerima City. Those who have a Certificate of Coverage issued by a country that has concluded a social security agreement with Japan do not need to enroll.

1. Anyone who has joined, or who is eligible to join, an employees' or other public health insurance program.
2. Anyone who has been issued a "designated activities" visa and is in Japan for a medical stay, or to assist these individuals traveling for a medical stay, or for sightseeing/recreation, or as a traveling companion.
3. Anyone whose period of stay in Japan is for three months or less. (except for anyone whose status of residence is "entertainer," "technical intern," "dependent," "official," or "designated activities" (except for medical stays, assisting these individuals traveling for a medical stay, or for sightseeing/recreation, or as a traveling companion) and who has documents that differ in accordance with their status of residence and indicate that they will remain in Japan for more than three months.)
4. Anyone whose status of residence is "temporary visitor" or "diplomat."
5. Anyone receiving public assistance.
6. Any member of the Medical Care System for Older Senior Citizens (anyone who is 75 years old or older or who is 65 years old or older and has been assessed as having a certain level of disability).

* **Voluntary continuation health insurance system**

When a member of an employees' health insurance program retires, that person can voluntarily remain in the program for up to two years.

The premiums are different from those for the NHI. To make inquiries or apply for the voluntary continuation health insurance system, please contact your health insurance society, mutual aid association, or the Japan Health Insurance Association, etc.

Please note that you must apply for voluntary continuation within 20 days of the day following your retirement. If you are eligible, please consider this plan in advance and complete the procedure.

* **To those moving out of Nerima City for admission to a school or institution**

When a Nerima City NHI member moves out of Nerima City to enter a college or high school or to stay in child welfare or another institution, that person will remain a Nerima City NHI member. Bring your NHI certificate and the required documents, such as school (or institution) enrollment or admission certificate, and complete the procedure at the Kokuho Shikaku Kakari service counter.

(3) Date of required enrollment in the National Health Insurance

1. The date when you move into Nerima City (enter Japan).
2. The date when you become disqualified from an employees' or other public health insurance program.
3. The date when a baby is born.
4. The date when you cease to receive public assistance.
5. The date when you acquire residence status for a mid- to long-term stay.

(4) Enrollment procedure

1. When you move into Nerima City (enter Japan):
Visit a local residents' office and complete the procedure for transferring your residence records to Nerima City. If you have a "designated activities" visa, bring the certificate of designation attached to your passport to confirm that you are not in Japan for a medical stay, to assist these individuals traveling for a medical stay, or for sightseeing/recreation, or as a traveling companion.
2. When you withdraw from an employees' or other public health insurance program:
Bring a certificate showing you are no longer a member of the health insurance program.
3. When a baby is born: (Refer to the childbirth lump-sum allowance as listed in 14 of page 14.)
Bring the *Maternal and Child Health Handbook*.
* It is possible to enroll a child in the NHI within 60 days of birth, during which time residence records may be created without a status of residence. However, a child's residence records will be deleted, and the child will lose NHI eligibility if 60 days have passed without obtaining a status of residence for a mid- to long-term stay. Please complete the procedure for acquiring a child's status of residence within 30 days of birth.
4. When you cease to receive public assistance:
Bring your decision notice of public assistance or public assistance recipient certificate (confirming the date of termination).
5. When you acquire residence status for a mid- to long-term stay:
Register your address at a local residents' office. If you have a "designated activities" visa, bring the certificate of designation attached to your passport to confirm that you are not in Japan for a medical stay, to assist these individuals traveling for a medical stay, or for sightseeing/recreation, or as a traveling companion.

(5) Service counter

Complete the required procedures at Kokuho Shikaku Kakari, Kokuho Shakujii Kakari, or a local residents' office (excluding Nerima and Shakujii).

- * NHI certificates will be mailed to the head of household by simple registered mail approximately one week after the NHI enrollment application is submitted. Ensure that you have a nameplate at the entrance of your house or on the mailbox.
- * To have your NHI certificate issued immediately, bring your residence card, special permanent resident certificate, or passport and complete the required procedures at Kokuho Shikaku Kakari or Kokuho Shakujii Kakari.

(6) If your period of stay is extended or your status of residence changes

If you do not extend the period of stay that you reported at the time of enrollment, you will be disqualified from the NHI the day after your period of stay expires. Once you have been granted an extension for your period of stay, your new NHI certificate will be mailed to you by simple registered mail. Please consult Kokuho Shikaku Kakari in the following cases:

1. If your health insurance certificate expires before you are granted an extension of your period of stay:
By bringing your passport, your residence card showing you have applied for an extension of your period of stay, and your health insurance certificate, seek advice on extending the valid period of your health insurance certificate (maximum of two months).
2. If your status of residence will be of a temporary visitor or your period of stay will be three months or less:
Seek advice by bringing your passport and health insurance certificate.
3. If you have remained in Japan as a temporary visitor during the time between your previous and new status of residence:
By bringing your residence card, passport, and health insurance certificate, complete the procedure for renewing your NHI membership for your period of stay as a temporary visitor.

Inquiries: KOKUHO SHIKAKU KAKARI

5. Withdrawal

When moving out of Nerima City or joining an employees' or other public health insurance program, you must complete the procedure for withdrawing from the NHI within 14 days and return your Nerima City NHI certificate. Bring the required documents (refer to (2) of page 6), along with 1. documents that show the My Number of the head of household and of each household member who needs to give notification and 2. a form of official ID for the person submitting the documents, as listed on page 3.

- * You will continue to be billed for insurance premiums until you complete the withdrawal procedure. If you delay this for one year or longer, you may not receive a reduction of insurance premiums and may not get a refund for the overpaid premiums. In addition, if you continue to use your NHI certificate when receiving medical treatment, you must repay Nerima City for the medical bills paid by the NHI at a later date.
- * It is not possible to withdraw from the NHI even if you are a member of a health insurance program for international students, have a life insurance plan that provides medical benefits, or have traveler's accident insurance. These types of insurance are not considered as forms of public health insurance in Japan.

(1) Dates on which you withdraw from the National Health Insurance:

1. The day after you leave Japan.
2. The date you move out of Nerima City to another municipality in Japan.

3. The date after you join an employees' or other public health insurance program (or the date of enrollment, in the case of an NHI society).
4. The following day after the date of death.
5. The date you start receiving public assistance.
6. The day after your 75th birthday. (You will automatically switch to the Medical Care System for Older Senior Citizens [refer to page 25].)
7. If you are under age 75, the day after you are assessed as having a certain level of disability and are enrolled in the Medical Care System for Older Senior Citizens.
8. The day after your period of stay expires or the day after your residence records have been deleted following notification from the Immigration Services Agency of Japan.

(2) Procedure for withdrawing from the NHI

1. When leaving Japan:
Visit a local residents' office before your departure and complete the procedure for deleting your residence records.

If you fail to complete this procedure at a local residents' office, you will continue to be an NHI member and will be required to pay insurance premiums while you are overseas. It is not possible to retrospectively disqualify you from the NHI when re-entering Japan. If you receive medical treatment overseas while being an NHI member, refer to the information on overseas medical expenses as listed in 13 of page 13.

2. When you move out of Nerima City and to another municipality in Japan:
Complete the procedures for deleting your residence records at a local residents' office in Nerima City and, for moving in, at the residence records desk of the municipal office administering your new address. You will be withdrawn from Nerima City NHI on the date you move to your new address.

A notification on the settlement of your insurance premiums will be mailed to your new address.

3. When you join an employees' or other public health insurance program:
If you do not complete the procedure for withdrawing from the NHI, you will become a member of two health insurance programs and will be charged both premiums. Bring your health insurance certificate for the newly enrolled program at your place of employment (and the certificates of all household members who are also enrolled), as well as your Nerima City NHI certificate(s), and complete the required procedure.

You can also complete procedures electronically using the two-dimensional code above.

Please be sure to attach a copy of your new health insurance certificate when completing procedures.



4. In the event of a death:
You do not need to complete any procedure for withdrawing from the NHI. Refer to the information on the procedure for receiving reimbursement of funeral expenses as listed in 3 of page 15.
5. When you begin receiving public assistance:
Bring your decision notice of public assistance or public assistance recipient certificate (confirming the starting date) and complete the required procedure.
6. When you enroll in the Medical Care System for Older Senior Citizens:

(1) When you turn 75:

You do not need to complete any procedure for withdrawing from the NHI. You are automatically switched to the Medical Care System for Older Senior Citizens (page 25).

(2) When those under age 75 have been assessed as having a certain level of disability: Bring the documents that were issued to you when you completed the procedure for joining the Medical Care System for Older Senior Citizens or your insurance certificate for this system and complete the required procedure.

7. When your residence records have been deleted because, e.g., your period of stay has expired or your status of residence has changed to a temporary visitor: Refer to (6) on page 5.

* You cannot withdraw from the NHI for reasons such as high insurance premiums or not using your health insurance certificate.

Inquiries: KOKUHO SHIKAKU KAKARI

6. Other procedures

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

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

Inquiries: KOKUHO SHIKAKU KAKARI

7. National Health Insurance certificate

There are plans to stop issuing new health insurance certificates and integrate their functions into the My Number card from fall 2024. When this occurs, a certificate of eligibility will be sent to applicants who cannot certify their eligibility online, and their health insurance status will be checked through this certificate.

(1) Keep your National Health Insurance certificate safe.

Your NHI certificate proves you are a member of the NHI. You must show it at a medical facility when receiving treatment covered by the insurance. Please keep it somewhere safe.

(2) NHI certificate comes in the form of a card that is issued to each member.

(3) Do not lend or borrow NHI certificates.

Never lend or borrow an NHI certificate to/from another person. Such action is a punishable offence.

(4) Show your NHI certificate when receiving treatment at a partnered medical facility.

When receiving treatment at a medical facility, show your NHI certificate at the reception desk so the medical facility can confirm your NHI membership and provide treatment under the program.

*To receive treatment covered by the NHI, you must go to a medical facility that is partnered with the NHI. If you receive treatment at a medical facility that is not partnered with the NHI, you will be unable to use your NHI certificate and will be required to pay all bills for the services. (The majority of medical facilities are partnered with the NHI.)

*As of October 2021, with the official introduction of online eligibility confirmation at medical institutions that have implemented the necessary equipment, your My Number card can be used as a health insurance certificate. To use your card in this way, you must apply in advance (initial registration) via the Mynportal (online service operated by the Japanese government). Please note that you can continue to use your health insurance certificate.

*“Online eligibility confirmation” means that information on your eligibility can be confirmed online with the electronic certificates stored in the IC chip of your My Number card or health insurance certificate number.

(5) Expiration

Your NHI certificate is renewed every two years. The current certificate expires no later than September 30, 2025, except in the following cases:

1. When you enrolled alone:

Your NHI certificate expires on September 30, 2025 or the last date of your period of stay, whichever is earlier.

2. When a family (two or more people) enrolled:

Your NHI certificates expire on September 30, 2025 or the last date of stay for any of your family members, whichever is earlier. Note that even when your certificate has not expired, you will no longer be eligible for the NHI after the expiration of your period of stay.

3. For newborn babies who have not acquired a status of residence:

Your baby's NHI certificate is valid until the 61st day after birth. Please complete the procedure for acquiring the baby's status of residence within 30 days. Once Kokuho Shikaku Kakari confirms that your baby has acquired a status of residence and meets the requirements to be a member of the NHI, a new NHI certificate will be mailed to you. New NHI certificates expire on September 30, 2025 or the last date of stay for any of the NHI members in the household, whichever is earlier.

*If you have extended your period of stay, please refer to (6) on page 5.

4. If you have fallen behind on your insurance premium payments:

If you have fallen behind on your insurance premium payments, the expiration of your NHI certificate may be shortened. (Refer to "(4) For individuals who cannot pay their insurance premiums on page 24.)

(6) Reissuance or return of your NHI certificate

If your certificate is damaged or lost, apply for a new one to be issued by bringing (2) an official ID of the person submitting the documents as listed in 3 of page 3.

Return your NHI certificate when you move out of Nerima City, or you have enrolled in an employees' or other public health insurance program and completed the procedure for withdrawing from the NHI, or when your period of stay has expired. It is your own responsibility to discard or destroy your expired NHI certificate by, for example, cutting it up with scissors, or you can return it to Kokuho Shikaku Kakari, Kokuho Shakujii Kakari, or a local residents' office (excluding Nerima and Shakujii).

(7) Elderly Recipient Certificate

People between 70 and 74 years old are issued an Elderly Recipient Certificate.

Elderly Recipient Certificates can be used from the month following the month in which your 70th birthday falls (or your birthday month if your birthday falls on the first day of the month) to the day before your 75th birthday. Please show this certificate along with your health insurance certificate when receiving treatment at a medical facility. Please note that online eligibility confirmation also applies to elderly recipient certificates. Please read page 7 concerning online eligibility confirmation.

For people who will become eligible, this certificate will be mailed to the head of household at the end of the month in which their 70th birthday falls (or in the previous month if their birthday falls on the first day of the month). You do not need to give any notification.

1. Coinsurance

Elderly Recipient Certificates indicate a coinsurance of either 20 or 30 percent.

Your coinsurance is determined each year according to your resident tax (ward and municipal inhabitant tax and metropolitan inhabitant tax) and is renewed on August 1.

For more information on coinsurance, refer to "8. Insurance benefits" on page 9.

2. Criterion for determining coinsurance

Coinsurance is determined for NHI members who are 70 years of age or older and live in the same household.

Coinsurance	Criterion
20%	(1) Taxable income for resident tax (*1) is less than ¥1,450,000 for all NHI members who are 70 years of age or older in the household
	(2) The total calculated income, based on the former Local Tax Act (*2), is ¥2,100,000 or less for all NHI members who are 70 years of age or older in the household
30%	Other than (1) and (2)

If we determine that your coinsurance is 30 percent according to the criterion above, it may be 20 percent if you meet the following criterion. (You may be required to file an application in some cases.)

No. of NHI members who are 70 years of age or older in the household	Annual income (*3)
One	(1) The NHI member's annual income is under ¥3,830,000
	(2) The total annual income of the NHI member and former NHI members (*4) is under ¥5,200,000
Two or more	Total annual income is under ¥5,200,000

- *1 “Taxable income for resident tax” refers to the amount after necessary expenses and income deductions are subtracted from total income. The calculation for resident tax is based on this amount.
- *2 “Calculated income, based on the former Local Tax Act” refers to the amount after deducting the basic exemption of ¥430,000 for resident tax ★ from your total net income for the previous year (January–December) plus any forestry income, income from the transfer of stocks, and long-term (or short-term) capital gains. However, a deduction carried forward for miscellaneous losses does not apply.
★ If the total income exceeds ¥24,000,000, a deduction will be reduced in stages.
- *3 “Annual income” refers to the amount of total income before deducting necessary expenses and various income deductions.
- *4 “Former NHI members” refers to those who continue to be in the same household as NHI members after withdrawing from the NHI and being switched to (joining) the Medical Care System for Older Senior Citizens.

Inquiries: KOKUHO SHIKAKU KAKARI

* Declaring your intention to be an organ donor

The back of your health insurance certificate contains a field to declare your intention to be an organ donor. Filling in this field is voluntary. A sticker to hide what you have written in the field is available at Kokuho Shikaku Kakari, Kokuho Shakujii Kakari, and at local residents’ offices (excluding Nerima and Shakujii).

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

* For Victims of Domestic Violence, Abuse, etc.

Nerima City restricts functions such as the use of My Number cards as health insurance certificates for Nerima City NHI members who have applied for support measures during basic resident register procedures due to domestic violence, child abuse, etc.

If you want to use your My Number card as a health insurance card while using these support measures, please consult with the Kokuho Shikaku Kakari.

In addition, if you are no longer a victim of domestic violence, abuse or the like and no longer require restrictions, you must notify the Kokuho Shikaku Kakari.

8. Insurance benefits

When you are ill or injured, you can receive the treatment you need at a medical facility that is partnered with the NHI (the vast majority of medical facilities are designated as such). When you receive treatment, you pay 20 to 30 percent of your medical bill at the reception desk. Nerima City will pay the remainder.

If you receive treatment without showing your NHI certificate, you will be required to pay the full medical bill.

If you use your NHI certificate after being disqualified from Nerima City NHI because, for example, you have moved out of the city or your period of stay has expired, you must reimburse the amount paid by Nerima City.

If you use someone else's NHI certificate, you will be reported to the police.

Coinsurance for medical bills

Preschoolers (0 to 6 years of age)	20% (*1)
Children of compulsory education age to persons at the age of 69	30% (*1)
Persons between 70 and 74 years of age	20% (or 30% for those whose income is on a similar level to people who are employed and members of the same household)

(*1) For children up to the third year of high school, there is no coinsurance if you show their Infant/Toddler Medical Care Certificate or Children's Medical Care Certificate along with their NHI certificate.

Inquiries: KOKUHO KYUFU KAKARI

9. Treatment not covered by the insurance

The following treatments are not covered by the NHI, and you must pay the full amount:

1. Injuries caused by traffic accidents (You must contact us in advance to receive treatment covered by the NHI.)
2. General medical checkups and complete medical examinations (known as "Ningen Dock")
3. Inoculations/vaccinations
4. Normal pregnancy and delivery
5. Cosmetic purposes
6. Work-related injuries or diseases (These are covered by workers' accident compensation insurance plans.)
7. Injuries or illnesses resulting from criminal or intentional acts of the insured

* Insurance benefits will be limited if the insured becomes injured or ill because of a fight or being drunk.

Inquiries: KOKUHO KYUFU KAKARI

10. High-cost Medical Expense Benefit

If you incur high medical bills due to hospitalization or for other reasons, you can receive a partial refund under the High-cost Medical Expense Benefit.

Medical bills are calculated for the month of treatment (from the first day to the last day of the month). Bills you incur in other months are not added.

Treatments not covered by the NHI, extra charges for a private room, and hospital meal bills are not eligible for this benefit.

For those under the age of 70, any copayment under ¥21,000 for one month and one medical facility cannot be added. In this case, inpatient and outpatient bills are calculated separately, even for the same medical facility.

As a rule, a claim should be made by the head of your household within two years from the first day of the month following the month in which you received medical treatment.

[How to file a claim]

If you are eligible to receive a High-cost Medical Expense Benefit, you will be notified within three to four months after you receive treatment. Please follow the instructions provided to apply for the benefit. Once you submit your application, you do not need to apply for the benefit thereafter if you have high medical expenses again (applicable to medical treatment received in October 2022 and thereafter).

*Always keep your receipts safe.

Your maximum copayment for one month varies according to the income of your household and other factors as described in the table below.

For households whose NHI members are under 70 years old

Income Category	Ceiling for the entire household of NHI members	
	Up to 3 times	4 times or more
A	$¥252,600 + (100\% \text{ of the total medical bill} - ¥842,000) \times 1\%$	¥140,100
B	$¥167,400 + (100\% \text{ of the total medical bill} - ¥558,000) \times 1\%$	¥93,000
C	$¥80,100 + (100\% \text{ of the total medical bill} - ¥267,000) \times 1\%$	¥44,400
D	¥57,600	¥44,400
E	¥35,400	¥24,600

Income categories

• A*¹

Households of NHI members whose total calculated income, based on the former Local Tax Act*² is over ¥9,010,000.

• B

Households of NHI members whose total calculated income, based on the former Local Tax Act*², is over ¥6,000,000 but ¥9,010,000 or less.

• C

Households of NHI members whose total calculated income, based on the former Local Tax Act*², is over ¥2,100,000 but ¥6,000,000 or less.

• D

Households of NHI members whose total calculated income, based on the former Local Tax Act*², is ¥2,100,000 or less.

• E

Households in which all NHI members are exempt from resident tax.

*1. Households that have one member who has not filed a resident tax report fall under category A.

You must file a resident tax report regardless of whether you have an income or not.

*2. Calculated income, based on the former Local Tax Act: the total net income of NHI members, including wages and miscellaneous income, minus the basic exemption for resident tax.

The maximum copayment is calculated differently for households whose NHI members are age 70 or older, and for households that contain both members under the age of 70 and members who are age 70 or older. Please contact us for more information.

For those who will incur high medical bills (issuance of an Eligibility Certificate for Ceiling-Amount Application)

Receipt of a High-cost Medical Expense Benefit usually takes five to six months from the time you received medical treatment.

If you show your Eligibility Certificate for Ceiling-Amount Application, you will only be charged a ceiling on copayments, plus the cost of food, etc., which is at your own expense, instead of the full copayments (20–30%). (You must pay separately for any treatments not covered by the NHI.)

You must apply to receive an Eligibility Certificate for Ceiling-Amount Application. Please contact us for more information. As a rule, an Eligibility Certificate for Ceiling-Amount Application cannot be issued if you fall behind on the payment of NHI premiums.

Inquiries: KOKUHO KYUFU KAKARI

11. Hospital Dietary Therapy Expense Benefit

You will be charged a portion of the cost of each hospital meal (standard amount of patient liability: ¥460). The NHI will pay the remainder of the cost.

If all members of household are exempt from paying resident tax, they are eligible for a reduction of hospital meal bills for up to 90 days of hospitalization as indicated in tables (1) and (2) below, by applying for and receiving an Eligibility Certificate for Ceiling-Amount Application and Reduction of the Standard Amount of Patient Liability.

Note: Apply for a certificate upon admission to the hospital because hospital meal bills cannot be reduced without prior certification.

In the cases of (1) and (2), you must reapply for a reduction if you are in a household exempt from resident tax and the length of your hospital stay has exceeded 90 days in the past 12 months including the month in which you are making an application. Please contact us in advance.

(1) Meal bills for those 70 to 74 years old

Income category		Length of hospital stay (in the past 12 months)	Meal bill (per meal)
Taxable households		Any length	¥460
Households exempt from resident tax	II	Up to 90 days	¥210
		From 91 days	¥160
	I	Any length	¥100

(2) Meal bills for those under 70 years old

Income category		Length of hospital stay (in the past 12 months)	Meal bill (per meal)
Households A to D		Any length	¥460
Household E (Households exempt from resident tax)		Up to 90 days	¥210
		From 91 days	¥160

Inquiries: KOKUHO KYUFU KAKARI

12. Combined High-cost Medical and Long-term Care System

If you have made copayments for medical bills and Long-term Care Insurance during the year, and they exceed the ceiling for household, you will be reimbursed a portion of the excess amount. Of the total reimbursement amount, we will pay you the amount based on the percentage of your copayments to the NHI. Please contact us for more information.

Inquiries: KOKUHO KYUFU KAKARI

13. Medical expenses

In the following cases, you must initially pay the full amount. However, by filing a claim, you can be refunded the amount in excess of your copayment. This is limited to expenses approved as relevant by an inspection agency.

A claim should be made by the head of your household within two years from the date following your payment of medical expenses.

After filing a claim, it will take around three months to receive a refund.

- (1) If you receive medical treatment without showing your NHI certificate for unavoidable reasons such as an emergency.

- (2) If you had medical equipment created, such as a brace or corset, on the recommendation of a physician.
- (3) If a physician permits you to receive treatments such as acupuncture, moxibustion, or massage and gives their consent, based on the progress of your medical treatment. (Please contact us before receiving these treatments.)

[How to file a claim]

You must submit a claim form (available at Kokuho Kyufu Kakari and Kokuho Shakujii Kakari), the patient's NHI certificate, the bank account details of the head of household as well as the following documents.

For (1) above: (a) a detailed statement of medical/dental/dispensing fees (medical statements provided with the receipt are not accepted); (b) receipts.

Note: Please ask the medical facility where you received treatment for the statement as indicated in (a).

For (2) above: (a) a physician's letter stating that you need the medical equipment (a medical certificate is also accepted); (b) receipts issued by the manufacturer (with a full breakdown of the payment); (c) a photograph of orthopedic shoes (a photo is required for orthopedic shoes only).

For (3) above: (a) a physician's letter of consent; (b) receipts; (c) a treatment fee statement; (d) a statement indicating the reason for receiving treatment 16 times or more per month for a period of one year or longer and the patient's current condition (required only if a year or more has passed since your first treatment and you have received treatment 16 times or more per month); (e) a copy of your treatment report (required if you are filing a claim for a treatment report issuance fee).

Overseas medical expenses

In some cases, you may receive insurance benefits for medical treatment received overseas for injuries or sudden illness if you are an active member of Nerima City NHI. You temporarily pay the full medical bills in that country and, after returning to (re-entering) Japan, you can file a claim for the portion covered by the insurance program.

We calculate the probable cost if the treatment offered by the overseas medical facility were to be received at a partnered medical facility in Japan (based on a list of medical fee points). You will be reimbursed for the amount after deducting your copayments from either the amount calculated using the method above, or the actual amount you paid, whichever is lower.

However, reimbursement for overseas medical expenses is only applicable to medical practices that are approved as medical treatment covered by health insurance in Japan.

In addition, you cannot file a claim if you traveled overseas to receive medical treatment (apart from some cases of organ transplant).

[How to file a claim]

To file a claim, you must submit a claim form (available at Kokuho Kyufu Kakari and Kokuho Shakujii Kakari) and all of the following documents. **Claims are only accepted at the service counters, so please do not send claims via postal mail or the like.**

- 1) Attending Physician's Statement (Form A) (if written in a foreign language, a Japanese translation is also required as your claim will be reviewed in Japanese; copies not accepted.)
- 2) Itemized Receipt (Form B) (If written in a foreign language, a Japanese translation is also required as your claim will be reviewed in Japanese; copies not accepted.)
- 3) Receipts (If written in a foreign language, Japanese translations are also required as your claim will be reviewed in Japanese; copies not accepted.)
- 4) The patient's health insurance certificate
- 5) Bank account details of the head of household (It is not possible to pay into an overseas account.)
- 6) Passport that shows proof of travel (An airline ticket stub is required if there is no immigration stamp; copies not accepted.)

7) Agreement of Authorization (Nerima City-designated form)

* Please obtain the Attending Physician's Statement (Form A) and Itemized Receipt (Form B) before traveling abroad. They are available at the service counter of Kokuho Kyufu Kakari and Kokuho Shakuji Kakari, or you can download them from the Nerima City website. When receiving medical treatment overseas, please ensure that you have the medical facility fill in and sign the forms. A separate form is needed from each medical facility for each month and for inpatient and outpatient treatment.

* We cannot accept any incomplete forms.

* Japanese translations must contain the name and address of the translator.

Hospital transport expenses

As a rule, you can file a claim for hospitalization or a transfer to another hospital with a physician's instructions and agreement. Transport expenses will be reimbursed if all the following requirements are met and if approved by the review agency:

- (a) The medical care that necessitates the transport is considered appropriate as medical treatment covered by the insurance.
- (b) It is difficult for the patient to travel due to the illness or injury that necessitates the medical care.
- (c) It is an emergency or other unavoidable incident.

[How to file a claim]

Submit a claim form (available at Kokuho Kyufu Kakari and Kokuho Shakuji Kakari) and the following documents:

- 1) A letter from the physician who accepted that you needed the transport (a form specified by Nerima City)
- 2) A receipt for the mode of transport (including a breakdown and details of the fees)
- 3) Health insurance certificate
- 4) Bank account details of the head of household

Inquiries: KOKUHO KYUFU KAKARI

14. Childbirth Lump-Sum Allowance and Funeral Expenses Benefit

The childbirth lump-sum allowance is paid out when a member of Nerima City NHI gives birth (or has a stillbirth or miscarriage on or after the 85th day of pregnancy). The funeral expenses benefit is paid out when a member of Nerima City NHI passes away. You must file a claim within two years from the day following a childbirth (stillbirth or miscarriage) or after a funeral.

*The fact that a spouse, etc. is an NHI member does not entitle them to file a claim.

1. Using the Direct Payment System for Childbirth Lump-Sum Allowance

Show your NHI certificate to the medical facility at which you will give birth and apply to use this system. NHI will pay the childbirth lump-sum allowance directly to the medical facility.

2. Using the Proxy Recipient System for Childbirth Lump-Sum Allowance

(advance application required)

If you submit your application in advance, NHI will pay the childbirth lump-sum allowance directly to the medical facility.

Application can be filed two months before your due date.

If you are unable to use system 1 or 2 above, if you used system 1 and your hospital delivery costs are less than ¥500,000, or if you gave birth abroad, apply at Kokuho Kyufu Kakari. **If you gave birth outside of Japan, you must apply at one of the service counters. Applications are not accepted via postal mail.**

3. Funeral Expenses Benefit

When an NHI member passes away and a funeral is held, the person arranging the funeral (chief mourner) can claim the funeral expenses.

Category	Allowance	Claimant	Required documents
Childbirth Lump-sum Allowance	¥500,000 (also applicable to stillbirths and miscarriages on or after the 85th day of pregnancy)	Head of household at the time of the childbirth	Your NHI certificate, Maternity and Child Handbook (containing the Certificate of Birth Registration), a copy of the bank account details of the head of household, an agreement on your use or not of the Direct Payment System, as well as receipts and itemized statements for your hospital delivery costs. If you gave birth overseas, your passport, birth certificate (*1) and receipts (*1) are required. (Apply after returning to Japan.) An agreement on the Direct Payment System is not required; but an Agreement of Authorization is required. If you had a stillbirth or miscarriage, a medical certificate is required, instead of a Maternity and Child Handbook.
Funeral Expenses Benefit	¥70,000	Chief mourner	The funeral receipts (showing the chief mourner's name) or the letter of appreciation for funeral attendance, and a copy of the chief mourner's bank account details.

*1 If any of the required documents, such as birth certificates, that are written in a foreign language must be submitted with a Japanese translation.

Inquiries: KOKUHO KYUFU KAKARI

15. In the event of a traffic accident (injuries caused by the acts of a third party)

“Injuries caused by the acts of a third party” refers to the injuries that you suffered through the acts of a third party, such as traffic accidents, including accidents between cyclists, and assaults.

If the injured person is not at fault, all the costs for treating the injury (medical bills) are borne by the person at fault. If the injured person is partially at fault, the person who is most at fault pays a portion of the medical bills according to the percentage of their responsibility. Your NHI certificate can be used if you satisfy the following conditions:

- 1. You must report the accident or incident immediately to the police.**
- 2. You must contact (phone) Nerima City Kokuho Kyufu Kakari before receiving treatment at a hospital or other medical facility and ask whether you may use your NHI certificate to receive medical treatment.**

The person who is most at fault is to pay a portion of the medical bills according to their percentage of fault. Under this program, Nerima City NHI will temporarily pay this portion and later recover it from the person who is most at fault.

Inquiries: KOKUHO KYUFU KAKARI

16. If you cannot pay your medical bills

If special circumstances, such as a disaster, illness, or injury, create difficulty for you to make your copayments, you may be able to receive a reduction of or exemption from your copayments for up to three months.

Eligibility is determined by comparing your medical bills and your total household assets, including your average household income and savings, with the calculated amount based on the

public assistance standard.

Please call us for a consultation and tell us your situation. We will then inform you of the documents required.

Inquiries: KOKUHO KYUFU KAKARI

17. Insurance premiums

You will be billed for insurance premiums from the time when you become eligible for NHI membership (such as when you move into the city or withdraw from another public health insurance program).

Even if you do not receive any treatment at a medical facility, you must pay insurance premiums. Insurance premium notification and payment slips will be mailed to the head of household, as stipulated by law.

Insurance premiums are calculated for household as a unit, based on the number of NHI members, the number of Category 2 insured persons of the Long-Term Care Insurance (between 40 and 64 years of age), and the calculated income, based on the former Local Tax Act.

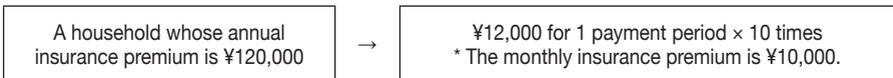
(1) We determine and notify you of your insurance premiums in June

We calculate your annual insurance premium (from April to March of the following year) based on your report on the income earned during the previous year (from January to December) and notify you of it at the end of June (because the City Taxation Section determines the income earned during the previous year in mid-June).

For this reason, you will pay your annual insurance premium in ten installments from June to March of the following year.

No insurance premiums will be due in the April and May payment periods. Therefore, “Payment due in X (month)” on the payment slip refers to the billing month, which may differ from the actual month in which you became an NHI member.

Example



* Please note that amounts less than ¥10 are all included in the first payment period. For those whose premiums are deducted from their pension payment (Special Collection), the amounts less than ¥100 are all included in the October payment period.

* Although no insurance premium payments are made in the April and May payment periods, if there are changes to your insurance premiums for the previous fiscal year or before, we may send you a notification in April or May.

When we mail insurance premium notifications and payment slips

Late-June	After determining your insurance premiums for this fiscal year, we will mail you an insurance premium notification and payment slips. (As a rule, only a notification will be mailed to households that pay their premiums by direct debit or whose premiums are deducted from their pension payment [Special Collection].) We will enclose payment slips covering each month of the first half of the fiscal year from the June to October payment period and one for the single annual payment.
Late-November	We will mail payment slips for the second half of the fiscal year from the November to March payment period. As a rule, these will not be mailed to households that pay their premiums by direct debit or whose premiums are deducted from their pension payment (Special Collection).

(2) How insurance premiums are calculated

Your insurance premiums consist of (1) basic (medical treatment) portion, (2) latter-term elderly support portion, and (3) long-term care portion (only for households that contain members between 40 and 64 years of age). The annual insurance premium is a sum of (1) income-based amounts paid according to the previous year's income for each NHI member of household and (2) per capita amounts paid according to the number of NHI members of household, regardless of their income.

Calculation of Premiums for Fiscal Year 2024

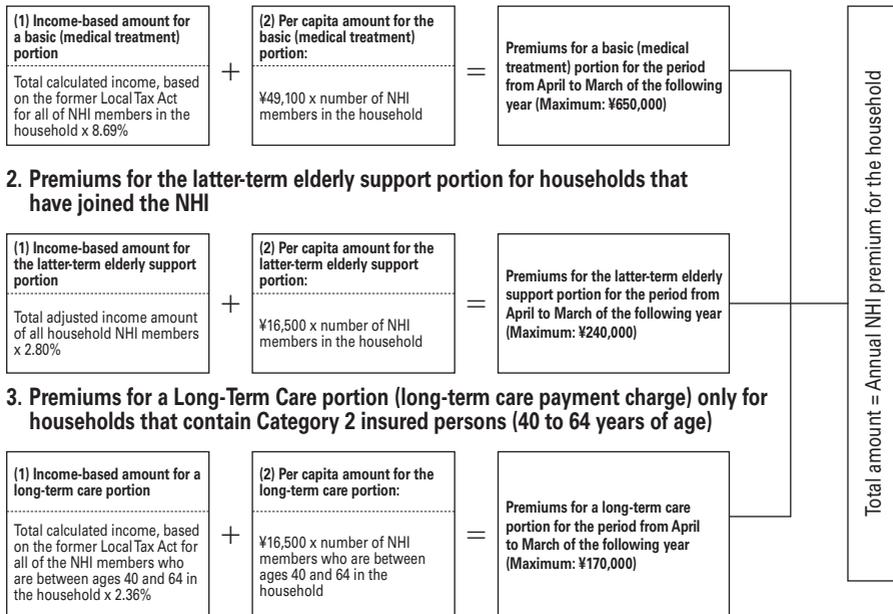
Calculated income, based on the former Local Tax Act (*1) =
 Total net income, etc. for the previous year – Basic deduction for resident tax of ¥430,000 (*2)

*1 What is the calculated income, based on the former Local Tax Act?

This is the amount remaining after subtracting the basic deduction for resident tax of ¥430,000 (*2) from your total net income, etc., forestry income, income from the transfer of stocks, and longterm (or short-term) capital gains for the previous year (January–December). However, the deduction carried forward for miscellaneous losses does not apply.

*2 If the total amount exceeds ¥24,000,000, a deduction will be reduced in stages.

1. Premiums for a basic (medical treatment) portion (basic charge) for households that have joined the NHI



* Long-term Care Insurance Section will notify you separately of Long-term Care portions for those between ages 65 and 74 as their Long-term Care Insurance premiums.

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

Those who reach 40 years of age must pay Long-Term Care Insurance premiums from the month of their 40th birthday (from the previous month if their birthday falls on the first day of a month). Payments must be made from the following month (the same month if their birthday falls on the first day of a month). We will recalculate their insurance premiums and mail a payment notification.

For those who reach 65 years of age, their premiums for long-term care portions covering a period to the month before their 65th birthday month (two months before if their birthday falls on the first day of a month) must be paid in advance, by March, in equal installments. This means that the payment amounts of their NHI premiums stay the same even after reaching age 65 but they will not make a duplicate payment for Long-term Care Insurance premiums.

■ Insurance premiums for those who turn 75 years of age during the fiscal year

- **If the person who reaches 75 years of age during the fiscal year is the sole NHI member in household**

Insurance premiums for the period up to the month before their 75th birthday month must be paid in equal installments from June to the month before their birthday month. Those who reach 75 years of age in May must pay their insurance premiums in a lump sum in the June payment period.

- **For households that contain two or more NHI members and in which one of them turns 75 during the fiscal year**

The insurance premiums for the period up to the month before their 75th birthday month must be paid in equal installments by March of the following year. This means that the amounts of their NHI premiums stay the same even after reaching age 75 but they will not make a duplicate payment for the insurance premiums of the Medical Care System for Older Senior Citizens.

- **For those whose insurance premiums are deducted from their pension payment (Special Collection)**

Those who reach 75 years of age by October 31 must pay by either direct debit or a payment slip. Those who reach 75 years of age in or after November pay by having their premiums deducted from their pension payment (Special Collection) in a pension month by the month before their 75th birthday month

(3) Insurance premiums for those who became a member during the fiscal year

Those who became an NHI member during the fiscal year pay their insurance premiums from the month in which they became eligible to be an NHI member and not from the day on which they submitted an application form.

Insurance premiums are calculated in monthly units. Even if you became a member in the middle of a month, your premiums will not be calculated at daily rates. If you are an NHI member on the last day of a month, you must pay your insurance premium for that month.

Annual insurance premium x No. of months from the month in which you became eligible to be an NHI member to March / 12
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Insurance premiums for those who have moved into Nerima City

For those who have moved to Nerima City from another municipality, we may calculate only the per capita amounts of their insurance premiums tentatively and mail an insurance premium notification and payment slips. We will then recalculate your insurance premiums when we have obtained the information on their income for the previous year. For this reason, the amounts of their insurance premiums may change at a later date. For further information, refer to (4) “When the amount of your insurance premium changes” below. Please note that the calculation method for insurance premiums may vary depending on the insurer (municipality).

(4) When the amount of your insurance premium changes

If the amount of your insurance premium changes due to a change in the number of NHI members in household or the calculated income, based on the former Local Tax Act (refer to page 17), we will mail you a notice of the change to your insurance premium. If our calculation indicated that you have overpaid, we will refund you. If you have underpaid, we will bill you accordingly.

*When we refund you:

We will inform you of the amount of your refund in a refund notice. For information on how to claim refunds, refer to “Insurance premium refunds” on page 24.

*When you have underpaid:

- We will recalculate your insurance premiums and mail you payment slips. In this case, use a new slip to pay your insurance premium for the month in which there was a change.
- In the case of direct debit, the amount after the change will be debited from your account.

(5) Insurance premiums for those who withdrew from the NHI

We will recalculate insurance premiums for those who withdrew during the fiscal year. If there was a change in the amount of their insurance premium, we will mail the amended insurance premium notification, etc., to the head of household.

1. When all of the NHI members in household withdraw

Insurance premiums will be recalculated for up to the month before the month in which you were disqualified from the NHI. If our recalculation indicates that you have underpaid, you may have to pay insurance premiums even in or after the month in which you were disqualified.

Since no payments will be due in the April and May payment periods, the insurance premiums you had paid until you withdrew may be insufficient.

If you have overpaid, you will receive a refund by bank transfer. (Please do not close your Japanese bank account.)

2. When all of the NHI members in household withdraw

The annual insurance premium for household will be recalculated. As a result of this, we will adjust the remaining insurance premiums for the period from the month in which the procedure for withdrawing from the NHI was completed (or the following month) to March of the following year and mail the amended insurance premium notification and payment slips.

If NHI members move to another country or return to their home country during the fiscal year, they may have to pay any shortfall when completing the procedure for withdrawing from the NHI.

3. When insurance premiums have been deducted from the pension payment of the head of household (Special Collection), but the head of household withdraws from the NHI

We will cancel your Special Collection, recalculate the annual premium for household, and mail you an amended insurance premium notification. Please note that if there is any shortfall, you may have to pay it using a payment slip.

(6) File your tax report

Insurance premiums are calculated based on your tax report. In addition, the income of the head of household and of all NHI members and former NHI members in the household (refer to page 9) must be reported to calculate premium reductions, hospital meal bills, and highcost medical expenses.

Although those who did not have any income are not required to file a tax return at a tax office, they must file a resident tax report to receive reductions of or exemptions from insurance premiums.

- If you lived in Nerima City as of January 1

File your resident tax report at Nerima City Taxation Section.

* If you filled out a National Health Insurance Premium-related Report (simplified report) when moving into Nerima City and will continue to reside in Nerima City in the following year and beyond, file a resident tax report at Nerima City Taxation Section even if you will not have any income in the following year and beyond.

- If you lived outside of Nerima City (within Japan) as of January 1

If you have already filed a resident tax report at the municipality in which you were living as of January 1, Nerima City will check with this municipality about your income. Once we have confirmed this, we will bill you for income-based amounts as part of your insurance premiums. This means that you may be billed only for per capita amounts initially. Check your insurance premium notification for more information.

If you have not filed a resident tax report yet, please do so at the section in charge of tax affairs in the municipality in which you were living as of January 1. Once you have filed the report, contact the Kokuho Shikaku Kakari of the Nerima City Office to request that an inquiry about your income be made. Nerima City will check with the municipality in which you filed the report and notify you of any changes to your insurance premiums.

- If you lived outside of Japan as of January 1

Since you are unable to file a resident tax report, we will mail you a National Health Insurance Premium-related Report (simplified report). Fill out the required fields and submit the report. If you have not received a simplified report, please call the Kokuho Shikaku Kakari of the Nerima City Office.

Inquiries: KOKUHO SHIKAKU KAKARI

18. Insurance premium reductions and exemptions

*There are no student discounts.

(1) Reduction of the Per Capita Amount for Preschoolers

If there is a preschooler in your household, the per capita amount levied on him/her is reduced by half. No application is required, since the reduction is automatically applied to eligible persons. Please note that households eligible for the reduction of the per capita amount according to their previous year's income (as mentioned below) that also have a preschooler are entitled to an additional 50 percent reduction in the child(ren)'s per capita amount.

(2) Reductions of per capita amounts for income earned during the previous year

If the income of your household (the head of household as well as all NHI members and former NHI members in the household [refer to page 9]) for the previous year is below a specific standard, you may be given a reduction of per capita amounts for a basic (medical treatment) portion, the latter-term elderly support portion, and the long-term care portion. The reduction rate is 70, 50, or 20 percent.

The applicability of these reductions is determined based on your tax report, and households to which the reductions may be applicable will be given reductions automatically.

* If the head of household or at least one of the NHI members or former NHI members in the household (refer to page 9) has not filed a tax report or has not submitted a National Health Insurance Premium-related Report (simplified report), we will not review the household to de-

termine their applicability of reductions.

- * If a tax report was filed after a deadline or if a reduction was applied as a result of submitting a National Health Insurance Premium-related Report (simplified report), we will recalculate the annual premium and notify you of the adjusted insurance premium that you should pay in and after the month in which we determined your applicability of reductions.

(3) Reductions for the involuntarily unemployed

Reductions of insurance premiums are currently applicable to those who have become unemployed involuntarily due to corporate bankruptcy or a layoff. We will calculate their insurance premiums for the period from the time when they become unemployed to the end of the following fiscal year by reducing their employment income for the previous year to 30/100.

Please note that you must apply to obtain a reduction.

Eligible members (those who fulfill all of the following requirements):

- (1) Those who have been issued either the certificate of entitlement to employment insurance benefits or the notification of entitlement to employment insurance benefits and whose Code of Dismissal is 11, 12, 21, 22, 23, 31, 32, 33, or 34 (apart from a “recipient of a special lump sum payment”).
- (2) Those who were under 64 on their leaving date.

Required documents:

Either the certificate of entitlement to employment insurance benefits or the notification of entitlement to employment insurance benefits Hello Work issued (original documents that include the date of separation from employment and the code for reasons for separation from employment listed above) and your NHI certificate

Where to apply:

Kokuho Shikaku Kakari or Kokuho Shakujii Kakari

- * As well as the offices above, you can also apply by mail. For further information, please contact Kokuho Shikaku Kakari.

(4) Reductions and exemptions in special circumstances

If your property has suffered serious damage due to a disaster such as a windstorm, flood or fire, or if your income has fallen significantly due to an NHI member’s death, injury or illness, you can take advantage of a reduction/exemption program for insurance premiums that are not past their due date for up to three months.

Eligibility is determined by comparing the household’s average income and total assets, including its savings, with the amount calculated based on the public assistance standard.

Please call us in advance for a consultation and tell us your situation. We will then inform you of the documents required.

Where to apply:

Kokuho Shikaku Kakari

- * For information on the reductions of and exemptions from medical bills, please refer to “16. If you cannot pay your medical bills” on page 15.

(5) Reductions and exemptions for dependents of former employees’ health insurance members

When a past health insurance member at their place of employment (employees’ health insurance) switches to (joins) the Medical Care System for Older Senior Citizens, as a result of which their dependent who is 65 or over joins the NHI, they will be exempted from income-based amounts and obtain a reduction of per capita amounts by 50 percent (for up to two years).

Please note that the head of household must apply to obtain this reduction.

Required documents

A certificate that confirms you are no longer a member of your previous health insurance system (we accept only those issued by the insurer or a branch office of the Japan Pension Service and do not accept those issued by your workplace).

Where to apply:

Kokuho Shikaku Kakari or Kokuho Shakujii Kakari

(6) Reduction for the period before and after childbirth (effective from January 2024)

The per capita amount and income-based amount for NHI premiums are reduced for those who have given birth or are scheduled to give birth. The month in which the birth takes place or is expected to take place is set as the base month, and four months from the month prior to the base month are covered. In the case of multiple pregnancies (twins, etc.), your premiums will be reduced for six months, starting from three months prior to the base month.

You must file a notification to apply for this reduction unless you have applied for and been approved for the Childbirth Lump-Sum Allowance (p. 12), since the reduction will be applied automatically.

Eligibility

NHI members who gave birth* or will give birth on or after November 1, 2023. *Birth refers to delivery after 85 days (12 weeks) of pregnancy, including premature birth, stillbirth, miscarriage and abortion.

Since the reduction applies from January 2024, it will only apply for a part of the standard period for those who gave birth in November 2023.

Required documents

Application form

Maternal and Child Health Handbook

Where to apply:

Kokuho Shikaku Kakari

Note: Notifications are also accepted electronically and via postal mail. For more information, please visit the Nerima City website.

Inquiries: KOKUHO SHIKAKU KAKARI

19. How to pay insurance premiums

(1) Direct debits

As a rule, you are requested to pay your insurance premiums by direct debit in order to avoid missing payments.

Your direct debit payment day is the last day of each month (or the following business day if the last day of a month falls on a day on which financial institutions are closed). Please make a deposit into your account by the business day before your payment day. *You must use a payment slip to pay any unpaid insurance premiums when direct debit payments begin.

[How to set up a direct debit]

1. Applying via the Internet

You can apply via your computer or smartphone. Please read the “Direct Debit Web Reception Service” section of the Nerima City website concerning application procedures and the financial institutions offering this service.

2. Applying Using Your Cash Card

If you use the special device at the Shuno Ka payment service counter or the Kokuho Shakujii Kakari to read your cash card, you can register for direct debit on the spot. (Please note that it may not be possible to read depending on the condition of the card's magnetic strip.)

Please bring your cash card (your PIN number is required), and a form of official ID. The account holder must come in person.

Procedures can be completed only at the following financial institutions: Mizuho Bank, Sumitomo Mitsui Banking, Mitsubishi UFJ Bank, Japan Post Bank, Resona Bank, Kiraboshi Bank, Sugamo Shinkin Bank, Saikyo Shinkin Bank, Tokyo Shinkin Bank, Johoku Shinkin Bank, and Tokyo Aoba Agricultural Cooperative.

3. By using an application form

Fill in the required fields of the application form available at the Shuno Ka payment service counter, Kokuho Shakujii Kakari and local residents' offices (excluding Nerima and Shakujii), stamp it with the personal seal registered for your bank account (or your signature, if you have registered it), and return it to Kokuho Shuno Kakari. Please call Kokuho Shuno Kakari if you would like to receive an application form by post.

4. At your financial institution or post office counter

Take with you (1) your bankbook, (2) the personal seal registered for your account, and (3) your NHI certificate or payment slip to the financial institution or post office that you use in Nerima City and complete the necessary procedure.

(2) Using a payment slip

Payment slips are mailed to you twice a year, June (those for June to October and one for a lump-sum payment covering June to the following March) and November (those for November to the following March). You must pay by the end of each month (or the following business day if the last day of a month falls on a day on which financial institutions are closed) at the Shuno Ka payment service counter, Kokuho Shakujii Kakari, a local residents' office (excluding Nerima and Shakujii), or any of nearby financial institutions, post offices, convenience stores, or any of the supermarkets and drugstores that have installed Shinkin Information Service's multimedia kiosks (MMKs). Payment slips will not be sent to the households that have set up direct debits.

If you have lost your payment slips, take with you a document showing your NHI symbol and number (e.g., your NHI certificate or a premium payment receipt) to the Shuno Ka payment service counter, Kokuho Shakujii Kakari, or a nearby local residents' office (excluding Nerima and Shakujii) and pay your insurance premiums there. Otherwise, call Kokuho Shuno Kakari if you wish to receive payment slips again.

For payments at a convenience store, you can only use payment slips with a bar code printed on the front.

* Pay by smartphone

Take a photograph of a payment slip with a bar code printed by using your smartphone camera and pay by online banking, credit card, or electronic money. For more information, please go to the Nerima City website (<https://www.city.nerima.tokyo.jp/>).

(3) Special Collection (deducted from a public pension)

In this system, your NHI premiums are deducted from your pension payment. There are certain requirements for Special Collection. Those who are eligible will be notified in advance.

Those who have become eligible for Special Collection can choose either direct debits or Special Collection. Please note that you can no longer use payment slips in this system.

• **Insurance premium refunds**

If you have overpaid your insurance premiums, we will make a refund into the account you specified. We will send a notification to those who have overpaid. If you receive it, please fill in the required fields and return it to Kokuho Shuno Kakari. It takes one to two months for a refund to be processed after we have received your request.

Inquiries: KOKUHO SHUNO KAKARI

(4) For individuals who cannot pay their insurance premiums

If you are unable to pay your insurance premiums for some reason, please contact the Payment Guidance Center as soon as possible to discuss payment options. Since there are certain requirements for some payment options, you may not be able to use your desired payment option. If you have no acceptable reason for failing to pay your premiums by a deadline, we will curtail the validity period of your NHI certificate as well as investigate and even seize your assets according to the law and regulations.

• If you have not paid your insurance premiums that were due a year ago or before:

The eligibility period of your health insurance certificate will be shortened, and we will ask you to return your health insurance certificate. You may be issued an insured person eligibility certificate. It is possible to use this certificate to receive medical treatment covered by the insurance. However, you must temporarily pay all the medical bills at a hospital reception, etc., and then ask Nerima City to refund the portion covered by insurance benefits.

* Copayments may be allotted to the payment of your unpaid premiums.

Inquiries: Payment Guidance Center

20. Specific Health Checkups and Specific Health Guidance

Specific Health Checkups are medical examinations that aim to prevent or detect lifestyle diseases. NHI members between 40 and 74 years of age are eligible. If your health check results exceed a certain standard, you will be offered assistance to improve your lifestyle habits (Specific Health Guidance). If you are eligible for a checkup and receive a checkup ticket, please have a health checkup before the ticket expires.

If you become disqualified from the NHI, then you may not have a Specific Health Checkup.

Inquiries: HOKEN JIGYOU TANTO KAKARI

21. Health maintenance and improvement

(1) Recreation facilities

We have partnered with some lodging facilities in Tokyo's vicinity, enabling NHI members to use the facilities at discounted rates.

(2) Distribution of discount tickets for day-use hot spring facilities

Discount tickets for day-use hot spring facilities are available.

Inquiries: HOKEN JIGYOU TANTO KAKARI

22. Long-term Care Insurance

The Long-Term Care Insurance program is a social insurance program that allows a comprehensive use of necessary long-term care services to ensure that you feel at ease and continue to live in your local area even when you become in need of long-term care.

Everyone who is 40 years old or older must enroll in the program and pay insurance premiums. Those who have been certified by the City Office can use necessary long-term care services. Members are categorized by age into Category 1 insured persons and Category 2 insured persons.

	Category 1 insured persons	Category 2 insured persons
Who can enroll	Those who are 65 years old or older	Medical insurance members who are between 40 and 64 years of age
Who can receive longterm care services	Those who have been certified that they need long-term care or support or those who have become eligible to receive long-term care prevention and life assistance services	Residents who are certified as requiring long-term care or assistance due to an illness that is eligible for Long-Term Care Insurance (specific disease).
How to pay premiums	For those who receive an old-age/retirement, survivors', or disability pension of ¥180,000 or more per year, their premiums are deducted from their pension payment. Others pay their premiums individually, using a payment slip or by direct debit.	Pay these premiums along with their medical insurance premiums. (Refer to pages 16–20.)

Members who applied at the City Office and, as a result of a long-term care certification assessment, have been certified that they need long-term care or support, or who have become eligible to receive long-term care prevention and life assistance services, can receive longterm care services by paying 10 to 30 percent of the costs.

Inquiries: KAIGO HOKEN-KA Tel: 03-3993-1111 (main)

23. Medical Care System for Older Senior Citizens

The Medical Care System for Older Senior Citizens is a health insurance program for those who are 75 years of age or older (including those between 65 and 74 years of age who have a certain level of disability, have applied, and have been certified). On their 75th birthday, they withdraw from their NHI or social insurance program and automatically enroll in the Medical Care System for Older Senior Citizens. Health insurance certificates will be mailed to them by simple registered mail in the month before their 75th birthday month (on or after the assessment day for those who have received disability assessment).

Please inquire if you need more information on copayments, health insurance certificates, insurance benefits, or insurance premiums.

Inquiries:

About copayments, health insurance certificates, or insurance benefits: KOKI KOREISHA SHIKAKU KAKARI Tel: 03-5984-4587

About insurance premiums:

KOKI KOREISHA HOKENRYO KAKARI Tel: 03-5984-4588

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

Please make inquiries in Japanese.

Hoken Jigyuu Tanto Kakari (3F, Main Building, Nerima City Office)	Tel: 03-3993-1111 (main switchboard)
Kokuho Kyufu Kakari (3F, Main Building, Nerima City Office)	Tel: 03-5984-4553 (direct line)
Kokuho Shikaku Kakari (3F, Main Building, Nerima City Office)	Tel: 03-5984-4554 (direct line)
Kokuho Shuno Kakari (4F, Main Building, Nerima City Office)	Tel: 03-5984-4559 (direct line)
Payment Guidance Center	Tel: 03-5984-4547 (direct line)
Kokuho Shakujii Kakari (2F, Shakujii Government Office)	Tel: 03-3995-1114 (direct line)

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