

Medical insurance system in Japan

Residence in Japan needs to get public medical insurance from babies to the elderly by calling it "Universal Health Insurance." This includes foreigners who work in Japan or attend school for the long term.

Insurance is operated by the government and public institutions. Which insurance you get depends not on what you decide, but on how and where you work.

Regardless of which insurance you have, the insurer will be responsible for a portion (70% to 90%) of the medical expenses and medicines you pay when you go to the hospital due to injury or illness.

Then let's explain each insurer.

1. National Health Insurance

This insurance is for people who are self-employed (people who are not working for the company) or international students. The procedure for getting insurance is done at the municipal office.

The insurance fee [the amount of money you pay to the insurer (municipalities)] depends on your previous year's income in Japan. Those who made a lot of money in the previous year will also pay higher insurance premiums. International students who have just arrived from abroad should not have made any money in the previous year in Japan. So, the insurance premium will be the cheapest. When you apply at the municipal office, you will receive a "payment slip" to pay the insurance premium. Take the paper to a convenience store or bank and pay the insurance premium. If you do not pay the insurance premium (money), you will not be able to use your insurance card. As a result, you have to pay the full cost of your treatment when you go to the hospital.

Example:

When you can use your health insurance card: If the treatment cost is 10,000 yen, you pay 3,000 yen at the hospital.

If you cannot use your health insurance card, you have to pay 10,000 yen for medical treatment at the hospital.

There is also a system called "high-cost medical treatment system" in which the insurer pays most of the amount that exceeds the certain amount of treatment cost or drug fee paid in one month. (However, there are conditions)

This system is to prevent people with injuries or illnesses from having trouble

in their lives even if their treatment costs become high, such as 500,000-yen and 1,000,000-yen.

In addition, there is money to be given when a baby is born by calling the "Childbirth Lump-Sum Allowance."*

*You can get about 400,000 yen using this system.

2. Insurance for people who work for the company (employee insurance)

Insurers: National Health Insurance Association (Kyokai Kenpo), Japan Private School Promotion and Mutual Aid Agency (Private Mutual Aid), Health Insurance Society, etc. Those who work for the company and their families are covered by one of the above insurers. Which insurance you get depends on where you work, not on what you decide.

For example, if your company is a big company like Okinawa Electric Power Company, you will join the "Health Insurance Union". Also, if you work in a private school like OIST, you will be enrolled in "Private School Mutual Aid." Those who work for other companies or organizations will be in the "Kyokai Kenpo". A feature of this insurance is that the employer pays insurance fee about the same amount you pay to the insurer, apart from the salary.

For example, if your salary deducts 20,000 yen each month as an insurance premium, your employer must pay the same amount to the insurer. A "Welfare Pensions*" have also the same system.*

*The explanation of this pension is later.

You do not have to do the paperwork for the enrollment of this insurance. The company will do it for you. And you will get the insurance card from the company. When you quit the company, you have to return your insurance card to the company. so there is no insurance after the day you quit. If you haven't worked for a while, you need to go to the municipality's office and apply for "National Health Insurance" by yourself. If you work for a new company, you need to re-enroll at the company. For those who work for the company, the self-pay medical expenses, the "high medical expenses" and the "lump-sum childbirth allowance" are roughly the same as in the case of National Health Insurance. Next, we would like to introduce the system that is not in National Health Insurance but in employee insurance.

2-① Injury and sickness allowance

In the following cases, you can get an allowance from the insurer even if

you are not paid by the company

- You were injured during your day off and couldn't work (this is called a non-business reason)

- You got sick and couldn't work.

Even if you are not hospitalized and receive medical treatment at home, you can get the allowance from the insurer. (A doctor's diagnosis is required) A period for which you cannot work for three consecutive days is required, and that period is called the "waiting period." In other words, you can get it from the 4th day after 3 days without work.

The amount you will receive is about two-thirds of your salary.

2 – ② Birth allowance

Before giving birth

You may be absent from work because you are pregnant and it is about to give birth to a baby. This is called "maternity leave". Under the Labor Standards Act, if you ask the employer, the company must give you a rest for 42 days before the expected date of delivery. However, the law does not say that the employer must pay you a salary during that time. So resting may reduce your salary. A maternity allowance is for an insurer to pay you, even if you are off work and cannot get a salary from the company. For twins, 42 days before the expected date of delivery will be 98 days.

Even if the childbirth starts later than expected and takes more than 42 days, it will be recognized as "prenatal leave" until the day of childbirth.

After giving birth

The company must not allow employees who have given birth to work for 56 days from the day after giving birth. You are prohibited to work for the period even though you wish. This is set by law. This is called "postpartum leave".* However, if 42 days have passed since the day after giving birth and the doctor approved it, you can work according to your wishes.

If you take a rest, your salary may decrease. You can get a maternity allowance during this period. The amount you will receive is about two-thirds of your salary.

Maternity allowance

42 days before delivery + 56 days after delivery = 98 days

98 days x 1 day's salary x 2/3 → This is a rough calculation formula.

You do not calculate how much you can get for 2-① and 2-②. The amount of allowance you receive depends on your salary and the calculation is complicated, so the insurer will calculate it. The procedure is through the company. Ask your company staff for necessary documents.

In addition, there is a family care leave benefit (the amount of money that you can get when you take a leave because your relatives are in a condition that requires care).

3. Labor insurance

Labor insurance is insurance that people who work for the company enroll. If you meet the conditions, all the people who work for the company must join the compulsory membership. The insurer is a government. There are two types of insurance premiums, one paid by the company (labor accident insurance) and one paid by the company and workers (employment insurance).

3- ① Employment insurance

*Please check your salary statement. If you have a monthly deduction for "Employment Insurance," you are eligible. Or do you have an "Insurance Certificate"?

•Unemployment benefits

After you lay off your company or quit by yourself (unemployment), you can get an allowance until you find your next job. How long and how much money you can get depends on the applicant. There are other conditions for obtaining money, so if you are unsure about applying for the first time, please contact the OIHF.

•Childcare leave benefits

After 56 days of maternity leave, if you need to take more rest to raise your baby, you can get a childcare leave benefit. The benefit is covered for approximately one year from the date of birth. Not only the mother of the baby, but also the father. However, two people cannot get it at the same time. The amount you receive will be about half of your salary. There are detailed rules for receiving. Your employer will complete the procedure. Ask the company for details.

- In addition, there are "education and training benefits" (you can get money for training to acquire qualifications and skills to search for the next job), "employment promotion benefits" (Money you can get if you find a new job within the unemployment period), etc. there is. There are also conditions, so please consult the OIHF each time.

4. Industrial accident insurance

It is officially called "Worker Accident Compensation Insurance".

This insurance covers:

- Hospital treatment costs due to illness or injury during work (business reasons)
- Living expenses during work leave due to illness or injury during work (Business reasons)
- Compensation money when disability remains even if injury is healed, Compensation money to support the life of the bereaved when you die.

This insurance fee depends on the content of your work. You don't have to pay insurance. The employer pays all insurance. Your employer will handle all the procedures. You will never have an insurance card with this insurance.

- When injured during work

Whenever you go to the hospital, you are asked "Why did you get hurt?" At that time, be sure to tell the person in the hospital that "I was injured when I was working...".

You don't have to make payment at the hospital. If you go to the hospital every day after that or be hospitalized, you do not have to pay.

In addition to medical expenses, you can get living expenses from insurance until your injury or illness is healed, even if your salary is not paid.

[Attention!]

On rare occasions, people at your company may say, "Don't say you were injured during work," or "Please say that you were injured on your days off." But don't lie. This is a crime in Japan.

If you tell a lie, you get less money.

- When the injury was healed but the obstacle remained

There are cases in which, even after a certain period of time, the injury was healed, the limbs did not move as before, or the eyes became difficult to see. If you continue to get treatment and it doesn't get better anymore (they say you have a disability), you will get money from this insurance. It is divided into 1 to 14 grades (disability grade) from the one with the most severe disability. The country decides the grade based on the doctor's opinions and symptoms.

Those who are in 1st to 7th grades will receive insurance as a pension system (you will receive a fixed amount of money every year).

For people of 8th to 14th grade, allowance is paid as a lump sum payment method. (You can only get the fixed amount of money once)

Both are calculated based on the salary when you were working.

- When you die due to injury during work

Insurance is paid to the bereaved family such as spouses (husbands, wives), children and parents. Both lump sum and pension are paid.

In this case as well, the pension is calculated based on the salary that the deceased person received during his/her lifetime.