

# Fiscal Year 2024 Edition

# Guide to the Latter-Stage Elderly Healthcare System



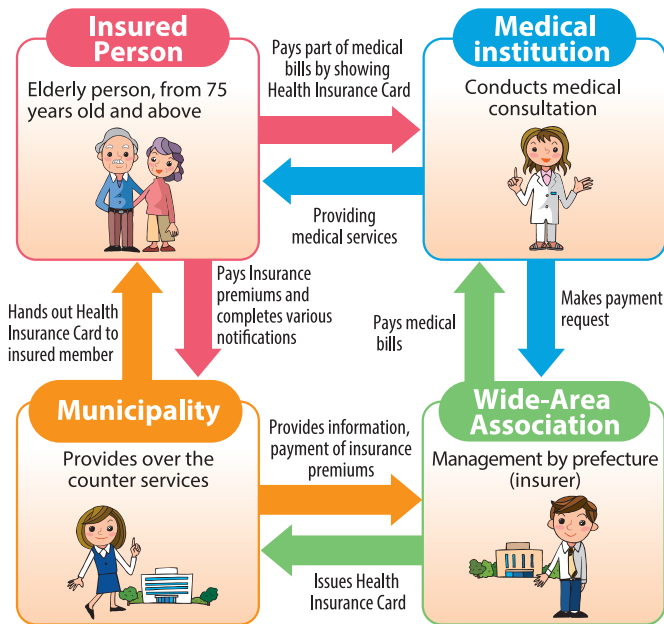
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**Fukuoka Prefecture Wide-Area Association  
of Latter-Stage Elderly Healthcare  
Issued in March 2024**

# Mechanism for the Latter-Stage Elderly Healthcare System

The Latter-Stage Elderly Healthcare System is a healthcare system managed by the “Wide-Area Association of Latter-Stage Elderly Healthcare” whose members include all municipalities by prefectures, where official duties are shared between the “municipalities (wards)”.



### Role of municipalities:

- Hands out Health Insurance Cards to insured person
- Accepts applications and notifications
- Collects insurance premiums, etc.

### Role of Wide-Area Association

- Certifies insured person
- Issues Health Insurance Card
- Determines insurance premiums
- Handles medical care benefits
- Implements medical examination projects, etc.

## Persons covered (Insured person)

- **75 years old and above**  
Applicable from the 75th birthday
- **65 years old but not over 75 years old with specific disabilities\* recognized by the Wide-Area Association via application**  
Applicable from the date of recognition by Wide-Area Association  
\* “Specific disabilities” refer to those with the following conditions or disabilities:

Level of disability	
Physical Disability Card	<ul style="list-style-type: none"> <li>● 1st Grade, 2nd Grade, 3rd Grade</li> <li>● Part of 4th Grade</li> </ul>
Mental Disability Health & Welfare Card	<ul style="list-style-type: none"> <li>● 1st Grade, 2nd Grade</li> </ul>
Rehabilitation Card	<ul style="list-style-type: none"> <li>● A (Severity)</li> </ul>
Disability Pension based on the National Pension Act, etc.	<ul style="list-style-type: none"> <li>● 1st Grade, 2nd Grade</li> </ul>

An application for withdrawal may be done at any time in the future. Those who are 65 years of age and above, with a Severe Disability Medical Certificate, are required to join the Latter-Stage Elderly Healthcare System.

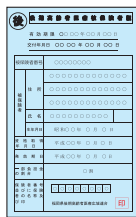
For those applicable, medical services provided via the National Health Insurance will now be transferred or handled under the Latter-Stage Elderly Healthcare System. Dependents of those who enter the Latter-Stage Elderly Healthcare System will be required to apply for membership in the National Health Insurance Healthcare System.

# Health Insurance Card

Each member of the Latter-Stage Elderly Healthcare System will be issued a Health Insurance Card.

In case of loss, damage, or when the card does not arrive, a request for reissuance may be made at the municipal office where your residence is located.

- To be updated on August 1st.
- It will be sent one month before turning 75 years old.
- Be sure to present your insurance card at the counter when going to a medical institution for consultation.



**Starting from August, the insurance card color will change to light blue**

**When the insurance card cannot be used**

- For cases not considered as illnesses  
Vaccination, etc.
  - When able to use the Workers' Accident Compensation Insurance, etc.  
Work-related illnesses and injury
  - When restrictions are imposed on insurance benefits  
Injury or illness caused by fights or drunkenness, intentional criminal acts, intentional accidents
- \* An insurance card that has passed its expiration date cannot be used, so please return it to the municipal office where your residence is located or destroy it yourself.

## Regarding the use of My Number Card as an insurance card

The My Number Card can be used as an insurance card (prior registration is required) when visiting a medical institution, etc. Hence, everyone is encouraged to use it. For more information, please contact the My Number general toll-free number.

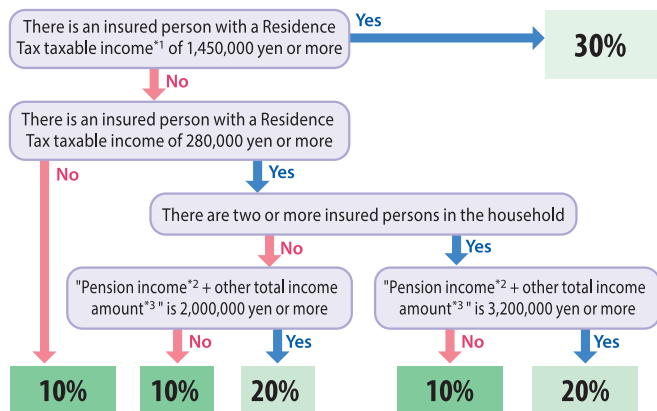
**My Number General Toll-free Number**  
**☎0120-95-0178**

(Weekdays, 9:30–20:00 Saturdays, Sundays & holidays, 9:30–17:30)

# Payment at hospitals, etc.

Co-payment ratio at the counter	Payment burden category
30%	<p><b>Worker equivalent III</b> Those with an insured person in the same household with a Residence Tax taxable income of 6,900,000 yen or more</p> <p><b>Worker equivalent II</b> Those with an insured person in the same household with a Residence Tax taxable income of 3,800,000 yen or more</p> <p><b>Worker equivalent I</b> Those with an insured person in the same household with a Residence Tax taxable income of 1,450,000 yen or more</p> <p><b>Application of standard income amount</b> If any of the following applies among those who fall under Worker-equivalent income earners Category I and Category II, the copayment burden ratio at the counter will be 20% or 10%. A notification with instructions will be sent to those who need to apply.</p> <ul style="list-style-type: none"> <li>• Multiple insured individuals in the same household, with a total income of less than 5,200,000 yen</li> <li>• One insured person in the same household, with an income of less than 3,830,000 yen</li> <li>• One insured person in the same household, with an income of 3,830,000 yen or more, and living with an individual aged 70 but below 75 years old who is also earning, for a combined income of less than 5,200,000 yen.</li> </ul> <p>*If someone in household has a copayment ratio of 30%, the copayment ratio for all insured individuals in the same household will be 30%.</p>
	<p><b>General II</b> Those who have an insured person in the same household with a residence tax taxable income of 280,000 yen or more, who falls under the following ① or ②.</p> <p>① There is only one insured person in the same household, and the total income amount of "pension income and other total income" totals 2 million yen or more</p> <p>② There are multiple insured persons in the same household, and the total income amount of "pension income and other total income" of all insured persons totals 3.2 million yen or more</p> <p>*Excluding those who pay 30% burden.</p>
	<p><b>General I</b> Those who do not fall under the following: "Worker-equivalent income earners", "General II", "Category I", "Category II"</p> <p><b>Category II</b> Those who do not fall under Category I but belongs to a household where all members are exempt from Residence Tax</p> <p><b>Category I</b> Those who belong to a household where the entire household is exempt from residence tax and the income of all members of the household amounts to 0 yen (public pension deduction amount is 800,000 yen, calculated by deducting 100,000 yen from employment income), or old-age welfare pension recipients (all members of the household are exempt from residence tax).</p>

# Regarding the determination of counter burden ratio



\*1 Even if there is an insured person whose residence tax taxable income is 1,450,000 yen or more, If the total amount is less than 2.1 million yen "after deducting 430,000 yen from the total income" of insured persons born after January 2, 1945 and insured persons from the same household, please proceed to "No". For households exempt from resident tax, the tax will be 10%.

\*2 Pension income does not include survivor's pension or disability pension.

\*3 Other total income amount refers to the amount after deducting necessary expenses, salary income deduction, etc., from business income, salary income, etc.

## If there is a change in the burden ratio

Due to changes in household composition, etc., the burden ratio may change midway through the fiscal year. The burden ratio may change retroactively due to amended income declarations, etc.

If there is a change, a new insurance card will be sent from the municipal office, and even if a visit is made at a medical institution before it arrives, the medical institution will be able to check the changed burden ratio online, so the patient may be billed based on the revised burden ratio.

# When medical expenses become too high

When the cost of medical treatment in one month (within one month) exceeds the specified limit (see page 7), the excess amount will be treated as "high medical costs", and will be refunded.

Those who fall under Category I, II may present a "Certificate for Ceiling Amount Application / Standard Burden Amount Reduction", while those who fall under Worker equivalent I and II may present a "Certificate of Ceiling Amount Application" at the counter of a medical institution during medical consultation. By presenting the above certificates, the payment burden at the counter for each medical institution will be up to the copayment burden ceiling amount written on the next page

\* When using My Number card as an insurance card (see page 3), there is no need to present it.

Please apply for the "Certificate for Ceiling Amount Application / Standard Burden Amount Reduction" and "Certificate of Ceiling Amount Application" at the municipal office where your residence is located. It will be applied from the first day of the application month.

## This is what I want to know!

**Q** How do I apply for High Medical Costs?

**A** A notification will be sent from the Wide-Area Association to those who are eligible for high-cost medical expenses. Upon receiving the notice, please submit it to the designated address (municipal office where your residence is located) written on the document. Once the application is made, details of the bank account specified for bank transfer will be registered so the applicant will not have to provide them next time and transfer will be made to said registered account.

# Maximum co-payment amount (monthly)

Income Category (see page 4)	Outpatient (individual)	Outpatient + Hospitalization (household)
Worker Equivalent III	252,600 yen + 1%* <sup>1</sup> (Multiple Application* <sup>4</sup> 140,100 yen)	
Worker Equivalent II	167,400 yen + 1%* <sup>2</sup> (Multiple Application* <sup>4</sup> 93,000 yen)	
Worker Equivalent I	80,100 yen + 1%* <sup>3</sup> (Multiple Application* <sup>4</sup> 44,400 yen)	
General II	10% burden + 3,000 yen* <sup>5</sup> or 18,000 yen, whichever is lower* <sup>6</sup>	57,600 yen (Multiple Application* <sup>4</sup> 44,400 yen)
General I	18,000 yen* <sup>6</sup>	
Category II		24,600 yen
Category I	8,000 yen	15,000 yen

\*1 If medical expenses exceed 842,000 yen, 1% of the excess will be added.

\*2 If medical expenses exceed 558,000 yen, 1% of the excess will be added.

\*3 If the total medical expenses exceed 267,000 yen, 1% will be added to the excess amount.

\*4 This is the ceiling amount for the fourth time and thereafter, in case where the household received payment for high medical cost within the past 12 months.

\*5 Applies only if the copayment amount exceeds 6,000 yen. For details, refer to "Consideration measures to reduce the burden (for those paying 20% copayment)" on page 8.

\*6 The ceiling amount for one year (Every year from August to July of the following year) is 144,000 yen.

## Calculation method for high medical costs

- If multiple insured persons receive medical care within the same household, the costs may be combined without any distinction between hospitals, clinics or medical department.
- After applying the ceiling amount to outpatient (individual) treatment, outpatient + hospitalization (household) will be applied.
- For the month corresponding to the 75th birthday (except for those whose birthday falls on the 1st day of the month), the co-payment ceiling amount for previous medical insurance and Latter-Stage Elderly Healthcare System will be 1/2 for each.
- Expenses for meals as well as expenses not covered by insurance during hospitalization (extra bed charges, cosmetic surgery, thorough medical checkups, purchase of over-the-counter medicines, etc.) are not included in the calculation.

## \*Consideration measures to reduce the burden (for those paying 20% copayment)

If there is an increase in out-of-pocket costs for outpatient visits per month for those who have a 20% copayment burden until September 2025, wherein it exceeds 3,000 yen compared to the 10% copayment, the following consideration measures will be applied (hospital expenses for hospitalization are not covered).

- If the payment at one medical institution exceeds 6,000 yen per month, the amount to be paid at the counter will be up to "10% copayment + 3,000 yen".
- If the cost exceeds 6,000 yen at multiple medical institutions, the Wide-Area Association will pay it at a later date as high-cost medical expenses. An application form will be sent by mail for those who need to do bank account registration procedures.

## High-Cost Medical Expense (outpatient yearly total)

This system reduces the burden on those receiving outpatient treatment throughout the year.

It covers the medical treatment period for one year from the August every year up to July of the following year. For those in General I/II or Category I/II as of July 31st, the total outpatient out-of-pocket expenses for the month while in the above category during the applicable period (on an individual basis, excluding high-cost medical expenses for each month) in excess of 144,000 yen will be paid.

### This is what I want to know!

#### Q How do I apply for High-Cost Medical Expense (outpatient annual total)?

**A** Payment for High-Cost Medical Expense (outpatient annual total) will be transferred to the registered bank account as high-cost medical expenses. For those who have not registered their bank accounts or have changed their insurance status during the applicable period, an application guide will be sent by the Wide Area Association. After receiving the above, please submit it to the specified location (municipality where you lived on the last day of the target period) listed on the guide.

## Certificate of Medical Treatment for Specific illness

By presenting a "Certificate of Medical Treatment for Specific illness" at the counter of a medical institution, the amount of copayment for each medical institution (by inpatient / outpatient) will be up to 10,000 yen per month. If eligible, please apply at the municipal office where your residence is located.

#### 【Target specific diseases】

- Part of congenital blood coagulation factor disorders
- Chronic renal failure requiring dialysis
- Acquired Immunodeficiency Syndrome with antiviral administration

## Combined System for High Medical & Nursing Care Expense

When there are individuals using the Nursing-care Insurance and Later-Stage Elderly Healthcare in the same household, the copayment amount paid by the insured person in the household for Nursing-care Insurance and medical insurance for one year are summed up, and the portion exceeding the following limit will be paid as High-cost Nursing Care Combined Medical Expenses. Those eligible for both high medical costs (yearly out-patient total) and High-cost Nursing Care Combined Medical Expenses, must first make a payment application for high medical cost (yearly out-patient total).

### ■ Ceiling amount (yearly amount) using combined calculation (covering every year from August to July of the following year)

Income Category (Refer to page 4)	Ceiling amount (limit)
Worker Equivalent III	2,120,000 yen
Worker Equivalent II	1,410,000 yen
Worker Equivalent I	670,000 yen
General I・II	560,000 yen
Category II	310,000 yen
Category I	190,000 yen

### This is what I want to know!

#### Q How can I apply for High-cost Nursing Care Combined Medical Expenses?

**A** An application form will be sent from the Wide-Area Association to those who are expected to receive payment for High-cost Nursing Care Combined Medical Expenses. Upon receiving the document, please apply at the municipal office.

# Meals and accommodation expense when hospitalized

The out-of-pocket expense amount is the standard burden amount shown below.

**Standard burden amount for food expenses (per meal)**  
In accordance with the revision of medical fees, food costs will change from June 2024.  
(until May 2024)

Burden category (see page 4)		General hospital bed	Recuperation bed	
			People with high need for inpatient medical care	
Worker-equivalent income earners I, II, III, General I, II		460 yen (some may be) at 260 yen	460 yen (some may be) at 260 yen	460 yen (420 yen at some medical institutions)
Category II *1	Hospitalization up to 90 days	210 yen	210 yen	210 yen
	Applicable to long-term hospitalization of more than 90 days in the past one year *2	160 yen	160 yen	
Category I *1	Old age welfare pension recipient	100 yen	100 yen	130 yen
				100 yen

(From June 2024)

Burden category (see page 4)		General hospital bed	Recuperation bed	
			People with high need for inpatient medical care	
Worker-equivalent income earners I, II, III, General I, II		490 yen (some may be) at 280 yen	490 yen (some may be) at 280 yen	490 yen (450 yen at some medical institutions)
Category II *1	Hospitalization up to 90 days	230 yen	230 yen	230 yen
	Applicable to long-term hospitalization of more than 90 days in the past one year *2	180 yen	180 yen	
Category I *1	Old age welfare pension recipient	110 yen	110 yen	140 yen
				110 yen

\*1 For those who fall under Category I or II, it is necessary to apply for issuance of "Certificate for Ceiling Amount Application/Standard Burden Amount Reduction" at the municipal office where your residence is located (When using My Number card as an insurance card, there is no need to present it).

\*2 A separate application is required. For details, please contact the municipal office in your area.

## Standard burden amount for accommodation expenses (per day)

	General hospital bed	Recuperation bed
Old age welfare pension recipient	/	0 yen
Designated intractable disease patients, etc.		
Persons other than the above		370 yen

# When a refund is given at a later time

In the following cases, even though 100% copayment burden at the counter is necessary, upon making the necessary application at the municipal office and given an approval, the amount excluding the burden based on the insurance card's burden ratio at the counter will be paid at a later date as **medical treatment expenses**.

\*Necessary documents will be required in making the application. Please contact the municipal office for more details.

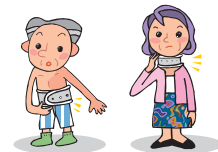
- For unavoidable reasons, the insured person forgets to bring a Health Insurance Card and went on to receive medical attention or in cases where the insured person gets medical attention at a medical institution that does not provide medical services using insurance.



- When the insured person receives treatment abroad for sudden illness (excluding travel for medical treatment purposes).



- Having prosthetics made such as medical corsets, etc., deemed necessary by a physician as part of treatment.



- Receiving acupuncture, massage and other treatment techniques deemed necessary by a physician.



\*Transportation expenses will be supported or paid for, in case where a patient with difficulty in movement is transported to a medical institution upon the orders of a physician (does not cover planned hospital transfer) due to an emergency or other unavoidable reasons.

## When an insured person dies

When an insured person dies, 30,000 yen will be provided as **funeral expense** support to the person who makes or carries out the funeral arrangements.

\*Necessary documents will be required in making the application. Please contact the municipal office for more details.

## When payment of medical bills at a medical institution becomes difficult due to a calamity or disaster (Reduction of co-payment amount)

In case where the head of the household to which the insured person belongs has suffered a significant decrease in income or damage to property due to a disaster or other special circumstances within the past one year, and unable to pay temporarily for medical services received at medical institutions, a procedure can be applied for to help reduce the copayment amount or extend the payment period.

In order to avail of reduction, exemption or deferment, requirements have to be met, which includes resident tax reduction or exemption, bank balance conditions, etc.

The reduction period is within six months.

For more details, consult with the counter at the municipal office.

\*Different measures may be taken in the event of a large-scale disaster.

## Report of injury or illness caused by the actions of a third party

By completing the necessary procedure or notification, it is possible to get medical treatment using the Latter-Stage Elderly Healthcare System even in the case of traffic accidents involving a third party resulting in injury or illness. In this case, please send it to the municipal office where your residence is located as soon as possible. Expenses borne by the Wide Area Association will be charged by the association to the perpetrator at a later time. However, if the victim receives payment for medical expenses from the perpetrator or makes a settlement with said party, it may not be possible for the victim as well as the Wide Area Association to claim for treatment costs. Hence, be sure to make the necessary consultations first before making any settlements.

### Make sure to make the necessary notifications at the appropriate counter

When presenting an insurance card and receiving medical treatment due to :

- Traffic accident
- Being bitten by someone's dog
- Food poisoning
- Accident at a nursing care facility, etc.
- Being involved in a Fight
- Injury due to defective public property, etc.

For more details regarding the items needed for notification, please contact the municipal office where your residence is located.

## Check your medical expense notification

Medical expense notifications are sent three times a year (July, November, and February). Please check the written contents and set aside if it will be used for medical expense deduction.



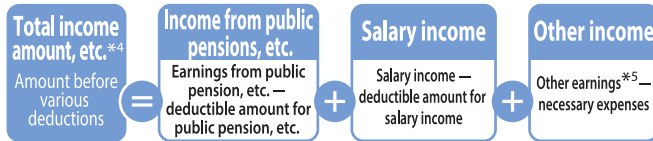
# Calculation method for insurance premiums

The amount of the insurance premium is the total sum of the "per capita rate" which is levied equally to all insured persons and the "per income rate" levied according to income.



- \*1 The maximum ceiling amount that can be levied for insurance premiums is 800,000 yen. However, for those born before March 31, 1949, and those who qualify as insured person by recognition of disability by March 31, 2025, the premium will be 730,000 yen.
- \*2 Although the basic deductible amount is 430,000 yen if the total income amount is 24,000,000 yen or less, it is different when it exceeds 24,000,000 yen.
- \*3 The income percentage rate will be 11.02% for those whose total income amount after basic deductions during 2023 does not exceed 580,000 yen.

## Calculation method for total income amount, etc.



- \*4 Tax-exempt income (disability, survivors, old-age welfare pension, etc.) is not included in the total income amount.
- \*5 Other income -- income from business, real estate, stocks, personal pensions, etc.

### Calculation example (for single households with earnings of 2,200,000 yen from public pension)

[Total income amount, etc.] = earnings from public pension income, etc. – deductible amount for public pension, etc.  
 = 2,200,000 yen – 1,100,000 yen = 1,100,000 yen

[Per capita rate after reduction] = 48,003 yen (Refer to the next page "Reduction measures for low income earners")

Income amount eligible for reduction    20% reduction income requirements  
 1.1 million yen – 150,000 yen = 950,000 yen ≤ 975,000 yen (430,000 yen + 545,000 yen × 1 person)

Total income amount, etc.    Special deduction amount

[Per income rate] = (total income amount – basic deduction amount) × 11.83%  
 = (1,100,000 yen – 430,000 yen) × 11.83% = 79,261 yen

[Insurance premium] = 48,003 yen + 79,261 yen = 127,260 yen (down to the nearest 10 yen)

● A trial calculation can also be done on the website.

## Reduction measures for low-income earners

### Per-capita-based amount

Reduction will be done according to household income situation as of April 1st every year (at the time of subscription, in case of joining in the middle of the year).

Income requirements for target individuals (Total amount of income subject to reduction for the householder and insured persons in the same household)	Reduction ratio	Per capita rate after reduction (annual amount)
430,000 yen (basic deductible amount) + 100,000 yen × (number of salary earners, etc., – 1) or less	70%	18,001 yen
430,000 yen (basic deductible amount) + 295,000 yen × number of insured persons + 100,000 yen × (number of salary earners, etc., – 1) or less	50%	30,002 yen
430,000 yen (basic deductible amount) + 545,000 yen × number of insured persons + 100,000 yen × (number of salary earners, etc., – 1) or less	20%	48,003 yen

- \*The "income amount subject to reduction" is basically the same amount as the total income amount, etc., but is calculated as follows for public pensions for those aged 65 and above: "Public pension income – Public pension deduction amount – Special deduction of 150,000 yen". In addition, deductions for full-time business owners and special deductions for separate capital gains are not applicable.
- \*The underlined formula applies when the insured person or head of household in the same household has employment income or public pension income.

## Reduction measures for dependents

Applicable to those who were dependents under the social insurance the day before subscription.

\*National Health Insurance and National Health Insurance Association are not covered.

### Per-capita-based amount

#### 50% reduction

Reduced Insurance Premium (Yearly) 30,002 yen

### Income-based amount

#### burden is waived

\*70% reduction will be given priority, for those with per capita rate that corresponds to 70% reduction.

\*The per capita rate reduction for those who were dependents is limited to two years after joining the system.

# How to pay insurance premiums

Payment methods include special collection (pension deduction) and normal collection (payment slip, etc.). Those who newly join or are transferred during the fiscal year will be subject to normal tax collection temporarily, but as a general rule, they will be subject to special tax collection.

## In case where insurance premiums are deducted from one's pension (special collection)

### Persons covered

- Those with a yearly pension of 180,000 yen or above (wherein its sum total with Nursing Care Insurance premium does not exceed 1/2 of the pension amount)

\*Since pensions that fall under special collection have a priority order, there are cases where even those having a yearly pension of 180,000 yen or above will not be covered for special collection.

Priority order by pension insurers	Priority by pension type
1. Japan Pension Service	1. Old age/retirement pension
2. National Civil Servant Mutual Aid	2. Disability Pension
3. Transition from Agriculture and Forestry	3. Survivor's Pension
4. Promotion and Mutual Aid Corporation for Private School of Japan	
5. Local Public Servant Mutual Aid	

### Payment method

At the time pension payments are made, insurance premiums are deducted from one's pension.

Temporary Collection			Actual Collection		
April (1st stage)	June (2nd stage)	August (3rd stage)	October (4th stage)	December (5th stage)	February (6th stage)
A temporarily calculated insurance premium will be deducted until the previous year's income is determined (in principle, the same amount deducted in February will be deducted).			After the previous year's income is determined, the amount obtained by subtracting the temporary collection amount from the annual premium amount will be divided and deducted into the 3 stages.		

\*Change of payment mode to bank account transfer is possible upon request. Furthermore, the timing or period at which deductions start from your pension differs depending on each municipality. For details, please contact the municipal office in your place of residence.

Those whose annual pension amount is less than 180,000 yen, or those whose total amount including nursing care insurance premiums exceeds one-half of the pension amount, will pay the amount to the municipal office of their place of residence through normal collection.

## When paying by payment slip or bank account transfer (regular collection)

### Persons covered

- Those whose annual pension is below 180,000 yen
- Sum total with Nursing Care Insurance premium exceeds 1/2 of the pension amount
- Those whose Nursing Care Insurance premium are not deducted from pension
- Those who newly joined during the fiscal year
- Those who have changed address
- Those who offered to pay via bank account transfer, and those who are not subject to special collection

### Payment method

Payment is done by using the payment slip received from the municipal office where one resides, payable at the specified financial institution within the payment deadline. Payment may also be made through bank account transfer. For details, consult with the counter at the municipal office.

**Those who are already paying Health Insurance premiums (tax) via bank account transfer need to apply again.**

## When failing to pay insurance premiums

Failing to pay insurance premiums without a valid reason will result in the issuance of a Health Insurance Card with a shorter validity period or replacing it with a "Certificate of Qualification", and other measures.

\* When having difficulties in paying the insurance premiums due to a disaster, etc., please contact the municipal office in your place of residence.

## Exemption from or reduction of insurance premiums

Premiums may be reduced in cases where payment becomes extremely difficult due to some special circumstances.

Based on the application, a review will be conducted and a reduction or exemption of insurance premiums will be determined.

As a general rule, applications for insurance premium reduction or exemption must be made within the current fiscal year (for FY 2024, applications must be made by March 28, 2025).

For more information, please contact the municipal office in your place of residence.

Nature of event	Criteria for exemption / reduction
<b>Disaster</b>	When the insured person's*1 property is damaged to a certain extent due to earthquake, wind and flood, fire, etc.
<b>Decrease in income</b> *2	In case of suspension/abolition of business operation, unemployment, etc., resulting in the loss of more than 30% of the insured person's*1 income compared to the previous year or if income falls below 3,100,000 yen.
<b>Welfare recipient</b>	In case of receiving welfare benefits
<b>Limitation on benefits</b>	Unable to receive benefits due to imprisonment in a penal/criminal facility for a period of months.

\*1 Insured persons includes the insured householder belonging to the same household as the insured individual as well as other insured persons.

\*2 At the time of application, an interview will be conducted to confirm asset status, living situation as well as request submission of bankbook copies (for the head of household and all insured persons).



## Introduction to the health insurance program

Health insurance programs such as health promotion, frailty prevention, etc., are being implemented to enable everyone to lead an independent daily life for a long time.

(\*Frailty is a condition in which the mind and body are weakened by aging)

### ● Health examination / Dental examination

See pages 21 and 22 for details.

### ● Health consultation

Target individuals are extracted based on the results of health examinations, etc., and health guidance is provided by telephone or visitation.

### ● Promoting proper medication administration

Sending notifications to people taking multiple medications, helps create an opportunity to review the proper use of medication and contributes to improving the way people take their medicines.

### ● Integrated implementation of health services and nursing care prevention for the elderly

In addition to visiting and providing guidance to insured persons, each municipality will work in tandem to provide health education, frailty status awareness, etc.

### ● Healthy and longevity diary

Diary-style booklets encouraging health promotion practice are distributed at the municipal office counter.

# Let's get a health checkup once a year!

Health examinations are conducted in order to promote and maintain everyone's health through the prevention, early detection and treatment of life-style related diseases. A medical consultation form will be sent giving out details regarding checkup procedures, etc.

This also includes those who are undergoing treatment for lifestyle-related diseases.

To request a reissuance of the medical consultation form due to loss, consult with the Wide-Area Association for assistance.

## ● Individuals eligible for consultation

All insured persons

However, those hospitalized for long periods and some admitted in facilities are excluded.

## ● Consultation period

From April 2024 to March 2025

## ● Medical institutions conducting the examination and health checkup items

Medical institutions designated by the Wide Area Organization  
The main items in the health checkup includes physical measurement, blood pressure measurement, blood (fat) lipid test, liver function test, blood glucose test, urine test, etc.

Please call the medical institution conducting the health checkup to make a reservation before going for consultation. Contact the Wide Area Association for assistance, if unable to confirm which medical institution is conducting the health checkup.

## ● Things to bring when going for consultation

- ① Health Insurance Card (or My Number Card that has been registered for use as health insurance card)
- ② Consultation form
- ③ Copayment amount (500 yen)
- ④ Previous year's health checkup results (if available)

Consultation forms are sent out at around the later part of April each year. (For those turning 75 years of age, the forms will be sent at around the 10th of their birth month)

## Caution!

For cancer screening, please contact the municipal office where your residence is located.



# Let's get a dental health checkup!

Dental health checkups are being conducted through the Wide Area Association to prevent oral dysfunction and diseases such as pneumonia, etc.

Those who will turn 76 and 80 years old within this year can have a checkup once a year.

For those who are eligible, a consultation ticket will be sent at around the later part of May. For those who did not receive the consultation ticket, please contact the Wide Area Association.

## ● Individuals eligible for consultation

Insured persons born between April 1, 1944 and March 31, 1949 who will turn 76 and 80 years old this year

However, those who are in long-term hospitalization or in facilities such as special nursing homes, etc., are not eligible.

## ● Consultation period

From June to December 2024  
(Excluding dental clinic holidays)

## ● Dental institutions conducting the examination and dental checkup items

Dental institutions designated by the Wide Area Organization (A list will be enclosed with the consultation ticket)  
Questionnaire, teeth and gums health checkup, denture condition checkup, oral function checkup, etc.

## ● Things to bring when going for consultation

- ① Health Insurance Card  
(or My Number Card that has been registered for use as health insurance card)
- ② Consultation form  
(Please fill out and submit to the dental clinic)
- ③ Copayment amount (300 yen)

# Beware of “refund” fraud!



- ⚠ An agent from the Wide-Area Association or municipal office will never request to operate an ATM machine for an applicant.
- ⚠ Messages urging to “send via letter packs and cash courier service” are all fraud. Avoid sending anything at all costs.

## For more details and inquiries:



Consult with the public office where you live

\_\_\_\_\_ — \_\_\_\_\_ — \_\_\_\_\_

Please fill in the telephone number of the municipality referring to the enclosed “Contact List for Inquiries and Application” if necessary.

or

with the **Fukuoka Prefecture Wide-Area Association of Latter-Stage Elderly Healthcare**

Address : 4-1-27 Chiyo, Hakata Ward, **Fukuoka City** Postal Code: 812-0044

Website : <https://www.fukuoka-kouki.jp/>

**Consultation  
hours**

**Weekdays: 8:30 AM to 5:30 PM**

(closed on Saturdays, Sundays and public holidays)

**Telephone  
number**

**092-651-3111**

\*Kindly check the number when calling to avoid dialing the wrong number.

**FAX**

**092-651-3901**

\*Transmissions by FAX are intended for those with language or hearing disabilities.

(Some inquiries regarding payment procedures for insurance premiums, payment demand, etc., may only be handled by the municipal office)



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