

INFORMATION FOR FOREIGN NATIONALS WHO ENROLL IN THE KOBE CITY NATIONAL HEALTH INSURANCE SYSTEM

The National Health Insurance is a mutual support system that ensures that everyone enrolled can receive medical treatment in case of an illness or injury. If you present your health insurance card at the hospital, you will be able to receive medical treatment for a fraction (30%) of its cost. There is also a ceiling amount for out-of-pocket expenses, so should you require expensive treatment, you can apply for a refund of the fees you paid in excess of this ceiling amount.

Foreign nationals under the age of 74, who are going to be registered as residents in Kobe for more than three months and are not covered by any other public health insurance program, must enroll in the National Health Insurance System. Please note that having overseas travel insurance is not the same as being enrolled in a public health insurance program. Moreover, even if your current period of stay is shorter than three months, if you live in Kobe and your status of residence is either Entertainer, Technical Intern Training, Dependent, or Designated Activities*, you must enroll in the National Health Insurance System in case you are expected to stay in Japan in excess of three months based on the documents you submitted.

*The following “Designated Activities” are excluded:

- Receiving medical treatment
- Activities supporting the daily needs of a person receiving medical treatment
- Tourism, recreation and other similar activities
- Spouses accompanying those taking part in tourism, recreation or similar activities

HOW TO ENROLL IN THE NATIONAL HEALTH INSURANCE SYSTEM

*Please note that you may be asked to provide your Individual Number on the application.

You must carry out the enrollment procedures when...	Required Documents <small>(Make sure to bring your Passport, Residence Card or Special Permanent Resident Certificate (Alien Registration Card), and seal)</small>
You move to Kobe from outside of the city	<ul style="list-style-type: none"> ● If a new person is added to an existing household, <u>Health Insurance Card of the head of household</u>
You move from another ward within Kobe (including relocations between the jurisdictions of Suma Ward Office and Kita Suma Branch Office)	<ul style="list-style-type: none"> ● <u>Health Insurance Card</u> issued by the ward from which you are moving ● If a new person is added to an existing household, <u>Health Insurance Card of the head of household</u> issued by the ward you move into
You lose eligibility for other health insurance programs due to: <ul style="list-style-type: none"> ● Resignation or retirement (except if you apply for voluntary continuous coverage) ● Termination of voluntary continuous coverage ● Loss of eligibility as a dependent 	<ul style="list-style-type: none"> ● If a new person is added to an existing household, <u>Health Insurance Card of the head of household</u> ● <u>Certificate of Loss of Health Insurance Eligibility</u>
When you have a child	<ul style="list-style-type: none"> ● <u>Maternal and Child Health Handbook</u> ● <u>Health Insurance Card of the head of household</u>
When your public assistance is discontinued or suspended	<ul style="list-style-type: none"> ● <u>Public Assistance Discontinuation (Suspension) Notice</u>

Please note that if your name is removed from the resident record due to a change in your residence status or other reasons while you are enrolled in the National Health Insurance System, we may need to confirm your status of residence.

◆ Please file an application for enrollment in the National Health Insurance System within 14 days.

WHAT TO DO IF YOU NEED TO GO TO A HEALTHCARE INSTITUTION BEFORE RECEIVING YOUR HEALTH INSURANCE CARD

If you need to receive medical treatment, but cannot present your Health Insurance Card because it is in the process of being issued, you will first have to pay for all medical expenses out of pocket, and afterwards you will be reimbursed for the portion covered by insurance benefits. In order to receive this reimbursement, you will have to file an application with the National Health Insurance Service Desk at your local ward or branch office and submit all the necessary documents, such as the statement of medical treatment and expenses, and a payment receipt. (You will be reimbursed within two to three months.)

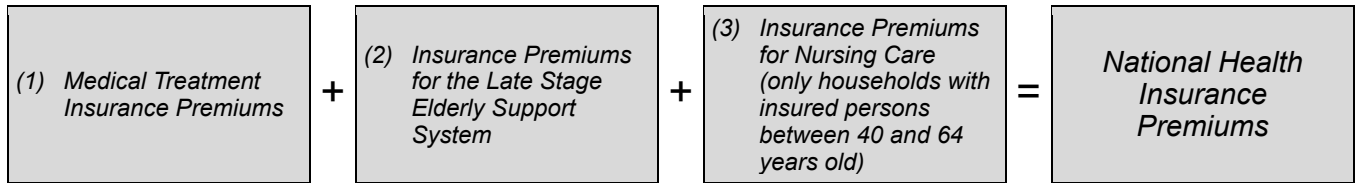
- ◆ If you do not file your application in time, you may not be able to receive insurance benefits.

WHAT TO DO IN CASE YOU DO NOT UNDERSTAND JAPANESE

- (1) Ward office service desks may be unable to provide services in foreign languages. Therefore, if you would like to receive a consultation or file an application at a ward office, if possible, please come with someone who speaks Japanese.
- (2) The Kobe International Community Center (KICC) provides free interpreting services for foreign citizens with limited Japanese language skills, who want to make inquiries or seek consultation at ward offices or other government institutions in Kobe. Interpreting assistance is available in English, Chinese, Korean, Spanish, Portuguese, Vietnamese, Filipino, Nepalese, Thai and Indonesian. (Prior reservation required.)

[TEL] 078-742-8721 [URL] <https://www.kicc.jp/ja/aboutkicc>

INSURANCE PREMIUMS FOR FISCAL YEAR 2022



Insurance Premiums for (1) Medical Treatment, (2) Late Stage Elderly Support System and (3) Nursing Care are each calculated based on three factors, as follows:

(1) Medical Treatment Insurance Premiums	<p>(1) Income-based premium (charged based on the total income of all enrolled household members) FY2022 income for calculation purposes × 8.41% (total income for calculation purposes of all insured persons)</p> <p>(2) Per-insured person premium (charged based on the number of enrolled household members) ¥34,270 × Number of enrolled household members</p> <p>(3) Per-household premium (fixed amount charged to every household) ¥22,550</p> <p>(1) + (2) + (3) = Annual insurance premium (¥650,000 if the total exceeds ¥650,000)</p>
(2) Insurance Premiums for the Late Stage Elderly Support System	<p>(1) Income-based premium (charged based on the total income of all enrolled household members) FY2022 income for calculation purposes × 2.98% (total income for calculation purposes of all insured persons)</p> <p>(2) Per-insured person premium (charged based on the number of enrolled household members) ¥11,750 × Number of enrolled household members</p> <p>(3) Per-household premium (fixed amount charged to every household) ¥7,730</p> <p>(1) + (2) + (3) = Annual insurance premium (¥200,000 if the total exceeds ¥200,000)</p>
(3) Insurance Premiums for Nursing Care	<p><i>Note: applicable only for households with insured persons between 40 and 64 years old</i></p> <p>(1) Income-based premium FY2022 income for calculation purposes × 3.14% (total income for calculation purposes of all insured persons aged 40 to 64 years old)</p> <p>(2) Per-insured person premium ¥14,660 × Number of enrolled household members aged 40 to 64 years old</p> <p>(3) Per-household premium (fixed amount charged to every household) ¥6,950</p> <p>(1) + (2) + (3) = Annual insurance premium (¥170,000 if the total exceeds ¥170,000)</p>

- ❖ If you enroll or withdraw from the National Health Insurance System in the middle of a fiscal year, your insurance premiums will be prorated on a monthly basis.
- ❖ Your actual insurance premiums may be lower than the amount resulting from the aforementioned formula, once various reductions are taken into account.
- ❖ In order to ensure that your insurance premiums are calculated correctly, please make sure to file your tax returns in a timely fashion.

■ **When do I need to start paying insurance premiums?**

Insurance premiums are charged from the month in which you become eligible for enrollment in the National Health Insurance System (not from the month when you actually applied for enrollment). If you fail to enroll in the National Health Insurance System in due time, you will be charged the insurance premiums retroactively (for up to two years).

■ **Insurance premiums for one year must be paid in monthly installments from June to March of the next year (ten installments in total)**

If you enroll in the middle of a fiscal year, you must pay your insurance premiums for the period starting from the month in which you became eligible. You will have to pay them in monthly installments starting from the month you enrolled or the following month, through March of the next year.

■ **Insurance premium payments are due on the last day of each month (the following business day, if the last day of the month is a bank holiday)**

If you set up an automatic bank transfer, the insurance premium payments will be charged to your account on the 27th of each month (the following business day, if the 27th falls on a bank holiday).

**SETTING UP AN AUTOMATIC BANK TRANSFER IS A SAFE
AND EASY WAY TO PAY YOUR INSURANCE PREMIUMS**

You can set up automatic bank transfers at various financial institutions, such as banks, shinkin banks, credit unions and agricultural cooperatives, as well as the Japan Post Bank and post offices.

- ***If you experience a significant decline in income due to resignation, retirement, bankruptcy or other reasons, you may be eligible for a reduction or an exemption from paying your insurance premiums. Should such a situation arise, please contact us for consultation.***