

National Health Insurance (NHI) Guidebook 2025



Insurance premiums must be paid by automatic bank transfer. Please complete the bank transfer registration procedures. ▶ p15

Please use your My Number Card as your health insurance card. ▶ p1-2

If your period of stay or residence status changes, please come complete the appropriate procedures. ▶ p3-4

Even if you have no income or low income, you must file an income tax report. ▶ p10

Pay your premiums by the deadline. Payment methods: ▶ p15-17

If you don't pay your premiums ▶ p17-18



National Health Insurance Section Service Counters

<ul style="list-style-type: none"> • Use of My Number Card as health insurance card • Enrollment and withdrawal procedures • Income declaration matters • Insurance premium matters • Premium reduction matters • Premium payment methods 	Qualification and Premium Group
<ul style="list-style-type: none"> • Matters related to non-payment of premiums 	Filing and Premium Collection Group
<ul style="list-style-type: none"> • Insurance benefits • Medical treatments not covered by insurance • Medical expense matters • Overseas medical expenses, high medical expenses • Childbirth lump-sum benefit 	Benefits Group

Information Desk

<ul style="list-style-type: none"> • Specially designated health checkups and health guidance • Diabetes prevention 	Community Health Section
<ul style="list-style-type: none"> • Long-term Care Insurance system 	Long-term Care Insurance Section
<ul style="list-style-type: none"> • The Medical Care System for Older Senior Citizens 	Health Insurance for the Elderly, National Pension Section

Contact Information

Toshima City Call Center

03-3981-1111 (Main switchboard)

(8:00 AM to 6:00 PM, also open Saturdays and Sundays)

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Note: Information in this booklet is current as of April 2025

1. What is the National Health Insurance System?

Japan's national health insurance system is a social insurance system in which members contribute to ensure that 'medical expenses are paid for all.' National Health Insurance (NHI) is one such medical insurance system.

Under this system, all residents of Japan, including foreign residents, must enroll in a public health insurance program and pay premiums.

Those who are enrolled are entitled to receive treatments with lower personal expense and can apply for payment of medical expenses, etc.

While those who are enrolled in national health insurance enjoy the 'right' to receive treatments covered by the insurance, they also bear the 'obligation' to pay premiums.

All NHI members must pay premiums even if they never go to the hospital.

2. Using My Number Card as a Health Insurance Card (Myna Health Insurance Card)

(1) Myna Health Insurance Card and Related Documents

- 1) The “Myna Health Insurance Card” refers to an Individual Number (“My Number”) card that has been registered for use as a Health Insurance Card.

You must register in advance to use your Individual Number card as a Health Insurance card. Visit the website to learn how to register:

(https://myna.go.jp/html/hokenshoriyou_top.html)



- 2) “Eligibility Confirmation Form” and “Notification of Eligibility Information”

- For those who do not have Myna Health Insurance Card:

...A **“Eligibility Confirmation Form”** will be issued.

Show this at medical institutions in place of a Health Insurance card.

- For those who have Myna Health Insurance Card:

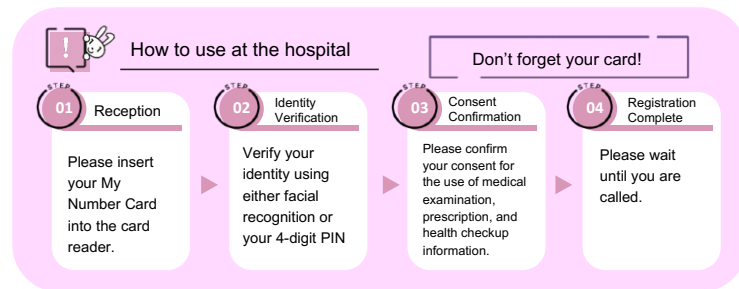
...A **“Notification of Eligibility Information”** will be issued.

Show this together with your Myna Health Insurance Card when card readers cannot be used at medical institutions. You can also check your health insurance information through the Mynaportal.

- 3) Other Information

- Notifications for enrolling, withdrawing and changing information for NHI will still be required as before.
- You can begin using your Myna Health Insurance Card a few days after completing the procedures.

(2) How to Use Myna Health Insurance Card at Medical Institutions



If you do not have Myna Health Insurance Card, please present your Eligibility Confirmation Form at the reception desk.



(3) Validity Period

The validity period for Myna Health Insurance Card and Eligibility Confirmation Form is set based on your period of stay. Expired documents cannot be used.

If your period of stay is renewed:

- 1) For Myna Health Insurance Card holders:
Complete your Individual Number Card renewal procedures. No procedures at the NHI Section are necessary.
- 2) For Eligibility Confirmation Form holders:
Once Toshima City confirms your period of stay renewal, a new Eligibility Confirmation Form will be sent to you.

When extending your period of stay, be sure to complete the extension procedures at the Immigration Services Agency before your current period expires.

(4) Handling of Myna Health Insurance Card and Related Documents

- 1) If your documents are lost or damaged and become unusable, please apply for reissuance.
- 2) The following people lose their NHI eligibility and cannot use Myna Health Insurance Card or Eligibility Confirmation Form. Please return the Eligibility Confirmation Form immediately:
 - (i) If your period of stay expires
 - (ii) If your residence status changes to "Designated Activities" and your activities become:
 - "Activities to receive medical treatment" or "Activities to take care of daily life"
 - "Tourism, recreation, or similar activities"
- 3) The Myna Health Insurance Card, Eligibility Confirmation Form, and Notification of Eligibility Information cannot be used by anyone other than the member him/herself.

[Frequently Asked Questions]

- Q1:** How can I confirm if my Myna Health Insurance Card registration has been completed correctly?
- A1:** You can check your registration status by logging into Mynaportal. If registration is complete, it will display the message, "Registration is Complete."
- Q2:** Is the Myna Health Insurance Card mandatory?
- A2:** The Myna Health Insurance Card is not mandatory. Even without the Myna Health Insurance Card, you can still receive insurance-covered medical treatment by using an "Eligibility Confirmation Form" as before.
- Q3:** Do I need to show my Myna Health Insurance Card every time?
- A3:** You must show it each time you visit a medical institution. Additionally, you must give consent each time for the provision of your medical treatment and prescription information.

Q4: What are the benefits of using a Myna Health Insurance Card?

A4: There are three main benefits:

- Exemption from temporary payment of high medical expenses.
- Ability to check your prescription and health check-up information at any time.
- Simplified medical expense deduction process when filing tax returns.



3. Enrollment in National Health Insurance

(1) People Who Must Join National Health Insurance

Those who are registered as residents in Toshima City (except those who fall under (2) below) must all join NHI. It is not up to the individual to make the choice of enrollment or membership termination.

Application for enrollment, change, termination, etc. must be done within 14 days of the reason for such procedure(s).

Note: You must enroll in National Health Insurance even if you are enrolled in foreign student life insurance, life insurance with health benefits or travel casualty insurance (as these types of insurance are not considered public health insurance in Japan.)

(2) Those Who Cannot Join National Health Insurance

Even if they reside in Toshima City and are registered as residents, those who fall under the following categories cannot join NHI:

- 1) Those who have joined (or are dependents of) another public health insurance system (such as employees' health insurance programs or the Japan Health Insurance Association's health insurance plans)

- 2) Those receiving livelihood assistance
- 3) Those whose period of stay in Japan is three months or less*
 - * Even if your period of stay is three months or less, you may be eligible to join NHI if you can prove that you will be residing in Japan for more than three months, such as with an employment contract. (This excludes those with short-stay visas and those without visas.) In addition, persons already enrolled in NHI may retain their memberships even if their visa period is changed to three months or less.
Please bring your passport and residence card to complete the procedures.
- 4) Among persons with a “designated activities” visa status, those who:
 - Are engaged in “activities to receive medical treatment” or “activities to take care of daily life”
 - Are engaged in “tourism, recreation, or similar activities”
- 5) Those who are 75 years old or older (must enroll in the Medical Care System for Older Senior Citizens instead of National Health Insurance) (▶p36)

(3) Enrollment Procedures

Within 14 days of the following, you must complete procedures for membership at the NHI Section or Residents Office. Insurance premiums must be paid by automatic bank transfer. When completing procedures, please bring the cash card of the financial institution you wish to use for transfers (▶p16).

When enrolling in NHI:

- 1) When moving into Toshima City (immigrating to Japan)
- 2) Termination of membership in another public health insurance system (employees' health insurance programs or the Japan Health Insurance Association's health insurance plans)

- 3) Birth of a child
- 4) Termination of livelihood assistance

(Documents required for procedures 1) to 4))

	Required Items
1)	No procedures necessary
2)	Document showing the date of loss of eligibility for previous health insurance
3)	No procedures necessary
4)	Notice of termination of public assistance

Note: For 1) and 3), after completing resident registration or birth notification at the General Reception Desk or Residents Office, an Eligibility Confirmation Form or Notification of Eligibility Information will be mailed to your home. If you need same-day issuance, please bring identification documents (►p8) to the NHI Section or Residents Office.

(4) Receiving Your Eligibility Confirmation Form or Notification of Eligibility Information

Eligibility Confirmation Forms are sent via registered mail, and the Notification of Eligibility Information via regular mail. Please put your name on your mailbox. If delivery cannot be completed because of an unclear address or other reasons, you need to apply for redelivery at the NHI Section or Residents Office. If you need your documents immediately, bring an ID document (one of those listed below) when submitting an application for membership or reissuance:

Note: Must be original and still valid.

- Individual Number ("My Number") card (with ID photo)
- Passport
- Residence card or special permanent resident certificate
- Other documents that certify your identity issued by a public agency (with photo and listing name and date of birth)

Note:

- Those with “designated activities” visa status must also bring their designation certificate.
- If the service counter is extremely busy, you may not be able to obtain your certificate on that day even if you show the valid ID listed above. Your certificate will be delivered by mail.

(5) If You Are Late in Applying for Enrollment

You will be asked to pay the premium from the month you join NHI. Even if you are late in applying, you will be required to pay premiums retroactively for up to two years. Furthermore, while you are uninsured, you must pay the full cost of any medical expenses incurred.

4. Termination of Membership

Please complete procedures within **14 days** in the following cases:

- 1) Departure from Toshima City (departing Japan)
First, file a notification at the General Reception Desk or Residents Office.
 - Please complete enrollment procedures for membership once again in your new city, town, or village.
 - **If you fail to file the notification when leaving Japan, insurance premiums will continue to be levied as long as your resident record is kept.**
 - Please file a “moving-out overseas notification” if you will be out of Japan for a long period.
- 2) When joining another public health insurance system (such as an employees’ health insurance program or Japan Health Insurance Association’s health insurance plan)

Please submit your notification through electronic application using the QR code below.



You can also complete procedures at the NHI Section or Residents Office.

Please bring the following:

- Your Myna Health Insurance Card or Eligibility Confirmation Form
- Either the “Eligibility Confirmation Form” from your new employer’s health insurance or your “My Number Card and Notification of Eligibility Information”

Note: If you do not complete withdrawal procedures, you will be enrolled in both health insurance systems and will be charged NHI premiums.

- **You must not use Toshima City NHI documents after moving out of Toshima City (leaving Japan) or joining another health insurance through your employer.**
- **You cannot refuse to join NHI for reasons such as “I probably won’t get sick” or “I don’t want to pay premiums.”**

5. Other Procedures

If you have changed your address or name within Toshima City, please visit the General Reception Desk or Residents Office. Bring the Eligibility Confirmation Forms or Notification of Eligibility Information for all affected household members.

For procedures at the General Reception Desk:

New documents will be mailed to your home later. If you need same-day issuance, please also visit the NHI Section.

For procedures at the Residents Office:

New documents will be issued on the same day.

Note: Designated identification documents are required for same-day issuance. (▶p8)

6. Please File an Income Tax Report (Income for the Previous Year) within the Filing Period (February 16 to March 15 Every Year)

National Health Insurance premiums are calculated based on total income.

Filing an income report ensures your premium amounts and high medical expense categories are calculated correctly. Please file an income tax report within the report period even if you don't have income or your income is low.

The tax report should be filed with the tax section of the municipal office of the address where you were registered as a resident on January 1 of that year.

○ If you came to Japan on or before January 1, 2025

Please file a resident's tax report at the municipal office where you were registered as of January 1, 2025.

○ If you came to Japan on or after January 2, 2025

If you have just come to Japan and were not in Japan the previous year, please file a "National Health Insurance Premium-related Report" and submit it to the NHI Section.



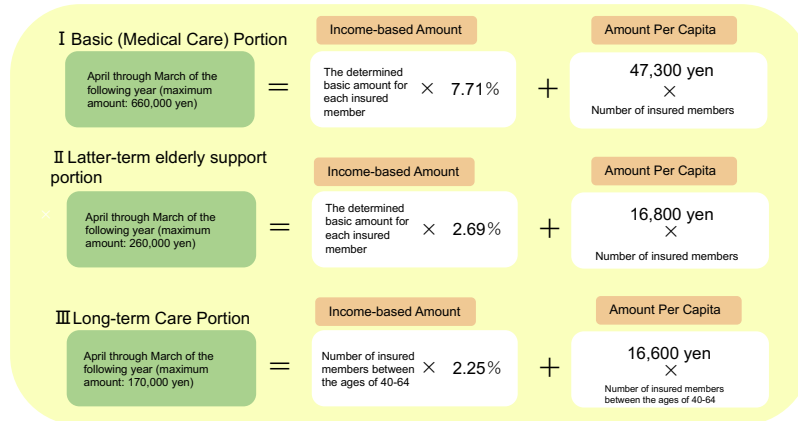
7. Insurance Premiums

(1) How Premiums are Calculated

- Premiums are calculated by the fiscal year (April through March of the following year.)
- The amount is determined by your income in Japan from January through December of the previous year.

- Premiums are calculated monthly. You must pay from the month you join until the month before you withdraw.

$$\text{Determined Basic Amount} = \text{Total Income, etc. During 2024} - 430,000 \text{ yen}$$

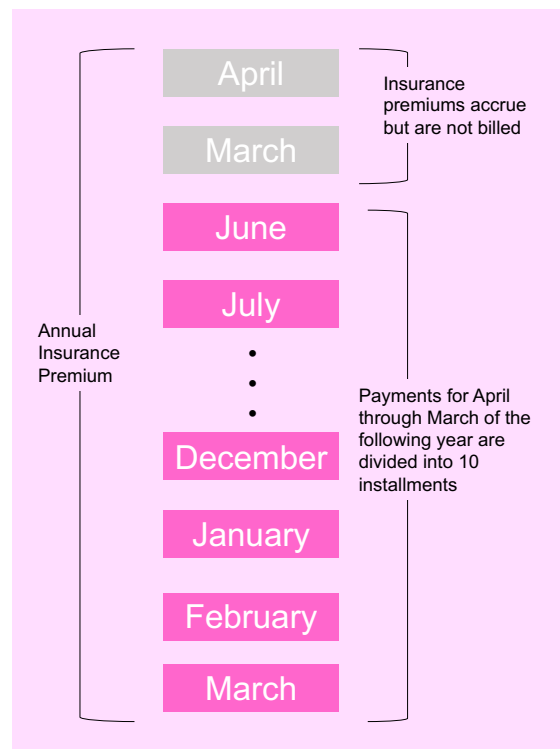


(2) Premium Notifications

Insurance premiums are determined every June.

The “National Health Insurance Premium Notification” will be sent in mid-June.

(Payment Schedule)



- Payments are made in 10 installments from June through March of the following year.
- Payments must be made via automatic bank transfer.
- Those whose determined basic amount field shows “Un-declared” must file an income report (▶p10)
- You will receive a “National Health Insurance Premium Adjustment Notice” if there are changes to total income or household membership after June.

Notes Regarding Insurance Premiums

- 1) Insurance premiums are calculated starting from the month you become eligible for NHI membership.
For example, if you withdraw from employees’ health insurance in May and file an application in August for enrollment in NHI, you must pay premiums dating back from May (retroactive payments dating back to a maximum of two years may be charged.)
- 2) **Insurance premiums for those who have just moved into Toshima City may later be increased**
Insurance premiums for those who have just moved into Toshima City are initially calculated only with the per capita amount. Toshima City will later ask your old municipality where you were registered on January 1 of that year for the amount of total income, etc. Depending on the amount, the income-derived amount of your insurance premiums may be recalculated and you will receive a National Health Insurance premiums adjustment notification.
- 3) **Insurance premiums for those who terminate membership in the middle of the fiscal year**
 - (i) If the entire household terminates their membership
 - The insurance premiums will be recalculated for the portion up to the month prior to termination
 - If there is a balance due, you may have to pay it after the month of termination

- If there has been an overpayment, you will receive a refund at a later date
- (ii) If only some members of the household terminate membership
The insurance premiums will be recalculated, and the balance due will be divided into installments up to March.

8. When Insurance Premiums Can Be Reduced

There are no student discount programs for NHI premiums. However, premiums may be reduced in the following cases:

(1) Households with income below certain standards for 2024

If the previous year's income of NHI members (including the head of household, regardless of whether they are an NHI member) is below the reduced designated standard, the per capita amount of the insurance premium will also be reduced. No application to the NHI Section is required.

Income Reduction Standard	Reduction Rate	Per Capita Amount (Annual) per Person		
		Basic (Medical Care) Portion	Latter-term elderly support portion	Long-term Care Portion
430,000 yen + 100,000 yen × (number of salary income earners, etc. - 1)	70%	14,190 yen	5,040 yen	4,980 yen
430,000yen + 305,000yen × number of enrollees +100,000yen × (number of salary income earners, etc. - 1)	50%	23,650 yen	8,400 yen	8,300 yen
430,000yen +560,000yen × number of enrollees +100,000yen × (number of salary income earners, etc. - 1)	20%	37,840 yen	13,440 yen	13,280 yen

(2) Preschool children

The per capita amount will be reduced by half for preschool children in all households. **No application is required.**

(3) Those who are expecting or have given birth

If you are enrolled in Toshima City NHI during the prenatal and postpartum periods, your NHI premiums will be reduced during that time.

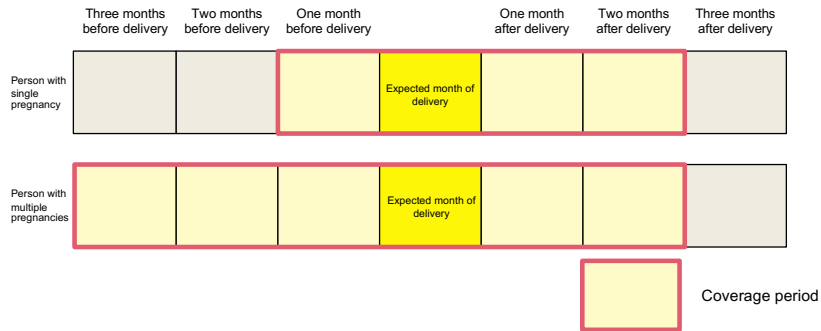
For more information on notifications, please check the Toshima City website.



[Reduction Period]

Four months from the month before the expected month of childbirth

For multiple pregnancies, for six months from three months before the expected month of childbirth



[Eligibility]

Those expecting a child or who have given birth

Note: Includes delivery after a pregnancy of 48 days or more, including stillbirths, miscarriages, and abortions.

If you use Toshima City’s childbirth lump-sum payment system (▶p23), no notification is required.

(4) Those who have lost their jobs

For those who have involuntarily lost their jobs due to bankruptcy, dismissal, etc., salary income will be calculated at 30% of the actual amount for premium calculation purposes.

[Eligibility]

Those who meet all the following conditions:

- Under 65 years of age
- Have an Employment Insurance Eligibility Confirmation Form or Employment Insurance Qualification Notice with separation reason codes "11, 12, 21, 22, 23, 31, 32, 33, 34"

[Application Method]

Please apply through electronic application using the QR code on the right. Applications can also be submitted at the NHI Section service counter.



9. Methods of Premium Payment

(1) Bank Transfer (standard method)

Premium payments are made by bank transfer.

Please register for bank transfer when completing NHI enrollment procedures.

The transfer date is the last day of each month (or the next business day if the last day falls on a financial institution holiday). Please ensure funds are deposited in your account by the day before.

[Application Methods]

- At the service counter

Bring your cash card. Applications are accepted at the NHI Section and Residents Office. Please check the QR code below for eligible financial institutions.



- By mail

Easy 3-step process: fill out, seal, and mail. Bank transfers will begin approximately two months after the month of application.

How to obtain bank transfer request forms:

- At the NHI Section and Residents Office counters
- **Through electronic application (apply using the QR code below)**



(2) For those without a bank account

If there are no changes to the annual premium amount, payment slips are sent only once a year in June. Please pay by the last day of each month (or the next business day if the last day falls on a financial institution holiday) at any of the following:

- Your nearest convenience store
- Financial institutions
- Public payment counter on the 3rd floor of the Toshima City Office
- Residents Office

If you lose your payment slip, please contact the NHI Section with documentation showing your code and number (eligibility confirmation certificate, eligibility information notice, etc.). A new payment slip will be sent to you.

(3) Payment through the “Mobile Regi” service (credit payment)

To use this service, you must download the app onto your cellphone in advance. Scan the bar code on your invoice through your cellphone camera and enter your credit card information.

(4) Payment through “Mobile Regi” service (mobile banking payment)

To use this service, you must first apply for mobile banking with the financial institution you would like to use and

download the application onto your cellphone. Scan the bar code on your invoice through your cellphone camera and connect to your mobile banking service to make the payment.

(5) Payment through “e-money”

Payment can be made through PayPay, au Pay, Rakuten Pay, J-coin, and d-barai. More e-money transfer options may become available, so please inquire for more information.

To use this service, you must first download the app onto your cellphone. Scan the barcode on your invoice through your cellphone camera and pay by e-money through the app.



(6) Deduction from pension

Some conditions apply in relation to household eligibility. Please inquire for details.

10. If You Don't Pay Your Premiums

If you have special circumstances that prevent you from paying your premiums, do not leave them unpaid – please contact us as soon as possible about your circumstances so that we can set up a payment plan for you.

Even if your insurance premium is low for the first fiscal year you are in Japan, it will increase from the following year if you earn a salary from a part-time job or the like. It is smart to reserve a part of your income to pay your premiums for the upcoming fiscal year.

- (1) If premiums are not paid by the due date, reminder notices will be sent. If you continue to leave your premiums unpaid, you may also be notified by letter, phone, personal visits or SMS (short message service).
- (2) If you still have not paid your premiums even after you have been sent reminder notices, your assets (salaries,

real estate, savings, etc.) will be assessed and seized according to the law. For example, we will ask your employer or part-time job about the amount of wages you are paid, the account to which your wages are transferred, and other information, and seize any disposable income wages if we find them.

- (3) If payments are delayed continuously, you may become eligible for special medical expense benefits. In this case, you will need to pay all your medical expenses upfront when being treated at a hospital or other medical institution. You can apply for reimbursement of these expenses (excluding the amount you paid yourself) later, but the amount may be applied to cover the delayed premium payments.
- (4) **If a foreigner who is a “specified skilled worker” de- faults on insurance premiums for NHI/national pension for a certain period of time, or defaults on income tax, etc. for a certain period of time due to circumstances attributable to themselves, the Ministry of Justice will not approve Application for Change of Status of Residence or Application for Extension of Period of Stay; the Ministry of Justice also considers similar measures for foreigners who possess other residence statuses.**

11. Insurance Benefits

If you are ill or injured, please show your Myna Health Insurance Card or other appropriate documentation at a hospital or other medical institution to receive the necessary treatment. When you receive treatment, you will be paying 30% of the medical expenses (20% for those up to six years old until the first March 31 after their sixth birthday; and 20% or 30% for those 70 years old to 74 years old depending on income) at the medical institutions. The remaining expenses will be paid by Toshima City.

If you do not show your Myna Health Insurance Card or other appropriate documentation when visiting a medical institution, you will have to pay the full amount of medical fees at the medical institution.

If you use your Myna Health Insurance Card or other documentation after you have already moved out of Toshima City, lost your eligibility due to visa expiration, joined another health insurance through your workplace or the like, you will be charged by Toshima City for all medical expenses the city has covered on your behalf.

Please note that using someone else's Myna Health insurance card or other documentation is punishable by law.

12. Treatment Not Covered by Insurance

The following items are not covered by insurance. You will have to pay the full amount:

- 1) General medical checkup, complete physical examination, preventative vaccinations
- 2) Normal pregnancy and delivery, cosmetic surgery or treatments, orthodontics
- 3) Work-related injuries or diseases (these are covered by workers' accident compensation insurance plan.)
- 4) Medical treatment not covered by insurance provided upon the request of the patient
- 5) Extra fee for hospitalization in a special patient bedroom
- 6) Special dental treatment not covered by health insurance (e.g., treatment using special materials)
- 7) Injuries incurred while committing a crime, or as a result of intentional actions by the insured
- 8) Injuries or illnesses incurred as a result of a fight or excessive drinking

13. Medical Expenses (When Visiting a Hospital Without Your Myna Health Insurance Card or Other Documentation)

If you receive medical treatment without showing your Myna Health Insurance Card or other appropriate documentation because of some unexpected reason, such as an emergency, the total cost must temporarily be personally borne. By applying afterward, you can receive reimbursement for the amount excluding your personally borne portion. The amount reimbursed will be what is deemed appropriate by the review board.

The application period is for two years from the day after you receive medical treatment. It takes about three months to process the application.

[Required Documents]

- 1) Detailed breakdown of the medical fee
- 2) Receipts
- 3) Personal identification document
- 4) Document to confirm your bank account number (such as a cash card)
- 5) Name stamp of the head of household (if the household head is a foreign national, a signature is acceptable)

Note: If you do not enroll in NHI within 14 days of becoming eligible, unless there is an unavoidable reason for not enrolling, you are responsible for all medical expenses incurred during the period you were not enrolled and cannot apply for a refund of medical expenses.

Overseas Medical Expenses

When medical treatment is received overseas for an illness or injury, insurance benefits are provided for treatments that would be covered by insurance in Japan. In such cases, benefits are paid according to Japanese insurance treat-

ment standards (not all treatments received overseas are covered). Specifically, the benefit amount will be either the amount determined as the standard for insurance-applicable treatment in Japan (standard amount) or the actual expense, whichever is lower, minus your personally borne portion (20% or 30%). Please apply after returning to Japan. **(This benefit does not apply to cases in which a member travels overseas for the purpose of medical treatment.)**

[Required Items for Applying for a Refund]

- 1) Detailed receipt (if written in a foreign language, a Japanese translation is required)
- 2) Documentation describing the type of medical treatment, such as a Certificate of Medical Treatment (if written in a foreign language, a Japanese translation is required)
- 3) Receipts (if written in a foreign language, a Japanese translation is required)
- 4) Personal identification document
- 5) Document to confirm your bank account number (such as a cash card)
- 6) Name stamp of the head of household (if the household head is a foreign national, a signature is acceptable)
- 7) Passport of the person who received the treatment

Note:

- Please ask for forms 1) and 2) from the Benefits Group (also downloadable from the Toshima City homepage). A doctor must complete these forms.
- The application period is within two years from the day after receiving medical treatment.

14. High Medical Expenses (When Medical Costs Are High)

If the amount you paid personally at a medical institution, etc. exceeds the designated ceiling, you can apply to have the amount you overpaid reimbursed. A notification on “Applying for High Medical Expense Reimbursement” will be mailed to the head of your household at least three months after you receive treatment. Please file your application after you receive the notification.

Note: If you have a medical expense ceiling certificate and show it at a medical institution, you will only have to pay the personally borne ceiling amount. To obtain a medical expense ceiling certificate, please bring your personal identification document to apply. Please note that if your insurance premiums are in arrears, you may not be able to obtain this certificate.

15. Childbirth Lump-Sum Benefit (When a Child Is Born)

When an NHI member in Toshima City gives birth, a payment of 500,000 yen per newborn will be provided.

For the childbirth lump-sum benefit, you can use the “Direct Payment Program,” in which you can have the benefit paid directly to the medical institution, or the “Proxy Recipient Program”. However, please note that some medical institutions do not implement these programs, so please check with your medical institution in advance.

If you used the “Direct Payment Program” and your childbirth costs were below 500,000 yen, or if you do not use these programs, contact the NHI section after the child is born.

Note: Please check page 15 for information on exemption from NHI premiums during the prenatal and postpartum periods.

Type	Payment amount	Necessary items
Childbirth Lump-Sum Benefit	500,000 yen	1) Personal identification document of the person giving birth 2) Maternal and child health handbook (Boshi Techo) 3) Name stamp of the head of household 4) Bank account number 5) Receipt that indicates a detailed breakdown of childbirth expenses (original) 6) Written agreement with the medical institution, etc. (original) * If you gave birth abroad, in addition to 1) to 4) above, a birth certificate (original copy) and Japanese translation of the certificate, as well as the passport (original copy) of the person who gave birth showing the date of departure/entry, are necessary. * 5) and 6) are not required if you are enrolled in the "Proxy Recipient Program." (You must file an application at the Toshima City Office before childbirth. You can do so up to two months before the due date.)
	The above amount applies for stillbirths and miscarriages after pregnancy for 85 days or more	Items 1) to 6), as well as a certificate from a doctor

- **If you gave birth outside of Japan, you can apply for this benefit after returning to Japan.**
- NHI will not provide this benefit to those who received childbirth benefits from another form of public health insurance (employees' health insurance programs or the Japan Health Insurance Association's health insurance plans by Japan Health Insurance Association, etc.).
- The application period is for two years, starting from the day after the day of childbirth (occurrence date).
- **This benefit will not be provided if the member does not have NHI membership on the day of childbirth.**

16. Specially Designated Health Checkups/Specially Designated Health Guidance

Specially designated health checkups and specially designated health guidance focusing on metabolic syndrome are conducted to prevent lifestyle-related illnesses.

(1) Specially Designated Health Checkups

Toshima City NHI members between 40 and 74 years old can receive specially designated health checkups. It is known that people with visceral fat obesity are at high risk of suffering from lifestyle-related illnesses. Because of this, we focus on identifying those who have metabolic syndrome and those who are likely to develop it during these checkups.

(2) Specially Designated Health Guidance

Based on the results of specially designated health checkups, specialists (public health nurses, nutritionists, etc.) provide information and advice to help prevent and improve metabolic syndrome for those who need to improve their lifestyle habits. They support lifestyle improvements.

Prevention is key to maintaining good health. Please review your lifestyle and design a health maintenance routine that suits you. (Health-related privileges are available.)

**Inquiries: Health Group, Community Health Section
03-3987-4660**

17. Diabetes Prevention Health Guidance

Specialists (public health nurses, nutritionists, etc.) provide information about diabetes and advice on how to stabilize blood sugar to potential diabetes patients. By reexamining lifestyle habits, they can help prevent diabetes and support healthier lives.

Those whose HbA1c (glycated hemoglobin) level was between 6.0% and 6.4% on the specially designated health checkups and do not take diabetes medication are eligible. However, this excludes those eligible for specially designated health guidance.

**Inquiries: Health Group, Community Health Section
03-3987-4660**

18. Long-term Care Insurance

Long-term Care Insurance is a society-wide system to support those requiring long-term nursing care and their families when they “start to need long-term care or support.”

NHI members 65 years of age and older are required to pay long-term care insurance premiums separately from NHI premiums.

For NHI members between 40 and 64 years of age, the long-term care insurance premiums are added to the health insurance premiums and paid together.

**Inquiries: Qualifications Assessment Group,
Long-Term Care Insurance Section
03-3981-6376**

To use long-term care insurance services, you will need to apply and receive authorization from the city for needing long-term care (requiring support). For more information regarding eligibility requirements, please inquire with the Long-Term Care Insurance Section.

**Inquiries: Certification Screening Group, Long-Term
Care Insurance Section
03-3981-1368**

19. The Medical Care System for Older Senior Citizens

Residents who are 75 years of age and older will become members of the Medical Care System for Older Senior Citizens.

Please inquire with the Elderly Medical Insurance and Pension Section for more information on eligibility requirements, procedures, and insurance premiums.

**Inquiries: Health Insurance for the Elderly Group;
Health Insurance for the Elderly, National Pension Section
03-3981-1332**

National Health Insurance Section,
Resident Division
Toshima City
2-45-1 Minami-ikebukuro, Toshima-ku, Tokyo
Tel: 03-3981-1111 (Main switchboard)