



Okinawa City

Medical Support for Children

●What is Medical Support for Children?●

A system that supports medical expenses covered by insurance (including expenses for medicine and dental treatment), and meal fees during hospitalization that you have paid. If you are eligible to receive “High-Cost Medical Care” or “Additional Benefits” and such, these amounts will be deducted from your reimbursement.

●Cases NOT Applicable for this System●

※If any of the following applies to you, please notify us in advance. Please note that if you fail to notify after the change of your status, you may have to return the amount that was covered by this service.

①Expenses which are not covered by medical insurance.

(Ex. Copayments such as vaccinations, health checkups, screenings, hospital gowns, amenity bed, diapers, medicine containers, documents, consumption tax, etc.)

②If you receive benefits from other medical subsidy systems.

(Ex. Medical Expense Support for Single parents, Medical Expense Subsidies for People (Children) with Severe Mental and Physical Disabilities, etc.)

③If you are receiving public assistance.

④Expenses for a disease or injury from an activity while under school’s management.

⑤Expenses caused by a third person, such as a car accident.

◆Eligible Age◆ Changes will be made as follows for treatments in October 2018.

Outpatient: From birth (or the day of move-in) until **6th grade of Elementary School.**

Inpatient: From birth (or the day of move-in) until **Junior High School.**

※Or until the previous day of move-out/ or day of death.

Category	Outpatient	Inpatient	Color of Certificate
From birth to under ES	In-kind benefit/ Automatic Reimbursement (including reimbursement with application)	In-kind benefit/ Automatic Reimbursement (including reimbursement with application)	Pink
1 st to 6 th Grade of ES	Automatic Reimbursement (including reimbursement with application)	Automatic Reimbursement (including reimbursement with application)	Orange
1 st – 3 rd Grade of JHS			

※This applies to the child who is registered in Okinawa City and have government medical insurance.

Category of Procedure	Payment to Medical Facility	Certificate	Procedure at City Hall
In-kind benefit	Copayment amount	Need to be shown	No ※
Automatic Reimbursement	Whole amount (Insurance covered)		
Reimbursement			No need

※You might need to take a process if you apply to High-Cost Medical Care/ Additional Benefit.

◆Process [for In-kind Benefit] ◆

Changes will be made as follows for treatments in October 2018!

① **By showing the “recipient certificate” at the hospital payment counter, you don’t have to pay the copayment amount for the treatment covered by insurance. You will have to pay for the cost of meals during the hospital stay, but it will be reimbursed with the “Medical Support for Children” coverage (either through automatic reimbursement, or reimbursement through application). You will receive a receipt for the amount that is not covered by insurance.**

※Please see ◆Eligible Age◆ for reference.

② **Apply for the “Amount Limit Application Certificate” (*Gendogaku Nintei Sho*) in advance!**

If your medical expense becomes too expensive (¥35,400 or more for example), apply for the “Amount Limit Application Certificate” at your insurance administration in advance, and show the certificate when you pay at the hospital. Otherwise, expenses may not be covered by the in-kind benefit.

※Income and tax certificate/Tax exemption certificate may be required, depending on the case.

③ **High-cost Medical Care/Additional Benefit**

If you are using in-kind benefit, and the high-cost medical care/additional benefit is applicable to you, you may get a notice from us for procedures.

④ **Please return the benefit certificate (pink card) !**

Please return your benefit certificate when you move out of Okinawa City. If you keep using this certificate at

the hospital even after you moved, you will have to return the amount that was covered afterwards.

◆**Process [for Automatic Reimbursement]**◆

① **When you go to the hospital and pharmacy after you see the doctor, show your benefit certificate when you pay. You can receive the receipt and not have to visit the city hall to apply for reimbursement. The reimbursement will automatically be paid to your bank account on the last day of the second month (or on the business day right before if it is a holiday) after the day you get treatment.**

※This is not applicable if reports from the hospital are delayed, or we are unable to confirm your high-cost medical care benefit eligibility.

Please check your bank account for the reimbursement as you will not be notified.

◆**Other Process**◆

① **For cases without in-kind benefit/automatic reimbursement**

※Cases include: the hospital has not started the in-kind benefit/automatic reimbursement system yet; you did not show the benefit certificate at payment; you went to a hospital outside of Okinawa; the hospital delays in reporting your in-kind benefit/automatic reimbursement.

Please visit *Kodomo Katei Ka* (Children’s welfare Division) to apply for the reimbursement after the following month from the day you received the medical treatment. The reimbursement will be paid to the registered bank account on the last day of the following month (or on the business day right before if it is a holiday) that you applied.

※Please check your bank account for the reimbursement as you will not be notified.

【Required Documents When You Apply】

- ①Benefit Certificate ②Your child's health insurance certificate
- ③Receipts from the hospital ④Inkan

※We will keep the original receipts. Please make copies if you need them for yourself.

◆Valid Application Period◆

Receipts for treatments after October 2018!

The application period is within 2 years after the following month of the month which you received treatment (medication).

(Please note that it is not the following month from the time of payment!)

※The receipts for treatments up to September 2018 have to be processed.

[It must be within a year after the following month of the month which you received treatment or medication]

◆If You Change Your Bank Account◆

You must notify us of any changes to your bank account, such as the account holder's name, or name of the bank branch. Keep in mind that if you do not notify us, we cannot provide reimbursements.

【What to bring】

- ① New bank account book (no copies) for the money transfer
- ② Beneficiary Certificate ③ Inkan

◆Using “My Number” Information◆ After July 2018

My Number information enables the administrative linkage of tax information regarding child medical expense support system. Contact us for details.

“Shoni Kyukyū Denwa Sodan”

Doctors and nurses will be on the phone to advise you with your children's sudden symptoms, what to do, and if your child needs to go to the hospital.

If #8000 is not available, call **098-888-5230** for advice. **(Japanese only)**



◆What is Deducted From the Reimbursement?◆ (High-Cost Medical Care/ Additional Benefit)

If monthly medical expenses exceed a certain amount, your insurance may provide High-Cost Medical Care or Additional Benefit to cover a part of the cost. If any of these benefits apply to you, Medical Support for Children will cover the remaining amount after these benefits are deducted.

※If any of these benefits apply to you, please provide certification.

☆☆☆Regarding High-Cost Medical Care☆☆☆

When you pay more than 21,000 yen (at 20-30% copayment) of medical fees at a medical facility (pharmacy) per month, we will contact you to confirm if you are applicable for the High-Cost Medical Care benefit. Even if you have shown your Beneficiary Certificate at the time of payment, and have applied for the in-kind benefit or automatic reimbursement system, we will contact you to confirm your eligibility for the High-Cost Medical Care benefit.

In addition, if the cost for medical treatment and medicine per person per month becomes more than 35,400 yen, please apply for the “Amount Limit Application Certificate” at your medical insurance administrative office before you pay the medical cost.

※**We might ask you to submit your *Shotoku Kazei Shomei Sho* (所得課税証明書 Income Taxation Certificate) or your My Number.**

Contact *Kodomo Katei Ka* (Children's Welfare Division)

【Hours】 8:30~12:00 ・ 13:00~17:15

【Contact】 098-939-1212 (Ext. 2124・2125・3189)

【Closed】 Weekends, Japanese holidays,
New Year's holidays & June 23

Revised in October, 2018