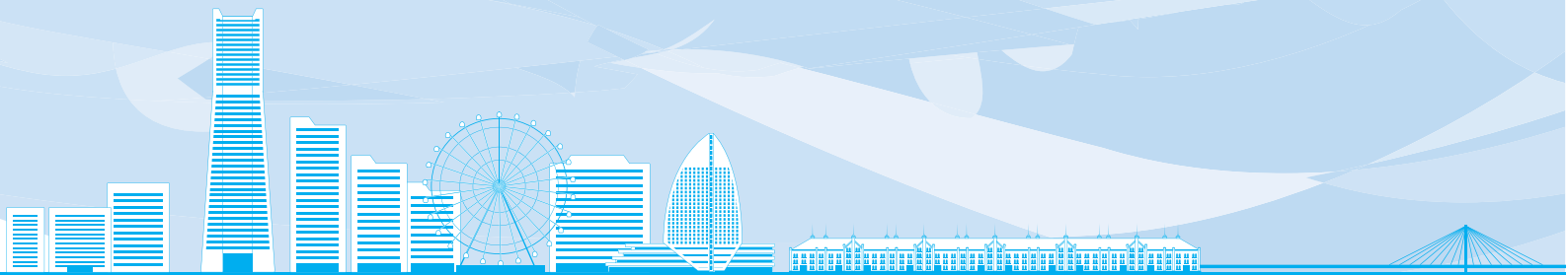


# City of Yokohama Long-term Care Insurance General Guide Pamphlet

2021 Edition 英語



City of Yokohama



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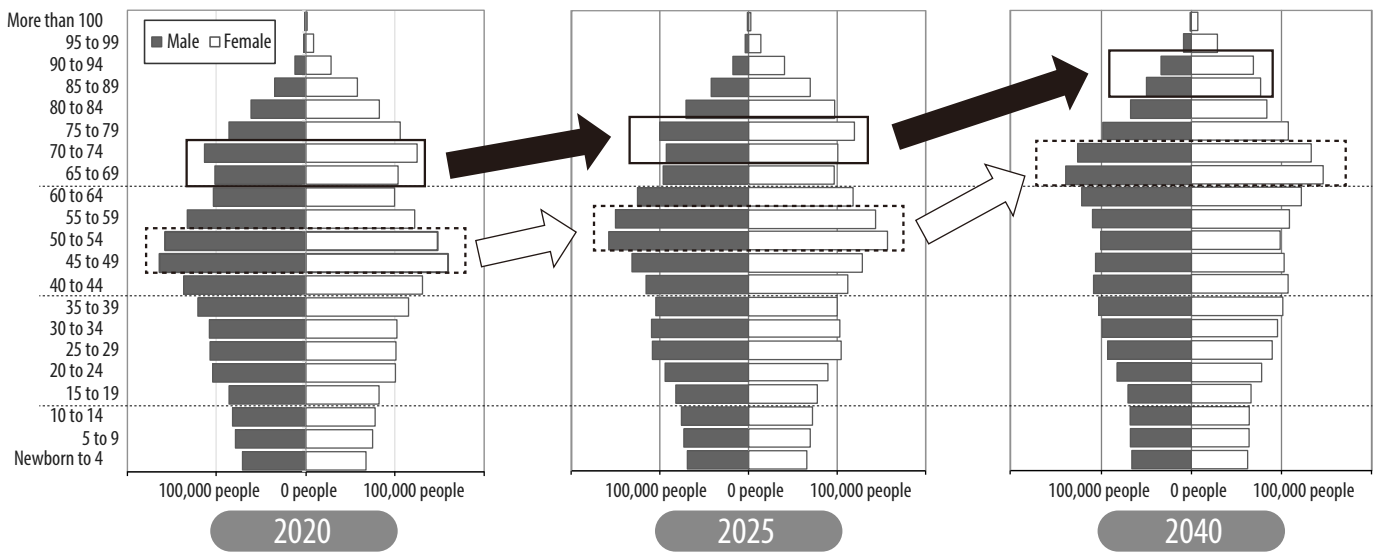
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# Future Vision Targeted for 2025, and the Community-based Integrated Care System for Yokohama

## ▶▶ The future situation of older residents of Yokohama

By the year 2025, members of the baby boom generation will be in the late stage of the elderly age group, or over 75 years of age. By 2040, those in the second generation of baby boomers will be over 65 years of age. This means that, in 2040, one in three people will be in the elderly class.

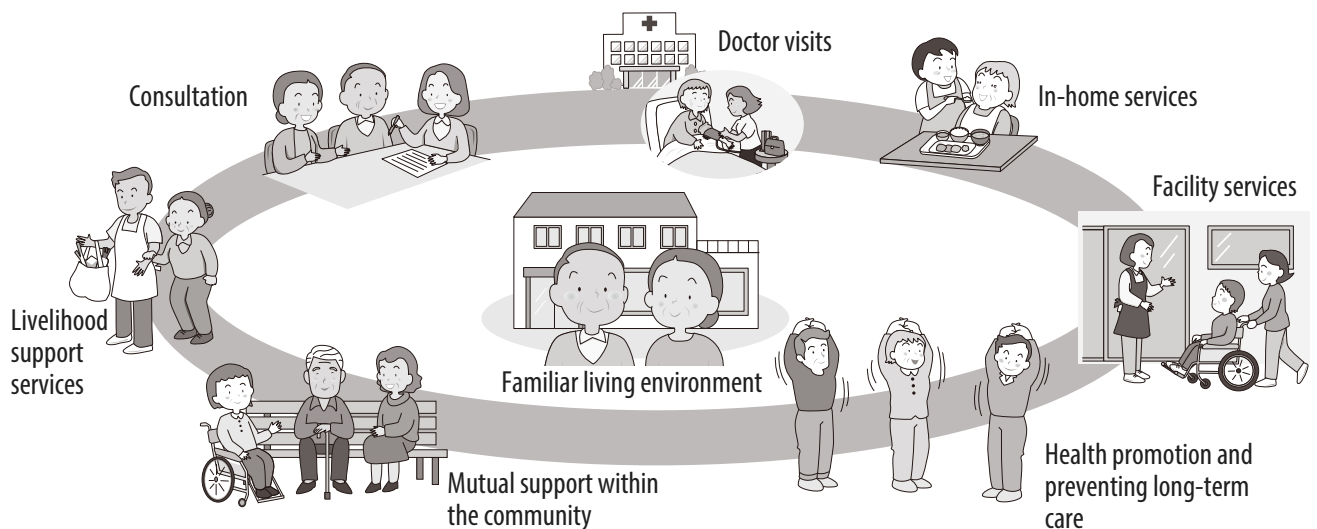


## ▶▶ Building an community-based integrated care system for Yokohama

### ● Yokohama's future vision targeted for 2025 ●

**People who require nursing care or medical care will be able to have peace of mind through their daily lives, with support from the region, and the elderly will be able to live independently according to their own intentions.**

The city of Yokohama is working to build an community-based integrated care system by 2025, in order to address the significant increase in the need for nursing care and medical care that will accompany the rapid aging of the population, as well as various other issues. Through the creation of a local region where people support each other and stronger coordination with medical care and nursing care professionals, we will eliminate the insecurities that come from old age, and aspire to be a region where all elderly persons can continue independent lifestyles according to their own intentions.



### What is Yokohama's community-based Integrated care system?

The Yokohama City area has a comprehensive system providing support and services in an integrated manner, including nursing care, medical care, preventing long-term care, Livelihood support and housing. Specifically,

- (1) We will support all areas of daily life, focused around the "Community Care Plaza".
- (2) The system lends its support to lively civic activity.
- (3) The system provides general support for preventing long-term care, health promotion, social involvement, and livelihood support, and is connected to the extension of healthy life spans.
- (4) The system promotes stronger links to various professions, including links to medical care and nursing care.
- (5) The system promotes the establishment of an environment in which the elderly can be active as persons who support the local region, and is engaged in efforts to ensure that human resources and training are available for medical care, nursing care, and other areas.

# ▶▶ Yokohama Community-based Integrated Care Plan (Plan Period: FY 2021 through FY 2023)

Yokohama City Elderly Health and Welfare Plan/Long-term Care Insurance Service Plan/Plan promoting dementia measures (Term 8)



This plan, formulated every three years, is a comprehensive concept for the smooth implementation of health and welfare projects and long-term insurance for seniors. The plan was formulated to promote welfare measures for older residents, and looks ahead to 2025, when all baby boomers will be more than 75 years old, and 2040, when the second generation of baby boomers will also be more than 65 years old.

## Basic objective

## Plan policy

### Positive Aging

~ Enabling all people to be themselves, whatever their location or stage in life establishing Yokohama's integrated community care system throughout the whole of society ~

Long-term Care Insurance Service Plan / Health and welfare plan for seniors

#### I. Aiming for the establishment of a local environment where people can live together in a regional society

In collaboration with the community, we provide, in an integrated way, preventative long-term care and health promotion, social participation and life support activities. Each person has a purpose and a role, and we will promote the development of a community in which everyone connects and supports each other.

#### II. Aiming for more developed services and greater coordination to support living in the region

So that all residents can continue to live in the community and with peace of mind even if they require medical or long-term care we will continue to enhance the medical, nursing, health and welfare care that support living at home.

#### III. Aiming for facilities and residences that are appropriate for particular needs and situations

Even if an individual needs help in dealing with daily life, we will maintain the facilities and living places needed so that they can make the choices required for their situation.

#### IV. Providing nursing care that offers peace of mind

To allow for the provision of high-quality and stable services that responding to increasing nursing care needs, the plan is engaged in the following three comprehensive efforts: (1) ensuring a sufficient supply of new human resources for nursing care, (2) supporting the establishment of these nursing care human resources, and (3) improving specialization.

#### V. Achieving Community-based Integrated Care

We will continue to enhance Yokohama's comprehensive community care system, providing information on long-term care services in an easy-to-understand way, while also providing sufficient quantity of service and continuing to improve quality.

#### VI. Measures regarding natural disasters and infectious diseases

We will conduct training in disaster prevention and infectious disease countermeasures, responding to the threats to the environment in the community, long-term care facilities and others posed by earthquakes, wind and flood damage, infectious diseases and so on.

Plan promoting dementia measures

#### Coexistence

Dementia is a very personal affair, but with the understanding and cooperation of the surroundings and the community, and by helping the person with dementia to look forward with hope and able to use their own abilities, our goal is to create a society where people can continue to live with dignity in their own way in the place they are familiar with.

#### Preparation

Many people are focused on the measures needed to prepare for dementia: understanding before the onset of the illness, awareness of onset and the appropriate medical and long-term care, and the ongoing social connections and observation of the community.

#### Peace of mind

Even if it becomes difficult to live independently, our goal is to establish a system for medical and long-term care and providing it in the appropriate way so that we create a society where people can live in their own distinctive way.

Estimated level of long-term care services, and setting of insurance premiums

Yokohama Community-based Integrated Care Plan

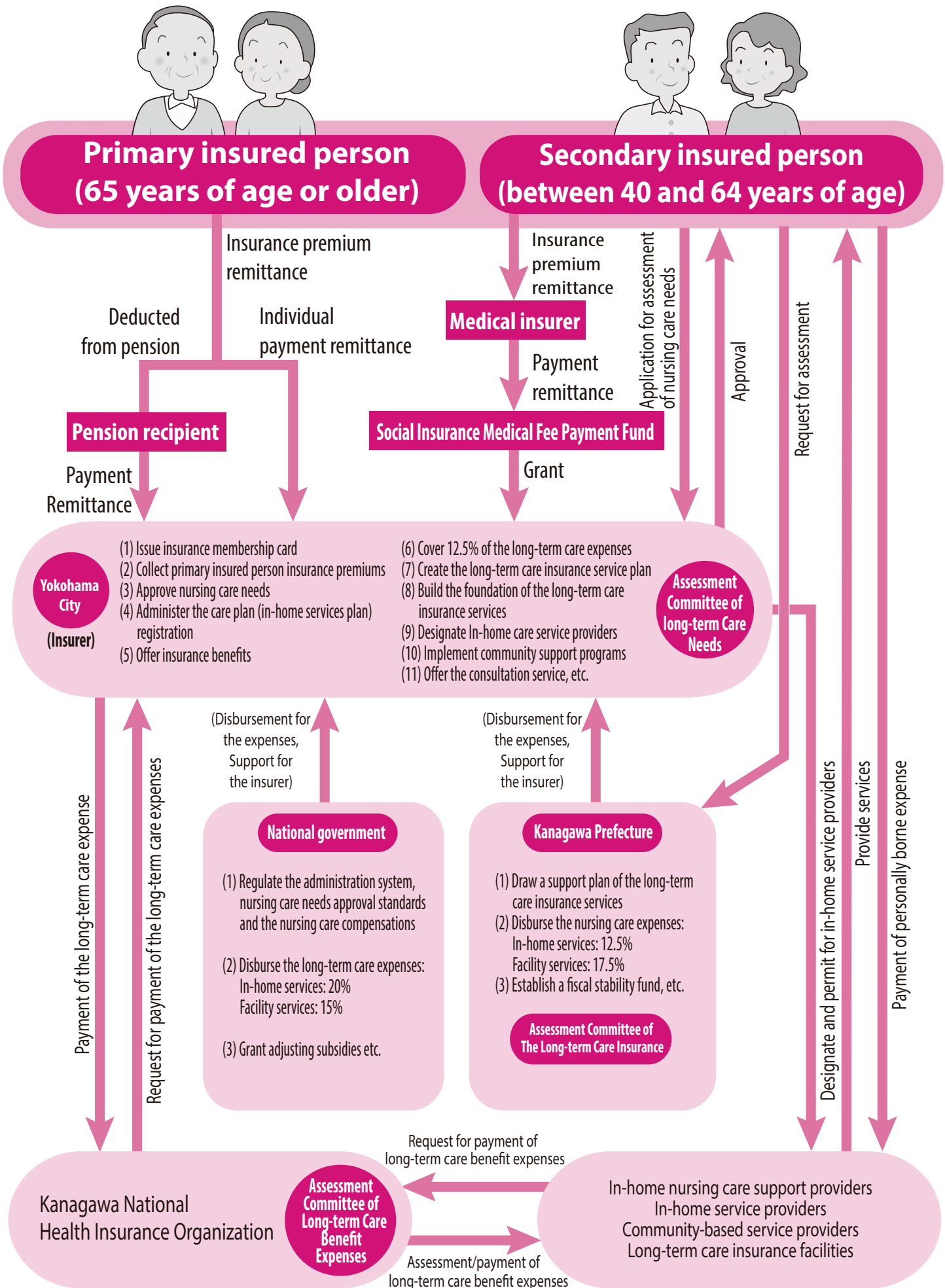
### ~ ~ ~ Basic principles of the long-term care insurance system : upholding dignity and supporting self-reliance ~ ~ ~

The long-term care insurance system is built on the basic principles of upholding the dignity of persons who require nursing care or other assistance, and support such persons in a manner in which they are able to conduct their daily lives independently according to their ability.

In addition, long-term care insurance services are provided in a manner that, as much as possible, allows the persons receiving such services to live in their own homes and to conduct their daily lives independently according to their own abilities. Furthermore, people are able to take advantage of healthcare and welfare services, such as physiotherapy, so that they are able to maintain the capabilities that they currently have.

The city of Yokohama, as the insurer, formulates plans for long-term care insurance services, administers the collection of insurance premiums, certifies whether individuals require nursing care, and administers insurance payments in the course of its management of the system based on the above principles.

# Structure of the Long-Term Care Insurance System



# Those Eligible for Long-term Care Insurance

## Persons Aged 65 or Older (Primary insured persons)

All residents who reached 65 years of age become primary insured persons on the day before their 65th birthday. Upon reaching age 65 (on the day before the person's birthday), the person becomes the primary insured person. When long-term care is required, long-term insurance services can be used, regardless of cause, after certification has been received that the individual requires long-term care (support).

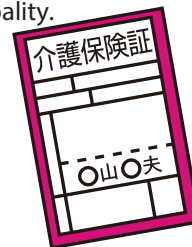
### Issuance of the Long-term Care Insurance Card

All of primary insured persons receive their long-term care insurance card by their 65th birthday in mail.

### Notification

Please file a notification with the insurance and pension division of the ward office in the following cases:

- If you move into Yokohama City from another municipality or if you plan to move to another municipality.
- If there is a change in your name or address.
- If you lose or damage your long-term care insurance card.
- If an insured person deceases.
- If you start to receive (or stop receiving) public financial assistance for everyday living.
- If you move into a long-term care insurance facility and the facility is outside of Yokohama City. (\*1)



### \*1: Exceptions for Those Moved into Long-term Care Insurance Facilities

#### (Address Exceptions)

Persons who are enrolled in the Yokohama City long-term care plan (Insured persons) who change their address of residence upon moving into one of the facilities below will continue to be covered by the Yokohama City long-term care insurance plan, rather than the insurance plan of the municipality in which the facility is located.

#### <Applicable Facilities for Address Exceptions>

- Intensive Care Homes for the elderly, long-term care health facilities for the elderly, Sanatorium care medical facilities, or nursing care medical clinics
- Private nursing homes for the elderly · Low cost social welfare homes for the elderly
- Public nursing homes for the elderly · Homes for the elderly with home-care service in the private sector

## Persons Aged 40-64 Enrolled in Medical Insurance Plans (Secondary Insured Persons)

Persons aged 40-64 who are enrolled in medical insurance plans become secondary insured persons.

In cases where a person requires long-term care due to an illness (\*2) related to aging, they can make use of the long-term insurance service once they have been certified as requiring long-term care/support.

### Issue of Long-term Care Insurance Cards

This card is issued to persons who have received nursing care (assistance) approval and to persons who have requested that they be issued cards.

### \*2: Specified illnesses for which secondary insured persons can use the long-term care insurance

The following 16 illnesses are specified by the national government.

- |  |   |  |  |
|--|---|--|--|
| 1. Cancer (*)                                      | 6. Early onset dementia (Alzheimer's disease, vascular dementia, etc.)  | 10. Progeria (Werner syndrome, etc.)   | 15. Chronic obstructive lung disease (Emphysema, chronic bronchitis, etc.)               |
| 2. Rheumatoid arthritis                            | 7. Progressive supranuclear paralysis, corticobasal degeneration or Parkinson's disease (Diseases related to Parkinson's disease) | 11. Multiple system atrophy  | 16. Arthritis deformans accompanied by marked deformation in both the knee or hip joints |
| 3. Amyotrophic lateral sclerosis                   | 8. Spinocerebellar degeneration   | 12. Diabetic neuropathy, diabetic retinopathy, or diabetic nephropathy       |  |
| 4. Ossification of posterior longitudinal ligament | 9. Spinal canal stenosis  | 13. Cerebrovascular disease (Cerebral hemorrhage, cerebral infarction, etc.) |  |
| 5. Osteoporosis accompanied by fracture            |   | 14. Arteriosclerosis obliterans  |  |

\*: Those persons whom a doctor has determined, based on generally accepted medical knowledge, that there is no chance of recovery.

### Facilities Not Covered by Long-term Care Insurance

The long-term care insurance may not cover you if you live in one of the following facilities. (For more information, please ask the Elderly and Disabled Support Division or the Insurance and Pension Division at your local ward office.)

#### Applicable Facilities

- Medical facilities for children with disabilities
- Designated healthcare institutions (Designated bed for the medical support of child development)
- Nozomi-no-Sono (National Center for Persons with Severe Intellectual Disabilities)
- Nursing facilities for Hansen's Disease
- Welfare facilities
- Facilities covered by the Industrial Accident Compensation Insurance Act
- Support facilities for the disabled (for those who are receiving daily living and housing supports by the Total Supports for Persons with Disabilities Act)
- Hospitals that offer recuperation care based on the Total Supports for Persons with Disabilities Act (only for those who are receiving with benefits for recuperation care)



# About insurance premiums

## Insurance Premiums for Members aged 65 or Older (Primary Insured Persons)

- Insurance premiums for persons over 65 years of age, based on the estimated amount of long-term care insurance services benefits over three years (FY 2021 through FY 2023), which will be confirmed by regulations.
- Insurance premiums are classified into levels based on factors such as the tax status of the member or the household(\*1) indicated on the certificate of residence and the total income earned(\*2) by the member during the previous year, and are assessed for each individual. The insurance premiums for each fiscal year (from April through March of the following year) are determined in June. If, after the insurance premium has been determined, a reason for changing the premium develops, the insurance premium will be recalculated.

Base Amount **¥78,000 per year** (¥6,500 per month) ... This is the insurance premium for Level 6.

FY 2021 through FY 2023 (annual amount)

Insurance Premium Level	Eligibility		Rate	Annual insurance premium
<b>Level 1</b>	<ul style="list-style-type: none"> <li>Those receiving public financial aid for everyday living or assistance for Japanese nationals remaining in China</li> <li>Households that are exempted from municipal tax and those who are receiving a senior welfare pension</li> </ul>		Base amount X 0.25	¥19,500 <sup>(*5)</sup>
<b>Level 2</b>	The member himself/herself is exempted from municipal tax	The member's total yearly income, including public pension earnings(*3) and total earnings(*4), is ¥800,000 or less	Base amount X 0.25	¥19,500 <sup>(*5)</sup>
<b>Level 3</b>		The member's total yearly income, including public pension earnings and total earnings, is ¥1,200,000 or less, and does not meet Level 2 requirements	Base amount X 0.35	¥27,300 <sup>(*6)</sup>
<b>Level 4</b>		All others whom the above mentioned don't apply	Base amount X 0.60	¥46,800 <sup>(*7)</sup>
<b>Level 5</b>	At least one household member pays municipal tax	The member's total yearly income, including public pension earnings and total earnings, is ¥800,000 or less	Base amount X 0.90	¥70,200
<b>Level 6 (Base amount)</b>		All others whom the above mentioned don't apply	Base amount X 1.00	<b>¥78,000</b> <b>&lt;Base amount&gt;</b>
<b>Level 7</b>	The member himself/herself pays municipal tax	Persons with incomes less than ¥1,200,000	Base amount X 1.07	¥83,460
<b>Level 8</b>		Persons with incomes greater than ¥1,200,000 and less than ¥1,600,000	Base amount X 1.10	¥85,800
<b>Level 9</b>		Persons with incomes greater than ¥1,600,000 and less than ¥2,500,000	Base amount X 1.27	¥99,060
<b>Level 10</b>		Persons with incomes greater than ¥2,500,000 and less than ¥3,500,000	Base amount X 1.55	¥120,900
<b>Level 11</b>		Persons with incomes greater than ¥3,500,000 and less than ¥5,000,000	Base amount X 1.69	¥131,820
<b>Level 12</b>		Persons with incomes greater than ¥5,000,000 and less than ¥7,000,000	Base amount X 1.96	¥152,880
<b>Level 13</b>		Persons with incomes greater than ¥7,000,000 and less than ¥10,000,000	Base amount X 2.28	¥177,840
<b>Level 14</b>		Persons with incomes greater than ¥10,000,000 and less than ¥15,000,000	Base amount X 2.60	¥202,800
<b>Level 15</b>		Persons with incomes greater than ¥15,000,000 and less than ¥20,000,000	Base amount X 2.80	¥218,400
<b>Level 16</b>	Persons with incomes greater than ¥20,000,000	Base amount X 3.00	¥234,000	

### \*1: Household

Generally households are those that were registered in the residence records as of April 1. However, for individuals who moved into Yokohama City or became primary insured persons upon reaching 65 years old in the middle of a fiscal year (on or after April 2), the household is the one to which that person belongs on the date of the move or on the day before the person's 65th birthday.

### \*2: Total earnings

From the total income according to law (the amount obtained by subtracting the amount equivalent to necessary expenses from the previous year's income, before various deductions under tax law and carry-forward deductions related to losses on the transfer of listed stock etc.), also considering the impact of revisions to the amount deducted for public pensions, etc., and the amount after deducting special deductions for short- and long-term capital gains related to the sale of land and buildings. If negative, this amount is calculated as zero yen.

### \*3: Public pension earnings

Income from public pensions (such as national pensions and welfare annuities) that is categorized as taxable income according to tax laws. This category does not include nontaxable pensions (such as bereaved family pensions and disability pensions).

### \*4: Remaining total earnings

Remaining total earnings(\*2) are defined as the amount that results from the subtraction of miscellaneous income such as that tied to public pension earnings (the amount of public pension earnings after subtraction of public pension earnings deductions) from total earnings. If negative, this amount is calculated as ¥0 yen.

\*5: The annual insurance premiums for Level 1 and Level 2 are reduced from ¥35,100 to ¥19,500 through financing by public expenditure from consumption tax revenue.

\*6: By investing public expenditures based on consumption tax, the annual insurance premium for the Level 3 will be reduced from ¥46,800 to ¥27,300.

\*7: By investing public expenditures based on consumption tax, the annual insurance premium for the Level 4 will be reduced from ¥50,700 to ¥46,800.



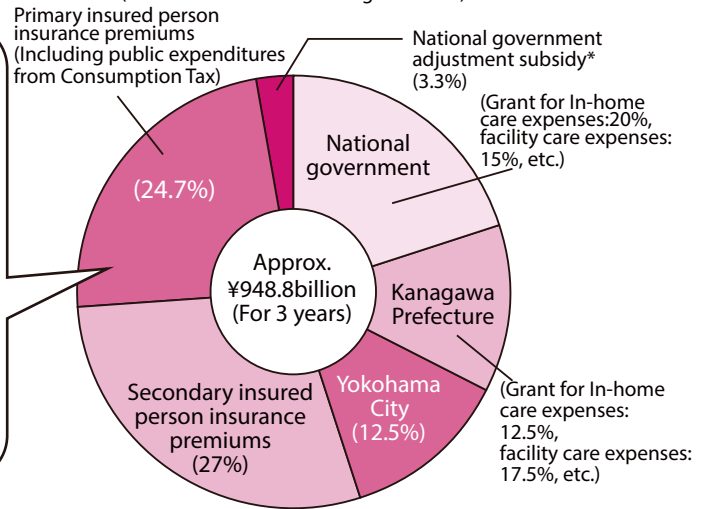
# About insurance premiums

Insurance premiums are collected in two ways: **special collection** and **regular collection**.

◆ Please note that the method of collection is determined by law and an insured person cannot choose the method.

## Revenues for Yokohama City's Long-term Care Insurance Services

(Estimate for FY 2021 through FY 2023)



### Special Collection

If your annual pension is ¥180,000 or more, your premium will be deducted from their pension.

● The insurance premiums will be divided into six installments and deducted from your pension in the month of pension payments.

#### Deductible pensions

● Elderly (retirement) pension ● Bereaved family pension ● Disability pension

Note: Senior welfare pension is not eligible for deduction.

### Regular Collection

If your annual earning amount from pension is less than ¥180,000 and you are not object to the special collection, then you must pay individually, either through their financial account or with an invoice.

## Point

### What are long-term care insurance premiums used for?

Long-term care insurance premiums are used to cover the cost of long-term care insurance services for those who need nursing care.

### \*National government adjustment subsidy

The standard premium amounts for primary insured persons will go up as the number of the elderly aged 75 or older, who are more likely to need the nursing care service, increases and the income level of primary insured persons goes down. The National government provides an adjustment subsidy to municipalities to compensate for differences in insurance premiums for primary insured persons that municipalities are unable to control.

Payment of Insurance Premiums	Special Collection	Deduction from Pension	Premiums are deducted from your pension on the pension payment date of even-numbered month
	Regular Collection	Direct Payment from Bank Account	Payment withdrawal is on the 29th of each month (or the last date of February). If the payment day falls on holiday, the transaction will occur on the previous business day.
Payment Remittance with Invoice		The due day is the last day of month. If the due day falls on holiday, it will be the following business day.	

### Payment by direct debit

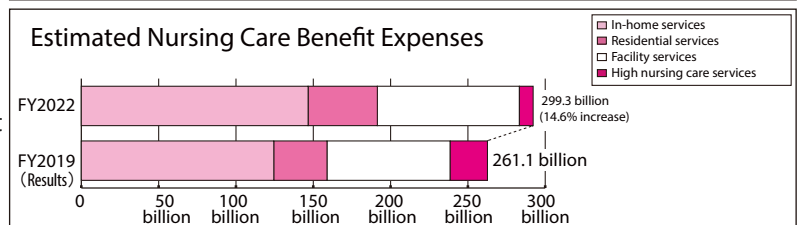
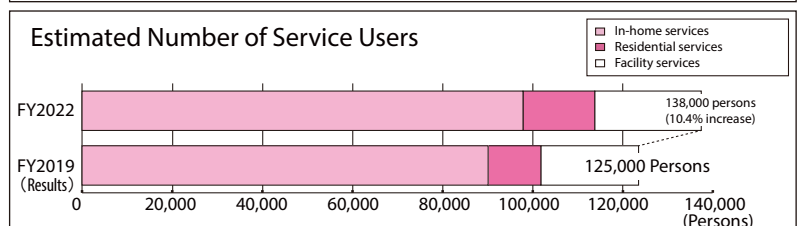
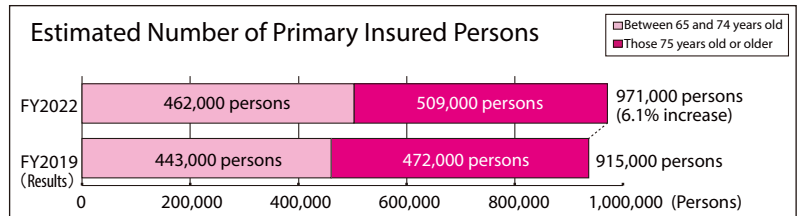
- Direct debit is a convenient method for the ordinary collection of insurance premiums.
- To apply for this service, fill out a financial account debit request form with the required information, affix your personal seal imprint for the financial account, and submit the completed form to your financial institution. (The form is available at your financial institution and the Insurance and Pension Division at your local office.)
- The direct debit will start about two months after the procedure is completed at the financial institution. We will notify you by postcard when the withdrawals begin.
- Special collection will still be deducted from your pension even if you apply for the pre-authorized payment.

## Review of Long-term Care Insurance Premiums from FY 2021 through FY 2023

As the number of elderly people using long-term care insurance increases year by year, the cost of long-term care insurance services is also increasing. The number of people paying insurance premiums will increase from fiscal years FY 2021 through FY 2023 as the population ages, but the number of long-term insurance service users is expected to grow at a level higher than this, so the insurance premiums paid by each person will increase.

At the same time, for those in the first to fourth premium levels, apart from public funds, which account for about half of the financial resources of long-term care insurance, measures to reduce insurance premiums are being implemented using public expenditures from consumption tax.

To ensure that senior citizens can continue to live without concern, steady improvement of the infrastructure for long-term care services is required. Yokohama City will ensure the necessary services, but also focus on health promotion and long-term care, aiming at promoting long-term preventative efforts.



# If You Are Having Difficulty Paying Your Insurance Premiums

## Reduction/Exemption of Insurance Premiums

Reduction/exemption program is available for the long-term care insurance premiums for those who are having difficulty paying their insurance premiums due to a disaster, unemployment, bankruptcy, or other circumstances. For more information, please ask the insurance and pension Division of your local office.

Circumstances	Eligibility	Length/Amount
Disaster	Those whose home or property suffered 20% or more damage due to a storm/flood, fire, or earthquake.	Depending on the level of damage, an exemption for four to six months' of payments is available.
Loss of income	Those whose income decreased drastically due to unemployment or bankruptcy.	A reduction is available based on the estimated income of the applicable year.
Low income	Those who are categorized as Insurance Premium Level 7 or lower and who meet the levels for both the income standard and asset standard (except for those who receive such assistance as public financial aid for everyday living or assistance for Japanese nationals remaining in China).	Premiums are reduced to half of the level 1 amount (before reduction measures by public expenditures).

## Income and Asset Standard of Reduction/Exemptions for Individuals with Low-Income

Income standard	The estimated annual income of all households*	
	One-person household	¥1,500,000 or less
	Multi-person household	¥1,500,000 plus ¥500,000 per additional household member or less (excluding the insured person)
Asset standard	All of the following requirements must be met:	
	(a) The total value of assets including cash, savings, and securities held by the entire household must meet the following standard	
	One-person household	¥3,500,000 or less
	Multi-person household	¥3,500,000 plus ¥1,000,000 per additional household member or less (excluding the insured person)
(b) No real estate held other than their residential property (200 m <sup>2</sup> or less)		

\* All households in general refers to all people in the same household and holding resident registration, including people living together, and those with a shared livelihood, even if they are in different households.

### Point

**Please pay your insurance premiums by the due date.**

Insurance premiums are an important source of the revenue for maintaining the long-term care insurance system, please be sure to remit payment on time.

**Reminder will be mailed to you if your premium payment is overdue.**

If payment is not made within the grace period on reminder, the interest will occur in accordance with the number of days from the day after the due date.

**It is convenient for you to use account transfer payment system if you are still remitting payment with invoice at bank.**

## Insurance Premiums for Members Between 40 and 64 Years Old (Secondary Insured Persons)

**How premiums are assessed:** Medical insurance providers (such as National Health Insurance or worker's health insurance) assess the insurance premiums according to the number of secondary insured persons enrolled.

**How premiums are paid:** The long-term care insurance premiums are paid in a lump sum as health insurance premiums.

**Insurance premiums:** Premiums vary for each health insurance plan. For more information, please ask your insurance provider.

## When your payment is overdue

Insurance premiums are an important source of the funding needed to cover the costs of long-term care insurance services, so in order to maintain this insurance system paying insurance premiums is very important.

If the insurance premium (the insurance premium of the primary insured person) is delinquent with no special justification, to be fair to those who are making their insurance premium payments the following measures may be taken, based on laws and regulations, when using long-term care insurance services:

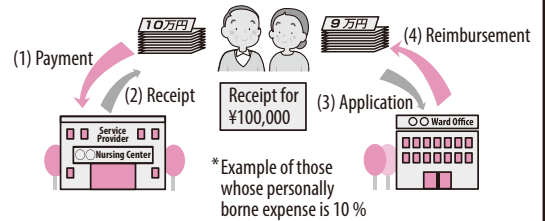
### If your payment is one year overdue...

#### The payment method of insurance benefits will be changed. (Reimbursement)

- When using the long-term care insurance services, the member will have to pay the entire amount upfront.
- The exceeded portion of the expense paid (the insurance benefits) will be reimbursed after the member applies at the ward office.

#### If you use ¥100,000 in Long-term Care Insurance Services in a Single Month \*

- (1) You must pay the service providers the entire amount of ¥100,000 upfront.
- (2) You receive a receipt for ¥100,000, or a detailed statement of services.
- (3) Take the relevant documentation (such as receipts indicating care costs of ¥100,000) to your local ward office, and apply for reimbursement of the portion covered by insurance (¥90,000).
- (4) You will be reimbursed for the portion covered by insurance (¥90,000) at a later date.



### If your payment is one and half year overdue...

#### Insurance benefits will be temporarily suspended.

- Necessary actions will be taken, including a temporary suspension of part or all of the reimbursement for the expenses.
- If you continue to fall behind in payments, the overdue premiums may be subtracted from the suspended insurance benefits.

### If your payment is two year overdue...

#### Insurance benefits will be reduced, and the percentage of personally borne expense paid will be increased.

- If more than two years pass after the day after the reminder is received (statute of limitations starting date), insurance premiums cannot be collected.
- If your premiums cannot be collected due to the statute of limitations, the percentage of costs that you bear personally will rise to 30% or 40% for a certain period, depending on the duration of nonpayment.
- During this period, you are no longer eligible to receive reimbursements for high nursing care (preventive long-term care) expense (see page 34) or fee reductions for room charges or meal expenses (see page 35). In addition, your personally borne expenses during this period are not eligible for calculation in the high medical/high nursing care joint expense program (see page 36).

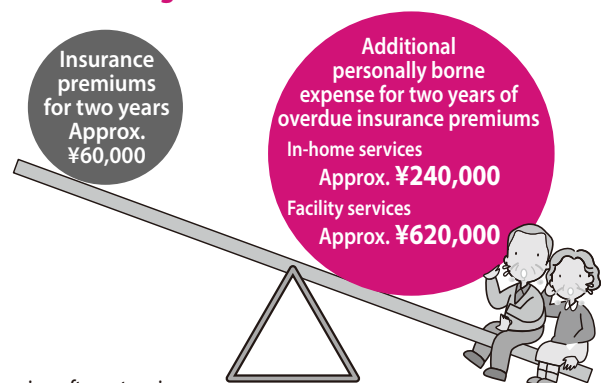
#### Example of the Average Personally Borne Expense for One Year of Nursing Care Services for a Level 2 Individual\*

If your personally borne expense percentage is raised from 10% to 30% for one year	
<p><b>In Case of In-home Services</b></p> <p>Your personally borne expense (for about ¥1,200,000 for one year of the long-term care insurance services) is</p> <p><b>Approx. ¥120,000</b></p>	<p><b>In Case of Facility Services</b></p> <p>Your personally borne expense (for about ¥3,100,000 for one year of the long-term care insurance services) is</p> <p><b>Approx. ¥310,000</b></p>
<p><b>10%</b> Personally Borne Expense</p>	
<p><b>30%</b> Personally Borne Expense</p>	
<p><b>Approx. ¥360,000</b> (An additional personally borne expense is ¥240,000)</p>	<p><b>Approx. ¥930,000</b> (An additional personally borne expense is ¥620,000)</p> <p><small>*This does not include the personally borne expense for meals.</small></p>

As you can see, your personally borne expense increases for the long-term care insurance services.

This example shows what could happen if you needed to use the long-term care insurance services after not paying any premiums for four years and the insurance benefits for two years cannot be paid due to the statute of limitations.

In this example, 30% of costs are covered by the insured for a one-year period. If insurance premiums were paid for part of the period, the length of time for reduced insurance benefits will shorten depending on how long premiums were paid.



\* Example of those who are categorized as Insurance Premium Level 2 and whose personally borne expense is 10%

#### Seizure of Property

Regardless whether the long-term care insurance services are being used or not, assets such as savings or life insurance may be seized according to the law as a measure against failure to pay.

#### Persons Responsible for Overdue Payment

If payment should be made by regular collection, the head of a household and the person's spouse are both legally responsible for paying insurance premiums.

#### If a Secondary Insured Person Fails to Pay Health Insurance Premiums

When a secondary insured person (a member between 40 and 64 years old) fails to pay his or her health insurance fees, measures such as a change in payment method or temporary suspension of part or even all health insurance benefits may be taken.

# Procedures for Using Services

## Procedure

**1**

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**Have a consultation at an community general support center (community care plaza) or at your local ward office**

### First-time applicants

(Long-term care insurance services, long-term preventative care, livelihood-support services)

- Aged 65 or older
- From 40-64 years old with one of the 16 specified illnesses

### 1) Persons who are renewing or who require assistance, and meet one of the following conditions

- Aged 65 or older (persons not yet 65 must be certified as requiring nursing care [assistance])
- Use only home-visit services or services via regular visits to a facility

### 2) Persons who, for example, are expected to become independent through the use of care management to preventing long-term care

### Approval as a person requiring nursing care (assistance)

Examination and judgment on the necessity of long-term care by the long-term care certification/examination committee, based on the certification and written opinion of the attending physician.

### Basic checklist

Check to see if it meets the criteria of the business target.

**2**

Page 13

**Ineligible**

**Nursing Care Levels 1 to 5**

**Creation of a care plan**  
home nursing care support center, etc.

**Services for nursing-care benefits**

**3**

Page 15

**Assistance Levels 1 and 2**

**Eligible**

**Ineligible**

**Notification**

**Person targeted by business**

**Creation of a care plan to preventing long-term care**  
community general support center/community care plaza

**Services for benefits related to preventing long-term care**

**Service operations related to Preventing long-term care and Livelihood support**

**Other services, general operations for preventing long-term care, etc.**

### Preventative long-term care/comprehensive Livelihood support (Abbreviation: comprehensive business)

The content of service provided through long-term care insurance in general is decided on a nationwide basis, but of the services available to those requiring assistance levels 1 and 2, home-visit care and outpatient care will be provided according to the content established by Yokohama City as a service of the preventative long-term care and comprehensive Livelihood support businesses.

Long-term home-visit care or long-term outpatient day long-term care is available, but please note that the other long-term care insurance services are not available in these cases.

In addition, some preventative long-term care and Livelihood support services can be continued to be used in the long-term, not just when initially needed or identified as needing the service, but for people needing continued, long-term care. See page 17 for more details.

# 1 Receive Approval for Nursing Care Needs.

## 1. File an application

You or your family must file an application for assessment of nursing care needs at the Elderly and Disabled Support Division of your local ward office. Integrated community support centers (community care plazas) or home nursing care support providers can also submit applications on your behalf.

### ● Required Documents

- Assessment of nursing care/assistance needs application form (available at the service counter)
- Long-term care insurance card (issued on the 65th birthday)
- A document showing the name of the applicant's primary care doctor and healthcare provider

**Note:** Secondary insured persons (see page 6) should also bring their health insurance card.

## 2. Take the assessment of the applicant's mental and physical condition

### ● Evaluation

After initial communication from the local ward office or a contracted provider, an evaluating officer will visit the home and interview the applicant and the applicant's family. The evaluation involves a standard survey of 74 questions that is used nationwide, as well as questions about the applicant's general condition.

**Note:** The evaluating officer will be a ward office staff member or someone from the dedicated nursing care support staff attached to the provider.

### ● Doctor's Note

Before you apply, please obtain a note from your primary care doctor describing your condition.

**Note:** Please consult the service counter if you do not have a primary care doctor.

## 3. Take the assessment and get an approval for the level of nursing care required

### ● Evaluation, Assessment, and Approval

The Assessment Committee of Nursing Care Needs, which is composed of health, medical, and welfare specialists, evaluates the level of nursing care required based on the results of the examinations and the letter from your family doctor.

The local ward office then approves the level of needs for nursing care based on the evaluation and the assessment given by the committee.

Preliminary evaluation:  
Evaluation by computer

Secondary evaluation:  
Evaluation and assessment by the Assessment  
Committee of Nursing Care Needs

Approval for level of  
nursing care needs



A simplified examination and judgment will be carried out for those meeting all of the following (◆) target requirements:

## 4. Receive the assessment results and a long-term care insurance card

Please read carefully the details on the notification letter and your insurance card when they arrive.

### ● What to Check

Care category (assistance level 1, assistance level 2, nursing care levels 1 to 5, Ineligible)

Length of Approval (For initial applications or re-applications for a change in category, the period of validity is between 3 months to 12 months. For renewal, the period of validity is between 3 months and 48 months.)



### ◆ Requirements for simplifications for certification examination committee (implemented for applications after February 2019):

- (1) Primary insured person.
- (2) Renewal application.
- (3) The level of need for nursing care as a result of computer decision-making matches the degree of care required in the previous certification results.
- (4) The period of validity for the previous certification is 12 months or more.
- (5) If the computerized judgment result is for a person requiring nursing care level 1 or assistance level 2, this will be considered as "stable" by the current stability condition determination logic.
- (6) The standard time for the certification of need of nursing care, based on computer judgement results, is not based on reaching the level of care required within three minutes.



## 2 Those Approved for Nursing Care Levels 1-5

### Make a Care Plan and Finalize Contracts with Service Providers

● If you prefer to continue living at your own home...

#### 1. Selecting your care provider and care manager

Care managers working for a home-care support office can create care plans. Nursing: When a small-scale, multifunctional home care facility is used, the facility's care manager creates the care plan.

Nursing: For more on small-scale, multifunctional home care, please see page 24.

You can consult the Elderly and Disabled Support Division of your local ward office or an Community General Support Center/community care plaza to make your decision.

See page 14 regarding home nursing care support providers.

● If you choose to live in a facility...

#### 1. Choose a facility

Visit facilities where you would like to live to find out what services they offer and the details of their contracts.

(Your local ward office, Community General Support Center/community care plaza, or consultation centers for facilities and residences for senior citizens can provide information on the facilities that are available.)

#### 2. Request the creation of a care plan

Consult the care manager to determine what services you need.

The care manager will create a care plan for you and then confirm the details with you.



#### 2. File an application for admittance

Consultations and applications for Intensive care Home for the Elderly\* are handled at institution application centers.

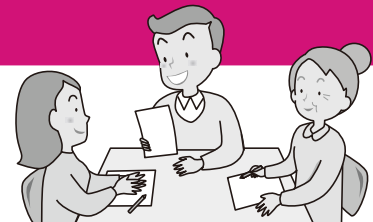
Requirements for admission depend on the level required for nursing care (see page 28). For other facilities, applications can be filed directly (see page 29).

\* Intensive care Home for the Elderly are generally for those approved for Nursing Care Levels 3 or over.

#### 3. Finalize contracts with service providers

After confirming the details of the contract and services as well as reading through explanatory documents on important matters, finalize individual use contracts with each service provider.

See page 16 regarding contracts with service providers.

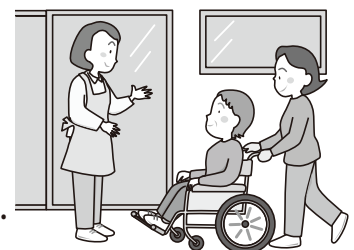


#### 4. Start Using the Services

In home services (visits, outpatient, and services to prepare the living environment) begin on page 18.



Facilities and residential services are listed on page 28.

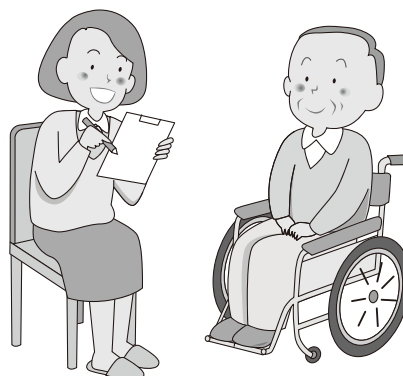


## In-Home Long-Term Care Support Providers

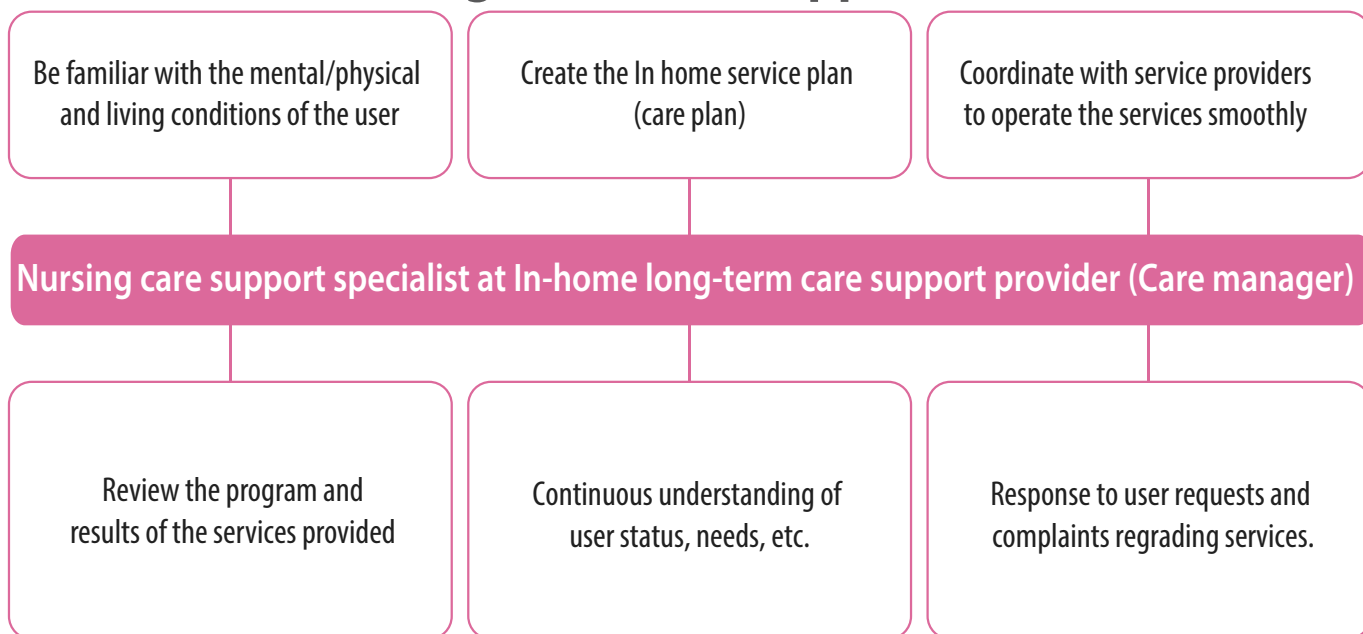
### Choose a care manager who creates your care plan.

The care manager creates In-home service plan (care plan) for you to receive appropriate services according to physical or mental conditions as well as preferences of your family, and coordinates with service providers to organize services.

All of these costs will be covered by long-term care insurance, so there is no expense for the user.



## Role of In-Home Long-Term Care Support Providers



### For choosing an In-home long-term care support provider

1. Does the provider think how nursing care should be handled from the perspective of the member over a long period of time?
2. Is the provider knowledgeable and experienced in nursing care for the elderly?
3. Does the provider have sufficient information about service providers in the community?

Information about in-home nursing care support providers might be available from individual wards. For details, contact the Elderly and Disabled Support Division of your local ward office.



### 3 Those approved for assistance level 1 or 2, or those classified as recipients of services\*

\* "Person targeted by business" is a classification equivalent to being approved for assistance level 1 or 2, and is determined through the use of the basic checklist.

#### 1. Ask your local community general support center/community care plaza to create your care plan for preventive long-term care

The goal is that the individual will be able to lead an independent life in a familiar area, so please consult the Community General Support Center for the services needed. The community general support center creates and provides preventative long-term care plans. (This assistance begins after the user of the services signs a consent form.)

You can also ask a care manager at a designated home nursing care support provider to create a care plan for the preventing long-term care tailored to your needs. (In that case, they will check the preventative long-term care plan that was created.)

See page 15 Community General Support Centers/Community Care Plazas

#### 2. Finalize contracts with service providers

After confirming the details of the contract and services as well as reading through explanatory documents on important matters, finalize individual use contracts with each service provider.

See page 16 regarding contracts with service providers.

#### 3. Start Using the Services

See page 18 preventing long-term care services.

## Community General Support Centers/Community Care Plazas

**Community general support centers/community care plazas are the consultation service counters of local community.**

Yokohama City arranged integrated community support centers at community care plazas and some of special nursing homes for the elderly to help seniors live continuously in the community they are familiar with.

### Role of Community General Support Centers/Community Care Plazas

#### 1 Promote methods designed to Preventing long-term care. Stay Healthy!

These facilities provide information about staying healthy and Preventing long-term care, offer consultation services to those who want to maintain or improve their everyday lives, and organize care plans for Preventing long-term care services for individuals approved as requiring assistance level 1 or 2 or for individuals classified as recipients of services.

#### 2 Offer consultation service for various problems.

They offer consultation on a wide range of issues including the long-term care insurance and general aspects of everyday living for the elderly and guiding them to the necessary services and institutions.

### Community General Support Center /Community Care Plazas

Public health officials, social workers, primary care managers

#### 3 Protect your rights.

They help prevent elderly persons from falling victim to consumer fraud, support the use of the adult guardianship program, and help prevent elder abuse.

#### 4 Reinforce community ties.

They promote community volunteer activities and reinforce ties with care managers, long-term care insurance companies, and healthcare providers.

- If you have a problem or concern in your everyday life, please feel free to consult the community general support center/community care plaza in your neighborhood. To receive consultation, please contact us in advance by phone. They are open on Saturdays, Sundays, and national holidays except the year-end/New Year holidays and on facility inspection day (once a month).
- If you are approved for assistance levels 1 or 2, you will receive the list of your local community general support centers/community care plazas with the approval. The Elder and Disabled Support Division of your local ward office can offer information on the community general support center/ community care plazas in your community.

# Contracts with Service Providers

You need to sign a contract with a service provider for each service used. To avoid any possible problems, ensure to read closely all the written terms of the contract and explanatory documents on important matters. If you have any concerns, please consult with your ward office service counter.

## Point

Points to Check in the Contract and Explanatory Documents on Important Matters

### ● Description of services

Are the types of services offered explained in detail?

→ Details about the services provided may be explained in a separate document.

### ● Contracted period

Is the contracted period clearly specified (from starting date to end date)?

→ Is there a clear explanation of the procedure for renewal following contract expiration?

### ● Explanation of services

Does it state that the service provider must explain and provide a copy of the content of services used and the record of services provided?

### ● Personally Borne Expense

Is the amount of the personally borne expenses for the service user clearly stipulated?

→ Are there any ambiguous expenses for the service user other than those stipulated by law, such as cooperation fees or member charges? Is it written in a way that allows the service provider to make changes for its own convenience/benefit?

### ● Failure to pay the personally borne expense

Is the service provider mindful of the user's situation, for example by granting a set grace period if you fall behind in payments?

→ Does it state that services can be immediately suspended or care recipients may be required to pay penalty fees?

### ● Termination of the contract

Does it state that user have a right to terminate the contract?

→ Is there a penalty fee for cancellation?

### ● Cancellation of use of services

Does it state that user can cancel services that they have booked?

→ Is there an expensive cancellation fee?

### ● Compensation for injuries and damages

Does it state that the service provider will compensate the user if injuries or property damages occur that caused by the provider?

### ● Protection of privacy

Does it state that the service provider will not give out any personal information about the user or his/her family members to third parties without the consent of the user except on justifiable grounds?

### ● Complain handling

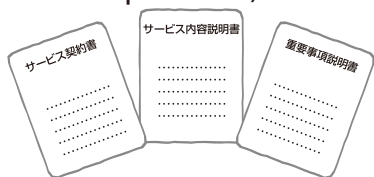
Does the service provider make clear which department and who is in charge of handling complaints?

**Make sure that the contract does not have unreasonable fees.**

See page 30 for the range of the member's personally borne expenses with the long-term care insurance.

### ● Service Contract ●

The basic description of the contract (i.e. the valid period, payment, and termination procedures)

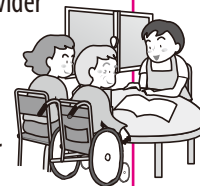


### ● Explanatory Document on Services ●

- (1) Detailed description of services
- (2) Frequency and schedule of services
- (3) Personally borne expenses and payment procedures
- (4) The details of the cancellation procedure and the cancellation fees

### ● Explanatory Documents on Important Matters ●

- (1) Outline of the service provider
- (2) Outline of the service provider's facilities
- (3) Personnel of the service provider
- (4) Business hours
- (5) Amount of personally borne expenses
- (6) Consultation service counter



## There are limitations on the use of in-home services provided by long-term care insurance.

There is a limit to in-home service under long-term care insurance according to the degree of care required, and can be used in the range up to this figure. The individual will be responsible for the full amount for services beyond this figure.

However, these use limitations do not apply for daily nursing care for tenants at specially designated facilities, communal living care for dementia, etc. Individuals are not subject to the usage limit for in-home care management guidance.

Degree of care required, etc.		Number of credits available	Monthly limit on usage*
Person targeted by business		5,032 units	Approximately ¥50,000 to ¥60,000
Assistance	Assistance level 1	5,032 units	Approximately ¥50,000 to ¥60,000
	Assistance level 2	10,531 units	Approximately ¥110,000 to ¥120,000
Nursing care	Nursing care level 1	16,765 units	Approximately ¥170,000 to ¥190,000
	Nursing care level 2	19,705 units	Approximately ¥200,000 to ¥220,000
	Nursing care level 3	27,048 units	Approximately ¥270,000 to ¥300,000
	Nursing care level 4	30,938 units	Approximately ¥310,000 to ¥340,000
	Nursing care level 5	36,217 units	Approximately ¥360,000 to ¥400,000

\* Amount given is approximate.

The actual cost is calculated by multiplying the number of units by the unit price for the Yokohama City area (¥10 to ¥11.12). See page 18.

# Services Available

## Types of Long-term Care Insurance Services

The types of services that you can use vary depending on whether you are approved for nursing care or assistance. Those approved for nursing care can use the long-term care services, while those approved for assistance can use services to prevent the needs for nursing care. For details, see the following table.

	Type	Usable by persons requiring assistance?		Type	Usable by persons requiring assistance?	
Services used in the home (home-visit services)	Home-visit long-term care (home help)	○ *2	Services that can be used 24 hours a day (home-visit services) (regular-facility-visit services)	Periodic rotation/ongoing home-visit nursing care *1 (home-visit services)	×	
	Home-visit long-term care at night *1	×		Multifunctional long-term care in a small group home *1 (Services that combine home visits and regular visits to a facility (including overnight stays))	○	
	Home-visit bathing care	○		Small-scale, multifunctional home long-term care and home-visit nurse *1 (Services that combine home visits and regular visits to a facility (including overnight stays))	×	
	Home-visit nursing	○		Services that establish environments for daily life	Rental of care equipment *4 (rental)	○
	Home-visit physiotherapy	○			Sale of equipment for specific welfare purposes	○
	In-home health maintenance guidance	○			Home renovations	○
Services used when visiting a facility (including overnight stays) (regular-facility-visit services)	Outpatient day long-term care (day service) 19 or more regular personnel	○ *2	Residential services	Communal daily long-term care for dementia patients *1	△ Assistance levels 2	
	Community-based day long-term care visits *1 (small-scale day services) Up to 18 regular personnel	○ *2		Daily nursing care for tenants at specially-designated facilities (such as private retirement homes that include nursing care)	○ *3	
	Outpatient day long-term care *1 (day service for those who require observation by a nurse).	×		Daily nursing care for tenants at specially designated community-based facilities *1 (such as private retirement homes that include nursing care)	×	
	Outpatient day long-term care visits for dementia *1 (day services for dementia)	○	Facility services	Nursing care welfare facility for the elderly (special nursing homes for the elderly)	×	
	Outpatient rehabilitation (day care)	○		Community-based living nursing care for tenants of nursing care welfare facilities for the elderly *1	×	
	Short-term stay nursing care (short stays at a welfare facility)	○		Long-term care health facilities for the elderly	×	
	Short-term stay medical nursing care (short stays at a medical facility or other facility)	○		Sanatorium medical facility for the elderly	×	
			Nursing care medical clinics	×		

\*1 This refers to community-based services. Community-based services are services that allow users to, as much as possible, conduct their daily lives in the homes or areas that they are used to. In principle, these services are available only to city residents (persons receiving long-term care insurance from the city).

\*2 The services available to those requiring support, such as home-care visitation, outpatient care and community-based outpatient care have been migrated to a comprehensive nursing/preventative care and daily life support service.

\*3 Some facilities are only for individuals requiring long-term care when moving in.

\*4 Individuals with light needs (nursing care 1, assistance) are not eligible for this service.

## List of service operations related to preventive care and daily lifestyle support

(Eligible persons: Assistance levels 1 and 2, persons classified as recipients of services)

National service type	Service name in Yokohama	Description of service
Formerly preventive care Services equivalent to home-visit nursing care and nursing care provided via regular facility visits	Service equivalent to home-visit nursing care in Yokohama	This service is provided when specialized services are deemed necessary. The services performed are equivalent to the former preventive care home-visit nursing care (services provided by home-visit nursing care personnel or similar personnel).
	Service equivalent to nursing care Provided via regular facility visits in Yokohama	This service is provided when specialized services are deemed necessary. The services performed are equivalent to the former preventive nursing care via regular facility visits (services provided by a practitioner at a provider of nursing care services via regular facility visits).
Services according to relaxed standards (A services)	Service equivalent to home-visit lifestyle assistance in Yokohama	For those who do not necessarily require professional services such as home-visit caregivers, we can also provide living support such as cleaning, washing, cooking, shopping, etc. by persons have completed introductory or other training.
Services focused on residents (B services)	Home-visit lifestyle assistance in Yokohama	Resident-centered volunteers will visit homes on a regular basis to provide such daily-life services as cleaning, washing, cooking and shopping.
	Lifestyle assistance via regular facility visits in Yokohama	At local salons and other locations, resident-centered volunteers and others provide for participation in activities leading to long-term preventative care, such as gymnastics and hobbies.
Other Livelihood support services	Meal assistance in Yokohama	Resident-centered volunteers will visit home on a regular basis, distributing meals in order to improve nutrition.
	Monitoring assistance in Yokohama *5	Resident-centered volunteer will visit homes on a regular basis, checking on resident safety and providing supervision.
Short-term concentrated preventive services (C services)	Home-visit, short-term preventive services in Yokohama	A registered nurse or public health nurse from the ward's social welfare and health center visits the user's home to provide short-term support over a period of 3 to 6 months, with the goal of providing early intervention to prevent and improve upon shut-in living conditions, to encourage societal involvement, and to provide preventive care. The service provides support for the maintenance and improvement of motor functions and health management, as well as support for participation in various services throughout the local area, in accordance with the user's condition.

\*5 This can also be used by people requiring long-term care who have been using the services or were identified as requiring the services.

"For details about the content of each of the major services, see the services available under nursing-care insurance and a guide to the costs that individual users are responsible for on page 18-29. Example costs that individual users are responsible for are calculated assuming that the applicable person is **responsible for 10% of the costs**. These example costs do not include additional costs that might be added depending on the systems used by particular providers."

# In-Home Services

Those Approved for Nursing Care Levels 1–5

## Home-visit long-term Care (Home Help)

This service involves home helpers (home-visit long-term care personnel) visiting the homes of users, and providing lifestyle support, such as help with bodily care including bathing, using the bathroom, and eating, as well as cleaning, laundry, meal preparation, shopping, and other tasks.

### < Estimated Personally Borne Expenses >

Use mainly physical nursing care	Under 20 mins.	20–29 mins.	30–59 mins.	60–89 mins.	Additional 30 mins.
	¥186	¥278	¥441	¥644	¥94

Use everyday living support in addition to physical nursing care	20–44 mins.	45–69 mins.	70 mins or more
	¥75	¥149	¥224

Use mainly everyday living support	20–44 mins.	45 mins or more.
	¥204	¥251

◇ For example, if you used everyday living support for 20 to 44 minutes in addition to the physical nursing care service for 30 to 59 minutes, your own expense would be the total ¥516 (¥441 + ¥75 = ¥516).

**Note:** If you use mainly the everyday living support 45 minutes or more or the everyday living support in addition to the physical nursing care for 70 minutes or more, the personally borne expense will be a fixed amount.

**Note:** The percentage of costs that the user is responsible can be increased by a factor of 1.25 to 1.5 depending on the time of day that the services are used, such as very early morning or late at night.

## Assistance for Hospital/Doctor's Visits

This is a service whereby a single home helper (home-visit nursing care personnel) helps the user get into and out of a vehicle and drives the vehicle when the user visits a medical facility for regular treatment.

### < Estimated Personally Borne Expenses >

One way	¥110
---------	------

◇ Transport costs are separated personally borne expenses.

Those approved for assistance level 1 or 2, or those classified as recipients of services

## Service equivalent to home-visit nursing care in Yokohama (Home Help)

This service involves home helpers (home-visit nursing care personnel) visiting the homes of users, and providing lifestyle support, such as help with bodily care including bathing, using the bathroom, and eating, as well as cleaning, laundry, meal preparation, shopping, and other tasks.

### < Estimated Personally Borne Expenses >

Frequency (for One Month)	Assistance Level 1	Assistance Level 2 Person targeted by business
About once a week	¥1,308	¥1,308
About twice a week	¥2,612	¥2,612
More than twice a week		¥4,145

## Service equivalent to home-visit lifestyle assistance in Yokohama

This service involves practitioners (Persons who have completed introductory or other training, etc.) visiting the homes of users, and providing lifestyle support, such as with cleaning, laundry, meal preparation, and shopping.

### < Estimated Personally Borne Expenses >

Frequency (for One Month)	Assistance Level 1	Assistance Level 2 Person targeted by business
About once a week	¥1,177	¥1,177
About twice a week	¥2,351	¥2,351
More than twice a week		¥3,730

**Note:** Estimates of personally borne expenses are calculated for those who pay 10% of insurance premiums as an example.

○ Everyday lifestyle support is available for those who have difficulty in doing household chores by themselves and assistance is unavailable from the family or the local community.

○ Services beyond the range of your daily life are not covered.

Examples:

(1) Services that do not directly support yourself, such as doing the laundry, cooking, shopping, or house-cleaning for your family members; receiving guests; or washing the family car

(2) Services that do not assist daily living needs, such as weeding the garden, taking care of pets, major housecleaning, cleaning windows, fixing the house, painting, gardening, and cooking special meals for special occasions such as New Year's

## Point

### How is an estimate of personally borne expenses calculated?

The number of units for each service is multiplied by the regional unit price of Yokohama City (as shown in the chart at right), after that the amount is multiplied by 10%.

**Note:** Estimates for personally borne expenses for services marked by an asterisk (\*) are calculated for 30 days of use.

$$\text{Number of units} \times \text{Yokohama City regional unit price} \times 0.1 = \text{Personally borne expense}$$

Type of Services (including community-based services and services designed to prevent the needs for nursing care)	Regional Unit Price
In-home health maintenance guidance      Welfare equipment rental	¥10
Outpatient day long-term care, Community-based day long-term care visits, short-term stay medical long-term care, nursing care welfare facilities for the elderly*, daily nursing care for tenants at specially designated facilities*, Communal daily long-term care for dementia patients*, long-term care health facilities for the elderly*, Sanatorium medical facilities*, daily nursing care for tenants at specially designated community-based facilities*, community-based living nursing care for tenants of nursing care welfare facilities for the elderly*, Nursing care medical clinics*	¥10.72
Home-visit rehabilitation; outpatient rehabilitation; short-term stay nursing care; outpatient day long-term care visits for dementia; small-scale, multifunctional home nursing care; small-scale, multifunctional home nursing care and home-visit nurse	¥10.88
Home-visit long-term care, home-visit bathing care, home-visit nursing, periodic rotation/ongoing home-visit long-term care, home-visit long-term care at night, in-home nursing care support	¥11.12

Services Available

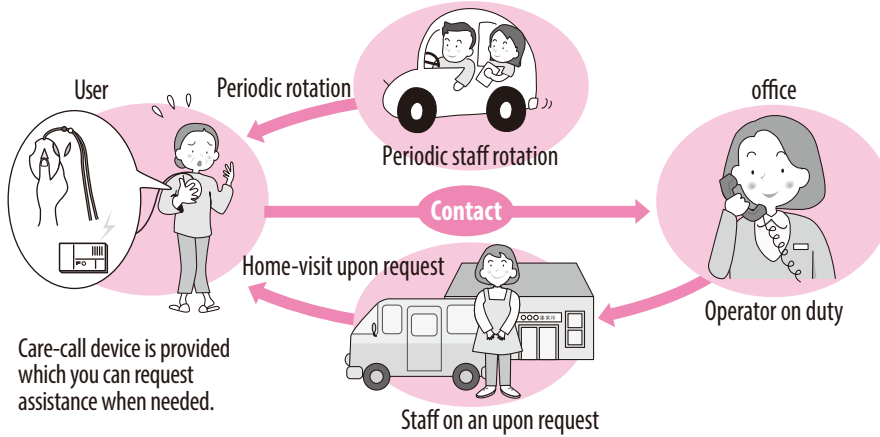


# Services Available

Those Approved for Nursing Care Levels 1-5 (Those Approved for Assistance Level 1 or 2 Cannot Use the Following)

## Home-visit long-term Care at Night Community-based

In addition to periodic home-visit nursing care service at night, the home-visit service upon your request is always available. Furthermore, the operation service that the staff coordinates or responds to your call is also available.

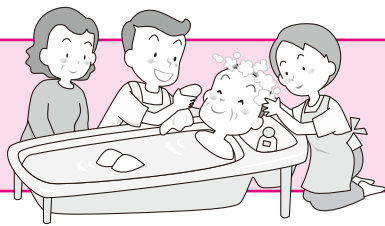


### < Estimated Personally Borne Expenses >

Home-visit Nursing Care at Night I	Operation service	¥1,140/month
	Periodic rotation service	¥430/use
	Ongoing home-visit services I	¥654/use

## Those Approved for Nursing Care Levels 1-5

### Home-visit Bathing Care



Nursing caregivers visit the user's home, bringing a bathtub to give a bath to the user.

### < Estimated Personally Borne Expenses >

Per session ¥1,402

- ◇ For those who have difficulty in taking a full-body bath by themselves, bed-bath or partial bathing service is available for ¥1,261 per session.

## Those Approved for Assistance Levels 1 or 2

### Outpatient bathing preventing long-term care

### < Estimated Personally Borne Expenses >

Per session ¥948

- ◇ For those who have difficulty in taking a full body bath by themselves, bed-bath or partial bathing service is available for ¥853 per session.

## Those Approved for Nursing Care Levels 1-5

### Home-visit Nursing

For users who are receiving medical treatment in their homes and for whom regular visits to a medical facility are difficult, according to instructions from the family doctor, a nurse regularly visits the homes to provide health checkups and advice and assistance with treatment.

### < Estimated Personally Borne Expenses >

Minutes per Visit	Under 20 Mins.* <sup>1</sup>	Under 30 Mins.	30-59 Mins.	60-89 Mins.	90 Mins. or More* <sup>2</sup>
Service Category					
Home-visit nurse station	¥348	¥523	¥913	¥1,251	¥1,585
Hospital or clinic	¥295	¥443	¥638	¥937	¥1,270

\*1 "Under 20 minutes" can be calculated only when other services are provided once a week or more for 20 minutes or longer.

○ The personally borne expense for the service in early morning and late night goes up by 1.25 to 1.5 times.

\*2 These amounts are calculated for those who are eligible for fee addition for special control and when the total minute of home-visit nurse services provided becomes 90 minutes or longer.

## Those Approved for Assistance Levels 1 or 2

### Outpatient preventing long-term care

For users who are receiving medical treatment in their homes and for whom regular visits to a medical facility are difficult, according to instructions from the family doctor, a nurse regularly visits the homes to provide health checkups and advice and assistance with treatment.

Note: Estimates of personally borne expenses are calculated for those who pay 10% of insurance premiums as an example.

Community-based

Community-based services: In principle, community-based services are available only to city residents (persons receiving long-term care insurance from the city).

Those Approved for Nursing Care Levels 1–5

Home-visit rehabilitation

For users who are receiving medical treatment in their homes and for whom regular visits to a medical facility are difficult, according to instructions from the family doctor, a physiotherapist, occupational therapist, or speech-language-hearing therapist visits homes to provide rehabilitation services.



< Estimated Personally Borne Expenses >

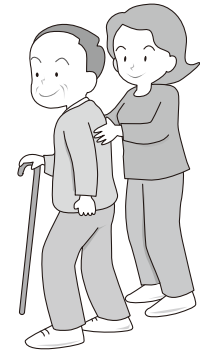
Per session ¥334

- ◇ If a therapy plan is created and you receive intensive therapy, an additional fee of ¥218 per session will occur.

Those Approved for Assistance Levels 1 or 2

Outpatient rehabilitation preventing long-term care

For users who are receiving medical treatment in their homes and for whom regular visits to a medical facility are difficult, according to instructions from the family doctor, a physiotherapist, occupational therapist, or speech-language-hearing therapist visits homes to provide rehabilitation services.



< Estimated Personally Borne Expenses >

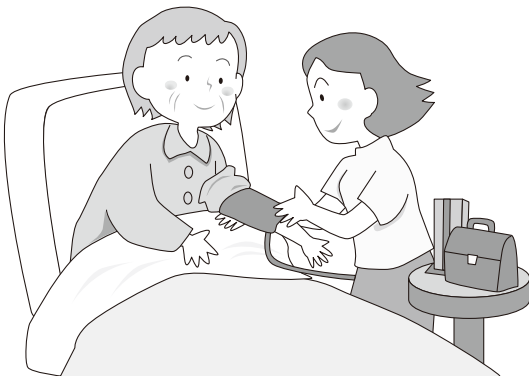
Per session ¥334

- ◇ If a therapy plan is created and you receive intensive therapy, there is an additional fee of ¥218 per session.

Those Approved for Nursing Care Levels 1–5

In-Home Health Maintenance Guidance

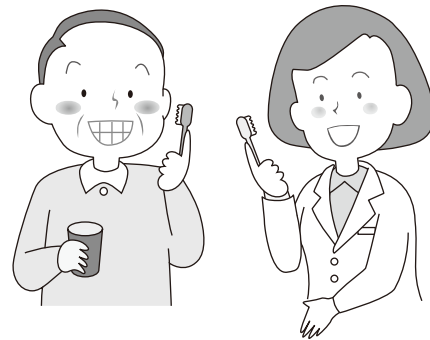
For people receiving medical treatment at home who find it difficult to go to the hospital, this service is for medical management, guidance and advice to be provided by the doctor making home visits, dentists, pharmacists, etc. In addition, the necessary information will be provided to the care manager so that a care plan can be formulated.



Those Approved for Assistance Levels 1 or 2

In-home Health Maintenance Guidance for preventive long-term care

For users who are receiving medical treatment in their homes and for whom regular visits to a medical facility are difficult, a physician, dentist, or pharmacist visit homes to manage and provide guidance and advice regarding the user's treatment. Also provided is information required to formulate a care plan at local community general support centers/community care plazas.



< Estimated Personally Borne Expenses >

Frequency	Doctor/Dentist	Pharmacist at Healthcare Provider	Pharmacist at Pharmacy	Nutritionist	Dental Hygienist
Per session	¥514	¥565	¥517	¥544	¥361
Visit including 2 to 9 residents in a single building	¥486	¥416	¥378	¥486	¥325
Maximum use	Twice a month	Twice a month	Four times <sup>*1</sup> a month	Twice a month	Four times a month

\*1 Those with terminal cancer or those receiving mainly parenteral nutrition can receive home health maintenance guidance twice a week for a maximum of eight times a month.

# Services Available

## Services used when visiting a facility (including overnight stays)

### Those Approved for Nursing Care Levels 1-5

#### Outpatient day long-term Care (Day Service)

You can commute to a day service center employing 19 or more regular personnel and receive services such as functional training and health checkups, as well as assistance with everyday tasks such as bathing and eating meals.

##### < Estimated Personally Borne Expenses >

Per Day	Nursing Care Level 1	Nursing Care Level 2	Nursing Care Level 3	Nursing Care Level 4	Nursing Care Level 5
Over 8 hours and less than 9 hours a day	¥714	¥844	¥977	¥1,111	¥1,246



- ◇ This is an estimated fee required for the services for 8 hours or more but less than 9 hours a day at a regular-sized facility for providing day services. (Transportation service fees are included.)
- ◇ An additional fee of ¥51 per day will be charged if the bathing service is used.
- ◇ Other additional fees are required if services related to improving nutrition and/or oral functioning are used.

#### Community-based day long-term care visits (Day Service)

Community-based

You can commute to a small-scale day service center employing up to 18 regular personnel and receive services such as functional training and health checkups, as well as assistance with everyday tasks such as bathing and eating meals.

##### < Estimated Personally Borne Expenses >

Per Day	Nursing Care Level 1	Nursing Care Level 2	Nursing Care Level 3	Nursing Care Level 4	Nursing Care Level 5
Over 8 hours and less than 9 hours a day	¥837	¥989	¥1,145	¥1,304	¥1,458

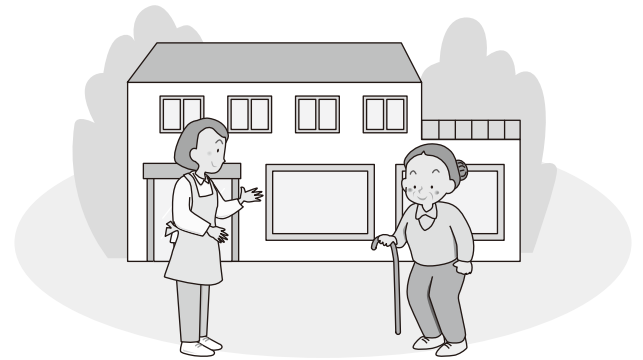


- ◇ This is a standard for use of more than 8 hours, but less than 9 hours. (Transportation service fees are included.)
- ◇ An additional fee of ¥51 per day will be charged if the bathing service is used.
- ◇ Other additional fees are required if services related to improving nutrition and/or oral functioning are used.

### Those approved for assistance level 1 or 2, or those classified as recipients of services

Service equivalent to nursing care provided via regular facility visits in Yokohama (Day service)

You can commute to a day service center and receive services such as functional training and health checkups, as well as assistance with everyday tasks such as bathing and eating meals.



##### < Estimated Personally Borne Expenses >

Frequency (for One Month)	Assistance Level 1	Assistance Level 2 Person targeted by business
About once a week	¥1,793	¥1,793
About twice a week		¥3,675



- ◇ These costs include fees for transportation and bathing services.
- ◇ Other additional fees are required if services related to improving nutrition and/or oral functioning are used.

### Those Approved for Nursing Care Levels 1-5 (Those Approved for Assistance Level 1 or 2 Cannot Use the Following)

#### Outpatient day long-term Care (Day Service) Community-based

Users who require constant attention from a nurse due to a serious illness such as an incurable disease or users who have terminal cancer can receive services such as functional training and health checkups, as well as assistance with everyday tasks such as bathing and eating meals.

##### < Estimated Personally Borne Expenses >

Per month.	No Category ¥13,605	+	Meal expenses (bowl icon) + Everyday living expenses, etc. (purse icon)
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- ◇ The service is limited depending on your physical condition.

Note: Estimates of personally borne expenses are calculated for those who pay 10% of insurance premiums as an example.

Community-based

Community-based services: In principle, community-based services are available only to city residents (persons receiving long-term care insurance from the city).



Those Approved for Nursing Care Levels 1–5

Outpatient day long-term care visits for dementia


Community-based


This is a day service, providing functional training, recreation, bathing and meal assistance for people with dementia, in a small-group, home-like setting.

< Estimated Personally Borne Expenses >

For 8 or more hours but less than 9 hours per day

Nursing care level 1	¥1,115
Nursing care level 2	¥1,235
Nursing care level 3	¥1,356
Nursing care level 4	¥1,479
Nursing care level 5	¥1,599

Meal expenses 

Everyday living expenses, etc. 

Those Approved for Assistance Levels 1 or 2

Preventive long-term care outpatient day long-term care visits for dementia


Community-based


This is a day service, providing functional training, recreation, bathing and meal assistance for people with dementia, in a small-group, home-like setting.

< Estimated Personally Borne Expenses >

For 8 or more hours but less than 9 hours per day

Assistance level 1	¥964
Assistance level 2	¥1,076

Meal expenses 

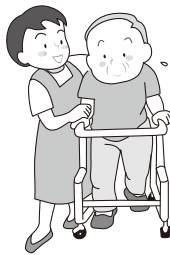
Everyday living expenses, etc. 

- ◇ This is an estimated fee required for the services for 8 hours or more but less than 9 hours a day at a provider offering individual care for dementia via regular visits. (Transportation fees are included.)
- ◇ An additional fee of ¥52 per day is required if the bathing service is used.
- ◇ Other additional fees are required if other services such as for nutrition improvement and/or oral functioning are used.

Those Approved for Nursing Care Levels 1–5

Outpatient rehabilitation (Day Care)

If your family doctor considers it necessary for the maintenance of your health and the improvement of your physical functions, you can commute to a nursing care health facility for the elderly, a hospital, or a clinic for rehabilitation and for nursing care related to everyday activities, such as bathing and eating meals.



< Estimated Personally Borne Expenses >

Per Day	Nursing Care Level 1	Nursing Care Level 2	Nursing Care Level 3	Nursing Care Level 4	Nursing Care Level 5
Over 7 hours and less than 8 hours a day	¥824	¥976	¥1,131	¥1,313	¥1,490

Meal expenses 

Everyday living expenses, etc. 

- ◇ This is an estimated fee required for the services for 7 hours or more but less than 8 hours a day at a regular-sized nursing care health facility for the elderly, hospital, or clinic for providing day services. (Transportation fee is included.)
- ◇ An additional fee of ¥55 per day will occur if the bathing service is used.
- ◇ There are also additional charges if the user receives intensive physiotherapy over a short period of time according to a physiotherapy plan, or for services for improvement in nutrition or oral functioning.

Those Approved for Assistance Levels 1 or 2

Preventing long-term care Outpatient rehabilitation

If your family doctor considers it necessary for the maintenance of your health and the improvement of your physical functions, you can commute to a nursing care health facility for the elderly, a hospital, or a clinic for rehabilitation and for nursing care related to everyday activities, such as bathing and eating meals.

The following optional services are also available. The monthly fee is fixed, and generally you can choose one center to use.

- < Types of Optional Services >
- Improvement in motor skills
  - Improvement in nutrition
  - Improvement in oral function

< Estimated Personally Borne Expenses >

Per Month	Common Services	Improvement in Motor Skills (Additional)	Improvement in Nutrition (Additional)	Improvement in Oral Functioning (Additional)
Assistance level 1	¥2,234	¥245	¥218	¥169
Assistance level 2	¥4,351	¥245	¥218	¥169

Meal expenses 

Everyday living expenses, etc. 

- ◇ The transportation and the bathing assistance service fees are included in the common service fee.

Note: Estimates of personally borne expenses are calculated for those who pay 10% of insurance premiums as an example.

Community-based

Community-based services: In principle, community-based services are available only to city residents (persons receiving long-term care insurance from the city).

## Services Available

### Those Approved for Nursing Care Levels 1–5

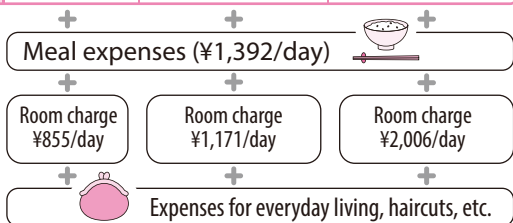
#### Short-term stay nursing care (Short Stay in a Welfare Facility)

You can move into as a short-term to a welfare facility and receive nursing care services, such as assistance with meals, getting dressed, and bathing, as well as recreational services, if it is temporarily difficult for you to receive nursing assistance from the family.

Fees vary according to the type of room used.

#### < Estimated Personally Borne Expenses >

Per Day	Shared Bed Room (Capacity: two or more persons)	Conventional Private Room (Room without joint living room)	Unit-type Private Room (Room with joint living room)
Nursing care level 1	¥649	¥649	¥758
Nursing care level 2	¥724	¥724	¥832
Nursing care level 3	¥802	¥802	¥912
Nursing care level 4	¥877	¥877	¥988
Nursing care level 5	¥951	¥951	¥1,062



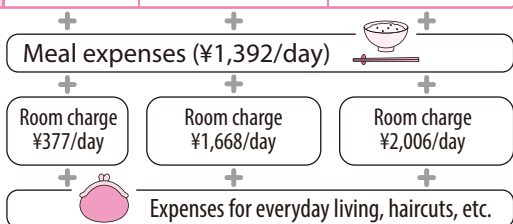
### Those Approved for Nursing Care Levels 1–5

#### Short-term stay medical nursing care (Short Stay in a Health Facility for the Elderly, Hospital, Etc.)

You can move into to a nursing care health facility for the elderly or a medical facility as a short term to receive services in functional training and daily living support from doctors, nurses, and therapists, if it is temporarily difficult for you to receive nursing assistance from the family. Fees vary according to the type of room.

#### < Estimated Personally Borne Expenses >

Per Day	Shared Bed Room (Capacity: two or more persons)	Conventional Private Room (Room without joint living room)	Unit-type Private Room (Room with joint living room)
Nursing care level 1	¥887	¥807	¥893
Nursing care level 2	¥939	¥857	¥943
Nursing care level 3	¥1,007	¥923	¥1,011
Nursing care level 4	¥1,063	¥980	¥1,069
Nursing care level 5	¥1,121	¥1,036	¥1,125



### Those Approved for Assistance Levels 1 or 2

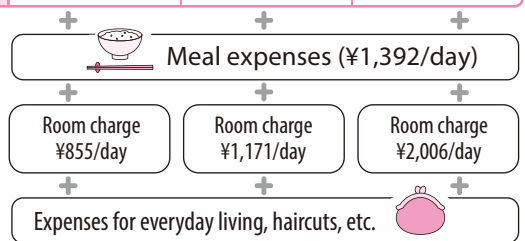
#### Preventive Long-term care Short-term stay nursing care

You can move into as a short-term to a welfare facility and receive nursing care services to maintain their everyday living functions if it is temporarily difficult for you to receive nursing assistance from the family.



#### < Estimated Personally Borne Expenses >

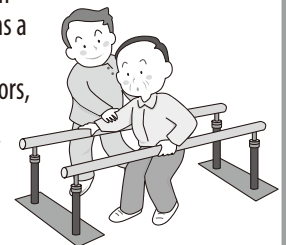
Per Day	Shared Bed Room (Capacity: two or more persons)	Conventional Private Room (Room without joint living room)	Unit-type Private Room (Room with joint living room)
Assistance level 1	¥486	¥486	¥569
Assistance level 2	¥604	¥604	¥707



### Those Approved for Assistance Levels 1 or 2

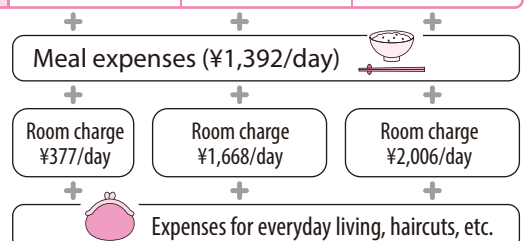
#### Preventive Long-term care Short-term stay medical nursing care

You can move into to a nursing care health facility for the elderly or a medical facility as a short term to receive services in functional training and daily living support from doctors, nurses, and therapists to support everyday living and functional skills with the goal of preventing the needs for nursing care, if it is temporarily difficult for you to receive nursing assistance from the family.



#### < Estimated Personally Borne Expenses >

Per Day	Shared Bed Room (Capacity: two or more persons)	Conventional Private Room (Room without joint living room)	Unit-type Private Room (Room with joint living room)
Assistance level 1	¥654	¥619	¥666
Assistance level 2	¥824	¥773	¥839



- ◇ An additional fee of ¥198 to ¥201 is required for each one-way trip if the transportation service is used.
- ◇ The cost of diaper is covered by the long-term care insurance.

#### Notes:

- Meal expenses and room charges are standard amounts set by the national government. For more information, please ask each facility (see page 35).
- Low income earners are eligible for a program for the reduction/exemption of expenses for meals and room charge (see page 35,38).

Note: Estimates of personally borne expenses are calculated for those who pay 10% of insurance premiums as an example.

#### Community-based

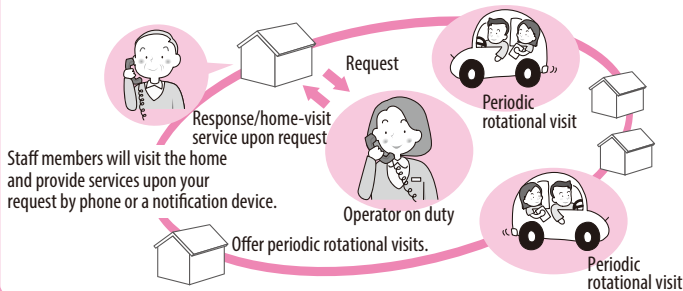
Community-based services: In principle, community-based services are available only to city residents (persons receiving long-term care insurance from the city).

# Services that can be used 24 hours a day

Those Approved for Nursing Care Levels 1-5 (Those Approved for Assistance Level 1 or 2 Cannot Use the Following)

## Periodic Rotation/Ongoing Home-visit Nursing Care Community-based

Home-visit nursing care staff and home-visit nurses work closely with each other and offer periodic rotational home-visit services and ongoing home-visit services 24 hours a day. In principle, only one facility may be used.



### < Estimated Personally Borne Expenses >

Per month

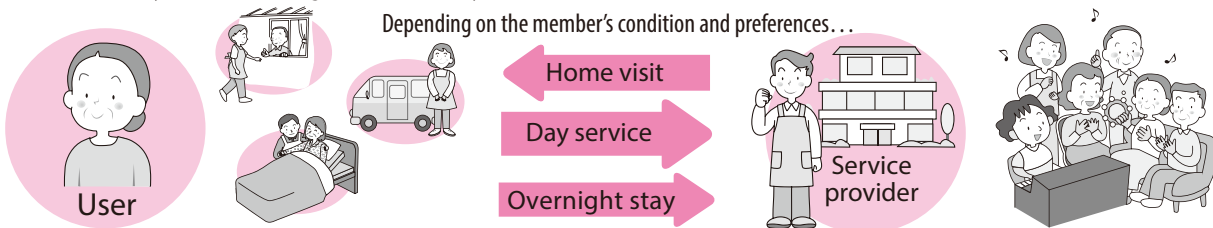
	Nursing Care/Nurse	Nursing Care
Nursing care level 1	¥9,243	¥6,335
Nursing care level 2	¥14,440	¥11,307
Nursing care level 3	¥22,041	¥18,774
Nursing care level 4	¥27,171	¥23,749
Nursing care level 5	¥32,917	¥28,722

## Those Approved for Nursing Care Levels 1-5

### Multifunctional Long-Term Care in a Small Group Home Community-based

This service allows the individual to stay at a facility in the area the person is familiar with, and focuses on commuting services to the facility with staff visiting the user's home.

The visit and the accommodation services are provided by familiar staff members. Usage is by a fixed monthly fee (with the accommodation and other fees charges separately), with just one facility used. When using this service, some home-based or community-based services, such as long-term home-visit care, outpatient long-term care and short-stay medical care will not be available. Also, the care plan will be created by the care manager of that facility.



### < Estimated Personally Borne Expenses >

Per month

Nursing care level 1	¥11,341
Nursing care level 2	¥16,666
Nursing care level 3	¥24,244
Nursing care level 4	¥26,758
Nursing care level 5	¥29,504

- Meal expenses
- Overnight expenses
- Expenses for everyday living, etc.

## Those Approved for Assistance Levels 1 or 2

### Preventive Long-term Multifunctional Long-Term Care in a Small Group Home Community-based

### < Estimated Personally Borne Expenses >

Per month

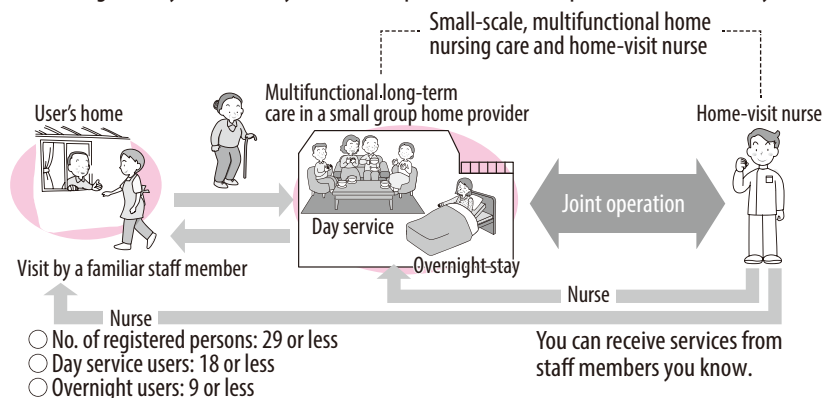
Assistance level 1	¥3,741
Assistance level 2	¥7,560

- Meal expenses
- Overnight expenses
- Expenses for everyday living, etc.

## Those Approved for Nursing Care Levels 1-5 (Those Approved for Assistance Level 1 or 2 Cannot Use the Following)

### Small-scale, multifunctional long-term care and home-visit nurse (former name: Combined services) Community-based

Provider offers mainly the day care service, however, the home visit or the overnight service is also available on request basis as well as the nurse visit service. You generally can use only one service provider. The care plan will be created by the care manager affiliated with the facility.



### < Estimated Personally Borne Expenses >

Per month

Nursing care level 1	¥13,533
Nursing care level 2	¥18,935
Nursing care level 3	¥26,617
Nursing care level 4	¥30,189
Nursing care level 5	¥34,148

- Meal expenses
- Overnight expenses
- Expenses for everyday living, etc.

- No. of registered persons: 29 or less
- Day service users: 18 or less
- Overnight users: 9 or less

**Note:** Estimates of personally borne expenses are calculated for those who pay 10% of insurance premiums as an example.

## Services for Supporting the Living Conditions

Those Approved for Nursing Care Levels 1–5

Those Approved for Assistance Levels 1 or 2

### Rental of Care Equipment

Members can rent welfare equipment to assist themselves in living independently.

### Rental of Preventive Long-term Care and Welfare Equipment

Members can rent welfare equipment to assist themselves in living independently, preventing the need for nursing care.

#### Rental Items covered by the service (13 Types)

**1** Wheelchair

\* Manual wheelchairs for self-use or assistance, or electric wheelchairs



**2** Wheelchair accessories

\* Cushions, auxiliary electric equipment, etc.



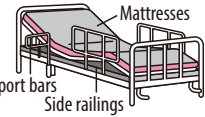
**3** Long term care beds

\* Head and foot positioning is adjustable as well as the height



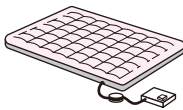
**4** Long-term care bed accessories

Mattresses  
Support bars  
Side railings  
Tables, assistance belts, sliding boards, mats



**5** Equipment to prevent bedsores

\* Air mats, water mats, etc.



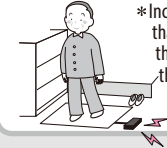
**6** Body position-changing equipment

\* Includes equipment to help a user move upright.



**7** Detectors for demented wanderers

\* Includes sensors that detect when the member leaves the bed.



**8** Lifts for mobilizing

\* Includes lifts for climbing stairs.



**9** Automated toilet system

\* Excludes exchangeable parts.

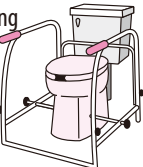


**Notes:**

- Item **1** to **8** are not covered for those approved for assistance levels 1 or 2, or those approved for nursing care level 1 except special cases.
- Item **9**, automated toilet systems with the function for solid waste are not covered for those approved for assistance levels 1 or 2, or for nursing care levels 1–3 except special cases. (Machines with the function to remove liquid waste are covered.)

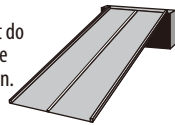
**10** Hand railing

\* Items that do not require installation.



**11** Slopes

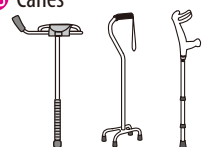
\* Items that do not require installation.



**12** Walkers



**13** Canes



< Estimated Personally Borne Expenses >

10% of the rental fee (Some users will pay 20% or 30% of the cost if their incomes are above certain amounts.)

※Rental fees vary depending on the type of equipment, model, and dealer.

Those Approved for Nursing Care Levels 1–5

Those Approved for Assistance Levels 1 or 2

### Sale of Special Welfare Equipment

A portion of the purchase amount will be reimbursed when purchasing, from specific suppliers, special welfare equipment that is not suitable for rental, such as items for using the bathroom or for bathing.

### Sale of Special Preventive long-term Care and Welfare Equipment

A portion of the purchase amount will be reimbursed when purchasing, from specific suppliers, special welfare equipment that contributes to preventive care, such as items for using the bathroom or for bathing.

#### Items covered by the service (5 Types)

- Only items purchased from the certified dealers are reimbursed.
- In principle, these services are unavailable to residents of private retirement homes that include nursing care or group homes.

Chair-type toilet seat

\* Includes the toilet seat riser.



Exchangeable parts of automated toilet system

\* Receivers, tubes, tanks, etc.

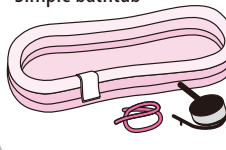


Bathing equipment accessories

\* Bathing chairs, chairs for use in a bathtub, bathing stand, belts for assisting bathing, etc.



Simple bathtub



Hanging equipment for mobilizing lifts



< Estimated Personally Borne Expenses >

10% of the purchase amount (Some users will pay 20% or 30% of the cost if their incomes are above certain amounts.)

**Maximum reimbursement:** For users who are responsible for 10% of the cost, this amount is ¥90,000 (annually).

Note: If the purchase amount exceeds ¥100,000, the member must pay the exceeded portion that exceeds.

- (1) Application form (available at the insurance and Pension Division of your local ward office)
- (2) Receipt
- (3) Documentation explaining the needs for the welfare equipment (written in the application form, the statement of reason, the in-home service plan, or the welfare equipment purchase plan)
- (4) A pamphlet of the applicable welfare equipment (with an outline on the welfare equipment)

**Note:** The same type of equipment generally cannot be purchased more than once.

Required Documents for Application



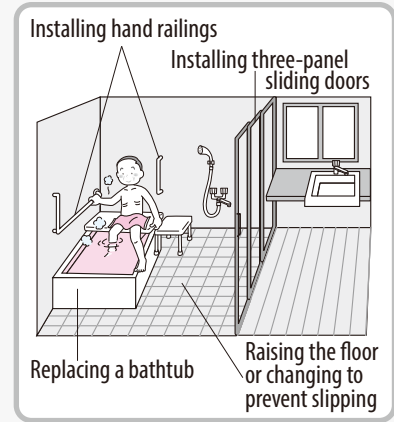
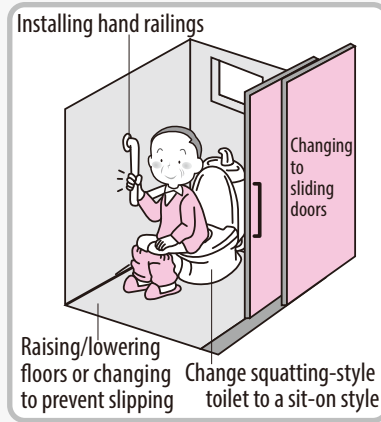
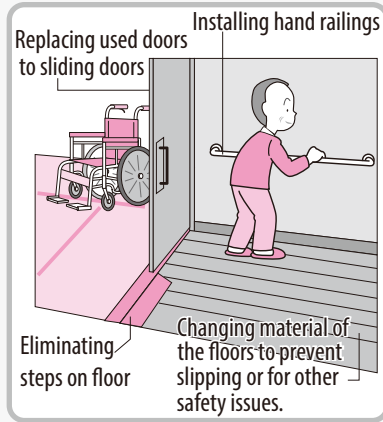
Those Approved for Nursing Care Levels 1–5

Those Approved for Assistance Levels 1 or 2

Home Renovation

Preventive Long-term Care Home Renovation

If you are approved for nursing care and renovate your home so that you can continue to live there, a portion of the cost will be reimbursed assuming a maximum cost of ¥200,000.



Construction procedures covered by the service

- (1) Installing hand railings
- (2) Eliminating steps or slants on the floor
- (3) Changing the material of the floors to prevent slipping or for other safety issues.
- (4) Changing to sliding doors (includes the expense for removal of the old doors and installation of the new ones [if the cost is lower than replacing])
- (5) Changing from a squatting-style toilet to a sit-on style
- (6) Any construction recognized as necessary to complete any of items (1) through (5):
  - Wall reinforcement for the installation of hand railings
  - Plumbing work for the bathroom or toilet
  - Installing fences to prevent a fall along with the installation of slopes
  - Repairing walls and pillars along with the replacement of doors, etc.

Documents Required for Application (Not when the authorized payment system which you authorize the contractor receives the fund directly from the city.)

- Before Construction**
- (1) Application form (available at the Insurance and Pension Division of your local ward office)
  - (2) Estimate or Statement of estimates
  - (3) Documentation stating the reason for the renovation written by the care manager. (If the individual does not have a care manager, please consult the Elderly and Disabled Support Division of your local ward office.)
  - (4) Photo of the home before renovation
  - (5) Items showing the planned completion status after home renovation (photos, illustrations, etc.)
  - (6) Copy of the agreement of home renovation and rent contract (if the home is rental housing)
- After Construction**
- (1) Receipt or statement of construction service
  - (2) Photo of the home after renovation is completed

■ In principle, these services are unavailable to residents of facilities or residences intended for senior citizens, such as private retirement homes, group homes, or residences for senior citizens with additional services included.

Yokohama City Home Renovation Procedure

You will be required to pay all home renovation expenses (both the portion covered by insurance and the portion for which you are responsible) upfront, but a portion of the expenses (the portion covered by insurance) will be reimbursed within the limit at a later date. Yokohama City, however, has an authorized payment system whereby you can pay the contractor only the portion of the cost for which you are responsible, and the contractor will receive the rest directly from the city.

This system applies only to renovations conducted by home-renovation companies registered with the city. A list of registered companies is available on the Yokohama City website. This list is also available from the Elderly and Disabled Support Division or the Insurance and Pension Division of your local ward office.

Yokohama City long-term care insurance home renovations list

◇ In addition to the home renovation program by long-term care insurance, the living environment equipping program is also available. (See page 39). Although the types of construction applicable for subsidies and the subsidy amounts vary, in some cases you can use both programs. Please consult with the Elderly and Disabled Support Division of your local ward before you begin construction for more information regarding the living environment equipping program.

< Estimated Personally Borne Expenses >

10% of the renovation expense (Some users will pay 20% or 30% of the cost if their incomes are above certain amounts.)

Maximum reimbursement : For users who are responsible for 10% of the cost, this amount is ¥180,000.

**Note:** The maximum reimbursement for renovation is ¥200,000.

You can re-apply for the reimbursement if you change your address of residence or if your required level of nursing care\* increases more than three or four levels (the maximum cost used to calculate reimbursement is ¥200,000).

**Note:** Nursing Care Level 1 and Assistance Level 2 are considered to be the same level.

- (1) Before starting construction, please submit documents to the Insurance and Pension Division of your local ward office. Construction may begin after you receive an approval for the renovation from the Insurance and Pension Division.
- (2) After construction is completed and you have paid the contractor, submit the receipts and other necessary documents to the Insurance and Pension Division of your local ward office to receive your reimbursement.

# Services Available

## Residential services

### Those Approved for Nursing Care Levels 1–5

#### Communal daily long-term care for dementia patients

Community-based

Those suffering from dementia can receive daily nursing care while living in a homelike environment in a group of five to nine persons. Facilities are equipped with a bedroom, living room, dining area, bath, etc., and each resident is assigned household tasks to mitigate the symptoms of dementia. The goal is to provide an environment where residents can live in comfort.

**Note:** The personally borne expenses vary depending on the number of unit.

#### < Estimated Personally Borne Expenses >

Per month

	One Unit	Two Units or More
Nursing care level 1	¥24,571	¥24,185
Nursing care level 2	¥25,728	¥25,310
Nursing care level 3	¥26,468	¥26,082
Nursing care level 4	¥27,015	¥26,597
Nursing care level 5	¥27,594	¥27,143

+



- Meal expenses
- Room charge, maintenance fee and utility expenses
- Expenses for everyday living, diapers, haircuts, etc.

### Those Approved for Assistance Levels 2

#### Preventive long-term care communal Daily long-term care for dementia patients

Community-based

Those suffering from dementia can receive daily nursing care while living in a homelike environment. Staff members offer support and provide services designed to improve their everyday activities.

**Notes:**

- Those Approved for assistance level 1 are not covered for this service.
- The personally borne expenses vary depending on the number of unit.

#### < Estimated Personally Borne Expenses >

Per month

	One Unit	Two Units or More
Assistance level 2	¥24,442	¥24,056

+



- Meal expenses
- Room charge, maintenance fee and utility expenses
- Expenses for everyday living, diapers, haircuts, etc.

### Those Approved for Nursing Care Levels 1–5

#### Daily Nursing Care for Tenants at Specially Designated Facilities (Paid nursing care home for the elderly etc.)

You can move into a facility such as a private retirement home that includes nursing care covered by the long-term care insurance, and receive nursing care services such as assistance with meals, bathing, and using the bathroom, as well as physiotherapy services. Facilities offering short-term usage (up to 30 days) are also available.

#### < Estimated Personally Borne Expenses >

Per month

Nursing care level 1	Nursing care level 2	Nursing care level 3	Nursing care level 4	Nursing care level 5
¥17,302	¥19,425	¥21,676	¥23,734	¥25,954

+

- Maintenance fee
- Meal expenses
- Utility expenses, amount for rent, everyday expenses, diaper costs, grooming costs, etc.

### Those Approved for Assistance Levels 1 or 2

#### Preventive Long-term Care Daily Nursing Care for Tenants at Specially Designated Facilities (Paid nursing care home for the elderly etc.)

You can move into a facility such as a private retirement home that includes nursing care covered by the long-term care insurance, and receive assistance for everyday living from the staff and services designed to improve everyday living functions.

#### < Estimated Personally Borne Expenses >

Per month

Assistance level 1	Assistance level 2
¥5,854	¥10,002

+

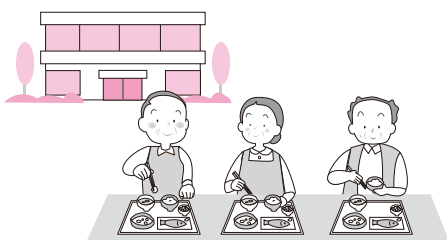
- Maintenance fee
- Meal expenses
- Utility expenses, amount for rent, everyday expenses, diaper costs, grooming costs, etc.

### Those Approved for Nursing Care Levels 1–5 (Those Approved for Assistance Level 1 or 2 Cannot Use the Following)

#### Daily Nursing Care for Tenants at Specially Designated Community-based Facilities (Paid nursing care home for the elderly etc.)

Community-based

At small-scale, for-pay nursing homes with nursing care (specially designated facilities dedicated to long-term care) with a capacity of 29 persons or less, services similar to those for the daily nursing care for tenants at specially designated facilities will be provided to a smaller number of residents.



#### < Estimated Personally Borne Expenses >

Per month

Nursing care level 1	¥17,431
Nursing care level 2	¥19,586
Nursing care level 3	¥21,837
Nursing care level 4	¥23,927
Nursing care level 5	¥26,146

+

- Management fees, utility expenses, amount for rent
- Meal expenses
- Expenses for everyday living, diapers, haircuts, etc.

**Note:** Estimates of personally borne expenses are calculated for those who pay 10% of insurance premiums as an example.

Community-based

Community-based services: In principle, community-based services are available only to city residents (persons receiving long-term care insurance from the city).

## Facility services

Those Approved for Nursing Care Levels 3–5 (in Principle) (Those Approved for Assistance Level 1 or 2 Cannot Use the Following)  
For those approved for nursing care levels 1 or 2, there is an exceptional admission program (see below).

### Nursing care Welfare facilities for the elderly (Intensive Care Home for the Elderly)

These facilities offer nursing care services such as bathing, assistance in going to the bathroom, and meals, as well as assistance in everyday living, functional training, health maintenance and therapy.

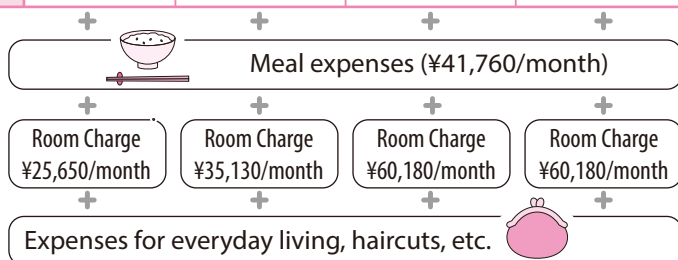
### Community Living Nursing Care for Tenants of Nursing Care Welfare facilities for The Elderly

Community-based

Small-scale Intensive Care homes for the elderly with a capacity of 29 persons or less offer services similar to a Intensive Care home for the elderly

#### < Estimated Personally Borne Expenses >

Per month	[Nursing Care Welfare facilities for the Elderly] Shared Bed Room (Capacity: two or more persons)	[Nursing Care Welfare facilities for the Elderly] Conventional Private Room (Room without joint living room)	[Nursing Care Welfare facilities for the Elderly] Unit-type Private Room (Room with joint living room)	[Community-based Welfare facilities for the elderly] Unit-type Private Room (Room with joint living room)
Nursing care level 1	¥18,428	¥18,428	¥20,969	¥21,258
Nursing care level 2	¥20,615	¥20,615	¥23,156	¥23,477
Nursing care level 3	¥22,898	¥22,898	¥25,503	¥25,825
Nursing care level 4	¥25,085	¥25,085	¥27,722	¥28,108
Nursing care level 5	¥27,240	¥27,240	¥29,877	¥30,295



- ◇ Additional fees are required depending on the types of services the facility provides or if you use other optional services.
- ◇ The cost of diaper is covered by the long-term care insurance.

#### Notes:

- Meal expenses and room charge are standard amounts set by the national government. For more information, please ask each facility (see page 35).
- Low income earners are eligible for a program to reduce or exempt expenses for meals and room charge (see page 35,38).

**Note:** Estimates of personally borne expenses are calculated for those who pay 10% of insurance premiums as an example.

Community-based

Community-based services: In principle, community-based services are available only to city residents (persons receiving long-term care insurance from the city).

### Exceptional admission program

From April 2015, special nursing homes for the elderly have become facilities for those with nursing care levels 3 or more. However, even for those with nursing care levels 1 or 2, admission can be allowed exceptionally.

- When an individual with dementia is having difficulty in handling everyday life in his/her own home due to frequent occurrences of symptoms or behaviors which disturb everyday living or difficulty in communicating.
- When an individual suffering from intellectual or mental disorders is having difficulty in handling everyday life in his/her own home due to frequent occurrences of symptoms or behaviors which disturb everyday living or difficulty in communication.
- When an individual is having difficulty in ensuring physical and mental security/safety due to a suspicion of severe abuses by his/her family, etc.
- When an individual is having difficulty in handling everyday life in his/her home when support from their family cannot be expected because he/she is single, or family members living together are aged or weak, as well as when the long-term care services or daily living support services from the community are insufficient.

**If you are approved for nursing care levels 1 or 2, and wish to move in a Intensive home for the elderly, please file an application for admission by checking the appropriate box of exceptional admission requirements in the application form.**

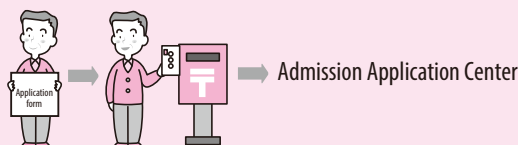
### How to Enter a Nursing Care Welfare facilities for the Elderly (Intensive Home for the Elderly)

Applications are accepted at the institution application center.

Application forms are available at the Elderly and Disabled Support Division of your local ward office, community care plazas, Intensive homes for the elderly, and the Elderly Facilities Division of the Health and Social Welfare Bureau, please complete a form and mail to the address below.

#### **T0: Intensive Home for the Elderly Institution Application Center**

(within the Consultation Center for Facilities and Residences for Senior Citizens)  
Yume Ooka Office Tower 10F, 1-6-1  
Kami-Ooka-nishi, Konan-ku 233-0002  
Tel: 045-840-5817 Fax: 045-840-5816



### Consultation Center for Facilities and Residences for Senior Citizens

The Consultation Center for Facilities and Residences for Senior Citizens has been established as a point of contact for consultations related to facilities and residences for senior citizens. Specialist consultants are available for consultation on individual and specific points, and can provide a wide range of other information, such as basic information on facilities and information on the status of vacancies.

- ◇ Contact: Yume Ooka Office Tower 10F, 1-6-1 Kami-Ooka-nishi, Tel: 045-342-8866 Fax: 045-840-5816
- ◇ Consultation times (reservations take priority): Monday through Friday, 9:00 a.m. to 5:00 p.m. (closed on Saturdays, Sundays, and public holidays and during the New Year's holiday period.)
- ◇ Facility information available: Intensive-care retirement homes, rehabilitation facilities for seniors, group homes, Low-cost nursing home, etc.

Services Available



## Services Available

Those Approved for Nursing Care Levels 1–5  
(Those Approved for Assistance Level 1 or 2 Cannot Use the Following)

### Nursing Care Health Facilities for the Elderly

These facilities offer physiotherapy to support everyday living functions and other assistance to lead the users to independent lives at home again. As the goal is users' independent living at home, periodic reviews are conducted to determine whether the users can return to their home. Depending on the nature of the illness, facilities will introduce an appropriate healthcare provider if hospital treatment is considered unnecessary.



#### < Estimated Personally Borne Expenses >

Per month	Shared Bed Room (Capacity: two or more persons)	Conventional Private Room (Room without joint living room)	Unit-type Private Room (Room with joint living room)
Nursing care level 1	¥25,342	¥22,963	¥25,600
Nursing care level 2	¥26,886	¥24,410	¥27,047
Nursing care level 3	¥28,880	¥26,404	¥29,041
Nursing care level 4	¥30,520	¥28,108	¥30,745
Nursing care level 5	¥32,257	¥29,748	¥32,450

Meal expenses (¥41,760/month)

Room Charge  
¥11,310/month

Room Charge  
¥50,040/month

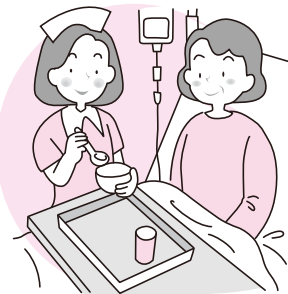
Room Charge  
¥60,180/month

Expenses for everyday living, haircuts, etc.

### Sanatorium medical facility for the elderly

There are two types of nursing care medical facilities: convalescent facilities for recuperation and hospital wards for senile dementia patients. Convalescent facilities provide extended care for patients who are in stable condition but require long-term specialized treatments. Hospital wards offer health maintenance, nursing, functional training, and other medical treatments to patients suffering from senile dementia.

This was to be abolished at the end of 2017, but the deadline for abolishment was extended for six years.



#### < Estimated Personally Borne Expenses >

Per month	Shared Bed Room (Capacity: two or more persons)	Conventional Private Room (Room without joint living room)	Unit-type Private Room (Room with joint living room)
Nursing care level 1	¥22,062	¥19,071	¥22,705
Nursing care level 2	¥25,117	¥22,030	¥25,761
Nursing care level 3	¥31,582	¥28,591	¥32,225
Nursing care level 4	¥34,412	¥31,324	¥35,055
Nursing care level 5	¥36,856	¥33,833	¥37,499

Meal expenses (¥41,760/month)

Room Charge  
¥11,310/month

Room Charge  
¥50,040/month

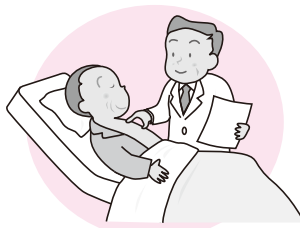
Room Charge  
¥60,180/month

Expenses for everyday living, haircuts, etc.

### Nursing Care Medical Facilities

This service was created alongside the revisions to the Public Nursing Care Insurance Law that went into effect in April 2018.

Such facilities provide care for senior citizens who have both treatment for chronic conditions and nursing care needs, offering medical treatment functions such as daily medical management and nursing and terminal care, as well as functions befitting a lifestyle facility.



#### < Estimated Personally Borne Expenses > Type I

Per month	Shared Bed Room (Capacity: two or more persons)	Conventional Private Room (Room without joint living room)
Nursing care level 1	¥26,532	¥22,963
Nursing care level 2	¥30,038	¥26,500
Nursing care level 3	¥37,660	¥34,090
Nursing care level 4	¥40,876	¥37,338
Nursing care level 5	¥43,802	¥40,233

Meal expenses (¥41,760/month)

Room Charge  
¥11,310/month

Room Charge  
¥50,040/month

Expenses for everyday living, haircuts, etc.

- ◇ Additional fees are required depending on the types of services the facility provides and if any optional services are used.
- ◇ The cost of diaper is covered by the long-term care insurance.

**Notes:** • Meal expenses and room charges are standard amounts set by the national government. For more information, please ask each facility (See page 35).  
• Low income earners are eligible for a program to reduce or exempt expenses for meals and room charge. (See page 35,38).

### How to apply for admission to nursing care health facilities for the elderly, Sanatorium medical facilities, and nursing care medical clinics

Please complete and submit the application form given by each facility.

**Consult with the facility that you wish to apply for.**

Get the details of the services available



Application

Contract














**Note:** Estimates of personally borne expenses are calculated for those who pay 10% of insurance premiums as an example.

# Personally Borne Expenses for Services

**When long-term care insurance services are used, the user pays for the percentage of the service costs for which they are responsible.\***

In addition to the service fee, food and room charges are also covered. Food, room and other costs depend on the contract at the time of use, which will vary depending on the facility.

If you use (1) In-home services (2) Community services (For those approved for assistance levels 1 or 2 and nursing care levels 1–5)				
Home-visit nursing care, Home-visit bathing care, Home-visit nurse, Home-visit Rehabilitation, In-home health maintenance guidance, etc.	services expenses			
Outpatient day long-term care Outpatient Rehabilitation, etc.	services expenses	Meal expenses 		Expenses for everyday living 
Short-term stay nursing care Short-term stay medical nursing care (Short stay)	services expenses	Meal expenses 	Room charge 	Expenses for everyday living (such as for haircuts)* 
Multifunctional long-term care in a Small Group Home Communal daily long-term Care for Dementia Patients, etc.	services expenses	Meal expenses 	Room charge 	Expenses for everyday living (such as for haircuts)* 
If you use (3) facility services [for those approved with nursing care levels 3 or more in the case of using nursing care for the elderly (intensive care home for the elderly) or for those approved for nursing care levels 1–5 in the case of using other facility services]				
Nursing care welfare facilities for the elderly (intensive care home for the elderly), Nursing care health facilities for the elderly, Sanatorium medical facility for the elderly, Nursing care medical clinics	services expenses	Meal expenses 	Room charge 	Expenses for everyday living (such as for haircuts)* 

※ There is no charges for diapers for short-stay or facility services.

## You may have to pay other costs for special services.

If you use special services, you may have to pay other expenses in addition to the portion for which you are responsible under insurance.

Example : Additional fees are required for services not covered by the long-term care insurance or not included in your care plan (You may use these special services by signing a contract with the service provider for services not covered by the long-term care insurance and by paying the entire cost.)

\* For details on the percentage of costs that users are responsible for, see page 31.



## Personally Borne Expenses for Services .....

For the primary insured person (age 65 or older), the payment level for the user, for those who have income above a certain level, will be 20% or 30%. However, there is an upper limit\* to the amount to be paid by the user, so the amount to be paid is not necessarily two to three times these amounts.

\* For the maximum payment amount, please refer to the maximum amount to be paid by the individual (monthly amount) on page 34.

### ● Assessment on personally borne expense

The judgment will be made based on the following criteria:

Ratio	Criteria
10%	<p><b>Persons who meet any of conditions (1) through (6) below.</b></p> <p>(1) The insured person is receiving public financial assistance for everyday living.</p> <p>(2) The insured person's total earnings is less than 1.6 million yen. *1</p> <p>(3) The insured person's total earnings are greater than 1.6 million yen, and either of the conditions described in (a) or (b) below is met:</p> <p>(a) The insured person is the only primary insured person in his or her household, and the total of the insured person's public pension earnings and remaining total earnings*2 is less than 2.8 million yen.</p> <p>(b) The insured person is one of multiple primary insured persons in his or her household, and the total of public pension earnings added to remaining total earnings for all primary insured persons in the household is less than 3.46 million yen.</p> <p>(4) Person receiving public financial assistance for everyday living.</p> <p>(5) The insured person moved in special nursing homes for the elderly by previous measures. (Those who have been in special nursing homes for the elderly due to municipal measures before April 1, 2000)</p> <p>(6) Secondary insured person (between 40 and 64 years of age)</p>
20%	<p><b>Persons who meet any of conditions (1) or (2) below.</b></p> <p>(1) The insured person does not meet the conditions for 10%, and the insured person's total earnings are less than 2.2 million yen.</p> <p>(2) The insured person's total earnings are greater than 2.2 million yen, and either of the conditions described in (a) or (b) below is met:</p> <p>(a) The insured person is the only primary insured person in his or her household, and the total of the insured person's public pension earnings and remaining total earnings is greater than 2.8 million yen and less than 3.4 million yen.</p> <p>(b) The insured person is one of multiple primary insured persons in his or her household, and the total of public pension earnings added to remaining total earnings for all primary insured persons in the household is greater than 3.46 million yen and less than 4.63 million yen.</p>
30%	<p><b>Those who have a total income of 2.2 million yen or more, and meet conditions (a) and (b).</b></p> <p>(a) If the household includes only the primary insured person, the total of the individual's public pension income + other income is 3.4 million yen or greater.</p> <p>(b) When there are multiple primary insured persons, the total of the individual's public pension income + other income is 4.63 million yen or greater.</p>

\*1 For details on total earnings, see \*2 of "Insurance Premiums" on page 7.

\*2 For details on remaining total earnings, see \*4 of "Insurance Premiums" on page 7.

### ● Long-term Care Insurance Payment Ratio Certificate (Payment Ratio Certificate)

As the document proving the level of payment to be made by the individual, the user must present the long-term care insurance certificate to the company providing the long-term care services.

Those who have newly received nursing care (assistance) approval.

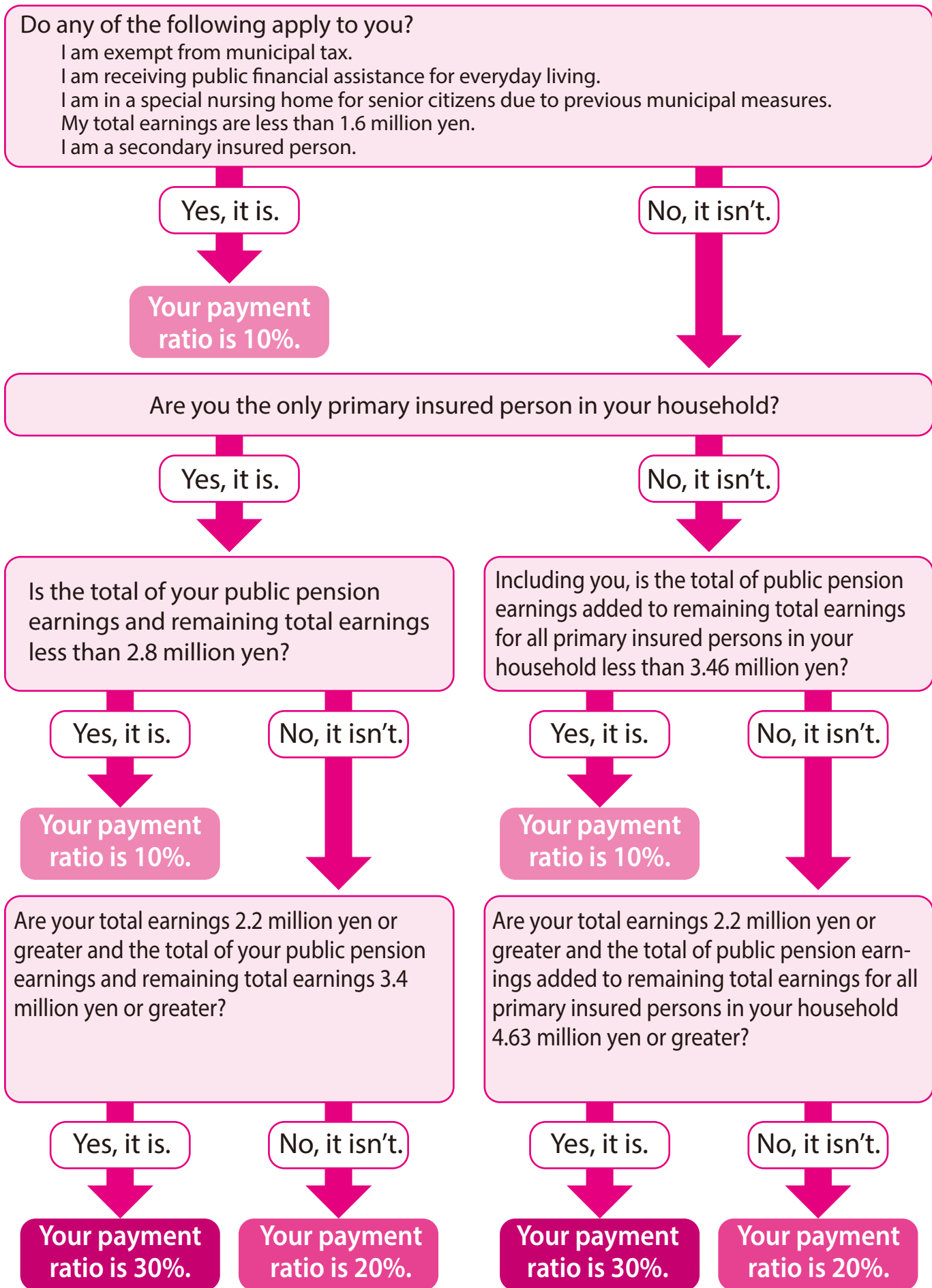
We will send out the certificates with your long-term care insurance card at the time of authorization.

For those who have a valid payment rate certificate dated up to the end of July 2021, and who continue to be certified as requiring nursing care.

This will be sent from each ward office during July 2021. (Because this is a renewal, no action is necessary.)

**We will assess each person's ratio of personally borne expenses on August 1 every year.**

Judgement will be made based on the number of primary insured persons in the household (age 65 or older), even when the municipal tax status and amount of income change.



## If You Are Involved in an Accident

### ● Inform Us Right Away If You Are Involved in an Accident Caused by a Third Party

If you have to use long-term care insurance services because of something caused by a third party (offender), such as in a traffic accident or injury case, notify us that the injury was caused by a third party, because the method of calculating the percentage of nursing care expenses for which you are responsible will be different.

Your notification must include documents such as a traffic accident record issued by the police. Please consult the Insurance and Pension Division of your local ward office as soon as possible.

### ● The offender Will Pay Nursing Care Expenses

If nursing care is required due to the actions of a third party (offender), the offender must pay the necessary nursing care fees unless the injured party is at fault.

When the long-term care insurance services are used, Yokohama City will temporarily pay the insurance benefits for nursing care fees and file a claim with the offender for payment on behalf of the injured party.

### ● Be Careful With a Private Settlement

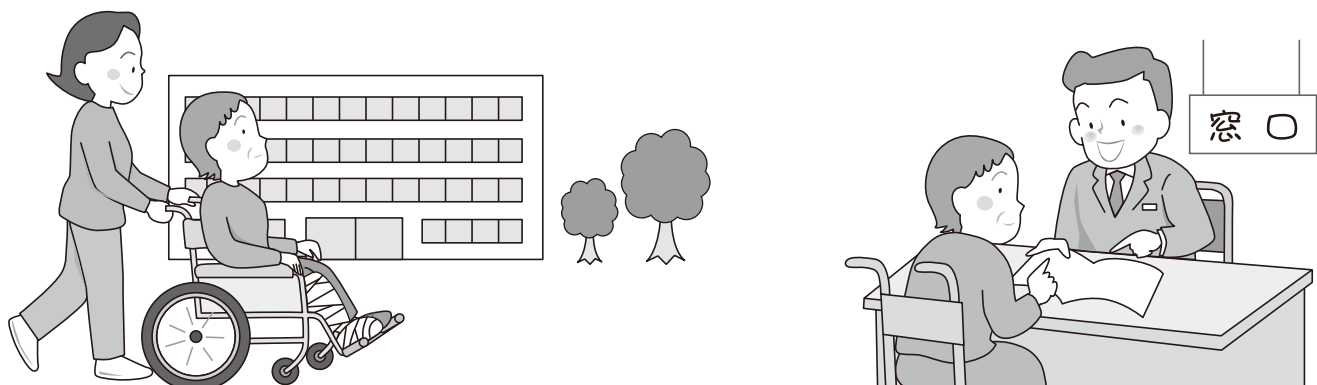
If a settlement is reached after private negotiations between the injured party and the offender, the settlement may precede over and the city cannot claim your expenses from the offender.

Regarding the services used after a private settlement is reached:

- (1) If Yokohama City has already paid the nursing care service fees to the provider, the city might ask restitution for the fees from the insured person (injured party) to avoid duplicate payments.
- (2) If Yokohama City has not yet paid the nursing care service fees to the provider and you receive the compensation from the offender, the city cannot make an insurance payment for the amount you received. The injured person must pay all nursing care expenses.

For those reasons, confirm the issues mentioned above and avoid any possible extra expenses on you if you choose to settle privately.

If you negotiate a settlement, please notify the Insurance and Pension Division of your local ward office in advance, and if a settlement is reached, please submit a copy of the settlement papers to the same office immediately.





## Reducing Personally Borne Expenses For High Nursing Care Services

### ● Description

You can apply at your local ward office to receive reimbursements for expenses related to high-cost nursing care services when your monthly amount of the portion of expenses for which you are responsible exceeds the monthly limits (see chart below). The portion of expenses to which you are responsible refers to the 10% of the service fees covered by the long-term care insurance (or 20% or 30%, if your income reaches certain levels).

\*Services that are not eligible for consideration as high-cost nursing care services

Some preventive care and lifestyle support services, meal and room costs associated with services offered by facilities, purchases of welfare tools, home renovations

### ● Procedure

You must file an application at your local ward office to receive reimbursements related to high-cost nursing care services or preventive care services.

In addition, for the second and subsequent occasions on which you are reimbursed, money is in principle transferred to the account that was specified at the time of the initial application.

- The limit of personally borne expense is calculated as a household. If you have more than two persons who are approved for nursing care or assistance in your household, you can combine the expenses for the calculation and if the total amount exceeds the designed limit, the fee of high nursing care service is reimbursed.

Calculation formula:

$$\frac{\text{(Household personally borne expense total — The monthly limit for household personally borne expenses)}}{\text{Applicant's personally borne expense}} \times \frac{\text{Household's entire personally borne expense}}{\text{Applicant's personally borne expense}}$$

#### Example 1: If only one person in the household is approved for nursing care or assistance

If an individual pays ¥30,000 in one month when his/her monthly limit is ¥24,600

Calculation method:  $\frac{\text{Applicant's personally borne expenses} - \text{The monthly limit for personally borne expenses}}{\text{Applicant's personally borne expenses}} = \text{High nursing care service expense benefit}$

$$\frac{¥30,000 - ¥24,600}{¥30,000} = ¥5,400$$

#### Example 2: If two or more people in the household are approved for nursing care or assistance (to calculate as a household)

If both husband and wife belong to a level 3 household are exempted from municipal tax (the monthly limit for household personally borne expenses: ¥24,600), and the husband's expenses is ¥30,000 and the wife's expenses is ¥10,000

1 Husband's high nursing care service expense:

$$\{ (¥30,000 + ¥10,000) - ¥24,600 \} \times \frac{¥30,000}{¥30,000 + ¥10,000} = ¥11,550$$

2 Wife's high nursing care service expense:

$$\{ (¥30,000 + ¥10,000) - ¥24,600 \} \times \frac{¥10,000}{¥30,000 + ¥10,000} = ¥3,850$$

If long-term preventative care or daily life support service businesses are used, the calculation method may be different, so the result for the total household may be refunded to one member of the household at once.

### maximum amount to be paid by the individual (monthly amount)

Income category	Maximum (monthly) <sup>*1</sup>
Households with a person equivalent to the role of active income-earner III (taxable income of 6.9 million yen or more)	¥140,100 (household) <sup>*3</sup>
Households with a person equivalent to the role of active income-earner II (taxable income of 3.8 million yen or greater and less than 6.9 million yen)	¥93,000 (household) <sup>*3</sup>
Households with a person equivalent to the role of active income-earner I (taxable income of 1.45 million yen or greater and less than 3.8 million yen)	¥44,400 (household)
Person in a household that includes a person subject to municipal tax	¥44,400 (household)
Person in a household that does not include anyone subject to municipal tax	¥24,600 (household)
<ul style="list-style-type: none"> <li>· Person who is receiving an old-age welfare pension</li> <li>· Those who, in the previous year, had a total of public pension income + other total income<sup>*2</sup> of ¥800,000 or less.</li> </ul>	¥24,600 (household) ¥15,000 (individual)
Person receiving public financial assistance for everyday living	¥15,000 (individual)

\*1 "Household" refers to all persons on the basic resident register and represents the maximum for the total of all costs borne by all persons who use nursing care services. "Individual" represents the maximum for costs borne by the person using nursing care services.

\*2 On other total income amount, please refer to \*4 in "Insurance Premiums," on page 7.

\*3 To be added to service usage from August 2021.

# Personally Borne Expenses for Services .....

## Reducing food and room costs (Long-term Care Insurance Certification for Personally Borne Expense Cap)

### Description

Normally, anyone entering a facility or using it for a short stay will be responsible for all food and room charges, but, so that facility use will not be a burden for lower-income persons, a limit on the charges is set according to the household<sup>1</sup> and the person's income, reducing the amount at must be paid.

### Procedure

Application should be made at the insurance and pension section of the ward office, where a certificate of limit of costs for long-term care insurance will be received. By presenting this certificate to the facility being used, food and room costs will be reduced to the amount of the daily payment limit listed in the table.

#### Needed for applying for the certificate of limit of costs

Long-term care insurance certificate, documents that can confirm assets such as deposits held by the insured person and spouse (when present), savings passbook, etc.

### Eligible services

- Facility services (Intensive Care home for the elderly, nursing care health facilities for the elderly, sanatorium medical facility for the elderly) nursing care medical clinics
- (Preventive long-term care) Short-term stay nursing care
- (Preventive long-term care) Short-term stay medical nursing care

### Daily Cap for Personally Borne Expenses

Level	Eligibility	Room Charge				Meal Expenses		
		Shared bed room	Conventional private room		Shared bedroom with individual units	Unit-type private room	Facility admission	Short-term admission
(Special nursing homes or the elderly, etc.)	(Long-term care health facilities/ Medical long-term care sanatoriums, etc.)							
Level 1	<ul style="list-style-type: none"> <li>• Those in households exempt from municipal tax<sup>(*1)</sup> and receiving a senior welfare pension</li> <li>• Those receiving public financial assistance for everyday living</li> </ul>	¥0	¥320	¥490	¥490	¥820	¥300	¥300
Level 2	In households exempt from municipal tax, the total of the individual's public pension and other total income <sup>(*2)</sup> + tax-exempt pension income is ¥800,000 or less per year, and whose total amount of deposits and savings is less than the standard amount <sup>(*3)</sup> .	¥370	¥420	¥490	¥490	¥820	¥390	(Until July) ¥390 (From August) ¥600
Level 3	Until July Those in households exempt from municipal tax, whose total amount of deposits and savings are less than the standard amount, and are not at level 2.	¥370	¥820	¥1,310	¥1,310	¥1,310	¥650	¥650
	From August Level 3 (1) Those in households exempt from municipal tax, whose annual total public pension and other income <sup>(*2)</sup> and tax-exempt pension income is greater than ¥800,000 and less than 1.2 million yen, and whose total amount of deposits and savings are less than the standard amount <sup>(*3)</sup> .	¥370	¥820	¥1,310	¥1,310	¥1,310	¥650	¥1,000
	Level 3 (2) Those in households exempt from municipal tax, whose annual total public pension and other income <sup>(*2)</sup> and tax-exempt pension income is greater than 1.2 million yen, and whose total amount of deposits and savings are less than the standard amount <sup>(*3)</sup> .						¥1,360	¥1,300
Level 4	• All others whom the abovementioned don't apply	<ul style="list-style-type: none"> <li>• No limit in personally borne expenses for Level 4.</li> <li>• Food and room charges are determined by the contract with the facility.</li> </ul>						

\*1 Household: a household registered in Basic Resident Registers to which the insured person belongs (including your spouse, if your spouse is part of another household).

\*2 On other total income amount, please refer to note 4 in "Insurance Premiums," on page 7.

\*3 Base amount: If you live alone, your amount is 10 million yen (if you have a spouse, the total as a couple is 20 million yen).

From August 3, 2021, the standard amount for levels 2 and 3 will be as follows (the secondary insured person remains as before):

Level 2 : The total for the individual is 6.5 million yen (if a spouse is present, the total for both is 16.5 million yen)

Level 3(1) : The total for the individual is 5.5 million yen (if a spouse is present, the total for both is 15.5 million yen)

Level 3(2) : The total for the individual is 5 million yen (if a spouse is present, the total for both is 15 million yen)

### Standard cost (daily amount), set by the government

Room Charge		Meal Expenses
Shared bed room	(Special nursing homes or the elderly, etc.)	(Until July) ¥1,392  (From August) ¥1,445
	(Long-term care health facilities/Medical long-term care sanatoriums, etc.)	
Conventional private room	(Special nursing homes or the elderly, etc.)	
	(Long-term care health facilities/Medical long-term care sanatoriums, etc.)	
Shared bedroom with individual units	¥1,668	
Unit-type private room	¥2,006	



● **Personally Borne Expense Cap: Special Cases for Level 4 (Exceptional Reduction Program)**

In a household of two or more people, when entering a long-term care insurance facility or community-based long-term care welfare facility (short stays are not applicable), if all the requirements in the table below are met, and, by applying for this, the cost limit may be reduced to level 3. For more information, please contact the insurance and pension section of the ward office.

Requirements for the Exceptional Reduction Program	Description of the Exceptional Reduction Program
(1) Costs for level 4 food and room charges. (2) From the total of the household's public pension income (*4) and other total income (*5), the amount, excluding the costs for the user of the facility (person expenses, estimated annual food and room charges) must be ¥800,000 or less. (3) If the total amount of household savings is ¥4,500,000 or less (4) If there is no other assets that can be used than those for daily living (5) If you are not behind in payments on their long-term care insurance premiums	The personal born expense level 3 for room or/and meal expense will be applied until the requirement (2) on the left is no longer applicable.

\*4 On income from public pensions, etc, please refer to \*3 in "Insurance Premiums," on page 7.

\*5 On other total income amount, please refer to \*4 in "Insurance Premiums," on page 7.

**Refund of the difference between food and room charges**

If for unavoidable reasons the long-term care insurance payment limit certificate cannot be shown to the facility, and if the individual is paying more than the established payment limit but less than the standard cost set by the government, a refund of this difference can be received if an application is made. For more information, please contact the ward office insurance and pension department.

**Note:** For more information about personally borne expenses and standard expense rates set by the national government, see page 35.

If you paid more than the standard expense defined by the national government, you will not be reimbursed.

In addition, please note that an application cannot be accepted when it passed more than two years after the payment date to the facility.

**Required Documents When Applying for Reimbursement**

Long-term care insurance card, Receipt for food and room charges, personal seal (one that is used with a vermilion inkpad), and your bank account information for receiving the reimbursement

**High Medical/Nursing Care Joint Expense Program**

When the total personally borne expenses incurred for medical care insurances (such as National Health Insurance, social insurance from health insurance associations ["Employee health insurance"] and Latter-stage Elderly Health Insurance) and the long-term care insurance for a year is very expensive, your expense will be reimbursed for the amount exceeded the expense cap.

To join the program, you must apply with the medical insurance provider with which you are enrolled(\*2) (you do not have to show receipts at the time of application). For more information, contact the medical insurance provider with which you are enrolled.

\*1 Some out-of-pocket expenses incurred for using long-term preventative care/daily life support services business are also covered.

\*2 For persons enrolled in National Health Insurance or the latter-stage elderly healthcare system, contact the Insurance and Pension Division of your local ward office.

**Upper limit of payment by household for high-priced medical or long-term care**

Total Expenses for 12 months from August 1 through July 31 of the following year

Income category	Earnings during the calculation period of the previous year. (total income after basic or standard deductions)	Persons younger than 70 enrolled in National Health Insurance	Income category	Persons aged 70-74 enrolled in National Health Insurance	Persons enrolled in the latter-stage elderly healthcare system
a	Over ¥9,010,000	¥2,120,000	Active worker-level income earner III	¥2,120,000	
b	From over ¥6,000,000 to ¥9,010,000	¥1,410,000	Active worker-level income earner II	¥1,410,000	
c	From over ¥2,100,000 to ¥6,000,000	¥670,000	Active worker-level income earner I	¥670,000	
d	Under ¥2,100,000	¥600,000	General	¥560,000	
e	Household exempt from municipal tax	¥340,000	Low-income earner II	¥310,000	
			Low-income earner I	¥190,000	

● For more information about income categories and personally borne expenses, contact the medical insurance provider with which you are enrolled.

● If persons in the same household are enrolled with different medical insurance providers, they are not combined.

● Persons enrolled in employee insurance should contact the health insurance providers with which they are enrolled.

● If there are expenses for multiple users of long-term care services in a low-income category I household, the payment from medical insurance is calculated based on the maximum amount of payment by the individual, in the table above. Payment for long-term care insurance is calculated at the separately set upper limit of payment by the individual at ¥310,000 per household.

## Other Programs on Reduction of Personally Borne Expense

### Long-term Care Service Personally Borne Expense Subsidy (an independent system of Yokohama City)

#### ● Description

A portion of the individual's costs(\*2) for rent, food, utilities and living expenses for in-home services, group homes or unit-type private rooms, such as intensive care home for the elderly will be subsidized if the person is certified as requiring long-term care(\*1) (supporting materials required) and the income requirements meet certain criteria. For more information, please contact the insurance and pension section of the ward office.

\*1 In-home service subsidies might also be available to persons classified as recipients of comprehensive services.

\*2 The portion of expenses for which you are responsible refers to the 10% of the service fees that you pay to use long-term care insurance services (or 20% or 30%, if your income reaches certain levels).

#### ● Procedure

To receive subsidies for the portion of nursing care service expenses that you are responsible for (in-home service subsidies, group home subsidies, and facility residence fee subsidies), you must apply at your local ward office. After submitting your application, if you are approved as eligible to receive subsidies, a subsidy certificate will be issued to you.

By presenting this subsidy certificate to your service provider, you will be able to use services with a reduction in the amount of the fees that you are responsible for.

#### ● In-home Service Subsidy

##### < Eligible Services >

Home-visit long-term care	(Preventive long-term care) Short-term stay nursing care	Periodic rotation/ongoing home-visit nursing care
(Preventive long-term care) Home-visit bathing care	(Preventive long-term care) Short-term stay medical nursing care	Small-scale, multifunctional home nursing care and home-visit nurse
(Preventive long-term care) Home-visit nursing	Daily nursing care for tenants at specially designated facilities	*1, *3 Home-visit services as part of comprehensive services *2
(Preventive long-term care) Home-visit Rehabilitation	(Preventive long-term care) Communal daily long-term care for dementia patients	*1 Services via regular facility visits as part of comprehensive services *2
Outpatient day long-term care	*3 Home-visit long-term care at night	*1 Limited to short-term use (short stays). *2 Limited to designated facilities and those with a fixed rate of individual payment. *3 Includes community-based services.
(Preventive long-term care) Outpatient Rehabilitation	(Preventive long-term care) Outpatient day long-term care visits for dementia	
(Preventive long-term care) Rental of care equipment	(Preventive long-term care) Multifunctional long-term care in a small group home	

##### < Subsidy Requirements and Subsidy Descriptions >

Subsidy Level		Level 1	Level 2	Level 3
Subsidy Requirements	Income Standards	Individuals with long-term care insurance premium level 1 except for those receiving public financial	Individuals exempted from municipal tax and the annual total earnings are ¥1,500,000 or less *In addition to the abovementioned requirements, a multi-person household need to add ¥500,000 per household member excluding the insured person. Person with income of ¥800,000 or less based on total earnings added to public pension earnings (not including tax-exempt pensions)	Those who do not meet level 2 requirements
	Asset Standards	Individuals own financial assets (cash, savings, and securities) ¥3,500,000 or less (an additional ¥1,000,000 per household member excluding the insured person for multi-person households) residential property of 200 m <sup>2</sup> or less and no other real estate properties.		
Subsidy Description		<b>Personally borne expenses are reduced to 3%</b> Furthermore, if the personally borne expense exceeds ¥4,500, the exceeded portion will be subsidized.	<b>Personally borne expenses are reduced to 5%</b> Furthermore, if the personally borne expense exceeds ¥7,500, the exceeded portion will be subsidized.	<b>Personally borne expenses are reduced to 5%</b> Furthermore, if the personally borne expense exceeds ¥12,300, the exceeded portion will be subsidized.

\* A household in general refers to all people in the same household and holding resident registration, including people living together, and those with a shared livelihood, even if they are in different households.

## Personally Borne Expenses for Services

### ● Group Home Subsidy

Eligible Services (Preventive long-term care) Communal Daily long-term care for dementia patients\* \* Not including short-term use (short stays).

Subsidy Requirements and Subsidy Description

Subsidy Level		Level 1	Level 2	Level 3
Subsidy Requirements	Income Standards	Individuals with long-term care insurance premiums level 1 except for those receiving public financial assistance for everyday living	Individuals who are exempted from municipal tax and whose annual total earnings are ¥1,500,000 or less <b>Note:</b> In addition to the abovementioned requirements, multi-person households need to add ¥500,000 per household member excluding the insured person.	Those who do not meet level 2 requirements
	Asset Standards	Individuals own financial assets (cash, savings, and securities) are ¥3,500,000 or less (multi-person households need to add ¥1,000,000 or less per additional household member excluding the insured person), residential property of 200 m <sup>2</sup> or less and no other real estate properties.		
	Other Requirements	- Individuals have lived in Yokohama City for three months or longer		- Individuals who are not legal dependents
Subsidy Description		<b>Personally borne expenses are reduced to 5%</b> Furthermore, if the personally borne expense exceeds ¥7,500, the exceeded portion will be subsidized. Subsidies for rent, food and utilities, up to ¥55,000 per month.		<b>Personally borne expenses are reduced to 5%</b> Furthermore, if the personally borne expense exceeds ¥12,300, the exceeded portion will be subsidized. Subsidies for rent, food and utilities, up to ¥30,000 per month.

### ● Facility Living Expenses Subsidy

Eligible Services **Facility services:** [nursing care welfare facilities for the elderly, nursing care health facilities for the elderly, sanatorium medical facilities, nursing care medical clinics], community-based nursing care home for the elderly with medical nursing care, (long-term) short-term stay nursing care, (long-term) short-term stay medical nursing care

Subsidy Requirements and Subsidy Descriptions

Subsidy Level		Level 1	Level 2
Subsidy Requirements	Income Standards	Individuals with long-term care insurance premiums level 1 and whose estimated annual income is ¥500,000 or less except for those receiving public financial assistance for everyday living <b>Note:</b> In addition to the abovementioned requirements, multi-person households need to add ¥500,000 per household member excluding the insured person.	Individuals exempted from municipal tax and whose annual total earnings are ¥500,000 or less
	Asset Standards	Individuals own financial assets (cash, savings, and securities) are ¥3,500,000 or less (multi-person households need to add ¥1,000,000 or less per additional household member excluding the insured person), residential property of 200 m <sup>2</sup> or less and no other real estate properties.	
	Other Requirements	- Individuals who are approved for upper limits of personally borne expenses for long-term care insurance (levels 1 and 2) - Individuals who are not legal dependents	
Subsidy Description		Subsidy for unit-type private room <b>expense: approx. ¥5,000/month</b> (daily amount: ¥165)	

## Personally Borne Expense Reduction Program Offered by Social Welfare Corporations

Applicable services offered by social welfare corporations might be subject to a reduction in the portion of the costs for which you are responsible. For more information, please ask the Elderly Facilities Division of the Health and Social Welfare Bureau (Tel: 045-671-3923).

Eligible Services \*1

Special nursing homes for the elderly *2	Outpatient day long-term care *2	(Preventive long-term care) Short-term stay nursing care
Home-visit long-term care	(Preventive long-term care) Outpatient day Long-term care visits for dementia	(Preventive long-term care) Multifunctional long-term care in a small group home
Home-visit long-term care at night	Periodic rotation/ongoing home-visit nursing care	Small-scale, multifunctional home long-term care and home visit nurse
Among primary home-visit services, services that are equivalent to the former preventive care home-visit nursing care *3		Among primary regular facility visit services, services that are equivalent to the former preventive care long-term care in a small group home care *3

\*1 Some services might not be applicable due to the reduction content. \*2 Includes community-based services.

\*3 The percentage of costs that you bear personally is limited to the same amount provided by insurance.

### Requirements for Applicability of Reductions and Reduction Content

Requirements for applicability of reductions	Reduction content
<ul style="list-style-type: none"> <li>Household exempt from municipal tax</li> <li>Income: In a household where a person lives alone, annual income not exceeding 1.5 million yen (add 500,000 yen for each person added to the household)</li> <li>Assets: In a household where a person lives alone, financial assets not exceeding 3.5 million yen (add 1 million yen for each person added to the household)</li> <li>Real estate: Not in possession of real estate other than residential land (of up to 200 m<sup>2</sup>) and a house</li> <li>No dependent family members or others in the household capable of bearing responsibility</li> <li>Not behind on payments for long-term care insurance</li> <li>* Meets all conditions described above</li> </ul>	<p>In principle, the amount that the user is responsible for (the 10% portion of nursing-care service costs as well as meal and room fees) is reduced by 25% or 50%.</p> <p>*Individuals not in possession of a card authorizing a limit on the portion of costs for which they are responsible for their long-term care insurance are not eligible to receive reductions on fees for meals and rooms at special nursing homes for the elderly or for short-term stay medical nursing care.</p>
<ul style="list-style-type: none"> <li>I am receiving public financial assistance for everyday living.</li> </ul>	Individual room fees in facilities such as intensive care home for the elderly are waived.

# Services Separated from Long-term Care Insurance

In addition to the long-term care insurance service, Yokohama City provides home-living support for the elderly. The city also offers support services for independent lives to those who do not qualify for the long-term care insurance. Please ask the Elderly and Disabled Support Division or your local comprehensive community support center/Community Care Plaza for more information.

## Support for Elderly Residents Living in Own Home

Separated from the long-term care insurance services, some basic services are also provided according to your physical condition and your caregiver situation if you need help for living your own home.

### "Peace of Mind" Telephone

A special alert device can be attached to the phone. You can call neighbors and emergency immediately even though you live alone. The home must have a fixed-line telephone cable and telephone to have the device equipped.

In addition to paying the required fee for landline usage, households subject to municipal taxation will also be charged a monthly reporting device usage fee of ¥650 (not including tax).

### Living Environment Renovations

Consultation services about home remodeling according to the physical condition and subsidies for the home remodeling expenses in accordance with the income conditions (the standard subsidy cap is ¥1,000,000) are available to those who are approved for assistance or nursing care and their needs are recognized. Personally borne expenses vary from zero, 10%, 25%, 50%, 75% to 100%, depending on the municipal tax amount of the household's principal income earner.

Notes: • Please be sure to consult with the Elderly and Disabled Support Division of your local ward office.

Subsidies are determined after we confirm the description of the construction.

• Expenses for housing renovation covered by long-term care insurance (up to ¥200,000) will be given priority.

### Meal Service

We will deliver well-balanced, nutritional meals (those approved for Nursing Care Level 2 or above, as well as some of those approved for Nursing Care Level 1 and some of those approved as requiring assistance) to those living alone with moderate needs for nursing care (those approved for nursing care levels 2 or above, some of those approved for nursing care level 1 as well as some of those approved for assistance levels 1 and 2) if they have difficulty to prepare their own meals and their needs are recognized and approved as a result of the coordination of food-related services. We can check on the recipient's wellbeing on delivery as well. The actual cost of meals determined by vendor must be paid by the service users. (no more than ¥700; however, therapeutic diets may exceed that amount).

Note: You must consult with a care manager or an integrated community support center/community care plaza in advance.

### Adult Diaper Aid

Households who receives public financial assistance for everyday living or who exempt from municipal tax are provide with the adult diaper aid. We deliver diapers to those who are bedridden or suffered with dementia and his/her nursing care level is 1 to 5. Households who receives public financial assistance for everyday living needs to pay nothing, and households who exempts from municipal tax needs to pay 10% of the cost. Please note that there is a maximum limits defined according to the level of nursing care provided.

### Home-visit Haircut Service

A home-visit haircut service (cut only) is available for elderly approved for nursing care levels 4 or 5 who live in home but have difficulty in going out to get their hair cut. The fee is ¥2,000 per visit, and this service can be used up to six times per year.

### Transportation Service

In general, those 65 years of age or older who have been certified as requiring nursing care at levels 3 to 5 and who have difficulty moving outside of the home using public transportation, including taxis, will be brought from their home to medical and welfare facilities by a dedicated vehicle. The fee will be borne by the individual, depending on the distance the vehicle is used ¥300 from the vehicle storage location to a distance of 2 kilometers, and ¥150 for each additional kilometer. However, the cost up to boarding the vehicle remains at ¥300, even if the boarding point is more than 2 kilometers from the vehicle storage location.

**Inquiries: Social welfare council of your local ward**



## Independent Life Support

Services are subject to the elderly who have difficulty in leading independent lives but can do it with support from the people around them.

### Short Stay with Livelihood Support

This service allows you to stay at an institution (such as a rest home for the elderly) for a short term and receive support for everyday living. It is available to the insured person who are roughly 65 years of age or older and living in Yokohama City but not approved for either nursing care or assistance and a) whose nursing caregiver is absent, b) who live alone and face obstacles in everyday living, or c) whose life or health may be in danger if they continue to live home unattended. Users are responsible for the usage fee, meals, and accommodation.

- Notes:
- An additional fee is added if you use the transportation service to travel to and from the facility.
  - Those in households who receive public financial assistance for everyday living pay only for meals and actual costs.

### Home Visits

To address the concerns of people who are worried about forgetting things, are not confident about their physical strength, have difficulty eating or tend to feel depressed, home visits by public health nurses, nurses, registered dietitians, and dental hygienists can be arranged to provide advice on daily life.

### Home Visit Dental Clinic

Home Visit dental clinic services (covered by health insurance), performed by a dentist from the Yokohama Oral Health Treatment Center or the dentist's association of your local ward, are available for elderly who have difficulty going to a dentist., the Yokohama Dental Health and Medical Center provides home-visit dental clinic services (covered by health insurance) for severely physically and/or mentally disabled children/persons living at home or hospitalized/institutionalized patients as well.

**Inquiries: Yokohama Dental Association, Tel: 045-681-1553**  
**Alternatively, contact the Elderly and Disabled Support Division of your local ward.**

## Support for the Elderly Suffering from Dementia

### Health and Welfare Consultation for the Elderly Suffering from Senile Dementia (Forgetfulness Consultation)

A medical specialist, social worker, or public health nurse provides consultation services to those suffering from dementia or to their family members, either by interview or by visiting the home.

### Yokohama City SOS Network for Elderly with Dementia

This network was established as a means to locate as soon as possible any persons with dementia who go missing. Persons with dementia who are at risk of going missing can have characteristics and other identifiable information about them registered in advance. Also, when a person with dementia is being cared for, stickers identifying the person at an early stage are distributed.

### Yokohama Dementia Call Center

Experienced staff and specialists in dementia care can provide a range of dementia care support and consultations for people with dementia and their families, including discussions of the mental aspects of the disease via telephone consultation. Depending on the consultation, information on connecting with support organizations can also be provided.

**Tel: 045-662-7833 Hours: Tuesdays, Thursdays, and Fridays, 10 a.m. to 4 p.m.**  
**(open on national holidays; closed during the year-end/New Year holidays)**

### Yokohama City Medical Centers for the Treatment of Dementing Diseases

The centers offer differential diagnosis of dementing diseases, acute treatment for periphery symptoms and complications as well as consultations about specialized medical treatment in cooperation with health and medical centers or nursing care facilities.

Hospital name, address	Counseling room name, phone number	Reception hours, etc.
<b>Saiseikai Yokohamashi Tobu Hospital</b> 3-6-1 Shimosueyoshi, Tsurumi-ku	Medical treatment welfare counseling room <b>045-576-3000 (Main phone number)</b>	Monday–Friday 9:00~17:00
<b>Yokohama City Minato Red Cross Hospital</b> 3-12-1 Shin-Yamashita, Naka-ku	Medical treatment welfare counseling room <b>045-628-6761 (direct)</b>	Monday–Friday 9:00~16:00
<b>Yokohama Hoyu Hospital</b> 644-1 Kanegaya, Asahi-ku	Community medical cooperation room <b>045-360-8787 (direct)</b>	Monday–Saturday 9:00~17:00
<b>Yokohama City University Hospital</b> 3-9 Fukuura, Kanazawa-ku	Patient Support Center <b>045-787-2852 (direct)</b>	Monday–Friday 9:00~17:00
<b>Yokohama City general Health and Medical Center Clinic</b> 1735 Toriyama-cho, Kohoku-ku	General counseling room <b>045-475-0103 (direct)</b>	Monday–Friday 8:45~17:30

Hospital name, address	Counseling room name, phone number	Reception hours, etc.
<b>Yokohama General Hospital</b> 2201-5 Kuroganecho, Aoba-ku	Regional Medical Comprehensive Support Center <b>045-903-7106 (direct)</b>	Monday–Friday 9:00~17:00
<b>Yokohama Maioka Hospital</b> 3482 Maioka-cho, Totsuka-ku	Medical consultation room <b>045-822-2169 (direct)</b>	Monday–Saturday 9:00~17:00
<b>Yokohama Sakae Kyosai Hospital</b> 132 Katsura-cho, Sakae-ku	Patient Support Center <b>045-891-2171 (Main phone number)</b>	Monday–Friday 9:00~17:00
<b>Yokohama Aihara Hospital</b> 2-3-12 Akuwa-Minami, Seya-ku	Dementia Disease Medical Center <b>045-270-8059 (direct)</b>	Monday–Friday 9:00~17:00



## Support for the Disabled

Individuals with disabilities and approved for the long-term care insurance services can also take an advantage from certain programs not covered by the long-term care insurance or can get the services which are more advanced than what the long-term care insurance offers.

### Community Activity Centers for the Moderately Disabled

Community activity centers at local wards offer (1) physiotherapy classes and (2) activity center programs for moderately disabled members roughly between 40 and 65 years of age who are living at home and suffering from moderate disabilities due to the aftereffects of cerebrovascular disease, etc.

**(1) Physiotherapy classes**

Largely carry out functional training and assisting in making friends for those who have just been discharged, those who are withdrawn or in danger of becoming so.

**(2) Activity center programs**

Sports activities, creative activities, and friendly community gatherings are held for those who wish to join in social activities. Activities are held on weekdays.

### Issue of Handbooks for the Disabled

The Handbook for the Physically Disabled, Handbook for Raising Handicapped Children (Ai-no-Techo) or Health and Welfare Handbook for the Mentally Disabled is issued depending on the type and level of disability. They allow people with disabilities to use services designated by the Act for Total Supports for Persons with Disabilities Act.

### Services Related to the Act for Total Supports for Persons with Disabilities Act

Welfare services related to the Act for Total Supports for Persons with Disabilities Act are also available. Applicable In-home service programs include home help, mobile nursing care, short-term institutionalization, and group homes.

### High Cost Welfare Service Benefit for the Disabled

If a person has received some disability welfare services for five years prior to reach the age of 65, and if the long-term care insurance currently being used, the income status, degree of disability, etc. fall under the provisions of the Cabinet Order, part or all of the costs for using the long-term care insurance service will be paid. Also, when one person is using long-term care insurance along with disability welfare service, and if application is made when multiple people in the same household are using the disability welfare system, the amount exceed a certain amount paid by the person will also be covered.

## Other Support Programs

### Waste disposal support

Type	Household Garbage Disposal and Collection	Oversized Garbage Disposal and Collection
Description	Household waste will be collected directly from the person's home or front door. <b>Notes:</b> If the waste has not been set out at the time of collection, the person may be contacted through the intercom.	Staff may enter the premises in order to collect large garbage items. However, if the removal of such oversized waste requires the following work, it will not be removed and collected. (1) Items that must be disassembled. (2) Items that require to remove other furniture. (3) Items that must be suspended with rope.
Application method	Please apply using the form available at the Resources and Waste Recycling Bureau office. <b>Notes:</b> • The application form can be downloaded from the Resources and Waste Recycling Bureau website. • A check will be made in advance to the home to ensure eligibility.	Please apply by telephone to the Resources and Waste Recycling Bureau office. <b>Notes:</b> • A check will be made in advance to see if the individual can use the service. • It may take some time from reception of application to the start of collection service. • It may not be possible to meet requests for collection date.
Eligibility	An individual is eligible for the service if they find it difficult to gain the support of family members or others in the area, or if, <b>as people living alone</b> , they cannot bring their household waste to the collection point. Even if living together with others, the individual will be eligible if the co-resident is included in the following descriptions. (1) Items that must be disassembled. (2) Items that require to remove other furniture. (3) Items that must be suspended with rope. (4) Those approved for nursing care or assistance. (5) Those aged 65 or older and who have difficulty in taking out the garbage.	The person will be eligible if they find it difficult to gain the support of family members or others in the area, or if, <b>as people living alone</b> , they cannot bring large waste items to the designated location by themselves. Even if there is a co-resident living with them, if the co-resident is elderly or young, they will be eligible. (1) Items that must be disassembled. (2) Items that require to remove other furniture. (3) Items that must be suspended with rope. (4) Those approved for nursing care or assistance. (5) Those aged 65 or older and who have difficulty in taking out the garbage. (6) Expecting mothers or injured.

**Inquiries: Resources and Waste Collection Office of the Resources and Waste Recycling Bureau of your local ward**

**Application: Hours: Monday through Saturday (including national holidays), 8 a.m. to 4:45 p.m.**

### Voting from Home by Mail (as of March 1, 2021)

This program is applicable for the severely disabled or for nursing care level 5. To use the service, you need to receive a certificate for voting by mail in advance. Please ask the board of elections of your ward for more information.

**Description** You can vote from home with a mail-in ballot. You must apply for a mail-in ballot, attaching your certificate for voting by mail no later than four days before the election day.

Furthermore, in any of the following cases, you may use a proxy (a person with the right to vote) if you notified the board of elections that you authorized the person to vote on your behalf. (Mail-in ballot proxy voting program)

- (1) Those with a physical disability certificate who have a limb-related disability or impaired vision of grade 1.
- (2) Those with a certificate of wounded and ill retired soldiers who have a limb-related disability or impaired vision from special category level up to level 2.

**Inquiries: Board of elections in the ward in which you reside (within total elections at the General Affairs Division of your local ward office)**

# Utility Fees and Taxes Reduction

## Medical Expense Deduction of Long-term Care Insurance Services for Income Tax and Resident's Tax (Municipal Tax/Prefecture Resident's Tax)

Some expenses incurred by the following users can also be recognized as medical expenses: persons who have been admitted to nursing care insurance facilities, such as special nursing homes for the elderly; persons using medical treatment services in their own homes that are provided during visits by a nurse; and persons using medical treatment services in combination with services such as home help and day services\*. For details, contact the tax office.

### Notes:

- To receive medical expense deductions, you must present receipts or other documentation issued by your service provider that contain the medical expense amounts that you want to deduct.
- When calculating the amount that can be claimed as a medical expense deduction, the amount you are reimbursed for high nursing care service or high medical/high nursing care joint expenses will be subtracted. Half of the expense for any high-cost nursing care service will be subtracted from personally borne expenses for moving into a special nursing home for the elderly.
- Even if a service is not originally eligible for the medical expense deduction, 10% of personally borne expenses can be claimed as medical expenses if you receive treatment such as sputum suctioning or other services from a care worker.

\*These services include comprehensive services equivalent to home-visit nursing care and nursing care provided via regular facility visits.

**Inquiries: The tax office with jurisdiction over your neighborhood**

## Deduction from Income Tax and Resident's Tax (Municipal Tax/Prefecture Resident's Tax) for the Disabled Elderly

Besides those with a Handbook for the Physically Disabled, etc., those aged 65 or older for whom any of (1) through (7) below applies and who receive approval from the director of the Health and Welfare Center are eligible for a deduction.

Category	Deduction for the Disabled	Special Deduction for the Disabled
Eligibility	(1) Those with physical disabilities (grade 3 through 6) (2) Those suffering from dementia (mild to moderate) (3) Those with mental disabilities (mild to moderate)	(4) Those with physical disabilities (grade 1 or 2) (5) Those suffering from dementia (severe) (6) Those with mental disabilities (severe) (7) Those who have been bedridden for approximately six months or longer and have difficulty in handling everyday life, such as meals or going to the bathroom
Income Tax Deduction	¥270,000 from the income amount	¥400,000 from the income amount
Municipal Tax/Prefecture Resident's Tax Deduction	¥260,000 from the income amount	¥300,000 from the income amount

**Note:** If a spouse or dependent subjected to the deduction is a specially disabled person who lives with the taxpayer, taxpayer's spouse, or other family member who shares income and living expenses of the household, the deduction is ¥750,000 for income tax and ¥530,000 for resident's tax.

**Inquiries:** The tax office with jurisdiction over your neighborhood (regarding income tax) or the Municipal Tax Section of the Tax Division (regarding resident's tax), or the Elderly and Disabled Support Division (regarding authorization).

## Tax Breaks for Barrier-Free Renovation

If those with disabilities approved for nursing care or assistance has renovated their home for barrier-free, they may be entitled to a reduction in their fixed property tax and income tax.

### Reduction of fixed property tax:

The tax will be reduced if a certain amount of barrier-free renovations has been completed and an application is filed with the ward office within three months after construction is finished. For more information, please read the flier distributed by the Tax Division of your local ward office.

**Inquiries: Person in charge of housing at the Tax Division of the ward office for the ward in which your residence is located**

### Special deduction for income tax:

A special deduction for income tax may apply in some cases. For more information, please ask the tax office in your neighborhood.

**Inquiries: Tax office in your neighborhood**

## Reduction/Exemption of Oversized Garbage Handling Fee

**Applicable households:** Households receiving public financial assistance for everyday living; households with special Japanese orphans in China; households that include a person who has been approved as having a grade 1 or grade 2 physical disability, a grade 1 mental disorder, an A1 or A2 mental disability, or multiple disabilities (grade 3 physical disability combined with a B1 mental disability); single-parent households for which a welfare medical treatment certificate has been issued; households that include an elderly person (aged 65 or older) who has been approved for Nursing Care Level 4 or 5 under the long-term care insurance; persons approved by the director of the Health and Welfare Center as elderly persons living alone who are at least 70 years of age and who would have difficulty bringing in oversized garbage items directly

**Description of reduction/exemption:** Fees are waived for the first four items per year (where the year is from April through March of the following calendar year).

**Inquiries:** "Oversize Garbage Reception Center Tel: 0570-200-530 (from devices such as a regular subscription telephone)  
Tel: 045-330-3953 (for persons using flat-rate or reduced rate call services, such as on mobile phones or IP phones)"

**Application: Hours:** Monday through Saturday (including holidays other than the New Year's holiday period), 8:30 a.m. to 5:00 p.m.

## Reduction/Exemption of Water and Sewerage Fee

Households with a family member with the nursing care levels 4 or 5 and who is receiving In-house care can receive a reduction on (basic) water and sewerage fees with applying to the water department. Note: This reduction/exemption applies only if the person approved for nursing care is receiving In-home services.

**Note:** however, that certain conditions apply to households eligible for exemptions.

**Inquiries: Customer Service Center, Water Department Tel: 045-847-6262 Fax: 045-848-4281**

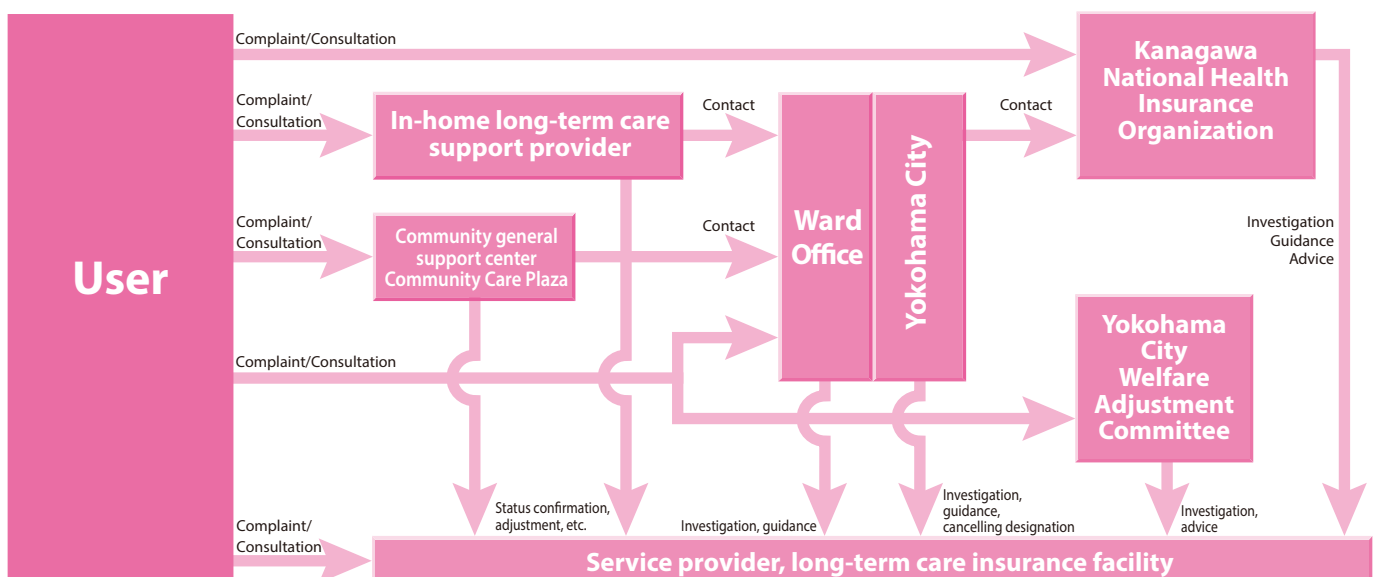
# Where Can I File a Complaint?

If you have any requests or complaints regarding the services you are receiving, you can file a report explaining the situation to take an advice or file a complaint in order to request improvement measures.

## 1. Visit the Local Consultation Service Counter

- If you are not satisfied with what you are receiving from a service provider, we suggest that you first visit the service provider's consultation service counter. The service provider is obliged to handle complaints faithfully.
- You may also bring your issue to the In-home long-term care support provider that organized your care plan. After confirming the facts, the home nursing care support provider can ask the service provider to improve services or may change your service provider.
- In addition, you may talk to your local community general support center/community care plaza or the Elderly and Disabled Support Division of your local ward office.

## How Yokohama City Handles Complaints About Services



## 2. How to File a Complaint

- If the above mentioned methods do not solve the problem, you can file a complaint against the Kanagawa National Health Insurance Organization and have an investigation conducted or guidance provided in accordance with the law.

### Inquiries:

**Nursing Care Grievance Consultation, Nursing Care Insurance Division, Kanagawa National Health Insurance Organization**

Tel: 045-329-3447

Navi-Dial: 0570-022-110

- Yokohama City has established an independent third-party institution, the Yokohama City Welfare Adjustment Committee, to handle grievances from residents concerning the city's health and welfare services. The committee carries out the necessary investigation and guidance/adjustments, and also promotes better health and welfare services.

### Inquiries: Yokohama City Welfare Adjustment Committee Office

**(Consultation and Coordination Division, Health and Social Welfare Bureau)**

Tel: 045-671-4045 Fax: 045-681-5457

# Inquiries

## Elderly and Disabled Support Division at Local Ward Offices

Information on nursing care authorization, use of services

Ward	Telephone	FAX
Tsurumi	045-510-1770	045-510-1897
Kanagawa	045-411-7019	045-324-3702
Nishi	045-320-8491	045-290-3422
Naka	045-224-8163	045-222-7719
Minami	045-341-1138	045-341-1144
Konan	045-847-8495	045-845-9809
Hodogaya	045-334-6394	045-334-6393
Asahi	045-954-6061	045-955-2675
Isogo	045-750-2494	045-750-2540

Ward	Telephone	FAX
Kanazawa	045-788-7868	045-786-8872
Kohoku	045-540-2325	045-540-2396
Midori	045-930-2315	045-930-2310
Aoba	045-978-2479	045-978-2427
Tsuzuki	045-948-2313	045-948-2490
Totsuka	045-866-8452	045-881-1755
Sakae	045-894-8547	045-893-3083
Izumi	045-800-2436	045-800-2513
Seya	045-367-5714	045-364-2346

## Insurance and Pension Division of Local Ward Offices

Regarding qualification and insurance premiums

Ward	Telephone	FAX
Tsurumi	045-510-1807	045-510-1898
Kanagawa	045-411-7124	045-322-1979
Nishi	045-320-8425	045-322-2183
Naka	045-224-8315	045-224-8309
Minami	045-341-1126	045-341-1131
Konan	045-847-8425	045-845-8413
Hodogaya	045-334-6335	045-334-6334
Asahi	045-954-6134	045-954-5784
Isogo	045-750-2425	045-750-2545

Ward	Telephone	FAX
Kanazawa	045-788-7835	045-788-0328
Kohoku	045-540-2349	045-540-2355
Midori	045-930-2341	045-930-2347
Aoba	045-978-2336	045-978-2417
Tsuzuki	045-948-2334	045-948-2339
Totsuka	045-866-8449	045-871-5809
Sakae	045-894-8425	045-895-0115
Izumi	045-800-2425	045-800-2512
Seya	045-367-5725	045-362-2420




## Yokohama City Health and Social Welfare Bureau

Division	Telephone	FAX	
Long-term Care Insurance Division	045-671-4252	045-550-3614	Regarding general aspects of long-term care insurance system
	045-671-4256	045-550-3614	Regarding nursing care approval
	045-671-4253	045-550-3614	Regarding insured qualification for insurance
	045-671-4254	045-550-3614	Regarding insurance premiums
	045-671-4255	045-550-3614	Regarding insurance benefits
Nursing Care Services Guidance Division	045-671-3413	045-550-3615	Regarding the designation of or a change in-home service providers
	045-671-3466	045-550-3615	Regarding the designation of, a change or maintenance in community-based service providers
	045-671-3414	045-550-3615	
	045-671-2356	045-550-3615	Regarding the supervision or instruction of in-home services or community-based services
	045-671-3461	045-550-3615	
Senior Citizen Facilities Division	045-671-3923	045-641-6408	Regarding preventions for the needs for nursing care
Senior Home Care Support Division	045-671-2405	045-550-3612	Regarding preventive care and comprehensive services for daily lifestyle support
Regional Comprehensive Care Promotion Section	045-671-3464	045-550-4096	Regarding the long-term community-based care system
Senior Citizen Health and Welfare Division	045-671-3412	045-550-3613	Regarding the Yokohama Community-based Care Plan

# Preventing long-term Care and Health Promotion Services for All Senior Citizens

## Go Go Health! Life Point!

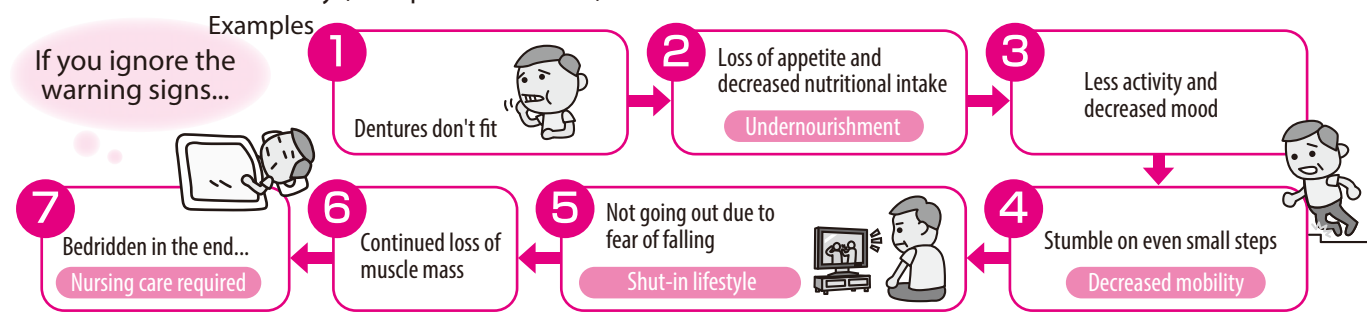
"I want to live my own life with vigor and energy, no matter how old I get!" Isn't this something that we all want? To live your own, purposeful life while staying healthy no matter the condition of your mind and body, it's important to work on your health and at the same time actively participate in activities.

<b>Exercise and locomotive syndrome</b>	<p>Build a body capable of continuous walking (exercise)!</p> <p>It is said that muscle mass increases through continued exercise, even in old age.</p> <ul style="list-style-type: none"> <li>● Wear a step calculator, and aim for 30 minutes of walking or similar exercise per day.</li> </ul>
<b>Mouth</b>	<p>Maintain the functions of your mouth!</p> <p>Your molars are not only useful for chewing food, they also play a role in maintaining bodily balance.</p> <ul style="list-style-type: none"> <li>● Be sure to establish the habit of chewing your food thoroughly.</li> <li>● Continue to keep your teeth clean and to perform mouth exercises (strength training).</li> <li>● See a dentist regularly for services such as maintenance and adjustment of dentures.</li> </ul> 
<b>Nutrition</b>	<p>Eat a diet that prevents osteoporosis and that won't result in muscle loss!</p> <p>People tend to prefer lighter meals as they age, leading to a tendency where they don't get enough protein. Protein is a nutrient that builds muscle, organs, and the blood. Not enough protein means undernourishment, which leads to emaciation and fatigue, and a state in which various diseases are more likely to occur.</p> <ul style="list-style-type: none"> <li>● Eat both main dishes (such as those made from meat, fish, or beans) and side dishes (vegetables) three times per day.</li> <li>● Be sure to drink enough water. (If you have a disease such as heart or kidney disease, consult with your doctor.)</li> </ul> 
<b>Memory loss</b>	<p>Maintain your mental energy!</p> <p>Developing good exercise habits, improving your diet, and becoming involved in local society provide stimulation to your mind.</p> <ul style="list-style-type: none"> <li>● If you feel that you are suffering from memory loss, speak to your doctor.</li> </ul> 
<b>Health and medical treatments</b>	<p>Control your illness through the proper medication and lifestyle changes!</p> <p>Illnesses such as high blood pressure, diabetes, and obesity lead to hardening of the arteries and might cause a stroke and increase the risk of developing dementia.</p> <ul style="list-style-type: none"> <li>● Receive regular checkups.</li> <li>● Drink your medicine as directed by your doctor.</li> <li>● You can expect that lifestyle improvements such as exercise and diet will provide further recuperative benefits.</li> </ul>
<b>Social involvement</b>	<p>Participate in regional events and gatherings related to your interests!</p> <p>People that frequently participate in sports and gathering related to their interests are at a low risk of requiring nursing care.</p> <ul style="list-style-type: none"> <li>● Participate in preventive care groups, such as "Genki Tsukuri Station".</li> <li>● Actively participate in gatherings related to your interests and in regional salons and volunteer activities.</li> </ul>

### Column The Vicious Cycle of Inactive Lifestyles

#### Be aware of warning signs that your health is being affected

Serious conditions that require nursing care, such as being bedridden, begin from the small and familiar, such as "my dentures don't fit" and "I'm starting to stumble more often." If you notice any of these warning signs, make an effort to live more healthily (seek preventive care)!





**The key to preventive care is social involvement!  
Find the preventive care and health promotion that works for you!**

**● Better with others**

People who have trouble continuing an activity by themselves should find other people to share activities with.

**● Living with a smile**

Volunteer activities in the community are recommended for those who wish to contribute by making the most of the knowledge and special skills.

**Introducing an activity to share with others, "Genki Tsukuri Station".**

This is a group activity, working on long-term preventative care and the promotion of health along with friends in a familiar location. Participants in more than 300 groups around the city are interacting in activities such as gymnastics, muscle training, walking, cognitive exercises and Three A.

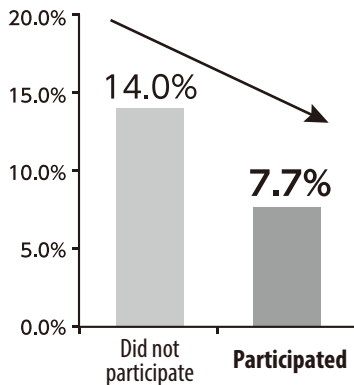
Contact: Contact the Elderly and Disabled Support Division of your local ward office or your local integrated community support center.

**Connecting with others is the secret to living well!**

Recent studies have shown that community activities that bring people together, such a hobbies and volunteer activities, not only strengthen the community but have a positive effect on the health of seniors.

People who participate in salons have a **low** rate of requiring assistance or nursing care.

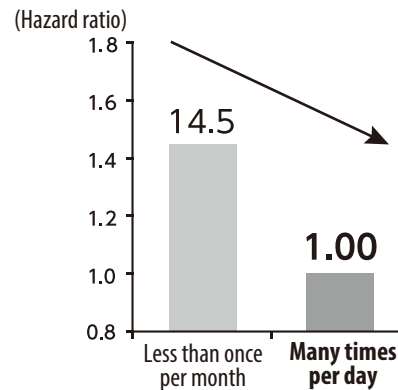
Comparison of rates of requirement of nursing care between those who participate in salons and those who do not



This study examined the status of those who participated in the "Relaxation Salon" activity which began in May 2007 in Taketoyo in Aichi prefecture and which continued through March 2012. Only individuals who participated at least three times are classified as "Participated", and those who participated 0-2 times are classified as "Did not participate".

People who interact with others have a **low** chance of developing dementia.

Likelihood of developing dementia based on frequency of interactions with people other than those living in the same residence (with "Many times per day" defined as 1.00)



This study's results are from an examination of 14,804 senior citizens aged 65 or older within six municipalities in Aichi prefecture beginning in 2003 for a period of approximately 10 years. The results look at sex, age, family composition, level of education, marital status, equivalent income, presence of medical treatment of any diseases, presence of forgetfulness, and area of residence.

**Data is also available that indicates that people with hobbies are 2.2 times less likely to develop dementia.**

Source: Documents from the Japan Gerontological Evaluation Study

**Participation in community activities by individuals and groups over the past year**

(2019 Yokohama City Survey of Senior Citizens)

