

What Is Long-Term Care Insurance?

With the advent of a society that is undeniably aging, the number of people in Japan who need nursing care continues to rise, and families are finding it increasingly difficult to take care of aging family members on their own.

The long-term care insurance program aims to reduce any worries concerning the need for nursing care that may arise, and to create a mutually supportive society in which both those who provide nursing care and those who receive it enjoy peace of mind.

Long-Term Care Insurance Helping Each Other and Widening Our Circle of Friends Kawasaki City

Targets of Long-Term Care Insurance

Residents 40 years of age and older with an address in Kawasaki City can enroll in long-term care insurance here (called Kawasaki City covered members).

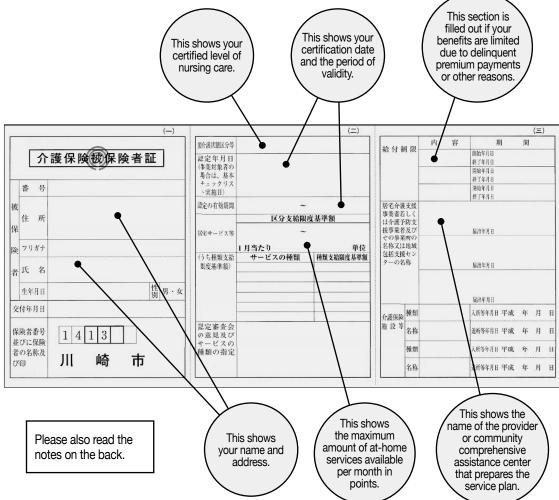
For information on foreign resident insurance membership qualifications, please read the last page.

Members 65 Years of Age and Older (Category 1 Members)

Kawasaki City will send a long-term care insurance membership card at the end of the month before the date the member reaches the age of 65 (the day before the member's 65th birthday).

Members between 40 and 64 Years of Age Enrolled in Medical Health Insurance (Category 2 Members)

Long-term care insurance membership cards for Category 2 members will only be issued to those authorized for nursing care or assistance due to 16 specific diseases (such as cerebrovascular disorder) or those who request one.



Special cases for those enter long-term care facilities

Kawasaki City members who enter a long-term care facility in a different municipality and change their address will continue to be Kawasaki City members rather than of the municipality where the facility is located. (Special exception for addresses.)

Handle Your Long-Term Care Insurance Membership Card Properly

Note: Please keep the following points in mind regarding your long-term care insurance membership card:

After you receive your membership card, please make sure the information on it is
correct. If there are any mistakes, please report them immediately.

- Please keep your card in a safe and convenient place so that you can show it to your service provider whenever you apply for nursing care/nursing assistance or use the card for other services.
- If any of the information written on your card changes, please bring your membership card and file a notification with the city within 14 days after the change.
- You cannot use a copy of your membership card, only the original, when applying for nursing care/nursing assistance and/or services.
- Do not lend your membership card to anyone or borrow anyone else's card.
- If a member loses eligibility because of a move out of the city or death, a notification must be filed and the membership card must be returned immediately.
- If you lose your membership card, or if it is too damaged or dirty to use, please apply for a new card.

Please direct inquiries and notifications about your long-term care insurance membership card to the Pension and Insurance Division of your local ward office or insurance and annuity service counter at a branch office kumin center.

The Difference between Long-Term Care Insurance and Medical Health Insurance Membership Cards

Long-Term Care Insurance Membership Card

You must submit your long-term care insurance membership card when applying for nursing care/nursing assistance. A person who is authorized for nursing care/nursing assistance must also show his or her membership card and long-term care insurance copayment certificate, to the service provider to take advantage of services based on the care plan, such as long-term care, nursing, or physical therapy services, whether at home or at an institution.

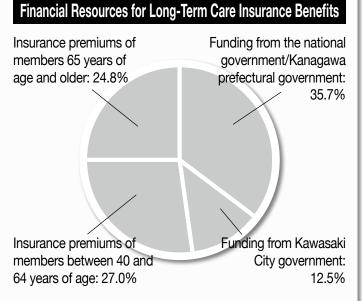
Medical Health Insurance Membership Card

You must show your medical health insurance membership card at the service counter of the medical institution you are visiting when receiving medical services—such as an examination, treatment/therapy, or medicine—for an illness or injury.

Long-Term Care Insurance Premiums

As a rule, long-term care insurance premiums must be paid by everyone 40 years of age or older; however, payment procedures are different for those 65 years of age or older and for those between 40 and 64 years old.

Long-term care insurance benefits are covered by insurance premiums and public funds (see the chart at right); the insurance premiums of members 65 years of age or older account for about one-fourth of all insurance benefits.



Insurance Premiums for Members 65 Years of Age and Older (Category 1 Members)

Insurance premiums for those 65 years of age and older are divided into 16 levels according to their level of municipal inhabitant tax (see pages 5 and 6).

The municipal government determines these insurance premiums every three years after reviewing its financial plans involving long-term care insurance and based on standards designated by the national government.

How to Pay Your Long-Term Care Insurance Premiums

As a rule, the insurance premiums for members receiving a public pension are deducted from their pension (a system known as special collection). However, premiums cannot be immediately deducted from the pensions of individuals who have just reached 65 years of age or for those who have recently moved to Kawasaki City. (It takes about eight months for these deductions to begin.) During that period, you will need to pay your insurance premiums using the invoices provided or via account transfer (referred to as regular collection).

Note: Even if you had insurance premiums deducted from your pension before moving to Kawasaki City, automatic deductions will be temporarily halted on procedural grounds.

Reduction/Exemption of Long-Term Care Insurance Premiums

If you are 65 or older and are having difficulty paying your long-term care insurance premiums due to a disaster, decrease of income or similar reason, you can take advantage of long-term care insurance premium reduction/exemption programs if you meet certain requirements. Please ask the staff at the Pension and Insurance Division of your local ward office or the insurance and annuity service counter at a branch office kumin center for more information.

If You're Behind on Your Long-Term Care Insurance Premium Payments

If you are behind in paying your long-term care insurance premium payments for no special reason, use of long-term care services will be restricted.

Notes:

- * If you do not pay your insurance premiums by the designated deadline, you will be mailed a reminder. If you fail to pay after the due date written on the reminder, an extension fee will be added based on the number of days from the deadline until the date of payment.
- * If your payments are consistently late or in arrears, your assets (such as your savings) may be legally seized.

Insurance Premiums for Members between 40 and 64 Years of Age (Category 2 Members)

Members between 40 and 64 years of age enrolled in medical health insurance pay their longterm care insurance premiums together with their medical insurance premiums. The amount of insurance premiums and the payment method vary depending on the type of medical insurance they join. For details, please contact your health insurance association or the like.

How Premiums Are Determined for Members 65 Years of Age and Older

Eligible Members	Income Level	Annual Insurance Premiums	
The person is receiving public assistance or a support benefit for Japanese war orphans left behind in China. The applicant is an old-age welfare annuity recipient, and the entire household is exempt from municipal inhabitant tax.	Level 1	¥22,730	
All household members are exempt from municipal inhabitant tax, and the applicant had ¥800,000 or less in total annual income* and taxable pensions during the previous year.	Level 2	¥22,730	
All household members are exempt from municipal inhabitant tax, but the applicant is other than level 1 or 2 and had ¥1,200,000 or less in total annual income* and taxable pensions during the previous year.	Level 3	¥30,310	
All household members are exempt from municipal inhabitant tax, but the applicant is other than level 1, 2, or 3.	Level 4	¥53,040	
The applicant is exempt from municipal inhabitant tax, but other household members pay the tax, and he/she had ¥800,000 or less in total annual income* and taxable pensions during the previous year.	Level 5	¥68,200	
The applicant is exempt from municipal inhabitant tax, but other household members pay the tax, and he/she does not belong to level 5.	Level 6	¥75,780	
The applicant pays municipal inhabitant tax and had less than ¥1,250,000 in total income during the previous year*.	Level 7	¥87,140	
The applicant pays municipal inhabitant tax and had between ¥1,250,000 and ¥1,999,999 in total income during the previous year*.	Level 8	¥94,720	
The applicant pays municipal inhabitant tax and had between ¥2,000,000 and ¥2,999,999 in total income during the previous year*.	Level 9	¥113,670	
The applicant pays municipal inhabitant tax and had between ¥3,000,000 and ¥3,499,999 in total income during the previous year*.	Level 10	¥125,030	
The applicant pays municipal inhabitant tax and had between ¥3,500,000 and ¥4,999,999 in total income during the previous year*.	Level 11	¥132,610	
The applicant pays municipal inhabitant tax and had between ¥5,000,000 and ¥6,999,999 in total income during the previous year*.	Level 12	¥151,560	
The applicant pays municipal inhabitant tax and had between ¥7,000,000 and ¥9,999,999 in total income during the previous year*.	Level 13	¥166,710	
The applicant pays municipal inhabitant tax and had between ¥10,000,000 and ¥14,999,999 in total income during the previous year*.	Level 14	¥181,870	
The applicant pays municipal inhabitant tax and had between ¥15,000,000 and ¥19,999,999 in total income during the previous year*.	Level 15	¥197,020	Ì
The applicant pays municipal inhabitant tax and had ¥20,000,000 or more in total income during the previous year*.	Level 16	¥212,180	

Note: When determining long-term care insurance premiums, special deductions related to long-term and short-term capital gains will be subtracted from the total income amount (Local Tax Act, article 292, paragraph 1, item 13). Additionally, if the individual is exempt from taxes, miscellaneous income that relates to public annuities is deducted.

For residents that fall in the Level 1 to 6 range:

(1) If you have miscellaneous income related to employment income and public pensions or the like and are eligible to use the income adjustment deduction, deduct 100,000 yen after adding the deduction to your employment income amount. (2) For residents who do not fall under (1) and have employment income, 100,000 yen is deducted from the amount of employment income.

For residents Level 7 and above: If you have miscellaneous income related to employment income and public pensions or the like, deduct 100,000 yen from the total amount of miscellaneous income related to employment income and public pensions or the like.

5

(FY2023)
Estimated Monthly Amount
¥1,894
¥1,894
¥2,526
¥4,420
¥5,683
¥6,315
¥7,262
¥7,893
¥9,473
¥10,419
¥11,051
¥12,630
¥13,893
¥15,156
¥16,418
¥17,682

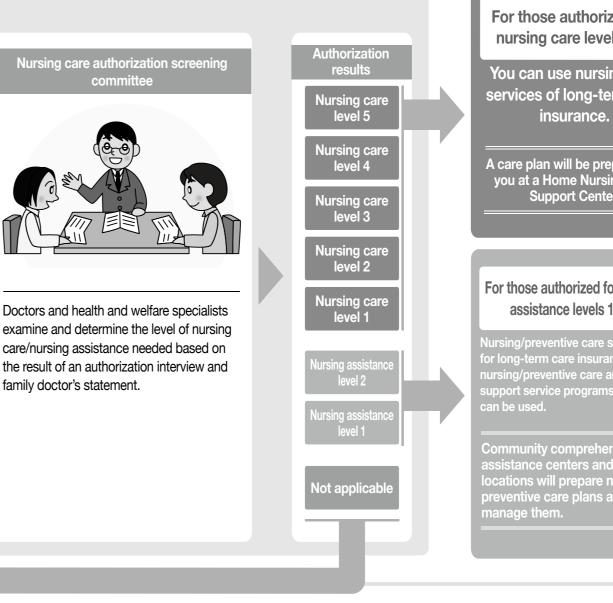
standard amount, your long-term care insurance premiums are: **0.30** times **0.30** times **0.40** times **0.70** times **0.90** times Standard Amount 1.15 times **1.25** times 1.50 times **1.65** times 1.75 times **2.00** times **2.20** times 2.40 times **2.60** times **2.80** times

Compared to the

Procedures for Using Long-Term Care Insurance

Notes:

- 1. If a person or one of the person's family members is unable to apply for certification as someone who requires care or assistance, he/she can have someone else apply on the person's behalf at the Community Comprehensive Assistance Center. The cost of the certification exam and the primary care doctor's report will be covered by the city, so there is no burden on the patient.
- 2. Renewal: Certifications are only valid for a limited period. You can apply for renewal 60 days prior to the expiration date. Please check your insurance membership card's expiration date, since you cannot receive nursing care insurance benefits after your certification expires.
- 3. Changing your level of nursing care needed: If your physical or mental condition changes during the insured period, you may apply for a change in certification level.



Application for nursing care/ nursing assistance*



who need authorization for nursing care/nursing assistance

Those

You or a family member must apply for authorization at the Elderly and Disabled Division of your local ward office or the long-term care certification and benefits service counter at the District Health and Welfare Station.

Authorization process for nursing care/nursing assistance*

Authorization interview and family doctor's statement on general health

An examiner will conduct an interview to assess the physical and mental state of the applicant. (Physical mobility is checked as well.)



The city office will ask the applicant's family doctor to write a statement on his/her general condition.

Eligibility Screening Using the Basic Checklist

This checklist consists of a simple questionnaire of twenty-five items concerning everyday life. It checks the functions necessary for everyday life, such as physical and mental energy. (Community comprehensive assistance centers administer this.) Note: If an insured member wishes to apply to assess his/her eligibility for the service programs, they may complete the basic checklist instead of applying for certification.

Those eligible for nursing/ preventive care and daily support service programs

Those who lead independent lives (not applicable)

General nursing/preventive care programs (pages 16)



For those authorized for nursing care levels 1–5

You can use nursing care services of long-term care

A care plan will be prepared for you at a Home Nursing Care Support Center.

For those authorized for nursing assistance levels 1 or 2

Nursing/preventive care services for long-term care insurance and nursing/preventive care and daily support service programs (page 16 can be used.

Community comprehensive ssistance centers and other locations will prepare nursing/ preventive care plans and

Those deemed eligible for using the service programs

Nursing/preventive care and daily support service programs (page 16) can be used.

Community comprehensive assistance centers and other locations offer nursing/preventive care management.

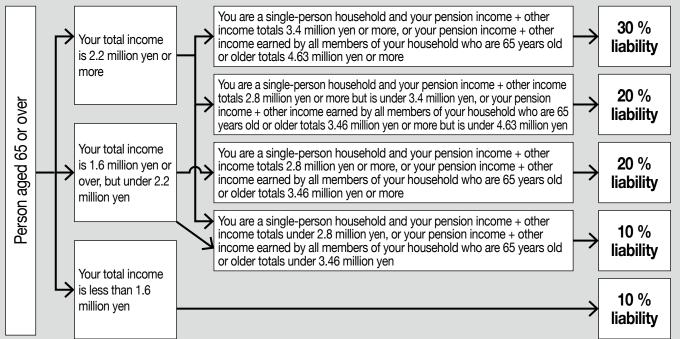
Cost of Long-Term Care Insurance Services

When a member uses long-term care services, he/she will pay part of the cost. The copayment amount for long-term care service is 30 percent for those having the same income level as someone that is actively employed, 20 percent for those with an income above a designated level, and 10 percent for other members.

Note: Please note that there will be no payments from long-term care insurance for service fees not covered by the insurance.

- For people approved for nursing care, you will be issued a long-term care insurance copayment certificate that shows your copayment rate (10 to 30 percent). Users will need both their long-term care insurance membership card and their longterm care insurance copayment certificate to access services.
- Long-term care insurance copayment certificates expire on July 31. Long-term care insurance copayment certificates valid from August 1 to July 31 of the next year will be sent to those authorized for nursing care or the like in the middle of July or later.

Flow for determining the member's burden



Notes:

- 1. Category 2 members (between 40 and 64 years of age), those who are exempt from municipal residents' tax, and those who receive public assistance for everyday living pay 10 percent of the cost, regardless of the above.
- "Total income" refers to the amount of income after public pension deductions, employment income deductions, and deduction of necessary expenses, but before basic deductions and personal exemptions. It is calculated using the amount after special deductions for long-term and short-term transferable income.

Maximum Limit of Long-Term Care Insurance Services

When using home services and other services covered by long-term care insurance, a monthly limit is decided according to the nursing care level.

- Notes: 1. If nursing care services above the limit are used, the user must bear the portion exceeding the designated amount of benefits.
 - 2. Independent limits apply for such matters as facility services.

Level of Nursing Care Needed	Amount of Monthly Limit	Level of Nursing Care Needed	Amount of Monthly Limit
Those eligible for nursing / preventive care and daily support service programs	5,032 points (approx. ¥60,000)	Nursing care level 2	19,705 points (approx. ¥210,000)
Nursing assistance level 1		Nursing care level 3	27,048 points (approx. ¥290,000)
Nursing assistance level 2	10,531 points (approx. ¥120,000)	Nursing care level 4	30,938 points (approx. ¥330,000)
Nursing care level 1 16,765 points (approx. ¥180,000)		Nursing care level 5	36,217 points (approx. ¥390,000)

Persons Authorized for Nursing Assistance Levels 1 or 2 / Nursing Care Levels 1–5

The specific services offered under long-term care insurance differ between those approved for nursing care and those approved for nursing assistance.

Services Available at Home

Nursing care levels 1-5 Home nursing care (home help service) A home helper visits your home to provide physical care and/or assist with household chores. Note: Those approved for nursing assistance levels 1 or 2 can use the nursing / preventive care and daily support service programs. Nursing asst. levels 1 or 2 Nursing care levels 1-5 Home bathing service A vehicle equipped with a portable bath is brought to your home to provide bathing services. Nursing asst. levels 1 or 2 Nursing care levels 1-5 Home nursing

Under the instructions of a doctor, a registered nurse visits your home to provide treatment and nursing services.

Home rehabilitation Nursing asst. levels 1 or 2 A physical therapist visits your home to offer physical rehabilitation.

Home medical advice

A doctor, dentist, or pharmacist visits your home to provide medical supervision or instruction.

Commuting nursing care (day service)

A daycare service facility provides nursing care services such as bathing, meal services and physical rehabilitation to maintain/improve life functions

Note: Those approved for nursing assistance levels 1 or 2 can use the nursing/preventive care and daily support service programs.

Nursing asst. levels 1 or 2 Nursing care levels 1-5 Commuting rehabilitation (day care) A physical therapist at an elderly nursing care health facility provides physical rehabilitation.

Short-term stay nursing care (short stay)

Nursing asst. levels 1 or 2 Nursing care levels 1-5 Daily life nursing care and physical therapy are provided during short-term institutionalization in a special nursing home for the elderly.

Short-term stay medical care (short stay)

Nursing care and physical therapy are provided under medical supervision during short-term institutionalization in an elderly nursing care health facility.

Nursing asst. levels 1 or 2

Nursing asst. levels 1 or 2

Nursing care levels 1-5

Nursing care levels 1-5

Nursing care levels 1-5

Nursing care levels 1-5



Welfare Equipment and Home Renovation Services

Helping you lead an independent life

Welfare equipment rental

- (1) Wheelchairs
- 2 Wheelchair accessories (electric assistance devices, etc.)
- 3 Specialized beds (for nursing care)
- (4) Specialized bed accessories (side rails, etc.)
- (5) Bedsore prevention devices
- 6 Body-positioning devices
- (7) Tracking devices for individuals with dementia
- (8) Patient lifting devices (not including harness types)

Nursing asst. levels 1 or 2

Nursing care levels 1-5

- (9) Handrails (that do not require installation)
- 1 Ramps (that do not require installation)
- (1) Mobility aids
- (12) Walking canes or sticks
- (13) Automatic urine and feces disposal systems (not including replaceable parts)

As a rule, people at nursing assistance levels 1 or 2, and people in nursing care level 1 may not use (1) through (8).

As a rule, people at nursing assistance levels 1 or 2, and people at nursing care levels 1 through 3 may not use (13).

 User copayment rates The amount of the expense the user pays ranges from 10 to 30 percent. Maximum limits (see page 9) apply. Prices vary depending on the types and providers of the welfare equipment.

Nursing asst. levels 1 or 2 Nursing care levels 1-5

Reimbursement on purchases of special nursing/preventive care welfare equipment

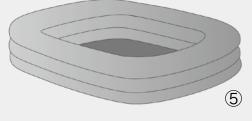
- 1) Seating style toilet
- 2 Replaceable parts for automatic urine and feces disposal systems
- 3 Toilet timing predictive device

User copayment rates

Up to 70 to 90 percent on welfare equipment purchases can be reimbursed. The maximum reimbursement amount is ¥100,000 per fiscal year. A proxy payment program can be used.

Note: Reimbursement is possible only when the equipment is bought from an approved provider.

- (4) Bathing aids
- 5 Simple bathtubs
- (6) Harnesses for patient lifting devices



Reimbursement for home renovation for nursing care purposes

Note: You must apply before renovations are made.

- 1 Handrail installation
- ② Removal of uneven surfaces
- ③ Material change for floors or corridors for slip prevention and smoother transportation
- (4) Conversion of doors to sliding doors.
- (5) Conversion of toilets to Western-style toilets.
- (6) Home renovations required for (1) through (5) above
- User copayment rates
 From 70 to 90 percent of house renovation fees can be reimbursed.

The maximum limit, however, is ¥200,000 per year. A proxy payment program can also be used.



What is a proxy payment program?

Before you can be reimbursed for special nursing/preventive care welfare equipment or home remodeling, you must pay the entire cost. You will then have to apply to receive the insurance benefit reimbursement (70 to 90 percent of the cost). However, if you use a proxy payment program, you only need to pay 10 to 30 percent of the total cost at the beginning.

About the use of the Long-term Care Insurance service for traffic and other accidents (caused by the actions of third parties)

If you will be using long-term care services due to a traffic accident or mishap caused by a third party, you are required to submit a notification to the Elderly and Disabled Division of your local ward office or the long-term care certification and benefits service counter at the District Health and Welfare Station.

< Beware of scams! >

The number of scams (such as bank transfer scams) reported in the city has been increasing.

- Consider all phone calls that refer to "cash cards" as a scam.
- Use the answering machine on your home phone and do not answer suspicious calls directly.

Services are offered to assist individuals in living their lives as independently as possible in their own communities. As a rule, only insured members living in Kawasaki City can use these services.

Periodic rotational/continual home nursing

Services are provided through regular rounds conducted both day and night, as well as through occasional visits as necessary. Nursing care and medical care are coordinated to provide bathing services and toilet assistance by home-helpers, and medical treatment and assistance in medical examination by nurses.

Nighttime home nursing care

Home nursing care services are provided regularly at night, as well as on an on-call basis in case of emergency through a special notification system.

Community-based commuting nursing care

Nursing care services such as bathing, meal services and physical rehabilitation are provided at a daycare service center with a capacity of 18 people or fewer.

Commuting nursing care at facilities for members with dementia

Nursing care services such as bathing, meal services and physical rehabilitation are provided at a daycare service center for elderly members with relatively stable symptoms of dementia.

Small-scale multifunctional home nursing care Nursing asst. levels 1 or 2 Nursing care levels 1-5 Users mainly visit the facility to receive services. Depending on the situation, they may stay at the facility overnight, or staff may visit them at home.

Nursing care/small-scale multifunctional home nursing care services Nursing care levels 1-5 Visiting nursing services and small-scale multifunctional home nursing care are combined to provide flexible treatment for users with acute medical needs, according to their specific needs.

Communal nursing care for persons with dementia

make it difficult for them to lead their daily lives at home.

Nursing care services such as bathing, meal services and physical rehabilitation are provided for persons who have dementia but are in comparatively stable condition and living together in small groups.

indising care at community-based enderly wenate nursing facilities	Indialing care levels 0-0
Nursing care services such as bathing, meal services physical rehabilitation and ass	sistance for everyday life
are provided at a small-scale special home for the elderly with a capacity of 29 people	e or fewer for those who
need constant nursing care and have difficulties with activities in their everyday lives.	
Note: Those with nursing care level 1 and 2 may use this service if there are c	ompelling reasons that

Nursing cars at community based alderly walfare pursing facilities

Nursing asst. levels 1 or 2

Nursing asst. level 2

Nursing care levels 1-5



Institutionalization Services at Facilities

Institutionalization services at facilities are divided into four types depending on the kind of nursing care services required. Choose a facility that you would like to be admitted to and sign a contract by applying directly to the facility. In addition to facility fees, you must pay for such things as food expenses, living expenses, grooming expenses, and expenses for daily necessities.

Welfare nursing homes (special homes for the elderly)

Nursing care levels 3-5

This is a facility for people who require constant nursing care. Physical rehabilitation and health management are provided in addition to everyday nursing services, such as giving baths and preparing meals.



Note: People at nursing care levels 1 or 2 can use this service if for unavoidable circumstances they find themselves facing difficulties in their everyday lives at home.

Health facilities for the elderly

This facility is for people whose condition has stabilized after acute medical treatment and want to focus on rehabilitation with the goal of returning to their homes. Nursing services, nursing care under the supervision of medical staff, physical rehabilitation, and other necessary treatment are provided.

Medical nursing care facilities (such as sanatorium wards)

This is a facility for people whose condition has stabilized after acute medical treatment but need an extended period of recuperation. Recuperation management, nursing services, nursing care under the supervision of medical staff, physical rehabilitation and other necessary treatment are provided.

Nursing medical center

This is a facility for people who require an extended recuperation period. Recuperation management, nursing services, nursing care under the supervision of medical staff, physical rehabilitation, and other necessary treatment are provided. This facility also provides end-of-life nursing care and terminal care.

Nursing care for persons admitted to special facilities (Nursing homes with paid nursing care services, care houses, nursing homes for the elderly, etc.)

Other facilities where long-term care insurance can be used.

Depending on circumstances, people at nursing assistance levels 1 or 2 can utilize the facilities.

Details and expenses differ depending on the facility, so please confirm with each facility.

You must take certain measures when being admitted to a nursing home for the elderly, so please consult with the Elderly and Disabled Division of your local ward office or the elderly support counter at the District Health and Welfare Station.

Nursing care levels 1-5

Nursing care levels 1-5

Nursing care levels 1-5



Service Fee Reduction Programs

High-Cost Nursing Care (Nursing/preventive Care) Service Benefit

If the total copayment for services for one month exceeds the designated limit, a high-cost nursing care (nursing/preventive care) service benefit is provided upon application.

Note: The copayment for purchase of welfare equipment or remodeling expenses for nursing/ preventive care are not covered.

High-Cost Medical and Nursing Care (Nursing/preventive Care) Service Benefit

If the total copayment amount under your health insurance and long-term care insurance exceeds the designated annual limit, you can apply for high-cost medical and nursing care (nursing/preventive care) service benefits.

Notifications will be sent to all eligible people.

Apply at the service window of the health insurance plan you are enrolled in as of July 31 of every year.

Nursing Care Service Benefit for Specified Persons Admitted to Facilities

The upper limit on copayments is set to avoid placing a heavy financial burden on service users whose income and assets are below the designated level. Upon application, the cost for living and meals for those who use facility services is reduced according to their income level.

Overview of the Payment Reduction System on Social Welfare Corporation Costs

Individuals whose income and assets fall below a certain level, and who wish to use services offered by social welfare corporations, are eligible for reduced service, housing, and meal costs by applying for these reductions.

System to reduce user's burden of communal nursing care for persons with dementia

If a person's income or assets is below a certain level and he/she uses a communal nursing care for persons with dementia (group home) and meets the requirements, he/she or a proxy can apply to have the fees you pay for rent, food and utilities reduced.

Other Copayment Reduction Programs

- For individuals whose income and assets are below a certain specified level, and who wish to use the services, Kawasaki City has its own system for reducing service costs as well as housing and food costs. Such individuals are free to apply for this system.
- There are fee reduction programs for services other than those mentioned above. For details, please inquire at the Elderly and Disabled Division of your local ward office or the long-term care certification and benefits service counter at the District Health and Welfare Station.

Services for Those Approved for Level 1 or Level 2 Nursing Assistance, and Others (Not Applicable)

Nursing/preventive Care and Daily Support Service Programs (hereafter referred to as "service programs")

Eligibility

- People at nursing assistance levels 1 or 2
- People aged 65 and older who are eligible for the service programs
 - People for whom nursing/preventive care and daily support service programs have been deemed necessary.

Note: Category 2 members (people aged 40 to 64), must receive approval for nursing assistance level 1 or 2, since they are not eligible for the service programs.

Services

Fees conform to the copayment rate under the long-term care insurance system.

Visiting preventive care services

A home-helper or Kawasaki life supporter visits to help the user with everyday chores.

Commuting preventive care services

At day service centers, assistance for taking baths, eating meals, and calisthenics and muscle training for the maintenance and improvement of life functions are provided.

Short-time commuting preventive care services

At day service centers, assistance for taking baths, eating meals, and physical exercise and muscle training for the maintenance and improvement of life functions are provided for a short time.

General Preventive Care Programs

Programs for people aged 65 and over, and anyone who is involved in activities that support the elderly. The following programs related to preventive care in the community are conducted.

(1) Nursing/preventive care awareness programs

These programs distribute pamphlets and conduct health classes and lectures on nursing/preventive care to make members aware of the importance of nursing/preventive care activities that will help them lead more independent lives.

(2) Community nursing/preventive care support programs

These programs support nursing/preventive care activities that are mainly conducted by community residents and train volunteers to support such activities.

Ikoi Genki Plaza (Recreation and Revitalizing Plaza) Programs

Strength-enhancement exercises by specialized trainers designed to help prevent falls as well as brief lectures on nursing/preventive care and health maintenance are provided once a week at the activity space of each lkoi-no-le (Home of Recreation) facility and other facilities. This six-month program is provided to Kawasaki City residents 65 years of age and older who are in Kawasaki City's basic resident register.

Note: Members prohibited by their doctors from exercising and those approved for nursing care (levels 1 through 5) are not eligible for this program.

What Is a Community Comprehensive Assistance Center?

This is a local consultation center for the elderly, where public health nurses, care managers, social workers, and other professionals offer consultation services on nursing care, welfare, health, medical concerns, and other topics, so that older residents can lead self-sustaining lives in their own community. (Each center is in charge of a designated local community.)

Main Services

Comprehensive Consultation and Assistance, Human Rights Programs

General consultation services including long-term care insurance are available, such as various support programs for abuse prevention and other human rights issues.

Nursing/preventive Care Management

Care plans are created to ensure that services are provided properly, and the member's condition is evaluated as needed after services are provided.

Comprehensive and Continuous Management Support

Logistical support of care management is offered to enable the elderly to lead healthy lives in their own community.

Community Comprehensive Assistance Centers

Ward	Name	Telephone No.	Fax No.
	Oju-En	287-2558	287-2577
	Koshun-En	211-6313	223-1240
X	Daishi-no-Sato	266-9130	266-9131
N N	Shion	222-7792	222-7796
Kawasaki-ku	Kyomachi	333-7920	333-7938
N	Daishi Chuo	270-5112	287-5562
ku	Viola Kawasaki	329-1680	322-2553
	Oshima Nakajima	201-8831	201-8834
	Fujisaki	270-3215	270-5682
	Kofuen	556-4355	511-3511
Se	Yumemigasaki	580-4765	742-8040
Saiwai-ku	Kashimada	540-3222	540-3220
	Shangri-La	520-3863	520-3861
Ê	Minna-to-Kurasu Machi	520-1905	520-1906
	Saiwai Higashi	555-1411	555-1412
7	Sumiyoshi	455-0980	455-0883
lak	Kodanaka	798-2332	755-5656
ah	Hirama-no-Sato	544-4012	544-3961
Nakahara-ku	Miyauchi	740-2814	740-2816
i-k	Ida	751-6661	751-6385
2	Todoroki	281-3666	281-3616

Nard	Name	Telephone No.	Fax No.
	Waraku	799-7951	799-7952
	Suenaga	861-5320	861-6194
aka	Hidamari-no-Sono	814-5637	814-5636
Takatsu-ku	Mizonokuchi	820-1133	822-0500
ı-kc	Hisasue	797-6531	797-6540
<u> </u>	Ki-no-Oka	820-8401	820-8402
	Re-Care Mukaigaoka	865-6238	865-6239
	Mikado-So	777-5716	777-1193
Σ	Washigamine	978-2724	976-6470
Miyamae-ku	Fujimi Plaza	740-2883	777-3239
ma	Restore Kawasaki	976-9590	976-9591
e-k	Friend Shiboku	871-1180	877-2800
Ξ	Miyamaedaira	872-7144	852-3377
	Viola Miyazaki	948-5371	948-5372
	Nagasawa Soju-no-Sato	935-0086	935-0093
	Tamagawa-no-Sato	935-5531	935-3511
Tar	Taiyo-no-Sono	959-1234	959-1233
Tama-ku	Suge-no-Sato	946-5514	946-3432
ku	Shukugawara	930-5151	930-5911
	Yomiuri Land Hana House	969-3116	969-3160
	Noborito	933-7055	933-7077
	Kakio Aruna-En	989-5403	988-9774
	Kurikidai	987-6505	380-7970
As	Niji-no-Sato	986-4088	986-1027
Asao-ku	Katahira	986-4986	986-4987
ku	Yurigaoka	959-6522	712-0202
	Shinyuri	969-3388	969-0200
	Takaishi	959-6020	959-6021

Note: Please inquire at the Elderly and Disabled Division of your local ward office or the long-term care insurance service counter at the District Health and Welfare Station for information about the Community Comprehensive Assistance Center responsible for your community.

For Further Information

(Area code: 044)

Subject of Inquiry; Ward of Your Residency	Long-Term Care Insurance Premiums	Long-Term Care Authorization	Long-Term Care Services/Benefits	Other Services Not Covered by Long- Term Care Insurance (Elderly Support)	Fax No.
Kawasaki-ku		201-3282	201-3282	201-3080	201-3291
Daishi-chiku		271-0152	271-0161	271-0157	271-0128
Tajima-chiku	Kawasaki City Insurance Call Center 200-0783 Hours: Weekdays, 8:30 a.m. to 5:15	322-1990	322-1996	322-1986	322-1995
Saiwai-ku		556-6655	556-6689	556-6619	555-3192
Nakahara-ku		744-3179	744-3136	744-3217	744-3345
Takatsu-ku	p.m.; second and fourth Saturdays,	861-3263	861-3269	861-3255	861-3249
Miyamae-ku	8:30 a.m. to 12:30 p.m.	856-3245	856-3238	856-3242	856-3163
Tama-ku		935-3185	935-3187	935-3266	935-3396
Asao-ku		965-5198	965-5146	965-5148	965-5206

Kawasaki City Comprehensive Program	Nursing/preventive Care and Daily Support Service Programs (Comprehensive Program)	
Navi-Dial	0570-040-114 Weekdays, 8:30 a.m. to 5:15 p.m.	

Aging Society Policy Department, Health and Welfare Bureau	Concerning Premiums	Concern Authoriza		Concerning Benefits
Long-Term Care Insurance Section	200-2691	200-24	455	200-2687
Health and Welfare Bureau	Concerning community Concerning dementia and the			

	comprehensive assistance centers	
Community Care Promotion Office	200-2681	

Public Health Center, Health and Welfare Bureau	Concerning Ikoi Genki Plaza (Recreation and Revitalizing Plaza) programs
Health Promotion Section	200-2411

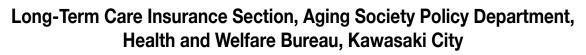
"Hello Long-Term Care Insurance" (Japanese, English, Chinese, Korean, Portuguese, Spanish, Tagalog)

Kawasaki City website: https://www.city.kawasaki.jp/350/page/0000049639.html

You can view information about long-term care insurance business operators online. Long-term care service information publication: https://www.kaigokensaku.mhlw.go.jp/

Information on Kawasaki City daily support services is available online. Publicized Information on Kawasaki City Daily Support Services https://kana.rakuraku.or.jp/kawasaki

Issued: July 2023





protection of rights

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Foreign Resident Insurance Membership Qualifications

Foreign residents 65 years of age or older who are registered residents of Kawasaki City are also enrolled in the Kawasaki City Long-Term Care Insurance. However, those who have a visa status of residence for "designated activities" and for whom the either (a) or (b) below applies are not eligible for this insurance:

- (a) Anyone who has entered Japan or is living in Japan for the purpose of receiving medical treatment or for the purpose of assisting the daily life of a person who receives such medical treatment.
- (b) Anyone who has wealth (such as assets) that meets certain designated requirements, and who will be staying in Japan for less than one year for the purpose of sightseeing.

If you have a "designated activities" visa and have moved into Kawasaki City, you must come to the Pension and Insurance Division of your local ward office or the Insurance and Annuity service counter at a branch office kumin center with the following documents:

- Your residence card
- The designated document issued to you at the Immigration Services Agency of Japan (attached to your passport)