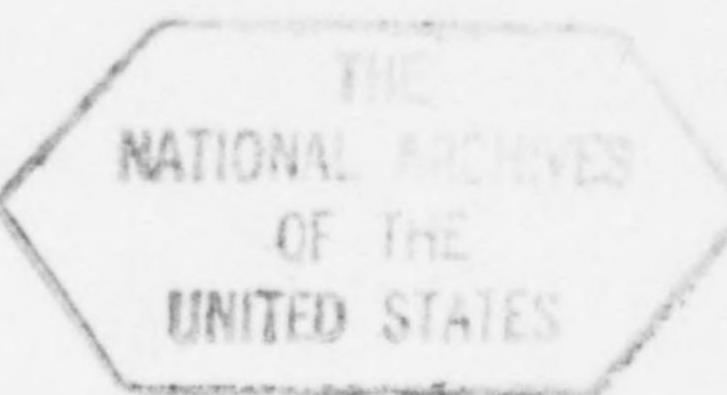
DECLASSIFIED E. O. 12065 SECTION 3-402 / NNDG NO. 775013

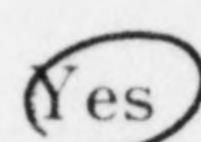
## GHQ/SCAP Records(RG 331) Description of contents



- (1) Box no. 2582
- (2) Folder title/number: (24)
  Social Insurance
- (3) Date: Mar. 1952
- (4) Subject:

Classification	Type of record
750, 760	d

- (5) Item description and comment:
- (6) Reproduction: \*



No

(7) Film no.

Sheet no.

DECLASSIFIED E. O. 12065 SECTION 3-402 / NNDG NO. 775013

WEEKLY BULLETIN NO. 152 18 - 31 March 1950

SOCIAL INSURANCE

## Health Insurance Medical Facilities

There is given below a list of Health Insurance hospitals and clinics currently in operation in 28 of Japan's 46 prefectures with a total bed capacity of 3,500. Establishment of these hospitals was begun during the last year of the war and continued during the preceding years although the program had to be curtailed, owing to financial considerations, after 1948.

Among the chief aims of the government in establishing these facilities, all financed from Health Insurance contributions accumulated in the form of reserves in the Welfare Insurance Special Account, were the following. Initially it was to offset the decline in medical facilities and personnel available to the insured due to recruitment and requisitioning for the Armed Forces. Later with the onset of inflation, the need for medical facilities specially operated for Health Insurance arose from the growing unwillingness of medical practitioners to provide care to the insured at the low rates lagging behind price rises of the scarce medical supplies. Moreover, there was the added impetus of investing available reserves threatening to be lost to inflation unless converted into tangible values. Fainally, these institutions could provide the necessary yardsticks in meeting the almost continuous pressure for upward adjustment of the treatment point values (on the basis of which doctors are paid for their services to the insured).

The facilities were either newly established or, frequently, existing facilities were acquired from Health Insurance Societies liquidated after the war with the collapse of enterprises exclusibely engaged in war production; also, facilities were taken over from the Japan Medical Treatment Corporation, dissolved after the war, and from private interests.

These hospitals and clinics (the latter numbering three out of the 49 facilities), although owned by the national government and placed under the general supervision of the Ministry of Welfare, are not operated directly by the government. The great majority, 39 facilities, are run by the Central or one of the local Social Insurance Societies (see below). Seven are operated by National Health Insurance carriers or federations thereof and the remaining three are operated by the municipality in which they are located or otherwise.

The present central and prefectural Social Insurance Society (Shakai Hoken Kyokai) entrusted with this task are the successors of the former Social Insurance Central Society, also referred to as Social Insurance Foundation, and its prefectural branch offices now reorganized into 47 independent entities. The Central Society, a juridical person staffed by representatives of groups with an interest in Health Insurance, such as employers, employees, and the public interest, but dominated by government officials, used to receive, prior to 1948, subsidies from the national government. In turn, it used to grant subsidies to its 46 prefectural branches or societies to which local employers could and, for the most part, did belong and make contributions over and above their insurance contributions for the purpose of financing health and welfare services and educational and publicity work carried on by them within the general framework of the Health Insurance and the Welfare Pension Insurance programs.

At present, both the Central Society and the prefectural societies are autonomous juridical persons, financed from voluntary employer contributions usually assessed on the basis of the number of employees, they are no longer subsidized by the government. Their staff consists mostly of social insurance officials serving in an honorary capacity and a few paid clerks. Apart from contributions, their ineome consists of rentals on real estate owned by the societies (frequently housing social insurance branch offices) and a small percentage of the hospitalization fees collected from or for patients treated in the Health Insurance facilities. These hospitals are under the direction of a doctor locally appointed as director with the approval of the Ministry of Welfare. In administration he is governed by overall policies laid down on the national level by the Ministry and locally by the society and is accountable through the latter to the Ministry. The facilities are said to be self-supporting. Though preference is given to persons insured under government-managed Health Insurance, other insured persons and persons not insured are accommodated on a space-available basis. The rates charged are those set nationally for Health Insurance. However, the administration of government-managed Health Insurance in paying for the patients chargable to it receives a 10% discount on these rates.

It might be pointed out that the societies operate also five of the 50 Health Insurance Sanatoria (owned by the National Government) and all 28 Health Insurance Rest Homes (three of them owned by the Central Society, the others privately owned). Similar arrangements exist in regard to Seamen's Insurance with the Seamen's Insurance Society (Senin Hoken Kai) and in regard to Welfare Pension Insurance with the Welfare Foundation (Koseidan).

For the information and guidance of the Civil Affairs Region officials reference is made to Hohatsu No. 667 of 8 May 1949 on "Management of Health Insurance Hospitals and Clinics" and the following list of the year of establishment, name, bed capacity and location of the facilities:

Name	Capa	city	Location
Hazu Hospital	80	beds	Yokkaichi - Mie Prefecture
First Miyagi Hospital	60	11	Nakoke-machi, Sendai
Second Miyagi Hospital	20	11	Nagomachikitamachi, Sendai
Katsuyama Hospital	56	11	Katsuyama-machi, Ono-gun, Fukui Pref.
Data Hospital	65	11	Data-mura, Kanigun, Gifu Prefecture
Mishima Hospital	50	11	Mishima-city, Shizuoka Prefecture
Matsuzaka Civil Hospital	85	11	Matsuzaka City, Mie Prefecture
Kuramaguchi Hospital	40	11	Shimoza-machi, Sakyoku, Kyoto
Miwa Hospital	50	11	Miwa-machi, Shiji-gun, Nara Prefecture
Tokuyama Central Hospital	100	11	Tokuyama-city, Yamaguchi Prefecture
First H.I. Hospital	60		Kurume-city, Fukuoka Prefecture
Uwajima Hospital	30		Uwajima-city, Ehime Prefecture
Saga Hospital	20		Saga-city, Saga Prefecture
Uragasaki Hospital	101		Yamashiro-machi, Matsuura-gun, Saga
Kajikazawa Hospital	70		Kajika zawa-machi, Minamikoma-gun
			Yamanashi Prefecture
Omiya Hospital	30		Omiya-city, Saitama Prefecture
Welfare Hospital	Burnt on Fa	ah 70/6	Nachine dite to
	Estable	ished in	Noshiro-city, Akita Prefecture
Hokushin Hospital			Kitaichijo, Sappro-city

Shinjo Hospital	20	
Suzumenomiya Hospital	20	Shinjo-machi, Mogami-gun, Yamagata
Fushiki Hospital	100	Suzumenomiya, Kawachi-gun. Tochigi
	25	rushiki, Nakamichi, Takoaka City.
Yamanashi Hospital	7.00	Toyama Prefecture
Meiwa Hospital	100	Yokozawa-machi, Kofu City
Ozu Hospital	30	Otoi-machi, Kanazawa City
Genseiso Hospital	80	Ozumachi, Kita-gun, Ehime Prefecture
	40	Kanda, Naokata City
Hitoyashi Hospital	70	Oigami-machi, Hitoyoshi City
Nankai Hospital	25	Saheki City, Cita Prefecture
Amakusa Hospital	70	Honwatari-machi, Amakusa-gun, Kumamoto Pref.
Tajimi Hospital	45	Toyooka-machi, Tajimi City, Gifu
Yamate Hospital	90	Nishiokubo, Shinjiku-ku, Tokyo
First Hospital	30	Tokiwa-machi, Urawa, Saitama Prefecture
Yokohama Central Hospital	80	Yamashita-cho, Nakaku, Yokohama
Katsushika Hospital		Honden Katsushikaku, Tokyo
Sakuragaoka Hospital	20	. Kamishimizu, Shimizu City, Shizuoka
Chukyo Hospital	150	Sanjo-machi, Minami-ku, Nagoya
Kobe Central Hospital	100	Nakayamate-dori, Ikutaku, Kobe
Kokura Memorial Hospital	160	Muromachi Kokuma Cita Polonia
Yoshiro Hospital	120	Muromachi, Kokura City, Fukuoka Prefecture
		Motomatsueshiromachi, Yashiro City Kumamoto Prefecture
	Established in	1918
namata nospital	30	Kamata, Otaku, Tokyo
Uguisudani Clinic		Kaminagichi Teite T
Tsurumi Clinic		Kaminegishi, Taito-ku, Tokyo
Takahama Hospital	20	Tsurumi-machi, Tsurumi-ku, Yokohama
Fuse Hospital	50	Takahama-machi, Odategun, Fukui Prefecture
Tonan Hospital	80	Eiwa-cho, Fuse City
Kawasaki Hospital	100	Oitachiaraimachi, Shinagawa-ku, Tokyo
Moji Hospital	50	Kashigawara-machi, Kawasaki - City
Funabashi Hospital	50	Komorie - Korakucho, Moji City
Hamamatsu Clinic		Kaijin-cho, Funabashi City, Chiba
	Established in	Nakajima-machi, Hamamatsu-city, Shizuoka Pref.
Shimonoseki Central Hospital	Lo da de la la	1747
TOO LT OGT	40	Shimonoseki

## Social Insurance Statistics

The attention of Civil Affairs Regions' officials is drawn to the publication of a summary description and a large selection of current data pertaining to the operation of the several social insurances appearing in GHQ, SCAP's <u>Japanese</u> Economic Statistics, Bulletin No. 41, January 1950, pp. 98 - 117. Additional data will be published in subsequent issues of that monthly bulletin as they become available.

In addition, a monograph on the background data and program developments is being prepared and should become available within a month or two.

These materials are prepared jointly by the Social Security Division of Public Health and Welfare Section and the Programs and Statistics Division of Economic and Scientific Section. Current social insurance statistics formerly published in the Public Health and Welfare Bulletin will appear henceforth in the above publication.

CRAWFORD F. SAMS Brigadier General, Medical Corps Chief