1. Ratio of Persons Insured in National Health Insurance

Japan's medical and health care system was instituted in 1957 and is older in history than any other health social insurance system. As of March 31, 1972, 98.5% subscribed to this scheme. The types of medical care insurance include Government Managed Health Insurance, Association Managed Health Insurance, Day Laborers' Health Insurance, Summon's Health Insurance, National Public Servants Mutual Aid Association, Mutual Aid Association of Local Public Servants and Others, Mutual Aid Association for Public Enterprise Employees and Others, and Private School Teachers' Mutual Aid Association, in addition to the National Health Insurance Scheme.

The National Health Insurance Scheme is a system in which St. Mari or Maro for an association formed by several St. Mari or Maros becomes an underwriter for persons who are unable to subscribe to the aforementioned eight types of health insurance. For this reason, the National Health Insurance Scheme is regionally organized, whereas the eight types are nationally organized. Under the National Health Insurance Scheme, each subscriber is insured, so that there are no dependents.

There were one Mari and one Maro to which the National Health Insurance Scheme was not applicable as of March 31, 1972, including Tonuno Mari and Minato Maro in Kagoshima Prefecture and Ginza Sun, Akiyama Sun and Mimasakai Sun in Okinawa Prefecture. But these were reduced to two as of March 31, 1973, and they were Tonuno Mari and Minato Maro.

2. Medical Care Expenses in National Health Insurance

**Santol Points of the Legend and Map Compilation**

Classified by St. Mari and Maro, this map shows the annual medical care expenses per person insured under the National Health Insurance Scheme in fiscal 1972. The medical expenses, as referred to here, are a total of the share of the patient insured and the share of the underwriter. Under the National Health Insurance Scheme, the underwriter's share of the medical expense is set at 50%, whereas the amount to be actually paid by the patient is set at 50% of the medical care expense. This map does not show the eight medical care insurance systems other than the National Health Insurance Scheme, as no statistical data are available by St. Mari and Maro.

**Source:**
1. All Japan Federation of National Health Insurance Organizations, 1973, Actual Status of National Health Insurance.

3. Fixed Number of Day Nurseries Per 100 Preschool Children

As of October 1, 1972, there were 1,106,800 preschool children, 22.6% of the total population. As of December 31, 1971, there were 14,531 day nurseries, including those in Okinawa Prefecture. The total accommodation capacity was 1.920,080 and 1,024,800 children were registered. Of the 1,220,000 day nurseries, 62% were under public management and 38% under private management. Of the day nurseries, 14% had a total accommodation capacity of less than 100 preschool children; 48% had a capacity for 11-60 preschool children; 34.5% had a capacity for 61-110 preschool children; 5.5% had a capacity for 111-160 preschool children; and 7% had a capacity for more than 165 preschool children.

By age, 1.5% of the registered day nursery children were 4 years of age, 14.1% 1-2 years, 28.3% three years, and 38.9% four years and over.

The number of nursery children was 115,800, and the ratio was 31 day nursery children per nurse.

**Santol Points of the Legend and Map Compilation**

Preschool children as referred to here, are the children six years of age and under as clarified in the Population Census on October 1, 1970.

**Source:**
1. Data from National Foundation for Promoting Social Welfare Agencies.
RATIO OF PERSONS INSURED IN NATIONAL HEALTH INSURANCE

(1973)

- Less than 20%
- 20% and over but less than 40%
- 40% and over but less than 60%
- 60% and over but less than 80%
- 80% and over

Status as of March 31, 1973
Average for the whole country: 44.3%