



บันทึกข้อความ

ส่วนราชการ กองแผนงาน กลุ่มวิเทศสัมพันธ์ โทร. ๐ ๒๕๕๐ ๔๒๔๑

ที่ สธ ๐๔๐๕.๐๕/ ๑๐ ๕๕

วันที่ ๒๕ กรกฎาคม ๒๕๕๕

เรื่อง ทุณรัฐบาลญี่ปุ่นหลักสูตร Improvement of Social Insurance System – Modernization of Health Security Administration

เรียน ผู้อำนวยการสำนักที่ปรึกษา ผู้อำนวยการสำนักส่งเสริมสุขภาพ
ผู้อำนวยการสำนักอนามัยสิ่งแวดล้อม ผู้อำนวยการสำนักโภชนาการ
ผู้อำนวยการสำนักทันตสาธารณสุข ผู้อำนวยการสำนักอนามัยการเจริญพันธุ์
ผู้อำนวยการสำนักสุขภาพอาหารและน้ำ เลขาธิการกรมอนามัย ผู้อำนวยการกองทุกกอง
ผู้อำนวยการกลุ่มพัฒนาระบบบริหาร ผู้อำนวยการศูนย์บริหารกฎหมายสาธารณสุข
ผู้อำนวยการศูนย์ห้องปฏิบัติการการกรมอนามัย ผู้อำนวยการกลุ่มตรวจสอบภายใน
ผู้อำนวยการศูนย์อนามัยที่ ๑ - ๑๒ ผู้อำนวยการศูนย์พัฒนาอนามัยพื้นที่สูง
ผู้อำนวยการกลุ่มพัฒนาความร่วมมือทันตสาธารณสุขระหว่างประเทศ

ด้วยสำนักงานปลัดกระทรวงสาธารณสุข ได้มี หนังสือ ด่วนที่สุด ที่ สธ ๐๒๒๔.๐๓/๘๔๔๔ ลงวันที่ ๒๓ กรกฎาคม ๒๕๕๕ ขอให้กรมอนามัยพิจารณาเสนอชื่อผู้สมัครรับทุน จำนวน ๒ ราย ซึ่งมีคุณสมบัติตามที่ JICA กำหนดไว้ดังต่อไปนี้ คือ

๑. ผู้สมัครรายที่ ๑ เป็นข้าราชการในระดับชำนาญการพิเศษขึ้นไป ซึ่งดำรงตำแหน่งผู้อำนวยการ และรับผิดชอบงานด้านการวางแผนหรือบริหารจัดการด้านการบริการสุขภาพ
๒. ผู้สมัครรายที่ ๒ เป็นข้าราชการในระดับชำนาญการขึ้นไป ซึ่งปฏิบัติงานที่เกี่ยวข้องกับหลักสูตร

ในการนี้ สถาบันการต่างประเทศเทวะวงศ์วโรปการ ได้ยกเว้นการทดสอบภาษาอังกฤษให้แก่ผู้สมัคร ทั้งนี้ ผู้สมัครสนใจเข้ารับการฝึกอบรมฯ สามารถดูรายละเอียดข้อมูลเพิ่มเติม อีกทั้งจัดทำใบสมัครได้ที่ www.anamai.moph.go.th หัวข้องานวิเทศสัมพันธ์

จึงเรียนมาเพื่อโปรดทราบ และพิจารณาเสนอชื่อผู้สมัครเข้ารับการอบรมที่มีคุณสมบัติตามที่ระบุไว้ข้างต้น จำนวน ๒ ราย พร้อมส่งใบสมัครรับทุนของกระทรวงสาธารณสุข จำนวน ๑ ชุด และแบบพิมพ์ ท.๑ จำนวน ๑ ชุด ไปยังกองแผนงาน ภายในวันที่ ๓๐ กรกฎาคม ๒๕๕๕ (หากพ้นกำหนดนี้ถือว่าสละสิทธิ์) เพื่อนำเสนอกรมฯ คัดเลือกผู้สมัครเข้ารับการอบรมฯ เสนอชื่อไปยังสำนักงานปลัดกระทรวงสาธารณสุข ทั้งนี้ กองแผนงาน จะแจ้งผลการคัดเลือกให้ทราบต่อไป จะเป็นพระคุณ

ศรีอรุณ ใจงาม

(นางสาวสร้อยทอง เตชะเสน)

ผู้อำนวยการกองแผนงาน กรมอนามัย



ด่วนที่สุด

ที่ กต.๑๕๐๔.๑/๕๖๔๗

ผ่านพิจารณาคุณภาพด้านสาธารณสุขระหว่างประเทศ	
เลขที่	307
วันที่	29 ก.ค. 55 เวลา 13.40 น.

กระทรวงการต่างประเทศ
ศูนย์ราชการเฉลิมพระเกียรติ ฯ
อาคารรัฐประศาสนภักดี ชั้น ๘
ถนนแจ้งวัฒนะ เขตหลักสี่
กทม. ๑๐๒๑๐

๒๐ กรกฎาคม ๒๕๕๕

เรื่อง ทูกรัฐบาลญี่ปุ่น

เรียน ปลัดกระทรวงสาธารณสุข

- สิ่งที่ส่งมาด้วย ๑. รายละเอียดหลักสูตร
๒. รายละเอียดเกี่ยวกับการสมัครรับทุน
๓. รายละเอียดเกี่ยวกับผู้สมัครรับทุน
๔. ใบสมัครรับทุนรัฐบาลญี่ปุ่น

ด้วยรัฐบาลญี่ปุ่นเสนอให้ทุนแก่รัฐบาลไทย เพื่อส่งเจ้าหน้าที่เข้ารับการฝึกอบรมหลักสูตร

Improvement of Social Insurance System - Modernization of Health Security Administration -

ระหว่างวันที่ ๑๗ กันยายน - ๒ ตุลาคม ๒๕๕๕ ณ JICA Tokyo ประเทศญี่ปุ่น ดังมีรายละเอียดตามสิ่งที่ส่งมาด้วย ๑

สำนักงานความร่วมมือเพื่อการพัฒนาระหว่างประเทศ (สพร.) กระทรวงการต่างประเทศ
พิจารณาแล้วเห็นว่าการฝึกอบรมดังกล่าวจะเป็นประโยชน์ต่อกระทรวงสาธารณสุข (สำนักงานปลัดกระทรวง
กรมอนามัย และกรมการแพทย์) จึงขอให้ท่านพิจารณาเสนอชื่อผู้ที่มีคุณสมบัติเหมาะสมเป็นข้าราชการหรือ
เทียบเท่าข้าราชการ ระดับชำนาญการพิเศษขึ้นไป จำนวน ๑ ราย และระดับชำนาญการขึ้นไป จำนวน ๑ ราย
โดยผู้สมัครรับทุนจะได้รับการยกเว้นการทดสอบภาษาอังกฤษ ทั้งนี้ ขอให้ผู้ได้รับการเสนอชื่อจัดทำรายละเอียด
เกี่ยวกับการสมัครรับทุนดังกล่าว ตามสิ่งที่ส่งมาด้วย ๒ - ๔ และส่งคืนให้ สพร. พร้อมหนังสือเสนอชื่อ
ภายในวันที่ ๖ สิงหาคม ๒๕๕๕ ด้วย จะขอบคุณมาก

จึงเรียนมาเพื่อโปรดพิจารณา

ขอแสดงความนับถือ



(นางสาวสุชาดา ไทยบรรเทา)

รองผู้อำนวยการ ปฏิบัติราชการแทน

ผู้อำนวยการสำนักงานความร่วมมือเพื่อการพัฒนาระหว่างประเทศ

สำนักงานความร่วมมือเพื่อการพัฒนาระหว่างประเทศ

โทร. ๐ ๒๒๐๓ ๕๐๐๐ ต่อ ๔๓๑๐๖

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TRAINING AND DIALOGUE PROGRAM

GENERAL INFORMATION ON

Improvement of Social Insurance System
~Modernization of Health Security Administration~

集団研修「社会保険行政」
JFY 2012

<Type: Leaders Training / 類型: 中核人材育成型>

NO. J12-00718 / ID. 1280912

From September 17, 2012 to October 6, 2012

This information pertains to one of the Training and Dialogue Program of the Japan International Cooperation Agency (JICA), which shall be implemented as part of the Official Development Assistance of the Government of Japan based on bilateral agreement between both Governments.

I. Concept

Background

In last two decades, developing countries have achieved substantial development of health policy towards the universal coverage of health security. Whereas the basic design of the administration for health security has already been prepared in the majority of developing countries, the common problem among them is the development of human resources in charge of planning and administration of health security system for the further improvement of the system. Consequently, Japan is requested to provide them with study program concerning the health security and its administration.

Considering such situation, this program is designed to provide senior administrators of developing countries who are in charge of health security system with opportunities to acquire necessary knowledge and information through introduction of Japan's experience. As the goal of this program, participants are expected to comprehend **the basic structure of Japan's health security system (Universal Health Coverage) and its historical, social, and economical background**. In addition, through the discussion among countries, the participants are expected to share the common ideas and challenges for the universal coverage in respective countries.

The study program contains several visits for the further understanding.

For what?

1. Specify issues and challenges through acquiring knowledge and information from the Japan's experiences of social security (health security) policies and experiences of participating countries in the country reports presentation;
2. Make a draft to improve or enhance the social security in their respective countries

For whom?

This program is offered to Senior administrative officers as Acting Directors, who are engaged in policy making on social insurance (health security) or its implementation and have an adequate knowledge on the over all aspects in the social insurance services.

How?

Participants shall have opportunities in Japan to identify approaches and strategies to ensure program effectiveness, enhance financial security, and improve organizational viability.

II. Description

1. **Title (J-No.): Improvement of Social Insurance System ~ Modernization of Health Security Administration ~ (J1200718)**
2. **Period of program**

Duration of whole program:	August 2012 to March 2013
Preliminary Phase: (in a participant's home country)	August 2012 to September 2012
Core Phase in Japan:	September 17 to October 6, 2012
Finalization Phase: (in a participant's home country)	October 2012 to March 2013
3. **Target Regions or Countries**
Bangladesh, Indonesia, Kosovo, Laos, Mongolia, Myanmar, Philippines, Thailand
4. **Eligible / Target Organization**
The government office and implementing agency which is in charge of planning and/or administration of the social insurance services.
5. **Total Number of Participants**
13 participants
6. **Language to be used in this program:** English
7. **Program Objective:**
To study social security systems of Japan and various countries including participants' own countries and organize the knowledge, to identify clearly the issues in the health security system of participant's own country, as well as to improve ability to plan measures for betterment of their social insurance administration.
8. **Overall Goal**
The situation of social security in participating countries will be improved.

III. Conditions and Procedures for Application

1. Expectations for the Participating Organizations:

- (1) This project is designed primarily for organizations that intend to address specific issues or problems identified in their operations. Applying organizations are expected to use the Program for those specific purposes.
- (2) In this connection, applying organizations are expected to nominate the most qualified candidates to address the said issues or problems, carefully referring to the qualifications described in section III-2 below.
- (3) Applying organizations are also expected to be prepared to make use of knowledge acquired by the nominees for the said purpose.

2. Nominee Qualifications:

Applying Organizations are expected to select nominees who meet the following qualifications.

(1) Essential Qualifications

Applicants should

Current Occupations and Duties:

- 1) Current Occupation and Duty should be either ① or ② below.
 - ① be a senior administrative officer (Acting Director) who has engaged in planning or administration of the social insurance services or
 - ② be an officer of implementing agency who has engaged in its implementation.

※For making this course effective, a pair of above-mentioned ① and ② from one country will be preferable. Two nomination from both ① and ② are welcome even though the allocation remains one seat. (When the capacity allows, JICA may accept both nominee who fully meet qualifications.)

- 2) have an adequate knowledge on the over all aspects in the social insurance services.
- 3) be expected to continue their careers in social insurance field more than three years after returning their home countries.
- 4) have a sufficient command of both discussion in English and presentation by English,
- 5) not have attended this study program in the past,
- 6) Health: must be in good health, both physically and mentally, to participate in the Program in Japan
- 7) Must not be serving any form of military service.

3. Required Documents for Application

- (1) Application Form: The Application Form is available at the JICA office or the Embassy of Japan in the respective country

※Pregnancy

Pregnant participants are strictly requested to attach the following documents in order to minimize the risk for their health.

- ① letter of the participant's consent to bear economic and physical risks
- ② letter of consent from the participant's supervisor
- ③ doctor's letter with agreement of her training participation.

Please ask National Staffs in JICA office for the details.

9. Expected Module Output and Contents:

This program consists of the following components. Details on each component are given below:

(1) Preliminary Phase in a participant's home country (August 2012 to September 2012) <i>Participating organizations make required preparation for the Program in the respective country.</i>	
Expected Module Output	Activities
Country report is formulated	Formulation and submission of Country Report

(2) Core Phase in Japan (September 17 to October 6, 2012) <i>Participants dispatched by the organizations attend the Program implemented in Japan.</i>		
Expected Module Output	Subjects/Agendas	Methodology
(1) To share information about current state of and issues in respective countries' health administration through presentation of country reports and discussion	<ul style="list-style-type: none"> - Country Report Discussion - Group Exercise (Overall and Question) 	Discussion
(2) To understand the philosophy behind Japan's health and medical administration, social security and social insurance system; organization of government administration, historical development and background, etc, and to organize the issues in social security management in participants' countries	<ul style="list-style-type: none"> - History and Development of Medical Insurance System in Japan /Governance and Local Governments in Japan - History of Public Health in Japan (Establishment of Community Healthcare) - Development Circumstances and Future View of Social Security in Japan - History of Medical Insurance in Japan - Long-Term Care for the Elderly - Structure of Medical care for the Elderly - Socially Vulnerable People and Health Security 	Lecture

	Healthcare Activities and Long-Term Care Prevention Activities for the Elderly in Regions (Ibaraki Prefectural Health Plaza)	Study Visit
(3) To understand philosophies of Japan's medical insurance scheme and pension scheme, relevant administrative agencies, historical development and background, relevant system, etc., and to identify the tasks for betterment of medical insurance scheme in participants' countries in an organized fashion	<ul style="list-style-type: none"> - Overview of Health Care Insurance System (System Structure) - Outline of Medical Care Delivery System - Health Insurance and Public Administration (Medical planning at Local Government) - Overview of Medical Financial system - Overview of Reimbursement System of Medical Fee - History of Medical Insurance in Japan - Significance of Universal Health Coverage - Development of DPC (Japanese DRG) - Income Security (Pension System, Worker's Accident Compensation Insurance, Regional Disparities, Income Disparities) 	Lecture
	<ul style="list-style-type: none"> - Actual Situation of Review System of Medical Fee Claims (Health Insurance Claims Review & Reimbursement Services) - Inspection of Medical institutions (Kurosu Hospital) - Function of Central Social Insurance Medical Council - Specific Health Examination & Health Guidance of National Health Insurance - Outline of National Health Insurance in Municipality (mainly about collection) 	Study Visit

<p>(4) Based on comparison with status in Japan and other participants' countries, the participant identifies the issues in own country's health security system. And prepare a provisional plan for better operation of services at participant's organization for improved social insurance system, which then will be shared and reviewed at participant's organization</p>	<ul style="list-style-type: none"> - Group Exercise (Overall and Question) - Interim Review – Marshaling of subject, Q&A Group Exercise (Final Presentation) 	<p>Discussion Group Exercise Presentation</p>
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(3) Finalization Phase in a participant's home country

(October 2012 to March 2013)

Participating organizations produce final outputs by making use of results brought back by participants. This phase marks the end of the Program.

Expected Module Output	Activities
To Hold the workshop to share information and knowledge in your country	<p>Within 6 months of returning to own country, the participant will communicate the outcomes of the program to relevant officials through holding a workshop and/or submitting a written report. Resulting information, such as how the workshop was held, content of discussions, reactions from participant, etc., is to be reported back to JICA.</p>

Programme(Tentative)

1. General Sessions

Most of the information will be presented in the form of classroom lectures given by the Japanese experts in the field of Social Insurance. Through those lectures, current situation and experience of the Social Insurance in Japan will be introduced. Also there will be study visits to the related facilities and organizations to obtain further information regarding Social Security in Japan. For your reference, tentative schedule of the course is attached herewith.

2. Lectures and study visits

Programme Title		Programme Contents
History and Development of Medical Insurance System in Japan	Lecture	The social security system should undergo a change in its function and meaning with the stage of development of society. Therefore, it wouldn't be possible to comprehend accurately the social security system, of whatever aspect, of the country, unless the historical and social background of that country is fully understood. At the beginning of this training session, an overview of the development of the social security system in Japan is provided here with six separate stages of historical development in modern Japanese society. As the history of modern Japanese society begins with the Meiji Restoration and was drastically transformed at the breakpoint of World War II, it is divided roughly between before and after World War II, and then classified broadly into six historical periods. These six historical periods are: Meiji Restoration - Early days of industrialization (1870s-1920), Expansion of industry (1920s-mid30s), Welfare for warfare (mid-1930s-1945) before World War II; and „Right to live" based on the postwar Constitution and reconstruction (1945-1960), Rapid economic growth to transition (1960-1980), Declining birthrate and the aging society (1980-) after World War II. With this period division in mind, the process of building the social security system based on the social and economic needs at each of these stages is described.
Governance and Local Governments in Japan	Lecture	The basic relationship between the central government and regions including the government structure of all 47 prefectures and municipalities, the roles of regional health service bureau and clerical works in local autonomy will be outlined.
Development Circumstances and Future View of Social Security in Japan	Lecture	<ul style="list-style-type: none"> • Progress of low birthrate and the arrival of depopulating society • Countermeasures to falling birthrate and the direction of family policies • Issues of social security system in Japan following the change in population structure. • Issues of the recent social security system reform and a future prospects of social security policy
History of Public Health in Japan (Establishment of Community Healthcare)	Lecture	To explain about the background, mechanism and point of medical service and medical insurance system in Japan. Additionally, to compare the mechanism of medical service in advanced countries, such as financial resources, and consider methodologies applicable to the situation in developing countries.
History of Medical insurance in Japan	Lecture	Lecture relating to the development of Japan's medical insurance system. Japan has a long history of medical insurance, with its first insurance system dating back to 1922 and the "Medical Insurance Act". Subsequently, the National Health Insurance Act was enacted to cover agricultural and fishing villages, and later, in 1961, medical insurance was expanded to cover uninsured persons, resulting in universal health insurance coverage in

		Japan. This lecture explains the history of these basic systems for medical insurance in Japan. In addition, the next lecture, entitled "The Significance of Universal Insurance Systems for Japanese Citizens" explains the historical significance of universal insurance.
Outline of Medical Care Delivery System	Lecture	Basic explanation is provided of the systems that consist of Japan's framework to deliver medical services, which is characterized by a universal health insurance system, freedom to open private medical practice and freedom to choose own medical service provider. The measures to achieve quickly an efficient use of medical resources, such as systematization of medical institutions' functions, promotion of providing the patient with information, correction of regional discrepancy of medical resource distribution are discussed. How medical services should be delivered is also discussed.
Overview of Health Care Insurance System (System Structure)	Lecture	The characteristics of Japanese health care insurance system will be identified and multiplicity of insurers will be explained. Especially, the differences in attribute of insurance holders by different insurance systems will be focused on.
Overview of Reimbursement System of Medical Fee	Lecture	Explanation on calculation of medical costs. Because of the high level of interest in the DRG method in developing countries, the commentary includes background of DPC development in Japan. Also an overview of method of clinical service reimbursement revision is explained including specific techniques such as Social Insurance Medical Council and survey on current state of medical service operations, etc.
Development of DPC (Japanese DRG)	Lecture	Reforms to the payment system based on consultations have been implemented with the aim of reducing the costs associated with excessive consultations and dispensing of medicines, and as such, further expansion of the scope of application of integrated payments is required. DRG has been identified as potentially useful for this. DPC (Diagnosis Procedure Combination) is a Japanese version of DRG (Diagnosis Related Group) implemented from 2003 in the technologically advanced hospitals. This lecture will explain the background of the development of DPC and challenges in Japan.
Overview of Medical Financial System	Lecture	Explanation on medical service finance system and framework of collecting insurance contributions in each system, and how payment is made
Significance of Universal Health Coverage	Lecture	One unique attribute of Japan's medical insurance system is the fact that all citizens can, providing they are members of any public medical insurance system and paying their insurance premiums, receive medical treatment at any medical institution providing they show proof that they are insured, at only partial cost to themselves. This universal health insurance coverage is vital in ensuring that the Japanese people have peace of mind in regard to life and health. This lecture explains the medical insurance system using comparisons between Japan and other countries.
Long-Term Care for the Elderly	Lecture	Against the background of an increasingly ageing society, a nursing insurance system for the elderly was established in Japan in 2000. This lecture explains the history, and gives an outline of policies relating to nursing care for the elderly. With reference to the background of moving from social welfare to a social insurance system, the lecture will explain the significance of nursing insurance within Japanese society today.

Structure of Medical care for the Elderly	Lecture	Japan has already become a super-aged society. It is anticipated that ageing will occur in developing countries too in the future. The high costs of medical treatment in Japan have been significantly impacted by the ageing society and policies relating to the treatment of elderly people. This lecture will explain trends in medical costs in Japan through history, as well as giving an understanding of medical systems for the elderly and introducing debates taking place in Japan today.
Health Insurance and Public Administration (Medical planning at Local Government)	Lecture	Explanation on roles of local government administration in delivery of healthcare policies, with reference to the healthcare plan (Plan of community health and healthcare) at respective prefectures. In Japan, each prefecture develops "healthcare plan" following the national policies while grounded upon the status of community healthcare, which shows the direction of improvements in health and the healthcare system. This process of development shall be mentioned, to promote understanding of purpose and significance of the plan of improvement in community health and healthcare.
Function of Central Social Insurance Medical Council	Lecture	The Central Social Insurance Medical Council advises the Ministry of Health, Labor and Welfare on reforms to health insurance systems and consultation remuneration, among other aspects. From the perspective of managing medical costs, the Council is an important organization, since it in fact functions as the decision-making body. This lecture explains the functions and role of the Central Social Insurance Medical Council.
Income Security (Pension System, Worker's Accident Compensation Insurance, Regional Disparities, Income Disparities)	Lecture	Japan's pension systems developed first for public servants (and the army), then for blue-collar and white-collar workers, and then for self-employed people, respectively. A look at the process by which these systems evolved shows that the pension system was closely related to Japan's strategies for economic growth. This lecture begins with the history of Japanese pension systems, and explains Worker's Accident Compensation insurance, Regional disparities and Income disparities.
Socially Vulnerable People and Health Security	Lecture	Outline of Socially vulnerable people and healthcare security, how the vulnerable group being protected as national scheme in Japan.
Visit to Medical Institutions (clinics, hospitals)	Study Visit	Study tour to typical clinics and mid-sized hospitals. The tour will be conducted at general clinics, not at the innovative medical institutions so as to obtain the idea of common medical settings in Japan.
Healthcare Activities and Long-Term Care Prevention Activities for the Elderly in Regions	Study Visit	Visit to regional comprehensive support center to understand the long-term care prevention activities which have been carried out in the region through observation.
Specific Health Examination and Health Guidance of National Health Insurance	Study Visit	This visit aims to introduce "Specific Health Examination" and "Specific Health Guidance" which are the activities by local government, to promote primary prevention of Lifestyle-related disease.
Actual situation of Review System of Medical Fee Claims (Health Insurance Claims)	Study Visit	Medical Fee Payment Fund is conducting "appropriate reviews" of medical fees (medical expenses) and other expenses that are charged by organizations such as insurance medical institutions, and making "prompt payment" under a commission from all insurers of employee insurances including health insurance

Review & Reimbursement Services)	<p>associations.</p> <p>The fund is conducting reviews of medical bills submitted from medical institutions and pharmacies through proper procedures—electronic bills by examining data on the screen and paper bills by examining documents.</p> <p>Operations for billing insurers of medical expenses and payment to medical institutions and pharmacies are carried out using OCRs and data input tools.</p> <p>The fund also provides services for the image processing of paper bills for insurers, and is making positive efforts to promote IT for the medical insurance system as a whole.</p>
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3. Country Report Discussion

On 19 September, 2012 of the study program, 'Country Report Discussion' is scheduled. Details are informed you at the time of Acceptance Notice.

Tentative Schedule as of June, 2012

AM: 9:30-12:00 / PM: 13:30-16:00

Date		Programme
17 Sep. (Mon)		Arrival in Japan
18 Sep. (Tue)		JICA Briefing / Orientation
19 Sep. (Wed)	AM PM	Country Report Discussion ※ including Course Guidance and ASEAN Investigation Report
20 Sep. (Thu)	AM	History and Development of Medical Insurance System in Japan / Governance and Local Governments in Japan
	PM	Development Circumstances and Future View of Social Security in Japan
21 Sep. (Fri)	AM	History of Public health in Japan (Establishment of Community Healthcare)
	PM	History of Medical Insurance in Japan
22 Sep. (Sat)		Day-off
23 Sep. (Sun)		Day-off
24 Oct. (Mon)	AM	Outline of Medical Care Delivery System
	PM	【Study visit】 Inspection of Medical Institution (Kurosu Hospital)
25 Sep. (Tue)	AM	Overview of Health Care Insurance System -System Structure-
	PM	Overview of Reimbursement System of Medical Fee
26 Sep. (Wed)	AM	【Study visit】 Outline of National Health Insurance in Municipality (mainly about Collection)
	PM	【Study visit】 Specific Health Examination & Guidance of National Health Insurance
27 Sep. (Thu)	AM	Development of DPC (Japanese DRG)
	PM	Overview of Medical Financial System
28 Sep. (Fri)	AM	Significance of Universal Health Coverage
	PM	Interim Review
29 Sep. (Sat)		Day-off
30 Sep. (Sun)		Day-off
1 Oct. (Mon)	AM	Long Term Care for the Elderly
	PM	【Study visit】 Healthcare Activities and Long-Term Care Prevention Activities for the Elderly in Regions (Ibaraki Prefectural Health Plaza)
2 Oct. (Tue)	AM	Structure of Medical care for the Elderly
	PM	Health Insurance and Public Administration (Medical planning at Local Government)
3 Oct. (Wed)	AM	【Study Visit】 Function of Central Social Insurance Medical Council
	PM	【Study visit】 Actual Situation of Review System of Medical Fee Claims (Social Insurance Medical Fee Payment Fund)
4 Oct. (Thu)	AM	Income Security (Pension System, Worker's Accident Compensation, Regional / Income Disparities)
	PM	Socially vulnerable people and health security (Medical assistance, Long-term care assistance, Public health)
5 Oct. (Fri)	AM	【Group Exercise】 Overall and Question/ Final Presentation
	PM	Evaluation Session / Closing Ceremony
6 Oct. (Sat)		Departure

4. Procedure for Application and Selection:

(1) Submitting the Application Documents:

Closing date for application to the JICA Tokyo: 3 August, 2012

Note: Please confirm the closing date set by the JICA office or the Embassy of Japan in the respective country to meet the final date in Japan.

(2) Selection:

After receiving the document(s) through due administrative procedures in the respective government, the JICA office or the Embassy of Japan in the respective country shall conduct screenings, and send the documents to JICA Tokyo, which organizes this project. Selection shall be made by JICA Tokyo in consultation with the organizations concerned in Japan based on submitted documents according to qualifications. The organization with intention to utilize the opportunity of this program will be highly valued in the selection.

(3) Notice of Acceptance

Notification of results shall be made by the JICA office or the Embassy of Japan in the respective country to the respective Government by not later than August 17, 2012.

5. Document(s) to be submitted by accepted participants:

(1) Country Report

Accepted participants are kindly requested to prepare Country Report with following the Guideline for Country Report. For more detailed information, kindly refer the "Suggested Guideline for Country Report" (ANNEX 1). The reports must be typewritten in a double-spaced format.

Deadline for Submission

The participants should prepare four kinds of data(Form1-4) with the Country Report before coming to Japan; Country Report should be sent to JICA Tokyo and JICWELS by 9 September, 2012, preferably by e-mail to ticthd@jica.go.jp and jigyo@jicwels.or.jp.

*Please put the course title and J-number on the e-mail title when you submit the country report.

6. Conditions for Attendance:

- (1) to follow the schedule of the program,
 - (2) not to change the program subjects or extend the period of stay in Japan,
 - (3) not to bring any members of their family,
 - (4) to return to their home countries at the end of the program in accordance with the travel schedule designated by JICA,
 - (5) to refrain from engaging in political activities, or any form of employment for profit or gain,
 - (6) to observe Japanese laws and ordinances. If there is any violation of said laws and ordinances participants may be required to return part or all of the training expenditure depending on the severity of said violation.
 - (7) to observe the rules and regulations of their place of accommodation and not to change the accommodation designated by JICA.
 - (8) to participate in the whole program including a preparatory phase prior to arrival in Japan.
- Applying organizations, after receiving notice of acceptance for their nominees, are expected to carry out the actions described in section II -9 and section III-4.

IV. Administrative Arrangements

1. Organizer:

- (1) Name: JICA Tokyo
(2) Contact: Ms. Yoko SADAIE (ticthd@jica.go.jp)

2. Implementing Partner:

- (1) Name: Japan International Corporation of Welfare Services (JICWELS)
(2) Contact: Ms. Kumiko MIYAKE (jigiyo@jicwels.or.jp)
Ms. Hiroko FUJIMORI (jigyo@jicwels.or.jp)

(3) Remark:

Japan International Corporation of welfare Services (JICWELS) was established and approved as a non-profit association by Ministry of Health and Welfare (The current Ministry of Health, Labour and Welfare) on July 7, 1982 with an aim to contribute to the development of international health and welfare. Since then, JICWELS has been implementing study program for development of human resources in developing countries specially in Asian region as a main activity and also involved in various projects related to official development assistance or other international cooperation activities such as investigation or implementation of projects and international conferences. JICWELS has also started support project for acceptance of overseas nurses and care workers from Asian countries under the Economic Partnership Agreement (EPA) between the Government of Japan and Asian Countries.

3. Travel to Japan:

- (1) **Air Ticket:** The cost of a round-trip ticket between an international airport designated by JICA and Japan will be borne by JICA.
(2) **Travel Insurance:** Term of Insurance: From arrival to departure in Japan. The traveling time outside Japan shall not be covered.

3. Accommodation in Japan:

JICA will arrange the following accommodations for the participants in Japan:

JICA Tokyo International Center (JICA Tokyo)

Address: 2-49-5 Nishihara, Shibuya-ku, Tokyo 151-0066, Japan

TEL: 81-3-3485-7051 FAX: 81-3-3485-7904

(where "81" is the country code for Japan, and "3" is the local area code)

If there is no vacancy at JICA Tokyo, JICA will arrange alternative accommodations for the participants. Please refer to facility guide of TIC at its URL, <http://www.jica.go.jp/english/contact/domestic/pdf/welcome.pdf>

4. Expenses:

The following expenses will be provided for the participants by JICA:

- (1) Allowances for accommodation, living expenses, outfit, and shipping
 - (2) Expenses for study tours (basically in the form of train tickets).
 - (3) Free medical care for participants who become ill after arriving in Japan (costs related to pre-existing illness, pregnancy, or dental treatment are not included)
 - (4) Expenses for program implementation, including materials
- For more details, please see p. 9-16 of the brochure for participants titled "KENSU-IN GUIDE BOOK," which will be given to the selected participants before (or at the time of) the pre-departure orientation.

5. Pre-departure Orientation:

A pre-departure orientation will be held at the JICA office or the Embassy of Japan in the respective country, to provide participants with details on travel to Japan, conditions of the workshop, and other matters.