



オリンパスけんぽ
Olympus Health Insurance Society

July 2022

To: Insured persons and dependents

Olympus Health Insurance Society

About the FY2022 Health Insurance Dependent Certification Survey

Thank you for your continuing cooperation with Health Insurance Society activities.

The Health Insurance Dependent Certification Survey must be implemented pursuant to Article 50 of the Ordinance for Enforcement of the Health Insurance Act and in accordance with guidance from the Ministry of Health, Labour and Welfare. We ask for your understanding and cooperation regarding this survey, which is intended to ensure that dependent certification is conducted fairly and appropriately for all Society insured persons.

The implementation and administration of the survey are subcontracted to Houken Corporation. Please direct inquiries to the Olympus Health Insurance Society dedicated call center. (Contact information is provided below.)

Details

Survey subjects

- **All dependents aged 18 or older** (as of April 1, 2022)
 - **Dependents whose dependent status must be verified and their family members**
 - If a child is a dependent of the insured but the spouse is not (dependents for whom both spouses provide)
 - If a person other than the insured is the priority support obligor of the dependent
- ※Not including those certified on or after January 1, 2022

Documents to submit

- **Health Insurance Dependent Certification Survey Form** ("Survey Form" hereinafter)
 - **Documentation of dependency**
- ※Additional documents may be requested.

Contact

Olympus Health Insurance Society dedicated call center (Available only in Japanese)

TEL: 0800-800-2291 (toll free) 9:00 am – 5:00 pm Monday-Friday (except holidays)

※Personal information used in subcontracted operations will be appropriately managed and supervised by Houken Corporation, the subcontractor.

Where to submit

5F, Nippon Zoki Pharmaceutical Kudan Building, 1-1-5 Kudan-minami, Chiyoda-ku, Tokyo 102-8790
Houken Corporation, attn.: staff in charge of Olympus Health Insurance Society Health Insurance Dependent Certification Survey

※Use the enclosed reply envelope.

※Do not submit documents directly to your establishment or to the Health Insurance Society.

Deadline for submitting

Must be received by Friday, July 29, 2022.

Notes

- Information on the Survey Form is current as of May 31, 2022.
- Pursuant to Article 50 of the Ordinance for Enforcement of the Health Insurance Act, the relevant dependent's health insurance card will be invalidated if the Survey Form and required documents are not submitted by the specified deadline.
- Under certain circumstances, you may be asked to submit additional documents.
- The Society will notify you if the survey results indicate a dependent no longer meets the dependent certification criteria. If so, promptly take the steps needed to remove the family member from your list of dependents.
- The Society will later send you an invoice for medical care and other related costs for your former dependent incurred by the Society on and after the dependent's removal day.
- Notes concerning submitted documents:
 - Submitted documents will not be returned.
 - The insured person (or dependent) is responsible for expenses associated with obtaining documents.
 - Submitted documents will be used solely for the purpose of health insurance operations, including the dependent certification survey.

1. Flow of the Dependent Certification Survey

Check the dependent certification criteria.

pp. 1-2

Complete and review the Survey Form.

p. 3

Check the documentation for the survey subject(s).

pp. 4-8

Submit the Survey Form and documentation.

Scope of family members certified as dependents

The scope of family members certified as dependents by health insurance consists of family members within the third degree of consanguinity of the insured person (note that this differs from the provisions for family relations under the Civil Code). To be certified as a dependent, a family member must depend primarily on the income of the insured for his or her livelihood. Certain family members must also live with the insured* to be certified as dependents.

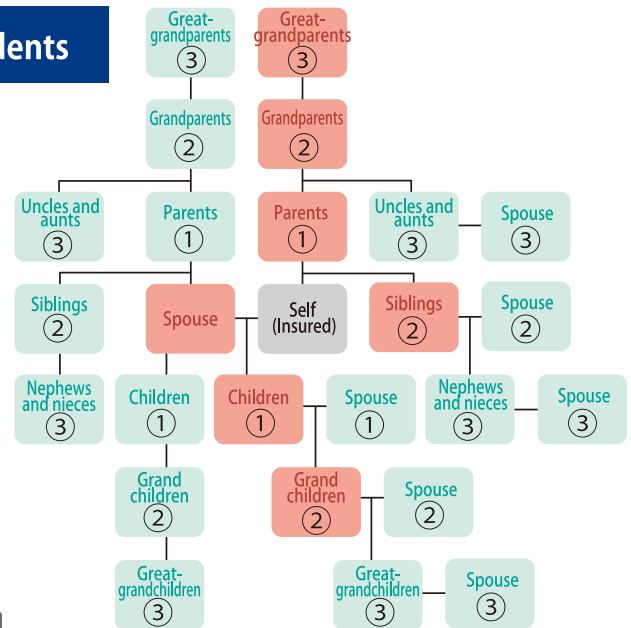
※Dependents are still regarded as living together if the insured person lives elsewhere for reasons related to the insured's employer. Conversely, those living at the same address but in separate households are regarded to live apart

When a dependent lives apart from the insured

The insured person must remit an allowance to the dependent who lives apart, to cover his or her costs of living. For dependents living apart from the insured to attend school, a certificate of school attendance may be submitted in place of proof of allowance remittance.

Seniors aged 75 or older are covered as insured persons under the Medical Care System for the Advanced Elderly. Thus, they are not eligible for certification as health insurance dependents.

-May live together or apart
-Must live together
- ※"Spouse" may be a common-law spouse.
- ①.....1st degree of consanguinity
- ②.....2nd degree of consanguinity
- ③.....3rd degree of consanguinity



Priority support obligor

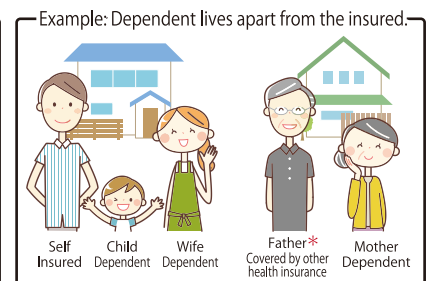
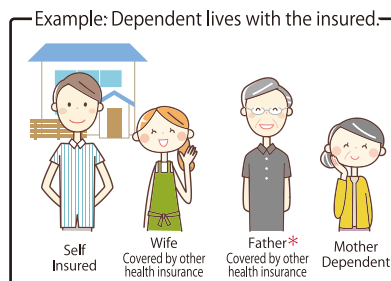
The concept of a priority support obligor applies to health insurance dependents.

A survey subject may be certified as a dependent in the absence of any other priority support obligor or if the subject must be a dependent of the insured person because the priority support obligor is unable to provide for him or her.

Relationship to subject of certification	Subject of survey as priority support obligor (relationship to the insured)
Father or mother	Mother or father
Sibling	Parents, spouse of the sibling, children of the sibling
Grandfather or grandmother	Grandmother or grandfather, parents
Father or mother in law	Mother or father in law, spouse
Grandchild	Child of the insured and the child's spouse (the grandchild's parents)
Nephew/niece	Sibling of the insured and the sibling's spouse (the nephew's/niece's parents)

Example: In the following examples, documentation of income is required for the persons denoted by an asterisk (*).

※The relationships indicated are those to the insured.



See the Health Insurance Society website for more information on dependent certification criteria.

<https://www.olympus-kenpo.or.jp/casestudy/case002-1.html>



2. Dependent Certification Criteria



Subject's maximum income for certification

Pursuant to notification from the Ministry of Health, Labour and Welfare, dependents must meet both of criteria ① and ② below.

① Dependent's income ^{※1}

Dependent's age, etc.	Monthly amount (income, pension, etc.)	Annual income ^{※1}
Under 60 years old	Less than 108,334 yen	Less than 1.3 million yen
60 years or older	Less than 150,000 yen	Less than 1.8 million yen
Person with a certain degree of disability ^{※2}	Less than 150,000 yen	Less than 1.8 million yen

Dependents must satisfy the criteria for both monthly and annual salary.



② Household relationship to the insured, income, and allowance

The insured and dependent live together.	The dependent's annual income must be less than one-half the insured's annual income.
The insured and dependent live apart.	The dependent's annual income must be less than the amount of remittance (allowance) from the insured. ^{※3}

● Rationale for income criteria (differences from handling under tax law)

A dependent's income must satisfy the following criteria stipulated in the Health Insurance Act: Annual income must be less than 1.3 million yen (1.8 million yen for those aged 60 or older or with a certain degree of disability). As used here, annual income refers to income to be earned during the next one-year period. The most recent income level is used to calculate the annual amount to be earned during this one-year period.

Accordingly, the criterion used to determine eligibility for the certification of a dependent who earns salary income is whether the average monthly income amount over the course of the period subject to verification is less than 108,334 yen (150,000 yen for those aged 60 or older or with a certain degree of disability). ^{※4} Note that this differs from annual income as defined under the Income Tax Act (total taxable income from January through December of the previous calendar year).

Income for health insurance purposes also includes survivor's pension, disability pension, basic allowance of unemployment benefits (employment insurance), and commuting costs, which are not taxable under tax law.

^{※1} Income includes all income, including salary income, business income, income from various pensions, interest and dividend income, real estate income, and employment insurance benefits. In addition, dependents must meet the criteria for both the monthly amount and annual income.

^{※2} Those with a certain degree of disability eligible for disability pension benefits

^{※3} Proof of remittance must be submitted as evidence of the fact of remittance (of the allowance).

^{※4} A dependent is not necessarily ineligible for certification simply because his or her monthly income was temporarily 108,334 yen or more (150,000 yen or more for those aged 60 or older or with a certain degree of disability).



Dependents for whom both spouses provide

● Rationale regarding handling of dependents for whom both spouses provide

The term dependents for whom both spouses provide refers to persons both of whose parents earn income. Generally speaking, if both spouses work, the children are the dependents of the spouse who earns more.

● How dependents for whom both spouses provide are verified

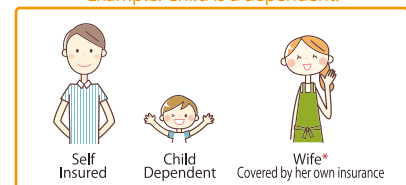
If the insured person names a child as a dependent but does not name his or her spouse (husband or wife), provide documentation of income for both the insured person and the spouse or documentation indicating that the insured person is a single parent.

In the following cases, the child remains a dependent of the insured person.

Provider status	Documentation
Income of insured person > Income of spouse (husband or wife)	2021 certificate of income and withholding tax FY2022 income certificate or tax (tax-exempt) certificate 2021 complete final income tax return (taxpayer's copy)

[※]Even if the spouse earns no income, documentation is required if the spouse is not named a dependent of the insured person.

Example: Child is a dependent.



In the above example, documentation of income is required for the person denoted by an asterisk (*).

● Documentation used in this survey

Annual income for the spouse will be verified based on the above documentation.

[※]In some cases, submission of documentation for the insured may also be requested.



Domestic residence requirement

[※]Amendment effective from April 2020

A family member who does not have an address in Japan may not be named a dependent.

However, those whose livelihoods are recognized to be based in Japan, such as students studying abroad, may be named dependents on an exceptional basis.

Notification must be submitted in such a case.

3. Sample Completed Form

- ※Fill out one Survey Form for each survey subject.
- ※There are four types of Survey Forms: for spouse; for child; for other than spouse or child; and for dependent for whom both spouses provide. The example below is the Survey Form for spouse.
- ※Do not use pencil or erasable pen to fill out the form.



The sections you need to fill out are indicated in blue.

Do not use pencil or erasable pen to fill out the form.

If the family member is no longer a dependent, enter the date (e.g., date on which he or she began employment or the day after the date of death) and reason for loss of eligibility. Attach his or her health insurance card.

提出期限 令和4年7月29日(金)

本紙「調査書」について記入した内容は事実と相違がありません。

被保険者	記号番号	0000-0000
氏名	健保 健太 [自署]	
日中の連絡先	090-1234-5678	
備考		

Check the box for current employment or other status.

Use red ink to correct information already printed on the form.

Check the appropriate box for living together or apart.

調査対象者	氏名	ケンボ ハナコ 健保 花子	続柄	妻	住所	〒151-8543 東京都渋谷区本町 1-6-2
生年月日	昭和40年7月24日	認定日	平成10年1月24日			
現在の職業等 (複数選択可)	<input checked="" type="checkbox"/> (1) パート・アルバイト <input type="checkbox"/> (2) 会社員 <input type="checkbox"/> (3) 自営業(その他収入有) <input type="checkbox"/> (4) 学生 <input type="checkbox"/> (5) 無職 <input type="checkbox"/> (6) 年金受給者 <input type="checkbox"/> (7) その他 ()					
同居別居	<input checked="" type="checkbox"/> (1) 被保険者と同一世帯である <input type="checkbox"/> (2) 被保険者と別居している <input type="checkbox"/> (3) 被保険者の会社都合による別居 (同居扱い)					

下記Q1～Q2のすべての質問に「はい」・「いいえ」で回答いただき、必要書類をご用意の上提出してください。

回答に基づき、ご用意いただいた 証明書類は、記入欄の該当事項に ☒ チェックおよび記入のうえ、本紙と一緒に提出ください。各証明書類の説明および注意事項については、パンフレットP4～8をご参照ください。

チェック欄	証明書類	発行元	記入欄
<input checked="" type="checkbox"/> 必須 必ずご提出 いただく書類	<input checked="" type="checkbox"/> 調査対象者を含む世帯全員続柄入りの「住民票(原本)」 ※個人番号(マイナンバー)・本籍の記載がないもの。 ※直近3か月以内に発行の世帯主が記載されているもの。 ※複数の調査対象者が世帯全員の記載に含まれている場合は、1世帯1部で可。	市区町村役場	—
<input checked="" type="checkbox"/> はい (同居)	Q1. 調査対象者は現在、被保険者と同居、または被保険者の会社都合による別居ですか？ この回答による証明書類なし (Q2へ進む)	—	同封の「送金申告書」へ 記入・捺印
<input type="checkbox"/> いいえ (別居)	<input checked="" type="checkbox"/> 直近6か月分の「送金証明書(コピー)」および 同封の「送金申告書(原本)」 (Q2へ進む) ※被保険者の会社都合による別居の場合は不要。 ※「送金証明書」は送金先・送金元・送金日がわかる「振込明細」や「通帳」による送金実績。	金融機関	
<input type="checkbox"/> はい (収入なし)	Q2. 調査対象者は、令和4年7月時点で無収入ですか？ Q2-1. 無収入の状況は、以下のどちらですか？ <input type="checkbox"/> 令和2年12月31日以前から無収入 <input type="checkbox"/> 令和3年1月1日以降令和4年6月30日までに退職し、無収入 <input checked="" type="checkbox"/> 退職日入りの「源泉徴収票(コピー)」・「離職票-2(コピー)」・「雇用保険受給資格者証(コピー)」・「退職証明書(原本)」などのいずれか(Q2-2へ進む) ※扶養認定以降、雇用保険の失業給付を受けている場合は、「雇用保険受給資格者証(コピー)」を提出。 ※個人事業主で廃業している場合は、「事業廃止届」。	市区町村役場 勤務先	[令和3年1月以降の直近の退職日] 年 月 日
<input checked="" type="checkbox"/> いいえ (収入あり)	Q2-2. 調査対象者は、令和4年1月～7月までの期間に給与収入がありましたか？(令和4年6月30日までの退職者除く) <input checked="" type="checkbox"/> はい 調査対象者の連続した直近6か月分の「給与明細書(コピー)」(Q2-3へ進む) ※勤務期間が6か月未満の場合は勤務開始から令和4年12月までの「給与・賞与支払(見込)証明書(原本)」を提出。 ※複数社に就労している場合はすべて提出(賞与も含む)。 ※氏名・会社名・対象年月の記載があるもの。 ※給与支給のない月があり、給与明細がない場合は、給与・賞与支払(見込)証明書にて0円で証明し、提出。 <input type="checkbox"/> いいえ この回答による証明書類なし (Q2-3へ進む)	勤務先	季節的な要因で毎年調査対象期間の収入が増加し基準を超えている場合は、別紙または欄外に以下を記載し、直近1年間の「給与明細書(コピー)」を提出。 [記載内容] ① 業務内容 ② 収入増加月 ③ 収入が増加した理由 ※申告した内容を精査して判断します。
<input type="checkbox"/> はい	Q2-3. 調査対象者は、令和4年1月～7月までの期間に年金収入がありましたか？ <input checked="" type="checkbox"/> 調査対象者の直近の「年金振込通知書(コピー)」または「年金額改定通知書(コピー)」(Q2-4へ進む) ※年金収入のみの場合は、令和4年度「所得証明書(原本)」または「課税(非課税)証明書(原本)」を併せて提出。 ※老齢・企業・遺族・障害等、受給しているすべての年金分。 ※年金の「源泉徴収票」は不可。 <input type="checkbox"/> いいえ この回答による証明書類なし (Q2-4へ進む)	日本年金機構	[受給年金の種類] <input type="checkbox"/> (1) 老 齢 <input type="checkbox"/> (2) 遺 族 <input type="checkbox"/> (3) 障 害 <input type="checkbox"/> (4) 企 業 <input type="checkbox"/> (5) その他 ()
<input checked="" type="checkbox"/> いいえ	調査対象者は、令和4年1月～7月までの期間に自営業・不動産・農業・雑等の収入がありましたか？ <input checked="" type="checkbox"/> 調査対象者の令和3年分「確定申告書(コピー)」および「収支内訳書(所得税青色申告決算書)(コピー)」 ※税務署で受理されたことがわかるもの。 <input type="checkbox"/> はい この回答による証明書類なし	税務署	[収入の種類] <input type="checkbox"/> (1) 営 業 <input type="checkbox"/> (2) 不動産 <input type="checkbox"/> (3) 農 業 <input type="checkbox"/> (4) 雑 <input type="checkbox"/> (5) その他 ()

The number of questions differs for each type of Survey Form.
For spouse: Q1-Q2
For child: Q1-Q2
For other than spouse or child: Q1-Q3
For dependent for whom both spouses provide: Q1-Q3
Answer all questions on each applicable form.



Check the boxes for applicable items and submit all specified documentation.

Check the boxes for applicable items.

4. List of Documentation

Prepare the required documents (not showing Individual Numbers) corresponding to the applicable item and relationship (for each type of Survey Form) below.
If it is not possible to prepare a document that does not indicate the Individual Number, mask the number so that it cannot be read.
Copies of documents must be clear and complete.

○ Required ● If applicable

Relationship Status		Child				Spouse	Other than child or spouse		Title of document (document no.), notes	Where to obtain	Reference page
		Under 18	Student 18-23	24 or older	18 or older non-student		Under 18	18 or older			
To be submitted for all dependents		○	○	○	○	○	○	○	1 Certificate of residence showing relationships among all household members (original) • Issued within the past three months	Municipal office	p.5
Living apart from the insured		—	—	—	●	●	●	●	2 Proof of remittance (copy) for the most recent six months	Financial institution	p.5
Continually unemployed since December 31, 2020 or earlier		—	—	●	●	●	●	●	3 Income certificate (original) or tax (tax-exempt) certificate (original) • FY2022 document (proof of income from January – December 2021)	Municipal office	p.6
With income	Salary income	—	●	●	●	●	—	●	4 Salary details (copy) for the most recent six months ※If the period of employment was less than six months, submit a certificate of (projected) salary and bonus payment (original) for the period from the start of employment through December 2022.	Employer	p.6
	Pension income	—	●	●	●	●	—	●	5 Most recent notice of pension remittance (copy) or pension amendment notice (copy) • Most recent notice issued for FY2022	Japan Pension Service, etc.	p.7
	Other than salary or pension income (e.g., self-employment income)	—	●	●	●	●	—	●	6 Final income tax return (copy) and income statement (blue return statement) (copy) with indication of receipt by tax office • For 2021	Tax office	p.7
Student		—	○	○	—	—	—	—	7 Certificate of school attendance (original) • Issued within the past three months	School attended	p.8
Unemployed as of July 2022 after leaving employment in or after January 2021		—	—	●	●	●	—	●	8 Any of the following showing the employment departure date: certificate of income and withholding tax (copy), separation slip 2 (copy), certificate of eligibility for employment insurance benefits (copy), retirement certificate (original), etc. • Must show the employment departure date. ※Submit the certificate of eligibility for employment insurance benefits (copy) if receiving unemployment benefits under employment insurance after leaving employment.	Former employer, Public Employment Security Office, etc.	p.8
Dependent child in household in which the spouse is not a Society dependent		●	●	●	●	—	—	—	9 Documentation of spouse's income for dependents for whom both spouses provide • FY2022 document (proof of income from January – December 2021)	Employer, tax office, etc.	p.8
Dependent with priority support obligor other than the insured		—	—	—	—	—	●	●	10 Documentation of the priority support obligor's income • For 2021	Municipal office, employer, Japan Pension Service, tax office, etc.	p.8

※You may be asked to submit additional documents for confirmation purposes during the review process.

※“Student” refers to a person attending a full-time school or preparatory school (school as defined in the School Education Act).

※Ages are as of April 1, 2022.

※Contact the Society if none of the above cases applies.

5. Documentation

Required documents are categorized by where they can be obtained. Review the notes below before preparing the documents.

Important Notes on documents to submit

Prepare documents that do not show Individual Numbers ("My Numbers").

If you were issued a document showing the Individual Number by mistake, mask the number so that it cannot be read—for example, by covering it using an oil-based marker.

1 Certificate of residence showing relationships among all household members (original)

When Issued within the past three months

Purpose To verify whether the insured person and the survey subject live together or apart and whether the survey subject lives together with another priority support obligor (see p. 1)

- Submit a certificate of residence showing the household head.
(The address of the permanent domicile is not necessary; mask out before submitting the document.)
- One certificate of residence showing all household members will suffice if there are multiple survey subjects in the household.

Where to obtain, issuer, etc.

Municipal office

Obtain a certificate of residence showing all household members, including the dependent(s).



住 民 票					
住 所		●●市●●区●●丁●●番●●地●●			
世帯主		【省略】			
1	氏名	●● ●●	住民票コード	【省略】	
	住所を定めた日	平成●●年●●月●●日	性別	男	昭和●●年●●月●●日
	住民となった日	平成●●年●●月●●日	届出の年月日	平成●●年●●月●●日	
2	氏名	●● ●●	住民票コード	【省略】	
	住所を定めた日	平成●●年●●月●●日	性別	男	昭和●●年●●月●●日
	住民となった日	平成●●年●●月●●日	届出の年月日	平成●●年●●月●●日	
3	氏名	【以下余白】	住民票コード		
	住所を定めた日		性別	男	昭和●●年●●月●●日
	住民となった日		届出の年月日		
4	氏名		住民票コード		
	住所を定めた日		性別	男	昭和●●年●●月●●日
	住民となった日		届出の年月日		

この住民票の写しは、住所地市町村長から請求に係る住民票に記載されている（世帯主の）事項が住民基本台帳法第12条の4第3項の規定により通知され、その通知に基づき作成されたものです。

令和●●年●●月●●日 ●●市●●区●●市 印

2 Proof of remittance (copy) for the most recent six months

When Continual for the most recent six months

Purpose To verify whether the insured person provides for the livelihood of the survey subject living apart

- Fill out and affix your seal to the enclosed Remittance Report.
- Not necessary for cases in which the insured person lives apart for reasons related to the insured's employer or the family member lives apart temporarily to attend school
- Remittance details (copy) or the insured's bank passbook (copy) indicating the names of both the remitter and the beneficiary and remittance dates and amounts
- Utilities receipts, credit card statements, and documents indicating that the allowance was handed to the survey subject in person are not acceptable.
- When submitting a bank passbook (copy), submit both the cover of the passbook showing the name of the insured and the page(s) indicating the relevant amounts
- You may mask out irrelevant parts of the documents.

Where to obtain, issuer, etc.

On hand, financial institution



Not acceptable

- Utilities receipts
- Credit card statements
- Handing the allowance in cash

Mark the relevant items to show the remittance amounts.
Mask out irrelevant items.

キャッシングサービスご利用明細			
ご利用ありがとうございます。 お取引内容をお確かめのうえ、 お持ち帰りください。	●●●銀行	口座番号	
取引銀行	取引店	お取引日	時刻
01234	2022-01-07	14:43	
お取引内容	お取引金額(円)	手数料	
振込	¥60,000	¥540	
お取引後の残高(円)	おつり		
¥1,722,208	¥3		
振込金受取書	電話		
●●●銀行			
●●●支店			
普通 012345678			
カード 9999			
カード 9999			
電話番号 03-0123-4567			
取扱番号 0123456			



Bank passbook of Taro kenpo:
Living expenses for January, February, and March 2022

年月日	記号	お支払い金額(円)	お引き金額(円)	お引残高(円)	備
1 2022-01-05	100	*8,768		*1,450,768	
2 2022-01-18	100	*60,000	720	*1,390,768	
4 2022-01-27	100	*80,000		*1,249,208	
5 2022-02-01	100	*60,000	720	*1,189,208	
6 2022-02-19	900	*37,000		*1,152,208	
8 2022-03-05	100		200,000	*1,782,208	
9 2022-03-07	100	*60,000	720	*1,722,208	
10 2022-03-27	900		*740,000	*1,796,208	

※送金証明を提出する場合にあわせて提出してください。

(被扶養者調査用)					
送 金 申 告 書					
オンラインバス健康保険組合 理事長 殿					
被扶養者	保険証番号	被扶養者氏名	生年月日	昭和・平成	年 月 日 男・女 年齢 歳
自己都合で別居している下記の被扶養者の継続認定に当たり、送金に関して以下の通り、申告し、その申告内容を証明する書類を提出いたします。					
①調査対象者	被扶養者氏名	続柄	男・女	年齢	歳
②送金額	月額	円	年額	円	
〔 〕 前年以前から継続して送金している					
③送金状況	〔 〕 当年1月以降に送金開始	開始年月	令和 年 月		
	〔 〕 当年1月以降に送金変更	変更年月	令和 年 月		
④送金方法	〔 〕 銀行振込	〔 〕 現金書留	〔 〕 自動振替	※手渡しは不可	
【注】当健康保険組合は認定の原則として、上記の送金方法を立証条件としております。なお、送金証明書は「送金日、送金者、受取人、送金額」がわかるものを提出ください。					
送 金 に 関 する 金 書					
私は、健康保険被扶養者 継続認定に当たり、今後、上記の通り、定期的に送金することを誓約いたします。					
なお、万一私が定期的な送金を行わず、組合がその事実を確認した場合には、組合の権限で当該被扶養者の資格を喪失されても、異存はありません。					
また、送金額に変更が生じた場合には、その旨お届けし再認定の申請を行います。					
令和 年 月 日					
被扶養者氏名: _____ 印					

3 Income certificate (original) or tax (tax-exempt) certificate (original)

When FY2022 document (proof of income from January – December 2021)

Purpose To verify the amounts and types of income from January through December 2021

This must be submitted even for persons who earned no income as official documentation of that fact.

*Submission may not be omitted even for dependents under tax law, because the income certificate is used to verify the fact of no income. In addition, income must be verified using official documents.

Attachment of the employer's salary details indicating dependent information or the like is not allowed.

- Submit a document showing monetary amounts.
(Do not submit documents in which monetary amounts have been replaced with asterisks.)
- If the family member does not qualify as a tax dependent due to the insured's income status, obtain a certificate after filing a resident tax return with the municipal office.
- The title of the certificate may vary by municipality.
- See Q9 on p. 10 for a person who returned to Japan on or after January 2, 2022 and has been unemployed since then.

Where to obtain, issuer, etc.

Municipal office

You can obtain this document from the municipal office of the municipality where your certificate of residence was registered as of January 1, 2022.

If you have moved since, some municipal offices will provide this document by post.

[illegible]

4 Salary details (copy) for the most recent six months

*If the period of employment was less than six months, submit a certificate of (projected) salary and bonus payment (original) for the period from the start of employment through December 2022.

※If salary details are issued via the Web, submit a printout of the relevant pages.

When Continual for the most recent six months

(Issued during January – June)

Purpose To verify whether commuting costs and health insurance premiums are included

- Sections showing the month and year of payment, name, and employer name are also required.
(If handwritten, obtain the company seal or official seal of the employer.)
 - If you are unable to submit continual salary details for the most recent six months—for example, because they were lost or the subject did not work in some months during the period—ask the employer to issue a certificate of salary and bonus payment (original, showing “0 yen” for months in which no salary was paid).
 - Submit the most recent bonus certificate if any bonus was paid.
- ※Certificates of income and withholding tax are not acceptable.

Where to obtain, issuer, etc.

On hand, employer

給与明細書

2022 年00月度

社員コード:
所属:

社員名:

基本給	職務手当	皆勤手当	時間外手当	住宅手当	家族手当
住宅手当	家族手当	交通費			支給合計 123,450
所得税	市県民税	健康保険	厚生年金	雇用保険	
財形貯蓄		特別減税	年末調整	控除合計	差引支給額

If employed by more than one employer, this document is required for all employers.



(被扶養者調査用)			
<div style="border: 1px solid black; padding: 10px; margin: 0 auto; width: 80%;"> <p style="text-align: center; font-weight: bold; font-size: 1.2em;">給与・賞与支払(見込)証明書</p> <p style="text-align: center;">オリンピア健康保険組合理事長 殿</p> </div>			
姓 名 氏 名			男・女
生 年 月 日		昭和・平成： 年 月 日	続柄： 年齢： 歳
住 所			

NO	支払 年 月 日	支払金額 (還半当を含む総額)	NO	支払 年 月 日	支払金額 (還半当を含む総額)
1	R 年 月 分	円	7	R 年 月 分	円
2	R 年 月 分	円	8	R 年 月 分	円
3	R 年 月 分	円	9	R 年 月 分	円
4	R 年 月 分	円	10	R 年 月 分	円
5	R 年 月 分	円	11	R 年 月 分	円
6	R 年 月 分	円	12	R 年 月 分	円
残高引当	R 年 月 分	円	異年支払	R 年 月 分	円
合 計		円			

備 考	令和 年 月 日 ～ 令和 年 月 日 までは収入未結 令和 年 月 日 ～ 令和 年 月 日 までは収入見込 各勤務開始日・退職日：令和 年 月 日 ～ 令和 年 月 日 ※休業開始日：令和 年 月 日 (休業した場合は記載)
-----	---

上記の通り証明いたします。

令和 年 月 日

住 所 _____

会 社 名 _____

代 表 者 名 _____ 印 _____

5 Most recent notice of pension remittance (copy) or pension amendment notice (copy)

When Most recent notice issued for FY2022

Purpose To verify the most recent pension payment amounts (prior to withholding of tax, long-term care insurance premiums, etc.) and pension type(s)

- Sections showing the month and year of issue and the beneficiary name are also required.
- Must show the amount of pension payment prior to withholding of tax, long-term care insurance premiums, etc.
- If this document has been lost, ask the issuer to issue a new one.

※Certificates of income and withholding tax are not acceptable.

Where to obtain, issuer, etc.

On hand, Japan Pension Service, etc.

※Shows information for two months.

Required for all pension income received, including old-age (employees'), corporate, disability, and survivor's pension income.



6 Final income tax return (copy) and income statement (blue return statement) (copy) with indication of receipt by tax office

When For 2021

Purpose To verify income amounts and type of business
Also used to verify whether any direct expenses needed were incurred, as authorized by the Health Insurance Society

Where to obtain, issuer, etc.

On hand, tax office

- Used to verify the amount of total income minus direct expenses needed authorized by the Health Insurance Society
- For those who did not file an income tax return, a document showing the breakdown of income and expenses (such as a payment record) is required.
- Submit a notice of business cessation (copy) with indication of receipt if the business was terminated in 2021 or later.

Submit the set of submitted documents when filing a final income tax return.



7 Certificate of school attendance (original)

When Issued within the past three months

Purpose To verify the child's student status
Verification of dependency through proof of remittance is not required if the child lives apart to attend school.

Not acceptable
● Student ID (copy)

Where to obtain, issuer, etc.

On hand, school attended

- Must show name, date of issue, period of validity, etc.
- "Student" refers to a person attending a full-time school or preparatory school.

8 Any of the following showing the employment departure date: certificate of income and withholding tax (copy), separation slip 2 (copy), certificate of eligibility for employment insurance benefits (copy), retirement certificate (original), etc.

Certificate of eligibility for employment insurance benefits (copy) if receiving unemployment benefits under employment insurance after leaving employment.

When Document for January 2021 or later

Purpose To verify that the salary income shown on the income certificate or tax (tax-exempt) certificate under 3 does not continue because the subject has left employment

● Must show the employment departure date.

Where to obtain, issuer, etc.

Former employer

9 Documentation of spouse's income for dependents for whom both spouses provide

※See p. 2 regarding dependents for whom both spouses provide.

When FY2022 document (proof of income from January – December 2021)

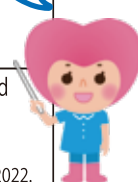
Purpose To verify the amount and type of spouse's income
This must be submitted even for persons who earned no income as proof thereof.

Where to obtain, issuer, etc.

Municipal office, employer,
Japan Pension Service,
tax office, etc.

Spouse's status	Documentation
1 Earned income since last year and continues to earn income. ※Including those whose income originally was less than that of the insured and has decreased or been eliminated due to maternity leave or childcare leave	All of the following documents that apply: Salary income: 2021 certificate of income and withholding tax (copy) Pension benefits received: most recent pension amendment notice (copy) or notice of pension remittance (copy) Income other than salary or pension: 2021 final income tax return (copy) and income statement (blue return statement) (copy) with indication of receipt by tax office
2 No income	FY2022 income certificate (original) or tax (tax-exempt) certificate (original)(showing income of "0 yen") ※If an income amount is shown, submit the document under 3.
3 No income after leaving employment during the previous year	Retirement certificate (original) or certificate of income and withholding tax (copy) indicating the employment departure date
4 Changed to current employment during the previous year	Certificate of (projected) salary and bonus payment (original) for the period of one year from the change in employment ※Certifying actual amounts paid for periods already paid
5 Income reduced due to maternity leave (if income before maternity leave was higher than that of the insured)	Certificate of (projected) salary and bonus payment (original) for the period of one year from the start of the leave ※Certifying actual amounts paid for periods already paid
6 Income reduced due to childcare leave (if income before childcare leave was higher than that of the insured)	Certificate of (projected) salary and bonus payment (original) for the most recent one-year period ※Certifying actual and projected amounts of annual income for the period of one year from the start of childcare leave if the spouse has not yet been on leave for one full year as of July 2022 ※If the spouse earned no income during the entire previous year and continues to earn no income to date, last year's certificate of income and withholding tax may be submitted instead.
7 Returned to work during the previous year and remains employed in the current year	Certificate of (projected) salary and bonus payment (original) for the most recent one-year period ※Certifying actual and projected amounts of annual income for the period of one year from return to work if the spouse has returned to work for less than one full year as of July 2022 ※Submit the document under 5 if the spouse returned to work but was taking maternity leave again as of July 2022. ※Submit the document under 6 if the spouse returned to work but was taking childcare leave again as of July 2022.
8 Member of the Olympus Health Insurance Society (insured person or dependent)	No documents need to be submitted. (Enter the spouse's code/number and name (in kana) in space (B) on the Survey Form for dependents for whom both spouses provide.)

If both spouses work, children are the dependents of the spouse with the higher income. This is why documentation of your spouse's income is required.



※Contact the Society if none of the above cases apply.

10 Documentation of the priority support obligor's income

When FY2022 document (proof of income from January – December 2021)

Purpose To verify the amount and type of income in January – December 2021
This must be submitted even for persons who earned no income as proof thereof.

Status of priority support obligor	Documentation
1 Unemployed	FY2022 income certificate (original) or tax (tax-exempt) certificate ※If unemployed as of July 2022 after leaving employment in January 2021 or later, documentation of the employment departure date
2 Earns salary income.	2021 certificate of income and withholding tax (copy) ※If employment began in January 2022 or later, certificate of income for the period of one year since the start of employment (certifying projected amounts for months not yet worked)
3 Earns pension income.	Most recent pension amendment notice (copy) or notice of pension remittance (copy) ※If unemployed, also submit the document under 1.
4 Earns income other than salary or pension (such as self-employed).	2021 final income tax return (copy) and income statement (blue return statement) (copy) ※With indication of receipt by tax office

※Submit all documents that apply.

6. Frequently Asked Questions and Answers (FAQ)

Carefully read the information on pp. 5-8 on the documents to submit.



Purpose of the survey

Q.1 Why is this survey being done?

A.1 Article 50 of the Ordinance for Enforcement of the Health Insurance Act requires insurers to confirm that their dependent family members still satisfy certification criteria to rectify imbalances among members. The Ministry of Health, Labour and Welfare has instructed health insurance societies to perform these surveys annually. Members are responsible for paying the cost of obtaining documentation and related transportation costs.

[Article 50 of the Ordinance for Enforcement of the Health Insurance Act]

● Insurers may verify or renew health insurance cards or confirm dependents by establishing a deadline for such processes each year.

[Ministry of Health, Labour and Welfare notifications]

● Health Insurance Bureau Director-General's notification (no. 1029004): Verification of health insurance cards shall take place annually for the purpose of normalizing insurance benefits.

● Health Insurance Bureau Employees' Health Insurance Division Director's notification (no. 1029005): When verifying or renewing health insurance cards, reconfirm the validity of certification of dependents.

Subjects of the survey

Q.2 I received a Survey Form even though I completed the procedures for removing the person subject to the survey from my list of dependents. What should I do?

A.2 Please submit the Survey Form.

In some cases, since the Survey Form is prepared in advance, it may be sent to those who have already completed procedures for removing dependents. In such cases, please indicate "Dependent removal procedures complete" in the remarks field for the dependent in question on the Survey Form and submit it.

※Did you think that you had completed the procedures by simply notifying your employer?

Personnel information communicated to the employer is not automatically reflected in health insurance.

Separate procedures are required to remove a dependent. See p. 11 for more information.

Q.3 I (the insured) will retire on July 31, 2022. Do I still need to submit the Survey Form?

A.3 Yes. Please submit the Survey Form.

Indicate "July 31, 2022" in the remarks field on the Survey Form and submit it. You do not need to attach other documents.

However, if you will be re-employed or transferred to another company within the Olympus Group on or after August 1, 2022, please submit the required documents as well.

Q.4 Is a dependent who resides overseas subject to the survey?

A.4 Yes. The survey covers even dependents who reside overseas.

Please fill out the Survey Form and submit the documents as attachments.

If the dependent does not have an address in Japan, submit a record of deletion of certificate of residence.

※Separate procedures are required for those with no addresses in Japan. You will be notified of these at a later date.

Submission

Q.5 I will not be able to obtain some of the documents by the deadline for submission. May I submit them after the deadline?

A.5 Please first submit the documents that you can submit by the deadline.

Enter the titles and planned dates of submission for the delayed documents in the remarks field or the margins on the Survey Form.

You must bear the cost of envelopes, postage, etc. when sending documents separately.

Dependents for whom both spouses provide

Q.6 Why do you need to verify my spouse's income even though my spouse is not a dependent?

A.6 When both spouses earn income, the children are the dependents of the spouse with the higher income.

For this reason, if a child is a dependent of the insured but the spouse is not a dependent, income documentation is required to determine whether the child should be the dependent of the insured.



Q.7 Do I need to submit an income certificate or tax (tax-exempt) certificate even though I've earned no income since before December 31, 2020?

A.7 Yes, official documents need to be submitted to verify income even if no income was earned.

To verify that the dependent earned no income, submit an income certificate (original) or tax (tax-exempt) certificate (original) for FY2022 (covering income during January – December 2021) obtained from the local municipal office.

The titles of these documents may vary by municipality. In some cases, it may be possible to issue only a tax-exempt certificate for a person with no income. In such a case, submit the tax-exempt certificate.

Q.8 Is temporary income, such as retirement benefits, life insurance money, or income from sale of stock, real estate, etc. counted when calculating income?

A.8 No, such temporary income is not counted when calculating income. Income includes the following:

1. Income from employment (including payment in kind and nontaxable wages, such as commuting costs)
2. Business income (e.g., from agriculture, commerce, fishing, forestry, manuscript fees, or piecework)
3. Employees' pension, national pension, mutual aid pension, survivor's pension, disability pension, workers' accident compensation insurance benefits, public employees' pension, or other pension income
4. (Continual) investment income, interest income, and income from leasing and sale of real estate
5. Unemployment benefits, injury and illness allowance, maternity allowance, childcare leave benefits, livelihood assistance (Public Assistance Act)
6. Other amounts recognized as income

※ Income for purposes of health insurance differs from income under tax law.



Q.9 I am unable to obtain an income certificate or tax (tax-exempt) certificate for a dependent who returned to Japan and obtained a certificate of residence this year. What should I do?

A.9 You do not need to submit an income certificate in such a case.

If you are unable to obtain an income certificate because the dependent has returned to Japan this year, enter "Resided overseas from ____/____/____ (Y/M/D) to ____/____/____ (Y/M/D)" in the remarks field or the margins.

Q.10 I am unable to have salary details issued for months in which no salary was paid. What should I do?

A.10 Obtain from the employer a certificate of salary payment or certificate showing that no salary was paid in months not worked.

When submitting a certificate of salary payment, ask for the certificate to be prepared certifying "0 yen" for months in which no salary was paid.

Q.11 Since the insured's place of employment has changed to a location somewhat distant from home, the insured has moved to a nearby residence and lives separate from dependent family members as a result. The Company does not recognize this as a case of living apart for reasons related to the insured's employer. Does the insured need to remit allowances to dependent family members?

A.11 Yes, please remit allowances to dependent family members.

If the insured lives apart for reasons unrelated to his or her employer—for example, more convenient commuting—periodic remittances to dependent family members are required. This is considered a case of living apart for personal reasons.

Q.12 A family member who is a medical professional and currently involved in COVID-19 vaccination work expects to earn annual income exceeding 1.3 million yen due to a temporary increase in income during the subject period. Do I need to remove this family member from my dependents?

A.12 No. You do not need to remove the family member from your list of dependents due to a temporary increase in income which is expected to exceed the standard due to COVID-19 vaccination work.

Income earned by medical professionals involved in COVID-19 vaccination work is not included in dependent income for health insurance purposes. For this reason, as long as the family member's income from sources other than COVID-19 vaccination is less than 1.3 million yen, he or she may remain a dependent. In this case, submit an application form in addition to documentation certifying income. Use the form available for download from the Health Insurance Society website. (Ask the dependent's employer to fill out the spaces on the form to be completed by the employer.) Eligible persons are those employed as qualified medical personnel in direct vaccination, pre-examination (including pre-examination support), preparation of vaccines, post-vaccination monitoring of conditions, etc. at vaccination centers and medical care institutions.

Eligible medical professionals:

Physicians, dentists, pharmacists, public health nurses, midwives, nurses, assistant nurses, radiologists, clinical laboratory technicians, clinical engineers, emergency life-saving technicians

7. Dependent Removal Procedures

Dependents must depend for their livelihood on the income of the insured person. If a dependent no longer meets the criteria for dependent eligibility due to a major changes in his or her everyday livelihood—for example, gaining economic independence—promptly complete procedures for removal of the dependent. (These procedures are required by Article 38 of the Ordinance for Enforcement of the Health Insurance Act.)

Dependent removal procedures are required in the following cases. After submitting the Survey Form and the required documents, submit a Notification of Health Insurance Dependent (Change) and the health insurance card of the subject dependent to your establishment (the company with which you are affiliated).

※Please do not submit these directly to the Health Insurance Society.

Cases in which procedures are necessary

- A dependent has begun employment and joined the employer's health insurance program.
- A dependent's income is projected to exceed the income standard.
- A dependent receives unemployment benefits, injury and illness allowance, or maternity allowance (3,612 yen [5,000 yen for those aged 60 or older or with a certain degree of disability] or more per day).
- A dependent no longer depends on the income of the insured for his or her livelihood or has become a dependent of another family member.
- The spouse's income exceeds that of the insured (change in which spouse provides for dependent children)
- Divorce
- Death, etc.

Where to submit

Code	Establishment (company with which you are affiliated)	Submit to	
11	Olympus Corporation Tokyo, Hachioji, etc. * Those employed at sites other than Nagano and Shirakawa	Shinjuku Monolith	Olympus Corporation HR HRIS and Operations Operation Mgmt JPN U2
	Olympus Corporation Nagano	Tatsuno	Olympus Corporation HR HRIS and Operations Nagano Site Operation and Mgmt JPN U1
	Olympus Corporation Shirakawa	Shirakawa	Shirakawa Olympus Co., Ltd. HR Team, HR Group, General Affairs Division
26	Aomori Olympus Co., Ltd.	Kuroishi	Aomori Olympus Co., Ltd. HR Team, General Affairs Group, General Affairs Dept.
27	Aizu Olympus Co., Ltd.	Aizu	Aizu Olympus Co., Ltd. HR Team, HR Group
31	TmediX Corporation	San'ei	TmediX Corporation HR/General Affairs Group, Administration Division
35	TASAKA Memorial Clinic	—	TASAKA Memorial Clinic Head of Administration
38	Olympus Digital System Design Corp.	Tachikawa	Olympus Digital System Design Corp. Corporate Planning Department
40	Olympus Terumo Biomaterials Corp.	Sasazuka	Olympus Terumo Biomaterials Corp. Human Resources & General Affairs Group, Human Resources & General Affairs Department
42	Nagano Olympus Co., Ltd.	Tatsuno	Nagano Olympus Co., Ltd. Corporate Planning, Business Management Department
44	Shirakawa Olympus Co., Ltd.	Shirakawa	Shirakawa Olympus Co., Ltd. HR Team, HR Group, General Affairs Division
54	Olympus Marketing Corporation	Shinjuku Monolith	Olympus Marketing Corporation Corporate Planning, Human Resources, Employee Relations, Japan
62	Olympus-Supportmate Corp.	Ishikawa	Olympus-Supportmate Corp. Administration Group
70	Evident Corporation	Shinjuku Monolith	Evident Corporation HR Services
71	Evident Nagano Corporation	Tatsuno	Evident Nagano Corporation HR Team, Plan Promotion, Business Management Department

The Notification of Health Insurance Dependent (Change) is available for download from the Health Insurance Society website.

<https://www.olympus-kenpo.or.jp/casestudy/case002-2.html>

