

**2024 CMAAO General Assembly, Manila
24-26 August 2024, Hilton Manila, Philippine**

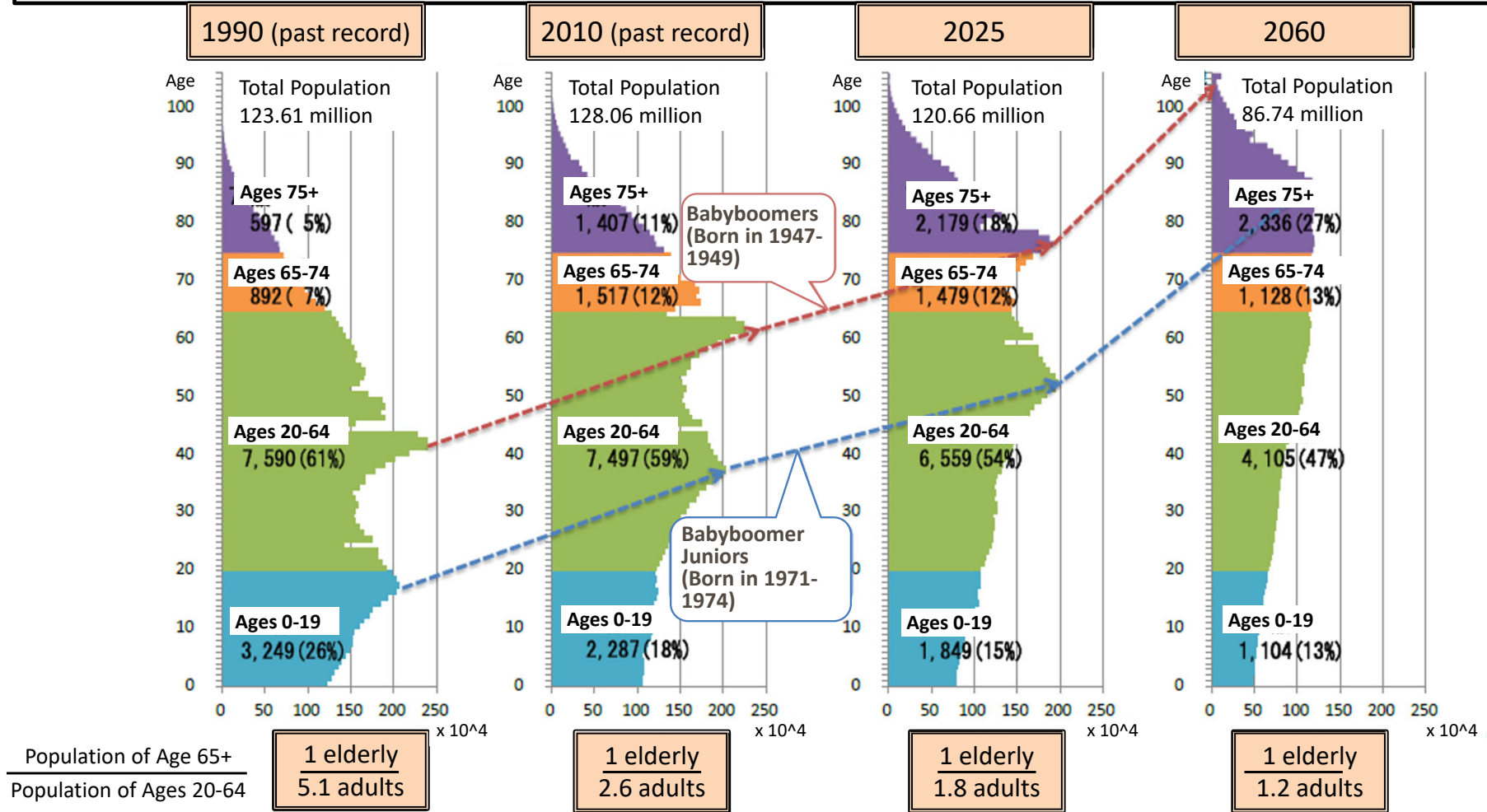


Country Report

Japan Medical Association

Changes in the Population Pyramid (1990-2060)

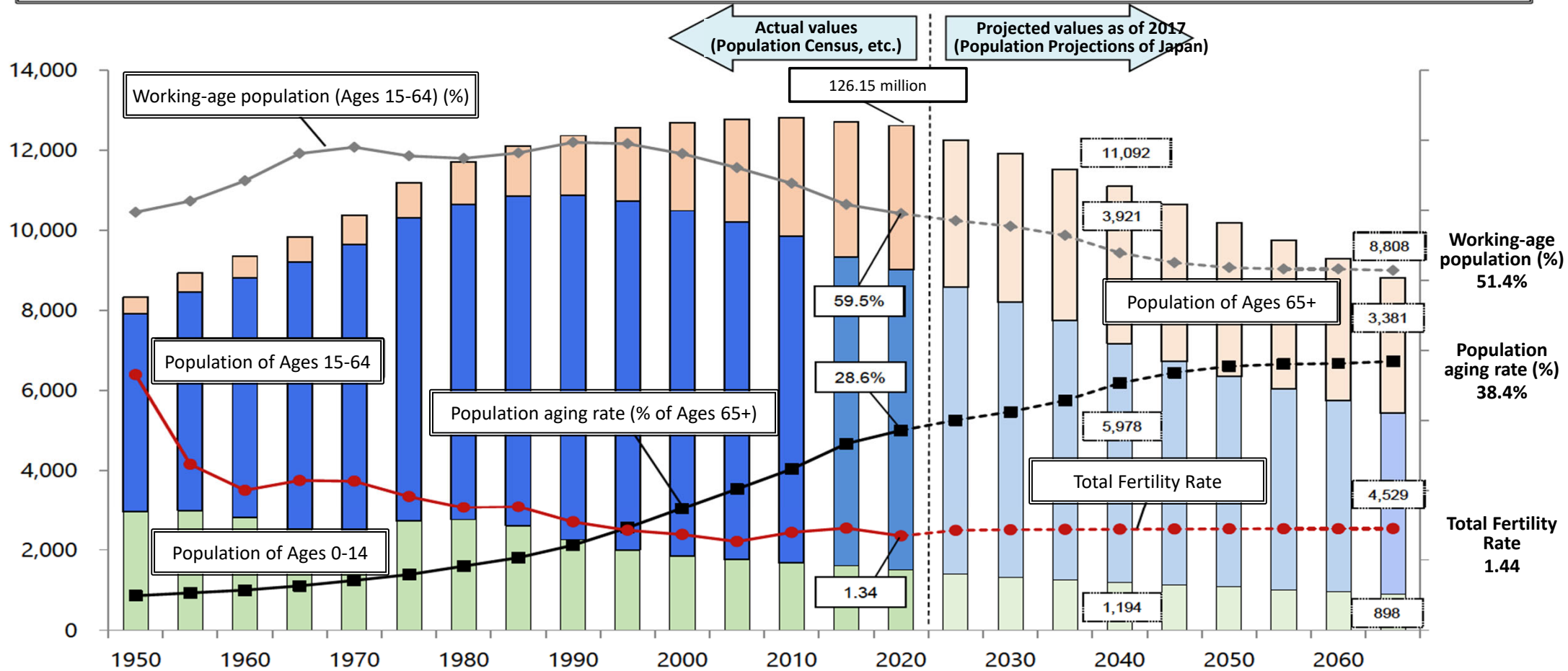
o The population structure of Japan shows that currently 1.8 adults are supporting 1 elderly person. However, with the further decreasing birthrate and advancing population aging, 1.2 adults will be supporting 1 elderly person in 2060.



(Source) *Population Census and Population Estimates* by Ministry of Internal Affairs and Communications (MIC). *Population Projections of Japan (09/01/2017 Estimates): Estimates using moderate birth and moderate death settings* by National Institute of Population and Social Security Research (IPSS) (as of October 1 of each year).

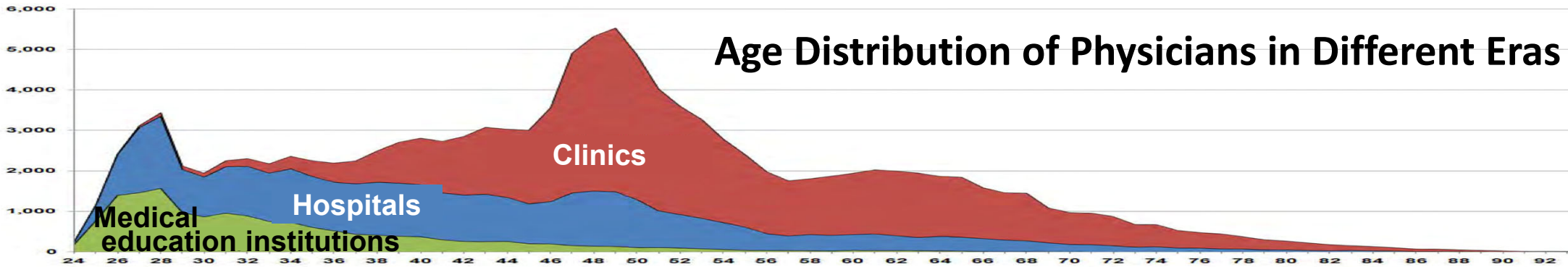
Population Trends in Japan

○ The population of Japan has been in a declining phase in recent years. In 2065, the total population will fall below 90 million and the aging rate will be at 38% level.

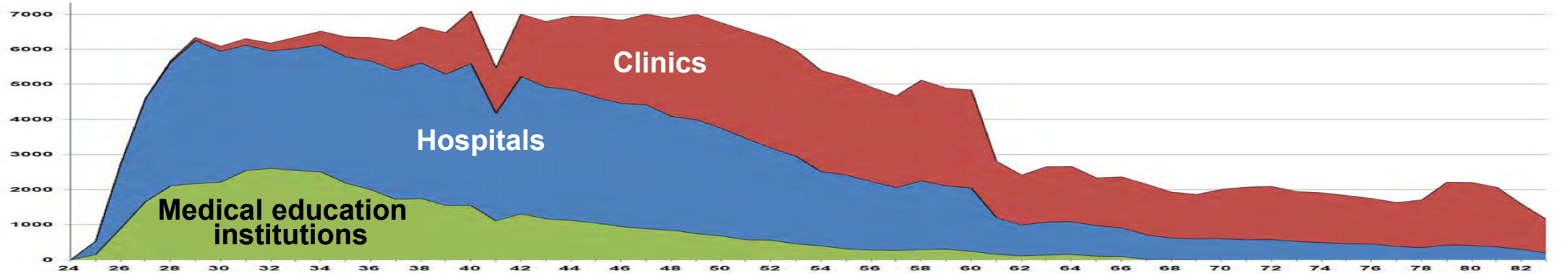


Source: For up to 2020, *Population Estimates* by MIC (as of October 1 of each year), etc. For total fertility rate, *Population Dynamics Estimates* by Ministry of Health, Labour and Welfare (MHLW). For 2025 and after, *Population Projections of Japan (2017 Estimates)*: Estimates using moderate birth and moderate death settings by IPSS.

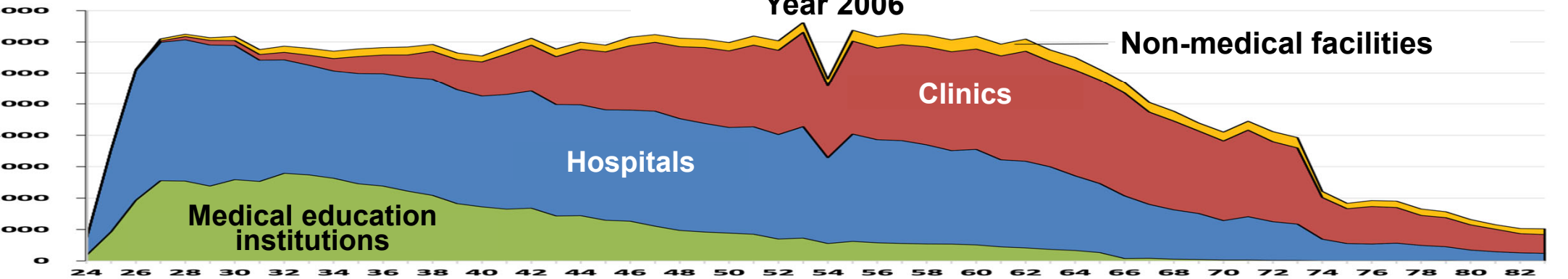
Age Distribution of Physicians in Different Eras



Year 1975



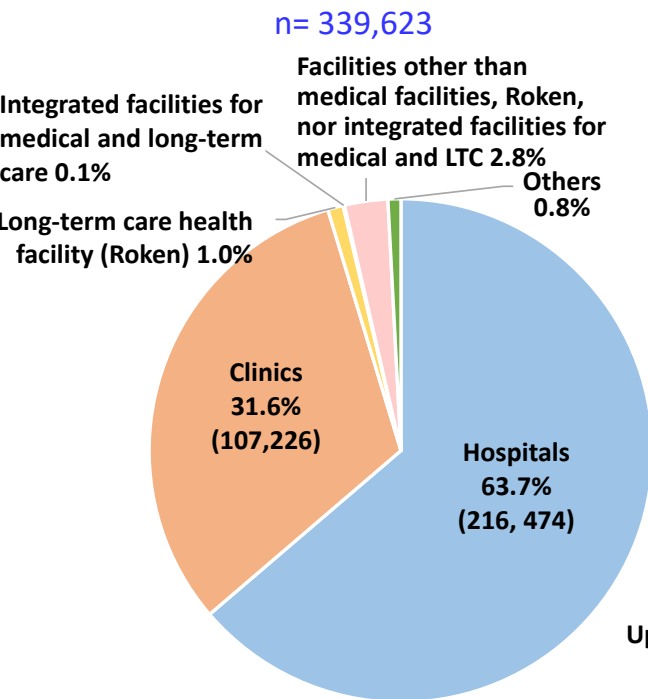
Year 2006



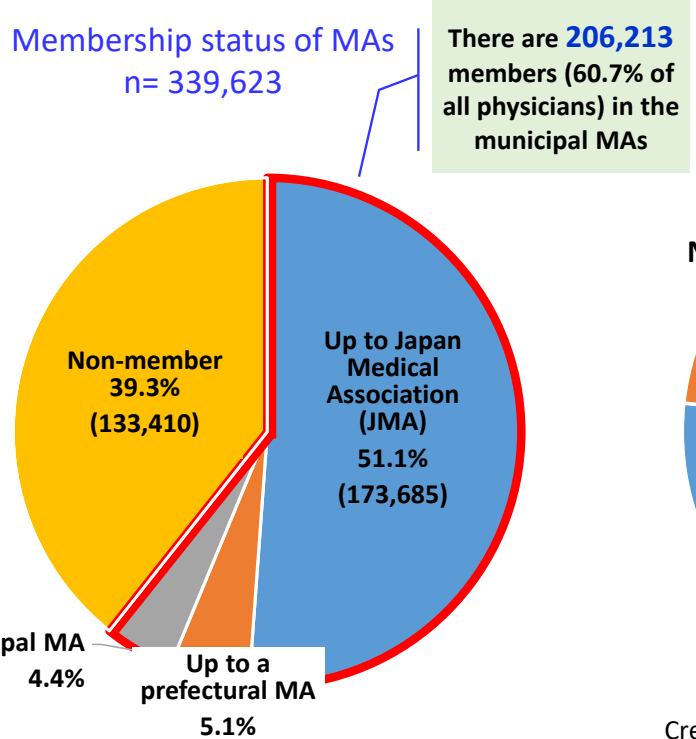
Year 2020

Membership Status of Medical Associations (MAs)

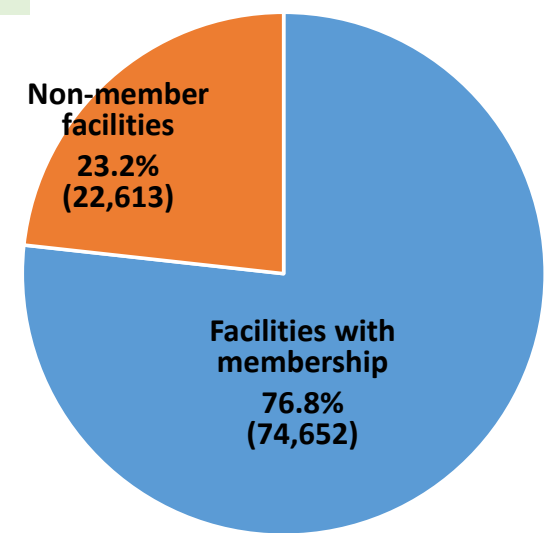
Number of physicians by type of facility/practice



Membership status of MAs
n = 339,623



JMA membership status as insurance-covered medical facilities
n = 97,265



80% of medical facilities are private !

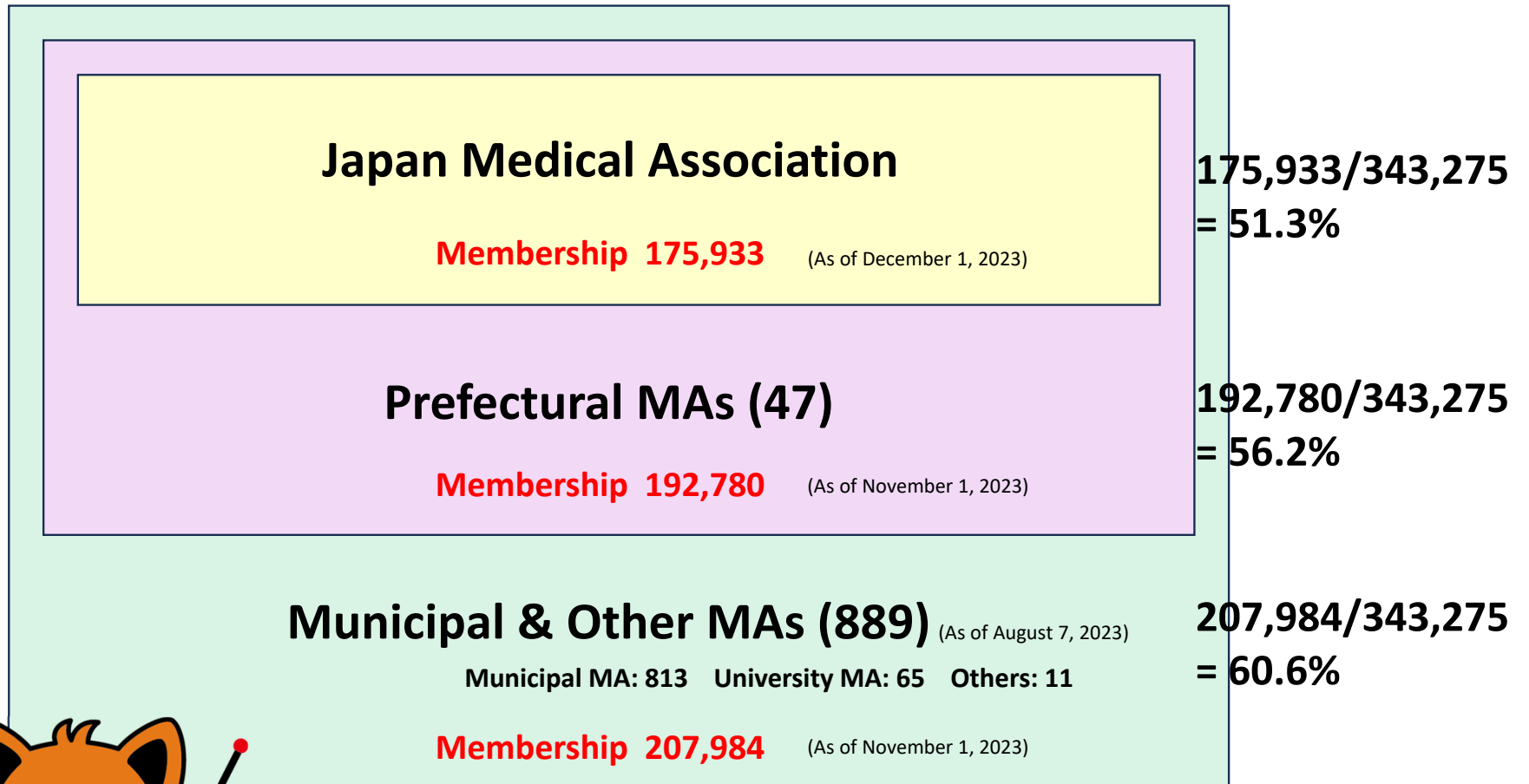
Created based on the results of the JMA FY2020 survey on the number of hospital physician members and the establishment status of hospital physician committees.

*60.7% of physicians are members of municipal MAs.

Created based on the data from the JMA membership information (as of the end of December 2022) and the list of medical institutions and pharmacies covered by health insurance (as of the beginning of January 2023), which were verified by JMA Membership Information Office.

Note: The membership count is based on the matching of the medical institution names in the JMA membership information and the MHLW data. Only the medical institutions with confirmed membership are counted as "members."

Three-tiered Structure of the Medical Association Organization



- Each MA tier operates independently.
- The current bylaw requires a Municipal MA membership to join a Prefectural MA and a Prefectural MA membership to join the JMA.

The Role of Medical Associations

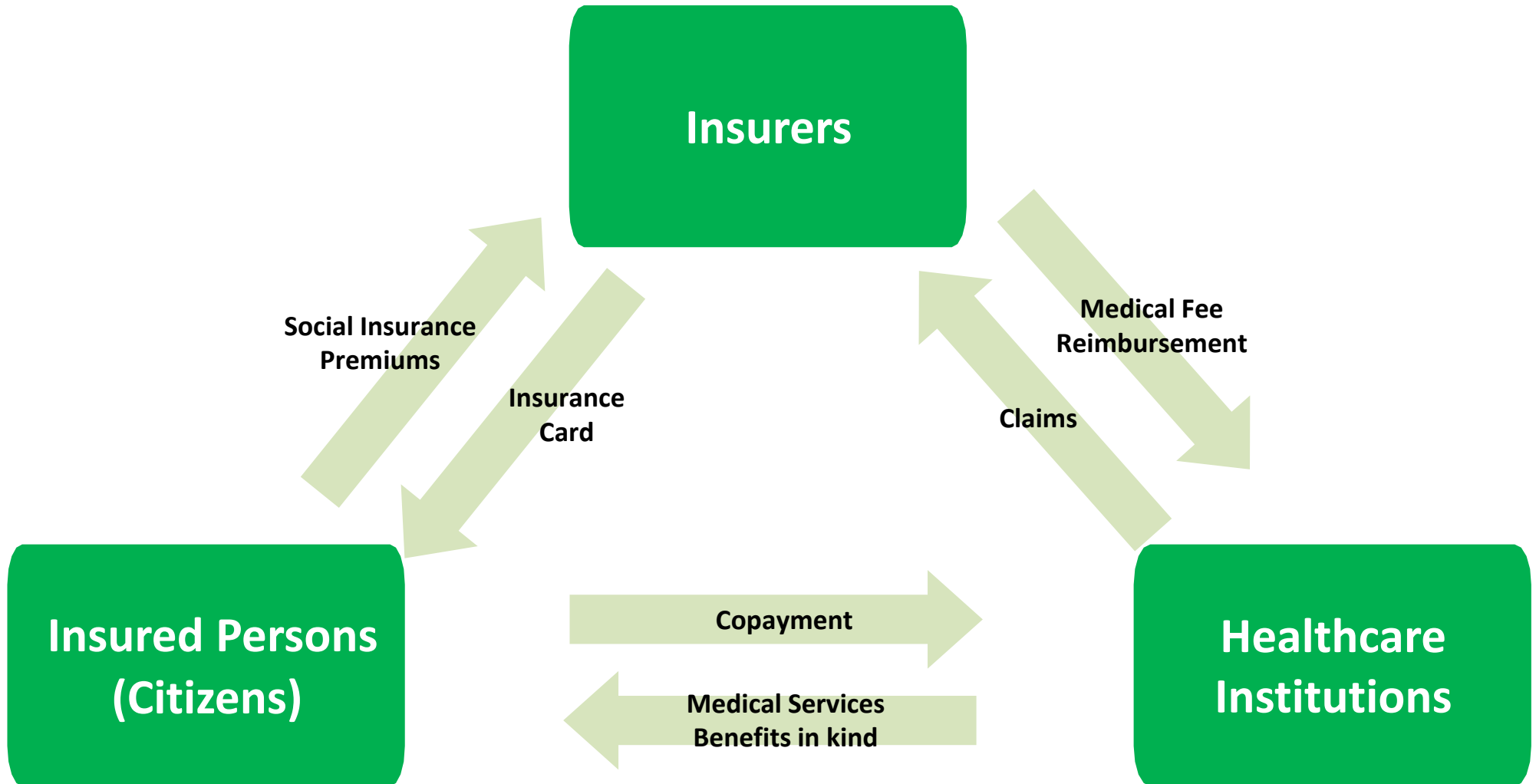
- Protect the lives and health of the people!
- Protect the medical activities of physicians!

For these purposes, the JMA will work to influence the government to reflect the opinions of medical professionals in national policies.



New JMA Official Image Character
Nichii-kun

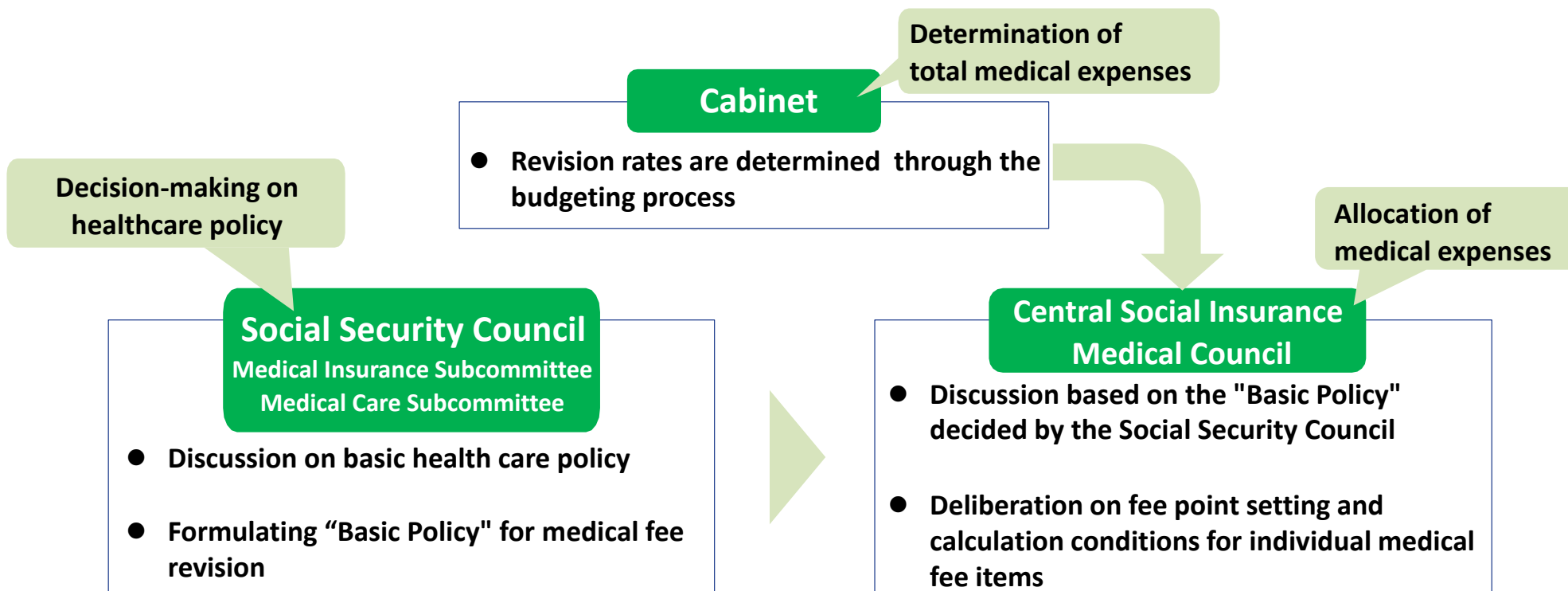
Social Insurance Structure in JAPAN



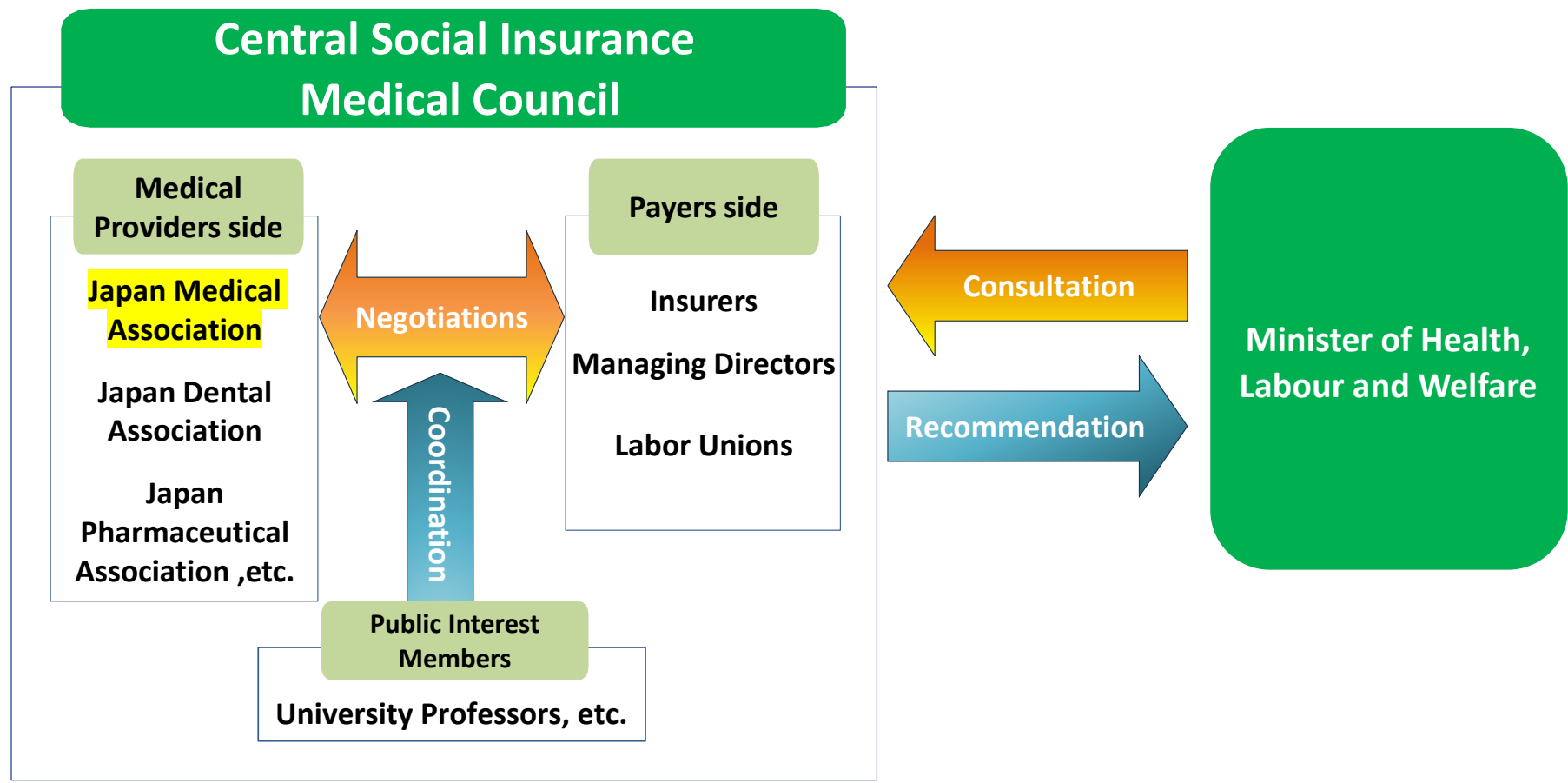
Flow of Revision of Medical Fee

The revision of medical fees is,

1. based on the revision rate decided by the Cabinet through the budgeting process,
2. based on the "Basic Policy" formulated by the Social Security Council's Health Insurance Subcommittee and Medical Subcommittee,
3. implemented by the Central Social Insurance Medical Council, which deliberates on the setting of specific medical treatment fee points, etc.

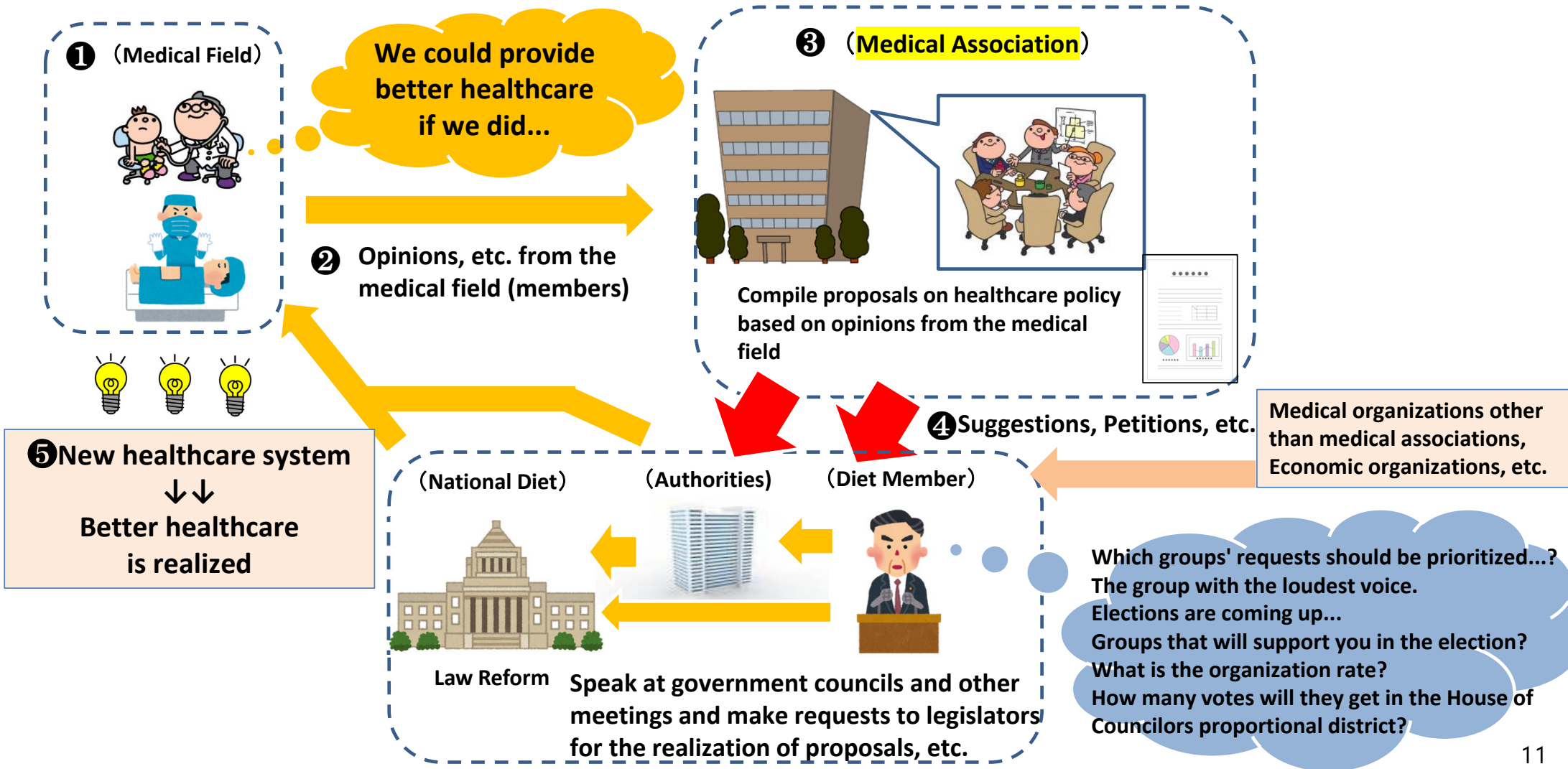


Flow of Revision of Medical Fee



Why is it necessary to strengthen organizational capacity?

→ How the health policy will be implemented?





Nichii-kun

地域医療 Community Medicine



Elderly facility

Community Center

University Hospital

Hospital

Training School for Registered/Asistant Nurses

LIFE SHIFT

Community-based Comprehensive Support Center

Local Collaboration

Holiday and Night-time Medical Service

MA

Medical Association

School

Prefectural & municipal government

Collaboration with Governments

In the event of a disaster, we form the JMA Team (JMAT) with the cooperation of medical professionals and dispatch many medical teams to disaster areas.

In COVID-19, we worked to secure community medicine by expanding a testing system, providing outpatient care for fevers, and establishing a vaccination system.

COVID-19 Vaccine

Community-based Medical Association Activities

1. After-hours/emergency services in the community

2. Public welfare activities of governments and MAs

3. Community health & public health activities

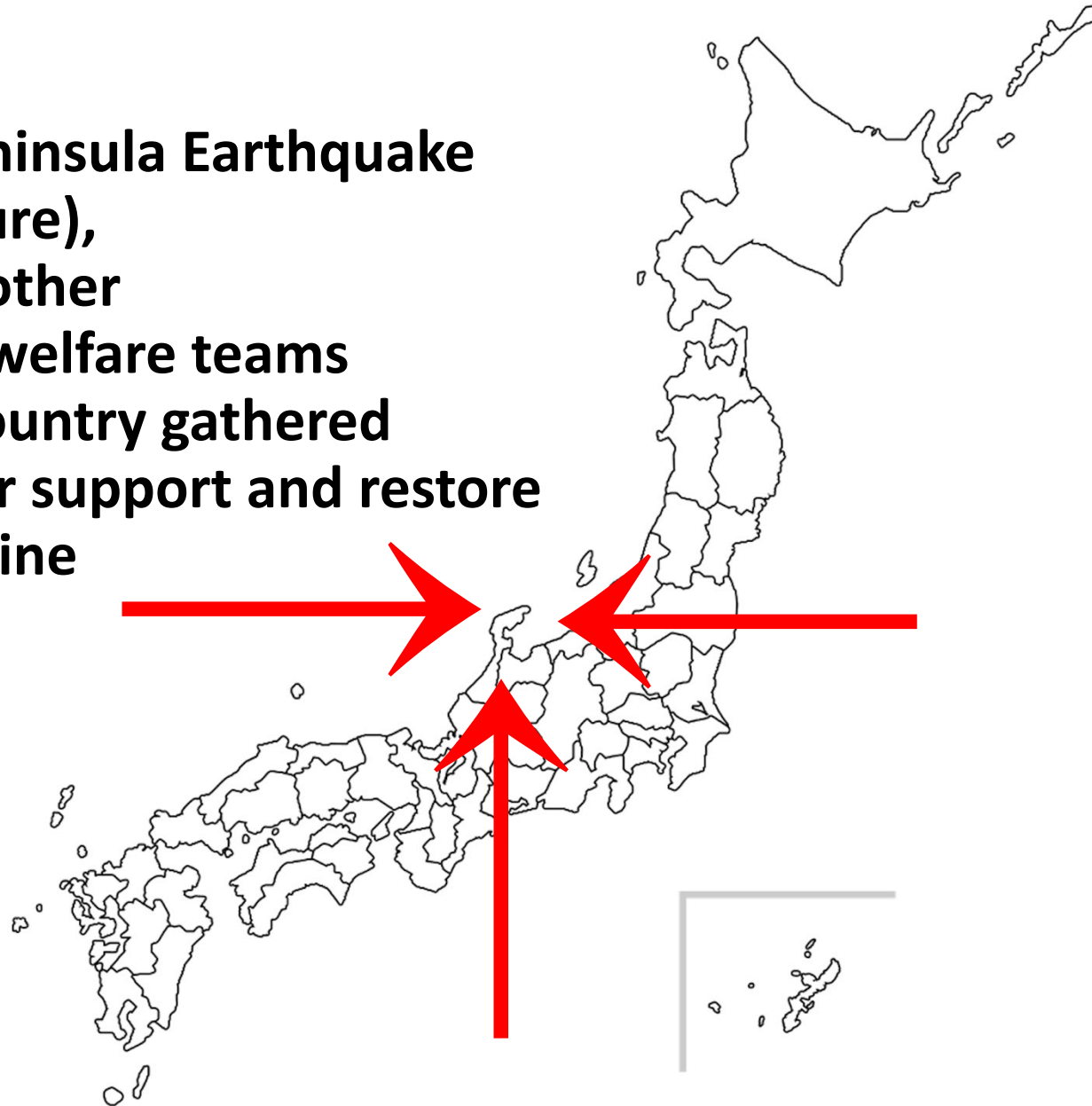
4. Multidisciplinary collaboration

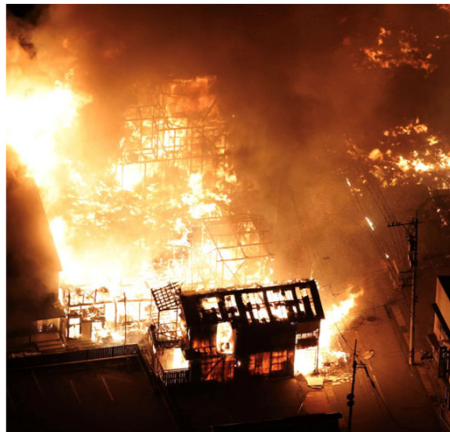
5. Other efforts



Representing physicians in practice, each MA cooperates and negotiates with the corresponding government.

**In response to
the 2024 Noto Peninsula Earthquake
(Ishikawa Prefecture),
DMAT, JMAT and other
medical/nursing/welfare teams
from across the country gathered
to provide disaster support and restore
community medicine**





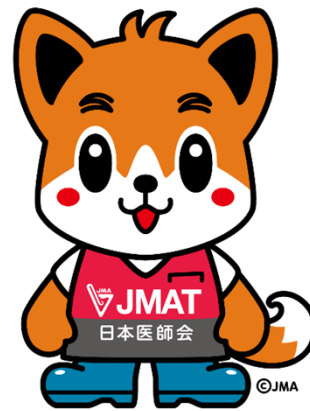
DMAT

Disaster Medical Assistant Team

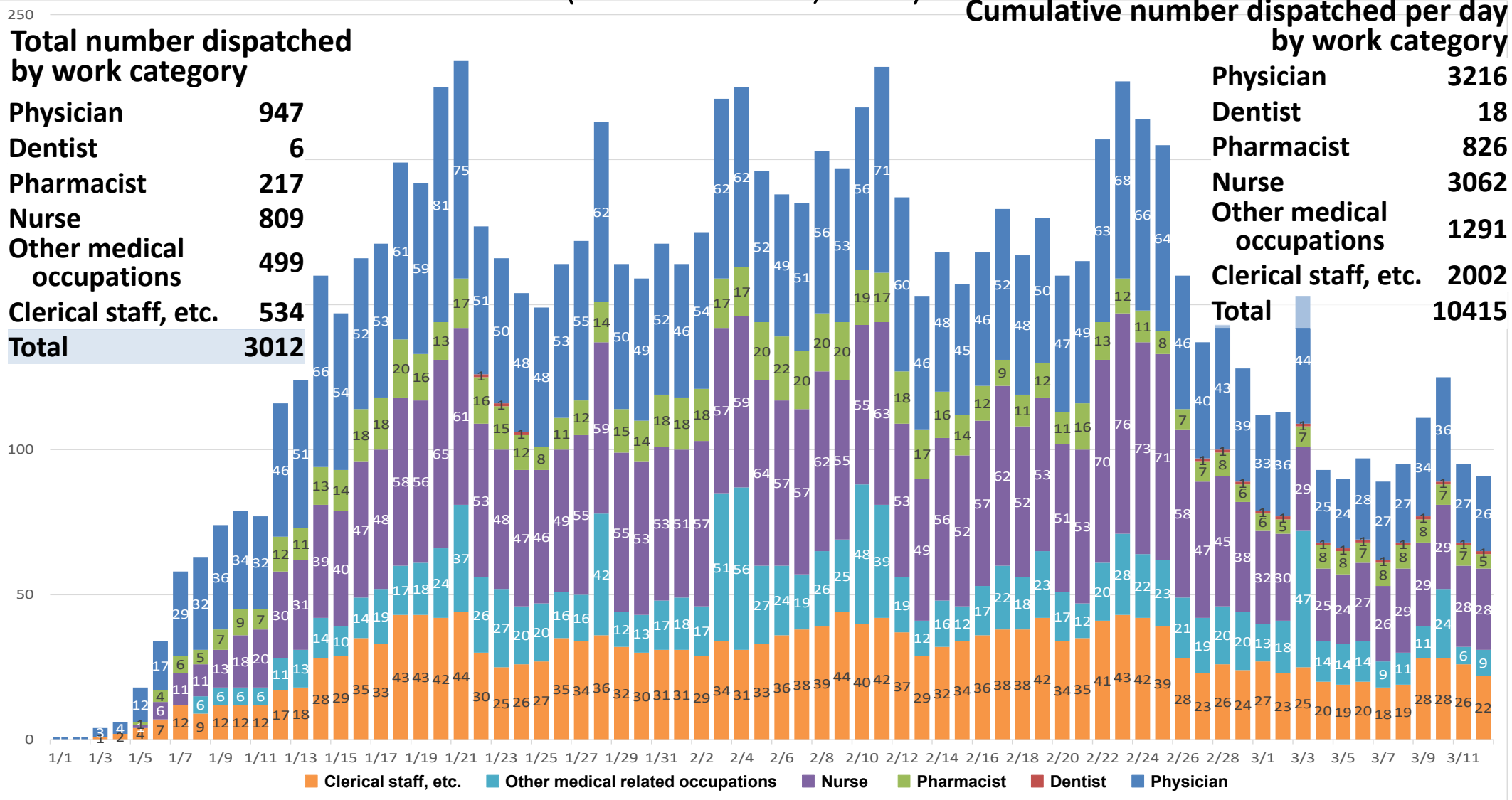
JMAT

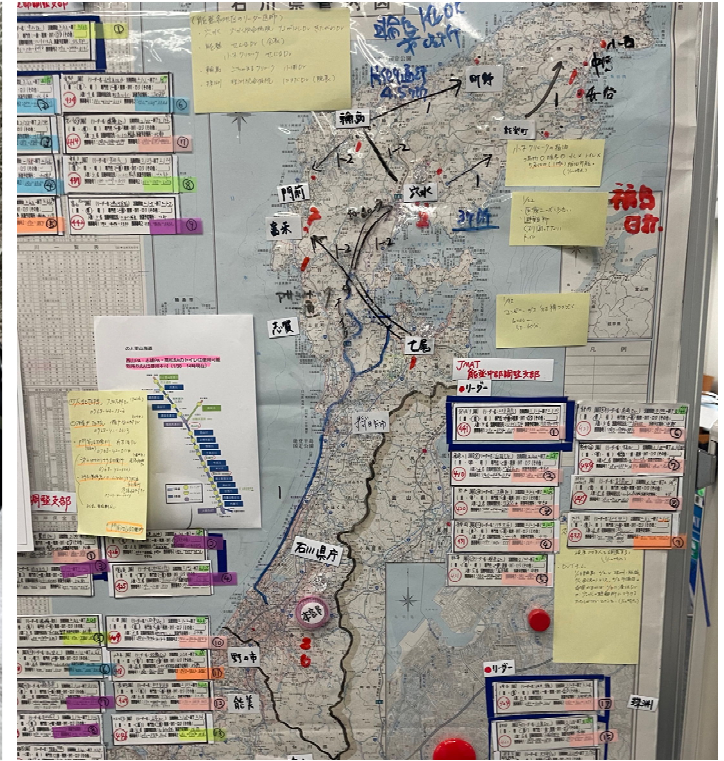
Japan Medical Association Team

- Each team consists of 1 physician, 2 nursing staff, and 1 clerical staff
- Dispatched to disaster areas to provide medical care and health management at first-aid stations, shelters, etc. in the event of a disaster



Number of JMAT Teams Dispatched to the 2024 Noto Peninsula Earthquake (As of March 12, 2024)





Medical Support for the 2024 Noto Peninsula Earthquake



JMA

Thank you for your attention !