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Study Report









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Occupational Risks Insurance in Japan

Organization and 2000-2010 Statistical Data



Foreword

This document presents a descriptive overview of the occupational risks insurance of Japan. It deals with its operating modes and a statistical chapter details the accidents at work and occupational diseases data.

The statistical chapter comes from the use by EUROGIP of the Japan Industrial Safety and Health Association, JISHA and it is presented according to the EUROGIP's knowledge of the Japanese insurance system. These data have not been reprocessed by EUROGIP. For any confirmation, one has to refer to the source which is systematically given.

Financial data given in Euro are calculated with an exchange rate of (22/09/2011) 1 € for 104 Yens (JPY).

Acknowledgements

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Bibliographic sources

The Japanese Social Security system (in French) - Le régime japonais de sécurité sociale http://www.cleiss.fr/docs/regimes/regime_japon.html

Centre des Liaisons Européennes et Internationales de Sécurité Sociale - CLEISS

Japan

http://www.ssa.gov/policy/docs/progdesc/ssptw/2010-2011/asia/japan.pdf Social Security Programs Throughout the World – Social Security Online

Presentation of the Ministry of Health, Labour and Welfare, MHLW http://www.mhlw.go.jp/english/org/pamphlet/dl/pamphlet-about_mhlw.pdf Web site section in English of the MHLW

1. Main characteristics of the Japanese occupational risks insurance system

The first laws about the occupational risks insurance date from 1905 for the mines and from 1911 for the industry. They specified for the employers an obligation of care towards their workers. These laws were combined with the new 1947 Labour Standards Law1 which has been since modified several times. This act sets the minimum working conditions standards. In addition, and still in 1947, another law was passed the Workmen's Accident Compensation Insurance Law² and its implementation decrees which created the occupational risks insurance called "Rôsai Hoken" and set its implementation procedures. This insurance covers most of the companies and workers.

The "Rôsai Hoken" occupational risks insurance is a public insurance. It is compulsory, for every workers whatever his/her nationality, as soon as the company is employing at least one worker, whatever the length of employment, the nature of the contractual relationship, whether the employment is full time or not. In the agricultural, forestry and fishing sectors, companies with less than five employees may insure themselves on a voluntary basis. Local and national administrations' employees, sailors and civil servants have their own insurance systems.

In addition, companies may implement collective agreements offering their employees' benefits going further than the minima set by the public insurance.

The Ministry of Health, Labour and Welfare³ monitors and manages the occupational risks insurance. In order to manage the occupational health and safety, the Ministry has a Labour Standards Bureau,

an Industrial Safety and Health Department and a Worker's Compensation Department.

The Worker's Compensation Department manages the workers' compensation through a network of 321 Labour Standards Bureau's prefectural agencies and of Labour Standards Inspection Offices' local agencies. The Worker's Compensation Department is also in charge of the victims' rehabilitation.

Insurance

The worker is insured from the first working day. There is no waiting period to claim occupational risks insurance's benefits.

All accidents and diseases (including mental disorders) happening within the working premises or related to work are considered as an accident at work. Since 1974, commuting accidents are also insured⁴. On the other hand, accidents or diseases having the carelessness of a worker as a cause can be excluded from the insurance coverage. Most accidents or diseases resulting from a voluntary action are not covered.

The list of occupational diseases was established in 1947⁵ and completed in 2010. The system may be considered as an open system. If a disease is not listed, the link between the exposure and the work may be taken into account

The list is made of 9 very broad categories, the first one being without any subclassification:

- diseases caused by accidents at work,
- · diseases caused by physical agents,

Refer to: http://www.ilo.org/dyn/natlex/docs/webtext/27776/64846/E95JPN01.htm#a075

Refer to: http://www.jil.go.jp/english/laborinfo/ library/documents/llj_law12.pdf

³ Refer to: http://www.mhlw.go.jp

⁴ For this the French public system was taken as a model.

⁵ Please refer to the list of occupational diseases on page 50 of the document available at the following web address: http://www.cas.go.jp/jp/seisaku/hourei/data/oels-a.pdf

- diseases caused by certain kinds of occupations where the worker is exposed to high psychological constraints
- diseases caused by chemical agents,
- pneumoconiosis and diseases made worse by pneumoconiosis,
- diseases caused by biological agents and viruses,
- diseases caused by carcinogenic agents,
- diseases listed by the Ministry of Labour (for instance those added in 2010),
- other diseases having a possible link with work (open system).

The employer has to notify to the Labour Standards Inspection Office, without any delay, all fatal injuries, accidents, suffocations and serious poisonings with four days or more away from work. Also, the employer will notify the first month following each quarter all work stoppages of less than four days which occurred during this last quarter.

Social insurance contributions

The occupational risks insurance is associated with the unemployment insurance to make up the social insurance. As a result, premiums collection is combined but benefits are granted according to separate specifications and channels.

The total contribution amount is calculated by multiplying the total payroll by the unemployment insurance rate and by the occupational risks insurance rate.

- the unemployment insurance rate ranges from 1.1 % to 1.4 % according to the activity,
- the occupational risks insurance rate ranges from 0.3 % (finance sector for instance) to 10.3 % (construction sector for instance) according to the activity. It takes into account the accidents trend (incidence rate) of the past three years. In addition to the occupational insurance premium there is a 0.005 % levy to fund benefits for asbestos-induced diseases.

Employers are the single contributors to the funding of the occupational risks insurance. The contribution rate is set at the level of the working establishment according to its activity and not at the global company level. The contribution is paid on a yearly basis and is calculated on the establishment's payroll. Its amount may be raised or lowered according to the accidents trend and according to the specific occupational safety and health measures implemented by the company.

For self-employed persons and entrepreneurs, the rate ranges from 0.4 % to 5.2 % calculated from a base taking into account the activity branch or the type of occupation and the earnings.

The unemployment insurance is equally financed by both employers and employees.

Benefits

To be compensated the victim has to send his/her claim to the Labour Standards Inspection Office who may request additional information to conduct the investigation concerning the claim. This recognition procedure of the occupational origin of the injury usually lasts one month.

Benefits in kind

Benefits in kind are 100 % taken in charge by the insurance with no limit to duration.

If the victim goes to a "Rôsai" health care institution i.e. an institution chartered by the occupational risks insurance, he/she will have nothing to pay out. He/she will have to provide a certificate from the employer. This certificate will be forwarded by the health practitioner to the Labour Standards Inspection office.

On the other hand, if the victim goes to a non-chartered institution, he/she will have to face the treatment's costs but will be refunded afterwards. The victim will have to forward his/her claim to the Labour Standard Inspection Office.

Temporary disability benefits in cash

In case of a temporary disability, the employer has by law to pay 60 % of the basic daily benefit during the first three days of work stoppage. From the 4th day, the daily allowance is paid by the insurance and reaches an amount of 80 % of the reference salary.

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⁶ The basic daily benefit is calculated, in principle, by dividing the total wages of the last three months immediately before the injury by the number of calendar days of this period.

The minimum amount of the daily allowance is of $34 \in$ and its ceiling goes from $114 \in$ to $214 \in$ according to the age of the victim.

After 18 months from the beginning of the treatment, if the victim does not recover and if his/her disability level ranges from rate 1 (313 days) to rate 3 (245 days) a pension whose length corresponds to the incapacity rate, is granted.

Permanent disability benefits in cash

In case of a permanent disability, a pension is granted. Its amount is set according to a schedule matching a disability level to a number of base salary days of the victim. The compensation is granted:

 either as a lump sum whose amount is equivalent to a sum going from 56 to 503 times the daily base salary for disability rates going from 8 to 14 (low disability rate). The current schedule (July 2011) is as follow:

Rate	8	9	10	11	12	13	14
Days	503	391	302	223	156	101	56

 or as a disability pension whose annual amount is equivalent to a sum going from 131 to 313 times the daily benefit for rates going from 1 to 7 (high disability level). The current schedule (July 2011) is as follow:

Rate	1	2	3	4	5	6	7
Days	313	277	245	213	184	156	131

For instance, the loss of both eyes is given a rate of 1; the loss of two fingers of which the thumb of the same hand is rated 8; rate 14 is given for the loss of the small finger of one hand.

Permanent disability pensions are paid monthly.

Funeral benefits such as lump sum compensation are granted to eligible parties. Then, a care compensation benefit is granted to victims who need permanent care. Its amount depends if the care is granted full or part time.

Benefits in cash are tax free and are automatically adjusted annually according to changes in wages.

Claims rights to benefits in kind and in cash for temporary disability such as funeral benefits must be used within the two years following the event. Concerning pensions' rights for the victim or eligible parties there is a five-year delay.

2. Relevant organizations

Japan Industrial Safety and Health Association, JISHA

The role of JISHA is to promote industrial accident prevention efforts undertaken by employers, to provide education, technical service and assistance, to collect and disseminate occupational safety and health information and documents and to conduct research and surveys.

http://www.jisha.or.jp/english/index.html

JISHA publishes occupational injuries statistics available at the following addresses:

- accidents at work: http://www.jisha.or.jp/english/statistics/index.html
- occupational injuries: http://www.jisha.or.jp/english/statistics/health.html

Japan Institute for Labour Policy and Training, JILPT

The objective of the institute is to contribute to the planning of labour policies and work toward their effective and efficient implementation, as well as to promote the livelihood of workers and develop the national economy by conducting comprehensive research projects on labour issues and policies, both domestically and internationally, and capitalize on the findings of such research by implementing training programs for administrative officials. The main pieces of legislation are available in English from its website. http://www.jil.go.jp/english/organization/aboutus.htm

National Institute of Occupational Safety and Health, JNIOSH

JNIOSH is the only comprehensive research institute for occupational safety and health in Japan. The current institution results from the merging on April 1st 2006 of two institutions which have been active in the field of occupational safety and health for nearly 60 years. JNIOSH conducts post-accidents inquiries whose conclusions will help the legislation to evolve. http://www.jniosh.go.jp/en/index.html

Ministry of Health, Labour and Welfare, MHLW

Numerous social statistics are available on the Ministry website.

http://www.mhlw.go.jp/english/index.html

About occupational injuries, it publishes, (in English) detailed statistics of incidence rates per type of industry at the following address:

http://www.mhlw.go.jp/english/database/db-yl/05.html

A recapitulatory table of the occupational risks insurance spending for the period 2001 to 2009 is available at the following address:

www.mhlw.go.jp/toukei/youran/roudou-nenpou/xls/137.xls

Ministry of Internal Affairs and Communications - Statistics Bureau

The ministry publishes data about the working populations and a statistical yearbook. Labour Force Survey: http://www.stat.go.jp/english/index.htm 2010 statistical yearbook:

http://www.stat.go.jp/english/data/nenkan/backdata/index.htm

The legislation currently implemented is partially available in English at the following address: http://www.jniosh.go.jp/icpro/jicosh-old/english/topics/OSHLegislation.html
This site, still in operation, is the one of the former Japan International Centre for Occupational Safety and Health, JICOSH, whose activities have been taken over by JISHA in 2008.

Japan Labor Health and Welfare Organization, JLHWO

JLHWO contributes to improve the health and welfare of workers. http://www.rofuku.go.jp/

3. The prevention of occupational risks

According to the Industrial Safety and Health Act's terms of 1972, employers have to assess risks present within their companies and have to take the necessary steps to prevent them. To this end, recommendations to conduct the risk assessment have been elaborated. This Act also sets the minimum occupational health and safety standards and the principle of the employees' contribution to the decisions made by the employers.

Since 1958 the Ministry of Health, Labour and Welfare designs five-year plans to promote occupational risks prevention.

The current 11th plan covers the 2008 to 2012 period. It has three components:

- to promote measures aiming to eliminate and control risks in order to reduce the overall number of industrial injuries within the economy,
- 2) to increase the effectiveness of the measures taken to reduce the number of serious industrial accidents,
- to effectively promote these measures by setting objectives and planning their 3) implementation.

In concrete terms, the Labour Standard Inspections Offices provide companies with supervision or guidance and encourage them to voluntarily implement the risk assessment. It also promotes the Occupational Health and Safety Management System (OHSMS) that is used to manage industrial safety and health on a systematic and ongoing basis. Concerning occupational diseases among, many actions, the use of the MSDS (Material Safety Data Sheet) system and the implementation of risk assessment in order to ensure safe and appropriate management of chemicals is promoted.

4. Main statistical data

Japan population was of 127,560,000 persons in 2009 according to the World Bank (04/26/2011).

The OECD evaluated the 2008 gross domestic product (GDP) to 23,450 € per person and gross national product (GNP) to 24,200 € per habitant (2010 data).

In 2009, 2,621,343 companies were insured for a total of 52,788,681 workers.

The insurance system compensated 614,613 victims with a temporary work stoppage and counted 1,500,724 pensioners. The total occupational risks insurance's amount of collected premiums was of 7.16 billion Euros this same year.

As a whole, the occupational risk insurance's collection rate was of 97.56 % in 2008.

Detailed financial information - 20097 data

Number of insured establishments	2,621,343
Number of insured workers	52,788,681
Amount of collected premiums	7.16 billion Euro
Total number of compensation cases decided	5,289,791
Total amount of compensation paid	6.38 billion Euro
Number of cases with a medical cost	3,066,728
Number of days	61,922,311
Amount paid for medical costs	1.64 billion Euro
Number of cases with temporary disability	614,613
Number of temporary disability days	18,819,528
Amount paid for temporary disability	908 millions Euro
Number of physical handicap cases	21,813
Amount paid for physical handicap (lump sum)	309 millions Euro
Number of eligible parties cases	941
Amount paid to eligible parties (lump sum)	67 millions Euro
Number of funeral benefit cases	3,591
Amount paid for funeral benefit	21 millions Euro
Number of care compensation benefit	55,650
Amount paid for care compensation benefit	60 millions Euro
Stock of pensions	1,500,724
Amount paid for disability pensions	3.36 billion Euro
Number of medical examination cases	25,731
Amount paid for medical examination	6.18 millions Euro

Source: Workmen's Accidents Compensation Insurance Statistics

⁷ Please refer to: www.mhlw.go.jp/toukei/youran/roudou-nenpou/xls/137.xls

5. Accidents at work and commuting accidents

These data are considering all activities of the private sector.

Number of accidents at work and commuting accidents with a first compensation payment during the reference year

Year	Accidents at work	Commuting accidents	Total
2000	554,564	48,537	603,101
2001	549,963	50,247	600,210
2002	529,139	49,090	578,229
2003	542,606	51,386	593,992
2004	551,089	52,395	603,484
2005	551,663	56,367	608,030
2006	551,118	55,527	606,645
2007	552,331	55,017	607,348
2008	543,128	61,011	604,139
2009	480,035	54,588	534,623

Source: Annual report on Health, Labour and Social Welfare of the Ministry of Health, Labour and Welfare

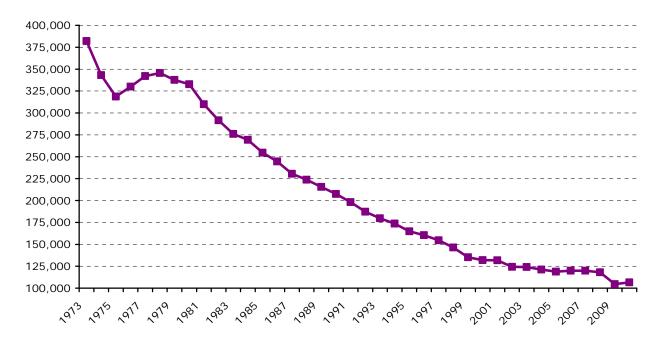
Number of accidents at work and commuting accidents with days away from work and fatal accidents during the reference year

Year	+ than 3 days	Fatal accidents	Total
2000	132,059	1,889	133,948
2001	131,808	1,790	133,598
2002	124,260	1,658	125,918
2003	124,122	1,628	125,750
2004	121,184	1,620	122,804
2005	118,840	1,514	120,354
2006	119,906	1,472	121,378
2007	119,999	1,357	121,356
2008	118,023	1,268	119,291
2009	104,643	1,075	105,718
2010	106,564	1,195	107,759

Source: Annual report on Health, Labour and Social Welfare of the Ministry of Health, Labour and Welfare

Long term trends

Trend in absolute value of accidents at work and commuting accidents with more than three days away from work – excluding fatal accidents

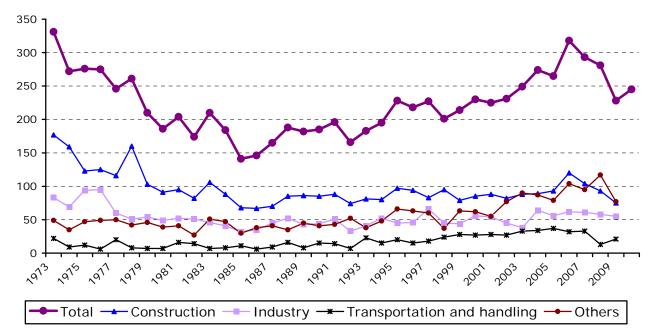


Source: Industrial Accidents Statistics in Japan (2010), JISHA

Trend in absolute value of fatal accidents at work and of commuting accidents



Trend in absolute value of the number of serious industrial accidents



Source: Industrial Accidents Statistics in Japan (2009), JISHA

A serious industrial accident is an accident with at least three injuries and/or deaths.

Trend of the incidence rate per 1,000 workers for all industries



Frequency rate trend expressed in terms of the number of fatal and non-fatal accidents at work per 1,000,000 worked hours (data calculated in 2010)

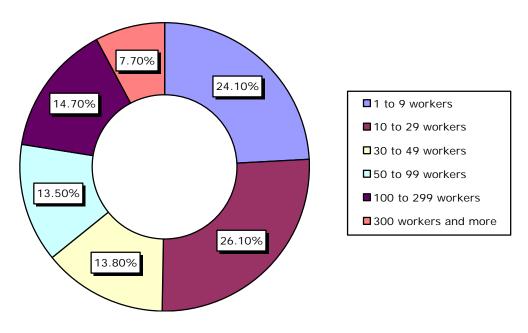


Source: Industrial Accidents Statistics in Japan (2010), JISHA

Severity level trend expressed in terms of the number of lost working days per 1,000 worked hours (data calculated in 2010)

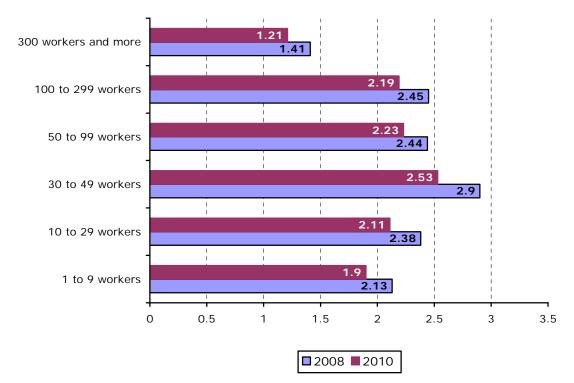


Number of fatal and non-fatal accidents at work and commuting accidents per size of companies – 2010 data



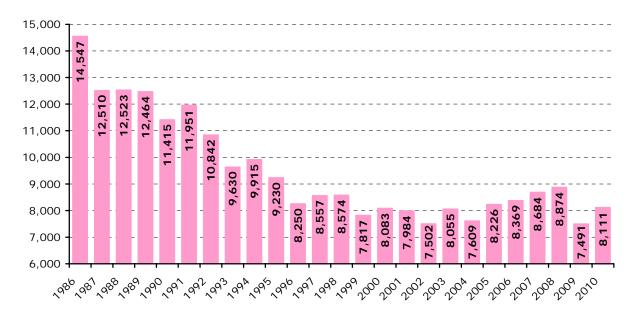
Source: Industrial Accidents Statistics in Japan (2010), JISHA

Accidents Incidence rate per 1,000 workers per size of companies – 2008 and 2010 data covering all accidents (work and commuting –fatal and non-fatal)



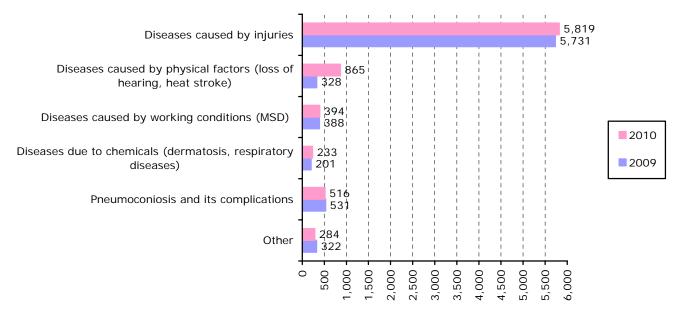
6. Occupational diseases

Trend in absolute value of the number of occupational diseases requiring more than three days away from work (data calculated in 2010)



Source: Survey of work-related diseases - MHLW

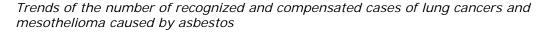
Distribution of the 7,491 occupational diseases with more than three days away for work during years 2009 and 2010 per main groups

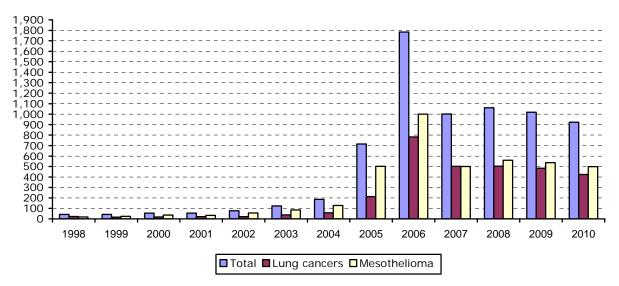


Source: Survey of work-related diseases - MHLW

The group "Diseases caused by injuries" is not detailed. This label covers every diseases resulting from an accident such as athropathy or backache due to limbs of work-related backbone injury.

During the prevention plan running from year 2003 to 2007, discogenic conditions of the lumber spine counted for 60 % of occupational diseases. Diseases caused by vibrations and noise counted for a yearly average of 300 cases for each one of them.

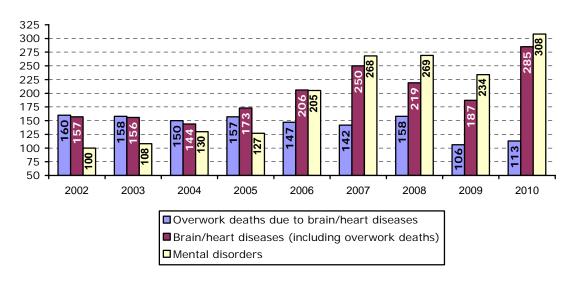




Source: Survey of the office of Occupational Diseases Recognition - MHLW

The 1947 occupational risks compensation law covers cancers and mesothelioma caused by asbestos. A new piece of legislation specific to the compensation of asbestos' victims has been put in place in 2006. It allows the compensation of eligible parties who could not beneficiate from the occupational risk law because the five-year delay was exceeded. This temporary disposition has been extended till March 2012 and its coverage enlarged. This explains the 2006 surge.

Trend of the number of recognized and compensated cases of mental disorders, brain/heart diseases, death due to overwork



To be recognized, the diseases have to be work-related. Mental disorders include suicide, stress and cases of high anxieties. In 2007, 1,883 claims for recognition were introduced and 660 were recognized (may be on several years).

Source: Office of the Occupational Diseases recognition, MHLW

The growth of the number of compensation claims for mental disorders related to work conducted the Ministry of Health, Labour and Welfare to clarify the compensation procedure.

A mental disorder will be recognized as having an occupational origin if several criteria are met⁸:

- if in the course of work a person has developed a mental disorder listed in the chapter V "Mental and behavioural disorders" of the ICD-10⁹; organic disorders and disorders caused by the use of toxic substances are excluded,
- if it is recognized that the person has been suffering of severe stress from his/her work that is objectively estimated to have caused such mental disorder about six months before the onset.
- if it is not recognized that the person has developed such mental disorders resulting from sources than work.

However, the latest criterions for recognition define:

- an evaluation matrix of psychological burden (evaluation matrix of stress intensity) to ease its understanding,
- that in case of repeated incidents such as bullying or sexual harassments, the
 psychological burden shall be evaluated from the beginning of the incidents in all their
 aspects.

Situations where the victim faces with death, overwork, lack of sleep or has to undergo a serious medical treatment of at least six months will be considered. Suicide cases meeting these criteria will be considered as related to work.

Detail per activity branch of the claims and the recognitions for mental disorder

		2009		2010
	Claims	Recognitions	Claims	Recognitions
Agriculture, forestry, fishing, mining	8	2	6	1
Manufacturing	205	43	207	50
Construction	70	26	74	20
Transports and mailing industry	101	23	98	33
Wholesale trade, retail trade	187	36	198	46
Finance industry, Insurance industry	41	10	45	8
Education	29	4	43	11
Health and social work	127	21	170	41
Information and communication industries	67	12	75	22
Hotels and restaurants	56	15	51	22
Others	245	42	214	54
Total	1,136	234	1,181	308

Source: Office of the Occupational Diseases Recognition, MHLW

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⁸ These criterions for recognition have been updated in December 2011.

⁹ International Statistical Classification of Diseases and related Health Problems

Detail of the Workers' Accident Compensation for mental disorder

		2006	2007	2008	2009	2010
All mental disorders	No. of claims	819	952	927	1,136	1,181
All mental disorders	No. of recognitions	205	268	269	234	308
Of which suicide (including	No. of claims	176	164	148	157	171
suicide attempts)	No. of recognitions	66	81	66	63	65

Source: Office of the Occupational Diseases Recognition, MHLW

Mental disorders, etc. include cases where the mental disorder was work related including suicide.

Detail of the recognized work-related suicide cases per type of employment

	2010
Full-time worker	61
Contract worker	1
Temporary worker	0
Part-time worker	1
Others	2
Total	65

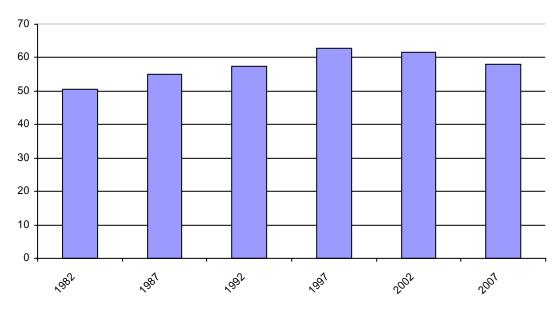
Source: Office of the Occupational Diseases Recognition, MHLW

Detail of the recognized work related suicide cases per age group

	2010
less than 19 years old	1
20 to 29	16
30 to 39	12
40 to 49	21
50 to 59	13
60 and more	2
Total	65

Source: Office of the Occupational Diseases Recognition, MHLW

Trend of the rate of workers showing strong anxieties or stresses symptoms



Source: Statistics and Information Dept, MHLW

7. Eurostat data

Structural indicators are available only for accidents at work.

Index of the number of serious accidents at work per 100,000 persons in employment (1998 = 100) $^{(*)}$

Serious accidents - Total	1998	1999	2000	2001	2002	2003	2004	2005	2006
EU (27 countries)	:	:	100	96	88	84	80	78	76
EU (25 countries)	100	100	99	95	87	82	79	77	75
EU (15 countries)	100	100	98	94	86	81	78	76	74
Japan	100	93	91	91	86	86	83	81	:

(:) Not available

Index of the number of fatal accidents at work per 100,000 persons in employment (1998 = 100) $^{(*)}$

Fatal accidents	1998	1999	2000	2001	2002	2003	2004	2005	2006
EU (27 countries)	:	:	100	97	91	90	88	86	81
EU (25 countries)	100	88	87	85	80	78	75	72	72
EU (15 countries)	100	91	88	85	80	78	75	74	73 ^(p)
Japan	100	109	103	98	91	90	88	82	:

- (:) Not available
- (p) Provisory

EU-15: Austria, Belgium, Denmark, Finland, France, Germany, Greece, Ireland, Italy, Luxembourg, Netherlands, Portugal, Spain, Sweden and United Kingdom,

EU-25: EU-15 + Cyprus (without the northern part of the island), Czech Republic, Estonia, Hungary, Latvia, Lithuania, Malta, Poland, Slovakia and Slovenia,

EU-27: EU-25 + Bulgaria and Romania.

^(*) The index shows the evolution of the incidence rate of serious and fatal accidents at work in comparison to 1998 (= 100). The incidence rate = (number of accidents with more than three days' absence from work or number of fatal accidents at work that occurred during the year/number of persons in employment in the reference population) x 100,000. An accident at work is a discrete occurrence in the course of work that leads to physical or mental harm. This includes accidents in the course of work outside the premises of one's business, even if caused by a third party, and cases of acute poisoning. It excludes accidents on the way to or from work, occurrences having only a medical origin, and occupational diseases. Fatal road traffic accidents and other transport accidents in the course of work are also excluded.

Founded in 1991, EUROGIP is a French organization, whose activities are organized around five areas: enquiries, projects, information-communication, standardization and coordination of notified bodies.

All have in common European aspects of the insurance or the prevention of accidents at work and occupational diseases.

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