National Health Insurance Exclusion System Guide

- **O Background:** Article 109 (5) 2 of the National Health Insurance Act and Article 41 (Care Benefits) (1)
- **O** Target population: Medical guarantee equivalent to the NHI benefits in accordance with foreign statutes, a foreign insurance or a contact concluded with his or her employer.
 - Foreign statutes: France(Except for the government agreement, permanent residents etc), Japan(compensation for medical expenses in the home country), United States, United Nations (government officials, soldiers, retirees and their families)
 - Foreign insurance: Foreign private insurance, Subscription before stay in Korea, insurance premiums are paid by yourself
 - Contract with his or her employer: Employers pay for the medical expenses of its employees based on their contract, etc.
 - * There has to be no restriction on covered amount of money, coverage, frequency. (Large amount of money covered from employer such as more than 800,000usd will be considered no restrictions.)
 - In case of female, chlidbirth and pregnancy costs have to be involved in coverage. Otherwise it will not be accepted.

O A period of loss

- Local subscriber: Date of application for exclusion from subscription. However, if the application is made <u>within 14 days from the first</u> <u>insurance premium payment</u> or <u>within 6 months from the date of</u> <u>qualification acquisition by all delinquents</u> of insurance premiums, the retroactive qualification will be lost.
- Employee subscriber: Date of application for exclusion from subscription. However, if the application is made within 14 days, the retroactive qualification will be lost.

- Dependents: On the date of loss of qualification as an employee subscriber or on the date of application

O Documents to be submitted

- Common : Declaration of Qualification Loss, Application for exclusion for registration, Documents that prove you will receive medical cover
 - X Every document must include Korean-translated version (no need notarization). Otherwise it will be refused.
- Foreign Law : Japan Japanese health insurance card, The US military Uniform card
- Contract with his or her employer : Employment contract proves you have above 70% of medical cover by your employer, Proof of Facts if employer has been paying medical fee to employees (documents showing medical fee was provided to other workers are also available).
 - * Official Document, Proof of Expense, Account Book
- Foreign Insurance : Insurance policy included in domestic health insurance with Korean-translated version (It can be translated by applicant)
 - * Foreign Insurance launched in Korea will not be accepted, English-translated version of Insurance Policy will be required if it is written in other languages.

O Re-Enrollment in Health Insurance

- Foreign insurance, contract with employer: The day when the reason for exclusion is resolved or the period of exclusion (up to one year) has elapsed
- Laws of foreign countries: Re-registration is possible upon application in person (However, it is impossible to exclude subscription for the same reason in the future)

[별첨] 외국의 보험에 의한 건강보험 가입제외 신청 시 한글번역 참고용 서식 Reference form for application for exclusion of health insurance by foreign insurance

『외국의 보험』가입 내역 현황(한글 번역 대상 항목)

Status of foreign insurance subscriptions(Items subject to Korean translation)

 ※ ①번 항목부터 ⑦번 항목까지 해당하는 내용을 한글로 번역하여 적어 주세요. Please translate the contents of items ① to ⑦ into Korean and record them.
※ 보험가입 원본 서류에 아래 해당 항목 일련번호(①~⑦) 표기하여 첨부하시기 바랍니다. Please indicate the above serial number(①~⑦) on the original insurance policy.

① 보험회사 정보	명칭(Name)	국가명(Country name)
Insurance company		
② 피보험자 정보	성명(Name)	생년월일(Date of birth)
Insured person		
③ 보장 기간	시작일(Guaranteed start date)	종료일(End date of guarantee)
Guarantee period		

④ 보장 내용

Contents of medical coverage

※ 여성의 경우, 출산관련 의료보장 되어야 함.

For women, childbirth medical treatment should be guaranteed.

⑤ 보장 횟수 (Guaranteed number of times)

⑥ 보장 지역	
Guaranteed area	
⑦ 보장금액	최대 의료 보장금액(Maximum medical coverage amount)
Guaranteed amount	

◎ 건강보험 가입 제외 인정 기준(Criteria for exclusion from health insurance coverage)

① 국내에서 출시된 보험은 제외 불가 (Insurance launched in Korea cannot be excluded)

② 피보험자 성명과 생년월일 표기 (There must be information on the insured's name and date of birth)

③ 외국인등록일 이전 보험가입 (Insurance subscription date must be before the foreigner registration date)

④ 일반적인 질병 부상에 대한 의료보장 (Medical coverage for common disease injuries should be provided)

5 의료 보장 횟수에 제한이 없어야 함(There should be no restrictions on the number of guarantees)

⑥ 한국에서 의료보장을 받을 수 있어야 함(You need to be able to get health protection in Korea)

⑦ 의료보장 금액에 제한이 없어야 함(보장 금액이 최소 10억원 이상)

There should be no limit to the amount of medical coverage (at least a billion won)