

Public funding

	May 8 – end of Sep. 2023	October 2023 onwards
Outpatients	<ul style="list-style-type: none"> ➤ Public funding of Covid-19 antivirals (Paxlovid, Xocova, etc.) continues <p>*Fever and pain medications at own expense</p> <p>(Amount of payments for those under 70 with 30% copayment) 2,590 yen ⇒ 3,710-4,170 yen (32,010-32,470 yen without Covid-19 treatment funding)</p> <p>*Influenza 3,990-4,450 yen</p>	<ul style="list-style-type: none"> ➤ Public funding of COVID-19 treatments to continue until end of March 2024, with some requirement for copayment based on fairness with regard to other conditions
In-patients	<ul style="list-style-type: none"> ➤ In-patient care fees are 20,000 yen less than the amount due as copayment under the “High-cost Medical Expense Benefit” <p>(For those aged 75 and over or who have not paid residents tax) No copayment ⇒ 4,600 yen (was 24,600 yen) + meal costs 6,300 yen = 10,900 yen</p> <p>*For about 40% of people aged 75 and over, the copayment is reduced to about 10,000 yen including meals</p>	<ul style="list-style-type: none"> ➤ Public funding of in-patient care to continue until end of March 2024 with a revised reduction in the copayment due under the “High-cost Medical Expense Benefit”
Testing	<ul style="list-style-type: none"> ➤ Focused testing of aged care workers continues as public testing for the time being 	<ul style="list-style-type: none"> ➤ Continues until end March 2024
Advice	<ul style="list-style-type: none"> ➤ To ease impacts on outpatient and acute care services, municipalities continue to offer advice about accessing medical care 	<ul style="list-style-type: none"> ➤ Continues until end March 2024
Care facilities	<ul style="list-style-type: none"> ➤ In-patient care facilities for elderly, pregnant women, etc. to continue transitionally at the discretion of the municipality, based on a balanced approach to in-patient care and responsibility for individuals to shoulder some of the cost 	<ul style="list-style-type: none"> ➤ Ends September based on national uptake

Update on government consideration of the healthcare system from October and public funding ②

Healthcare system

	Initiatives until Sep 2023	Initiatives from Oct 2023 to March 2024
Outpatient	<ul style="list-style-type: none"> ➤ Maintain or increase the number of responding hospitals in order to have a broad range of medical facilities (up to 64,000 nationwide) ➤ Continue public list of hospitals ➤ Publicize efficient infection prevention measures and support capital investment (300 points for not imposing any limits on patient acceptance) ➤ Gradually reduce medical reimbursement special measures (e.g. Assessment of hospital infection prevention measures) Current 300 pts ➔ 147 pts ➤ New assessment of patient acceptance process, to be completed by hospital in line with Covid-19 reclassification (950 pts) 	<ul style="list-style-type: none"> ➤ Outpatient added to new transition plan ➔ Further expand number of responding hospitals, with regular progress management ➤ Continue public list of hospitals ➤ Continue support for capital investment and securing of PPE ➤ Continue medical reimbursement special measures with points adjustments based on hospital infection prevention measures, staffing and efficiency.
In-patient	<ul style="list-style-type: none"> ➤ Transition plan established (during April) <ul style="list-style-type: none"> ▪ Acceptance of patients by new hospitals ▪ Triage among hospitals ➤ Promote acceptance of patients with light or moderate (I) symptoms by hospitals with experience of in-patients other than those already listed ➤ Patient-accepting hospitals to prioritize acceptance of severe cases ➤ Continue bed retention fee until end September with revised subsidy ➤ Temporary hospitals will continue as hospitals if deemed necessary by the municipality ➤ Publicize effective infection prevention measures and support capital investment 	<ul style="list-style-type: none"> ➤ Transition plan extended and acceptance of patients by new hospitals promoted ➤ Bed retention fee subsidy to continue with priority given to those beds kept for new patients with moderate (II) to severe symptoms *To be paid according to alert level as updated by national government, estimate of number of ready beds, etc. Each prefecture sets the number of ready beds based on the alert level and estimates ➔ Flexible operation of levels depending on transmission situation ➤ Former temporary hospitals to retain functions as necessary ➤ Continue support for capital investment and securing of PPE

Update on government consideration of the healthcare system from October and public funding ③

	Initiatives until Sep 2023	Initiatives from Oct 2023 to March 2024
Triage	<ul style="list-style-type: none"> ➤ Promote transition to triaging among hospitals (triaging headquarters framework may be retained for time being) ➤ Start initiative for triaging among hospitals for patients with light to moderate (I) symptoms first ➤ Start initiative for triaging among hospitals for patients with severe symptoms from autumn ➤ Transition plan established (during April) <ul style="list-style-type: none"> ▪ Acceptance of patients by new hospitals ▪ Triaging among hospitals 	<ul style="list-style-type: none"> ➤ Continue to decide patient destination among hospitals (government triaging framework may be retained for time being) ➤ Increased use of IT to share bed availability data ➤ Transition to existing prefectural triage framework for pregnant women, infants and dialysis patients
Aged care facility response	<ul style="list-style-type: none"> ➤ Continue policies and measures for aged care facilities for the time being <p>Key policies and measures</p> <ul style="list-style-type: none"> ▪ Secure cooperating hospitals for focused testing/site visits ▪ Subsidize dispatch of nurses ▪ Subsidize facilities that provide in-house care (up to 300,000 yen per patient) ▪ Special fee for nursing care to promote acceptance of those leaving hospital <ul style="list-style-type: none"> ➤ Initiatives to promote infection prevention, train carers and increase collaboration with hospitals by facilities 	<ul style="list-style-type: none"> ➤ Continue after October, with some adjustments to conditions and monetary amounts

Transition to new medical reimbursement regime that accounts for Covid-19 through the simultaneous revision of medical care and aged care reimbursement in April 2024

Key policy directions from October 2023^①

Category		Policy directions	
		Until September (May 8 to September 30)	After October (October 1 to March 31)
Advisory network	Securing advisory network	<ul style="list-style-type: none"> ➤ Tokyo Metropolitan Government Covid-19 Consultation Center established (up to 750 phone lines) 	<ul style="list-style-type: none"> ➤ Continued to prevent pressure on outpatient and acute medical services
Testing and treatment	Support development of testing in clinics (outpatient) (subsidies for installation of testing equipment, cost of developing facilities, etc.)	<ul style="list-style-type: none"> ➤ Continued, in order to build the infrastructure to coexist with COVID-19 (To build a larger network of medical facilities able to offer testing and treatment, expand testing equipment installation support beyond treatment and testing hospitals, boost locations with partitioning in place, continue the hospital list scheme and establish a new transition plan between October and March.) 	
	Advocacy of infection prevention measures	<ul style="list-style-type: none"> ➤ While publicizing the need for infection prevention measures, encourage the cooperation of more medical facilities to handle testing and treatment (support training in infection prevention at medical facilities, educate about the obligation to provide medical care) 	
	Secure service capacity for holidays	<ul style="list-style-type: none"> ➤ Secure diagnosis and treatment network for weekends, public holidays and longer holidays (emergency response during outbreaks) 	<ul style="list-style-type: none"> ➤ Continue (emergency response during outbreaks)
	Focused testing for facility staff	<ul style="list-style-type: none"> ➤ At aged care, disabled persons and medical facilities, special needs schools (Accommodation facilities: weekly PCR + antigen testing 1-2 times per week Day visit facilities, hospitals, etc.: antigen testing 2-3 times per week) 	<ul style="list-style-type: none"> ➤ Continue in order to protect the elderly and other high-risk populations
	Stockpile test kits	<ul style="list-style-type: none"> ➤ Around 450,000 kits secured 	<ul style="list-style-type: none"> ➤ Continue emergency distribution network in case of future outbreak (up to 400,000 kits)

Key policy directions from October 2023 ②

Category		Policy directions		
		Until September (May 8 to September 30)	After October (October 1 to March 31)	
Healthcare system	Public funding (hospitalization)	<ul style="list-style-type: none"> ➤ Government covers cost of hospitalization (In-patient care fees are 20,000 yen less than the amount due as copayment under the “High-cost Medical Expense Benefit”) 	<ul style="list-style-type: none"> ➤ Adapt to government policy (continuation with adjusted subsidy) (Project to be implemented based on a nationwide uniform policy) 	
	Securing hospital beds (bed retention fees)	<ul style="list-style-type: none"> ➤ Subsidized bed retention fees 	<ul style="list-style-type: none"> ➤ Respond flexibly to transmission situation, based on government policy (continue subsidy with prioritized target and period) (Project to be implemented based on a nationwide uniform policy) 	
	Promotion of network building and patient acceptance (patient acceptance honorarium, promotion of transfers, etc.)	<ul style="list-style-type: none"> ➤ Continue in order to build a larger network of medical facilities able to accept patients, with revisions to detail (Support securing of carers and infection prevention costs in hospitals (until September), expand support for developing facilities such as zoning to hospitals that do not have secured beds, delay transition plan deadline from end September to after October, implement bed retention prioritizing patients with moderate (II) to severe symptoms in case of outbreaks from October) 		
		<ul style="list-style-type: none"> ➤ Patient acceptance honorarium (promotion of patient transfers, acceptance of elderly and disabled patients requiring care)(emergency response during outbreaks) 	<ul style="list-style-type: none"> ➤ Continue (emergency response during outbreaks) 	
	Triage	<ul style="list-style-type: none"> ➤ Triage by public health centers, regional coordination by triaging headquarters (Transition plan established by end September. Targeting patients who encounter barriers to hospitalization such as those with moderate disease II or above, those on dialysis, pregnant women, infants, those with mental illness and severe pre-existing conditions) 	<ul style="list-style-type: none"> ➤ End, based on progress with collaboration among hospitals and clinics *Leverage existing networks for those patients (such as dialysis patients) requiring special consideration 	
	Medical support-providing aged care facilities	<ul style="list-style-type: none"> ➤ 8 facilities operating (692 beds) 	<ul style="list-style-type: none"> ➤ Continue in order to protect the elderly and other high-risk populations *Operate flexibly according to transmission situation 	
	Oxygen and medical stations	<ul style="list-style-type: none"> ➤ Continued readiness to open a station in Tachikawa (85 beds) in case acute healthcare overwhelmed 	<ul style="list-style-type: none"> ➤ End. All functions to be found in medical support-providing aged care facilities 	

Key policy directions from October 2023 ③

Category		Policy directions	
		Until September (May 8 to September 30)	After October (October 1 to March 31)
Healthcare system	Accommodation care facilities	➤ Secured support for elderly and pregnant (about 300 rooms)	➤ End, based on uptake and likelihood that this function will be replaced by other measures
	Stock of PPE	➤ Continue to build legacy of Tokyo resilient to infectious diseases	
	Support for hospital facilities and upgrades (in-patient) (facilities upgrade subsidy, etc.)	➤ Continued, in order to build the infrastructure to coexist with COVID-19 (To build a larger network of medical facilities able to accept patients, widen subsidy target to medical facilities beyond those accommodating in-patients)	
	Long Covid measures	➤ Continued (map of hospitals offering treatment, implement initiatives to promote understanding of Long Covid among medical staff)	
Home care system	Temporary Online Symptom Diagnosis Center	➤ Operates weeknights, weekends and holidays to ease the burden on emergency and outpatient healthcare system (emergency response during outbreaks)	➤ Retain capacity to re-open center (emergency response during outbreaks)
	Home visits	➤ Continue dispatch of medical teams to aged care facilities	➤ Continue in order to protect high-risk groups
	Facilities hotline Rapid support team Infection prevention support team	➤ Continue in high-risk facilities in order to build the legacy of a Tokyo resilient to infectious diseases	
	Patient transfers	➤ Secure transport network for dialysis patients and others using private ambulances and negative pressure vehicles	➤ End, based on uptake and fairness to those suffering from other conditions

Key policy directions from October 2023 ④

Category		Policy directions	
		Until September (May 8 to September 30)	After October (October 1 to March 31)
Vaccination and treatments	Public funding of vaccines	<ul style="list-style-type: none"> ➤ Full public funding (Gov 10/10) (Continue in line with extraordinary extension of booster shots) (Project to be implemented based on a nationwide uniform policy) 	
	Mass vaccination centers	<ul style="list-style-type: none"> ➤ Operate mass vaccination centers (Tokyo Metropolitan Government Building North Observatory, Sanraku Hospital), dispatch vaccine buses to aged care facilities (Audit mechanism, continue based on new ceiling for public funding support) (Project to be implemented based on a nationwide uniform policy) 	
	Public funding of treatments	<ul style="list-style-type: none"> ➤ Full public funding 	<ul style="list-style-type: none"> ➤ Adapt to government policy (continuation with request for copayment) (Project to be implemented based on a nationwide uniform policy)
Monitoring and surveillance		<ul style="list-style-type: none"> ➤ Expert monitoring analysis ➤ Monitoring of new variants (genomic analysis) 	<ul style="list-style-type: none"> ➤ Continue
Public health center support		<ul style="list-style-type: none"> ➤ Recruit temporary staff to Tokyo public health centers ➤ Establish helpline for night hospital triage ➤ Digitalize public health centers (use of audio mining, digitalization of progress management data) 	<ul style="list-style-type: none"> ➤ Continue ➤ End, based on progress with collaboration among hospitals and clinics ➤ ➤ Continue, in order to build legacy of Tokyo resilient to infectious diseases
Municipal support		<ul style="list-style-type: none"> ➤ Support municipal infection prevention measures Continued, with adjusted menu in line with TMG policy (protecting high-risk populations, building a city resilient to infectious diseases). Focused testing of visitors to aged day care centers, advice network, promote understanding of residents and clinics about the downgrade of COVID-19 to category 5 	<ul style="list-style-type: none"> ➤ Continue