The Current State & Challenges of Japan's Medical Inbound Industry & Toward Its Industrialization

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Initiatives Regarding Medical Inbound Tourism in Japan

(1) The Japanese Government's Initiatives for Medical Tourism

The Japanese government's initiatives in medical inbound tourism began in 2009 with the Ministry of Economy, Trade and Industry's (METI) Commerce Policy Bureau launching the "Research Project for International Medical Tourism" and the Japan Tourism Agency under the Ministry of Land, Infrastructure, Transport and Tourism establishing the "The Study Group on Inbound Medical Tourism". Furthermore, in 2010 the Cabinet Secretariat's National Strategy Office formulated the new growth strategy "Health power strategy through 'life innovation'". As a key organization, the General Incorporated Association Medical Excellence Japan (MEJ) was established in 2013. It serves as a platform for collaboration among industry, government, academia, and medical professionals, aiming to develop infrastructure for accepting foreign patients in the medical inbound sector and to advance the international expansion of medical services. MEJ plays a central role in these efforts. In Japan, the term "medical inbound" has been standardized and is used in mass media and other contexts.

(2) Implementation of the Guarantor System for Medical Stay Visas

Initially, accepting patients coming to Japan for treatment was based on their entry using tourist or business visas, which sometimes hindered patient acceptance depending on the treatment plan. Therefore, in 2011, the guarantor system for medical stay visas was established and implemented as a system for short-term stays in Japan for medical purposes.

There are two types of guarantor organizations: travel agencies (registered with the Japan Tourism Agency under the Ministry of Land, Infrastructure, Transport and Tourism) and non-travel agency businesses (registered with the Ministry of Economy, Trade and Industry). As of September 2025, there are 77 registered travel agencies and 140 registered non-travel agencies, totaling 217 organizations. This system enables the issuance of medical stay visas covering all activities directed by Japanese medical institutions (encompassing a wide range of fields from health check-ups like comprehensive medical examinations, screenings, treatments, dental treatments, to convalescence such as hot spring therapy). Entry into Japan is now possible through the personal guarantee provided by these guarantor organizations.

However, since obtaining a medical stay visa is not always mandatory for visits to Japan for medical purposes, the number of medical visas issued does not directly represent the size of Japan's medical inbound market.

(3) Promoting Medical Inbound Tourism in MEJ

① Japan International Hospitals (JIH) Recommended

The Joint Commission International (JCI) was established in 1994 as an international accreditation body for healthcare organizations outside the United States. In Japan, MEJ has also created an environment that actively welcomes patients seeking medical care in Japan. Medical institutions that are well-equipped to receive foreign patients are recommended as JIH, and this information is disseminated overseas. As of August 2025, 43 medical institutions are designated as recommended hospitals. It is hoped that MEJ's activities will further expand this initiative. https://www.japanhospitalsearch.org/

② Accredited Medical Travel Assistance Company (AMTAC)

i) Background of Establishment

Currently, there are no specific laws governing medical inbound tourism (as of September 2025). Therefore, operations must comply with existing laws such as the Medical Practitioners Act, Medical Care Act, Travel Agency Act, Transportation Business Act, Hotel Business Act, and real estate-related laws, requiring the necessary licenses for each. However, in supporting stays in Japan, not only obvious legal violations like unlicensed taxis and illegal private lodgings have become prominent, but also the rampant activity of unscrupulous brokers operating through acquaintances or friends residing in Japan. Furthermore, the quality of support services provided between medical institutions and patients varies significantly, necessitating the standardization and leveling of services through the establishment of proper reception systems. Consequently, in 2014, METI took initiative in holding the "Study Group on the Role of Medical Coordination Service Providers for Promoting Medical Tourism for Foreign Patients".

ii) Medical Travel Assistance Companies and Certification Systems

Medical Travel Assistance Companies are businesses that provide services enabling foreign patients visiting Japan to access high-quality medical care. These services include "support for obtaining

medical information necessary for receiving institutions to make acceptance decisions", "multilingual interpretation and translation services", "arranging and supporting transportation and accommodation" and "handling medical fee payments on behalf of patients". They are also referred to as medical coordinators or medical facilitators. Based on guidelines established by the government's Task Force on International Expansion of Medical Services in 2015, a certification system was launched. Companies certified by MEJ are designated as Accredited Medical Travel Assistance Companies (AMTAC). JTB was the first company to receive this certification (MEJ-AMTAC-001).

③ About the Medical Travel Forum (MTF)

In April 2021, MEJ launched the Medical Travel Forum (MTF) to promote the further development of medical travel to Japan, ensure safe and secure travel and treatment for foreign visitors considering medical travel to Japan through a sound business environment, and foster trust between medical institutions and medical travel support companies. As of August 2025, 89 companies are registered as regular members, led by JTB (22001). Currently, members are categorized into C-1 members (63 companies) registered as guarantor institutions for medical stay visas and C-2 members (26 companies) not yet registered.

(4) JTB's Initiatives

In 2008, JTB conducted research and studies on medical inbound tourism as a new business . In 2010, it launched the Japan Medical & Health Tourism Center (JMHC) and commenced operations. The initial business concept envisioned operating as an agent, introducing overseas patients seeking Japanese medical care to Japanese medical institutions, in compliance with Japanese law, while advancing the business in collaboration with these institutions. However, as we gained a deeper understanding of the situation facing medical institutions, we recognized the need to position this as a new, value-added industry that also incorporates solution-based services. Under the group management philosophy of fostering peace and global interconnectedness through the creation of opportunities for meaningful human interaction, JTB has been expanding its scope of operations, including collaborations with medical institutions to enhance Japan's capacity for accepting international patients and effectively communicating the strengths and unique features of Japanese healthcare to the world. It should also be noted that in 2010, when awareness of medical inbound tourism was still relatively low, JMHC was established as a specialized department dedicated solely to medical coordination services.

Current Status & Challenges Regarding Medical Inbound Tourism

(1) Number of medical tourists accepted

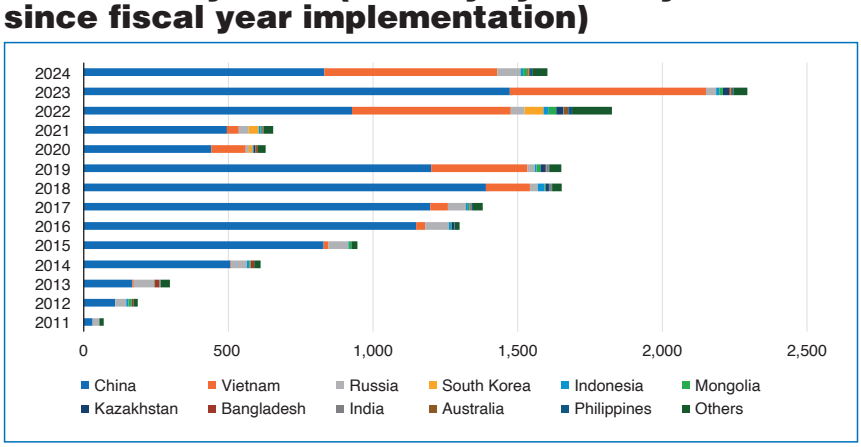
The number of foreign visitors to Japan is projected to exceed 36 million in 2024, setting a new record. However, statistics on foreign patients visiting Japan specifically for medical treatment are not available. The primary reason is that medical institutions face challenges in collecting accurate statistics that distinguish between foreign residents receiving treatment, medical care for travelers (unexpected medical care during travel), and medical inbound tourism. Furthermore, the lack of a licensing system for medical travel support services makes aggregation difficult. Additionally, the recent increase in clinics specializing in non-insurance-covered treatments like cosmetic medicine and stem cell therapy is also presumed to complicate accurate counting. Despite this situation, surveys like MEJ suggest that medical inbound visits may account for approximately 30,000 to 50,000 annual arrivals. Currently, the scope of treatments – including cosmetic medicine and stem cell therapy – is diverse, and the number of visitors is presumed to be on an upward trend.

① Host Countries from the Perspective of Medical Stay Visas

The top countries for medical stay visa issuance are China, Vietnam, and Russia. While South Korea saw an increase in issuance during the pandemic, these three countries have consistently ranked at the top since the program's inception. Although China's issuance numbers decreased in fiscal year 2024, the number of individuals accepted increased, suggesting a rise in cases where individuals entered Japan without a medical stay visa. During the pandemic when travel was discouraged, this visa served as one of the few options allowing entry for humanitarian reasons, saving lives. We express our gratitude for the government's response at that time *(Chart)*.

CHART

Medical stay visas (country-by-country trends since fiscal year implementation)



Source: Compiled by the author based on the Ministry of Foreign Affairs' visa issuance statistics (website)

② **Host Countries as Seen in MEJ Reports**

Based on the 2024 aggregate results, the top countries according to the JIH's tally are China, followed by Vietnam, with the United States ranking third. Similarly, among medical travel support companies, China and Vietnam lead the rankings, with the US again placing third, followed by Mongolia. However, in recent years, while the overall number of cases received has increased, visits to Japan from countries outside China, particularly from the Southeast Asian region, have grown. This trend is expected to continue.

(2) Challenges

Is medical tourism, recognized as a growing market by research institutions both domestically and internationally and positioned as part of Japan's growth strategy, actually contributing to national interests? Is it helping to sustain Japan's social security system? While the government has already strengthened measures in some areas, we would like to introduce some of the issues that remain.

① **Patient Referral Documents Issue *(Shinryo Joho Teikyo-sho)***

Under Japan's universal health insurance system, where all citizens have equal access to medical care, efforts are made to provide better examination environments by exchanging patient referral documents between doctors and medical institutions to enhance patient quality of life. However, when this patient referral documents exchange involves foreign visitors to Japan who do not hold Japanese National Health Insurance cards, and clinics that brought them to Japan for a second opinion issue patient referral documents to medical institutions lacking the infrastructure to accept foreign visitors, situations arise that neither the foreign patient nor the referred medical institution desires.

② **National Health Insurance Card Issue**

In the past, fraudulent use through lending or borrowing National Health Insurance cards became an issue. Recently, however, the problem of foreign visitors to Japan free-riding on the country's social security system has been raised in the Diet. Here, we introduce two patterns. The first involves obtaining a National Health Insurance card by acquiring a Business Management Visa. Individuals compare whether the out-of-pocket medical expenses presented by healthcare institutions or the capital contribution required for the Business Management Visa is more advantageous, and choose to obtain the visa. The second pattern involves obtaining a National Health Insurance card through a work visa or a family stay visa. Cases have emerged where individuals, while continuing treatment for their original purpose, rely on family or close friends to obtain a National Health Insurance card and then request insurance-covered treatment midway through their care. Since the medical institution has already obtained consent for the treatment plan and payment of the private medical fees, they face difficulties in handling these situations.

③ **Positioning Issues for Japanese Subsidiaries of Foreign Travel Support Companies**

When an overseas medical agent, acting as the parent company, holds both Japanese subsidiaries, it may position the Japanese subsidiary as a cost center. This allows the subsidiary to purchase apartments and vehicles in Japan and provide free accommodation and transportation for visiting patients. While this practice is not illegal if genuinely provided at no cost, it raises significant issues, including the Japanese subsidiary's tax liability.

④ **The Problem of Allowing Critically Ill Patients to Come to Japan**

Treatment in Japan is arranged through agreements between foreign nationals seeking medical care and accepting medical institutions. However, issues arise where patients deteriorate severely before reaching the designated institution, and combined with the lack of adequate emergency response systems at the accepting institutions, they end up being transported to emergency departments at non-designated medical facilities. The government has also issued a notice to medical stay visa guarantor organizations titled "Regarding the Acceptance of Medical Travel to Japan (Notice of Caution)".

⑤ **Medical Fee Collection Issues**

In the field of medical care for travelers (unexpected medical care during travel), unpaid medical bills are a major issue. On the other hand, medical inbound cases involving medical travel support companies are less prone to becoming unpaid. However, I would like to cite one example. When providing medical care beyond the initially planned treatment, failure to obtain appropriate consent from the patient or their family members may result in refusal to pay for treatments deemed unwanted. For medical institutions, whose role involves safeguarding patients' lives, this decision is difficult from a humanitarian perspective. However, it is crucial to prioritize obtaining prior confirmation and securing payment before proceeding with treatment.

Issues to Be Resolved in Order to Establish Medical Tourism as an Industry

Prof. Shinya Yamanaka announced the four factors (Yamanaka factors) necessary for creating iPS cells in 2006. At the 2025 Osaka-Kansai Expo, a group led by Prof. Yoshiki Sawa of Osaka University was exhibiting a "mini heart" created from iPS cells. The world is paying close attention to regenerative medicine using iPS cells. Japan possesses numerous medical technologies, devices, and pharmaceuticals that remain largely unknown globally. While it is essential to continue promoting these worldwide, we must simultaneously advance both acceleration and restraint. This means identifying and improving the elements necessary for efficiently operating medical inbound tourism as a national system. Let us explore some hints for achieving this.

① Systematization of Medical Visa Application Procedures

The issuance of medical stay visas involves multiple steps, taking approximately two to three weeks from confirmation of acceptance in Japan to visa acquisition. This is slower compared to Southeast Asia, where visas can be obtained in about one week. One reason for this delay is the process of sending the original guarantor certificate from Japan to the Japanese Consulate in the relevant country. Furthermore, guarantor organizations report monthly on immigration control to relevant ministries using Excel or Word files, a practice unchanged since fiscal year 2011. JTB manages its systems as part of its internal operations. If we can systematize operations across Japan, it may be possible for visitors to arrive earlier than currently possible.

② Enhancing Recognition of Accredited Medical Travel Assistance Company (AMTAC) Both Domestically and Internationally

The travel industry, a nationally licensed profession, requires both corporate registration as a travel agency and an individual Travel Business Manager to operate. Medical Travel Assistance services similarly necessitate a comparable framework to provide foreign visitors seeking medical treatment in Japan with a safe and secure environment for receiving care. The goal is not to create high barriers to entry, but rather because the knowledge required for coordination to bridge the gap between the needs of foreign patients visiting Japan and the receiving medical institutions is extensive. Operating with superficial knowledge could potentially lead to various problems.

③ The Stance of the Receiving Medical Institution

Medical inbound services are recognized as distinct from the government's social security-based medical cost calculation system, as they apply private medical fees. However, there have been cases where medical institutions' explanations of treatment estimates to foreign patients, based on Japan's National Health Insurance system, have later impacted patient acceptance adjustments. For private medical services in medical inbound, entrusting explanations to foreign patients to a trusted medical travel support company could be one approach. In addition, regarding social medical corporations, efforts to accommodate them must proceed with consideration for their status as Japanese medical institutions.

④ Review of the Medical System for Foreign Visitors to Japan

While this is also being debated in the Diet, I believe we have reached the stage where, based on Japan's social security system, we must establish a robust system specifically for foreign visitors to Japan to ensure they can properly utilize Japan's medical infrastructure.

For example: ① Regarding the acceptance of foreign patients without Japanese National Health Insurance cards, by designating medical institutions comprehensively at the regional level, institutions unfamiliar with providing private medical care to foreigners can focus on insurance-covered treatments. This also directs uninsured patients to designated institutions, promoting efficient use of regional medical resources and capital allocation within community healthcare. Such measures would support the continuity of regional healthcare. Additionally, discussions include: ② for individuals other than those holding Japanese permanent residency (permanent residence permit), who are currently eligible for private (non-public) insurance, establishing a new public insurance option specifically for them during the period before they qualify for permanent residency insurance. This would differentiate them from foreign patients visiting Japan. To address perceptions of unfairness regarding free-riding on Japan's social security system, it may be necessary to reform the insurance-based medical treatment system.

Closing Thoughts

MEJ Chairman Kenji Shibuya, based on the government's basic policy, has adopted the slogan "Reclaiming the Medical Industry". This is grounded in the belief that healthcare should be positioned as one of Japan's key industries, and that economic security and industrial development are inseparable. Furthermore, he has stated that MEJ will continue to challenge itself to spread Japanese healthcare globally and garner international trust for Japan. In addition, a mechanism will eventually be needed to return and circulate the profits generated by each stakeholder in the medical inbound industry, viewed as a whole for Japan, back into regional healthcare. Our division also aims to play a part in this, contributing to the establishment of the medical inbound business as a core industry in Japan and to the creation of a system that supports the sustainability of Japan's social security system.

Article translated from the original Japanese by Naoyuki Haraoka, editor-in-chief of *Japan SPOTLIGHT* & executive managing director of the Japan Economic Foundation (JEF). JS

Takanori Matsushima joined JTB Corp. in April 1994 and was first assigned to the Fukuoka branch in Kyushu, where he was primarily responsible for corporate sales as well as planning concert tours and charter cruises. In 2002, he transferred to the Headquarters Sales Planning Department. In 2008, upon assignment to the Headquarters New Business Planning Department, he launched a new business initiative focused on medical inbound tourism, which he continues to lead to this day.