

Long-term Care Insurance Act and Enforcement Decree



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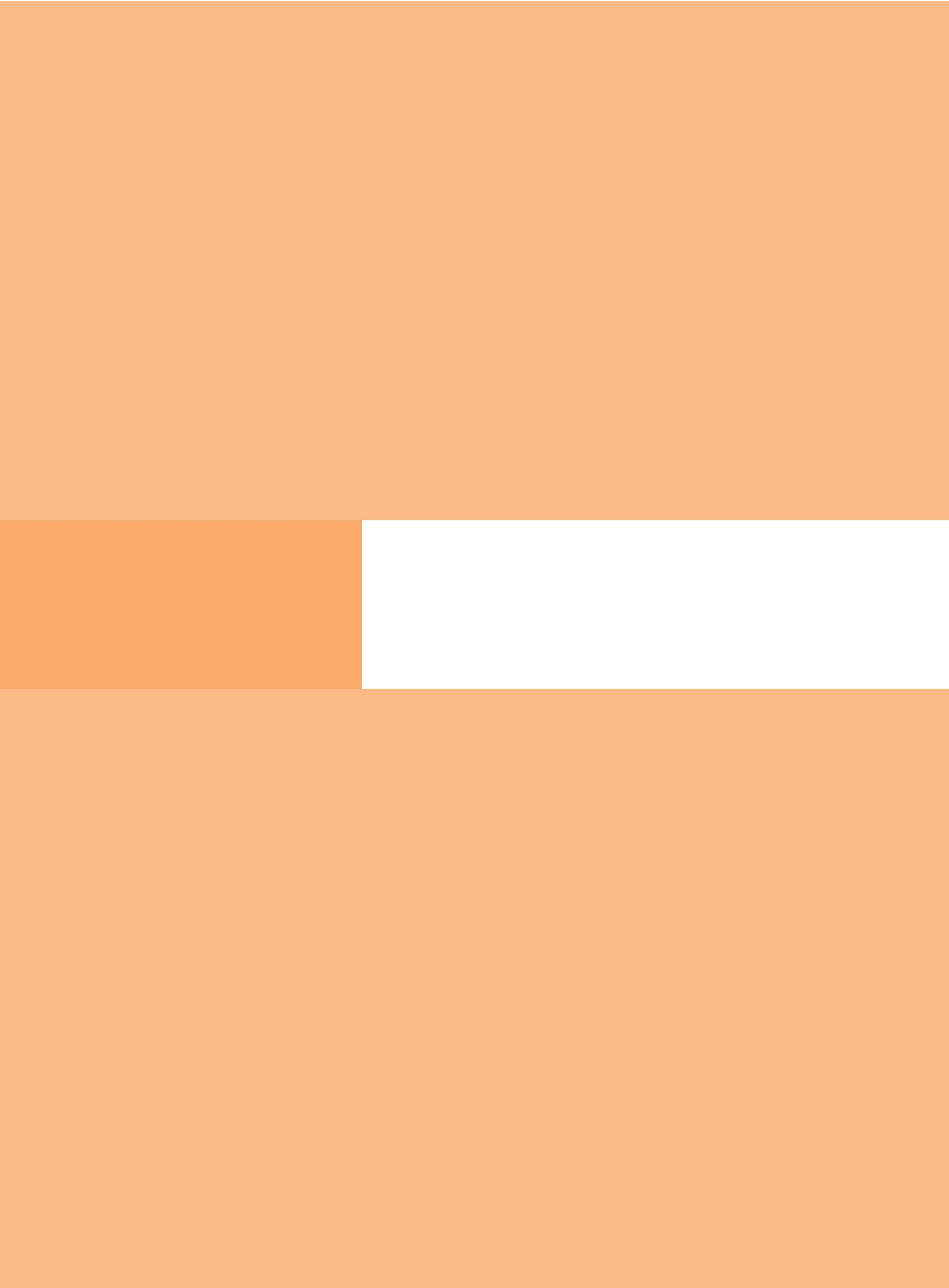
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LONG-TERM CARE INSURANCE ACT

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ENFORCEMENT DECREE OF THE
LONG-TERM CARE INSURANCE ACT





LONG-TERM CARE INSURANCE ACT

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LONG-TERM CARE INSURANCE ACT

[Enforcement Date 22. Jun, 2023.]

[Presidential Decree No.33420, 18. Apr, 2023., Partial Amendment]

CHAPTER I GENERAL PROVISIONS

Article 1 (Purpose)

The purpose of this Act is to pursue the improvement of health of senior citizens and the stabilization of their livelihood during post-retirement life, relieve family members from the burden of supporting them, and enhance the quality of life of citizens by providing for matters concerning long-term care benefits, such as aid provided for physical activities and household chores to senior citizens who have difficulties in carrying on with daily life on their own due to old age or senile diseases.

Article 2 (Definitions)

The terms used in this Act are defined as follows: <Amended on Dec. 11, 2018>

1. The term “senior citizen” means a senior citizen who is not less than 65 years of age or a person who is less than 65 years of age and suffers from a geriatric disease specified by Presidential Decree, such as Alzheimer's disease or a cerebrovascular disease;
2. The term “long-term care benefits” means services, such as aid in physical activities and household chores or nursing, or money, etc. paid instead of such services provided to a person who is determined to have difficulties in independent daily life for six months or longer, pursuant to Article 15 (2);
3. The term “long-term care program” means a program of providing long-term care benefits to senior citizens with financial resources, such as long-term care insurance contributions and subsidies from the State and local governments;
4. The term “long-term care institution” means an institution designated under Article 31 that provides long-term care benefits;
5. The term “long-term care worker” means a person who works for a long-term care institution to provide aid, etc. for physical activities or household chores of senior citizens.

Article 3 (Fundamental Principles for Providing Long-Term Care Benefits)

- (1) Long-term care benefits shall be provided to enable senior citizens to carry on with their daily life independently to the maximum extent possible according to their will and abilities. <Newly Inserted on Dec. 11, 2018>
- (2) Long-term care benefits shall be provided appropriately to the extent necessary for senior citizens, comprehensively taking into consideration their mental and physical conditions and living environments, and their family members' needs and choices. <Amended on Dec. 11, 2018>
- (3) Benefits for home care services, which allow a senior citizen to receive long-term care at home with his or her family members, shall be provided preferentially among long-term care benefits. <Amended on Dec. 11, 2018>
- (4) Long-term care benefits shall be provided along with medical services to prevent the worsening of senior citizens' mental and physical conditions and health. <Amended on Dec. 11, 2018>

Article 4 (Responsibilities of the State and Local Governments)

- (1) The State and a local government shall provide services necessary for senior citizens to maintain good mental and physical conditions (hereinafter referred to as “services for prevention of geriatric disease”) so that they can carry on with daily life independently.
- (2) The State may subsidize expenses incurred by a local government or the National Health Insurance Service under the National Health Insurance Act (hereinafter referred to as the “NHIS”) in providing services for prevention of geriatric diseases.
- (3) The State and a local government shall secure an appropriate number of long-term care institutions and support the establishment of long-term care institutions so as to smoothly provide long-term care benefits, taking into consideration the population of senior citizens, local characteristics, etc. <Amended on Dec. 11, 2018>
- (4) The State and a local government may provide administrative or financial support to the NHIS so that long-term care benefits can be smoothly provided.
- (5) The State and a local government shall fully endeavor to give better treatment to long-term care workers and improve their welfare and status. <Newly Inserted on May 29, 2016>
- (6) The State and a local government may develop and distribute standards for long-term care programs fit for regional characteristics. <Newly Inserted on Dec. 11, 2018>

Article 5 (Direction of the State's Policy on Long-Term Care Benefits)

The State shall, when it establishes and implements a master plan for long-term care pursuant to Article 6, endeavor to provide not only senior citizens but also all citizens who suffer hardship in

carrying on with daily life on their own, including the disabled, etc., with long-term care benefits and services of aiding physical activities and furthermore shall take measures to assist them in stabilizing their living and achieving self-support.

Article 6 (Master Plans for Long-Term Care)

- (1) The Minister of Health and Welfare shall establish and implement a master plan for long-term care with the following matters included therein for each five-year period in order to smoothly provide senior citizens with long-term care benefits: <Amended on May 29, 2016>
 1. The number of persons eligible for long-term care benefits each year and a plan for the procurement of financial resources;
 2. A scheme for the management of long-term care institutions and professional human resources for long-term care for each year;
 3. Matters concerning the treatment of long-term care workers;
 4. Other matters specified by Presidential Decree concerning long-term care of senior citizens.
- (2) The head of each local government shall establish and implement a detailed implementation plan in accordance with the master plan for long-term care under paragraph (1).

Article 6-2 (Fact-Finding Survey)

- (1) The Minister of Health and Welfare shall survey the following matters on a regular basis at an interval of three years in order to ascertain the current situation of long-term care services and shall publish the results of the survey:
 1. Matters concerning approval of eligibility for long-term care;
 2. Matters concerning the number of beneficiaries eligible for long-term care benefits (hereinafter referred to as “beneficiaries”) according to the rating of the assessment committee for long term care under Article 52 (hereinafter referred to as the “assessment committee”), the level of the benefits, and the degree of satisfaction of the beneficiaries;
 3. Matters concerning long-term care institutions;
 4. Matters concerning the working conditions, treatment, and number of long-term care staff;
 5. Other matters specified by Ordinance of the Ministry of Health and Welfare with regard to long-term care services.
- (2) Matters necessary for the methods, contents, etc. of the survey pursuant to paragraph (1) shall be prescribed by Ordinance of the Ministry of Health and Welfare.

[This Article Newly Inserted on May 29, 2016]

CHAPTER II LONG-TERM CARE INSURANCE

Article 7 (Long-Term Care Insurance)

- (1) The Minister of Health and Welfare shall exercise overall control over the long-term care insurance program.
- (2) The NHIS shall be the insurer of the long-term care insurance program.
- (3) Persons eligible for long-term care insurance (hereinafter referred to as “the insured of long-term care insurance”) shall be the insured under Articles 5 and 109 of the National Health Insurance Act. <Amended on Dec. 31, 2011>
- (4) Where a foreigner specified by Presidential Decree, such as a foreign worker defined in the Act on the Employment, etc. of Foreign Workers applies for exclusion, the NHIS may exclude such foreigner from the insured of long-term care insurance, as prescribed by Ordinance of the Ministry of Health and Welfare, notwithstanding paragraph (3). <Newly Inserted on Mar. 18, 2009; Jan. 18, 2010>

Article 8 (Collection of Long-Term Care Insurance Contribution)

- (1) The NHIS shall collect long-term care insurance contribution to finance the expenses incurred in running long-term care programs.
- (2) Long-term care insurance contribution under paragraph (1) shall be collected together with the insurance contribution under Article 69 of the National Health Insurance Act (hereafter in this Article referred to as “health insurance contribution”). The NHIS shall separate long-term care insurance contribution from health insurance contribution in its notice for payment. <Amended on Dec. 31, 2011>
- (3) The NHIS shall manage long-term care contribution and health insurance contribution, collected together pursuant to paragraph (2), in separate accounts, respectively.

Article 9 (Calculation of Long-Term Care Insurance Contribution)

- (1) Long-term care insurance contribution shall be calculated by subtracting expenses reduced or exempted pursuant to Article 74 or 75 of the National Health Insurance Act from the amount of insurance contribution calculated in accordance with Article 69 (4) and (5) and the proviso of Article 109 (9) of that Act and then by multiplying the amount after subtraction by the relevant long-term care insurance contribution rate in comparison of the health insurance contribution rate under Article 73 (1) of that Act. <Amended on Dec. 31, 2011; Dec. 21, 2021>
- (2) The long-term care insurance contribution rate under paragraph (1) shall be prescribed by Presidential Decree, subject to deliberation by the Long-Term Care Committee established under Article 45.

- (3) Notwithstanding paragraph (1), if it is necessary to apply the expenses reduced or exempted pursuant to Article 74 or 75 of the National Health Insurance Act differently in consideration of the characteristics of the long-term care insurance, the level of deduction of the expenses reduced or exempted may be determined differently, as prescribed by Presidential Decree.
- <Newly Inserted on Dec. 21, 2021>

Article 10 (Reduction and Exemption of Long-Term Care Insurance Contribution for Persons with Disabilities)

The NHIS may fully or partially reduce or exempt long-term care insurance contribution, as prescribed by Presidential Decree, for a person with a disability as defined in the Act on Welfare of Persons with Disabilities or a similar person specified by Presidential Decree, if the person is the insured of long-term care insurance or a dependent to the insured of long-term care insurance but fails to be determined as a beneficiary under Article 15 (2).

Article 11 (Application Mutatis Mutandis to Eligibility for Long-Term Care Insurance)

Articles 5, 6, 8 through 11, 69 (1) through (3), 76 through 86, 109 (1) through (9), and 110 of the National Health Insurance Act shall apply mutatis mutandis to the acquisition and forfeiture of eligibility for the insured of long-term care insurance or a dependent to the insured of long-term care insurance, the payment, collection, and disposition of deficits, of long-term care insurance contribution. In such cases, “insurance contribution” shall be construed as “long-term care insurance contribution”; “health insurance” as “long-term care insurance”; and “the insured” as “the insured of long-term care insurance.” <Amended on Dec. 31, 2011; Dec. 21, 2021>

CHAPTER III APPROVAL FOR LONG-TERM CARE

Article 12 (Eligibility for Application for Long-Term Care)

Persons eligible for filing an application for approval for long-term care are senior citizens and shall meet any of the following eligibility requirements:

1. The insured of long-term care insurance or a dependent to the insured of long-term care insurance;
2. A beneficiary under Article 3 (1) of the Medical Care Assistance Act (hereinafter referred to as “eligible recipient of medical benefits”).

Article 13 (Application for Approval for Long-Term Care)

- (1) A person who files an application (hereinafter referred to as “applicant”) for approval for long-term care (hereinafter referred to as “application”) with the NHIS, shall submit the application along with a referral issued by a medical doctor or an oriental medicine doctor (hereinafter referred to as “medical doctor's referral”), as prescribed by Ordinance of the Ministry of Health and Welfare: Provided, That a medical doctor's referral may be submitted up until the NHIS submits data to the assessment committee pursuant to Article 15 (1).
- (2) Notwithstanding paragraph (1), persons specified by Presidential Decree, such as persons who are unable to move around freely or persons, etc. who have difficulty in getting access to a medical institution because they reside in an island or a remote area, need not submit a medical doctor's referral.
- (3) Fees for issuing a medical doctor's referral, the method of allocation of such fees, the scope of issuers, and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare.

Article 14 (Investigation of Application for Approval for Long-Term Care)

- (1) Upon receipt of an application pursuant to Article 13 (1), the NHIS shall have its employees investigate the following matters, as prescribed by Ordinance of the Ministry of Health and Welfare: Provided, That where it is impracticable to conduct an investigation directly due to geographical circumstances, etc. or where it is deemed necessary for investigations, the NHIS may request the competent Special Self-Governing City, Special Self-Governing Province, or Si/Gun/Gu (Gu means an autonomous Gu; hereinafter the same shall apply) to conduct an investigation on its behalf or conduct a joint investigation: <Amended on Aug. 13, 2013>
 1. Mental and physical status of the applicant;
 2. Types and details of long-term care benefits that the applicant needs;
 3. Other matters specified by Ordinance of the Ministry of Health and Welfare as necessary for long-term care.
- (2) The NHIS shall endeavor to ensure that at least two of its employees investigate the matters referred to in the subparagraphs of paragraph (1). <Newly Inserted on Dec. 11, 2018>
- (3) A person engaged in an investigation pursuant to paragraph (1) shall give prior notice of the date and time, place of investigation and personal information on the person in charge of such investigation to the applicant. <Amended on Dec. 11, 2018>
- (4) Upon completion of an investigation, the NHIS or the Special Self-Governing City, a Special Self-Governing Province, or a Si/Gun/Gu in receipt of the investigation pursuant to the proviso of paragraph (1), shall prepare a report on the investigation findings. The Special Self-Governing City, Special Self-Governing Province or Si/Gun/Gu in receipt of the investigation shall without delay submit a report on the investigation findings to the NHIS. <Amended on Aug. 13, 2013; Dec. 11, 2018>

Article 15 (Assessment for Long-Term Care)

- (1) Upon completion of an investigation under Article 14, the NHIS shall submit a report on the investigation findings, the relevant application, a medical doctor's note, and other data necessary for examination to the competent assessment committee. <Amended on May 29, 2016>
- (2) If the assessment committee finds that an applicant meets the eligibility requirements for application under Article 12 and has difficulties in independent daily life for at least six months, it shall determine the applicant as a beneficiary based on the standards for assessment prescribed by Presidential Decree concerning mental and physical conditions, long-term care needs level, etc. <Amended on May 29, 2016>
- (3) If the assessment committee examines and assesses long-term care needs pursuant to paragraph (2), it may hear opinions of the persons concerned, such as the applicant, his or her family members, and the medical doctor who has issued the doctor's note.
- (4) The NHIS shall investigate the matters referred to in the subparagraphs of Article 14 (1) and submit the findings to the assessment committee if a person who is receiving or eligible to receive a long-term care benefit is suspected of any of the following: <Newly Inserted on Dec. 11, 2018>
 1. Having obtained approval of his or her eligibility for long-term care by fraud or other improper means;
 2. Having obtained approval of his or her eligibility for long-term care by causing an accident intentionally or as a result of his or her wrongdoing.
- (5) The assessment committee may adjust the rating of a beneficiary and determine whether an applicant is an eligible beneficiary pursuant to paragraph (2) based on the investigation findings submitted under paragraph (4). <Newly Inserted on Dec. 11, 2018; Mar. 31, 2020>

Article 16 (Period of Assessment for Long-Term Care)

- (1) Each assessment committee shall complete assessment for long-term care under Article 15 within 30 days from the day on which an applicant files an application: Provided, That the period may be extended within the maximum of 30 days, if a thorough investigation into an applicant is required or exceptional circumstances make it impossible to complete assessment within the prescribed period.
- (2) The NHIS shall, if the assessment committee intends to extend the periods of examination on approval and assessment for long-term care pursuant to the proviso of paragraph (1), notify the relevant applicant or his or her agent of details and grounds for such extension and the extended period.

Article 17 (Letter of Approval for Long-Term Care)

- (1) Upon completion of examination on approval and assessment for long-term care by the

assessment committee, the NHIS shall without delay prepare a letter of approval for long-term care with the following matters described therein and dispatch it to the beneficiary:

1. Long-term care rating;
 2. Types and details of long-term care benefits;
 3. Matters specified by Ordinance of the Ministry of Health and Welfare concerning long-term care benefits.
- (2) Upon completion of examination on approval and assessment for long-term care by the assessment committee, the NHIS shall notify of details of, and grounds for, such determination to each applicant who is determined as an ineligible beneficiary. In such cases, a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu (the head of a Gu means the head of an autonomous Gu; hereinafter the same shall apply) may request the NHIS to notify such details and grounds, and the NHIS so requested shall comply with the request. <Amended on Aug. 13, 2013>
- (3) When the NHIS sends a letter of approval for long-term care pursuant to paragraph (1), it shall prepare an individual long-term care use plan within the extent of the monthly cap under Article 28 and dispatch the plan along with the letter of approval so that long-term care benefits can be used efficiently. <Amended on Dec. 29, 2020>
- (4) Necessary matters concerning the methods of preparation of letters of approval for long-term care and an individual long-term care use plan under paragraphs (1) and (3) shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended on Dec. 29, 2020>

Article 18 (Matters to Be Considered in Preparation of Letters of Approval for Long-Term Care)

The NHIS shall take the following matters into consideration, when it determines the type and details of long-term care benefits pursuant to Article 17 (1) 2 in preparing letters of approval for long-term care:

1. The beneficiary's rating of long-term care and his or her living environment;
2. Needs and choices of the beneficiary and his or her family members;
3. Current status of facilities operated by the relevant long-term care institution, if such facilities are provided as benefits.

Article 19 (Effective Period of Approval for Long-Term Care)

- (1) The effective period of the approval for long-term care under Article 15 shall be at least one year and shall be prescribed by Presidential Decree.
- (2) The method of calculating the effective period under paragraph (1) and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare.

Article 20 (Renewal of Approval for Long-Term Care)

- (1) A beneficiary, who intends to continue to receive long-term care benefits after the effective period of the approval for long-term care under Article 19 terminates, shall file an application for renewal of approval for long-term care.
- (2) An application for renewal of approval for long-term care under paragraph (1) shall be filed at least 30 days before the end of the effective period.
- (3) Articles 12 through 19 shall apply mutatis mutandis to the procedure for renewal of approval for long-term care.

Article 21 (Change of Rating for Long-Term Care)

- (1) A beneficiary who receives long-term care benefits shall, if he or she intends to have the rating for long-term care or the type or details of long-term care benefits changed when receiving long-term care benefits, file an application for such change with the NHIS.
- (2) Articles 12 through 19 shall apply mutatis mutandis to procedures for change of a rating for long-term care.

Article 22 (Filing of Application for Approval for Long-Term Care through Agent)

- (1) If a person who intends to receive long-term care benefits or a beneficiary is unable to file an application for approval for long-term care, for renewal of approval for long-term care, or for change of the rating for long-term care in accordance with this Act on his or her own due to a physical or mental condition, one of his or her family members or relatives or any other interested party may act as his or her agent in filing such an application.
- (2) Any of the following persons may file an application on behalf of a person intending to receive a long-term care benefit or a beneficiary, who is unable to file an application for approval for long-term care, etc. under paragraph (1) in person, among residents in his or her jurisdiction, with the consent of such person or any family member of such person: <Amended on Apr. 23, 2019>
 1. A public official exclusively in charge of social welfare assigned under Article 43 of the Act on the Use and Provision of Social Security Benefits and Search for Eligible Beneficiaries;
 2. The head of a dementia care center established under Article 17 of the Dementia Management Act (limited to cases where a person who intends to receive a long-term care benefit or a beneficiary is a dementia patient defined in subparagraph 2 of Article 2 of that Act).
- (3) Notwithstanding paragraphs (1) and (2), where a person who intends to receive long-term care benefits or a beneficiary is unable to file an application for approval for long-term care or any

other application under paragraph (1), a person designated by the competent Special Self-Governing Mayor or Special Self-Governing Province Governor, or the head of the competent Si/Gun/Gu may act as an agent for such a person or beneficiary in filing the application. <Amended on Aug. 13, 2013>

- (4) Matters necessary for the methods of, and procedures for, etc. filing an application for approval for long-term care or any other application under paragraphs (1) through (3) shall be prescribed by Ordinance of the Ministry of Health and Welfare.

CHAPTER IV TYPES OF LONG-TERM CARE BENEFITS

Article 23 (Types of Long-Term Care Benefits)

- (1) Types of long-term care benefits provided under this Act are as follows: <Amended on Jun. 7, 2011; Dec. 29, 2015; Dec. 11, 2018>

1. Benefits for home care service:

- (a) Home visit care: Long-term care benefits provided in a manner that a long-term care worker visits a beneficiary's home, etc. to support the beneficiary's physical activities, household chores, etc.;
- (b) Home visit bathing: Long-term care benefits provided in a manner that a long-term care worker visits a beneficiary's home, etc. to give bath services to the beneficiary using bathing equipment;
- (c) Home visit nursing: Long-term care benefits provided in a manner that a nurse who is a long-term care worker visits a beneficiary's home, etc. to provide nursing services, assist in medical treatment, give counsel on care, or treat dental hygiene, etc. in accordance with a written instruction of a medical doctor, an oriental medicine doctor, or a dentist (hereinafter referred to as "written instruction for home visit nursing");
- (d) Day and night care: Long-term care benefits provided in a manner that a beneficiary is admitted to a long-term care institution for care for certain hours a day to receive educational or training programs, etc. for supporting his or her physical activities or for maintaining and improving mental and physical functions;
- (e) Short-term respite care: Long-term care benefits provided in a manner that a beneficiary is admitted to a long-term care institution for care for a certain period within the maximum prescribed by Ordinance of the Ministry of Health and Welfare to receive educational or training programs, etc. for supporting his or her physical activities or for maintaining and improving mental and physical functions;
- (f) Other benefits for home care services: Long-term care benefits prescribed by Presidential Decree provided in a manner that a beneficiary is provided with devices necessary to support his or her daily life and physical activities or to maintain and improve cognitive functions or with assistance for rehabilitation by home visit;

2. Institutional care benefits: Long-term care benefits provided in a manner that a beneficiary is admitted to a long-term care institution for a long term period to receive educational or training programs, etc. for supporting his or her physical activities or for maintaining and improving mental and physical functions;
3. Care allowances for special cases:
 - (a) Family care benefits in cash: Long-term care benefits reimbursed for family pursuant to Article 24;
 - (b) Exceptional care benefits in cash: Special long-term care benefits reimbursed pursuant to Article 25;
 - (c) Nursing expenses of a long-term care hospital: Long-term care benefits reimbursed for admission to a long-term care hospital pursuant to Article 26.
- (2) Necessary matters concerning types of, and standards for, long-term care institutions eligible for providing long-term care benefits pursuant to paragraph (1) 1 and 2 and the scope, duties and continuing education of long-term care workers for each type of long-term care benefit shall be prescribed by Presidential Decree.
- (3) The standards and procedures for, and the method and scope of, providing long-term care benefits shall be prescribed by Ordinance of the Ministry of Health and Welfare.

Article 24 (Family Care Benefits in Cash)

- (1) Where any of the following beneficiaries has received long-term care benefits equivalent to home visit care defined in Article 23 (1) 1 (a) from his or her family member, etc., the NHIS may provide the beneficiary with a family care benefit in cash in accordance with guidelines prescribed by Presidential Decree: <Amended on Jan. 15, 2019>
 1. A person who resides in an area determined and publicly notified by the Minister of Health and Welfare as an area in which long-term care institutions are significantly insufficient, such as an island or secluded area;
 2. A person recognized by the Minister of Health and Welfare as having difficulty in receiving long-term benefits provided by long-term care institutions due to a natural disaster or any other reason similar thereto;
 3. A person who needs to receive long term care from his or her family members, etc. on the grounds specified by Presidential Decree, such as physical or mental condition or personality.
- (2) Procedures for reimbursement of family care benefits in cash under paragraph (1) and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare.

Article 25 (Exceptional Care Benefits in Cash)

- (1) If a beneficiary has received long-term care benefits equivalent to home care or institutional

care benefits from a senior citizen care facility or any similar institution or facility other than long-term care institutions, the NHIS may reimburse some expenses incurred in receiving the relevant long-term care benefits to the beneficiary as exceptional care benefits in cash, in accordance with guidelines prescribed by Presidential Decree. <Amended on Jan. 15, 2019>

- (2) The scope of institutions or facilities eligible for recognition of long-term care benefits under paragraph (1), procedures for reimbursement of exceptional care benefits in cash, and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare.

Article 26 (Nursing Expenses of Long-Term Care Hospitals)

- (1) If a beneficiary is admitted to a long-term care hospital referred to in Article 3 (2) 3 (d) of the Medical Service Act, the NHIS may reimburse the beneficiary for some expenses incurred for long-term care as nursing expenses in the long-term care hospital, in accordance with guidelines prescribed by Presidential Decree. <Amended on Jan. 30, 2009; Jun. 7, 2011>
- (2) Procedures for reimbursement of nursing expenses in long-term care hospitals under paragraph (1) and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare.

CHAPTER V PROVISION OF LONG-TERM CARE BENEFITS

Article 27 (Provision of Long-Term Care Benefits)

- (1) A beneficiary becomes eligible for long-term care benefits on the day on which a letter of approval for long-term care under Article 17 (1) and an individual long-term care use plan under Article 17 (3) is served on the beneficiary. <Amended on Dec. 11, 2018; Dec. 29, 2020>
- (2) Notwithstanding paragraph (1), if a beneficiary has no family member who can take care of him or her or if any reason specified by Presidential Decree exists, the beneficiary becomes eligible for long-term care benefits even during the period from the day on which an application is filed to the day on which a letter of approval for long-term care is served.
- (3) A beneficiary shall present a letter of approval for long-term care and an individual long-term care use plan to a long-term care institution in order to receive a long-term care benefit: Provided, That if the beneficiary is unable to present a letter of approval for long-term care and an individual long-term care use plan, the long-term care institution may confirm his or her eligibility and other relevant matters by making a call to the NHIS, over the NHIS website or by other means. <Newly Inserted on Dec. 11, 2018; Dec. 29, 2020>
- (4) A long-term care institution shall prepare a plan for providing long-term care benefits based on a letter of approval for long-term care and an individual long-term care use plan presented by a beneficiary under paragraph (3) and shall notify the NHIS of the details of the plan with

the consent of the beneficiary. <Newly Inserted on Dec. 11, 2018; Dec. 29, 2020>

- (5) Detailed matters concerning the scope of, and the procedure for, approval for long-term care benefits under paragraph (2), the procedure for preparing plans for providing long-term care benefits under paragraph (4), and other relevant matters shall be prescribed by Presidential Decree. <Amended on Dec. 11, 2018>

[Title Amended on Dec. 11, 2018]

Article 27-2 (Account for Receipt of Care Allowance for Special Cases)

- (1) The NHIS shall pay care allowance for special cases into a bank account opened in the name of a beneficiary (hereinafter referred to as “account for receipt of care allowance for special cases”) upon request of the beneficiary: Provided, That when it is impracticable to transfer to an account for receipt of care allowance for special cases due to communication failure or other unavoidable reason prescribed by Presidential Decree, care allowance for special cases may be paid in cash or by other means prescribed by Presidential Decree.
- (2) A financial institution which opens accounts for receipt of care allowance for special cases shall ensure that only care allowance for special cases are transferred to such accounts.
- (3) The methods of and procedures for request under paragraph (1) and matters necessary to operate accounts for receipt of care allowance for special cases under paragraph (2) shall be prescribed by Presidential Decree.

[This Article Newly Inserted on Dec. 2, 2016]

Article 28 (Monthly Cap of Long-Term Care Benefits)

- (1) Long-term care benefits shall be provided within the extent of a monthly cap. In such cases, the monthly cap shall be calculated by taking into consideration the rating for long-term care, the type of long-term care benefits, etc.
- (2) The guidelines for, and the methods of, calculation of the monthly cap pursuant to paragraph (1) and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare.

Article 28-2 (Prohibition of Services Other than Benefits)

- (1) Neither a beneficiary nor a long-term care institution shall request or provide any of the following services (hereinafter referred to as “services other than benefits”) when the beneficiary is provided with or the long-term care institution provides long-term care benefits:
 1. Services only for a family member of the beneficiary;
 2. Services assisting the beneficiary or his or her family member in making a living;
 3. Other services for the daily life activities the beneficiary can perform without any difficulty.
- (2) Other detailed matters concerning the scope of services other than benefits, etc. shall be

prescribed by Ordinance of the Ministry of Health and Welfare.

[This Article Newly Inserted on Dec. 11, 2018]

Article 29 (Limitations on Long-Term Care Benefits)

- (1) Where a person who is receiving a long-term care benefit evades an investigation conducted under Article 15 (4), does not comply with a request made under Article 60, or refuses to reply under Article 61 without good cause, the NHIS may require the long-term care benefit to be fully or partially discontinued. <Amended on Mar. 31, 2020>
- (2) If a person who is receiving or eligible to receive a long-term care benefit is found to have participated in a long-term care institution's receiving expenses for long-term care benefits by fraud or other improper means, the NHIS may suspend his or her long-term care benefit or may limit the number of times and the duration for which the long-term care benefit is provided, within a period not exceeding one year. <Newly Inserted on Mar. 31, 2020>
- (3) The standards for suspension and limitations on long-term care benefits under paragraph (2) and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Newly Inserted on Mar. 31, 2020>

[This Article Wholly Amended on Dec. 11, 2018]

Article 30 (Application Mutatis Mutandis to Limitations on Long-Term Care Benefits)

Article 53 (1) 4 and (2) through (6), and Articles 54 and 109 (10) of the National Health Insurance Act shall apply mutatis mutandis to limitations on, and the suspension of, long-term care benefits to persons who default payment of insurance contribution under this Act. In such cases, "the insured" shall be construed as "the insured of long-term care insurance", "insurance benefit" as "long-term care benefit". <Amended on Dec. 31, 2011; Mar. 31, 2020>

CHAPTER VI LONG-TERM CARE INSTITUTIONS

Article 31 (Designation of Long-Term Care Institutions)

- (1) A person who intends to operate a long-term care institution that provides benefits for home care services prescribed in Article 23 (1) 1 or institutional care benefits referred to in Article 23 (1) 2 shall obtain a designation from a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu who has jurisdiction over the location of the institution after having the facilities and personnel necessary for long-term care prescribed by Ordinance of the Ministry of Health and Welfare. <Amended on Aug. 13, 2013; Dec. 11, 2018; Mar. 31, 2020>

- (2) An establishment that can be designated as a long-term care institution under paragraph (1) shall be an establishment prescribed by Presidential Decree from among the welfare facilities for senior citizens listed in Article 31 of the Welfare of Senior Citizens Act. <Amended on Mar. 31, 2020>
- (3) A Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu shall examine the following matters in designating a long-term care institution pursuant to paragraph (1). In such cases, the Special Self-Governing City Mayor, the Special Self-Governing Province Governor, or the head of the Si/Gun/Gu may request relevant materials from the NHIS or may hear its opinion: <Newly Inserted on Dec. 11, 2018; Mar. 31, 2020; Dec. 29, 2020>
 - 1. A history of long-term care benefits provided by a person who intends to operate a long-term care institution;
 - 2. Details of administrative dispositions imposed pursuant to this Act and statutes related to the operation of long-term care institutions, such as the Social Welfare Services Act and the Welfare of Senior Citizens Act, on a person who intends to operate a long-term care institution and a person who intends to work for such institution;
 - 3. A plan for operating a long-term care institution;
 - 4. Regional characteristics, such as the number of senior citizen population and demand for long-term care benefits in the relevant region;
 - 5. Other matters prescribed by the Special Self-Governing City Mayor, the Special Self-Governing Province Governor, or the head of the Si/Gun/Gu as deemed necessary for designating long-term care institutions.
- (4) Where a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu designates a long-term care institution pursuant to paragraph (1), he or she shall, without delay, notify the NHIS of the details of designation. <Amended on Aug. 13, 2013; Dec. 11, 2018>
- (5) Where a long-term care institution established and operated by a person other than a medical institution that provides benefits for home care services defined in Article 23 (1) 1 provides home visit nursing, the long-term care institution shall hire a nurse as the responsible personnel for home visit nursing. <Newly Inserted on Dec. 11, 2018>
- (6) The procedure for designation of long-term care institutions and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended on Dec. 11, 2018>

Article 32

Deleted. <Dec. 11, 2018>

Article 32-2 (Grounds for Disqualification)

None of the following persons can be designated as a long-term care institution under Article 31:
<Amended on Mar. 13, 2018; Dec. 11, 2018>

1. A minor, person under adult guardianship, or person under limited guardianship;
2. A mentally ill person defined in subparagraph 1 of Article 3 of the Act on the Improvement of Mental Health and the Support for Welfare Services for Mental Patients: Provided, That this shall not apply to a person whom a specialized medical doctor deems appropriate to engage in establishing and operating a long-term care institution;
3. A person addicted to narcotics defined in subparagraph 1 of Article 2 of the Narcotics Control Act;
4. A bankrupt who has not been reinstated;
5. A person in whose case five years have not passed yet since imprisonment without labor or a heavier punishment declared by a court was completely executed (or is deemed to have been completely executed) or exempted;
6. A person who is subject to suspension of execution of imprisonment without labor or heavier punishment declared by a court;
7. A corporation whose representative falls under any of subparagraphs 1 through 6.

[This Article Newly Inserted on Dec. 29, 2015]

Article 32-3 (Valid Period of Designation of Long-Term Care Institution)

The valid period of a long-term care institution designated under Article 31 is six years from the date of designation of the long-term care institution.

[This Article Newly Inserted on Dec. 11, 2018]

Article 32-4 (Renewal of Designation of Long-Term Care Institution)

- (1) The head of a long-term care institution who intends to remain designated as such even after the valid period of designation under Article 32-3 ends shall apply for renewal of the designation with a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu having jurisdiction over the long-term care institution within 90 days prior to the expiration of the valid period of the designation.
- (2) A Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu in receipt of an application for renewal under paragraph (1) may request additional materials from the applicant long-term care institution or require a subordinate public official to conduct an on-site examination, if deemed necessary for examining the application for renewal.

- (3) Where the renewal of designation under paragraph (1) is not completed within the valid period of the designation, such designation is deemed to be valid until a decision on the relevant application is made after examination.
- (4) After having examined an application for renewal, a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu shall without delay notify the head of the relevant long-term care institution of the result of examination.
- (5) Where a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu refuses to renew designation, Article 37 (2) and (5) shall apply mutatis mutandis to the notification of details and measures to protect the rights and interests of beneficiaries.
- (6) Other necessary matters for the criteria for the renewal of designation, the renewal procedure and method, etc. shall be prescribed by Ordinance of the Ministry of Health and Welfare.

[This Article Newly Inserted on Dec. 11, 2018]

Article 33 (Changes in Facilities or Human Resources of Long-Term Care Institutions)

- (1) To change significant matters prescribed by Ordinance of the Ministry of Health and Welfare, such as facilities or human resources, the head of a long-term care institution shall obtain a changed designation from the competent Special Self-Governing City Mayor or Special Self-Governing Province Governor, or the head of the competent Si/Gun/Gu, as prescribed by Ordinance of the Ministry of Health and Welfare.
- (2) To change any matter other than the matters referred to in paragraph (1), the head of a long-term institution shall report such change to the competent Special Self-Governing City Mayor or Special Self-Governing Province Governor, or the head of the competent Si/Gun/Gu, as prescribed by Ordinance of the Ministry of Health and Welfare.
- (3) After issuing a changed designation under paragraph (1) or receiving a report on change under paragraph (2), a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu shall without delay notify the NHIS thereof.

[This Article Wholly Amended on Dec. 11, 2018]

Article 33-2 (Installation of Closed-Circuit Television Cameras)

- (1) A person who operates a long-term care institution shall install or manage closed-circuit television cameras under the Personal Information Protection Act and other relevant statutes or regulations (hereinafter referred to as “closed-circuit television camera”) to ensure the safety of beneficiaries, such as the prevention of elderly abuse, and provide security for the long-term care institution: Provided, That the same shall not apply in any of the following cases:

1. Where benefits for home care service referred to in Article 23 (1) 1 are provided only;
 2. Where a person who operates a long-term care institution has reported to the Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu with the consent of all of the beneficiaries or their guardians;
 3. Where a person who has established or operates a long-term care institution, has installed network cameras under the Personal Information Protection Act and other relevant statutes or regulations after obtaining consent from all of the beneficiaries, their guardians, or persons working for the long-term care institution.
- (2) A person who installs or manages closed-circuit television cameras pursuant to paragraph (1) shall observe the following so as not to infringe on the rights of data subjects, such as beneficiaries and persons working for a long-term care institution:
1. He or she shall collect video information to the minimum extent possible by lawful and legitimate means to ensure the safety of beneficiaries, such as the prevention of elderly abuse, and to provide security for the long-term care institution, and shall make sure that such information is not used for any purpose other than the intended purpose;
 2. He or she shall manage video information safely, in consideration of the possibility of infringing on the rights of data subjects, such as beneficiaries and persons working for long-term care institutions, and the degree of harm involved;
 3. He or she shall handle video information in a manner that minimizes the invasion of privacy of data subjects, such as beneficiaries and persons working for long-term care institutions.
- (3) A person who operates a long-term care institution shall keep video information recorded by a closed-circuit television camera for at least 60 days.
- (4) The State and a local government may wholly or partially subsidize expenses incurred in installing closed-circuit television cameras under paragraph (1).
- (5) Matters necessary for the standards for installing and managing closed-circuit television cameras under paragraph (1), the methods, procedures and requirements for obtaining consent or filing a report, and the standards, period, etc., for storing video information under paragraph (3) shall be prescribed by Ordinance of the Ministry of Health and Welfare.

[This Article Newly Inserted on Dec. 21, 2021]

Article 33-3 (Prohibition of Inspection of Video Information)

- (1) No person who installs or manages closed-circuit television cameras shall make the video information under Article 33-2 (3) available for inspection, except in any of the following cases:
1. Where a beneficiary requests inspection, in accordance with the timing, procedures, methods, etc. of inspection as prescribed by Ordinance of the Ministry of Health and Welfare, to verify matters related to him or her, to protect his or her own life, body and property;

2. Where a beneficiary's guardian requests inspection, in accordance with the timing, procedures, methods, etc. of inspection prescribed by Ordinance of the Ministry of Health and Welfare, to ensure the safety of the beneficiary;
 3. Where a public institution defined in subparagraph 6 (a) of Article 2 of the Personal Information Protection Act requests inspection to conduct the affairs related to the safety of senior citizens prescribed in Article 39-11 of the Welfare of Senior Citizens Act or other statutes or regulations;
 4. Where inspection is necessary to investigate crimes, to institute or maintain public prosecution, or to conduct trial affairs of a court;
 5. Other cases where an institution conducting the affairs related to the safety of senior citizens as prescribed by Ordinance of the Ministry of Health and Welfare requests inspection in order to conduct such affairs in accordance with the timing, procedures, methods, etc. of inspection prescribed by Ordinance of the Ministry of Health and Welfare.
- (2) No person who operates a long-term care institution shall conduct any of the following acts:
1. Arbitrarily manipulating a closed-circuit television camera for any purpose other than the purpose of the installation specified in Article 33-2 (1), or making it focus on a place other than the originally intended place;
 2. Using its sound recording function, or storing video information in a device or apparatus other than the storage device prescribed by Ordinance of the Ministry of Health and Welfare.
- (3) A person who operates a long-term care institution shall take technical, managerial, and physical measures necessary to secure safety, such as formulating internal management plans and keeping access records, to prevent the video information referred to in Article 33-2 (3) from being lost, stolen, leaked, falsified, or damaged, as prescribed by Presidential Decree.
- (4) To ensure that the rights of data subjects, such as beneficiaries and persons working for long-term care institutions, are not infringed due to the installation or management of closed-circuit television cameras installed at long-term care institutions or the inspection of the relevant video information, the State and local governments shall examine and check the actual status of installation, management, and inspection at least once a year, as prescribed by Ordinance of the Ministry of Health and Welfare.
- (5) Except as provided in this Act, the Personal Information Protection Act (except Article 25) shall apply to the installation and management of closed-circuit television cameras, and to the inspection of the relevant video information.

[This Article Newly Inserted on Dec. 21, 2021]

Article 34 (Providing Information on Long-Term Care Institutions)

- (1) Each long-term care institution shall publish records of its current status, such as details of benefits provided by the long-term care institution and its facilities, human resources, etc. on

the website operated by the NHIS in order to help each beneficiary easily choose long-term care benefits and assure the quality of benefits provided by the long-term care institution.

- (2) The details and methods of, and procedures for, the publication under paragraph (1) and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare.

Article 35 (Obligations of Long-Term Care Institutions)

- (1) No long-term care institution shall, upon receiving an application for long-term care benefits from a beneficiary, refuse to provide long-term care benefits to the beneficiary: Provided, That the foregoing shall not apply if the long-term care institution is filled to capacity or if any other good cause exists.
- (2) A long-term care institution shall provide long-term care benefits in compliance with the standards and procedure for, and the method of, providing long-term benefits prescribed in Article 23 (3).
- (3) The head of a long-term care institution shall issue a statement of expenses for long-term care benefits to the beneficiary who has received such long-term care benefits.
- (4) The head of a long-term care institution shall keep and manage records on the provision of long-term care benefits, and neither the head nor an employee of a long-term care institution shall prepare any false document about the provision of a long-term care benefit. <Newly Inserted on Mar. 17, 2010; Dec. 29, 2015>
- (5) No long-term care institution shall, for its profit, exempt or reduce a payment made by a beneficiary as expenses for home care and institutional care benefits (hereinafter referred to as “co-payment”), in addition to the amount exempted under Article 40 (2) or reduced under Article 40 (4). <Newly Inserted on Aug. 13, 2013; Dec. 11, 2018; Dec. 21, 2021>
- (6) No person shall introduce, refer, or solicit a beneficiary to a long-term care institution or instigate another person to commit such an act by offering or promising to offer money, goods, labor, entertainment, or any other benefits, for profit-making. <Newly Inserted on Aug. 13, 2013>
- (7) A statement of expenses for long-term care benefits under paragraph (3), details of records on the provision of long-term care benefits to be recorded and managed pursuant to paragraph (4) and the period of retaining such records, and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended on Mar. 17, 2010; Aug. 13, 2013>

[Title Amended on Aug. 13, 2013]

Article 35-2 (Financial Accounting Standards for Long-Term Care Institutions)

- (1) The head of a long-term care institution shall operate the long-term care institution in a transparent manner in accordance with the financial accounting standards prescribed by

Ordinance of the Ministry of Health and Welfare (hereinafter referred to as “financial accounting standards for long-term care institutions”): Provided, That the financial accounting standards under Article 34 (4) of the Social Welfare Services Act shall apply to the social welfare facilities established pursuant to Article 34 of that Act, from among long-term care institutions. <Amended on Dec. 21, 2021>

- (2) The Minister of Health and Welfare shall consider characteristics of each long-term care institution, the timing for enforcement, etc. when he or she formulates the financial accounting standards for long-term care institutions.

[This Article Newly Inserted on May 29, 2016]

Article 35-3 (Human Rights Education)

- (1) A person who operates the long-term care institution prescribed by Presidential Decree and employees thereof shall undergo education on human rights (hereafter in this Article referred to as “human rights education”). <Amended on Dec. 11, 2018>
- (2) A person who operates the long-term care institution prescribed by Presidential Decree may offer human rights education to beneficiaries using his or her institution. <Amended on Dec. 11, 2018>
- (3) The Minister of Health and Welfare may designate a human rights education institute to efficiently provide human rights education under paragraphs (1) and (2). In such cases, expenses for human rights education may be subsidized within budgetary limits, and the designated education institute may collect charges from the persons subject to human rights education upon approval from the Minister of Health and Welfare.
- (4) Where a human rights education institute designated pursuant to paragraph (3) falls under any of the following, the Minister of Health and Welfare may revoke the designation or order the institute to suspend its operation for up to six months: Provided, That if the institute falls under subparagraph 1, the designation shall be revoked:
 1. Where it is designated by fraud or other improper means;
 2. Where a human rights education institute fails to meet any of the requirements for designation as prescribed by Ordinance of the Ministry of Health and Welfare under paragraph (5);
 3. Where it is discovered that a human rights education institute significantly lacks the ability to conduct human rights education.
- (5) Necessary matters regarding persons subject to and curricula and methods of human rights education under paragraphs (1) and (2), designation of the institute under paragraph (3) and criteria for revocation of designation and suspension of operation of the institute under paragraph (4) shall be prescribed by Ordinance of the Ministry of Health and Welfare.

[This Article Newly Inserted on Mar. 13, 2018]

Article 35-4 (Protection of Long-Term Care Workers)

- (1) Where a long-term care worker requests a remedy to solve a grievance on any of the following grounds, the head of a long-term care institution shall take proper measures, such as changing his or her duties, as prescribed by Presidential Decree:
 1. Where a beneficiary or his or her family member perpetrates a verbal abuse, physical assault, sexual harassment, or sexual violence against the long-term care worker or causes bodily injury to the long-term care worker;
 2. Where a beneficiary or his or her family member asks the long-term care worker to provide services other than benefits referred to in the subparagraphs of Article 28-2 (1).
- (2) The head of a long-term care institution shall not ask a long-term care worker to do any of the following acts:
 1. Providing services other than benefits referred to in the subparagraphs of Article 28-2 (1);
 2. Making a full or partial payment of a co-payment.

[This Article Newly Inserted on Dec. 11, 2018]

Article 35-5 (Purchase of Insurance)

- (1) A long-term care institution may purchase insurance (hereinafter referred to as “professional liability insurance”) that provides coverage for legal liability for damages due to injuries to beneficiaries or other damage or loss to such beneficiaries, which may arise while its employees offer long-term care benefits.
- (2) Where a long-term care institution fails to purchase professional liability insurance, the NHIS may reduce some expenses for the long-term care benefits it pays to the long-term care institution under Article 38 for the period not covered by the professional liability insurance.
- (3) Matters necessary for the standards for reducing expenses for long-term care benefits under paragraph (2), etc. shall be prescribed by Ordinance of the Ministry of Health and Welfare.

[This Article Newly Inserted on Apr. 23, 2019]

Article 36 (Reporting on Closure of Long-Term Care Institutions)

- (1) Where the head of a long-term care institution intends to close or suspend its business operations, he or she shall report it to the competent Special Self-Governing City Mayor or Special Self-Governing Province Governor, or the head of the competent Si/Gun/Gu at least 30 days before the scheduled date of business closure or suspension. Upon receipt of such report, the competent Special Self-Governing City Mayor or Special Self-Governing Province Governor, or the head of the competent Si/Gun/Gu shall without delay notify the NHIS thereof.
<Amended on Aug. 13, 2013>
- (2) Where the head of a long-term care institution fails to apply for renewal of designation as

required under Article 32-4 within 30 days before the expiration of the valid period of the designation, the competent Special Self-Governing City Mayor or Special Self-Governing Province Governor, or the head of the competent Si/Gun/Gu shall notify the NHIS thereof. <Newly Inserted on Dec. 11, 2018>

- (3) Where the head of a long-term care institution intends to close or suspend its business operations or intends not to renew the designation thereof, he or she shall take the following measures to protect the rights and interests of beneficiaries, as prescribed by Ordinance of the Ministry of Health and Welfare: <Newly Inserted on Dec. 29, 2015; Dec. 11, 2018; Apr. 23, 2019; Dec. 21, 2021>
 1. A measure formulating and implementing a plan for the beneficiaries who use the long-term care institution to choose and use another long-term care institution;
 2. A measure settling co-payments made by the beneficiaries to the long-term care institution under Article 40 (1) and (3), if any;
 3. Other measures prescribed by Ordinance of the Ministry of Health and Welfare as deemed necessary to protect the rights and interests of beneficiaries.
- (4) Where the head of a long-term care institution submits a report on closure or suspension of business operations pursuant to paragraph (1) or fails to apply for renewal of designation as required under Article 32-4 within 30 days before the expiration of the valid period, the competent Special Self-Governing City Mayor, Special Self-Governing Province Governor, or the head of the competent Si/Gun/Gu shall confirm whether the head of the long-term care institution has taken measures for protecting rights and interests of beneficiaries in accordance with the subparagraphs of paragraph (3), and shall recommend the long-term care institution to withdraw the closure or suspension of business operations or to apply for renewal of designation, or shall take other measures, if it is anticipated that the closure or suspension of business operations will cause a serious problem in providing long-term care benefits due to the absence of alternative long-term care institutions nearby or due to other circumstances. <Amended on Dec. 29, 2015; Dec. 11, 2018; Apr. 23, 2019>
- (5) Where a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu issues an order to a medical welfare facility for senior citizens or any similar facility (limited to cases where the facility concerned is operated by a long-term care institution) to suspend or close business operations pursuant to Article 43 of the Welfare of Senior Citizens Act, he or she shall without delay notify the NHIS of details of the order. <Amended on Aug. 13, 2013; Dec. 29, 2015; Dec. 11, 2018>
- (6) Where the head of a long-term care institution files a report on the closure or suspension of business operations pursuant to paragraph (1) or the valid period of designation expires due to his or her failure to apply for renewal of the designation of the long-term care institution, he or she shall transfer records relating to the provision of long-term care benefits to the NHIS, as prescribed by Ordinance of the Ministry of Health and Welfare: Provided, That the head of a long-term care institution who files a report on suspension may retain records relating to the provision of long-term care benefits under his or her custody upon approval of the NHIS by not later than the date before the scheduled date of suspension of business

operations. <Newly Inserted on Mar. 17, 2010; Aug. 13, 2013; Dec. 11, 2018>

[Title Amended on Dec. 11, 2018]

Article 36-2 (Corrective Orders)

A Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu may order any of the following long-term care institutions to make corrections within a given period of six months: <Amended on Dec. 21, 2021>

1. Where a long-term care institution fails to comply with the standards for installing or managing closed-circuit television cameras, and for storing video information under Article 33-2;
2. Where a long-term care institution violates the financial accounting standards for long-term care institutions under Article 35-2.

[This Article Newly Inserted on May 29, 2016]

Article 37 (Revocation of Designation as Long-Term Care Institutions)

(1) In any of the following cases, the competent Special Self-Governing City Mayor or Special Self-Governing Province Governor, or the head of the competent Si/Gun/Gu may revoke the designation of a long-term care institution or issue an order to suspend its business operations for a period not exceeding six months: Provided, That he or she shall revoke the designation in the case of subparagraph 1, 2-2, 3-5, 7, or 8: <Amended on Aug. 13, 2013; Dec. 29, 2015; Dec. 11, 2018; Mar. 31, 2020>

1. Where it is designated by fraud or other improper means;
 - 1-2. Where a long-term care institution provides services other than benefits, in violation of Article 28-2: Provided, That the foregoing shall not apply where the head of a long-term care institution has not been negligent in exercising reasonable care and supervision over its business to prevent such violation;
2. Where a long-term care institution fails to meet the standards for the designation under Article 31 (1);
 - 2-2. Where a long-term care institution falls under any subparagraph of Article 32-2: Provided, That the foregoing shall not apply where the representative of a corporation that falls under subparagraph 7 of Article 32-2 is replaced within three months thereafter;
3. Where a long-term care institution refuses to provide long-term care benefits, in violation of Article 35 (1);
 - 3-2. Where a long-term care institution exempts or reduces a co-payment, in violation of Article 35 (5);
 - 3-3. Where a long-term care institution is involved in the introduction, referral, or solicitation of a beneficiary, or instigates a person to commit such an act, in violation of Article 35 (6);

- 3-4. Where a long-term care institution violates any subparagraph of Article 35-4 (2);
- 3-5. Where a long-term care institution fails to provide long-term care benefits for one year or more without reporting on the closure or suspension of business operations under Article 36 (1);
- 3-6. Where a long-term care institution fails to comply with a corrective order issued under Article 36-2 or commits accounting fraud;
- 3-7. Where a long-term care institution refuses, obstructs, or evades an evaluation conducted under Article 54 without good cause;
- 4. Where a long-term care institution claims expenses for benefits for home care services or institutional care benefits by fraud or other improper means;
- 5. Where a long-term care institution fails to comply with an order to submit records pursuant to Article 61 (2); submits false records; refuses, interferes with, or evades an inquiry or inspection; or provides a false response to such inquiry or inspection;
- 6. Where a worker, etc. of a long-term care institution commits any of the following: Provided, That the foregoing shall not apply where the head of a long-term care institution has not been negligent in exercising reasonable care and supervision over its business to prevent such violation:
 - (a) Committing assault and battery upon the body of a beneficiary or inflicting any injury upon a beneficiary;
 - (b) Committing sexual violence or sexual harassment that leads to a sense of sexual shame upon a beneficiary;
 - (c) Abandoning a beneficiary under his or her custody or supervision or inadvertently neglecting basic protective measures, including sheltering, food, and clothing, or medical treatment;
 - (d) Using money or valuables donated or supplied for a beneficiary for any purpose other than the intended one;
 - (e) Emotional abuse harming the mental health of a beneficiary, such as verbal abuse, intimidation, and threat;
- 7. Where a long-term care institution provides long-term care benefits during a period of business suspension;
- 8. Where the business registration under Article 8 of the Value-Added Tax Act or the business registration or taxpayer code number under Article 168 of the Income Tax Act is canceled.
- (2) Where a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu revokes designation or issues an order to suspend business operations pursuant to paragraph (1), he or she shall without delay notify the NHIS thereof and shall notify the Minister of Health and Welfare thereof as prescribed by Ordinance of the Ministry of Health and Welfare. In such cases, the head of a Si/Gun/Gu shall notify the Minister of Health and Welfare thereof via the competent Special Metropolitan City Mayor, Metropolitan City Mayor, or Do Governor. <Amended on Aug. 13, 2013>

- (3) Deleted. <Dec. 11, 2018>
- (4) Deleted. <Dec. 11, 2018>
- (5) Where the designation of a long-term care institution is revoked or its business operations are suspended under paragraph (1), a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu shall actively endeavor to protect the rights and interests of the beneficiaries who use the long-term care institution. <Newly Inserted on Apr. 23, 2019>
- (6) A Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu shall take the following measures to protect the rights and interests of beneficiaries pursuant to paragraph (5), as prescribed by Ordinance of the Ministry of Health and Welfare: <Newly Inserted on Dec. 29, 2015; Dec. 11, 2018; Apr. 23, 2019>
 - 1. A measure notifying the beneficiaries or their guardians of the details of the administrative disposition made under paragraph (1) by mail, via an information and communication network, or by other similar means;
 - 2. A measure that enables the beneficiaries who use the long-term care institution to choose and use another long-term care institution.
- (7) The head of a long-term care institution whose designation is revoked or whose business operations are suspended under paragraph (1) shall settle co-payments made by beneficiaries to the long-term care institution under Article 40 (1) and (3), if any. <Newly Inserted on Apr. 23, 2019; Dec. 21, 2021>
- (8) None of the following persons can be designated as a long-term care institution under Article 31: <Amended on Aug. 13, 2013; Dec. 29, 2015; Dec. 11, 2018; Apr. 23, 2019>
 - 1. A person (including the representative of a corporation, if the person is a corporation) in whose case three years have not passed yet since his or her designation was revoked pursuant to paragraph (1);
 - 2. A person (including the representative of a corporation, if the person is a corporation) whose business is suspended after an order to suspend business is issued pursuant to paragraph (1).
- (9) The guidelines for administrative dispositions pursuant to paragraph (1) shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended on Aug. 13, 2013; Dec. 29, 2015; Dec. 11, 2018; Apr. 23, 2019>

Article 37-2 (Imposition of Penalty Surcharges)

- (1) Where a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu issues an order for suspension of business to a long-term care institution for a violation specified in any subparagraph of Article 37 (1) (excluding Article 37 (1) 4), he or she may, if deemed that the suspension of business causes severe inconvenience to beneficiaries who use the relevant long-term care institution or if any extraordinary

circumstance specified by the Minister of Health and Welfare exists, impose a penalty surcharge not exceeding 200 million won on the long-term care institution in lieu of the order for suspension of business: Provided, That the foregoing shall not apply where he or she issues an order for suspension of business for a violation specified in Article 37 (1) 6, as prescribed by Ordinance of the Ministry of Health and Welfare. <Amended on Mar. 13, 2018; Dec. 11, 2018>

- (2) Where a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu is required to issue an order for suspension of business to a long-term care institution for a violation specified in Article 37 (1) 4, he or she may, if deemed that the suspension of business causes severe inconvenience to beneficiaries who use the relevant long-term care institution or if any extraordinary circumstance specified by the Minister of Health and Welfare exists, impose a penalty surcharge not exceeding five times the amount claimed by fraud or other improper means on the long-term care institution in lieu of the order for suspension of business. <Amended on Mar. 13, 2018; Dec. 11, 2018>
- (3) The amount of a penalty surcharge to be imposed by type and degree of violations subject to the imposition of penalty surcharges under paragraph (1) or (2), the procedure for the imposition of penalty surcharges, and other necessary matters shall be prescribed by Presidential Decree.
- (4) If a person upon whom a penalty surcharge has been imposed under paragraph (1) or (2) fails to pay it by the due date for payment, the competent Special Self-Governing City Mayor or Special Self-Governing Province Governor, or the head of the competent Si/Gun/Gu shall collect it in the same manner as delinquent local taxes are collected.
- (5) A Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu shall keep and maintain records of the imposition and collection of penalty surcharges under paragraph (1) or (2), as prescribed by Ordinance of the Ministry of Health and Welfare.

[This Article Newly Inserted on Aug. 13, 2013]

Article 37-3 (Publication of Violations)

- (1) If a disposition made under Article 37 or 37-2 against a long-term care institution becomes final in either of the following cases on the ground that it filed a false claim for expenses for home care or institutional care benefits, the Minister of Health and Welfare, the competent Special Self-Governing City Mayor or Special Self-Governing Province Governor, or the head of the competent Si/Gun/Gu shall publish the information specified by Presidential Decree, such as the violation, the details of the disposition, the name and address of the long-term care institution, the name of the head of the long-term care institution, and other information necessary to distinguish it from other long-term care institutions: Provided, That the foregoing shall not apply if publication is useless due to such reasons as closure of a long-term care institution: <Amended on Mar. 31, 2020>
 1. Where the amount of the false claim is at least 10 million won;

2. Where the amount of the false claim is at least 10/100 of the total expenses for long-term care benefits.
- (2) If a disposition made under Article 37 or 37-2 against a long-term care institution becomes final on the grounds that it fails to comply with an order to submit data under Article 61 (2); submitted false data; refused, interfered with, or evaded an inquiry or inspection; or provided a false response, the Minister of Health and Welfare, the competent Special Self-Governing City Mayor or Special Self-Governing Province Governor, or the head of the competent Si/Gun/Gu shall publish the information specified by Presidential Decree, such as the violation, the details of the disposition, the name and address of the long-term care institution, the name of the head of the long-term care institution, and other information necessary to distinguish it from other long-term care institutions: Provided, That the foregoing shall not apply if publication is useless due to such reasons as closure of a long-term care institution, or if a long-term care institution submits data or responds to an inquiry or inspection under Article 61 (2) before the violation and relevant information are published. <Newly Inserted on Mar. 31, 2020>
- (3) In order to deliberate on whether to publish information under paragraphs (1) and (2), the Minister of Health and Welfare, a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu may establish and operate a committee for deliberation on publication. <Amended on Mar. 31, 2020>
- (4) The methods of determining whether to publish information under paragraphs (1) and (2), the methods of and procedures for publication, and matters necessary for the establishment and operation of the committee for deliberation on publication under paragraph (3) shall be prescribed by Presidential Decree. <Amended on Mar. 31, 2020>

[This Article Newly Inserted on Aug. 13, 2013]

Article 37-4 (Succession to Effects of Administrative Dispositions)

- (1) The effects of an administrative disposition imposed for a violation specified in any subparagraph of Article 37 (1) (hereinafter referred to as “administrative disposition”) are succeeded to by any of the following persons for three years from the date of imposition of the administrative disposition: <Amended on Dec. 29, 2015; Dec. 11, 2018>
 1. A transferee, where a long-term care institution is transferred;
 2. A corporation newly incorporated as a consequence of a merger of corporations or surviving the merger, where corporate long-term care institutions are merged;
 3. A person (including the representative of a corporation) who operates a long-term care institution at the place where the long-term care institution he or she has closed is located and who has been punished by an administrative disposition or his or her spouse or lineal relatives by blood.
- (2) If proceedings for an administrative disposition are pending, such proceedings may continue against any of the following persons: <Amended on Dec. 29, 2015>

1. A transferee, where a long-term care institution is transferred;
 2. A corporation newly incorporated as a consequence of a merger of corporations or surviving the merger, where corporate long-term care institutions are merged;
 3. A person (including the representative of a corporation) who operates a long-term care institution at the place where the long-term care institution he or she has closed is located within three years after the closure and who has committed the relevant violation or his or her spouse or lineal relatives by blood.
- (3) Notwithstanding paragraphs (1) and (2), the foregoing paragraphs shall not apply to a person specified in any subparagraph of paragraph (1) or (2) (hereinafter referred to as “transferee, etc.”), if the person proves that he or she has become unaware of the administrative disposition or violation at the time of acquisition by transfer, merger, or operation.
- (4) A person who was punished by an administrative disposition or against whom proceedings for such disposition are pending shall without delay notify the transferee, etc. thereof, as prescribed by Ordinance of the Ministry of Health and Welfare.

[This Article Newly Inserted on Aug. 13, 2013]

Article 37-5 (Restriction on Provision of Long-Term Care Benefits)

- (1) If a worker of a long-term care institution participates in filing a claim for reimbursement of expenses for home care or institutional care benefits by fraud or other improper means, the competent Special Self-Governing City Mayor or Special Self-Governing Province Governor, or the head of the competent Si/Gun/Gu may take measures to place restrictions on the worker's provision of long-term care benefits for a period of not more than one year.
- (2) When a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu take measures under paragraph (1), he or she shall notify the NHIS of details thereof, without delay.
- (3) The criteria for and methods of measures referred to in paragraphs (1) and (2) to be taken to restrict the provision of long-term care benefits, the methods of and procedure for the notification of such measures, and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare.

[This Article Newly Inserted on Dec. 29, 2015]

CHAPTER VII EXPENSES FOR HOME CARE OR INSTITUTIONAL CARE BENEFITS

Article 38 (Claim and Reimbursement of Expenses for Home Care or Institutional Care Benefits)

- (1) Where a long-term care institution has provided a beneficiary with home care or institutional

care benefits pursuant to Article 23, it shall file a claim for reimbursement of expenses for the long-term care benefits with the NHIS.

- (2) Upon receipt of a claim for reimbursement of expenses for home care or institutional care benefits from a long-term care institution pursuant to paragraph (1), the NHIS shall review the claim, notify the long-term care institution of its decision on the claim, and pay the NHIS' share of expenses incurred in providing long-term care (referring to an amount calculated by deducting a co-payment from expenses for home care or institutional care benefits) to the long-term care institution. <Amended on Dec. 11, 2018; Jan. 15, 2019>
- (3) The NHIS may adjust expenses for long-term care benefits by adding or subtracting an amount based on the results of evaluating long-term care benefits provided by a long-term care institution under Article 54 (2).
- (4) Notwithstanding paragraph (2), where the NHIS finds, by its review on expenses for long-term care benefits, that a beneficiary's payment already made exceeds the co-payment notified under paragraph (2), the NHIS shall make a payment to the beneficiary after deducting the difference between the two amounts from the amount payable to the relevant long-term care institution. <Newly Inserted on Jan. 15, 2019>
- (5) The NHIS may offset an amount payable to a beneficiary under paragraph (4) against a long-term care insurance contribution payable by the beneficiary and other charges collected under this Act (hereinafter referred to as "long-term care insurance contributions, etc."). <Newly Inserted on Jan. 15, 2019>
- (6) A long-term care institution shall spend some of the reimbursement paid for expenses for long-term care benefits for personnel expenses for long-term care workers at the rate determined and publicly notified by the Minister of Health and Welfare. <Newly Inserted on May 29, 2016; Jan. 15, 2019>
- (7) If a long-term care institution fails to comply with an order to submit data under Article 61 (2), or refuses, interferes with, or evades an inquiry or inspection without good cause, the NHIS may defer the payment of expenses for long-term care benefits to the long-term care institution until such institution submits data or responds to such inquiry or inspection. In such cases, the NHIS shall give the long-term care institution an opportunity to present its opinion before deferring the payment of expenses for long-term care benefits. <Newly Inserted on Mar. 31, 2020>
- (8) The guidelines for the review of expenses for home care or institutional care benefits, the guidelines for the addition to or subtraction from expenses for long-term care benefits, the procedures for filing claims, the methods of payment, the procedures for and methods of deferment of payment, and other relevant matters under paragraphs (1) through (3) and (7) shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended on May 29, 2016; Jan. 15, 2019; Mar. 31, 2020>

[Title Amended on May 29, 2016]

Article 39 (Calculation of Expenses for Long-Term Care Benefits)

- (1) The Minister of Health and Welfare shall annually determine and publicly notify the amount of expenses for home care services and institutional care benefits to be paid and the amount of care allowances for special cases to be paid according to the type of benefits, the rating for long-term care, etc. after deliberation by the Long-Term Care Committee under Article 45. <Amended on Jul. 27, 2021>
- (2) The Minister of Health and Welfare may, when he or she determines expenses for home care or institutional care benefits pursuant to paragraph (1), consider whether expenses for the establishment of a long-term care institution were subsidized by the State or a local government as prescribed by Presidential Decree.
- (3) Necessary matters relating to detailed methods of the calculation of the amount of expenses for home care or institutional care benefits to be paid and the amount of care allowances for special cases to be paid under paragraph (1), items of such expenses and allowances, etc. shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended on Jul. 27, 2021>

[Title Amended on Jul. 27, 2021]

Article 40 (Co-payment)

- (1) A person who receives long-term care benefits under Article 23 (excluding care allowances for special cases; hereafter in this Article, the same shall apply) shall bear some of the expenses, as prescribed by Presidential Decree. In such cases, the share of a co-payment may vary depending on the long-term care rating of a beneficiary of long-term care benefits, and the type and level of his or her long-term care benefits. <Amended on Dec. 21, 2021>
- (2) Notwithstanding paragraph (1), a beneficiary prescribed in Article 3 (1) 1 of the Medical Benefit Act shall not make a co-payment. <Newly Inserted on Dec. 21, 2021>
- (3) The expenses of long-term care benefits in the following cases shall be borne solely by the beneficiary. <Amended on Dec. 21, 2021>
 1. Long-term care benefits excluded from the scope and coverage of the benefits under this Act;
 2. A difference between the amount of long-term care benefits a beneficiary has received and the amount of long-term care benefits based on the type and details described in the relevant letter of approval for long-term care under Article 17 (1) 2;
 3. Long-term care benefits exceeding the monthly cap of long-term care benefits under Article 28.
- (4) Any of the following persons may be eligible for differential reduction of co-payments by up to 60/100, as determined by the Minister of Health and Welfare: <Amended on May 21, 2009; Mar. 17, 2010; Mar. 27, 2018; Dec. 11, 2018; Dec. 21, 2021>
 1. An eligible recipient referred to in Article 3 (1) 2 through 9 of the Medical Benefit Act;

2. A person whose income, property, etc. does not exceed an amount determined and publicly notified by the Minister of Health and Welfare: Provided, That such amount may be separately determined for persons who reside in an island, a remote area, a rural community, etc.;
3. A person who is struggling to make a living due to a natural disaster or any other cause or event prescribed by Ordinance of the Ministry of Health and Welfare.
- (5) Matters necessary for the methods for calculating co-payments, and the procedures and methods for reducing co-payments under paragraphs (1) through (4), and others shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended on May 21, 2009; Mar. 27, 2018; Dec. 11, 2018; Dec. 21, 2021>

[Title Amended on Dec. 11, 2018]

Article 41 (Compensation Payable to Family Members for Long-Term Care)

- (1) If a beneficiary has been provided with long-term care equivalent to home visit care referred to in Article 23 (1) 1 (a) by a family member or another person and if the total amount of long-term care benefits so provided does not exceed an amount determined and publicly notified by the Minister of Health and Welfare, the NHIS may reduce or exempt some of the co-payment or may take any other measure as a substitute for such reduction or exemption, as prescribed by Ordinance of the Ministry of Health and Welfare. <Amended on Dec. 11, 2018>
- (2) Necessary matters, such as the method, etc. of reduction and exemption of a co-payment pursuant to paragraph (1), shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended on Dec. 11, 2018>

Article 42 (Calculation of Expenses for Issuance of Written Instruction for Home Visit Nursing)

Necessary matters concerning expenses for the issuance of written instructions for home visit nursing under Article 23 (1) 1 (c), the method of allocation of such expenses, and the procedures for filing claims for reimbursement of such expenses and paying such expenses shall be prescribed by Ordinance of the Ministry of Health and Welfare.

Article 43 (Recovery of Unjust Enrichment or Unjust Profit)

- (1) Where a person who has receives the long-term care benefits, the expenses for long-term care benefits, or the expenses for the issuance of a medical doctor's referral or written instructions for home visit nursing (hereinafter referred to as "expenses for the issuance of a medical doctor's referral, etc.") falls under any of the following cases, the NHIS shall recover the

amount equivalent to long-term care benefits, the expenses for the long-term care benefits, or the expenses for the issuance of a medical doctor's referral, etc. from such person. In such cases, Article 57 (2) of the National Health Insurance Act shall apply *mutatis mutandis* to the expenses for the issuance of a medical doctor's referral, etc., and "expenses for insurance benefits" shall be construed as "expenses for the issuance of a medical doctor's referral, etc.", and "care institution" as "medical institution." <Amended on Dec. 29, 2015; Dec. 11, 2018; Dec. 21, 2021>

1. Where the person fails to satisfy any subparagraph of Article 15 (4) as the results of assessment under Article 15 (5);
 2. Where the person has received long-term care benefits in excess of the monthly cap referred to in Article 28;
 3. Where the person has received long-term care benefits after the limitations are imposed pursuant to Article 29 or 30;
 4. Where the person has filed claims for expenses for home care or institutional care benefits by fraud or other improper means under Article 37 (1) 4 and received the reimbursement;
 - 4-2. Where the person has filed claims for the expenses for the issuance of a medical doctor's referral, etc. by fraud or other improper means and received the reimbursement;
 5. Where the person has received long-term care benefits or the payment of expenses for long-term care benefits from the NHIS without any cause under this Act.
- (2) If long-term care benefits were provided based on a false report, certificate, or diagnosis in the case of paragraph (1), the NHIS may demand a person involved in the fraudulent act to pay the money recoverable pursuant to paragraph (1) jointly with the person who has received long-term care benefits.
 - (3) In the case of paragraph (1), the NHIS may demand a person who belongs to the same household as the person who has received long-term care benefits by fraud or other improper means (referring to a person who supports a recipient of long-term care benefits or a person who has a duty to support a person who received long-term care benefits pursuant to any other statutes or regulations) to pay the money recoverable pursuant to paragraph (1) jointly with the recipient of long-term care benefits by fraud or other improper means.
 - (4) In the case of paragraph (1), if a long-term care institution or a medical institution has received the expenses for long-term care benefits or expenses for the issuance of a medical doctor's referral, etc. from a beneficiary or an applicant by fraud or other improper means, the NHIS shall recover the expenses from the long-term care institution or the medical institution and pay such amount to the beneficiary or the applicant without delay. In such cases, the NHIS may offset the amount payable to the beneficiary or the applicant against long-term care insurance contributions, etc. payable by the beneficiary or the applicant. <Amended on Jan. 15, 2019; Dec. 21, 2021>

Article 44 (Rights to Demand Reimbursement)

- (1) The NHIS shall, when it provides long-term care benefits to a beneficiary because a third party's act gives rise to a cause of providing long-term care benefits, acquire a right to demand the third party to reimburse it from damages within the maximum expenses incurred in such benefits.
- (2) In the case of paragraph (1), if the person who received long-term care benefits already collected damages from the third party, the NHIS shall not provide long-term care benefits within the maximum of damages collected.

CHAPTER VIII LONG-TERM CARE COMMITTEE

Article 45 (Establishment and Functions of Long-Term Care Committee)

The Minister of Health and Welfare shall have the Long-Term Care Committee under his or her control in order to have the Committee deliberate on the following matters:

1. Long-term care insurance contribution rates under Article 9 (2);
2. Standards for paying family care benefit in cash, exceptional care benefit in cash, and nursing expenses of long-term care hospitals pursuant to Articles 24 through 26;
3. Expenses for home care and institutional care benefits referred to in Article 39;
4. Other essential matters specified by Presidential Decree.

Article 46 (Composition of Long-Term Care Committee)

- (1) The Long-Term Care Committee shall be comprised of not less than 16, but not more than 22 members, including one Chairperson and one Vice Chairperson.
- (2) Committee members except the Chairperson shall be appointed or commissioned by the Minister of Health and Welfare, and the number of persons in a group under each of the following subparagraphs shall be equal:
 1. Persons, each of whom represents an employees' organization, an employers' organization, a non-governmental organization (referring to a non-profit, non-governmental organization under Article 2 of the Assistance for Non-Profit, Non-Governmental Organizations Act), senior citizens' organization, an organization of farmers or fishers, or an organization of self-employed entrepreneurs;
 2. Persons, each of whom represents a long-term care institution or medical community;
 3. Public officials, each of whom belongs to an appropriate central administrative agency specified by Presidential Decree and is a member of the Senior Executive Service; persons,

each of whom represents an academia or a research community related to long-term care; or persons recommended by the President of the NHIS.

- (3) The Vice Minister of Health and Welfare shall take the chair of the Committee, and the Vice Chairperson shall be appointed by the Chairperson from among the committee members.
- (4) The term of office for each member of the Long-Term Care Committee shall be three years: Provided, That the term of office for each public official serving as a committee member shall be the term of his or her service as a public official.

Article 47 (Operation of Long-Term Care Committee)

- (1) Meetings of the Long-Term Care Committee shall be duly formed with a majority of members present and shall adopt a resolution by an affirmative vote of a majority of members present at each meeting.
- (2) The Long-term Care Committee may have working committees for each area for efficient operation.
- (3) Except as provided in this Act, the composition and operation of the Long-Term Care Committee and other necessary matters shall be prescribed by Presidential Decree.

CHAPTER VIII-2 SUPPORT CENTERS FOR LONG-TERM CARE WORKERS

Article 47-2 (Establishment of Support Centers for Long-Term Care Workers)

- (1) The State and a local government may establish and operate a support center for long-term care workers in order to protect rights of long-term care workers. <Amended on Dec. 11, 2018>
- (2) A support center for long-term care workers shall provide the following services:
 1. Counseling services and assistance as countermeasures against violations of rights of long-term care workers;
 2. Assistance in training programs for empowering long-term care workers;
 3. Programs for health management, including medical examination of long-term care workers;
 4. Other matters specified by Presidential Decree as necessary for services, etc. of long-term care workers.
- (3) Other matters necessary for the establishment, operation, etc. of support centers for long-term care workers shall be prescribed by ordinance of each local government in accordance with Ordinance of the Ministry of Health and Welfare.

[This Article Newly Inserted on May 29, 2016]

CHAPTER IX INSTITUTION RESPONSIBLE FOR ADMINISTRATION AND OPERATION

Article 48 (Institution Responsible for Administration and Operation)

- (1) An institution responsible for the administration and operation of long-term care programs shall be the NHIS.
- (2) The functions of the NHIS shall be as follows: <Amended on Mar. 17, 2010; Dec. 11, 2018; Jan. 15, 2019; Dec. 29, 2020>
 1. To manage eligibility for long-term care insurance of the insured and their dependents and eligible recipients of medical benefits;
 2. To impose and collect long-term care insurance contributions;
 3. To investigate applicants;
 4. To operate assessment committees and to assess long-term care needs;
 5. To prepare letters of approval for long-term care and to issue individual long-term care use plans;
 6. To control and evaluate long-term care benefits;
 7. To assist in the use of long-term care benefits, such as providing beneficiaries and their families with information, guidance, and counseling services;
 8. To review expenses for home care or institutional care benefits and to pay care allowance for special cases;
 9. To verify details of long-term care benefits provided;
 10. To conduct surveys, research, and public relations activities on long-term care programs;
 11. To perform projects for preventing geriatric diseases;
 12. To impose and collect unjust enrichment or unjust profit under this Act;
 13. To establish and operate long-term care institutions for developing the criteria for the provision of long-term care benefits and for deliberating on the appropriateness of long-term care benefit expenses;
 14. Other functions entrusted by the Minister of Health and Welfare in conjunction with the long-term care programs.
- (3) The NHIS shall establish a long-term care institution under paragraph (2) 13 in consideration of the alleviation of the imbalance between regions in view of the population of senior citizens and local characteristics and shall operate the long-term care institution within the minimum extent for objectives of the establishment thereof. <Newly Inserted on Mar. 17, 2010; Dec. 29, 2015>
- (4) The NHIS's articles of incorporation under Article 17 of the National Health Insurance Act shall include and describe the following matters with regard to long-term care programs: <Amended

on Mar. 17, 2010; Dec. 31, 2011>

1. Long-term care insurance contributions;
2. Long-term care benefits;
3. Budgeting and settlement of accounts for long-term care programs;
4. Other matters prescribed by Presidential Decree.

Article 49 (NHIS' Organization for Long-Term Care Program of NHIS)

When the NHIS establishes regulations on the organization of the NHIS pursuant to Article 29 of the National Health Insurance Act, it shall separate organizations that shall undertake the long-term care program, independent of organizations that shall undertake health insurance: Provided, That the foregoing shall not apply to business affairs related to the management of eligibility and the imposition and collection of insurance contribution referred to in Article 48 (2) 1 and 2. <Amended on Dec. 31, 2011>

Article 50 (Accounting of Long-Term Care Program)

- (1) The NHIS shall install and operate separate accounts for the long-term care program.
- (2) The NHIS shall manage the funds for services of long-term care programs provided with financial resources of long-term care insurance contribution separately from the funds for the services of long-term care programs provided with financial resources of contributions from the State and local governments: Provided, That it does not need to separately manage the funds for the administration and operation.

Article 51 (Application Mutatis Mutandis to Delegation of Authority)

Articles 32 and 38 of the National Health Insurance Act shall apply mutatis mutandis to the delegation of President's authority under this Act and reserves. In such cases, "insurance benefits" shall be construed as "long-term care benefits". <Amended on Dec. 31, 2011>

Article 52 (Establishment of Assessment Committee)

- (1) The NHIS shall have assessment committees to deliberate on approval for long-term care and assessment of long-term care needs.
- (2) An assessment committee shall be established in each Special Self-Governing City, Special Self-Governing Province, or Si/Gun/Gu: Provided, That at least two assessment committees may be established in one Special Self-Governing City, Special Self-Governing Province, or Si/Gun/Gu or one assessment committee may be established by two or more integrated local governments, such as a Special Self-Governing City, a Special Self-Governing Province, and Sis/Guns/Gus, taking into consideration the size of population and other relevant facts.

<Amended on Aug. 13, 2013>

- (3) An assessment committee shall be comprised of 15 members, including one Chairperson.
- (4) Members of an assessment committee shall be commissioned by the President of the NHIS, from among the following persons. In such cases, at least seven members shall be recommended by the competent Special Self-Governing City Mayor or Special Self-Governing Province Governor, or the head of the competent Si/Gun/Gu, and at least one medical doctor or oriental medicine doctor shall be included in each committee: <Amended on Aug. 13, 2013>
 1. Medical persons under the Medical Service Act;
 2. Social welfare workers under the Social Welfare Services Act;
 3. Public officials who belong to a Special Self-Governing City, Special Self-Governing Province, or Si/Gun/Gu;
 4. Other persons who have abundant knowledge and experience in law or long-term care.
- (5) The term of office of each member of the assessment committee shall be three years, which can be renewed only once: Provided, That the term of office of a public official serving as a member shall be the term of his or her service as public official. <Amended on Dec. 11, 2018>

Article 53 (Operation of Assessment Committees)

- (1) The chairperson of each assessment committee shall be commissioned by the competent Special Self-Governing City Mayor or Special Self-Governing Province Governor, or the head of the competent Si/Gun/Gu, from among committee members. In such cases, where one assessment committee is established by two or more integrated Special Self-Governing Cities, Special Self-Governing Provinces, or Sis/Guns/Gus under the proviso of Article 52 (2), the chairperson of such assessment committee shall be commissioned jointly by the competent Special Self-Governing City Mayors and Special Self-Governing Province Governors, and the heads of the competent Sis/Guns/Gus. <Amended on Aug. 13, 2013>
- (2) Meetings of each assessment committee shall be duly formed with a majority of members present and shall adopt a resolution by an affirmative vote of a majority of members present at the meeting.
- (3) Except as provided in this Act, the composition and operation of assessment committees and other necessary matters shall be prescribed by Presidential Decree.

Article 54 (Control and Evaluation of Long-Term Care Benefits)

- (1) The NHIS shall continuously control and evaluate details of long-term care benefits provided by each long-term care institution and endeavor to improve the quality of long-term care benefits.
- (2) The NHIS shall evaluate whether a long-term care institution has provided long-term care

benefits appropriately in accordance with the standards, procedure, method, etc. of long-term care benefits prescribed in Article 23 (3) and may publish the results of the evaluation on its website and take other measures as may be necessary. <Amended on Dec. 29, 2015>

- (3) The methods of the evaluation of details of provided long-term care benefits and the publication of results of the evaluation pursuant to paragraph (2) and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended on May 29, 2016>

CHAPTER X FILING OBJECTION OR APPLICATION FOR EXAMINATION

Article 55 (Applications for Examination)

- (1) A person who is dissatisfied with a disposition made by the NHIS with regard to approval or rating for long-term care, long-term care benefits, unjust enrichment or unjust profit, expenses for long-term care benefits, or long-term care insurance contributions may apply for examination with the NHIS. <Amended on Dec. 11, 2018>
- (2) An application for examination under paragraph (1) shall be filed in writing (including an electronic document as defined in subparagraph 7 of Article 2 of the Electronic Government Act) within 90 days from the date on which a beneficiary becomes aware that the relevant disposition is made, and no application can be filed upon the expiration of 180 days from the date on which the relevant disposition is made: Provided, That a beneficiary may file an application for examination even after the expiration of the aforesaid period if the beneficiary proves that he or she was unable to file an application for examination within such period for good cause. <Amended on Dec. 11, 2018>
- (3) The NHIS shall establish a Long-Term Care Examination Committee (hereinafter referred to as the “Examination Committee”) to deliberate on applications for examination filed under paragraph (1). <Amended on Dec. 11, 2018>
- (4) The composition and operation of the Examination Committee, the term of office of members of the Examination Committee, and other necessary matters shall be prescribed by Presidential Decree. <Amended on Dec. 11, 2018>

[Title Amended on Dec. 11, 2018]

Article 56 (Applications for Reexamination)

- (1) A person who is dissatisfied with a decision on an application for examination filed under Article 55 may apply for reexamination with the Long-Term Care Reexamination Committee (hereinafter referred to as the “Reexamination Committee”) within 90 days from the date of receipt of a notice of the decision. <Amended on Dec. 11, 2018>

- (2) The Reexamination Committee shall be under the control of the Minister of Health and Welfare and shall be comprised of not more than 20 members, including one Chairperson. <Amended on Dec. 11, 2018>
- (3) Members of the Reexamination Committee shall be appointed or commissioned by the Minister of Health and Welfare, from among appropriate public officials and persons who have abundant knowledge and experience in law or long-term care services. In such cases, non-public-official members shall comprise a majority of all members. <Amended on Dec. 11, 2018>
- (4) The composition and operation of the Reexamination Committee, the term of office of members, and other necessary matters shall be prescribed by Presidential Decree. <Amended on Dec. 11, 2018>

[Title Amended on Dec. 11, 2018]

Article 56-2 (Relationship to Administrative Appeals)

- (1) The Administrative Appeals Act shall apply mutatis mutandis to the procedure for reexamination by the Reexamination Committee.
- (2) Where an application for reexamination filed under Article 56 is reexamined by the Reexamination Committee, no administrative appeal may be filed under the Administrative Appeals Act.

[This Article Newly Inserted on Dec. 11, 2018]

Article 57 (Administrative Litigation)

Any person who has an objection to a disposition made by the NHIS or who is dissatisfied with a decision on an application for examination filed under Article 55 or a decision on an application for reexamination filed under Article 56 may file an administrative litigation, as prescribed by the Administrative Litigation Act. <Amended on Dec. 11, 2018>

CHAPTER XI SUPPLEMENTARY PROVISIONS

Article 58 (The State's Subsidization)

- (1) The State shall annually provide the NHIS with an amount equivalent to 20/100 of the estimated revenue of long-term care insurance contributions as a subsidy within budgetary limits. <Amended on Jan. 15, 2019>
- (2) The State and a local government shall fully bear expenses that the NHIS shall otherwise bear for long-term care benefits for eligible recipients of medical benefits, for the issuance of a

medical doctor's referral, and for the issuance of written instructions for home visit nursing (including the expenses that the NHIS shall otherwise bear as a consequence of exemption or reduction granted pursuant to Article 40 (2) and 40 (4) 1) and expenses for administration and operation, as prescribed by Presidential Decree. <Amended on Dec. 21, 2021>

- (3) The amount that each local government is required to bear pursuant to paragraph (2) shall be borne by the competent Special Metropolitan City, Metropolitan City, Special Self-Governing City, Do, Special Self-Governing Province, and Si/Gun/Gu, as prescribed by Ordinance of the Ministry of Health and Welfare. <Amended on Aug. 13, 2013>
- (4) The imposition and collection of the share of expenses borne by local governments pursuant to paragraphs (2) and (3), the management of the financial resources, and other necessary matters shall be prescribed by Presidential Decree.

Article 59 (Use of Electronic Documents)

- (1) All documents related to long-term care programs shall be recorded, managed, and preserved in electronic format, as prescribed by Ordinance of the Ministry of Health and Welfare. <Amended on Aug. 13, 2013>
- (2) The NHIS and each long-term care institution shall use electronic media or a method of exchanging electronic documents for filing an application for designation of a long-term care institution, filing claims for expenses for home care or institutional care benefits, and the payment for such claims. <Amended on May 29, 2016>
- (3) Notwithstanding paragraphs (1) and (2), it does not need to use electronic documents, electronic media, or a method of exchanging electronic documents in an area specified by the Minister of Health and Welfare as an area in which conditions of an information and communications network or facilities for information and communications service are bad.

Article 60 (Submission of Data)

- (1) The NHIS may, if deemed necessary for carrying out the long-term care program, such as the verification of details of long-term care benefits provided, the management and evaluation of long-term care benefits, and the calculation of long-term care insurance contribution, request any of the following persons to submit data: <Amended on Dec. 21, 2021>
 1. The insured of long-term care insurance, a dependent of the insured, or an eligible recipient of medical benefits;
 2. A beneficiary, a long-term care institution, or a medical institution.
- (2) Any person who is requested to submit data pursuant to paragraph (1) shall comply with such request in good faith.

Article 61 (Reporting and Inspection)

- (1) The Minister of Health and Welfare, the Special Metropolitan City Mayor, a Metropolitan City Mayor, a Do Governor, a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu may order any of the following persons to submit a report or data on remuneration, income, or any other matters specified by Ordinance of the Ministry of Health and Welfare or instruct subordinate public officials to inquire of the interested parties or inspect the relevant documents: <Amended on Aug. 13, 2013; Mar. 31, 2020>
 1. The insured of long-term care insurance;
 2. Dependent;
 3. Eligible recipient of medical benefits.
- (2) The Minister of Health and Welfare, the Special Metropolitan City Mayor, a Metropolitan City Mayor, a Do Governor, a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu may order either of the following persons to submit data relevant to long-term care benefits, such as details of long-term care benefits provided and matters relating to finance and accounting, or instruct subordinate public officials to inquire of relevant persons or to inspect the relevant documents: <Amended on Aug. 13, 2013; May 29, 2016; Mar. 31, 2020; Dec. 21, 2021>
 1. Long-term care institution and medical institution;
 2. Recipient of long-term care benefits.
- (3) The Minister of Health and Welfare, the Special Metropolitan City Mayor, a Metropolitan City Mayor, a Do Governor, a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu may request administrative assistance from the NHIS if necessary to issue an order to submit a report or data or to efficiently perform the duty to make an inquiry or conduct an inspection under paragraphs (1) and (2). In such cases, the NHIS shall comply with such request unless special circumstances exist. <Newly Inserted on Mar. 31, 2020>
- (4) In cases of paragraph (1) or (2), public officials shall carry an identification certifying their authority and a document that states the matters specified by Ordinance of the Ministry of Health and Welfare, including the period and scope of inspection, the persons in charge of the inspection, and the relevant statutes or regulations, and present the document to interested parties. <Amended on Dec. 29, 2015; Mar. 31, 2020>
- (5) Except as provided in this Act, the provisions of the Framework Act on Administrative Investigations shall apply to the procedures for, and the methods, etc. of the inquiry or inspection under paragraphs (1) and (2). <Newly Inserted on Dec. 29, 2015; Mar. 31, 2020>
- (6) The procedures for and methods of administrative assistance under paragraph (3) and other necessary matters shall be prescribed by Presidential Decree. <Newly Inserted on Mar. 31, 2020>

Article 62 (Prohibition of Divulgence of Confidential Information)

None of the following persons shall divulge confidential information known to him or her in the course of performing his or her duties: <Amended on Aug. 13, 2013>

1. A person who is working or has worked for a Special Self-Governing City, Special Self-Governing Province, or Si/Gun/Gu, the NHIS, an assessment committee, or a long-term care institution;
2. A person who has provided benefits related to family care benefit in cash, exceptional care benefit in cash, or nursing expenses of long-term care hospitals pursuant to any provision of Articles 24 through 26.

Article 62-2 (Prohibition against Use of Similar Names)

No person other than persons who provide long-term care insurance services shall use “long-term care insurance” or any other similar phrase in an insurance contract or in the name of an insurance contract.

[This Article Newly Inserted on Dec. 11, 2018]

Article 63 (Hearings)

A Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu shall hold a hearing to make any of the following dispositions or public notification: <Amended on Dec. 29, 2015>

1. To revoke the designation of a long-term care institution or to issue an order to suspend business operations pursuant to Article 37 (1);
2. Deleted; <Dec. 11, 2018>
3. To publish violations or such pursuant to Article 37-3;
4. To restrict the provision of long-term care benefits pursuant to Article 37-5 (1).

[This Article Wholly Amended on Aug. 13, 2013]

Article 64 (Application Mutatis Mutandis to Prescription)

Articles 91, 92, 96, 103, 104, 107, 111 and 112 of the National Health Insurance Act shall apply mutatis mutandis to the prescription, the calculation of a period, the supply of data, the supervision over the NHIS and others, the delegation or entrustment of authority, the entrustment of business affairs, the disposal of a fractional number, and other matters. In such cases, “insurance contribution” shall be construed as “long-term care insurance contribution”, “insurance benefits” as “long-term care benefits”, “care institution” as “long-term care institution”, and “health insurance program” as “long-term care program”. <Amended on Act Dec. 31, 2011>

Article 65 (Prohibition of Legal Fiction as Income or Similar under Other Statutes)

Money, etc. paid in cash for long-term care benefits under this Act shall not be construed as income or property under subparagraph 9 of Article 2 of the National Basic Living Security Act. <Amended on Dec. 21, 2021>

Article 66 (Protection of Beneficiary Rights)

- (1) A right to receive long-term care benefits shall not be transferred, seized, or offered as security to or by someone else. <Amended on Dec. 2, 2016>
- (2) Claim on deposit of an account for receipt of care allowance for special cases under Article 27-2 (1) shall not be seized. <Newly Inserted on Dec. 2, 2016>

Article 66-2 (Legal Fiction as Public Officials for Purposes of Applying Penalty Provisions)

Persons other than public officials among the members of an assessment committee, the Long-Term Care Committee, the committees for deliberation on disclosure under Article 37-3 (3), the Examination Committee, and the Reexamination Committee shall be deemed public officials for purposes of applying Articles 127 and 129 through 132 of the Criminal Act. <Amended on Mar. 31, 2020>

[This Article Newly Inserted on Dec. 11, 2018]

Article 66-3 (Disposal of Small Sums)

Where an amount to be collected or refunded is less than 1,000 won in one case (excluding payments, long-term care insurance contributions, etc. the NHIS may offset under Article 38 (5) and the latter part of Article 43 (4)), the NHIS need not collect or refund the amount: Provided, That the foregoing shall not apply to long-term care insurance contributions collected or refunded in combination with health insurance contributions not subject to disposal of small sums under Article 106 of the National Health Insurance Act.

[This Article Newly Inserted on Jan. 15, 2019]

CHAPTER XII PENALTY PROVISIONS

Article 67 (Penalty Provisions)

- (1) Any of the following persons shall be punished by imprisonment with labor for not more than three years or by a fine not exceeding 30 million won: <Newly Inserted on Dec. 29, 2020; Dec. 21, 202>
 1. A person who files claims for long-term care benefits by fraud or other improper means;
 2. A person who arbitrarily manipulates a closed-circuit television camera for any purpose other than the purpose of the installation, or makes it focus on a place other than the originally intended place, in violation of Article 33-3 (2) 1;
 3. A person who uses a sound recording function, or stores video information in a device or apparatus other than the storage device prescribed by Ordinance of the Ministry of Health and Welfare, in violation of Article 33-3 (2) 2.
- (2) Any of the following persons shall be punished by imprisonment with labor for not more than two years or by a fine not exceeding 20 million won: <Amended on Dec. 11, 2018; Dec. 29, 2020; Dec. 21, 2021>
 1. A person who operates a long-term care institution without being designated, in violation of Article 31, or obtains designation of a long-term care institution by fraud or other improper means;
 2. A person who fails to take measures necessary to ensure security, resulting in a loss, theft, leakage, falsification, or damage of video information, in violation of Article 33-3 (3);
 3. A person who exempts or reduces a co-payment, in violation of Article 35 (5);
 4. A person who is involved in the introduction, referral, or solicitation of a beneficiary or instigates another person to commit such an act, in violation of Article 35 (6);
 5. A person who divulges confidential information he or she becomes aware of in the course of performing his or her duties, in violation of Article 62.
- (3) Any of the following persons shall be punished by imprisonment with labor for not more than one year or by a fine not exceeding 10 million won: <Amended on Dec. 29, 2015; Dec. 11, 2018; Apr. 23, 2019; Dec. 29, 2020>
 1. A person who refuses to provide a long-term care benefit without good cause, in violation of Article 35 (1);
 2. A person who receives, or aids and abets another person to receive, a long-term care benefit by fraud or other improper means;
 3. A person who does not take measures for protecting rights and interests under the subparagraphs of Article 36 (3), without good cause;
 4. A person who fails to settle a co-payment made by a beneficiary, in violation of Article 37 (7).
- (4) A long-term care institution or a medical institution that fails to comply with an order to

submit data under Article 61 (2), submits false data, refuses, interferes with, or evades an inquiry or inspection, or provides a false response shall be punished by a fine not exceeding 10 million won. <Newly Inserted on Mar. 31, 2020; Dec. 29, 2020; Dec. 21, 2021>

[This Article Wholly Amended on Aug. 13, 2013]

Article 68 (Joint Penalty Provisions)

If the representative of a corporation or an agent or employee of or other persons employed by the corporation, or an individual commits an offense referred to in Article 67 in connection with the business of the corporation or the individual, not only shall such offender be punished, but also the corporation or the individual shall be punished by a fine under that Articles: Provided, That the same shall not apply where such corporation or individual has not been negligent in paying due attention and supervision in connection with the relevant duties to prevent such offense. <Amended on Mar. 17, 2010>

Article 69 (Administrative Fines)

- (1) Any of the following persons who do not have justifiable grounds shall be subject to an administrative fine not exceeding five million won: <Amended on Mar. 17, 2010; Aug. 13, 2013; Dec. 29, 2015; Dec. 11, 2018; Mar. 31, 2020>
 1. Deleted; <Aug. 13, 2013>
 2. A person who fails to obtain a changed designation or report a change in violation of Article 33, or a person who obtains a changed designation or reports a change by fraud or other improper means;
 - 2-2. A person who fails to publish information about a long-term care institution, or publishes false information, in violation of Article 34;
 - 2-3. A person who fails to issue a statement of expenses for long-term care benefits to a beneficiary, or issues a false statement, in violation of Article 35 (3);
 3. A person who fails to keep and manage records of the provision of long-term care benefits or makes false records thereof, in violation of Article 35 (4);
 - 3-2. A person who violates any subparagraph of Article 35-4 (2);
 4. A person who fails to report closure or suspension of business or fails to transfer data, or files such report by fraud or other improper means, in violation of Article 36 (1) or (6);
 - 4-2. A person who fails to inform a transferee, etc. without delay that an administrative disposition was imposed upon him or her or proceedings for an administrative disposition are pending, in violation of Article 37-4 (4);
 5. Deleted; <Aug. 13, 2013>
 6. A person who makes a beneficiary bear expenses for long-term care benefits by fraud or other improper means;
 7. A person who fails to comply with a demand or order to submit a report or data under

Article 60 or 61 (1) or (2) (excluding a person who falls under Article 61 (2) 1) or submits a false report or data, or a person who refuses, interferes with, or evades an inquiry or inspection or provides a false response to such inquiry or inspection;

8. A person who participates in filing a claim for expenses for long-term care benefits by fraud or other improper means;

9. A person who uses “long-term care insurance” or any other similar phrase in violation of Article 62-2.

(2) Any of the following persons shall be subject to an administrative fine not exceeding three million won: <Amended on Dec. 21, 2021>

1. A person who fails to install a closed-circuit television camera or who violates his or her obligations to install or manage it pursuant to Article 33-2;

2. A person who fails to comply with a request for inspection pursuant to the subparagraphs of Article 33-3 (1).

(3) Administrative fines under paragraphs (1) and (2) shall be imposed and collected by the competent Special Self-Governing City Mayor or the competent Special Self-Governing Province Governor, or the head of the competent Si/Gun/Gu, as prescribed by Presidential Decree. <Newly Inserted on Aug. 13, 2013; Dec. 21, 2021>

Article 70

Deleted. <Aug. 13, 2013>

**ENFORCEMENT DECREE
OF THE LONG-TERM
CARE INSURANCE ACT**

02

ENFORCEMENT DECREE OF THE LONG-TERM CARE INSURANCE ACT

[Enforcement Date 22. Jun, 2023.]

[Presidential Decree No.33420, 18. Apr, 2023., Partial Amendment]

Article 1 (Purpose)

The purpose of this Decree is to prescribe matters mandated by the Long-Term Care Insurance Act and matters necessary for the enforcement thereof.

Article 2 (Geriatric Diseases)

"Geriatric disease specified by Presidential Decree" in subparagraph 1 of Article 2 of the Long-Term Care Insurance Act (hereinafter referred to as the "Act") means a disease listed in attached Table 1.

Article 3 (Master Plans for Long-Term Care)

Matters to be included in a master plan for long-term care under Article 6 (1) 4 of the Act shall be as follows: <Amended on Jul. 14, 2020>

1. A scheme for improving the level of long-term care benefits;
2. A plan for providing services for preventing geriatric diseases;
3. Other matters necessary to provide long-term care benefits to senior citizens, etc.

Article 3-2 (Scope of Foreigners)

"Foreigner specified by Presidential Decree, such as a foreign worker defined in the Act on the Employment of Foreign Workers" in Article 7 (4) of the Act means the following persons: <Amended on Aug. 31, 2012>

1. A foreign worker as defined in the Act on the Employment of Foreign Workers and insured as the employee insured pursuant to Article 109 (2) of the National Health Insurance Act;
2. A foreigner taking a training course provided by a designated industrial entity with entitlement to sojourn for industrial training activities pursuant to Article 10 of the Immigration Act and

insured as the employee insured pursuant to Article 109 (2) of the National Health Insurance Act.

[This Article Newly Inserted on Jul. 7, 2009]

Article 4 (Long-Term Care Insurance Contribution Rate)

The long-term care insurance contribution rate under Article 9 (1) of the Act shall be 9,082/1000000. <Amended on Dec. 31, 2008; Dec. 30, 2009; Dec. 26, 2017; Dec. 24, 2018; Dec. 31, 2019; Dec. 29, 2020; Dec. 21, 2021; Dec. 20, 2022>

[This Article Newly Inserted on Jun. 11, 2008]

[Previous Article 4 moved to Article 6 <Jun. 11, 2008>]

Article 5 (Reduction of Long-Term Care Insurance Contribution Rate for Persons with Disabilities)

(1) "Person specified by Presidential Decree" in Article 10 of the Act means any of the following persons: <Amended on Mar. 15, 2010; Jun. 11, 2019>

1. A person with a severe disability from among the persons with disabilities registered pursuant to Article 32 of the Act on Welfare of Persons with Disabilities;
2. A person who suffers from a rare, incurable disease determined and publicly notified by the Minister of Health and Welfare.

(2) If a person with disabilities, etc. is the insured of long-term care insurance or one of dependents of the insured of long-term care insurance, but has not been determined as a beneficiary, the National Health Insurance Service under the National Health Insurance Act (hereinafter referred to as the "NHIS") shall verify whether the person falls under any subparagraph of paragraph (1) and shall reduce his or her long-term care insurance contributions by 30/100 pursuant to Article 10 of the Act. If it is impractical for the NHIS to verify such eligibility, the NHIS shall reduce the contributions upon receipt of an application from the relevant insured of long-term care insurance or a dependent of the relevant insured for reducing the contributions.

(3) Specific methods, etc. of reducing long-term care contributions pursuant to paragraph (2) shall be determined and publicly notified by the Minister of Health and Welfare. <Amended on Mar. 15, 2010>

[This Article Newly Inserted on Jun. 11, 2008]

[Previous Article 5 moved to Article 7 <Jun. 11, 2008>]

Article 6 (Persons Exempt from Submitting Medical Doctor's Referral)

Persons who file an application for approval for long-term care under Article 13 (2) of the Act, but

are exempt from submitting a medical doctor's referral are as follows: <Amended on Feb. 29, 2008; Jun. 11, 2008; Mar. 15, 2010>

1. A person determined by an employee of the NHIS, as a result of an investigation conducted pursuant to Article 14 (1) of the Act according to the guidelines prescribed by Ordinance of the Ministry of Health and Welfare, as a person whose mental or physical condition or mobility is severely impaired;
2. A person who resides on an island or a remote area determined and publicly notified by the Minister of Health and Welfare.

[Moved from Article 4; previous Article 6 moved to Article 8 <Jun. 11, 2008>]

Article 7 (Standards for Assessment)

- (1) The standards for Assessment referred to in Article 15 (2) of the Act shall be as follows: <Amended on Jun. 21, 2012; May 31, 2013; Jun. 25, 2014; Dec. 26, 2017>
 1. Long-term care Rating-I: A person who needs another person's help entirely for his or her daily life due to any mental or physical disorder and scores at least 95 points for approval for long-term care;
 2. Long-term care Rating-II: A person who needs another person's help substantially for his or her daily life due to any mental or physical disorder and scores at least 75, but less than 95 points for approval for long-term care;
 3. Long-term care Rating-III: A person who needs another person's help partially for his or her daily life due to any mental or physical disorder and scores at least 60, but less than 75 points for approval for long-term care;
 4. Long-term care Rating-IV: A person who needs another person's help for his or her daily life to a certain extent due to any mental or physical disorder, and scores at least 51, but less than 60 points for approval for long-term care;
 5. Long-term care Rating-V: A dementia patient (limited to dementia falling under the category of geriatric disease under Article 2) with score at least 45, but less than 51 points for approval for long-term care;
 6. Long-term care cognitive assistant Rating: A dementia patient (limited to dementia falling under the category of geriatric disease under Article 2) with score less than 45 points for approval for long-term care.
- (2) Points for approval for long-term care under paragraph (1) shall be determined by measuring the level of reduced mental or physical functions determined and publicly notified by the Minister of Health and Welfare. <Amended on Feb. 29, 2008; Mar. 15, 2010>

[Moved from Article 5; previous Article 7 moved to Article 9 <Jun. 11, 2008>]

Article 8 (Effective Period of Approval for Long-Term Care)

- (1) The effective period of approval for long-term care granted under Article 19 (1) of the Act shall be two years: Provided, That where a person is determined as a patient with a rating identical to the preceding one after approval for long-term care under Article 20 of the Act is renewed, the effective period of the renewed approval for long-term care shall be as follows: <Amended on May 31, 2013; Jun. 25, 2014; Nov. 8, 2016; Dec. 26, 2017; Jul. 14, 2020>
 1. In cases of long-term care Rating I: Four years;
 2. In cases of long-term care Rating II through IV: Three years;
 3. In cases of long-term care Rating V and cognitive assistant Rating: Two years.
- (2) Notwithstanding paragraph (1), the assessment committee for long-term care under Article 52 of the Act (hereinafter referred to as "assessment committee") may extend or reduce the effective period of approval for long-term care by not more than six months, considering each applicant's mental and physical conditions, etc. <Amended on Nov. 8, 2016; Jul. 14, 2020>

[Moved from Article 6; previous Article 8 moved to Article 10 <Jun. 11, 2008>]

Article 9 (Other Benefits for Home Care Service)

Other benefits for home care service referred to in Article 23 (1) 1 (f) of the Act means devices determined and publicly notified by the Minister of Health and Welfare and provided or rented as those necessary for assisting beneficiaries in their daily lives or physical activities and for maintaining and improving their cognitive functions. <Amended on Feb. 29, 2008; Mar. 15, 2010; Nov. 8, 2016>

[Moved from Article 7; previous Article 9 moved to Article 11 <Jun. 11, 2008>]

Article 10 (Types of, and Standards for, Long-Term Care Institutions)

The types of, and the standards for, long-term care institutions eligible for providing long-term care benefits pursuant to Article 23 (1) 1 and 2 of the Act shall be as classified in the following: <Amended on Jun. 11, 2019>

1. A long-term care institution eligible for providing benefits for home care service: A long-term care institution designated under Article 31 of the Act, which is a commuting-system welfare facility for the senior citizens at home defined in Article 38 of the Welfare of Senior Citizens Act;
2. A long-term care institution eligible for providing institutional care benefits:
 - (a) A long-term care institution designated under Article 31 of the Act as a sanatorium for senior citizens defined in Article 34 (1) 1 of the Welfare of Senior Citizens Act;
 - (b) A long-term care institution designated under Article 31 of the Act as a medical treatment and communal living home for senior citizens defined in Article 34 (1) 2 of

the Welfare of Senior Citizens Act.

[Moved from Article 8; previous Article 10 moved to Article 14 <Jun. 11, 2008>]

Article 11 (Scope of Long-Term Care Workers for Each Type of Long-Term Care Benefit)

- (1) The scope of long-term care workers for each type of long-term care benefit defined in Article 23 (2) of the Act shall be as follows: <Amended on Feb. 29, 2008; Jun. 11, 2008; Dec. 30, 2009; Mar. 15, 2010; Dec. 30, 2015; May 29, 2018>
 1. To become a long-term care worker who provides home visit care services defined in Article 23 (1) 1 (a) of the Act, a person shall be any of the following persons:
 - (a) A caregiver under Article 39-2 of the Welfare of Senior Citizens Act;
 - (b) A social worker under Article 11 of the Social Welfare Services Act;
 2. To become a long-term care worker who provides home visit bathing services defined in Article 23 (1) 1 (b) of the Act, the person shall be a caregiver under Article 39-2 of the Welfare of Senior Citizens Act;
 3. To become a long-term care worker who provides home visit nursing services defined in Article 23 (1) 1 (c) of the Act, a person shall be:
 - (a) A nurse as defined in Article 2 of the Medical Service Act, with at least two years' work experience as a nurse;
 - (b) A nursing assistant as defined in Article 80 of the Medical Service Act, with at least three years' work experience as a nursing assistant, who has finished a specified educational course in an educational institution designated by the Minister of Health and Welfare;
 - (c) A dental hygienist as defined in Article 2 of the Medical Service Technologists Act (limited to the provision of dental hygiene services are);
 4. To become a long-term care worker who provides day and night care service defined in Article 23 (1) 1 (d) of the Act, short-term respite care services defined in Article 23 (1) 1 (e) of the Act, and institutional care benefits defined in Article 23 (1) 2 of the Act, a person shall be any of the following persons:
 - (a) A caregiver under Article 39-2 of the Welfare of Senior Citizens Act;
 - (b) A social worker under Article 11 of the Social Welfare Services Act;
 - (c) A nurse as defined in Article 2 of the Medical Service Act;
 - (d) An assistant nurse under Article 80 of the Medical Service Act;
 - (e) A physical therapist as defined in Article 2 (2) 3 of the Medical Service Technologists Act;
 - (f) An occupational therapist as defined in Article 2 (2) 4 of the Medical Service Technologists Act.
- (2) Standards and procedure for the designation of educational institutions under paragraph (1) 3

(b) and matters necessary for education by such institutions shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Newly Inserted on Dec. 30, 2009; Mar. 15, 2010>

[Moved from Article 9; previous Article 11 moved to Article 15 <Jun. 11, 2008>]

Article 12 (Guidelines for Reimbursement for Family Care Benefit in Cash)

- (1) The amount of family care benefit in cash pursuant to Article 24 (1) of the Act shall be determined and publicly notified by the Minister of Health and Welfare, after deliberation by the Long-Term Care Committee under Article 45 of the Act, taking into consideration the level of use of benefit for home care service. <Amended on Mar. 15, 2010>
- (2) "Grounds specified by Presidential Decree, such as physical or mental condition or personality" in Article 24 (1) 3 of the Act means any of the following cases: <Amended on Dec. 29, 2010>
 1. Where a patient infected with a disease defined in the Infectious Disease Control and Prevention Act is likely to infect other persons;
 2. Where a person with disabilities registered pursuant to Article 32 of the Act on Welfare of Persons with Disabilities is a person with mental disorder specified in attached Table 1 of the Enforcement Decree of the aforesaid Act;
 3. Where a person avoids contact with people due to physical disfigurement or any other reason.

[This Article Newly Inserted on Jun. 11, 2008]

[Previous Article 12 moved to Article 16 <Jun. 11, 2008>]

Article 13 (Provision of Long-Term Care Benefits)

- (1) "If a beneficiary has no family member who can take care of him or her or if any reason specified by Presidential Decree exists" in Article 27 (2) of the Act means any of the following cases:
 1. When no family member lives with a beneficiary;
 2. When no family member lives with a beneficiary other than a minor or a senior citizen of at least 65 years of age.
- (2) The scope of long-term care benefits that may be provided pursuant to Article 27 (2) of the Act shall be limited to home care or institutional care benefits. <Amended on Jun. 11, 2019>
- (3) A beneficiary who intends to receive long-term care benefits from the date on which he or she files an application for approval for long-term care on a ground specified in paragraph (1) shall file an application with the NHIS, along with evidentiary documents, and the NHIS shall verify the application and notify the applicant of its determination thereof without delay.
- (4) A long-term care institution shall prepare a plan for providing long-term care benefits under

Article 27 (4) of the Act before it starts providing the long-term care benefits. <Amended on Jun. 11, 2019>

- (5) If there is any change in a beneficiary's mental or physical functioning, needs, or rating for long term care while a long-term care institution provides the beneficiary with long-term care benefits, the long-term care institution shall without delay prepare a new plan for providing long-term care benefits incorporating such change and shall notify the NHIS of the details of the plan with the consent of the beneficiary. <Newly Inserted on Jun. 11, 2019>
- (6) Details about the procedures for applying for long-term care benefits under paragraph (3) and for preparing plans for providing long-term care benefits under paragraph (4) shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Newly Inserted on Jun. 11, 2019>

[This Article Newly Inserted on Jun. 11, 2008]

[Title Amended on Jun. 11, 2019]

[Previous Article 13 moved to Article 17 <Jun. 11, 2008>]

Article 13-2 (Methods of Applying for Account for Receipt of Care Allowance for Special Cases)

- (1) A person who intends to receive a care allowance for special cases wired to a bank account designated under the name of a beneficiary (hereinafter referred to as "account for receipt of care allowances for special cases") pursuant to the main clause of Article 27-2 (1) of the Act shall submit the NHIS an application for direct deposit into an account for receipt of care allowances for special cases prescribed by Ordinance of the Ministry of Health and Welfare, along with a copy of a bankbook (referring to a sheet of paper on which an account number is written). The same shall also apply to changing the account for receipt of care allowances for special cases.
- (2) Care allowances for special cases may be paid directly in cash under the proviso of Article 27-2 (1) of the Act, in any of the following cases:
 1. Where a financial institution at which an account for receipt of care allowances for special cases was opened is permanently closed, its business is suspended, or it is unable to provide its normal services due to communication failure, etc.;
 2. Where a beneficiary resides in an area where a financial institution is not readily available;
 3. Where it is impracticable to transfer care allowances for special cases into an account for receipt of care allowances for special cases due to unavoidable reasons equivalent to those prescribed in subparagraph 1 or 2.

[This Article Newly Inserted on May 29, 2017]

Article 14 (Long-Term Care Institutions Eligible for Designation)

"Establishment prescribed by Presidential Decree" in Article 31 (2) of the Act means medical and

welfare institutions for senior citizens under Article 34 of the Welfare of Senior Citizens Act and commuting-system welfare facilities for senior citizens at home under Article 38 of that Act.

[This Article Wholly Amended on Sep. 29, 2020]

Article 14-2 (Measures to Ensure Safety of Video Information)

(1) A person who operates a long-term care institution shall take the following measures to ensure the safety of video information pursuant to Article 33-3 (3) of the Act:

1. Measures to keep access records and to prevent forgery or falsification thereof, in order to respond to any infringement on video information;
2. Measures to control access to video information and to restrict rights to access thereto;
3. Measures to formulate and implement internal management plans for safely processing video information;
4. Physical measures, such as creating storage facilities for safe keeping of video information and installing locking devices.

(2) The detailed measures necessary to ensure the safety of video information referred to in paragraph (1) shall be determined and publicly notified by the Minister of Health and Welfare.

[This Article Newly Inserted on Apr. 18, 2023]

[Previous Article 14-2 moved to Article 14-3 <Apr. 18, 2023>]

Article 14-3 (Long-Term Care Institutions Subject to Human Rights Education)

“Institution prescribed by Presidential Decree” in Article 35-3 (1) and (2) of the Act means a long-term care institution under subparagraphs 1 and 2 of Article 10. <Amended on Jun. 11, 2019>

[This Article Newly Inserted on Sep. 11, 2018]

[Moved from Article 14-2; previous Article 14-3 moved to Article 14-4 <Apr. 18, 2023>]

Article 14-4 (Protection of Long-Term Care Workers)

If a long-term care worker requests a remedy to solve a grievance on any of the grounds provided in the subparagraphs of Article 35-4 (1) of the Act, the head of the relevant long-term care institution shall take proper measures, such as changing the long-term care worker’s duties. In such cases, the head of the long-term care institution shall counsel the relevant beneficiary or his or her family member.

[This Article Newly Inserted on Jun. 11, 2019]

[Moved from Article 14-3 <Apr. 18, 2023>]

Article 15 (Criteria for Imposition of Penalty Surcharges)

Kinds of offenses on which penalty surcharges are to be imposed pursuant to Article 37-2 (1) and (2) of the Act and the amounts of penalty surcharges according to the severity of offenses, etc. shall be as specified in attached Table 2.

[This Article Wholly Amended on Feb. 11, 2014]

Article 15-2 (Imposition and Payment of Penalty Surcharges)

- (1) Where a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu (referring to the head of an autonomous Gu; hereinafter the same shall apply) intends to impose a penalty surcharge on a person pursuant to Article 37-2 of the Act, he or she shall give notice in writing to a person liable to pay a penalty surcharge to pay the money, stating the kind of the relevant offense, the amount of the penalty surcharge, etc. <Amended on Sep. 29, 2020>
- (2) A person upon receipt of notice given under paragraph (1) shall pay a penalty surcharge to a collecting agency designated by a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu within 20 days from receipt of the notice: Provided, That where he or she cannot pay the penalty surcharge within that period due to an act of God or any other unavoidable cause, he or she shall pay the penalty surcharge within seven days from the date such circumstances disappear.
- (3) A collecting agency which receives a penalty surcharge pursuant to paragraph (2) shall issue a receipt to a payer of such penalty surcharge and notify without delay a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu of the receipt of the penalty surcharge.

[This Article Newly Inserted on Feb. 11, 2014]

Article 15-3 (Information to Be Published)

"Information specified by Presidential Decree" in the main clause, with the exception of the subparagraphs, of Article 37-3 (1) of the Act and in the main clause of paragraph (2) of that Article means the following information: <Amended on Jun 11, 2019; Sep. 29, 2020>

1. Types of long-term care institutions and long-term care benefits;
2. Date of, or the date of renewal of, designation of a long-term care institution;
3. The name of the head of the facility designated as a long-term care institution (limited to where the head of the relevant facility is not the same person as the head of the long-term care institution);
4. Deleted. <Sep. 29, 2020>

[This Article Newly Inserted on Feb. 11, 2014]

Article 15-4 (Determination on, Procedures for, and Methods of Publication)

- (1) Where the Minister of Health and Welfare, a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu intends to make publication under Article 37-3 (1) or (2) of the Act, he or she shall notify in writing the long-term care institution under that paragraph (hereinafter referred to as "long-term care institution whose information is subject to publication") of the fact that it is a long-term care institution whose information is subject to publication and information to be published. In such cases, where he or she has established a committee for deliberation on publication (hereinafter referred to as "committee for deliberation on publication") under Article 37-3 (3) of the Act, he or she shall give notice of the same following deliberation by the committee for deliberation on publication. <Amended on Sep. 29, 2020>
- (2) The Minister of Health and Welfare, a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu shall determine whether to make publication under Article 37-3 (1) or (2) in accordance with the following classifications after holding hearings pursuant to subparagraph 3 of Article 63 of the Act on the head of a long-term care institution whose information is subject to publication who has received notice pursuant to paragraph (1): <Amended on Sep. 29, 2020>
 1. Where the head of a long-term care institution whose information is subject to publication attends a hearing: The Minister of Health and Welfare, a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu shall determine whether to make publication in consideration of the result of the hearing: Provided, That when he or she has undergone deliberation by the committee for deliberation on publication pursuant to the latter part of paragraph (1), the Minister of Health and Welfare, a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu shall determine whether to make publication following re-deliberation by the committee for deliberation on publication on the result of the hearing;
 2. Where the head of a long-term care institution whose information is subject to publication fails to attend a hearing: The Minister of Health and Welfare, a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu shall determine that he/she will make publication as he or she has notified pursuant to paragraph (1).
- (3) Where the Minister of Health and Welfare, a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu publish a violation, etc. pursuant to Article 37-3 (1) or (2) of the Act, he or she shall publish it on the website of the Minister of Health and Welfare, a relevant Special Self-Governing City, Special Self-Governing Province, or Si/Gun/Gu (referring to the relevant autonomous Gu; hereinafter the same shall apply) and may make an additional publication on the information disclosure system under Article 6 of the Official Information Disclosure Act or on the website of the NHIS. <Amended on Sep. 29, 2020>
- (4) Where the Minister of Health and Welfare, a Special Self-Governing City Mayor, a Special

Self-Governing Province Governor, or the head of a Si/Gun/Gu deems additional publication necessary, such as in cases where an offense subject to publication is grave or where offenses subject to publication are repeated, he or she may publish such offenses in a newspaper under the Act on the Promotion of Newspapers or through a broadcast network under the Broadcasting Act, in addition to the publication under paragraph (3), during the period prescribed by that paragraph. <Amended on Sep. 29, 2020>

- (5) When a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu makes publication pursuant to paragraph (3) or (4), he or she shall, without delay, notify the Minister of Health and Welfare of such fact. In such cases, the head of a Si/Gun/Gu shall make said notification via the Special Metropolitan City Mayor, a Metropolitan City Mayor, or a Do Governor. <Newly Inserted on Sep. 29, 2020>
- (6) Where a changed designation or report on change is made or filed under Article 33 of the Act regarding information published during the period for publication under paragraph (3), the Minister of Health and Welfare, a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu shall make sure that such change is reflected in information to be published under paragraph (3) without delay. <Amended on Jun. 11, 2019; Sep. 29, 2020>
- (7) Except as provided in paragraphs (1) through (6), matters necessary for the procedures and methods for publication, changes to information to be published, etc. shall be determined by the Minister of Health and Welfare, a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu. <Amended on Sep. 29, 2020>

[This Article Newly Inserted on Feb. 11, 2014]

Article 15-5 (Organization and Operation of Committee for Deliberation on Publication)

- (1) A committee for deliberation on publication shall be comprised of five members, including one chairperson.
- (2) The members of the committee for deliberation on publication shall be appointed or commissioned by the Minister of Health and Welfare, a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu from among the following persons, taking their genders into consideration. In such cases, one person each who falls under subparagraphs 4 and 5 shall be appointed or commissioned: <Amended on Sep. 29, 2020>
 1. A person qualified as an attorney-at-law;
 2. A person who has majored in fields related to welfare of senior citizens or law, and has served or currently serves as an associate professor or a senior researcher or higher at a school under Article 2 of the Higher Education Act or at a government-funded research institute under Article 2 of the Act on the Establishment, Operation and Fostering of Government-Funded Research Institutes;

3. A person who has at least two years' experience in affairs related to the welfare of senior citizens or long-term care;
 4. A member in general service of the Senior Executive Service of the Ministry of Health and Welfare, or a public official of Grade IV or higher under the jurisdiction of a Special Self-Governing City, a Special Self-Governing Province, or a Si/Gun/Gu;
 5. A person recommended by the President of the NHIS from among its employees.
- (3) The chairperson shall be elected by a committee for deliberation on publication from among the members referred to in the subparagraphs of paragraph (2).
 - (4) The terms of office of members who are not members under paragraph (2) 4 and 5 shall be two years.
 - (5) The chairperson shall represent the committee for deliberation on publication and preside over the affairs thereof.
 - (6) Where the chairperson of a committee for deliberation on publication is unable to perform his or her duties due to any unavoidable cause, a member designated in advance by the chairperson shall act on his or her behalf.
 - (7) A committee for deliberation on publication shall hold meetings with a majority of all incumbent members present, and pass resolutions with the consent of those present.
 - (8) Except as matters provided in paragraphs (1) through (7), matters necessary for the organization, operation, etc., the committee for deliberation on publication shall be determined by the chairperson of the committee after deliberation thereby. <Amended on Sep. 29, 2020>

[This Article Newly Inserted on Feb. 11, 2014]

Article 15-6 (Exclusion of, Challenge to, or Recusal of, Members of Committee for Deliberation on Publication)

- (1) In any of the following cases, a member of the committee for deliberation on publication shall be excluded from proceedings of deliberation and resolution on the relevant case on the agenda:
 1. If the committee member or the person who is or was the spouse of the committee member is a party to the case on the agenda (including executive officers of the party, if the party is a corporation or organization; hereinafter the same shall apply) or a joint right-holder or joint obligor with a party to the case on the agenda;
 2. If the member is or was a relative of a party to the relevant agenda;
 3. If the member has testified, made a statement, provided advice or services, or conducted research or an appraisal in relation to the relevant agenda item;
 4. If the member or a corporation to which the member belongs is or was an agent of a party to the relevant agenda item.

- (2) If a party to the case has a ground to exclude a committee member under any subparagraph of paragraph (1) or has reason to believe that the party can hardly expect impartiality from the committee member in deliberation and resolution, the party may file a motion for challenge to the committee member with the committee for deliberation on publication, and the committee for deliberation on publication shall make a decision thereon by resolution. In such cases, the committee member to whom the motion for challenge is filed shall not participate in the resolution proceeding.
- (3) If the status of a committee member falls within any of the grounds for exclusion under paragraph (1), he or she shall voluntarily recuse himself or herself from deliberation and resolution on the relevant agenda item.

[This Article Newly Inserted on Nov. 8, 2016]

Article 15-7 (Removal or Dismissal of Members of Committee for Deliberation on Publication)

Where a member of the committee for deliberation on publication falls under any of the following cases, the Minister of Health and Welfare, a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu may remove or dismiss the relevant member: <Amended on Sep. 29, 2020>

1. If the member becomes incapable of performing his or her duties due to mental or physical disability;
2. If the member has engaged in misconduct in relation to his or her duties;
3. If the member is deemed unsuitable as a member due to delinquency of duties, injury to dignity, or any other reason;
4. If the member does not voluntarily refrain from participating in proceedings, despite falling under any subparagraph of Article 15-6 (1);
5. If the member voluntarily indicates that it is impracticable to perform his or her duties.

[This Article Newly Inserted on Nov. 8, 2016]

Article 15-8 (Beneficiary's Co-payments)

A beneficiary of long-term care benefits shall make payment of the following expenses under Article 40 (1) of the Act:

1. Benefits for home care services: 15/100 of expenses for relevant long-term care benefits;
2. Institutional care benefits: 20/100 of expenses for relevant long-term care benefits.

[This Article Newly Inserted on Jun. 21, 2022]

Article 16 (Matters Subject to Deliberation by Long-Term Care Committee)

"Essential matters specified by Presidential Decree" in subparagraph 4 of Article 45 of the Act are as follows: <Amended on Feb. 29, 2008; Mar. 15, 2010; Nov. 18, 2016>

1. Guidelines for fees for issuing a medical doctor's referral;
2. Guidelines for fees for issuing a written instruction for home visit nursing;
3. Determination of the monthly maximum amount under Article 28 of the Act;
4. Other matters submitted to the Committee by the Minister of Health and Welfare for deliberation with respect to long-term care benefits.

[Moved from Article 12; previous Article 16 moved to Article 20 <Jun. 11, 2008>]

Article 17 (Public Officials Appointed to Committee Members)

"Public officials, each of whom belongs to an appropriate central administrative agency specified by Presidential Decree and is a member of the Senior Executive Service" in Article 46 (2) 3 of the Act means persons appointed by the head of the agency to which each of them belongs, from among public officials who belong to the Ministry of Economy and Finance or the Ministry of Health and Welfare and who are members of the Senior Executive Service. <Amended on Feb. 29, 2008; Mar. 15, 2010>

[Moved from Article 13; previous Article 17 moved to Article 21 <Jun. 11, 2008>]

Article 17-2 (Removal or Dismissal of Members of Long-Term Care Committee)

In any of the following cases, the Minister of Health and Welfare may remove or dismiss a member of the Long-Term Care Committee under Article 45 of the Act (hereinafter referred to as the "Long-Term Care Committee") from office: <Amended on Nov. 8, 2016>

1. Where he or she becomes unable to perform his or her duties due to mental disorder;
2. Where he or she commits any wrongdoing related to his or her duties;
3. Where he or she is deemed to be unsuitable for a member due to neglect of duty, injury to dignity or other reasons;
4. Where he or she expresses his or her intention for himself or herself that it is difficult for him or her to perform his or her duties;

[This Article Newly Inserted on Dec. 31, 2015]

Article 18 (Operation of Long-Term Care Committee)

- (1) The chairperson of the Long-Term Care Committee under Article 46 of the Act shall represent

the Long-Term Care Committee and have overall control of the Committee's affairs. <Amended on Jul. 2, 2019>

- (2) The Vice Chairperson shall assist the Chairperson and act on his or her behalf if the Chairperson is unable to perform his or her duties due to any unavoidable cause.
- (3) Members who attend a meeting of the Long-Term Care Committee may be reimbursed for allowances, travel expenses, and other expenses incurred within budgetary limits: Provided, That the foregoing shall not apply where a public official member who attends a meeting in direct connection with any affair assigned to him or her.
- (4) Except as provided in this Decree, matters necessary for the operation of the Long-Term Care Committee shall be determined by the chairperson, subject to resolution by the Committee.

[Moved from Article 14; previous Article 18 moved to Article 22 <Jun. 11, 2008>]

Article 18-2 (Services of Support Centers for Long-Term Care Workers)

- (1) "Matters specified by Presidential Decree" in Article 47-2 (2) 4 of the Act means the following: <Amended on Jun. 11, 2019>
 1. Provision of information about job opportunities for long-term care workers and counseling on jobs;
 2. Programs for improving social awareness of long-term care workers;
 3. Other matters determined and publicly notified by the Minister of Health and Welfare or ordinance of each local government concerning the protection of rights of long-term care workers.
- (2) A support center for long-term care workers may establish an advisory committee comprised of experts in the fields of psychology, law, and grievances in order to solve long-term care workers' grievances provided in any subparagraph of Article 35-4 (1) of the Act. <Newly Inserted on Jun. 11, 2019>

[This Article Newly Inserted on Nov. 8, 2016]

[Title Amended on Jun. 11, 2019]

Article 19 (Matters to Be Stipulated in Articles of Incorporation of the National Health Insurance Service)

"Other matters specified by Presidential Decree" in Article 48 (4) 4 of the Act means the number of standing directors who are wholly responsible for long-term care programs and matters regarding the organization, personnel management, remuneration, and accounting in connection with long-term care programs. <Amended on May 31, 2013>

[Moved from Article 15; previous Article 19 moved to Article 23 <Jun. 11, 2008>]

Article 20 (Meetings of Assessment Committee)

- (1) The chairperson of an assessment committee shall convene a meeting and preside over the meeting. <Amended on Nov. 8, 2016>
- (2) An assessment committee shall have one secretary to conduct its administrative affairs, who shall be appointed by the chairperson, from among the NHIS' employees.

[Moved from Article 16; previous Article 20 moved to Article 24 <Jun. 11, 2008>]

Article 21 (Subcommittees of Assessment Committee)

- (1) An assessment committee may establish subcommittees to conduct its affairs efficiently.
- (2) A subcommittee shall deliberate on and manage matters delegated by the assessment committee.
- (3) Matters necessary for the composition and operation of subcommittees shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended on Feb. 29, 2008; Mar. 15, 2010>

[Moved from Article 17; previous Article 21 moved to Article 25 <Jun. 11, 2008>]

Article 21-2 (Exclusion of, Challenge to, or Recusal of, Members of Assessment Committee)

- (1) In any of the following cases, a member of an assessment committee shall be excluded from proceedings of deliberation and resolution on a case on the agenda:
 1. If the committee member or the person who is or was the spouse of the committee member is a party to the case on the agenda or a joint right-holder or joint obligor with a party to the case on the agenda;
 2. Where the member is or was a relative of a party to the relevant agenda;
 3. Where the member has testified, made a statement, provided advice or services, or conducted research or an appraisal in relation to the relevant agenda item;
 4. Where the member or a corporation to which the member belongs is or was an agent of a party to the relevant agenda item.
- (2) If a party has a ground to exclude a committee member under any subparagraph of paragraph (1) or has reason to believe that the party can hardly expect impartiality from the committee member in deliberation and resolution, the party may file a motion for challenge to the committee member with the assessment committee, and the committee shall make a decision thereon by resolution. In such cases, the committee member to whom the motion for challenge is filed shall not participate in the resolution proceeding.
- (3) If a committee member falls under any of the exclusion cases under paragraph (1), he or she shall voluntarily recuse himself or herself from deliberation and resolution on the relevant

case on the agenda

[This Article Newly Inserted on Nov. 8, 2016]

Article 21-3 (Dismissal of Members of Assessment Committee)

- (1) In any of the following cases, the President of the NHIS may dismiss a member of the assessment committee from office:
 1. Where he or she becomes unable to perform his or her duties due to mental disorder;
 2. Where he or she commits any wrongdoing related to his or her duties;
 3. Where he or she is deemed to be unsuitable for a member due to neglect of duty, injury to dignity or other reasons;
 4. If a committee member does not voluntarily avoid participating in proceedings, although he or she falls under the case specified in any subparagraph of Article 21-2 (1);
 5. The member voluntarily indicates that it is impracticable to perform his or her duties.
- (2) A Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu, who recommended a person as a committee member pursuant to the latter part, with the exception of the subparagraphs, of Article 52 (4) of the Act may withdraw the recommendation in any of the cases referred to in paragraph (1).

[This Article Newly Inserted on Nov. 8, 2016]

Article 22 (Period for Making Decision on Application for Examination)

- (1) Upon receipt of an application for examination under Article 55 (1) of the Act, the NHIS shall make a decision thereon within 60 days from the receipt of the application for examination: Provided, That the period for making a decision may be extended by up to 30 days, if an unavoidable event necessitates such extension. <Amended on Jun. 11, 2019>
- (2) When the NHIS extends the period for making a decision pursuant to the proviso of paragraph (1), it shall without delay notify the applicant of the reason for extension and the extended period. <Amended on Jun. 11, 2019>

[Title Amended on Jun. 11, 2019]

[Moved from Article 18; previous Article 22 moved to Article 26 <Jun. 11, 2008>]

Article 23 (Composition of Long-Term Care Examination Committee)

- (1) The Long-Term Care Examination Committee established within the NHIS pursuant to Article 55 (3) of the Act (hereinafter referred to as the "Examination Committee") shall be comprised of not more than 50 members, including one chairperson.
- (2) The chairperson of the Examination Committee shall be appointed by the President of the NHIS from among the NHIS' standing directors responsible for long-term care programs, while

committee members shall be appointed or commissioned by the President of the NHIS from among the following persons, giving due consideration to gender balance: <Amended on Jun. 11, 2019>

1. A medical doctor, dentist, or oriental medical doctor under the Medical Service Act, or a registered nurse with at least 10 years' work experience;
 2. A social worker as defined in the Social Welfare Services Act with at least 10 years' work experience;
 3. An executive officer or employee of the NHIS, who is in charge of business affairs concerning long-term care insurance;
 4. Other persons who have abundant knowledge and experience relating to law or long-term care.
- (3) The term of office of a member of the Examination Committee shall be three years but may be renewed consecutively only once: Provided, That the term of office of a committee member appointed from among employees of the NHIS shall correspond to his or her period of service as an employee. <Amended on Nov. 8, 2016>

[Moved from Article 19; previous Article 23 moved to Article 27 <Jun. 11, 2008>]

Article 24 (Operation of Examination Committee)

- (1) A meeting of the Examination Committee shall be comprised of seven members in total, including the chairperson and six members designated by the chairperson whenever a meeting is held, but at least one person referred to in each subparagraph of Article 23 (2) shall be included therein. <Amended on Jun. 11, 2008>
- (2) A meeting of the Examination Committee shall be duly formed with a majority of incumbent members present and shall adopt a resolution by affirmative votes of a majority of the members present at the meeting.
- (3) The Examination Committee shall have one secretary to conduct its administrative affairs, who shall be appointed by the chairperson from among the NHIS' employees.
- (4) Except as provided in this Decree, matters necessary for the operation of the Examination Committee shall be determined by the chairperson, subject to resolution by the Examination Committee.

[Moved from Article 20; previous Article 24 moved to Article 29 <Jun. 11, 2008>]

Article 24-2 (Exclusion of, Challenge to, or Recusal of, Members of Examination Committee)

- (1) In any of the following cases, a member of the Examination Committee shall be excluded from proceedings of deliberation and resolution on a case on the agenda:
 1. If the committee member or the person who is or was the spouse of the committee member

is a party to the case on the agenda or a joint right-holder or joint obligor with a party to the case on the agenda;

2. Where the member is or was a relative of a party to the relevant agenda;
 3. Where the member has testified, made a statement, provided advice or services, or conducted research or an appraisal in relation to the relevant agenda item;
 4. Where the member or a corporation to which the member belongs is or was an agent of a party to the relevant agenda item.
- (2) If a party to the case on the agenda has a ground to exclude a committee member under any subparagraph of paragraph (1) or has reason to believe that the party can hardly expect impartiality from the committee member in deliberation and resolution, the party may file a motion for challenge to the committee member with the Examination Committee, and the Examination Committee shall make a decision thereon by resolution. In such cases, the committee member to whom the motion for challenge is filed shall not participate in the resolution proceeding.
- (3) If a committee member falls under any of the exclusion cases under paragraph (1), he or she shall voluntarily recuse himself or herself from deliberation and resolution on the relevant case on the agenda

[This Article Newly Inserted on Nov. 8, 2016]

Article 24-3 (Removal or Dismissal of Members of Examination Committee)

In any of the following cases, the President of the NHIS may remove or dismiss a member of the Examination Committee from office: <Amended on Jun. 11, 2019>

1. Where he or she becomes unable to perform his or her duties due to mental disorder;
2. Where he or she commits any wrongdoing related to his or her duties;
3. Where he or she is deemed to be unsuitable for a member due to neglect of duty, injury to dignity or other reasons;
4. If a committee member does not voluntarily avoid participating in proceedings, although he or she falls under the case specified in any subparagraph of Article 24-2 (1);
5. The member voluntarily indicates that it is impracticable to perform his or her duties.

[This Article Newly Inserted on Nov. 8, 2016]

[Title Amended on Jun. 11, 2019]

Article 25 (Composition of Long-Term Care Reexamination Committee)

- (1) The Chairperson of the long-term care reexamination committee under Article 56 (1) of the Act (hereinafter referred to as the "Reexamination Committee") shall be appointed by the Minister of Health and Welfare from among public officials in the Senior Executive Service of the

Ministry of Health and Welfare who are in charge of business affairs concerning long-term care insurance. <Amended on Feb. 29, 2008; Mar. 15, 2010; Jun. 11, 2019>

- (2) Members of the Reexamination Committee shall be appointed or commissioned by the Minister of Health and Welfare from among the following persons: <Amended on Feb. 29, 2008; Mar. 15, 2010; Jun. 11, 2019>
 1. A Grade IV or higher-ranking public official of the Ministry of Health and Welfare or a public official in the Senior Executive Service;
 2. A person qualified as a judge, public prosecutor, or attorney-at-law;
 3. A person who serves as an adjunct or higher professor in the field of social insurance or medical services in a university;
 4. Other persons who have abundant knowledge and experience relating to law, social insurance, or medical services.
- (3) The term of office of a member of the Reexamination Committee shall be three years but may be renewed consecutively only once: Provided, That the term of office of a committee member appointed from among public officials shall correspond to his or her period of service as a public official. <Amended on Nov. 8, 2016; Jun. 11, 2019>

[Title Amended on Jun. 11, 2019]

[Moved from Article 21 <Jun. 11, 2008>]

Article 25-2 (Exclusion of, Challenge to, or Recusal of, Members of Reexamination Committee)

- (1) In any of the following cases, a member of the Reexamination Committee shall be excluded from proceedings of deliberation and resolution on a case on the agenda: <Amended on Jun. 11, 2019>
 1. If the committee member or the person who is or was the spouse of the committee member is a party to the case on the agenda or a joint right-holder agenda; or joint obligor with a party to the case on the agenda;
 2. Where the member is or was a relative of a party to the relevant agenda;
 3. Where the member has testified, made a statement, provided advice or services, or conducted research or an appraisal in relation to the relevant agenda item;
 4. Where the member or a corporation to which the member belongs is or was an agent of a party to the relevant agenda item.
- (2) If a party has reason to believe that the party can hardly expect impartiality from a committee member in deliberation and resolution, the party may file a motion for challenge to the committee member with the reexamination committee, and the reexamination committee shall make a decision thereon by resolution. In such cases, the committee member to whom the motion for challenge is filed shall not participate in the resolution proceeding. <Amended on Jun. 11, 2019>

- (3) If a committee member falls under any of the exclusion cases under paragraph (1), he or she shall voluntarily recuse himself or herself from deliberation and resolution on the relevant case on the agenda.

[This Article Newly Inserted on Nov. 8, 2016]

[Title Amended on Jun. 11, 2019]

[Previous Article 25-2 moved to Article 25-3 <Nov. 8, 2016>]

Article 25-3 (Removal or Dismissal of Members of Reexamination Committee)

In any of the following cases, the Minister of Health and Welfare may remove or dismiss a member of the Reexamination Committee under any subparagraph of Article 25 (2) from office: <Amended on Nov. 8, 2016; Jun. 11, 2019>

1. Where he or she becomes unable to perform his or her duties due to mental disorder;
2. Where he or she commits any wrongdoing related to his or her duties;
3. Where he or she is deemed to be unsuitable for a member due to neglect of duty, injury to dignity or other reasons;
4. If a committee member does not voluntarily avoid participating in proceedings, although he or she falls under the case specified in any subparagraph of Article 25-2 (1);
5. The member voluntarily indicates that it is impracticable to perform his or her duties.

[This Article Newly Inserted on Dec. 31, 2015]

[Title Amended on Jun. 11, 2019]

[Moved from Article 25-2 <Nov. 8, 2016>]

Article 26 (Meetings of Reexamination Committee)

- (1) The Chairperson of the Reexamination Committee shall convene and preside over meetings of the Committee. <Amended on Jun. 11, 2019>
- (2) If the Chairperson is unable to perform his or her duties due to any unavoidable cause, the member appointed by the Chairperson shall act on his or her behalf.
- (3) A meeting of the Reexamination Committee shall be duly formed with a majority of incumbent members present and shall adopt a resolution by affirmative votes of a majority of the members present at the meeting. <Amended on Jun. 11, 2019>
- (4) The Reexamination Committee shall have one administrative secretary to conduct its administrative affairs, who shall be appointed by the Chairperson from among public officials of the Ministry of Health and Welfare. <Amended on Feb. 29, 2008; Mar. 15, 2010; Jun. 11, 2019>
- (5) Except as provided in this Decree, matters necessary for the operation of the Reexamination

Committee shall be determined by the chairperson, subject to resolution by the Reexamination Committee. <Amended on Jun. 11, 2019>

[Title Amended on Jun. 11, 2019]

[Moved from Article 22 <Jun. 11, 2008>]

Article 27 (Period for Making Decision on Application for Reexamination)

- (1) Upon receipt of an application for reexamination filed pursuant to Article 56 (1) of the Act, the Reexamination Committee shall make a decision thereon within 60 days of receipt of the application for reexamination: Provided, That the period for making a decision may be extended by up to 30 days, if an unavoidable event necessitates such extension. <Amended on Jun. 11, 2019>
- (2) When the Reexamination Committee extends the period for making a decision pursuant to the proviso of paragraph (1), it shall, without delay, notify the applicant of the reason for extension and the extended period. <Amended on Jun. 11, 2019>

[Title Amended on Jun. 11, 2019]

[Moved from Article 23 <Jun. 11, 2008>]

Article 28 (Subsidy by the State and Local Governments)

- (1) Expenses incurred in relation to medical aid beneficiaries under Article 58 (2) of the Act shall be borne by the State and local governments in accordance with the following guidelines: <Amended on Jan. 26, 2010; Oct. 26, 2011; Dec. 30, 2015>
 1. Deleted; <Dec. 30, 2015>
 - 1-2. Expenses incurred in relation to the recipients of medical benefits under Article 3 (1) 1 of the Medical Care Assistance Act: Such expenses shall be borne by each local government;
 2. Expenses incurred in relation to recipients of medical benefits under any provision other than Article 3 (1) 1 of the Medical Care Assistance Act: Such expenses shall be borne as follows:
 - (a) Apportionment to the State: An amount calculated at the standard subsidization rate specified in attached Table 1 of the Enforcement Decree of the Subsidy Management Act for beneficiaries entitled to basic living security;
 - (b) Apportionment to a local government: The remainder of expenses after deducting the apportionment to the State.
- (2) The Special Metropolitan City Mayor, a Metropolitan City Mayor, a Special Self-Governing City Mayor, a Do Governor, or a Special Self-Governing Province Governor shall pay an estimated amount of expenses incurred in relation to benefits prescribed by the Minister of Health and Welfare to the NHIS to cover expenses under paragraph (1). <Amended on Dec. 30, 2009; Mar. 15, 2010; Feb. 11, 2014>

- (3) Procedures for and methods of paying an estimated amount of expenses for benefits under paragraph (2) shall be determined and publicly notified by the Minister of Health and Welfare.
<Amended on Mar. 15, 2010>

[This Article Newly Inserted on Jun. 11, 2008]

Article 28-2 (Procedures and Methods of Administrative Assistance)

- (1) Where the Minister of Health and Welfare, the Special Metropolitan City Mayor, a Metropolitan City Mayor, a Do Governor, or a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu intends to request administrative assistance from the NHIS pursuant to Article 61 (3) of the Act, he or she shall formulate a plan relating to the details of affairs requiring administrative assistance, staffing, operation, etc. and notify the NHIS of the same.
- (2) Matters relating to bearing of expenses required for administrative assistance under paragraph (1) shall be determined by mutual agreement between the Minister of Health and Welfare, the Special Metropolitan City Mayor, a Metropolitan City Mayor, a Do Governor, or a Special Self-Governing City Mayor, a Special Self-Governing Province Governor, or the head of a Si/Gun/Gu and the NHIS.

[This Article Newly Inserted on Sep. 29, 2020]

[Previous Article 28-2 moved to Article 28-3 <Sep. 29, 2020>]

Article 28-3 (Management of Sensitive Information and Personally Identifiable Information)

The State (including a person to whom the Minister of Health and Welfare delegates or entrusts his or her authority pursuant to Article 111 of the National Health Insurance Act, applied mutatis mutandis under Article 64 of the Act), the head of a local government (including a person to whom the relevant authority is delegated or entrusted), or the NHIS (including a person to whom the NHIS' affairs are entrusted pursuant to Article 112 of the National Health Insurance Act, applied mutatis mutandis pursuant to Article 64 of the Act) may manage health-related information under Article 23 of the Personal Information Protection Act, data that constitute criminal history records under subparagraph 2 of Article 18 of the Enforcement Decree of that Act, or data containing a resident registration number or alien registration number under Article 19 of that Decree, if unavoidable to conduct the following administrative affairs: <Amended on Aug. 31, 2012; Nov. 18, 2016; Mar. 27, 2017; Jun. 11, 2019>

1. Services for prevention of geriatric diseases under Article 4 of the Act;
 - 1-2. Applying for approval for long-term care under Articles 13 and 20 through 22 of the Act;
 - 1-3. Providing long-term care benefits under Articles 23 and 27 of the Act;
 - 1-4. Paying family care benefits under Article 24 of the Act;

2. Designating long-term care institutions under Article 31 of the Act;
3. Renewing the designation of long-term care institutions under Article 32-4 of the Act;
4. Reporting any change in a long-term care institution under Article 33 of the Act;
 - 4-2. Issuing a statement of expenses for long-term care benefits by the head of a long-term care institution under Article 35 (3) of the Act;
5. Reporting closure or suspension of a long-term care institution under Article 36 of the Act;
6. Administrative dispositions, such as cancellation of designation of a long-term care institution under Article 37 of the Act;
 - 6-2. Imposing, etc. penalty surcharges under Article 37-2 of the Act;
 - 6-3. Publication of violations, etc. under Article 37-3 of the Act;
 - 6-4. Succeeding to the effects of administrative dispositions under Article 37-4 of the Act;
 - 6-5. Restricting the provision of long-term care benefits under Article 37-5 of the Act;
 - 6-6. Claiming and reimbursing expenses for home care or institutional care benefits under Article 38 of the Act;
 - 6-7. Calculating expenses for issuing written instructions for home visit nursing under Article 42 of the Act;
7. Functions of the NHIS under Article 48 (2) of the Act;
8. Applying for examination under Article 55 of the Act;
9. Applying for reexamination under Article 56 of the Act;
10. Administrative litigation under Article 57 of the Act;
11. Reporting, inspections, etc. under Article 61 of the Act;
12. Hearings under Article 63 of the Act;
13. Paying monetary rewards under Article 104 of the National Health Insurance Act, applied mutatis mutandis under Article 64 of the Act;
14. Designating educational institutions under Article 11 (1) 3 (b).

[This Article Newly Inserted on Jan. 6, 2012]

[Moved from Article 28-2; previous Article 28-3 moved to Article 28-4 <Sep. 29, 2020>]

Article 28-4 (Re-Examination of Regulation)

The Minister of Health and Welfare shall examine the appropriateness of the effective period of approval for long-term care under Article 8 every three years, counting from January 1, 2014 (referring to the period that ends on the day before January 1 of every third year) and shall take measures, such as making improvements.

[This Article Newly Inserted on Dec. 30, 2013]

[Moved from Article 28-3 <Sep. 29, 2020>]

Article 29 (Criteria for Imposing Administrative Fines)

Criteria for imposing administrative fines under Article 69 of the Act shall be as specified in attached Table 3.

[This Article Wholly Amended on Dec. 31, 2008]