

(Attached Table 1) Example of personal information held by the health insurance association

Category	Subcategory	Contents
Insured / Dependents	Basic information	Name, gender, date of birth, address, telephone number, basic pension number, personal number
	Applicable information	Insurer number and insured person symbol / number, business office, employee number, qualification Acquisition (loss) date, standard monthly remuneration, remuneration record, income, occupation (school name), Dependents, relationship, cohabitation and separation
	Benefit information	Medical fee statement, etc. and the contents of the statement, etc. Medical expenses, allowances, etc. payment application form and the contents of the application form and attached documents Application form related to third party acts, contents of application form and attached documents Specific disease application form, limit application certificate application form and contents of application form Contents of application forms or notification forms other than the above and application forms, etc. High medical expenses, partial refund and surcharge payment Medical expenses and allowance payment Transfer account
	Health checkup information	Medical examination results, medical history, health condition, medication history, presence or absence of disability
Medical institutions / Health checkup institutions	Basic information	Institution number, address, telephone number of medical institution / medical examination institution, etc. Name of insurance doctor, etc.
	Medical information	Contents such as medical treatment

Of the above, information with a personal number in the application and benefit information shall be treated as specific personal information.