of GDP. Especially, we consider the reduction of the contribution of old-age medical care here, we conclude that the reduction of the contribution of old-age medical care increases investment and GDP compare to the case of maintaining the contribution of old-age medical care.

## - Figure 5-5 -

Decreasing the contribution and increasing the burden of medical care for the old has a meaning of realizing the burden which depends on the risk of the disease. As stated above, when we treat the rate of death as the substitute index of the risk of the disease, there is a problem that each mutual association whose risk of death is relatively lower than the national health insurance is imposed heavier burden. So changing the rate of contribution proportion to his rate of disease or increasing the burden of the old themselves are rational choices. Since the contribution of old-age medical care is a contribution from the firm, decreasing the contribution from each mutual fund whose risk is relatively low makes investment raise.

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