In Japan, social security expenditure continues to increase, and welfare protection expenditure for minimally living guarantee for living needy persons continues to increase rapidly. Medical assistance, which is the largest expenditure factor in welfare protection expenditure, is basically a system sponsored by standards all over the country, for welfare recipients, but expenditure in each fiscal year between prefectures There are actual circumstances in which there is a big difference, and analyzing and verifying the determinant includes important implications for considering the way of medical assistance expenditure in Japan in the future. Regarding the factor analysis of regional differences in medical assistance expenditure, some previous studies have been started, including the Board of Audit and Inspection (2006), but as for factors (variables) that are supposed to influence the regional differences, Basically, we analyze factors based on the average value across the country, and analysis with consideration of regional differences among elements is few. Therefore, in this research, among the factors related to medical assistance, the percentage of medical assistance recipients in welfare recipients

In addition to conducting panel analysis on correlations with various social, economic, medical and welfare explanatory variables, etc., with three main variables to be explained as variables to be explained, namely, medical assistance expenses per recipient and medical expenses per capita per population , Quantitative point regression analysis to extract differences of statistically significant determinants in prefectures where each explanatory variable is in the high and low level, grasp / extract the factors of regional differences related to medical assistance I attempted to do. As a result of the analysis by this research, in the case where "Percentage of medical assistance recipients in welfare recipients" was taken as the explanatory variable, only "high grades of high school graduates" had statistically significant negative The effect was shown. In addition, when the "medical assistance cost per recipient" is taken as the explanatory variable, only the high-ranking prefectures have a statistically significant positive effect on the "number of public health nurses per 100,000 population" became. As a policy implication based on these results, it is assumed that in prefectures where medical assistance expenditure is at a high level, it is assumed that the effect of improving living standards and policy comprehension ability by highly educated teacher has occurred, It is possible to evaluate that policies that increase the rate of advancement of high school graduates to higher education contribute to the suppression of medical assistance expenditure. In addition, in order to raise the burden of personnel expenses due to the increase in public health nurses excessively not to raise the income of medical assistance recipients, strengthening correspondence such as standardization of work contents to be implemented by nurse nationwide It can be effective. In this research, only prefecture data (up to fiscal 2011) available as general public information was used. I would like to make future analysis more detailed and latest analysis by municipal unit data and data after the revised lifestyle protection law enforcement.