

報告タイトル

長期護理保險給付モデルの研究  
--北京、上海、広州、成都の事例研究

Research on the Models of Long-Term Care Insurance Benefit Coverage:  
A case study of Beijing, Shanghai, Guangzhou and Chengdu

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要旨(800字程度)

In 2016, China launched the Long-term Care Insurance (LTCI) program. Among forty-nine pilot cities, Beijing, Shanghai, Chengdu, and Guangzhou are in different geographical regions and implement distinctive models of LTCI benefit coverage. It has been discovered that LTCI in Beijing and Shanghai cover both community and institutional care, whereas LTCI in Guangzhou only covers institutional care. LTCI pays for home care by informal caregivers in Beijing and Chengdu rather than Shanghai and Guangzhou. To determine the underlying causes and models of LTCI benefit coverage, this paper analyzed the conditions of nursing resources and care needs in four cities from the perspectives of supply and demand. The land rent in Beijing and Shanghai is much higher, which results in the high operation cost of institutional care. Whereas, their community resources are abundant, Beijing and Shanghai active utilize and cover community care. The elderly's health situation in Beijing and Chengdu is better than in Shanghai and Guangzhou, as evidenced by a lower disability rate, and the utilization rate of social care is also lower. Informal caregivers can well supplement the formal caregivers and meet the needs of the majority of elderly persons. Therefore informal care is covered by insurance. Out of the four cities, Guangzhou has the highest percentage of elderly people with disabilities and institutional caregivers. The LTCI reimbursement in Guangzhou is only accessible for institutional care because the majority of elderly people require professional care. In summary, it can be concluded that there are four respective models of LTCI benefit coverage in the pilot phase: Beijing model, Shanghai model, Chengdu model and Guangzhou model. Community nursing resources, institutional care costs, the elderly disability rate and the utilization of social care are found as four key factors influencing LTCI benefit coverage.