

清华大学
民生保障与社会发展
研究系列

银色经济与 嵌入式养老服务

杨燕绥 等 主编

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内 容 简 介

人口老龄化是继农业革命、工业革命之后，进入健康长寿型经济社会的社会常态，需要按照健康长寿的消费需求和约束条件组织生产、分配、流通和消费，形成代际和谐的供求关系，作者将其定义为银色经济。

本书从银色经济定义、银色经济发展战略、嵌入式养老服务、医养服务 PPP 模式和全球适老化社会建设共识五个方面系统的阐述了这个问题，是学者、政策制定者、从业者学习参考用书。

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作 者 序

人口老龄化不是社会老化,而是社会进步。农业经济为解决温饱问题追求GDP总量,人均寿命达到40~50岁;工业经济为解决发展问题追求GDP速度,人均寿命达到60~80岁;健康经济为解决生命质量问题追求人均GDP的福利相关性,人均寿命可能达到90~120岁。健康长寿成为社会发展的主题,国家应当基于健康长寿和不断升级的消费需求,组织生产、分配、流通和消费的活动及其供求关系,即银色经济。

在银色经济时代,人们的一生有白发50年和黑发50年,要大力发展战略性新兴产业,改善劳动人口的人力资本和提高劳产率,以科技推动经济;改善老龄人口的资产结构和提高购买力,以消费拉动经济。大力发展战略性新兴产业,改善老龄人口的资产结构和提高购买力,以消费拉动经济。大力发展战略性新兴产业,改善老龄人口的资产结构和提高购买力,以消费拉动经济。居家养老是家庭养老和社会养老的结合物,主要适用于老化失能的人群。在国际社会,已有一系列公约在呼吁人们建设老年友好城市,帮助人们从离家养老回归居家养老,以强化亲情孝道和降低养老成本。中国需要借鉴经验与吸取教训,一要照顾好当代老人;二要全周期地保护人民健康和发展嵌入式医养服务,延续劳动人口红利和开发老龄人口红利,改变“未富先老、未备而老”的局面,增加国家竞争力,迎接人类第三大财富波。

本书基于“人均GDP的福利相关性”理论,从宏观经济与微观经济相结合的视角研究老龄社会发展常态与战略。主要内容如下:第1章阐述银色经济的内涵与外延、银色经济特征及其发展战略、发达国家的主要措施和经验;第2章描述中国人口老龄化的的主要特征、人口老龄化的经济社会影响、中国银色经济发展指数构建、中国银色经济战略和行动计划;第3章研究嵌入式养老服务、医养服务需求与供给、金融服务需求与供给;第4章探讨养老服务体系建设、养老服务交付的PPP模式(Partnership)、政府职责与医养服务事业发展(Public)、社会企业与医养服务产业发展(Private)、社会组织与医养服务体系建设(Society);第5章综述国际社会的共识、典型国家案例。课题组陈诚诚、胡乃军博士、于森博士和刘广君等参与了本书的撰写。

本书是《中国老龄社会与养老保障发展报告》和“银色经济指数”建设的一部分,并得到国家社会科学基金、清华大学文科发展基金、清华大学文化传承基金的资助,还有来自院校、政府、企业和海外的合作伙伴的指导与帮助,在这里一并感谢。

杨燕绥

2017年5月1日
于清华园

Preface

The aging tendency of population is not so much as the senility of a society, but as a social progress. Agricultural Economy is to solve the problem of food and merely focus on GDP itself, with a corresponding life expectancy from 40 to 50 years old. Industrial Economy is to stimulate development and the growth rate of GDP, with a life expectancy from 60 to 80 years old, while Health Economics is designed to ameliorate life quality and the welfare concerned with GDP per capita, pursuing a life expectancy of 90~120 years old. When “Health and Longevity” becomes a major development subject, national government is supposed to, based on people’s needs for health and longevity and the increasingly updated consumption demand, coordinate production, distribution, circulation, consumption and supply-demand relationship. Such is called “Silver Economy”.

Silver Economy strives to develop wellness industry, to improve the human capital of laboring people and labor productivity, as well as to spur economy by science. It also hammers at perfecting the asset structure of aged people, enhancing their purchasing power, so as to boost economy by consumption. It is necessary to vigorously develop health-care supporting programs imbedded with the aged people’s body and mental health while incorporated with the family, the community, the organization and the city that the aged belong to. It is necessary to build capacity for people to lead a healthy life and to supplement home-based health care for aged people. Home-based health-care system is a combination of family supporting and social provision for the aged. Internationally there have been a series of conventions that appeal for building Age-friendly cities and helping people back to in-home healthcare from outside-home health-care, so as to reinforce filial love and lower the costs of social provision. It is necessary for China to refer to the experience and take lessons of the successes and failures from that, in order to, firstly, take good care of the presentaged people; secondly, change the situation of “aging before getting rich and prepared”, enhance national competitiveness and embrace the third wave of human wealth, by improving people’s health in their all-life cycle, developing the imbedded mode of health-care service for the aged, maintaining demographic dividends and adjusting elder labor force.

This research, based on the “correlation of welfare and GDP per capita”, aims to explore the normalcy of the aging tendency of population and the corresponding strategies from both macro and micro economic perspectives. The main contents are as

follows; the first chapter makes an inquiry to the connotation and the denotation of Silver Economy, its economic features and development strategies, as well as the major measures taken by and the experience of developed countries. The second chapter explores the features of China's aging tendency of population, its economic and social influence, while outlining the development index of China's Silver Economy and its development strategies and action plans. The third chapter makes a probe into the imbedded mode of health-care service for aged people, the demand for and the supply of the health-care service for the aged, and the demand for and the supply of its financial service. The fourth chapter studies the health-care service system, the Public-Private-Partnership mode of health-care system (Partnership), the responsibility of government and the development of social service (Public), the development of health-care service for the aged sustained by social enterprises (Private), the construction of social organizations and health-care service system (Society). The fifth chapter analyzes the international consensus and typical examples of other countries.

This research is part of the "China's Development Report on the Aging Society and Retirement Security" and the Silver Economy Index Outline and subsidized by the National Social Science Fund, the Liberal Arts Development Funds of Tsinghua University, and the Culture Inheritance Fund of Tsinghua University. It also received help from other colleges, governments, enterprises and overseas partners. I'd like to express my gratitude to them all.

Yang Yansui in Tsinghua University

May 1st, 2017

目 录

名词解释	1
第1章 银色经济	3
1.1 银色经济的内涵与外延问题	3
1.1.1 人均GDP的福利相关性	3
1.1.2 谁是老人	4
1.1.3 总和生育率	5
1.1.4 人口寿命统计数据	5
1.1.5 老年系数与代际关系	6
1.1.6 老龄社会发展时间表	6
1.1.7 医养税费机制	8
1.1.8 养老金领取机制	8
1.1.9 老龄社会文化和养老模式	12
1.1.10 嵌入理论及其嵌入式养老服务	12
1.1.11 从劳动人口红利到老龄人口红利	13
1.1.12 老龄人口的资产结构	14
1.1.13 老龄人口的消费能力	14
1.1.14 医疗保障与大健康供给与需求	15
1.2 银色经济的主要特征及发展战略	17
1.2.1 技术进步与人文进步并重,健康产业促进健康	17
1.2.2 经济速度与经济质量并重,以人为本维护健康	18
1.2.3 教育改革与技术创新并重,素质教育推动健康	20
1.2.4 就业开源与福祉改善并重,代际和谐保障健康	20
1.2.5 政府主导与社会参与并重,社会企业服务健康	21
1.2.6 家庭生育与国家人口规划并重,计划生育支持健康长寿	21
1.2.7 终生自立与家庭社会养老并重,幸福家庭实现健康长寿	22
1.3 发达国家的主要措施和经验	22
1.3.1 广泛开展人口教育和培育老龄社会文化	23
1.3.2 将人口和老年贫困纳入宏观经济与社会发展规划	24
1.3.3 实现家庭生育与国家人口规划联动的计划生育政策	25
1.3.4 提高国民就业参与率以改善劳动力市场和增加经济活力	25
1.3.5 坚持二元结构养老金制度,鼓励国民增加就业	27
1.3.6 建立“早减晚增”的养老金领取激励机制	29

1.3.7 基于综合治理机制控制社会保障税费水平	30
1.3.8 大力发展现代服务业和规范灵活就业	32
第2章 中国银色经济发展之路	33
2.1 中国人口老龄化的主要特征	33
2.1.1 中国老龄人口现状与分析	33
2.1.2 中国人口老龄化的主要特征	34
2.1.3 人口老龄化未来发展预测	36
2.1.4 人口老龄化加速发展原因	36
2.2 人口老龄化的经济社会影响	37
2.2.1 对劳动力市场的影响	37
2.2.2 对经济发展速度和结构的影响	38
2.3 中国银色经济发展指数构建	41
2.3.1 人口老龄化发展指标	43
2.3.2 老年赡养负担指标	44
2.3.3 养老保障发展指标	45
2.3.4 老龄人口红利指标	45
2.3.5 老龄产业发展指标	47
2.4 中国银色经济战略和行动计划	47
2.4.1 银色经济条件下的第一人口红利	47
2.4.2 银色经济条件下的第二人口红利	53
第3章 嵌入式养老服务	59
3.1 养老服务的基本原理	59
3.1.1 养老服务的定义和特征	59
3.1.2 社会医养服务的内容和分类	60
3.1.3 以居家养老为核心的制度安排	61
3.2 嵌入式医养服务需求与供给	65
3.2.1 医养服务定义	65
3.2.2 我国医养服务需求快速增长	66
3.2.3 我国医养服务供需矛盾日益凸显	67
3.2.4 建立医养服务体系亟待解决的关键问题	68
3.3 嵌入式金融服务需求与供给	69
3.3.1 养老资产的种类	70
3.3.2 养老资产与税费制度	71
3.3.3 养老资产与金融服务	72
3.3.4 养老资产与信托文化	72

3.3.5 长寿风险与保险文化	74
3.3.6 养老资产与房产价值	75
3.3.7 养老基金投资策略	76
3.3.8 养老服务购买方式	78
第4章 养老服务体系和PPP模式	81
4.1 养老服务及其体系建设	81
4.1.1 养老服务体系的内在联系架构	82
4.1.2 反映养老服务需求的信息系统	83
4.1.3 养老服务供给及其产业链	84
4.2 养老服务供需匹配的PPP模式	86
4.2.1 养老服务供给的PPP模式	86
4.2.2 养老服务供给成本及其定价	87
4.2.3 养老服务的五种支付模式	89
4.2.4 中国医养服务PPP模式的雏形	91
4.2.5 养老服务PPP的国际经验概述	94
4.3 政府与老龄事业发展	97
4.3.1 基本原则和主要任务	97
4.3.2 政府职责	100
4.4 企业与医养服务产业发展	102
4.4.1 老龄产业的定义和特征	102
4.4.2 养老服务业的标准体系	103
4.4.3 养老服务产业龙头的效应	105
4.4.4 医养服务的社会企业	106
4.5 社会与医养服务体系建设	107
4.5.1 医养服务的社会法	107
4.5.2 医养服务的社会契约	108
4.5.3 医养服务的社会组织(socialorganization)	108
4.5.4 医养服务的家庭	109
第5章 发达国家养老服务业发展综述	110
5.1 国际社会的共识	110
5.1.1 联合国的贡献	110
5.1.2 世界卫生组织的贡献	113
5.1.3 经合组织的贡献	123
5.1.4 欧盟组织的贡献	125
5.2 典型案例分析及其经验总结	128

5.2.1 美国：进入老龄社会后的养老服务需求与供给	128
5.2.2 韩国：深度老龄社会的养老服务需求与供给	132
5.2.3 德国：超级老龄社会的养老服务需求与供给	135
5.2.4 日本：超级老龄社会的养老服务需求与供给	139
参考文献	144

Contents

Glossary	1
CHAPTER 1 SILVER ECONOMY	3
1. 1 Connotation and Denotation of Silver Economy	3
1. 1. 1 Correlation of Welfare and GDP per Capita	3
1. 1. 2 Who Are the Ages?	4
1. 1. 3 Total Fertility Rate	5
1. 1. 4 Statistical Data of Life Expectancy	5
1. 1. 5 Aging Coefficient and Relation between Generations	6
1. 1. 6 Development Schedule for the Aging Society	6
1. 1. 7 Tax and Fee System of Health-care Services for the Aged	8
1. 1. 8 Pension Receiving Policy	8
1. 1. 9 Culture and Health-care Model in Aging Society	12
1. 1. 10 Embedded Theory and Its Health-care Service for the Aged	12
1. 1. 11 From Demographic Dividends to Elder Demographic Dividends	13
1. 1. 12 The Asset Structure of the Aged	14
1. 1. 13 Purchasing Power of the Aged	14
1. 1. 14 Health Security, Supply and Demand	15
1. 2 Major Characteristics and Development Strategies of Silver Economy	17
1. 2. 1 Attaching Equal Importance to Technical Progress and Humanity's Progress, and Promoting Health by Health Industry	17
1. 2. 2 Attaching Equal Importance to Economic Speed and Economic Quality, and Maintaining Health in a People-oriented Way	18
1. 2. 3 Attaching Equal Importance to Educational Reform and Technical Innovation, and Promoting Health by Quality Education	20
1. 2. 4 Attaching Equal Importance to Job Enlargement and Welfare Improvement, and Building Harmonious Relation between	

Generations that can Ensure Health	20
1.2.5 Attaching Equal Importance to Government-leading Mode and Social Participation, and Encouraging Social Enterprises to Serve Health	21
1.2.6 Attaching Equal Importance to Household Births and National Demographic Planning, and Realizing Birth-control Policy to Support Longevity	21
1.2.7 Attaching Equal Importance to Lifelong Self-reliance and Family Social Supporting, and Achieving Health and Family Well-being	22
1.3 Major Measures and Experiences of Developed Countries	22
1.3.1 Population Education and the Cultural Cultivation of Aging Society	23
1.3.2 Integration of Population and Aged Poverty into Macroeconomic and Social Developmental Plannings	24
1.3.3 Coordination of the Birth-control Policies of Family and National Population	25
1.3.4 Improvement of Employment Rates, Labor Markets and Economic Vitalities	25
1.3.5 The Dual Structure of Pension System for Encouraging Employments	27
1.3.6 The incentive Mechanism of Pension System in the Principle of “Later Receivement, Higher Repayment”	29
1.3.7 Control of Taxation Mechanism Based on Comprehensive Governance Mechanism	30
1.3.8 Develop Mordern Service Industry and Regulate Flesible Employment Market	32
CHAPTER 2 CHINA’S ROADS TO SILVER ECONOMY	33
2.1 Major Characteristics of China’s Aging Population	33
2.1.1 The Status Quo and Analysis of China’s Aging Population	33
2.1.2 The Main Characteristics of China’s Aging Population	34
2.1.3 Prediction of the Future Development of Aging Population ...	36
2.1.4 The Reasons for the Accelerating Development of Aging Population	36
2.2 The Economic and Social Impact of Aging Population	37
2.2.1 Impact on the Labor Market	37

2.2.2	Impact on the Rate and Structure of Economic Growth	38
2.3	Construction of China's Silver Economic Development Index	41
2.3.1	Indicators of Aging-population Developments	43
2.3.2	Indicators of Aging Support/Burden	44
2.3.3	Indicators of Aging Security Development	45
2.3.4	Indicators of Demographic Dividend from Aging Population	47
2.3.5	Ageing Industry Development Indicator	47
2.4	CHINA'S Strategies and Action Plans for Silver Economy	47
2.4.1	The first Demographic Dividend under the Silver Economy	47
2.4.2	The Second Demographic Dividend under the Silver Economy	53
CHAPTER 3	EMBEDDED SEVICES FOR AGED HEALTHCARE	59
3.1	The Principles of Health-care Services for the Aged	59
3.1.1	The Definition and Characteristic of Health-care Services for the Aged	59
3.1.2	The Main Contents and Classification of Social Health-care Services	60
3.1.3	The Main Provides for the Aged	61
3.2	Demand and Supply for Health-care Service	65
3.2.1	Definition of Health-care Services	65
3.2.2	The Rapid Growth of Demand for Health-care Service in China	66
3.2.3	The Contradiction between Supply and Demand of Health-care Services in China has Become Increasingly Prominent	67
3.2.4	Key Problems in the Establishment of Health-care Service System	68
3.3	Demand and Supply of Financial Services	69
3.3.1	Types of Pension Assets	70
3.3.2	Relationship between Pension Assets and "Tax and Fee System"	71
3.3.3	Relationship between Pension Assets and Financial Services	72
3.3.4	Relationship between Pension Assets and Trust Culture	72
3.3.5	Relationship between Longevity Risk and Insurance Culture	74
3.3.6	Relationship between Pension Assets and Property Values	75

3.3.7	Investment Strategy of Pension	76
3.3.8	Purchase Modes of the Health-care Services for the Aged	78
CHAPTER 4	SYSTEM OFHEALTH-CARE SERVICE FOR THE AGED AND PPP MODE	81
4.1	Health-care Service for the Aged and Its System Construction	81
4.1.1	System Framework of Health-care Services for the Aged	82
4.1.2	Information System Reflecting the Need of Health-care Services for the Aged	83
4.1.3	Supplies for Health-care Services for the Aged and the Corresponding Industrial Chains	84
4.2	Matching Modesfor Supply and Demand of Health-care Services for the Aged	86
4.2.1	PPS-Pmode	86
4.2.2	The Cost and Pricing of Health-care Services for the Aged	87
4.2.3	PSP mode for the purchase of Health-care Services for the Aged	89
4.2.4	The Rudiment of PPP in China	91
4.2.5	International Experience for PPP in Old-age Service	94
4.3	Government and the Development of Aging Industry	97
4.3.1	Principle and Main Jobs	97
4.3.2	Goverment Responsibility	100
4.4	Enterprise and Development of Health-care Service Industry	102
4.4.1	Definition and Characteristics of Aging Service Industry	102
4.4.2	The Standard System of Aging Service Industry	103
4.4.3	The Leading Effect of the Aging Service Industry	105
4.4.4	Social Enterprise for Health-care Services	106
4.5	Society and the Construction of Health-care Service System	107
4.5.1	Social Laws of Health-care Services	107
4.5.2	Social Contracts of Health-care Services	108
4.5.3	Social Organizations of Health-care Services	108
4.5.4	Families of Health-care Services	109
CHAPTER 5	Reviews of the Development of Old-age Service Industry in Developed Countries	110
5.1	International Consensus	110
5.1.1	Contribution of the United Nations	110

5.1.2 Contribution of the World Health Organization	113
5.1.3 Contribution of the Organization for Economic Co-operation and Development (OECD)	123
5.1.4 Contribution of the European Union	125
5.2 Analysis and lessons from Typical Case	128
5.2.1 In America: Demands and Supplies of Health-care Service for the aged in Aged Society	128
5.2.2 In Korea: Demands and Supplies of Health-care Service for the aged in Aged Society	132
5.2.3 In Germany: Demands and Supplies of Health-care Service for the aged in Super Aged Society	135
5.2.4 In Japan: Demands and Supplies of Health-care Service for the aged in Super Aging Society	139
Reference	144

名词解释

1. 老龄人口,即指达到国民平均预期寿命减去养老金者平均余寿(假设退出劳动力市场后的人均余寿约为15年)的年龄的人口。如果人均寿命80岁,减去15年即65岁。为此,一些进入深度老龄社会的国家,65岁为法定领取全额基础养老金的年龄。
2. 老龄社会,即指老龄人口占总人口较高比例的社会。在总和生育率1.8~2.1的条件下,当65岁及以上人口占总人口比重超过7%、60岁及以上人口占总人口比重超过10%时;如果养老金的实际赡养比为5:1,养老金替代率为职工平均工资的50%,养老金费率则为10%,伴随养老金费率的不断提升,代际利益问题日益凸显,国家进入老龄社会。65岁及以上人口占总人口比重超过14%,即深度老龄社会;超过21%,即超级老龄社会。
3. 银色经济,即指基于健康长寿和不断升级的消费需求和约束条件,组织生产、分配、流通和消费的活动及其供求关系的总称。
4. 统计老年赡养比(即扶养比,对老年人应当讲赡养比),即指劳动年龄人口和老龄人口的比例,不考虑未成年人口;综合赡养比将考虑未成年人口;如果以65岁开始计算老龄人口,进入老龄社会的老年赡养比约为1:10,深度老龄社会的老年赡养比约为1:5,超级老龄社会的老年赡养比为1:2~3。
5. 实际老年赡养比(近年来出现的研究文献),即指劳动人口去除在校生人数、失业人口数、低收入人口数、在64岁以前退休人口数后的老年赡养比。实际老年赡养比的增高变化可能导致提前进入深度老龄社会,由此说明相关公共政策对老年赡养比的影响。
6. 养金费率,即指养老金税费占个人工资总额的比例。养老金费率受老年赡养比和养老金替代率的影响。在养老金替代率为职工平均50%、老年赡养比5:1的条件下,养老金费率约为10%;在老年赡养比3:1的条件下,养老金费率约为17%。很多国家将20%作为养老金费率的封顶线,以便和谐代际关系,用移民政策、生育政策、延迟领取养老金政策、降低基础养老金替代率和发展职业养老金与个人账户等策略,鼓励大龄人员就业、加强正规就业市场治理等措施来稳定养老金费率。
7. 养老金,即指老龄人口日常开支的现金流,也称养老基本生活开支是老年人的救命钱。在制度内被称为基础养老金法定养老金或第一支柱养老金等。此外,还有职业养老金、个人养老金等。
8. 养金替代率,即指养老金(包括基础养老金、职业养老金和个人账户养老金等)与退休前工资(包括个人工资、缴费工资、社会平均工资)的比例。基础养老金的替代率在20世纪50年代为个人工资的45%,后来提升到55%;20世纪80年代之后普遍降为30%~40%。欧洲国家通过大力发展职业养老金和个人养老金增加养老金的充足性,三个养老金计划的加总替代率可能达到60%~70%。