

# 长期护理保险制度 比较研究

A Comparative Study of Long-term Care Insurance Systems among Germany, Japan and Korea

陈诚诚 著



# 德開

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## 序

我国正在接近深度老龄社会,失能老人日益增加,建立长期护理服务计划迫在眉睫。通过长期护理保险的方式为相关服务买单,是该计划的内容之一。党的十八届五中全会明确提出,在"十三五"期间探索建立长期护理保险。

如何借鉴先行建立长期护理保险制度国家的经验和教训,需要第一 手资料。作者根据留学多年在国外机构的访谈和生活经验与国外资料的 可及性,运用老龄社会发展时间表和比较研究等方法,整理了第一手文 献,为相关研究奠定了基础,这是本书的价值所在。

今天,中国社会正在热议长期护理的内涵与外延,覆盖日间照料,还是针对失能老人的病理型医护。作者通过对德日韩三国长期护理保险制度政策过程的梳理,探究利益集团在立法过程中的参与程度、行动方式,介绍制度定型的影响因素;了解该制度的基本框架和改革趋势,找出制度发展与趋同的一般规律;将三个国家的政府角色、社会参与、家庭责任和受益对象的审核对于制度效用的发挥的影响展开介绍,可以让政策制定者少走弯路。

随着中国失能老人护理问题的加剧,如何为长期护理服务融资,形成具有购买力的有效需求,进而推动长期护理产业和劳动力市场的发展,是亟待解决的问题。有两个国情必须考虑。一是中国处于"未富先老"的状态,筹资能力有限;二是中国老龄化速度快,长期护理保险基金的流动性强、积累期限较短。

作者从德国、日本和韩国三国比较分析中,得出韩国的人口老龄化

时间表的特点,如进展速度、剧烈的发展变化趋势与中国有相似之处。 并总结出韩国的长期护理保险制度"小规模起步,渐进有序发展"以应 对人口老龄化的模式。为我国政策制定展示了既成的制度范本和操作方 向。

相信本书的出版,会使中国读者更好地了解德日韩的社会保障政策,还能为中国建立长期护理保险制度提供"他山之石"。

杨燕绥 于 2016 年 6 月 30 日

## 内容摘要

依照人口老龄化时间表以及伴随高龄人群占比的增加,长期护理需求与日俱增,在疾病、老年、失业、工伤社会保障问题之后,被各国所重视的第五大社会风险,并列入社会保障制度的保障范畴。长期护理包括病理护理、功能护理和心理护理,如何准确界定范畴和责任主体,是长期护理制度安排的核心问题,需要进行定性和定量研究,支持国家的公共选择,这是本书的研究宗旨和主要内容。

长期护理保险制度作为长期护理制度模式的一种方式,并非只有德日韩三个国家建立了这一制度。但这三国制度却有着高度的典型性。各国政策均在面对财政紧缩、福利制度重构时建立。长期护理保险制度的出台,不仅解决了护理危机,并且体现了各国通过制度创新和重构来积极应对福利危机的能力。然而,以往研究对这三国政策触发背景因素的分析往往是单线条的,缺乏系统性。尽管德日韩在借鉴学习的过程中中都建立起了长期护理保险制度这一相同的模式,但是制度所强调的解决问题的方式、发展的路径却大相径庭。与借鉴一国的社会保障制度相比,如何在效仿该制度之后顺利实现本土化的过程更加耐人寻味。这一点,恰恰是以往的比较研究中所忽视的。本文将研究的重点放在效仿的过程上,通过对三个国家的制度创始的背景、政策立法的过程、政策的内容框架和发展趋势来解释说明为什么德日韩各国使用了同一制度模式,并且长期护理保险制度在各国效仿学习的过程中为什么只发生了部分转移。从而提炼出长期护理保险制度所具有的一般规律以及中国在效仿过程中应注意的重点。

第一章将对问题提出、概念界定、文献综述、研究方法、贡献与不足给予概述。

第二章通过对德日韩长期护理保险制度的背景分析来解答各国的创制原因。通过对当时的社会、经济、政治因素,社会保障制度发展趋势要素的分析,考量政策环境对各国长期护理保险制度推进的影响。进而解释长期护理保险制度模式选择的契机和缘由以及三个国家创制的背景差异对制度的发展所产生的影响。

第三章通过对德日韩制度发展脉络的梳理来还原创制过程。通过对 关键性参与者、各政党以及利益集团的主要行为的回顾来分析三个问题: 第一,政策议题的形成过程;第二,各国制度立法过程中产生的分歧; 第三,各国制度的创制过程。以此来分析各国关键性的参与者、各政党 以及参与主体的行为方式和协商过程对制度的定型所构成的不同影响。

第四章总体介绍三国的养老服务的供需方式和政策环境。并通过静态和动态两个维度对制度内容展开系统性的分析。首先是从静态的角度,对各国制度的组织体制、覆盖人群、资金组成、服务递送、质量监督等内容梳理来比较德日韩长期护理保险制度的不同之处。同时通过对改革趋势和发展方向从动态的视角将三个国家的制度做比较。以往的文献由于受到研究时间和资料搜集的限制,只局限在静态的比较中。本文笔者借留学韩国和在德国进行的有针对性的研修、实地访谈的经历来综合制度在各个国家的发展特色来进行系统性的归纳和总结。

第五章通过上文对德日韩制度的背景分析、发展脉络、内容框架和 改革动态的共性和差异性的对比,来总结三国制度创制的限制性因素。 重点总结归纳各国创制时,如何因地制宜的将该制度与本土资源相结合。 并通过对德日韩各国制度内容差异的根源深入挖掘,归纳各国制度所具 有的个性。

第六章结合长期护理保险制度本身所具有的特点,论证中国现阶段 是否适合建立长期护理保险制度。并结合德日韩制度的建制理念、福利 文化、制度特色、经验教训、改革趋势等内容来探索未来制度在中国的发展方向。

通过论述,本文得出的结论为:

第一,建立长期护理保险制度是各国应对人口老龄化的必然选择, 但制度的发展模式却各具特色。长期护理保险制度的产生是基于三个国 家相似的社会问题。社会问题是三国选择该制度的重要因素。然而,对 于社会保险模式的选择也是三个国家基于社会保障历史发展的必然结果。

虽然如此,三个国家的护理模式发展趋势却相异。德国的长期护理,保险制度走上正式护理与非正式护理相糅合的发展道路,无论是社会化养老还是家庭养老,政策上的推动和支持成为了缓解老年护理危机的重要动因。而日本的长期护理保险制度则沿着本国的注重专业化发展路径、完善就地养老的原则,专注发展社区整合型护理。韩国的制度则选择了从重症老年人开始、逐渐扩大覆盖范围、阶梯式提高缴费率的方式。三个国家在改革中有趋同的部分,在发展轨迹和发展战略上扬长避短,选择了适合本国国情的发展道路。

第二,应发挥社会保险的优势。德国在欧洲大陆,日本在亚洲,两国都是亚、欧大陆上社会保障制度建设和发展具有代表性的国家,是各个国家效仿的典范。而韩国作为经济快速发展的"亚洲四小龙"之一,其社会保障的发展速度和类型受到越来越多国家的瞩目,是周边各国学习与讨论的焦点。三个国家在社会保障体系建设过程中,无论是通过开拓创新还是积极向他国学习,都建立起以社会保险为主的社会保障体系。三个国家之所以选择社会保险模式,除了这三个国家自身所具有的历史文化传统之外,也因为社会保险制度本身的多方融资、劳资共担的特点。与依靠高福利、高支出的国家相比,制度更强调权利与义务的对应。通过实践证明,三个国家依托这一制度不仅建立了社会化的老年护理服务,规避了老年护理风险,同时也使得各国的财政危机得以缓解。在社会保障改革重组的全球化趋势下寻找到了化解社会危机的办法。

第三,创制不易,借鉴亦不易。从三国的政策过程来看,德国从政策议题形成到制度定型经历了20年,立法过程中对制度模式的选择、服务内容、覆盖范围等制度细节的设计存在着各种分歧。制度的定型是在多方参与的前提下,通过相关利益集团的博弈和协商最后达成了一致。而制度的输入国也并非拿来主义,借鉴的经验怎样因地制宜,需要日韩两个输入国的精英阶层根据本国的资源条件做出理性判断。同样也须听取各社会团体的意见建议,多方协商。而管理运行体制、覆盖范围、服务内容,制度的各个细节设计都无法照搬照抄,只能依照本国经济发展、国民福利意识、基础设施建设等条件来重新设计。

第四,德日韩三个国家在政策背景、社会环境、制度框架、以及改革发展中都具有共性。社会危机是三个国家政策选择须考虑的必然因素,政策因素对政策的出台快慢造成了影响,经济因素制约了制度的待遇水平,社会保障制度的发展趋势为政策出台提供了契机。这些因素在不同的程度上对三个国家制度出台产生影响。并且,制度所建立的框架具有一定的相似之处,例如,制度都是多方筹资、以老年人群为主的社会保险模式,单一的评核机制使得政策严格控制受益人群的准入。在制度的动态改革中,三个国家都具有加大专业化力度,保障护理服务质量、提高预防、努力维持其财政平衡的发展共性。

第五,虽然三个国家制度发展具有共性,但是也要尊重其差异性。由于其建制理念和福利文化、本国制度及政策路径依赖、福利发展水平的差异以及各国不同利益群体的政策过程参与方式等因素都影响了制度的设计。这些因素的限制,舶来经验不能简单复制作用于某个国家,要尊重各国现实情况的差异,认识到政策效仿的限制性因素,才能长远看待和理性评价一项制度发展的好与坏。

#### Abstract

As the development of aging population timetable and the increase of aging population proportion, the unsatisfied need for long-term care is the fifth social risk after disease, agedness, unemployment and work-related injury, and is included in the social security system arrangement. Long-term care is consist of pathological nursing, functional nursing and psychological care. How to define its category and liability subject accurately is the core issue of long-term care system. The research purpose and main content of this book is to carry a qualitative and quantitative research on long-term care system and support the choice of the government.

As one of the institutional models, the long-term care insurance system does not exist only in Germany, Japan and Korea. However, the three countries have the policy-learning experience. All three countries have established the system during the period of fiscal tightening and major social welfare reform. The establishment of long-term care insurance does not only solve the long-term care risk, but also reflect the capacity of the three countries to deal with the risk during the welfare reform period. However, the existing literature on this issue is one-sided and fragmented. Although the three countries established the similar long-term care insurance model in the process of policy-learning, the way to solve the problem and development path varies. Compared with merely making

reference to a country's social security system, how to learn and localize the policy is more meaningful, which is also ignored in the previous studies. This research will focus on the process of policy-learning, and to explain why the three countries implement the common long-term care insurance based on the analysis of the background, policy process, policy content and policy development as well as why only part of the transfer occurred. And thus summarize the feature of the long-term care insurance and how to introduce it to China in the future.

Focus on the above-stated research questions, this research is comprised of six chapters. The first part is Chapter I, which introduces the research background, defines the basic concepts and scope of the study, reviews literatures, points out the research objectives and methodologies, and constructs the research framework.

The second chapter devotes to figure out the reason of the policy implement according to background analysis which includes social, economic, political factors and the social security develop trend. And thus illustrate why the three countries choose the same institution and how the different policy environments affect the policy contents of three countries.

The third chapter will restore the policy process of three countries. By describing the behavior of the important actors, different parties and interest groups, this part analyzes three problems: the formation process of policy issue, the divergences emerged in the legislation process and the process of the policy-making. Through the three problems, making a conclusion on the impact of the consult type among the actors, interested groups and relevant parties on the policy contents.

The forth chapter will introduce the method of supply and demand as well as the policy environment of elderly service of the three countries from dimensionalities of static state and dynamic state. From the dimension of static state, this chapter will compare policy of organization system, coverage, fund, deliver of service and supervise in three countries. From the dimension of dynamic state, this chapter will compare the reform trend and development direction of policy among the three countries. Previous literature is confined to static comparison due to the limitation of time and materials. The author of this research has the study experience in both Korea and Germany and has done investigations abroad. So this research will conclude the feature of every country systematically on the basis of a large number of field interviews.

The fifth chapter will conclude the limited factors of the three countries by comparing the commonalities and differences in background, policy process, contents and reform trends. This chapter will focus on how every country accomplish the policy transfer. By comparing the policy contents, this part further concludes the feature of three countries.

The sixth chapter will conclude the characteristics of the long-term care insurance and demonstrate whether it is appropriate to introduce the long-term care policy in China. And the organizational system value, welfare culture, policy feature, lesson and experience, reform trends of three countries are discussed, in order to explore how to implement in China in the future.

This research has reached five conclusions.

First, the implementation of long-term care insurance is an inevitable choice for three countries, but the development patterns are different. The policy introduction is due to the similar social problem, so the social factor is the crucial one. And the social insurance model is also a necessity based on the development of social security.

Nevertheless the develop trends in three countries are different. German long-term care insurance emphasizes the combination of formal care and informal care. For both social care and family care, the support from government is the crucial factor to complete the elderly care. The long-term care in Japan emphasizes the formal care due to the history. So the long-term care insurance in Japan focus on the formal care and support to provide service surrounding the home environment of the elderly, especially by developing the community long-term care system. The policy in Korea search for the other road to develop the policy, which is to focus on the serious elderly in the first step and expand the coverage gradually. All three countries have convergence trend in reform. Nevertheless the policy in three countries applied different strategies and the policies emerge the different develop trends.

Second, the social insurance model possesses the superiority. Germany and Japan are in different continents, and the two countries also represent welfare counties with social insurance as its cornerstone. Korea has witnessed rapid economy development in Asia, so the system of social security is the focal point among Asia countries. The reasons why all three countries have chosen the social insurance are multifold. In addition to the similar history and culture, social insurance also possesses the advantage in terms of raising fund through multiple channels. Compare with other welfare countries with high social expenditure, social insurance emphasizes the correspondence of rights and obligations. The practice has proved that, the three countries have defused the elderly care risk and financing risk in the meantime.

Not only policy implement is not easy, but also the policy transfer is difficult. The process from agenda setting to formulation in Germany has lasted for 20 years. There are a lot of divergences during the process of legislation. According to the various actors participate, consult and compromise in the last step the policy formulated. Policy-learning countries,

especially the elite class also need to decide with rationality. The policy is the compromise of multiple groups' negotiation and the social organizations' suggestion. The system of management, coverage, service cannot be copied blindly, all of which should be redesigned on the basis of the economy, national welfare consciousness and infrastructure construction.

Fourth, the three countries have similarities in the policy environment, policy content and policy development. The social risk has directly impacted on the policy in three countries. The political factor influences the pace of policy introduction. The economic factor influences the generosity of the policy. The social security develop trends provide the opportunity to policy's introduction. These factors have effects on the implement of policy in different perspectives. Moreover, the policy frameworks in three countries share some similarities. For example, funding form multi-parties, targeting on the elderly, uniform assessment mechanism etc. All of the three counties have the same task to improve the professional level, ensure the service quality, enhance the prevention and balance the financing.

Lastly, the diversities of three countries should also be noticed. Factors including the welfare culture, the path dependence, different social risk, welfare development level and the types of different interest groups participating in government etc. have led to the differences. Because of these limited factors, the foreign policy cannot be transplanted directly to other countries without modification. Only by giving consideration to the reality in every country and limited factors, can we evaluate the policy rationally.

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# 第一章 序 论

### 第一节 问题提出

在疾病、老年、失业、工伤四大社会保障问题之后护理需求逐渐成为被各国所重视的第五大社会风险(Social Risk)。与其他应对生命风险的制度相比较,现行的护理支持在覆盖率以及服务提供的水平上非常有限。这是由于传统上护理需求被认为是家庭的责任,而随着人口老龄化形势日益严峻、传统护理模式弱化等原因,长期护理逐渐成为很多国家社会保障核心事业之一。我国的人口老龄化呈现出规模大、速度快等态势。据相关统计数据显示,2010年,我国老年人口占世界老年人口的23.4%,2030年将占到26.9%,成为世界上养老负担最重的国家<sup>①</sup>。截止到2015年我国老年人的人均寿命已经高达76岁<sup>②</sup>,比第六次人口普查的年龄(74.83岁)提高了1岁。同时,据统计,我国的65岁以上老

① 数据来源于 2012 年国家应对人口老龄化战略研究总课题组的《国家应对人口老龄化战略研究报告》。

② 数据来源于《中华人民共和国 2015 年国民经济和社会发展统计公报》。