

2025 제22차 국제연수과정 NHIS UHC GLOBAL ACADEMY

Long-Term Care Insurance System for the Elderly

- Until the establishment of
the 3rd Long-Term Care Master Plan



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16 Years of Long-Term Care Insurance

Scale up your infrastructure

- Quantitative growth in long-term care institutions

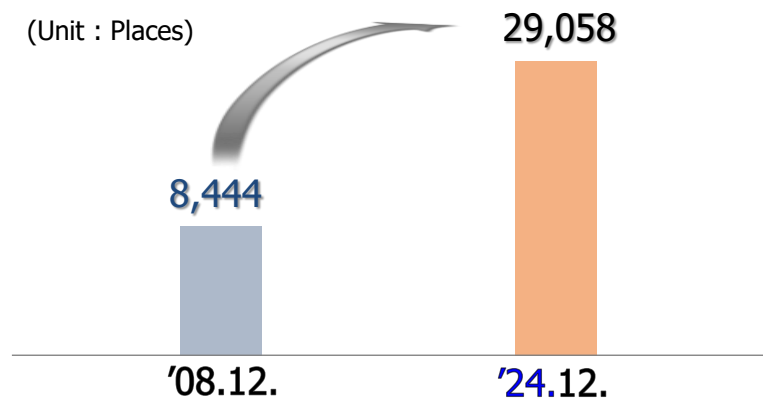
Status of Long-Term Care Institutions

29,058 Places

6,323 facility benefits(**21.8%**)

22,735 home-based benefits(**78.2%**)

(Unit : Places)



Expanded Coverage

- Increase in the number of people admitted to long-term care

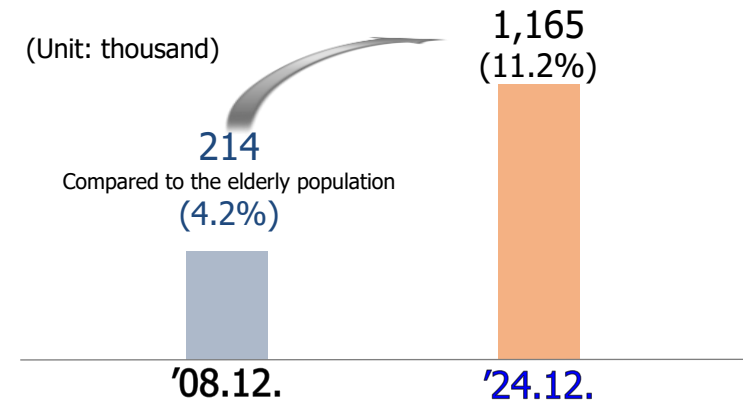
Long-Term Care Authorization

1,165,030 Person

Of the 10,399,813 elderly population,

11.2%

(Unit: thousand)



<materials> Long-term care insurance for the elderly statistical monthly report (as of the end of December 2024)

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01

The Birth of the System (1999~2007)



16 Years of Long-Term Care Insurance

1. Background of the introduction of the system

● Elderly population growth

- Since the 1970s, economic poverty and health problems of the elderly have emerged → Elderly welfare policies such as economic and medical support for low-income seniors have been gradually expanding. → Enactment of the Senior Citizen Welfare Act in 1981
- Discussions on the introduction of the first system began in 1999, when the elderly population was rapidly increasing and we were entering an aging society.
- * In 2000, 3.39 million people aged 65 and over (7.2% of the total population)

● Healthcare expenditures for the elderly soaring

- The proportion of medical expenses for seniors aged 65 and over in the total health insurance budget is expected to increase from 8.0% in '90 to 17.6% in '99 → exceed 40% in '18.
- The phenomenon of social hospitalization, in which a person is hospitalized for a long time even though there is no need for medical treatment, occurs

● It is necessary to solve the problems of diversification of welfare needs of the elderly, heavy care of family members, burden of care, and inefficiency of medical expenditure structure for the elderly

→ Elderly welfare experts raise the need for a long-term care system for the elderly to the President

16 Years of Long-Term Care Insurance

2. Discussion Process

- (December 1999)
 - The '97 financial crisis exacerbated the hardships of low-income seniors
 - The urgent need to establish policy alternatives for the protection and care of the elderly
 - The planning team is headed by the Vice Minister of Welfare and appoints about 10 civilian experts as advisors. Launched three working groups with the participation of the Ministry of Welfare, academic experts, and the Korea Institute for Health and Social Affairs
 - After collecting opinions from various sectors through research services and public hearings for the production of basic data, a report on 'Comprehensive Measures for Long-Term Care Care for the Elderly' was submitted to the government
- (August 2001) The President's Independence Day Celebration Speech Proposed the Introduction of a Long-Term Care Guarantee System for the Elderly
 - Public debate on the introduction of a social insurance-type elderly care guarantee system
- (July 2002) The Prime Minister's 'Health and Welfare Committee for the Elderly' announces comprehensive measures for the welfare of the elderly
 - Formalization of the introduction of the long-term care insurance system for the elderly. Phased Action Plan Announced after 2007
 - Confirmation of the basic direction of system operation, such as financing method
 - ▶ 2003~2004 Development of specific implementation models such as necessity assessment method for target selection
 - ▶ 2005~2006 Pilot project implementation and evaluation
 - ▶ Phased out since 2006 by national consensus

16 Years of Long-Term Care Insurance

2. Discussion Process

- (March 2003) Establishment of the 'Public Elderly Care Coverage Promotion Planning Group' in the Ministry of Health and Welfare... Active for 1 year

Installation Background

- The new government's pledge, which was launched in 2003, included the introduction of a long-term care guarantee system for the elderly.
- Relevant laws and regulations will be enacted by 2006, and a phased introduction of the system will be announced from 2007

configuration

- It consists of 25 people, including health care and social welfare experts, representatives of organizations related to the elderly, representatives of civic organizations, research institutes, national health insurance-related organizations, and government officials.
- There are four divisions: system oversight, need assessment and grading, number and salary, facilities and manpower, and specialized committees are established for each division.→ Development of Concrete Policy Models

Activities

- 10 plenary meetings and 2 public hearings held → to consider how to introduce a system suitable for the situation in Korea
- Conducting surveys and research, such as interviews with experts, discussions with foreign experts, and visits to Japan Long-term Care Insurance

- (March 2004) The public 'Elderly Care Security System Executive Committee' was launched ... Active for 1 year

Executive Committee Operational Background

- Development of a specific implementation model based on the institutional design prepared by the Promotion Planning Group
- Two nationwide polls: 93.9% of respondents are in favor of the introduction of the system

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02

Pilot Project Process and Results



Pilot Project Process and Results

■ 1st ~ 3rd Pilot Project Comparison Table

category	1st Pilot Project	2nd Pilot Project	3rd Pilot Project
Eligible Areas	6 Regions	8 Locations	13 regions
Eligibility	65-year-old senior citizen receiving basic living allowance (Approx. 12,000 people)	Seniors aged 65 and over who receive basic living allowance + General Seniors (Approx. 210,000 people)	Seniors aged 65 and over who receive basic living allowance + General Seniors (Approx. 370,000 people)
Project Period	July, 2005~March, 2006	Apr. 2006~Apr. 2007	May, 2007~June, 2008
Recognition Grade	Long-Term Care Level 1~3	Long-Term Care Level 1~3	Long-Term Care Level 1~3 (Facilities are Grade 1~2)
co-payment	free	20% of payroll costs	20% of facilities, Ash 15%
Focus	Technical aspects such as the development of judgment tools and the adequacy of fees	Carried out in a form similar to the main project. Procedure, Salary Satisfaction, Service Inspection of overall matters such as delivery system	Final inspection in preparation for the main project. Elderly used in all procedures Minimizing inconvenience

Pilot Project Process and Results

① The first pilot project ... Elderly Compensation Insurance

result : Of the 12,414 seniors receiving basic living allowances, 3,683 (29.7%) applied for certification.

(3,655 Recognized)

Deriving the problem of complexity due to the dualization of the rating recognition survey (functional status assessment) and the nursing needs assessment → In the second pilot project, functional status assessment and needs assessment are integrated.

② The 2nd Pilot Project... Elderly Compensation Insurance

feature : Visiting Nursing, Welfare Equipment Salary (KRW 900,000 per year),

Cash Benefit(Residents of remote areas, etc.)

result : Improvement of grading tools (supplementation of doctors' opinions, reflection of the needs of the elderly with dementia)

③ The 3rd Pilot Project... Long-term care insurance for the elderly

※ 2007.4.27. Enactment and promulgation of the Long-Term Care Insurance Act for the Elderly

... Extension of the main project period by one year (July 1, 2008)

■ Outcomes of the pilot project

- ▶ The three pilot projects are based on the government's implementation model.
- ▶ Substantially verify the core elements of the system through step-by-step regional expansion
- ▶ Checking problems in the field in advance to improve the completeness of system operation
- ▶ It lays the foundation for the rapid and stable establishment of a new system at the national level.

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03

Implementation
of this project
... Early, Middle Period, Present



Implementation of this project

... Early, Middle Period, Present

■ Early(2007~2008)

- April 2007 Promulgation of the Long-Term Care Insurance Act for the Elderly

... Effective July 1, 2008.

- Consensus on key issues

- ▶ Name of the law: Elderly Disability Insurance Act → Long-Term Care Insurance Act for the Elderly

- ▶ Expanding the audience: Initially implemented Grades 1~2, expanded to Grade 3 in 2010

→ Level 3 will be implemented from the beginning, but Level 3 will only provide in-home services until 2010.

- ▶ Disability inclusion: Promoted separately from the long-term care system for the elderly

- ▶ Management Operator : Decided to be an industrial park among the industrial park and the city, county, and district

* Centralization of expenditure management entities such as rating judgment and those responsible for finances

* In order to strengthen the role of the city, county, and district, the city and county commissioners are given the right to designate and cancel long-term care institutions, recommend 7 out of 15 grading committee members, and appoint the chairperson.

Implementation of this project

... Early, Middle Period, Present

■ Early(2007~2008)

● Preparations for the start of payroll in July 2008

① Expansion of long-term care facility infrastructure

■ Issues

- At the time of the introduction of the system, the expected number of people to enter elderly care facilities is 62,000
- As of 2006, 7 out of 16 cities had facilities below the national average, 24 cities and counties without elderly care facilities, and 19 cities and counties without home-based elderly care facilities→ Concerns about nursing homes due to lack of infrastructure.

■ resolution

- Change of facility installation standards and reorganization of service types → July 2007 Revision of the Senior Citizen Welfare Act

■ Comparison of integration and reorganization of medical welfare facilities for the elderly ■

Before the change	After the change
- Elderly Care Facilities - Skilled Care Facilities for the Elderly - Elderly Care Facility - Fee-based elderly care facilities - Fee: Elderly Care Facilities	- Elderly Care Facilities (integration)
	- Elderly Care Co-living Home (New)
- Geriatric Hospital	- Geriatric Hospital (Exclusion from long-term care institution designation)

■ Comparison of home elderly welfare facilities ■

Before the change	After the change
- Home Service Dispatch Facility - Day Care Facilities - Short-term Shelter	- Home-based elderly care facility - Visiting Care - Day & Night Protection - Short-term protection - Visiting Bath (New)

* Visiting nursing care and welfare equipment providers are regulated in the Long-Term Care Insurance Act for the Elderly

Implementation of this project

... Early, Middle Period, Present

■ Early(2007~2008)

● Preparations for the start of payroll in July 2008

① Expansion of long-term care facility infrastructure

▪ resolution

- Establishment and implementation of the Comprehensive Investment Plan for Elderly Care Infrastructure (2006~2010)

* A total of KRW 611.8 billion will be invested over three years to secure facilities at an early stage.→ 830 facilities with 23,500 beds planned for new and expanded facilities

- Inducing private participation: Permitting the construction of new nursing homes in the Green Belt. Rational determination of nursing facility fees to ensure profitability, and promotion through nationwide briefing sessions
- Preparation of tax support measures: In the second half of 2007, the Income Tax Act and the Value Added Tax Act were amended to include medical expenses in the deduction of medical expenses and exempt from value-added tax.

▪ Result

- Elderly Care Facilities : 543 in 2005 (Capacity: 29,963) → June 2008: 1,271 (56,140 people)
→ December 2008: 1,717 (68,525)
- Rehabilitation Institutions : 543 in 2005 → July 2008: 6,340

Implementation of this project

... Early, Middle Period, Present

■ Early(2007~2008)

● Preparations for the start of payroll in July 2008

② Nurturing professional manpower

- Professionals who provide long-term care services are called 'nursing care workers
- Nursing care worker training and qualification system newly established in the Senior Citizen Welfare Act (2008.2. Enforcement)
- Certificates are granted to those who have completed 240 hours of training at educational institutions designated by the governor of the city

* A two-year grace period for those who previously provided welfare services.

③ Establishment of the organization and operation system of the insurance corporation

- The Long-Term Care Insurance Act specifies the Corporation as a management and operating agency
- The Corporation stipulates that organizations that carry out long-term care insurance should be separated from health insurance organizations.

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Implementation of this project

... Early, Middle Period, Present

■ Early(2007~2008)

● Preparations for the start of payroll in July 2008

④ Long-term care accreditation application and grading began in April 08

- Pre-grading is required for the implementation of the system on July 1
- Municipal offices in cities, counties, and districts across the country and the National Health Insurance Corporation operation center have started accepting applications for long-term care classification

* In July '08, 295,715 people applied (5.9% of the 5.02 million elderly population)

→ 146,643 people, or 2.9% of the elderly population, were judged to be in grades 1~3

- Public Relations and Civil Complaints Special Task Force

* Public relations: Broadcast advertisements, distribution of press releases, posters, newsletters of the corporation, etc.

* Promotion theme: 'New Thoughts on Filial Piety', 'Filial Piety Between Generations', 'Social Filial Piety', etc.

Implementation of this project

… Early, Middle Period, Present

■ Middle Period(2009~2018)

● 2010 Promotion of system improvement to improve service quality

- ▶ Introduction of nursing care worker examination system

● 2012 Establishment of the 1st Long-Term Care Five-Year Basic Plan(2013~2017)

- ▶ Expand the number of people eligible for services

- 2014 Expansion and reorganization of the long-term care rating system: Level 3 → Level 5

* With the introduction of the national responsibility system for dementia, level 5 (elderly with dementia) will be newly established.

- ▶ Improving the quality of service

- Reorganization of the institutional evaluation system, strengthening the elimination of inappropriate facilities, improving the treatment of nursing care workers, etc.

● 2014 Opened a nursing home directly managed by the National Health Insurance Corporation(150 beds)

● 2018 Cognitive Support Grade Added (6th Grade)

● 2018 Establishment of the 2nd Long-Term Care Five-Year Basic Plan(2018~2022)

- Expand coverage, strengthen community care, create service infrastructure, and ensure system sustainability as policy objectives

… Selection of 14 Promotion Projects

Implementation of this project

... Early, Middle Period, Present

■ present(2019 onwards)

- Dementia Institution(Nursing homes, day and night care) introduction
- Integrated Medical and Nursing Care Judgment System Pilot project for introduction
- Reorganization of the long-term care system in preparation for the institutionalization of community care
 - ... Integrated home care, mobility support, home medical center, residential environment improvement, etc.
- Enhance care management to deliver personalized services
- Strengthening the mechanism of entry and exit from long-term care institutions
 - ... Solving the problem of deterioration of quality and unfair supply of private establishment institutions

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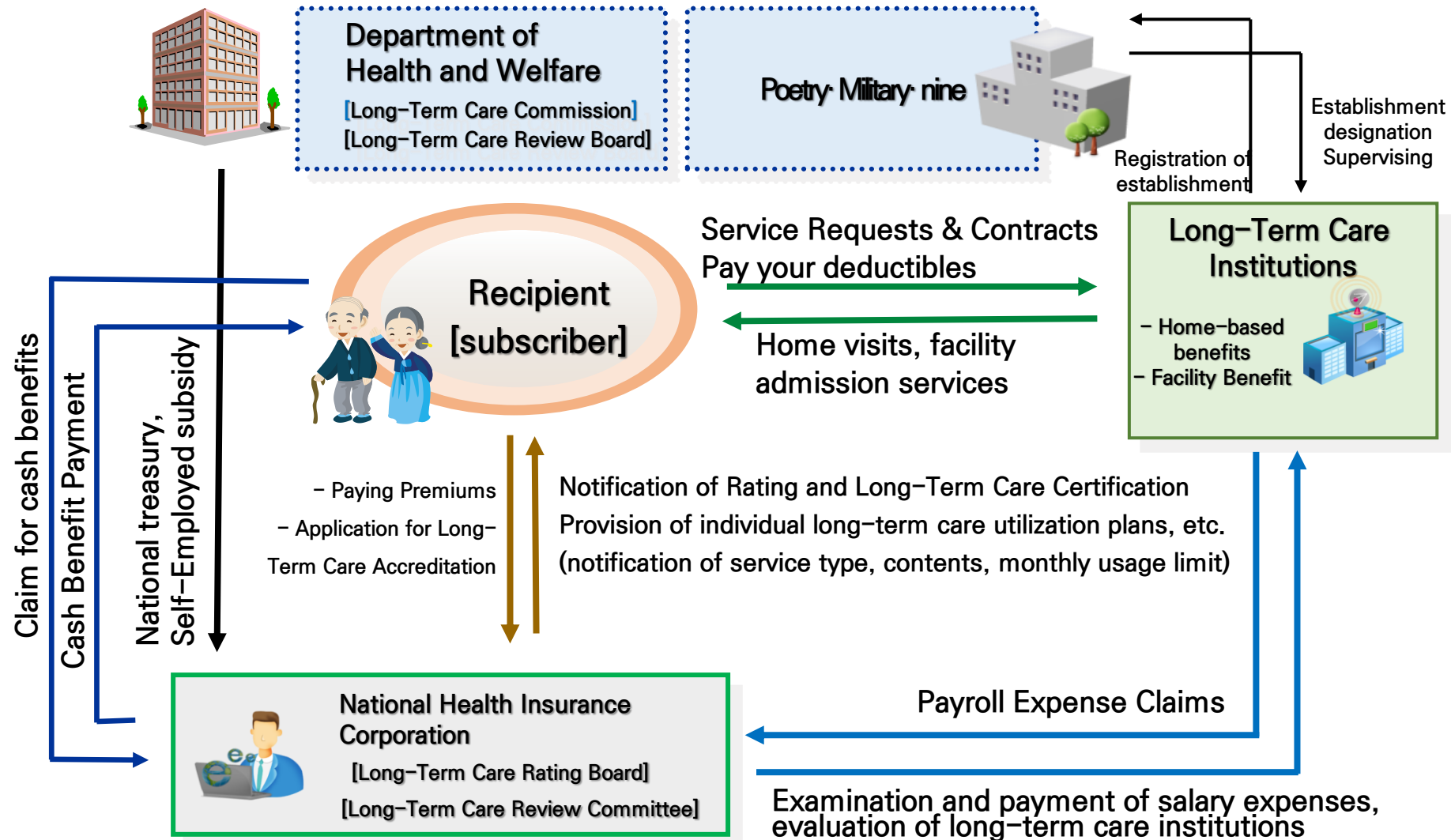


04

Long-Term Care Governance and Operating System



Long-Term Care Governance and Operating System



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05

Establishment of the 3rd Long-Term Care Basic Plan



Background

■ (Elderly Scale)

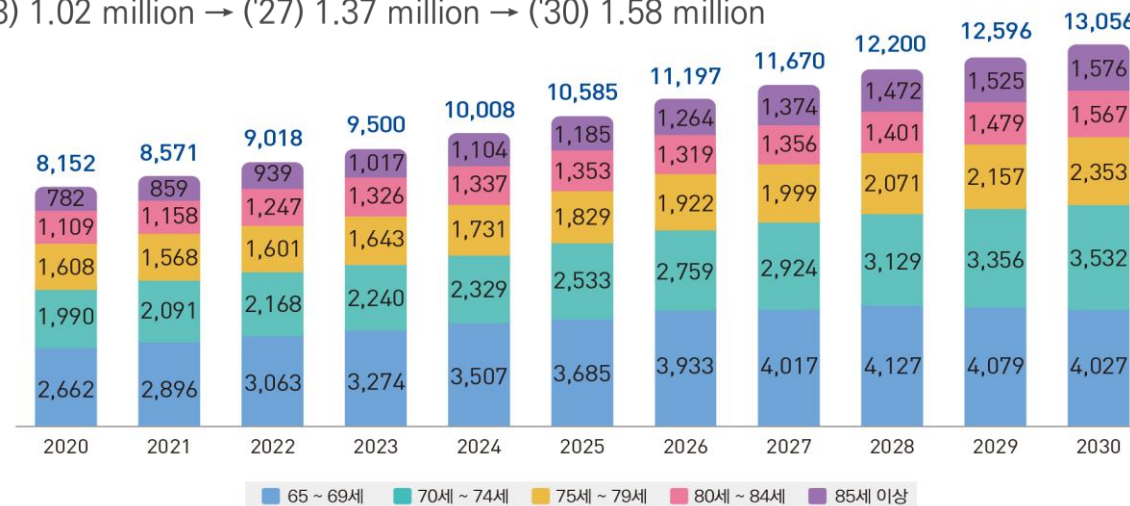
Rapid population aging and the incorporation of the baby boomer generation into the elderly population

- The elderly population is approaching 10 million ('24), and the world's fastest aging rate is expected to enter a super-aged society in '25 and reach an aging rate of 25% in '30.

* [Population aged 65 and over] ('00) 3.39 million, 7.2% (aging) → ('18) 7.37 million, 14.3% (elderly) → ('20) 8.15 million, 15.7% → ('25) 10.59 million, 20.6% (super-old) → ('30) 13.06 million, 25.5%

- The number of people aged 75 and over is expected to increase to 3.99 million (7.7% of the total population) in '23, 4.73 million (9.2%) in '27, and 5.5 million (10.7%) in '30.

* [Population 85 and over] ('23) 1.02 million → ('27) 1.37 million → ('30) 1.58 million



Background

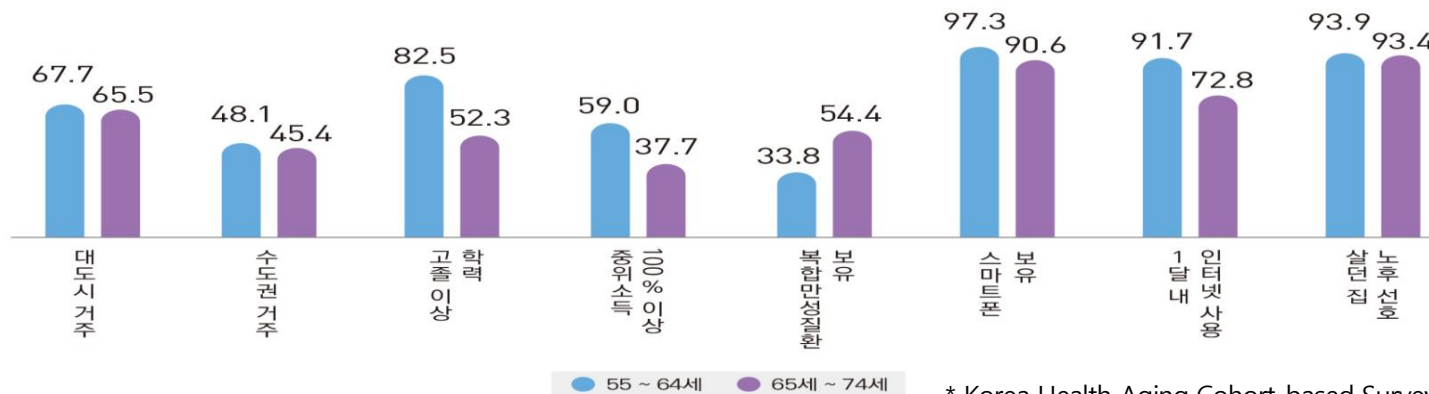
■ (New Older) Baby Boomers (born in '55~'63) entering old age

- In '20, the '55 generation will begin to enter the senior population, and by '28, all baby boomers will be seniors.

* Those born in '55~'63 accounted for a total of 6.97 million, accounting for about 13.6% of the total population. (Population Census, '22)

- With the emergence of a new elderly generation in terms of health and income, changes are expected in the way of caregiving, the composition of elderly households, and the level of service expectations

- (Demographic and sociological characteristics) The proportion of people living in large cities (67.7%) and metropolitan areas (48.1%) is high, the proportion of those with a high school education level or higher (82.5%), and the proportion of those with a median income of 100% or more (59.0%) is also high.
- (Health care) Relatively good health care, such as the proportion of having two or more chronic diseases (33.8%)
- (Information activities) 97.3% own a smartphone, and 91.7% use the Internet within a month
- (Retirement life) Prefer to live in retirement at home (93.9%)



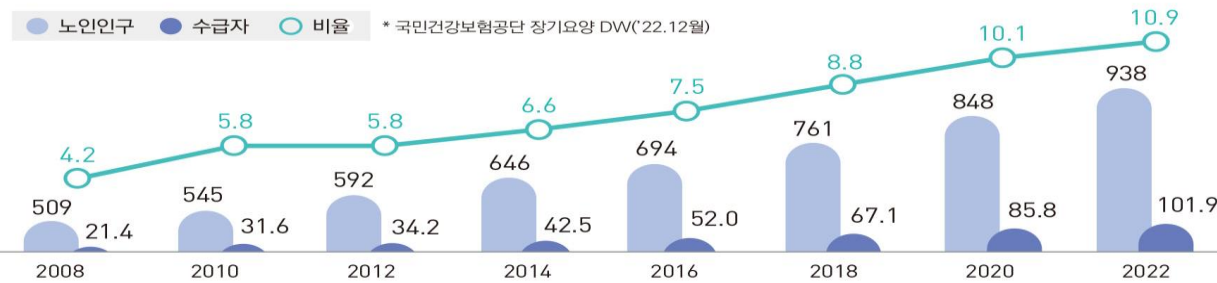
* Korea Health Aging Cohort-based SurveyⅡ(Health Insurance Research Institute, '22)

Background

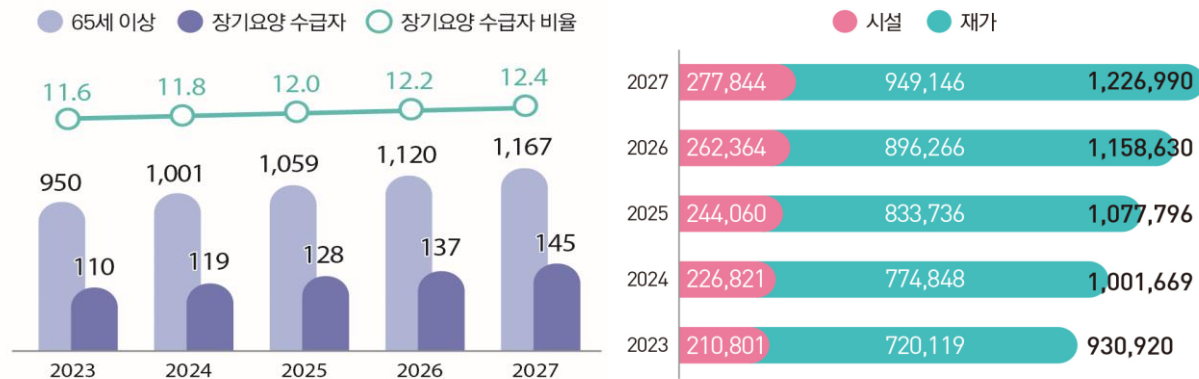
■ (Beneficiaries) The number of long-term care recipients is 1.019 million, which is 10.9% of the elderly population.('22)

- Continued increase from 214,000 (4.2% of the elderly population) in '08 to 1,019,000 (10.9%) in '22

〈 Status of Long-Term Care Recipients (Ten thousand people, %) 〉



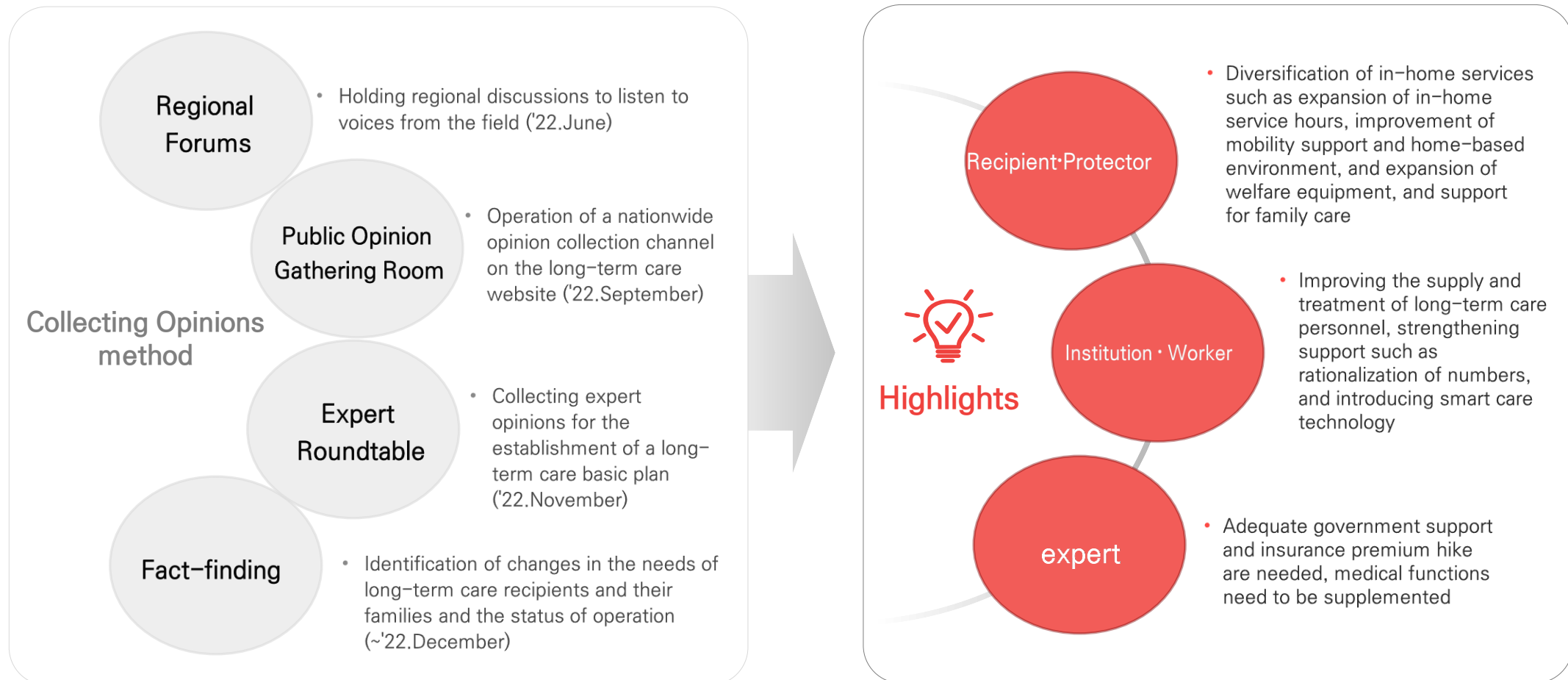
- The total number of beneficiaries is expected to increase from 1.45 million in '27 to 668,000 ('22) to 949,000 ('27), and from 195,000 ('22) to 278,000 ('27) in facilities.



Background

- Various opinion gathering channels * Operation of various opinion collection channels to fully reflect the awareness and needs of recipients and family members about long-term care

* Regional discussion forum, operation of public opinion collection room, promotion of long-term care survey (~'22.12.), etc.



Vision & Strategy

[Vision] Long-term care insurance for the elderly that thoroughly prepares for a super-aged society

· Objective ·

[Strengthening long-term care services so that people can receive sufficient and diverse care where they live
Sustainable long-term care insurance that is comfortable and safe to use]

Major Tasks

"Ensuring that proper care is
provided at home"
Strengthening long-term care
services

- Providing sufficient in-home services and diversifying services
- Expansion of home-based living infrastructure, such as medical-nursing care linkage
- Establishing a support system for families

"Enduringly supportive"
Customized Service
Establishment of a system of use

- Prevention of recipients, etc. · Reinforcement of case management
- Introduction of a judgment system considering the need for care and improvement of the rating system
- Laying the foundation for long-term care services to prepare for the entry of new seniors

"Reliable and reassuring" Long-
Term Care Institution Quality
Management

- Long-term care institution supply and demand management and supply system innovation
- Reinforcement of service evaluation and management system
- Improving the treatment of long-term care workers and strengthening their capacity

Enhancing the sustainability of the
system "to respond to a super-
aged society"

- Strengthening the financial health of long-term care insurance
- Restructuring the governance system of long-term care insurance
- Establishment of a smart long-term care system

What will look different in 5 years?

Category	Key Achievements	2022	→	2027	Note
Strengthening Coverage	Strengthening Coverage of Long-Term Care Insurance for the Elderly				
	Beneficiaries of long-term care insurance	1.019 million	→	1.45 million	
	Expansion of services for severely disabled beneficiaries	Home care < Institutions	→	Home care ≒ Institutions	Based on monthly benefit limits
	Diversification of home care services* *Home visit care, bathing assistance, nursing, day/night care, and short-term respite	5 core service types + welfare assistive devices	→	Current + new services	Home environment improvements, on-demand visits, and mobility support
	Establishment of family support systems	65 sites	→	227 sites	Based on NHIS operation centers
	Introduction of a family leave system for long-term care	8 days for dementia patients	→	12 days for patients with dementia and Grade 1-2 disability	
	User satisfaction	86.2%	→	88%	As indicated by the 2025 Long-Term Care Survey

What will look different in 5 years?

Category	Key Achievements	2022	→	2027	Note
Service Enhancement	Enhancing Long-Term Care Services for the Incoming Elderly Generation				
	Long-Term Care Grading System	Grades 1–5 and an additional cognitive support grade	→	Grading based on the level of long-term care need	e.g., Grades 1–6
	Service Utilization Ratio (Home-Based : Institutional)	77:23	→	80:20	OECD average
	Expansion of Integrated Home-care Services	31 sites	→	1,400 sites	Considering strengthening day and night care facilities (phase 1) and expanding visiting nursing agency services (phase 2)
	Expansion of Home0-based Medical Centers	28 sites	→	250 sites	Considering the number of institutions claiming Health Insurance Visiting Medical Services

What will look different in 5 years?

Category	Key Achievements	2022	→	2027	Note
Infrastructure Quality Management	Supply System Innovation and Capacity Building				
	Long-term Care Facilities	27,000	→	Expand long-term care facilities by +5,000 by 2030 (including day/night care and residential facilities)	Promote both public and private facility expansion and improve facility entry systems
	Basic Types of Long-term Care Facilities	3-4 person rooms	→	Expanding 1-2 person rooms and adopting unit care models	
	Number of Beneficiaries per Care Worker	2.3	→	2.1	
	Number of Care Worker	600,000	→	750,000	
	Evaluations of Long-term Care Facilities	Regular evaluations	→	Diversify evaluation methods	Increase the use of preliminary evaluations, re-evaluations, and evaluation outcomes
	Implementation of a Designation Renewal System	Establish legal basis	→	Withdrawal of underperforming Institutions (2025~)	

What will look different in 5 years?

Category	Key Achievements	2022	→	2027	Note
Enhancing Sustainability	Sustainable Operation of the Long-Term Care Insurance System				
	Benefit Cost Ratio between Home-care and Facility-based Services	62:38	→	70:30	OECD average
	Adequate National Funding Support	National treasury 20%	→	National treasury 20% + α (through revenue expansion)	
	Long-Term Care Demand Forecasting System	Promote the introduction	→	Establish a data cohort (2025)	
	Introduction and Use of Care Skills	Promote the introduction	→	R&D and dissemination	

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Thank You

