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Feasibility Study on Meeting the Elderly Care Demand from Beijing and Tianjin in Hebei Province

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Abstract: Population aging in the Beijing–Tianjin–Hebei region continues to deepen, making the alignment between the spillover of elderly care demand from Beijing and Tianjin and Hebei's capacity to absorb it an important issue in regional coordinated development. There is a clear spatial mismatch in elderly care services across the region. The price of institutional elderly care of comparable quality in Hebei is about 40%–70% of that in Beijing and Tianjin, indicating a real price advantage. Policy coordination among the three localities has moved into the operational stage of the "five interconnections," with direct settlement of medical insurance, mutual recognition of rating and assessment results, and portability of cross-regional subsidies having removed major institutional barriers. However, Hebei's absorption of elderly care demand from Beijing and Tianjin shows a structural pattern of "large flow but small stock": the cumulative number of person-times of elderly care and convalescence is considerable, yet only slightly more than 10,000 elderly people with Beijing household registration reside long-term in Hebei's elderly care institutions, suggesting that current demand is mainly for travel-based living and short stays rather than stable migration. Overall, it is feasible for Hebei to absorb elderly care demand from Beijing and Tianjin, but whether this feasibility can be translated into reality depends on whether its price advantage can be transformed into a trust advantage.

Keywords: Coordinated development of the Beijing-Tianjin-Hebei region, cross-regional elderly care, capacity to accommodate elderly care services, Hebei Province.

1. Introduction

By the end of 2024, the population aged 60 and above in Hebei Province reached 16.86 million, accounting for 22.85% of the province's permanent resident population; in Beijing, this proportion was 23.5%, while in Tianjin it was 25.88%. All three cities have now entered a stage of moderate population aging. Beijing is projected to enter a stage of severe population aging in the early phase of the 16th Five-Year Plan period, and by the middle of this century, the number of elderly residents could peak at over 10 million.

Population aging in itself does not necessarily lead to inter-regional mobility for elderly care. It is the continuous advancement of the Beijing-Tianjin-Hebei coordinated development strategy that has truly transformed the question of "where to retire" from a family matter into a regional issue. In 2015, the *Outline of the Beijing-Tianjin-Hebei Coordinated Development Plan* designated the integrationof public services as a key priority area. Over the following decade, the three regions have progressively achieved progress in areas such as mutual recognition of elderly care institution rating systems, mutual recognition of elderly person capability assessment results, portability of inter-regional elderly care subsidies, and direct cross-regional settlement of medical insurance claims. In 2024, the three regions jointly issued an implementation plan proposing "five-way interoperability" encompassing elderly care service policies, institutional subsidies, rating systems, capability assessments, and talent training outcomes. Some scholars have noted that while coordinated elderly care efforts within the Beijing-Tianjin-Hebei region have steadily strengthened, challenges remain—such as overall weak demand for inter-regional elderly care, uneven distribution of medical resources, and the need to enhance digital coordination capabilities and policy synergy [1].

The market is also responding accordingly. A persistent price disparity in elderly care services has existed among Beijing, Tianjin, and the peri-Beijing regions of Hebei Province. Some media outlets have reported that an elderly person who relocated from Beijing to Baoding for retirement once conducted cost comparisons: for the same standard room plus meal services, the monthly cost at a facility in Hebei Province was approximately 6,500 yuan, whereas in Beijing, the cost would reach at least 11,000 yuan. The Yanda Golden Years Health Care Center in Yanjiao stands as a relatively representative case; it has already accommodated over 8,000 elderly residents, over 95% of whom hail from Beijing. The facility is adjacent to the tertiary Grade-A Yanda Hospital, enabling direct settlement through Beijing's medical insurance system.

However, market response does not equate to successful implementation. According to the Hebei Provincial Development and Reform Commission, by the end of 2024, the number of elderly residents from Beijing and Tianjin seeking health and wellness services in Hebei Province reached 467,000, comprising 359,000 in Beijing and 108,000 in Tianjin; whereas Beijing municipal authorities reported that, as of the end of September 2025, the number of Beijing residents residing in elderly care institutions within Hebei Province was just over 10,000. The disparity between a health and wellness visitor volume exceeding 400,000 and an institutional occupancy base of merely over 10,000 raises critical questions that warrant further investigation.

The core question is: To what extent is it feasible for Hebei Province to meet the elderly care demands of Beijing and Tianjin? Here, "feasibility" encompasses at least three dimensions: first, whether the demand side truly exists and reaches a substantial scale; second, whether the supply side possesses sustainable capacity to accommodate such demand; and third, whether the institutional environment is sufficiently robust to support the transition from "traffic" to "stock."

2. Practical Conditions for Hebei Province to Meet the Elderly Care Needs of Beijing and Tianjin

2.1. Demand Side: The Scale of Elderly Care Demand in Beijing and Tianjin and Its Spillover Pressures

Beijing faces the most pronounced demand pressure. By the end of 2024, the permanent resident population aged 60 and above in Beijing reached 5.14 million, accounting for 23.5% of the total permanent resident population, with a net increase of 192,000 people within one year—exceeding the 5-million threshold for the first time. The registered resident population aged 60 and above in Beijing stood at 4.475 million, representing 31.1% of the total registered population. In 2024, Beijing had 577 elderly care institutions offering 108,000 care beds, translating to approximately 21 institutional care beds per 1,000 elderly residents. In the central urban areas of Beijing, land resources are highly scarce, while land prices and costs of nursing personnel remain persistently high, resulting in extremely high marginal costs for adding new care beds.

The situation in Tianjin differs, yet it likewise faces spillover pressures. As of the end of 2024, the permanent resident population aged 60 and above in Tianjin numbered 3.53 million, accounting for 25.88% of the total population—3.88 percentage points higher than the national average. The city hosts approximately 481 elderly care institutions, providing 81,500 elderly care beds in total, with approximately 23 institutional beds per 1,000 elderly residents.

It should be noted that the cross-regional elderly care needs of older adults in Beijing and Tianjin are not homogeneous. A survey indicates that among older adults who express a willingness to live in another region for elderly care or well-being, the majority belong to a demographic characterized by basic self-care capability, certain financial resources, and relatively open attitudes. Among those willing to relocate for elderly care, the most important factors considered when choosing a destination, in descending order, are abundant medical resources (60.4%), well-equipped elderly care facilities (40.0%), pleasant scenery and air quality (37.5%), and proximity to urban areas (35.7%). In contrast, disabled older adults who genuinely require intensive care exhibit a lower willingness to relocate. Some scholars, using data from the 2010 China Urban and Rural Elderly Population Status Follow-up Survey, found that intergenerational family support is significantly correlated with the willingness of older adults to live in another region for elderly care [2].

2.2. Supply Side: Resource Endowments and Capacity to Absorb Care Services in Hebei Province

By the end of 2024, Hebei Province had established 1,983 elderly care institutions with a total of 459,000 elderly care beds, including 284,000 nursing care beds—accounting for 62% of the total, exceeding the 55% target set in the national "14th Five-Year Plan." The number of integrated medical and elderly care institutions reached 1,187, with 181,100 beds, placing the province fourth nationwide in terms of the number of such institutions.

However, the uneven geographical distribution warrants even greater attention. Resources with genuine capacity to accommodate elderly care services are highly concentrated in the Beijing-Tianjin region. Taking Langfang as an example, the city hosts 68 elderly care institutions, 21 of which are located in counties (cities and districts) surrounding Beijing, providing 27,541 beds and accommodating 9,487 elderly residents—of whom 5,520 hold Beijing household registration and 99 hold Tianjin household registration. Langfang has cumulatively accommodated over 20,000 elderly residents with Beijing household registration and over 3,000 elderly residents with Tianjin household registration, ranking first in the province. In contrast, Zhangjiakou hosts 161 elderly care institutions with 17,102 beds, of which nursing-oriented beds account for as much as 73%; in 2024, the city accommodated 95,000 elderly residents from Beijing and Tianjin, with this figure projected to rise to 124,400 by 2025.

A strategic layout is gradually taking shape: Langfang—particularly Sanhe and Yanjiao—will assume long-term residential functions for institutional elderly care, while Zhangjiakou and Chengde will focus on seasonal health and wellness services and residential tourism; Baoding, Qinhuangdao, and other cities are seeking a distinct positioning between these two roles. The Hebei Provincial Development and Reform Commission has already delineated an industrial framework comprising "one core zone (the elderly care core zone encompassing six cities and 24 counties around Beijing), one service circle (a one-hour high-speed rail elderly care service circle), and three industrial belts (the Yanshan Mountain, Taihang Mountain, and coastal health and wellness leisure industrial belts)."

There is another unavoidable fact: Hebei Province itself also exhibits a high degree of population aging. At the end of 2024, the number of residents aged 60 and above in the province reached 16.86 million, accounting for 22.85% of its total permanent resident population—0.85 percentage points higher than the national average. Since the launch of the 14th Five-Year Plan period, the province has experienced a net decrease of 860,000 permanent residents, while its elderly population has increased by 2.048 million people during the same period. Meeting the demand from Beijing and Tianjin must not come at the expense of depriving local elderly residents of access to essential services.

2.3. Policy Perspective: Institutional Framework for Inter-regional Coordination of Elderly Care in the Beijing-Tianjin-Hebei Region

In 2024, the three regions jointly issued the "Implementation Plan on Further Deepening the Collaborative Development of Elderly Care Services in the Beijing-Tianjin-Hebei Region" and established a specialized working group on elderly care collaboration within the Beijing-Tianjin-Hebei region. The most substantive progress among the "Five Interconnectivities" includes two key initiatives: first, the mutual recognition of elderly care facility rating assessments and elderly person capability evaluation results across the entire Beijing-Tianjin-Hebei region; second, Beijing has adopted the approach of "aligning policies with the needs of elderly residents" by allocating operational subsidies to elderly care facilities in Tianjin and Hebei that host elderly residents registered in Beijing. In 2024, Beijing launched an online payment mini-program for elderly care service subsidies, enabling elderly residents of Beijing to utilize elderly care subsidy funds from their "Elderly and

Disabled Care Cards" across the regions of Hebei and Tianjin. As of the end of September 2025,145 elderly care facilities in Tianjin and Hebei have been integrated into Beijing's online contract signing system for elderly care services, with a cumulative total of 503 valid contracts having been signed.

Hebei Province has also introduced incentive policies to attract and accommodate elderly care facilities. In 2025, the General Office of the Hebei Provincial People's Government issued the "Several Measures to Support the Development of Elderly Care Institutions," outlining 24 specific initiatives across six key areas: land use, funding, talent acquisition, and financial support. New elderly care institutions will receive a one-time construction subsidy of 8,000 yuan per bed, while renovated institutions will receive a subsidy of 3,500 yuan per bed. Operational subsidies are allocated based on the types of elderly residents: 300 yuan per person per month for those who are completely disabled, severely disabled, or moderately disabled. Li Na, a scholar at the Hebei Provincial Academy of Social Sciences, emphasized that Hebei should "leverage its unique cost advantages to meet the elderly care demands of Beijing and Tianjin," and, through policy measures such as tax reductions and land-use incentives, encourage large healthcare institutions and specialized elderly care service providers from Beijing and Tianjin to establish regional elderly care complexes in Hebei [4].

3. Multi-dimensional Feasibility Assessment of Hebei Province's Capacity to Meet the Elderly Care Demand of Beijing and Tianjin

3.1. Economic Feasibility: Cost Advantages and Their Limits

The average monthly fee for elderly care institutions in Beijing is approximately 5,500 yuan; for elderly individuals with severe disability or dementia, the fees generally exceed 7,000 yuan, with some institutions in core urban areas charging over 10,000 yuan per month. In Hebei Province, the care costs for elderly individuals with severe disability at mid-to-high-end care institutions are approximately 2,500 yuan per person per month; when combined with bed fees and meal costs, the total monthly expense is around 5,500 yuan. In the Yanjiao area, some affordable nursing homes charge between 2,000 yuan and 2,400 yuan per month. Taking the Yanda Golden Years Health Care Center as an example, its comprehensive monthly fee range spans from 6,300 yuan to 22,550 yuan. For care services of equivalent quality, Hebei Province offers a price advantage of approximately 30% to 60% over Beijing. Taking elderly residents in care institutions in Baoding as an example, for the same standard room type including meal fees, the cost in Hebei is approximately 6,500 yuan, compared to approximately 11,000 yuan in Beijing—a price difference of about 41%, which can result in annual cost savings of around 54,000 yuan.

However, cost advantages also have their limits. The price advantage primarily stems from differences in land, labor, and living costs—differences that are gradually narrowing in the regions surrounding Beijing. In areas closest to Beijing, such as Yanjiao, Xianghe, and Gu'an, land prices and rental rates have already become significantly higher than in other parts of Hebei Province. Moreover, low prices do not equate to high cost-effectiveness. For elderly individuals, the key consideration is not merely the "price of a bed," but rather the "quality of care per unit of cost." While price remains decisive for middle-income elderly people with a pension ranging from 3,000 to 6,000 yuan, for those with greater financial means, location, healthcare access, and social networks become more critical factors.

3.2. Spatial and Location Feasibility

From a geographical standpoint, Yanjiao is separated from Tongzhou in Beijing by only one river and lies approximately 30 kilometers from Tiananmen Square; it can already be regarded as an extension of Beijing's urban functional zone. Beyond this, cities such as Baoding, Zhangjiakou, Chengde, and Qinhuangdao are situated between 150 and 300 kilometers from Beijing, and their role in serving Beijing's needs has shifted from "daily commuting accessibility" to "weekend visitation accessibility" or "seasonal residential accessibility." In terms of transport accessibility, the operation of rail lines—including the Beijing–Zhangjiakou High-Speed Railway, the Beijing–Harbin High-Speed Railway, and the Beijing–Xiong 'an Intercity Railway—has incorporated Zhangjiakou, Chengde, and Xiong' an into Beijing's one-to-two-hour commuting radius. By 2025, Zhangjiakou is projected to host 124,400 elderly residents from Beijing and Tianjin, a significant portion of whom will engage in seasonal mobility facilitated by the high-speed rail connectivity.

From the perspective of spatial tiering, the areas surrounding Beijing are better suited to fulfilling long-term institutional elderly care functions, as they must accommodate the frequent visitation needs of children; in contrast, the Zhangjiakou–Chengde region and the coastal areas in central and eastern China are better positioned to serve seasonal health and wellness, as well as residential tourism functions.

3.3. Feasibility of Medical and Service Support

There are three primary pathways for improvement. First, institutional self-operated medical services: the Yanda Golden Years Health Care Center is adjacent to Yanda Hospital (a Grade III, Class A hospital), which has a total of 3,000 beds; both institutions have established a "green channel" for medical services, enabling real-time settlement via Beijing medical insurance. Second, regional medical-and-elderly care consortia: in August 2024, the Beijing-Tianjin-Hebei Medical and Elderly Care Integration Alliance was established, incorporating 510 institutions, including Beijing Geriatric Hospital, the Rehabilitation Hospital affiliated with the Ministry of Civil Affairs, and the Tianjin Rehabilitation and Convalescence Center. Beijing has jointly formed 40 medical consortia with healthcare institutions in Hebei and Tianjin; furthermore, traditional Chinese medicine services have achieved full coverage in all elderly care institutions of secondary or higher levels within the Beijing-Tianjin-Hebei region. Third, direct integration of medical insurance and policies: the Beijing-Tianjin-Hebei region has now fully implemented direct medical insurance settlement for cross-regional medical treatment without the need for prior filing.

However, significant shortcomings remain in healthcare support, the most prominent of which is a structural shortage of nursing personnel. In key recipient cities like Langfang, the total number of staff members across all types of elderly care institutions in the city amounts to only 3,705, yet they are tasked with serving nearly 10,000 elderly residents. To address this issue, Hebei Province has introduced policies such as subsidies for training, separate allocation of

professional title approvals, and performance-based rewards for specific positions. In 2025, the provincial government has set the goal of "adding over 3,000 certified elderly care workers" as part of its livelihood project objectives. Another challenge is the uneven distribution of medical resources: the tertiary Grade-A hospitals and specialized medical services most trusted by elderly residents in Beijing and Tianjin are concentrated in regional central cities such as Shijiazhuang and Baoding, as well as around a limited number of large medical institutions.

3.4. Social Acceptance and Trust Constraints

Elderly individuals primarily have three concerns: anxiety about adapting to unfamiliar environments, doubts regarding the quality of services, and the psychological fear of being "left behind." Surveys indicate that over 68% of elderly users "rely primarily on intermediaries" when selecting a senior care facility, and among those who do, over 45% "doubt the accuracy of the information provided by intermediaries." The concerns of their children, on the other hand, are more practical: they worry that they may not be able to reach their parents in an emergency, that the medical standards in Hebei Province may be inadequate, and that it could be difficult to protect their parents' rights if the care facility encounters problems.

It is noteworthy that societal attitudes are evolving. A survey indicates that nearly 20% of elderly residents in Beijing aspire to retire in the regions surrounding Beijing, while half of them prefer retirement locations within a two-hour travel radius; the primary consideration for inter-regional retirement is access to medical resources, with over 80% of elderly respondents hoping their monthly expenditure will not exceed 6,000 yuan. Empirical research by scholars has shown that the proportion of elderly residents in Beijing willing to retire in other regions ranges from 12.3% to 19% [3].

Information asymmetry and a lack of trust are precisely the key factors that explain the paradox of "high traffic volume coupled with limited existing resources." While price advantages are evident, locational conditions are well-defined, and policy facilitation measures are being progressively established, the limited understanding of elderly care services in Hebei Province among senior citizens and their families, their lack of confidence in seamless healthcare coordination, and their skepticism regarding the quality of institutional services constitute more fundamental barriers to migration than price considerations. Research employing theory has also identified the absence of common touchpoints within the elderly care market, along with the relatively low willingness of seniors in Beijing to relocate for elderly care, as prominent challenges facing coordinated elderly care development in the Beijing-Tianjin-Hebei region [3].

3.5. Comprehensive Assessment of Capacity to Undertake

It is generally feasible for Hebei to meet the elderly care demands of Beijing and Tianjin; however, this feasibility is conditional and tiered. The cost advantage is genuine, and institutional pathways are well-established; the primary constraints, however, lie in three soft factors: human resources, service quality, and trust. The most pressing challenge currently is the gap between the flow of elderly care patients and the existing capacity of institutional care facilities. To narrow this gap, the key lies not in further expanding promotional efforts, but in addressing trust issues, ensuring service continuity, and building mid-to-long-term care capabilities.

4. Conclusions and Recommendations

Based on publicly available statistics and policy developments, Hebei Province possesses a solid practical foundation to meet the elderly care demands of Beijing and Tianjin. On the demand side, the aging population in Beijing and Tianjin has long posed a persistent challenge; in their core urban areas, the cost of elderly care services is high, and room for expansion is limited. On the supply side, Hebei enjoys certain advantages in terms of hospital beds, land, human resources, and ecological resources, and several service hubs have already emerged in the regions surrounding Beijing. Institutionally, collaborative mechanisms among the three regions are helping to reduce the institutional costs of cross-regional elderly care provision. However, "feasibility" does not equate to "automatic realization."

Based on the above analysis, the following recommendations are proposed. First, implement tiered allocation strategies: regions adjacent to Beijing should prioritize addressing long-term institutional elderly care and integrated medical-elderly care needs, while areas such as Zhangjiakou, Chengde, Qinhuangdao, and Tanggu should focus on tourism-based health and wellness care and seasonal elderly care services, thereby avoiding homogeneous competition. Second, promote the alignment of service benefits across regions, transitioning from "settleable" to "predictable" benefits. The online contract registration system for elderly care services in Beijing should continue to expand its coverage to Tianjin and Hebei provinces; meanwhile, Hebei Province should strengthen daily supervision of host institutions and enhance information disclosure requirements. Third, address gaps in talent and standards: facilitate mutual recognition of elderly care worker qualifications within the Beijing-Tianjin-Hebei region, streamline professional title certifications, and optimize labor market matching mechanisms; additionally, accelerate the accreditation process for unrated institutions. Fourth, unify statistical criteria: current metrics—such as the number of health and wellness visits to Hebei Province, the total number of elderly residents visiting Hebei Province, and the number of elderly residents with Beijing household registration residing in local institutions—remain inconsistent, which may lead to biased policy assessments; it is therefore recommended to standardize statistical benchmarks for inter-regional elderly care services. Fifth, integrate the fulfillment of external demand with the enhancement of local elderly care service capabilities, ensuring that such external initiatives simultaneously drive improvements in local service capacities.

Overall, for Hebei Province, addressing the elderly care demands of Beijing and Tianjin is not a matter of "whether it can be done," but rather a question of "what approaches to adopt, which specific demographic groups to serve, and how to ensure sustainability." While price advantages have opened the first door, the decisive factors in whether elderly residents choose to remain in the region are healthcare quality, trust, service standards, and the convenience of family visits.

References

[1] Qu, J. Y. (2024). Collaborative Development of Elderly Care Services in the Beijing-Tianjin-Hebei Region: Achievements, Challenges, and Development Pathways. Urban Issues, (12).

[2] Ding, Z. H., Huang, X. S., & Gong, W. Z. (2017). The Impact of Intergenerational Family Support on the Intention to Live in Another City for Elderly Adults in Urban Areas: A Study. Population and Development, (4), 96–103.

[3] (2026). Collaborative Elderly Care in the Beijing-Tianjin-Hebei Region: Theoretical Logic and Practical Conceptions for the Participation of Social Enterprises. Journal of Beijing Union University (Humanities and Social Sciences Edition), 24(2), 64–72.

[4] Li, N. (2025, April 24). Addressing the elderly care needs in Beijing and Tianjin to promote high-quality development of regional elderly care services in our province. Hebei Economic Daily.

[5] Hebei Provincial Development and Reform Commission. (2025, August 7). Response to Proposal No.0638 of the Third Session of the 13th Committee of the Chinese People's Political Consultative Conference in Hebei Province.