

# Research on the Transformation Path of China's Elderly Care Industry Driven by Cross-Border Healthcare under the National Strategy: An Exploration of Institutional Opening-Up Based on Japan's Experience

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**Abstract:** Against the backdrop of a “super-aged” society, China’s elderly care industry faces multiple challenges, including the absence of standards, shortages of professional personnel, and a narrow range of services. The state’s promotion of a high level of opening-up, especially the strategy centered on institutional opening-up, offers a historic opportunity to break through the bottlenecks of the elderly care industry by developing cross-border healthcare. Through a systematic comparison of the current status of the elderly care industry in China and Japan, this paper focuses on the institutional innovation and practices in the field of cross-border healthcare in the Lingang New Area of Shanghai. It reveals the bottlenecks currently faced by cross-border healthcare development in Lingang, including restrictions on cross-border data flows, an underdeveloped payment system, and an insufficient supply of specialized professionals<sup>[1]</sup>. The paper further demonstrates how cross-border healthcare can serve as a bridge connecting Japan’s advanced experience with China’s vast market. The study argues that, driven by cross-border healthcare, the systemic introduction and re-innovation of “technology–payment–talent–standards,” along with targeted recommendations for Lingang’s practical problems, can effectively promote the transformation of China’s elderly care industry toward high quality, intelligence, and internationalization, ultimately achieving a win–win outcome in terms of people’s livelihood improvement and industrial development<sup>[2]</sup>.

**Keywords:** Cross-border healthcare; Elderly care industry; Institutional opening-up; China–Japan cooperation; Talent cultivation

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## 1. Introduction

China is rapidly entering a stage of deep population aging, with its scale and speed rarely seen in world demographic history. The large elderly population has generated diversified and high-quality demands for elderly care services. However, China's elderly care industry is still in its early stage of development and faces structural contradictions such as “low institutional accreditation rates, inconsistent service standards, systemic shortages of professional personnel, and insufficient application of smart technologies”<sup>[3]</sup>. At the same time, Japan, one of the countries with the deepest level of aging and the most mature elderly care system in the world, has accumulated rich experience in long-term care concepts, refined service standards, and industrial operation and management<sup>[4]</sup>. Yet, issues such as a saturated domestic market and caregiver shortages have become increasingly prominent in Japan. There is strong strategic complementarity between China and Japan in the field of elderly care.

Against this backdrop, the national strategy of “institutional opening-up” promoted at the highest level of state governance—particularly the cross-border healthcare stress tests first carried out in the Lingang New Area of Shanghai—has provided an innovative channel for the systematic introduction, digestion, and absorption of high-quality elderly care resources from Japan and the rest of the world<sup>[5]</sup>. Therefore, this study aims to explore how, by relying on national strategies and taking cross-border healthcare as a systemic breakthrough point, China can, through institutional opening-up, drive the overall transformation and upgrading of its elderly care industry.

## 2. In-depth comparison of the current status of aging and the elderly care industry in China and Japan and analysis of their complementarity

### 2.1. Aging trends: Dual challenges of scale and depth

China's aging challenge lies in its “super-large scale” and “ultra-fast speed.” In 2022, the population aged 60 and above reached 280 million, and it is expected to rise to 371 million by 2030. Mega-cities such as Shanghai have already entered a “super-aged” society ahead of time, with the proportion of residents aged 60 and above forecast to exceed 30% by 2030.

Japan, by contrast, faces the situation of the “deepest degree” of aging and the “heaviest burden.” In 2023, the proportion of the population aged 65 and above reached 29.1%, the highest in the world<sup>[6]</sup>. These differences in trends determine the fundamental distinction between the two countries' markets: China possesses an unparalleled potential market size, while Japan, with its mature solutions for coping with deep aging, faces an urgent need for innovation.

### 2.2. Current status of the elderly care industry: Contrast between system maturity and market potential

#### 2.2.1. China: Coexistence of rapid expansion and lack of standards

China's elderly care industry is in a phase of rapid infrastructure construction. The number of elderly care institutions increased from 140,000 in 2016 to 388,000 in 2022, and the number of beds reached about 8.29 million. It is projected that by 2030, there will be 760,000 institutions and 11.4 million beds<sup>[7]</sup>.

However, the quantitative expansion of the industry has not fully offset the qualitative shortcomings, as evidenced by:

(1) Low degree of standardization

Institutional accreditation rates are below 40%, and there is wide variation in service procedures and

personnel qualifications<sup>[8]</sup>.

(2) Single service structure

Services are mainly basic “community + home-based” models (accounting for 93%), while high-end specialized care and smart health and elderly care segments are undersupplied<sup>[9]</sup>.

(3) Weak talent system

Training standards for care personnel are inconsistent, and the levels of professionalization and sense of professional identity need improvement<sup>[10]</sup>.

### 2.2.2. Japan: Coexistence of a well-developed system and insufficient internal momentum

Japan’s elderly care industry is renowned for its “refined management” and “systematic services.” Its advantages include:

(1) High-standard regulation

The institutional accreditation rate exceeds 95%, with comprehensive national standards and strict supervision for service procedures, personnel qualifications, and facility safety<sup>[11]</sup>.

(2) Diversified service models

The system covers more than ten types of services, including special nursing homes for the elderly, geriatric health services facilities, day care, and dementia-specialized institutions, which can meet the individualized needs of different elderly groups<sup>[12]</sup>.

(3) Advanced concepts

The concept of “self-support” (jiritsu shien) is widely implemented, respecting the dignity of older people and aiming to maximize the maintenance and enhancement of their self-care abilities<sup>[13]</sup>.

However, Japan’s industry also faces bottlenecks such as severe caregiver shortages, high service costs, and limited room for growth in the domestic market<sup>[14]</sup>.

### 2.3. Summary of the comparison: Analysis of core complementarities

The gaps between the elderly care industries of China and Japan constitute a solid foundation for bilateral cooperation. As shown in **Table 1** below, the strengths and weaknesses of the two countries are almost perfectly complementary.

**Table 1.** Analysis of core complementarities

Dimension	China	Japan	Complementarity analysis
Institutional accreditation rate	<40%, standards uneven	>95%, strict regulation	China needs to introduce standards; Japan can export management models
Care personnel	Standards inconsistent, system to be improved	National qualification and continuing education	China needs systematic training; Japan can export curricula and certification systems
Service types	About 3–5, single structure	A dozen+ types, highly diversified	China needs to enrich service formats; Japan can export mature service products
Smart devices	Low penetration, mainly high-end	Technologically advanced, widely used	China has manufacturing advantages; Japan has technological advantages—suited for joint R&D
Market & costs	Huge market space, strong cost-control potential	Saturated market, high costs	Japanese enterprises seek new growth; China needs high-quality supply

### **3. Strategic opportunities for cross-border healthcare under national strategies and practices in the Lingang New Area**

Cross-border healthcare is not merely about “attracting foreign patients” or “going abroad for treatment.” Under the top-level design of national strategies, it is a systemic project that, through institutional opening-up, promotes the cross-border flow of key production factors such as medical resources, data, capital, and talent.

#### **3.1. Systemic empowerment by national strategies**

##### **3.1.1. Top-level orientation**

In November 2023, during an inspection tour of Shanghai, the General Secretary clearly instructed that the Lingang New Area should “take the lead in conducting stress tests,” “deepen opening-up in areas such as healthcare,” and accelerate pilot trials focusing on “cross-border data flows”<sup>[1]</sup>. This provides a powerful policy mandate for tackling deep-seated institutional obstacles in cross-border healthcare.

##### **3.1.2. Policy framework**

The *Overall Plan for the China (Shanghai) Pilot Free Trade Zone Lingang New Area* explicitly proposes “building an international medical service cluster area,” and “supporting cooperation with foreign institutions to develop cross-border medical insurance products and conduct pilot programs for international medical insurance settlement”<sup>[2]</sup>. This directly unblocks the key link of payments for elderly care services.

##### **3.1.3. Inter-ministerial coordination**

The Ministry of Commerce, the National Health Commission, and other ministries have intensively issued policies, ranging from allowing foreign-invested enterprises to conduct R&D on cutting-edge technologies and setting up wholly foreign-owned hospitals, to expanding the opening-up of the medical and elderly care sectors, thereby constructing a comprehensive policy support system<sup>[15]</sup>.

#### **3.2. Institutional innovation and practical exploration in the Lingang New Area**

As a “stress-testing ground” for national strategies, the value of the Lingang New Area lies in translating macro-level strategies into operable and replicable micro-level practices. The specific approaches involve institutional opening-up focused on factor flows: Lingang’s core practice is to seek institutional breakthroughs around the key factors required for cross-border healthcare—“drugs, devices, data, doctors, insurance, and finance.”

##### **3.2.1. Facilitation of people’s movement**

By implementing electronic port visas that can be handled entirely online, without submitting physical passports or pasting paper visas, Lingang effectively resolves the problem of patients’ entry being affected by changes in travel plans, and greatly facilitates cross-border medical tourism.

##### **3.2.2. Opening of payment channels**

Lingang is conducting pilot programs for international commercial medical insurance settlement and exploring the direct use of cross-border medical insurance products within China, thus addressing payment bottlenecks<sup>[16]</sup>.

##### **3.2.3. Data connectivity**

Under the premise of ensuring security, Lingang is exploring cross-border data flows. Shanghai–Hong Kong

cooperation on the cross-border use of electronic medical records is being promoted, providing a foundation for continuous treatment services<sup>[17]</sup>.

(1) Building an integrated “healthcare–industry–services” ecosystem

(a) Resource agglomeration: Relying on high-quality medical resources such as the Lingang branch of the Sixth People’s Hospital of Shanghai (a National Orthopedic Medical Center) and the Lingang branch of Pudong Hospital, Lingang has formed clinical high grounds. Backed by the “Life Blue Bay” biomedicine industrial park, it brings together strengths in precision diagnostics, pharmaceuticals, and surgery, providing support for the application of frontier technologies in elderly care<sup>[18]</sup>.

(b) Integrated services: The Lingang New Area Cross-Border Healthcare Service Center has been established to build a one-stop, full-process service system covering consultation, appointment, diagnosis, treatment, and rehabilitation. By launching English websites, bilingual guidance, and offering multilingual medical reports and foreign currency payments, Lingang is cultivating an internationalized service environment<sup>[19]</sup>.

(2) Leading with representative cases to achieve a breakthrough from “0 to 1”

By successfully diagnosing and treating globally rare diseases such as idiopathic myointimal hyperplasia of mesenteric veins and performing domestically leading minimally invasive prostate cancer surgeries—examples of “technical height”—as well as providing one-on-one customized premarital and pregnancy checkups, assisted reproduction, and health management packages for overseas patients—examples of “service warmth”—Lingang has not only demonstrated its technical capabilities but also built patients’ confidence in “entrusting their health.” This has laid a solid foundation for the subsequent scaling and normalization of services for overseas patients, especially older adults with elderly care needs<sup>[20]</sup>.

(3) Challenges facing the development of cross-border healthcare in Lingang

Despite progress in the field of cross-border healthcare, the Lingang New Area still faces multiple challenges that constrain further development, mainly in the following areas:

**Restrictions on cross-border data flows:** Cross-border transmission of medical data involves patient privacy and national security and is therefore subject to strict regulation. Although Lingang has made some attempts in exploring cross-border data flows, there are many practical constraints, such as complex approval procedures for data transmission and incompatible data formats. These issues adversely affect the efficiency and quality of cross-border healthcare services<sup>[17]</sup>.

**Underdeveloped cross-border payment systems:** At present, cross-border medical payments mainly rely on traditional bank transfers or credit card payments, which are associated with high fees, long settlement times, and exchange rate risks. Although Lingang is exploring pilot programs for international commercial medical insurance settlement, related products and services are still in their infancy, with limited coverage, making it difficult to meet patients’ diverse payment needs<sup>[17]</sup>.

**Insufficient supply of specialized personnel:** Cross-border healthcare requires professionals with an international outlook, foreign language proficiency, and familiarity with international medical norms, including doctors, nurses, interpreters, and insurance consultants. Currently, Lingang’s talent pool in this regard is relatively limited and cannot fully meet rapidly growing market demand. In addition, due to the lack of unified qualification certification standards and career development pathways, the mobility and stability of cross-border healthcare professionals are also affected<sup>[17]</sup>.

**Incomplete laws, regulations, and regulatory systems:** Cross-border healthcare involves the laws and

regulations of multiple countries and regions, including the determination of liability for medical accidents, approval for import of pharmaceuticals and medical devices, and protection of patient privacy. At present, the legal and regulatory framework and supervision system in Lingang in these aspects are not yet fully developed, which can easily lead to disputes and risks <sup>[20]</sup>.

## 4. Discussion

### 4.1. Strategic necessity

The transformation of the elderly care industry, driven by cross-border healthcare, is not a simple duplication of Japan's model, but rather a process of industrial upgrading catalyzed by systematic introduction across four key dimensions:

- (1) Technology introduction and integration: Introducing Japan's advanced rehabilitation equipment, dementia care technologies, and remote monitoring devices and integrating them with China's strengths in hardware manufacturing and digital technologies to develop smart elderly care solutions suited to Chinese conditions <sup>[16]</sup>.
- (2) Exploration of payment models: Leveraging Lingang's pilot programs for cross-border medical insurance to explore combining Japanese-style Long-Term Care Insurance (LTCI) service packages with commercial insurance, thereby innovating payment models for elderly care services in China <sup>[19]</sup>.
- (3) Talent cultivation and mutual recognition of standards: Using cross-border healthcare cooperation platforms to conduct pilot programs for joint training and mutual recognition of qualifications for Chinese and Japanese care personnel, thereby introducing Japan's systematic training and management standards into China <sup>[14]</sup>.
- (4) Localization of service concepts: Localizing the core Japanese concept of "self-support" through the clinical practice of cross-border healthcare and health-elderly care services, in order to raise the level of humanistic care in Chinese elderly care institutions <sup>[16]</sup>.

### 4.2. Evolution of China–Japan cooperative innovation practices

Current cooperation has progressed from simple product trade to deeper-level system integration:

- (1) From products to solutions: Japanese companies such as Panasonic and Toyota are no longer merely selling electric wheelchairs and walkers; they now provide comprehensive barrier-free living solutions. A typical case is Taikang Home's partnership with Japanese care teams, in which Japanese dementia care models and environmental design standards have been systematically introduced <sup>[15]</sup>.
- (2) From management to empowerment: Cooperation is no longer limited to Japanese teams directly managing elderly care institutions in China; it has shifted toward "asset-light" output of technologies and standards. China and Japan have co-established care training centers in which Japanese partners provide curriculum systems and certifications to empower local teams <sup>[14]</sup>.
- (3) From independence to collaboration: The "Cloud Health Elderly Care System" is a paradigm of Sino–Japanese collaborative innovation. Jointly developed by China Electronics Health and Japan's NEC, it combines Japan's refined management experience with China's IT and hardware integration capabilities. Pilot programs have been launched in Jiangsu and Shanghai, enabling coordinated health monitoring, early warning, and telemedicine <sup>[19]</sup>.

### 4.3. Recommendations for the development of cross-border healthcare in Lingang

In view of the challenges facing the development of cross-border healthcare in the Lingang New Area, the following recommendations are proposed:

Establish a secure and controllable mechanism for cross-border data flows: Under the premise of safeguarding patient privacy and national security, Lingang should explore the establishment of a secure and controllable mechanism for cross-border data flows. This could include technical measures such as data desensitization and encrypted transmission, as well as a “white list” system for cross-border data, to simplify approval procedures and improve data transmission efficiency<sup>[17]</sup>.

Build a diversified cross-border payment system: Lingang should actively explore cooperation with international commercial insurance companies and payment institutions to develop cross-border medical insurance products and support multiple payment methods, such as digital currencies and third-party payment platforms, thereby reducing payment costs and enhancing convenience<sup>[17]</sup>.

Strengthen the training of cross-border healthcare talent: Lingang should establish cross-border healthcare talent training bases and bring in internationally renowned medical schools and training institutions to organize talent training programs aimed at improving professional competence and international vision. Meanwhile, it should build a qualification certification system and career development pathways for cross-border healthcare professionals to attract and retain talent<sup>[14]</sup>.

Improve laws, regulations, and regulatory frameworks: Lingang should strengthen cooperation with international organizations and relevant countries and regions, learn from international best practices, improve the legal and regulatory framework and supervision system for cross-border healthcare, clarify responsibilities of all parties, standardize market behavior, and protect patient rights and interests<sup>[20]</sup>.

## 5. Conclusion: Toward an elderly care future of “global resources, China’s market, and localized innovation”

The transformation path of China’s elderly care industry lies in making full use of the “institutional opening-up” dividends granted by national strategies and in taking cross-border healthcare as a core driving engine to build an open, integrated, and development of cross-border healthcare is a strategic choice—rather than an expedient measure—for responding to the challenges of a “super-aged” society, meeting diversified elderly care demands, and forcing the upgrading of the domestic elderly care industry<sup>[13]</sup>.

Feasibility of the pathway: Practices in the Lingang New Area in Shanghai show that by focusing on institutional innovations that facilitate cross-border flows of production factors, it is possible to systematically remove obstacles, open up the entire chain of cross-border healthcare services, and provide a replicable platform for China–Japan cooperation in elderly care<sup>[19]</sup>.

Effectiveness of the driving force: Cross-border healthcare can effectively drive the introduction and re-innovation of four key elements—technology, payment, talent, and standards—thus promoting the transformation of China’s elderly care industry toward high quality, intelligence, and human orientation from the supply side<sup>[13]</sup>.

## 6. Future outlook

In the future, China should continue to deepen institutional opening-up and promote mutual recognition and connectivity of elderly care and medical standards between China and Japan in frontier areas such as Lingang. The

ultimate goal is not merely to “bring in” Japan’s advanced experience, but, on the basis of digestion and absorption, to leverage China’s vast application scenarios and strengths in digital technology to participate in and even lead the formulation of international “China solutions” and “China standards” for smart elderly care and health–elderly care integration <sup>[13]</sup>, and then to export such models via the Belt and Road Initiative and other channels.

In this way, China will gradually transform itself from a “follower” in elderly care services into an “innovation source” and “solution provider” for global elderly care industry development, thereby realizing a virtuous cycle between improved people’s livelihoods and economic growth.

## 7. Policy recommendations

Improve institutions related to cross-border healthcare and promote standardized upgrading of the elderly care industry in Lingang: Regulatory authorities should accelerate the establishment of evaluation and accreditation systems for cross-border healthcare services, promote the alignment of elderly care institution management standards with international norms, improve service quality and safety, and enhance the market competitiveness of cross-border elderly care services <sup>[19]</sup>.

Innovate cross-border healthcare payment and insurance models and remove bottlenecks in capital flows: Lingang should proactively expand pilot programs for cross-border medical insurance settlement. By integrating the concept of Long-Term Care Insurance (LTCI), it should design a multi-tiered elderly care payment system that fits China’s national conditions, thereby lowering financial barriers for cross-border healthcare services <sup>[19]</sup>.

Build joint China–Japan mechanisms for the training and mutual recognition of care personnel: Relying on cross-border healthcare platforms, Lingang should promote shared educational resources for nursing and care, establish frameworks for two-way talent flows and mutual recognition of qualifications, alleviate talent shortages, and facilitate the integration of skills and cultures <sup>[14]</sup>.

Promote the integration of smart elderly care and cross-border healthcare technologies: Enterprises and research institutions should be encouraged to jointly develop rehabilitation aids and remote monitoring systems tailored to the needs of Chinese older adults, achieving deep integration between cross-border healthcare technologies and smart elderly care services <sup>[19]</sup>.

## Disclosure statement

The authors declare no conflict of interest.

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