

養護老人ホーム 費用徴収基準

年間収入の階層区分(円)		費用徴収基準月額(円)
1	0 ~ 270,000	0
2	270,001 ~ 280,000	1,000
3	280,001 ~ 300,000	1,800
4	300,001 ~ 320,000	3,400
5	320,001 ~ 340,000	4,700
6	340,001 ~ 360,000	5,800
7	360,001 ~ 380,000	7,500
8	380,001 ~ 400,000	9,100
9	400,001 ~ 420,000	10,800
10	420,001 ~ 440,000	12,500
11	440,001 ~ 460,000	14,100
12	460,001 ~ 480,000	15,800
13	480,001 ~ 500,000	17,500
14	500,001 ~ 520,000	19,100
15	520,001 ~ 540,000	20,800
16	540,001 ~ 560,000	22,500
17	560,001 ~ 580,000	24,100
18	580,001 ~ 600,000	25,800
19	600,001 ~ 640,000	27,500
20	640,001 ~ 680,000	30,800
21	680,001 ~ 720,000	34,100
22	720,001 ~ 760,000	37,500
23	760,001 ~ 800,000	39,800
24	800,001 ~ 840,000	41,800
25	840,001 ~ 880,000	43,800
26	880,001 ~ 920,000	45,800
27	920,001 ~ 960,000	47,800
28	960,001 ~ 1,000,000	49,800
29	1,000,001 ~ 1,040,000	51,800
30	1,040,001 ~ 1,080,000	54,400
31	1,080,001 ~ 1,120,000	57,100
32	1,120,001 ~ 1,160,000	59,800
33	1,160,001 ~ 1,200,000	62,400
34	1,200,001 ~ 1,260,000	65,100
35	1,260,001 ~ 1,320,000	69,100
36	1,320,001 ~ 1,380,000	73,100
37	1,380,001 ~ 1,400,000	77,100
38	1,440,001 ~ 1,500,000	81,100
39	1,500,001 円以上	150万円超過額×0.9÷12月 +81,100円

* 費用徴収基準月額は、食費・光熱費等含んだ額です