

# 東プレ健康保険組合 保険料月額表

	健康保険料率	介護保険料率
事業主負担率	0.0485	0.0100
被保険者負担率	0.0465	0.0100
合計保険料率	0.0950	0.0200

2021(令和3)年3月 1日改正

報酬月額		標準報酬			一般保険料月額			介護保険料月額		
		等級	月額	日額	被保険者	事業主	合計	被保険者	事業主	合計
円以上	円未満		円	円	円	円	円	円	円	円
~	63,000	1	58,000	1,930	2,697	2,813	5,510	580	580	1,160
63,000	~ 73,000	2	68,000	2,270	3,162	3,298	6,460	680	680	1,360
73,000	~ 83,000	3	78,000	2,600	3,627	3,783	7,410	780	780	1,560
83,000	~ 93,000	4	88,000	2,930	4,092	4,268	8,360	880	880	1,760
93,000	~ 101,000	5	98,000	3,270	4,557	4,753	9,310	980	980	1,960
101,000	~ 107,000	6	104,000	3,470	4,836	5,044	9,880	1,040	1,040	2,080
107,000	~ 114,000	7	110,000	3,670	5,115	5,335	10,450	1,100	1,100	2,200
114,000	~ 122,000	8	118,000	3,930	5,487	5,723	11,210	1,180	1,180	2,360
122,000	~ 130,000	9	126,000	4,200	5,859	6,111	11,970	1,260	1,260	2,520
130,000	~ 138,000	10	134,000	4,470	6,231	6,499	12,730	1,340	1,340	2,680
138,000	~ 146,000	11	142,000	4,730	6,603	6,887	13,490	1,420	1,420	2,840
146,000	~ 155,000	12	150,000	5,000	6,975	7,275	14,250	1,500	1,500	3,000
155,000	~ 165,000	13	160,000	5,330	7,440	7,760	15,200	1,600	1,600	3,200
165,000	~ 175,000	14	170,000	5,670	7,905	8,245	16,150	1,700	1,700	3,400
175,000	~ 185,000	15	180,000	6,000	8,370	8,730	17,100	1,800	1,800	3,600
185,000	~ 195,000	16	190,000	6,330	8,835	9,215	18,050	1,900	1,900	3,800
195,000	~ 210,000	17	200,000	6,670	9,300	9,700	19,000	2,000	2,000	4,000
210,000	~ 230,000	18	220,000	7,330	10,230	10,670	20,900	2,200	2,200	4,400
230,000	~ 250,000	19	240,000	8,000	11,160	11,640	22,800	2,400	2,400	4,800
250,000	~ 270,000	20	260,000	8,670	12,090	12,610	24,700	2,600	2,600	5,200
270,000	~ 290,000	21	280,000	9,330	13,020	13,580	26,600	2,800	2,800	5,600
290,000	~ 310,000	22	300,000	10,000	13,950	14,550	28,500	3,000	3,000	6,000
310,000	~ 330,000	23	320,000	10,670	14,880	15,520	30,400	3,200	3,200	6,400
330,000	~ 350,000	24	340,000	11,330	15,810	16,490	32,300	3,400	3,400	6,800
350,000	~ 370,000	25	360,000	12,000	16,740	17,460	34,200	3,600	3,600	7,200
370,000	~ 395,000	26	380,000	12,670	17,670	18,430	36,100	3,800	3,800	7,600
395,000	~ 425,000	27	410,000	13,670	19,065	19,885	38,950	4,100	4,100	8,200
425,000	~ 455,000	28	440,000	14,670	20,460	21,340	41,800	4,400	4,400	8,800
455,000	~ 485,000	29	470,000	15,670	21,855	22,795	44,650	4,700	4,700	9,400
485,000	~ 515,000	30	500,000	16,670	23,250	24,250	47,500	5,000	5,000	10,000
515,000	~ 545,000	31	530,000	17,670	24,645	25,705	50,350	5,300	5,300	10,600
545,000	~ 575,000	32	560,000	18,670	26,040	27,160	53,200	5,600	5,600	11,200
575,000	~ 605,000	33	590,000	19,670	27,435	28,615	56,050	5,900	5,900	11,800
605,000	~ 635,000	34	620,000	20,670	28,830	30,070	58,900	6,200	6,200	12,400
635,000	~ 665,000	35	650,000	21,670	30,225	31,525	61,750	6,500	6,500	13,000
665,000	~ 695,000	36	680,000	22,670	31,620	32,980	64,600	6,800	6,800	13,600
695,000	~ 730,000	37	710,000	23,670	33,015	34,435	67,450	7,100	7,100	14,200
730,000	~ 770,000	38	750,000	25,000	34,875	36,375	71,250	7,500	7,500	15,000
770,000	~ 810,000	39	790,000	26,330	36,735	38,315	75,050	7,900	7,900	15,800
810,000	~ 855,000	40	830,000	27,670	38,595	40,255	78,850	8,300	8,300	16,600
855,000	~ 905,000	41	880,000	29,330	40,920	42,680	83,600	8,800	8,800	17,600
905,000	~ 955,000	42	930,000	31,000	43,245	45,105	88,350	9,300	9,300	18,600
955,000	~ 1,005,000	43	980,000	32,670	45,570	47,530	93,100	9,800	9,800	19,600
1,005,000	~ 1,055,000	44	1,030,000	34,330	47,895	49,955	97,850	10,300	10,300	20,600
1,055,000	~ 1,115,000	45	1,090,000	36,330	50,685	52,865	103,550	10,900	10,900	21,800
1,115,000	~ 1,175,000	46	1,150,000	38,330	53,475	55,775	109,250	11,500	11,500	23,000
1,175,000	~ 1,235,000	47	1,210,000	40,330	56,265	58,685	114,950	12,100	12,100	24,200
1,235,000	~ 1,295,000	48	1,270,000	42,330	59,055	61,595	120,650	12,700	12,700	25,400
1,295,000	~ 1,355,000	49	1,330,000	44,330	61,845	64,505	126,350	13,300	13,300	26,600
1,355,000	~	50	1,390,000	46,330	64,635	67,415	132,050	13,900	13,900	27,800

(注)被保険者保険料の円未満は切り捨て。