

健康保険・介護保険 保険料額表（令和4年3月分から適用）

保険料率：被保険者・事業主折半

神奈川県食品製造健康保険組合

等級	報酬月額		標準報酬月額	健康保険料		介護保険料		保険料合計	
	円以上	～ 円未満		全額	折半	全額	折半	全額	折半
				96%	48.0%	18%	9.0%	114%	57.0%
1	～	63,000	58,000	5,568	2,784	1,044	522	6,612	3,306
2	63,000	～ 73,000	68,000	6,528	3,264	1,224	612	7,752	3,876
3	73,000	～ 83,000	78,000	7,488	3,744	1,404	702	8,892	4,446
4	83,000	～ 93,000	88,000	8,448	4,224	1,584	792	10,032	5,016
5	93,000	～ 101,000	98,000	9,408	4,704	1,764	882	11,172	5,586
6	101,000	～ 107,000	104,000	9,984	4,992	1,872	936	11,856	5,928
7	107,000	～ 114,000	110,000	10,560	5,280	1,980	990	12,540	6,270
8	114,000	～ 122,000	118,000	11,328	5,664	2,124	1,062	13,452	6,726
9	122,000	～ 130,000	126,000	12,096	6,048	2,268	1,134	14,364	7,182
10	130,000	～ 138,000	134,000	12,864	6,432	2,412	1,206	15,276	7,638
11	138,000	～ 146,000	142,000	13,632	6,816	2,556	1,278	16,188	8,094
12	146,000	～ 155,000	150,000	14,400	7,200	2,700	1,350	17,100	8,550
13	155,000	～ 165,000	160,000	15,360	7,680	2,880	1,440	18,240	9,120
14	165,000	～ 175,000	170,000	16,320	8,160	3,060	1,530	19,380	9,690
15	175,000	～ 185,000	180,000	17,280	8,640	3,240	1,620	20,520	10,260
16	185,000	～ 195,000	190,000	18,240	9,120	3,420	1,710	21,660	10,830
17	195,000	～ 210,000	200,000	19,200	9,600	3,600	1,800	22,800	11,400
18	210,000	～ 230,000	220,000	21,120	10,560	3,960	1,980	25,080	12,540
19	230,000	～ 250,000	240,000	23,040	11,520	4,320	2,160	27,360	13,680
20	250,000	～ 270,000	260,000	24,960	12,480	4,680	2,340	29,640	14,820
21	270,000	～ 290,000	280,000	26,880	13,440	5,040	2,520	31,920	15,960
22	290,000	～ 310,000	300,000	28,800	14,400	5,400	2,700	34,200	17,100
23	310,000	～ 330,000	320,000	30,720	15,360	5,760	2,880	36,480	18,240
24	330,000	～ 350,000	340,000	32,640	16,320	6,120	3,060	38,760	19,380
25	350,000	～ 370,000	360,000	34,560	17,280	6,480	3,240	41,040	20,520
26	370,000	～ 395,000	380,000	36,480	18,240	6,840	3,420	43,320	21,660
27	395,000	～ 425,000	410,000	39,360	19,680	7,380	3,690	46,740	23,370
28	425,000	～ 455,000	440,000	42,240	21,120	7,920	3,960	50,160	25,080
29	455,000	～ 485,000	470,000	45,120	22,560	8,460	4,230	53,580	26,790
30	485,000	～ 515,000	500,000	48,000	24,000	9,000	4,500	57,000	28,500
31	515,000	～ 545,000	530,000	50,880	25,440	9,540	4,770	60,420	30,210
32	545,000	～ 575,000	560,000	53,760	26,880	10,080	5,040	63,840	31,920
33	575,000	～ 605,000	590,000	56,640	28,320	10,620	5,310	67,260	33,630
34	605,000	～ 635,000	620,000	59,520	29,760	11,160	5,580	70,680	35,340
35	635,000	～ 665,000	650,000	62,400	31,200	11,700	5,850	74,100	37,050
36	665,000	～ 695,000	680,000	65,280	32,640	12,240	6,120	77,520	38,760
37	695,000	～ 730,000	710,000	68,160	34,080	12,780	6,390	80,940	40,470
38	730,000	～ 770,000	750,000	72,000	36,000	13,500	6,750	85,500	42,750
39	770,000	～ 810,000	790,000	75,840	37,920	14,220	7,110	90,060	45,030
40	810,000	～ 855,000	830,000	79,680	39,840	14,940	7,470	94,620	47,310
41	855,000	～ 905,000	880,000	84,480	42,240	15,840	7,920	100,320	50,160
42	905,000	～ 955,000	930,000	89,280	44,640	16,740	8,370	106,020	53,010
43	955,000	～ 1,005,000	980,000	94,080	47,040	17,640	8,820	111,720	55,860
44	1,005,000	～ 1,055,000	1,030,000	98,880	49,440	18,540	9,270	117,420	58,710
45	1,055,000	～ 1,115,000	1,090,000	104,640	52,320	19,620	9,810	124,260	62,130
46	1,115,000	～ 1,175,000	1,150,000	110,400	55,200	20,700	10,350	131,100	65,550
47	1,175,000	～ 1,235,000	1,210,000	116,160	58,080	21,780	10,890	137,940	68,970
48	1,235,000	～ 1,295,000	1,270,000	121,920	60,960	22,860	11,430	144,780	72,390
49	1,295,000	～ 1,355,000	1,330,000	127,680	63,840	23,940	11,970	151,620	75,810
50	1,355,000	～ ∞	1,390,000	133,440	66,720	25,020	12,510	158,460	79,230

○任意継続被保険者の保険料は令和4年4月分から適用します。