

# 健康保険・介護保険 標準報酬・保険料月額表

2019年3月分【4月納付分】～2020年2月分【3月納付分】

健康保険料率 2019年 3月1日施行(任意継続被保険者4月1日施行)

介護保険料率 2019年 3月1日施行(任意継続被保険者4月1日施行)

(単位:円)

等級	標準報酬		報酬の範囲	(a):健康保険料						介護保険料			(b):健康保険料+介護保険料				
				86			うち特定保険料(再掲)			17			103				
	月額	日額		以上	未	全額	被保険者	事業主	全額	被保険者	事業主	全額	被保険者	事業主	全額	被保険者	事業主
							1,000	42		44	1,000		14.65	15.35		1,000	8
					1,000	1,000		1,000	1,000		1,000	1,000		1,000	1,000		
1	58,000	1,930	～	63,000	4,988	2,436	2,552	1,740	850	890	986	464	522	5,974	2,900	3,074	
2	68,000	2,270	63,000～	73,000	5,848	2,856	2,992	2,040	997	1,043	1,156	544	612	7,004	3,400	3,604	
3	78,000	2,600	73,000～	83,000	6,708	3,276	3,432	2,340	1,143	1,197	1,326	624	702	8,034	3,900	4,134	
4	88,000	2,930	83,000～	93,000	7,568	3,696	3,872	2,640	1,290	1,350	1,496	704	792	9,064	4,400	4,664	
5	98,000	3,270	93,000～	101,000	8,428	4,116	4,312	2,940	1,436	1,504	1,666	784	882	10,094	4,900	5,194	
6	104,000	3,470	101,000～	107,000	8,944	4,368	4,576	3,120	1,524	1,596	1,768	832	936	10,712	5,200	5,512	
7	110,000	3,670	107,000～	114,000	9,460	4,620	4,840	3,300	1,612	1,688	1,870	880	990	11,330	5,500	5,830	
8	118,000	3,930	114,000～	122,000	10,148	4,956	5,192	3,540	1,729	1,811	2,006	944	1,062	12,154	5,900	6,254	
9	126,000	4,200	122,000～	130,000	10,836	5,292	5,544	3,780	1,846	1,934	2,142	1,008	1,134	12,978	6,300	6,678	
10	134,000	4,470	130,000～	138,000	11,524	5,628	5,896	4,020	1,964	2,056	2,278	1,072	1,206	13,802	6,700	7,102	
11	142,000	4,730	138,000～	146,000	12,212	5,964	6,248	4,260	2,081	2,179	2,414	1,136	1,278	14,626	7,100	7,526	
12	150,000	5,000	146,000～	155,000	12,900	6,300	6,600	4,500	2,198	2,302	2,550	1,200	1,350	15,450	7,500	7,950	
13	160,000	5,330	155,000～	165,000	13,760	6,720	7,040	4,800	2,344	2,456	2,720	1,280	1,440	16,480	8,000	8,480	
14	170,000	5,670	165,000～	175,000	14,620	7,140	7,480	5,100	2,491	2,609	2,890	1,360	1,530	17,510	8,500	9,010	
15	180,000	6,000	175,000～	185,000	15,480	7,560	7,920	5,400	2,637	2,763	3,060	1,440	1,620	18,540	9,000	9,540	
16	190,000	6,330	185,000～	195,000	16,340	7,980	8,360	5,700	2,784	2,916	3,230	1,520	1,710	19,570	9,500	10,070	
17	200,000	6,670	195,000～	210,000	17,200	8,400	8,800	6,000	2,930	3,070	3,400	1,600	1,800	20,600	10,000	10,600	
18	220,000	7,330	210,000～	230,000	18,920	9,240	9,680	6,600	3,223	3,377	3,740	1,760	1,980	22,660	11,000	11,660	
19	240,000	8,000	230,000～	250,000	20,640	10,080	10,560	7,200	3,516	3,684	4,080	1,920	2,160	24,720	12,000	12,720	
20	260,000	8,670	250,000～	270,000	22,360	10,920	11,440	7,800	3,809	3,991	4,420	2,080	2,340	26,780	13,000	13,780	
21	280,000	9,330	270,000～	290,000	24,080	11,760	12,320	8,400	4,102	4,298	4,760	2,240	2,520	28,840	14,000	14,840	
22	300,000	10,000	290,000～	310,000	25,800	12,600	13,200	9,000	4,395	4,605	5,100	2,400	2,700	30,900	15,000	15,900	
23	320,000	10,670	310,000～	330,000	27,520	13,440	14,080	9,600	4,688	4,912	5,440	2,560	2,880	32,960	16,000	16,960	
24	340,000	11,330	330,000～	350,000	29,240	14,280	14,960	10,200	4,981	5,219	5,780	2,720	3,060	35,020	17,000	18,020	
25	360,000	12,000	350,000～	370,000	30,960	15,120	15,840	10,800	5,274	5,526	6,120	2,880	3,240	37,080	18,000	19,080	
26	380,000	12,670	370,000～	395,000	32,680	15,960	16,720	11,400	5,567	5,833	6,460	3,040	3,420	39,140	19,000	20,140	
27	410,000	13,670	395,000～	425,000	35,260	17,220	18,040	12,300	6,007	6,293	6,970	3,280	3,690	42,230	20,500	21,730	
28	440,000	14,670	425,000～	455,000	37,840	18,480	19,360	13,200	6,446	6,754	7,480	3,520	3,960	45,320	22,000	23,320	
29	470,000	15,670	455,000～	485,000	40,420	19,740	20,680	14,100	6,886	7,214	7,990	3,760	4,230	48,410	23,500	24,910	
30	500,000	16,670	485,000～	515,000	43,000	21,000	22,000	15,000	7,325	7,675	8,500	4,000	4,500	51,500	25,000	26,500	
31	530,000	17,670	515,000～	545,000	45,580	22,260	23,320	15,900	7,765	8,135	9,010	4,240	4,770	54,590	26,500	28,090	
32	560,000	18,670	545,000～	575,000	48,160	23,520	24,640	16,800	8,204	8,596	9,520	4,480	5,040	57,680	28,000	29,680	
33	590,000	19,670	575,000～	605,000	50,740	24,780	25,960	17,700	8,644	9,056	10,030	4,720	5,310	60,770	29,500	31,270	
34	620,000	20,670	605,000～	635,000	53,320	26,040	27,280	18,600	9,083	9,517	10,540	4,960	5,580	63,860	31,000	32,860	
35	650,000	21,670	635,000～	665,000	55,900	27,300	28,600	19,500	9,523	9,977	11,050	5,200	5,850	66,950	32,500	34,450	
36	680,000	22,670	665,000～	695,000	58,480	28,560	29,920	20,400	9,962	10,438	11,560	5,440	6,120	70,040	34,000	36,040	
37	710,000	23,670	695,000～	730,000	61,060	29,820	31,240	21,300	10,402	10,898	12,070	5,680	6,390	73,130	35,500	37,630	
38	750,000	25,000	730,000～	770,000	64,500	31,500	33,000	22,500	10,988	11,512	12,750	6,000	6,750	77,250	37,500	39,750	
39	790,000	26,330	770,000～	810,000	67,940	33,180	34,760	23,700	11,574	12,126	13,430	6,320	7,110	81,370	39,500	41,870	
40	830,000	27,670	810,000～	855,000	71,380	34,860	36,520	24,900	12,160	12,740	14,110	6,640	7,470	85,490	41,500	43,990	
41	880,000	29,330	855,000～	905,000	75,680	36,960	38,720	26,400	12,892	13,508	14,960	7,040	7,920	90,640	44,000	46,640	
42	930,000	31,000	905,000～	955,000	79,980	39,060	40,920	27,900	13,625	14,275	15,810	7,440	8,370	95,790	46,500	49,290	
43	980,000	32,670	955,000～	1,005,000	84,280	41,160	43,120	29,400	14,357	15,043	16,660	7,840	8,820	100,940	49,000	51,940	
44	1,030,000	34,330	1,005,000～	1,055,000	88,580	43,260	45,320	30,900	15,090	15,810	17,510	8,240	9,270	106,090	51,500	54,590	
45	1,090,000	36,330	1,055,000～	1,115,000	93,740	45,780	47,960	32,700	15,969	16,731	18,530	8,720	9,810	112,270	54,500	57,770	
46	1,150,000	38,330	1,115,000～	1,175,000	98,900	48,300	50,600	34,500	16,848	17,652	19,550	9,200	10,350	118,450	57,500	60,950	
47	1,210,000	40,330	1,175,000～	1,235,000	104,060	50,820	53,240	36,300	17,727	18,573	20,570	9,680	10,890	124,630	60,500	64,130	
48	1,270,000	42,330	1,235,000～	1,295,000	109,220	53,340	55,880	38,100	18,606	19,494	21,590	10,160	11,430	130,810	63,500	67,310	
49	1,330,000	44,330	1,295,000～	1,355,000	114,380	55,860	58,520	39,900	19,485	20,415	22,610	10,640	11,970	136,990	66,500	70,490	
50	1,390,000	46,330	1,355,000～		119,540	58,380	61,160	41,700	20,364	21,336	23,630	11,120	12,510	143,170	69,500	73,670	

- ◆任意継続被保険者は全額被保険者負担となり、25等級が上限です。
- ◆40歳～64歳の被保険者は、(b)欄の健康保険料+介護保険料を使用して下さい。
- ◆上記年齢以外の被保険者は、(a)欄の健康保険料を使用して下さい。