

Benefits Snapshot: SafetyWing Remote Health

Global



deel.

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Introduction

We are pleased to present our international healthcare offering with **SafetyWing**, available for EOR employees in selected countries.

SafetyWing's Remote Health plan offers extensive coverage in 175+ countries around the world[^]. Whether employees are traveling abroad for business, leisure, or living as expatriates, this plan ensures their healthcare needs are met.

Information in this guide is accurate as of May 13, 2026.

[^]Coverage restrictions apply. See page 11 for details.

1 Available plans & pricing

Monthly pricing (USD)

The pricing below includes the monthly prices in USD for SafetyWing's Remote Health plan. Deel offers 4 different plan levels for you to choose from: **Essential***, **Standard**, **Premium**, and **Premium Plus**.

If you choose to provide health insurance to your employees, you have the option to cover either the employee alone (via Single coverage) or the employee and their eligible dependents (via Family coverage). If you do not offer dependent coverage, employees will not be able to add dependents at their own cost.

Eligible Dependents: Spouse/partner and children. Dependents must be living at the same residential address as the employee.

Each benefit is voluntary, so you may choose to offer it at your discretion. However, **if you choose to offer this to one employee, you must offer it to all other employees.**

*Essential plan is not available in some countries. Please see page 5 for details.

Age	Worldwide coverage (excluding US, HK, SG)			
	Essential	Standard	Premium	Premium Plus
0-17	USD 38	USD 67	USD 102	USD 148
18-39	USD 58	USD 106	USD 160	USD 205
40-49	USD 83	USD 155	USD 237	USD 333
50-59	USD 127	USD 237	USD 364	USD 513
60-74	USD 227	USD 431	USD 662	USD 954

Note:

- Pricing above is per person per month, and does not include any mandatory government charges, levies or taxes that may apply.
- Deel charges a USD 15 monthly service fee per employee enrolled that will be itemized on your monthly invoice.
- Pricing is effective Nov 1, 2025, to Oct 31, 2026. Premium prices are subject to changes every year upon policy renewal, or upon notice from the provider.

2 Country availability

SafetyWing is currently available as an optional benefit to EOR Employees in the following countries. More countries coming soon!

Country	What plans are available?				Important Notes
	Essential	Standard	Premium	Premium Plus	
Brazil	✗	✓	✓	✓	<ul style="list-style-type: none"> Available for selection from Nov 1, 2025 onwards. For Brazil, SafetyWing coverage will only end 30 days after the last day of employment. As a result, the final invoice will include an additional charge to cover this extension. Remote Health is a non-admitted insurance in Brazil meaning it is not underwritten as a local policy in Brazil and ANS regulations and protections do not apply. ANS protections apply only to ANS-registered plans. What is legally mandatory for an ANS regulated plan does not apply to Safetywing as it is not registered with ANS.
Chile	✓	✓	✓	✓	<ul style="list-style-type: none"> Available for selection from Nov 1, 2025 onwards.
Costa Rica	✓	✓	✓	✓	<ul style="list-style-type: none"> Available for selection from Nov 1, 2025 onwards.
Dominican Republic	✓	✓	✓	✓	<ul style="list-style-type: none"> Available for selection from Nov 1, 2025 onwards.
Ecuador	✓	✓	✓	✓	<ul style="list-style-type: none"> Available for selection from June 1, 2026 onwards.
Guatemala	✓	✓	✓	✓	<ul style="list-style-type: none"> Available for selection from June 1, 2026 onwards.
Honduras	✓	✓	✓	✓	<ul style="list-style-type: none"> Available for selection from June 1, 2026 onwards.
Peru	✓	✓	✓	✓	<ul style="list-style-type: none"> Available for selection from June 1, 2026 onwards.

Note: Individual tax rules/entitlements are different per country and could result in tax deductions on monthly payslips. Please see [SafetyWing's general guide here](#) (not inclusive of all countries). Employees should seek a tax specialist for further information.

3 Coverage details

Summary of plans & coverage

This is a summary of the package including medical, maternity, dental, vision, and wellness. Further details of the package may be reviewed in the general conditions and endorsements issued within the policy. Values are in USD.

Coverage	Essential*	Standard	Premium	Premium Plus
Overview				
Overall Plan Maximum	USD 500,000	USD 1,500,000	USD 1,500,000	USD 5,000,000
Pre-Existing Condition Clauses	<ul style="list-style-type: none"> Medical History Disregarded. Pre-existing conditions where the condition is excluded from the plan generally will also be excluded. 			
Waiting Periods for Chronic Conditions	<ul style="list-style-type: none"> No waiting periods 			
Out-of-Network Coverage	<ul style="list-style-type: none"> Fully covered No networks for Remote Health. Members have the freedom to choose any doctor, hospital, or clinic - public or private in eligible countries. 			
Language Support Services	<ul style="list-style-type: none"> Partially covered English Support For Latam countries: Spanish, Portuguese and English supported. 			
Important Notes	<ul style="list-style-type: none"> SafetyWing offers 24/7 live human chat support directly on their website. While SafetyWing offers multilingual agents who will support other languages, information will be given in both. The addition of English is to ensure compliance and to match the legal policy document. 			
Emergency Services				
Emergency Room Visits	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR for inpatient, up to overall plan limit. 			
Road Ambulance (Private)	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR for inpatient, up to overall plan limit. 			
Air Ambulance / Medical Evacuation (Domestic)	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR for inpatient, up to overall plan limit. 			
Air Ambulance / Medical Evacuation (International)	<ul style="list-style-type: none"> Fully covered Limits: USD 50,000 	<ul style="list-style-type: none"> Fully covered Limits: USD 100,000 	<ul style="list-style-type: none"> Fully covered Limits: USD 100,000 	<ul style="list-style-type: none"> Fully covered Limits: USD 100,000
Emergency Coverage (when travelling outside standard coverage area)	<ul style="list-style-type: none"> Partially covered Only applies to countries where EOR is a resident where they live or any countries where Remote Health classifies as part of the essential plan. Limits: <ul style="list-style-type: none"> Injuries 100% UCR Illnesses up to USD 50,000 Outpatient: up to USD 500 	<ul style="list-style-type: none"> Fully covered Only applies to United States, and Hong Kong and Singapore without the add-on. Limits: <ul style="list-style-type: none"> Injuries 100% UCR Illnesses up to USD 50,000 Outpatient: up to USD 500 	<ul style="list-style-type: none"> Fully covered Only applies to United States, and Hong Kong and Singapore without the add-on. Limits: <ul style="list-style-type: none"> Injuries 100% UCR Illnesses up to USD 50,000 Outpatient: up to USD 500 	<ul style="list-style-type: none"> Fully covered Only applies to United States, and Hong Kong and Singapore without the add-on. Limits: <ul style="list-style-type: none"> Injuries 100% UCR Illnesses up to USD 50,000 Outpatient: up to USD 500
Repatriation Costs	<ul style="list-style-type: none"> Fully covered Limits: USD 50,000 	<ul style="list-style-type: none"> Fully covered Limits: USD 100,000 	<ul style="list-style-type: none"> Fully covered Limits: USD 100,000 	<ul style="list-style-type: none"> Fully covered Limits: USD 100,000

*Essential plan is not available in some countries. Please see page 5 for details.

2 Coverage details

Coverage	Essential*	Standard	Premium	Premium Plus
Inpatient Services				
Inpatient Care Maximum	\$500,000 USD	\$1.5 million USD plan limit	\$1.5 million USD plan limit	\$5 million USD plan limit
Hospital Stay Limits	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR
Type of Room Covered	<ul style="list-style-type: none"> Fully covered Limits: Standard private room 	<ul style="list-style-type: none"> Fully covered Limits: Standard private room 	<ul style="list-style-type: none"> Fully covered Limits: Standard private room 	<ul style="list-style-type: none"> Fully covered Limits: Standard private room
Companion Stay	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR (adult companion of a child under age of 18). 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR (adult companion of a child under age of 18). 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR (adult companion of a child under age of 18). 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR (adult companion of a child under age of 18).
Daily Hospitalization Cash Benefit	<ul style="list-style-type: none"> Fully covered Limits: \$150 USD for 30 nights 	<ul style="list-style-type: none"> Fully covered Limits: \$150 USD for 30 nights 	<ul style="list-style-type: none"> Fully covered Limits: \$150 USD for 30 nights 	<ul style="list-style-type: none"> Fully covered Limits: \$150 USD for 30 nights
In-Hospital Medications	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR for stay. 100% UCR for pre and post operative up to 15 days before or after inpatient treatment. 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR for stay. 100% UCR for pre and post operative up to 15 days before or after inpatient treatment. 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR for stay. 100% UCR for pre and post operative up to 15 days before or after inpatient treatment. 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR for stay. 100% UCR for pre and post operative up to 15 days before or after inpatient treatment.
Diagnostic Tests, Radiology, Pathology	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR
Advanced Medical Imaging (MRI, CT, PET Scans)	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR
Surgical Operations	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR Outpatient surgery increase benefit of \$500,000 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR Outpatient surgery increase benefit of \$500,000 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR Outpatient surgery increase benefit of \$500,000 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR Outpatient surgery increase benefit of \$500,000
Pre-Surgical Investigations	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR
Surgical Implants / Prosthetics	<ul style="list-style-type: none"> Fully covered Limits: \$1,000 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$1,000 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$1,000 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$1,000 USD
Prophylactic Surgery	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR
Post-Operation Care	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR

*Essential plan is not available in some countries. Please see page 5 for details.

2 Coverage details

Coverage	Essential*	Standard	Premium	Premium Plus
Outpatient Services				
Outpatient Care Max	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD
Prescribed Drugs	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD
Diagnostic Tests, Radiology, Pathology	<ul style="list-style-type: none"> Fully covered Limits: \$2,500 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD
Rehabilitative Care (e.g. Physiotherapy)	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD / \$500,000 USD up to 30 days per medical condition for medically necessary after a covered hospitalization. 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD / \$500,000 USD up to 30 days per medical condition for medically necessary after a covered hospitalization. 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD / \$500,000 USD up to 30 days per medical condition for medically necessary after a covered hospitalization. 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD / \$500,000 USD up to 30 days per medical condition for medically necessary after a covered hospitalization.
Advanced Medical Imaging (MRI, CT, PET Scans)	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 USD
Medications & Medical Supplies				
Disposable Items / Consumables	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD Durable Medical Equipment	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD Durable Medical Equipment	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD Durable Medical Equipment	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD Durable Medical Equipment
High-Cost Drugs (e.g. Biologics, Chemotherapy)	<ul style="list-style-type: none"> Fully covered Limits: \$2,500 for Outpatient / Full limits for inpatient. 100% UCR for cancer treatments. 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 for Outpatient / Full limits for inpatient. 100% UCR for cancer treatments. 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 for Outpatient / Full limits for inpatient. 100% UCR for cancer treatments. 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 for Outpatient / Full limits for inpatient. 100% UCR for cancer treatments.
Internal Devices (e.g. Pacemakers, Stents)	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR
Mental Health & Wellness				
Therapy & Counselling Sessions	<ul style="list-style-type: none"> Fully covered Limits: 10 sessions per policy year 	<ul style="list-style-type: none"> Fully covered Limits: 10 sessions per policy year 	<ul style="list-style-type: none"> Fully covered Limits: 15 sessions per policy year 	<ul style="list-style-type: none"> Fully covered Limits: 20 sessions per policy year
Psychiatric Consultations & Hospitalization	<ul style="list-style-type: none"> Fully covered Limits: Inpatient psychiatric coverage - 100% UCR up to 30 days. 	<ul style="list-style-type: none"> Fully covered Limits: Inpatient psychiatric coverage - 100% UCR up to 30 days. 	<ul style="list-style-type: none"> Fully covered Limits: Inpatient psychiatric coverage - 100% UCR up to 30 days. 	<ul style="list-style-type: none"> Fully covered Limits: Inpatient psychiatric coverage - 100% UCR up to 30 days.
Addiction & Substance Use Treatment	Not covered	Not covered	Not covered	Not covered
Employee Assistance Programs (EAPs)	Not covered	Not covered	Not covered	Not covered
Child & Adolescent Mental Health Services	<ul style="list-style-type: none"> Fully covered Limits: 10 sessions per policy year 	<ul style="list-style-type: none"> Fully covered Limits: 10 sessions per policy year 	<ul style="list-style-type: none"> Fully covered Limits: 15 sessions per policy year 	<ul style="list-style-type: none"> Fully covered Limits: 20 sessions per policy year
Complementary & Alternative Therapies (e.g. Acupuncture, Homeopathy)	<ul style="list-style-type: none"> Fully covered Limits: 15 sessions per policy year 	<ul style="list-style-type: none"> Fully covered Limits: 15 sessions per policy year 	<ul style="list-style-type: none"> Fully covered Limits: 15 sessions per policy year up to \$60 USD 	<ul style="list-style-type: none"> Fully covered Limits: 15 sessions per policy year up to \$60 USD
Physical Wellness (e.g. Chiropractic Treatment, Podiatrist)	<ul style="list-style-type: none"> Fully covered Limits: 15 sessions per policy year up to \$15 USD per session 	<ul style="list-style-type: none"> Fully covered Limits: 15 sessions per policy year up to \$60USD per session 	<ul style="list-style-type: none"> Fully covered Limits: 15 sessions per policy year up to \$60 USD per session 	<ul style="list-style-type: none"> Fully covered Limits: 15 sessions per policy year up to \$60 USD per session

*Essential plan is not available in some countries. Please see page 5 for details.

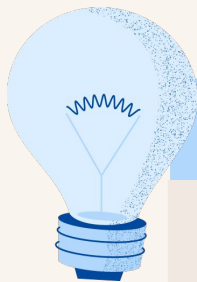
2 Coverage details

Coverage	Essential*	Standard	Premium	Premium Plus
Maternity & Newborn				
Maternity Coverage	<ul style="list-style-type: none"> Fully covered Limits: \$2,500 	<ul style="list-style-type: none"> Fully covered Limits: \$2,500 	<ul style="list-style-type: none"> Fully covered Limits: \$4,500 	<ul style="list-style-type: none"> Fully covered Limits: \$7,500
Waiting Period for Maternity Coverage	10 month waiting period	10 month waiting period	10 month waiting period	None
Prenatal & Postnatal Care	<ul style="list-style-type: none"> Fully covered Limits: \$1,500 	<ul style="list-style-type: none"> Fully covered Limits: \$2,500 	<ul style="list-style-type: none"> Fully covered Limits: \$4,500 	<ul style="list-style-type: none"> Fully covered Limits: \$7,500
Delivery Costs	<ul style="list-style-type: none"> Fully covered Limits: \$1,500 	<ul style="list-style-type: none"> Fully covered Limits: \$2,500 	<ul style="list-style-type: none"> Fully covered Limits: \$4,500 	<ul style="list-style-type: none"> Fully covered Limits: \$7,500
Newborn Coverage Type	<ul style="list-style-type: none"> Fully covered Newborn must be added to policy within 90 days of birth Limits: \$50,000 USD - includes newborn coverage and maternity complications 	<ul style="list-style-type: none"> Fully covered Newborn must be added to policy within 90 days of birth Limits: \$50,000 USD - includes newborn coverage and maternity complications 	<ul style="list-style-type: none"> Fully covered Newborn must be added to policy within 90 days of birth Limits: \$50,000 USD - includes newborn coverage and maternity complications 	<ul style="list-style-type: none"> Fully covered Newborn must be added to policy within 90 days of birth Limits: \$50,000 USD - includes newborn coverage and maternity complications
Newborn Period of Coverage	<ul style="list-style-type: none"> Fully covered Limits: Subject to 10 month waiting period except for cases of miscarriage. Complications coverage period 90 days or up to discharge. 	<ul style="list-style-type: none"> Fully covered Limits: Subject to 10 month waiting period except for cases of miscarriage. Complications coverage period 90 days or up to discharge. 	<ul style="list-style-type: none"> Fully covered Limits: Subject to 10 month waiting period except for cases of miscarriage. Complications coverage period 90 days or up to discharge. 	<ul style="list-style-type: none"> Fully covered Limits: Complications coverage period 90 days or up to discharge.
Newborn Vaccinations	<ul style="list-style-type: none"> Fully covered Limits: \$250 USD Newborn must be added to the plan within 90 days. 	<ul style="list-style-type: none"> Fully covered Limits: \$350 USD Newborn must be added to the plan within 90 days. 	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD Newborn must be added to the plan within 90 days. 	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD Newborn must be added to the plan within 90 days.
Preventive Care				
Annual Health Screenings	<ul style="list-style-type: none"> Fully covered Limits: \$250 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$350 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD
Vaccinations	<ul style="list-style-type: none"> Fully covered Limits: \$250 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$350 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD
Cancer Screenings	<ul style="list-style-type: none"> Fully covered Limits: \$250 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$350 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD

*Essential plan is not available in some countries. Please see page 5 for details.

2 Coverage details

Coverage	Essential*	Standard	Premium	Premium Plus
Vision				
Vision Max Limit	Not covered	Not covered	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD
Vision Routine Tests, Eye Examinations	Not covered	Not covered	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD 	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD
Glasses, Contact Lenses Coverage	Not covered	Not covered	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD Frames every 24 months annual year, lens every 12 months annual year. Choose glasses or contacts. 	<ul style="list-style-type: none"> Fully covered Limits: \$500 USD Frames every 24 months annual year, lens every 12 months annual year. Choose glasses or contacts.
Elective Eye Surgery (e.g. Lasik)	Not covered	Not covered	Not covered	Not covered
Dental				
Dental Max Limit	N/A - this goes under the "Inpatient limit" for Emergency Inpatient Dental Care	N/A - this goes under the "Inpatient limit" for Emergency Inpatient Dental Care	USD 5,000 per year	USD 5,000 per year
Routine Dental Check-Ups (e.g. Scaling, Polishing)	Not covered	Not covered	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 per year 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 per year
Dental Treatment & Surgery	Not covered	Not covered	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 per year 	<ul style="list-style-type: none"> Fully covered Limits: \$5,000 per year
Orthodontic Treatment	Not covered	Not covered	Not covered	Not covered
Emergency Inpatient Dental Care	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR for treatment within 180 days of covered accident. 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR for treatment within 180 days of covered accident. 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR for treatment within 180 days of covered accident. 	<ul style="list-style-type: none"> Fully covered Limits: 100% UCR for treatment within 180 days of covered accident.



About canceling or downgrading benefit offerings

In some countries, canceling or downgrading an employee's benefit coverage is not permitted, as the benefit becomes an acquired right once offered to the employee.

These are the affected countries:

Bolivia, Brazil, Chile, Costa Rica, Côte D'Ivoire, Czech Republic, Denmark, Dominican Republic, Guatemala, Hong Kong, Indonesia, Italy, Luxembourg, Malaysia, Malta, Mexico, Mongolia, Morocco, Nigeria, Norway, Panama, Portugal, Senegal, Singapore, South Africa, South Korea, Spain, Sweden, United Arab Emirates, and Uruguay.

Clients who wish to upgrade coverage must reach out to Deel Support.

3 Coverage restrictions

While the Remote Health plans from SafetyWing offers worldwide coverage, please note the following coverage restrictions in specific countries.

For all plans:

Covered for long and short trips only:

- Belarus (Sanctions may affect transactions involving Belarusian banks.)
- Canada
- Crimea
- Cuba (Direct billing not possible)
- Democratic Republic of Congo
- Iran (Direct billing not possible)
- Iraq (Direct billing not possible)
- North Korea (Direct billing not possible)
- North Sudan (Direct billing not possible)
- Palestine (West Bank & Gaza) (Direct billing not possible)
- Portugal
- Republic of Ireland
- Russia (Sanctions may affect transactions involving Russian banks.)
- Saudi Arabia
- Somalia (Direct billing not possible)
- South Sudan (Direct billing not possible)
- Syria (Direct billing not possible)
- United Arab Emirates
- US Territories (Guam, American Samoa, Palau, Puerto Rico, Virgin Islands)

Covered for emergencies for trips up to 30 days only:

- Hong Kong
- Singapore
- USA

For the Essential plan:

Thirty-day emergency and non-elective coverage only when traveling to:

- EMEA: Austria, Bahrain, Belgium, Democratic Republic of Congo, Denmark, Finland, France, Germany, Iceland, Ireland, Iran, Israel, Kuwait, Italy, Monaco, Netherlands, Norway, Palestine (West Bank & Gaza), Qatar, Saudi Arabia, Somalia, South Africa, South Sudan, Sudan, Sweden, Switzerland, Syria, United Arab Emirates, United Kingdom, and Zimbabwe.
- APAC: American Samoa, Australia, China, Hong Kong, Japan, North Korea, Palau, Singapore, and South Korea.
- LATAM & North America: Brazil, Canada, Cuba, Puerto Rico, US Guam, US Virgin Islands, and United States.

4 How it works

Enrolment process

Employees will receive an invitation from SafetyWing within 5 business days from when their contract is active.

Employees have 30 days from their eligibility date to complete the enrolment process. This includes adding their dependents or opting out of coverage.

Employees who wish to opt out will be able to complete a two-question form in the email. If an employee opts out, the client will not be charged, and the employee will need to wait until the next Open Enrolment period to opt in.

Employees will receive a welcome email from SafetyWing with their plan details as well as instructions for the portal.

Note: Employee's enrolment status on the Deel platform will be updated each month following the 5th.

Clients who choose to offer this benefit will not be able to cancel the offering until the next renewal period, which takes place before the annual Nov 1 renewal date.

Coverage dates

SafetyWing's Remote Health plan coverage start date is always either on the 1st or the 15th of every month:

- If employment start date is before the 15th: Coverage will start on the 15th of the same month
- If employment start date is on or after the 15th: Coverage will start on the 1st of the next month

Coverage typically ends on the last day of their employment month. Note that country variations may apply due to local rules on coverage. See page 5 for details.

Resources

SafetyWing Support	support@safetywing.com or start a live chat via the SafetyWing portal
Deel Support	Link
List of in-network providers	https://safetywing.com/nomad-care-map

1

Where can employees find more detailed information?

Employees can find details of their health insurance on the Deel platform, under Other > Benefits.

2

What is the provider's contact information?

If you or your employees have questions about SafetyWing, you may contact the provider via 24/7 live chat on the [SafetyWing portal](#), or via email at support@safetywing.com.

3

Are SafetyWing pricing pre-tax?

SafetyWing is recognized as a health plan. This means you will get the pre-tax advantage in any countries where health plans premiums are pre-tax.

4

Can employees upgrade their plan and pay the difference?

No, they must go with your selected plan and you must cover the full pricing.

5

Where can employees find their insurance card?

The SafetyWing membership insurance card is electronic and will be available from their benefit start date.

Employees can find it directly in their [SafetyWing portal](#). Employees should ensure that they are logged in via the email address used for their Deel account.

6

Is there a list of in-network providers?

SafetyWing does not have a network. SafetyWing does have a [medical directory here](#) for recommendations from other members; and a [list of hospitals in Latam and the Caribbean](#) that SafetyWing has worked with before. However, these are optional choices. The only requirement is the medical provider has a legal licence.

For pay and claim, the member can visit any hospital, doctor, or clinic of their choice. For direct billing, the member can visit any hospital, doctor, or clinic of their choice (subject to country availability). However a provider may refuse accepting a Guarantee of Payment.

In these cases, members can pay and claim, or choose to work with another provider.

