



Required Benefit Notices

Each year, Danaher is required to provide you with important information regarding eligibility and enrollment, benefit coverage, HIPAA privacy rules and whether our prescription drug coverage qualifies as creditable coverage for Medicare. For 2017 an additional notice on the Wellness Program is being added.

Please read this information carefully and keep it with your other important benefit information.

ELIGIBILITY AND ENROLLMENT INFORMATION

Special Enrollment Period for Danaher Plans

There are certain situations where you may be eligible for a special enrollment period, as outlined below.

— If you decline Company-sponsored medical coverage for yourself, your spouse and/or children because you have other medical insurance coverage, you may qualify for the “special enrollment period” under the plan if you lose that other coverage during the year. You must enroll within 31 days after the date you lost that other coverage, or else wait until the next annual enrollment period. In addition, if you have a new dependent as a result of marriage, birth, or adoption (including placement for adoption), you may be able to enroll yourself and your dependents within 31 days after that event.

— You can enroll or otherwise elect different coverage for yourself and your dependents not later than 60 days after:

* Your or your dependent’s Medicaid or CHIP coverage is terminated as a result of loss of eligibility, or

* You or your dependent becomes eligible for a premium assistance subsidy under Medicaid or CHIP.

If you experience one of the situations outlined above and you do not elect coverage within the time period indicated above, you must wait until the next annual enrollment period to elect coverage. If you have questions about any of these special enrollment periods, require additional information or want to enroll in coverage, please contact the MyBenefits Call Center at 1-800-964-7985.

BENEFIT COVERAGE INFORMATION

Maternity Admissions

Under federal law, health plans and health insurance companies may not restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to:

— Less than 48 hours following a vaginal delivery, or

— Less than 96 hours following a cesarean section.

However, federal law does not prohibit the mother’s or newborn’s attending provider (after consulting with the mother) from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable).

In any case, health plans and health insurance companies may not require that a provider obtain authorization for prescribing a length of stay of 48 hours (or 96 hours) or less.

Women’s Health and Cancer Rights Act of 1998

The U.S. Congress passed the Women’s Health and Cancer Rights Act of 1998, which provides coverage for reconstructive surgery and related services following a mastectomy. This act affects groups and individual health plans that provide medical/surgical coverage for a mastectomy.

If you (or a covered dependent) are receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient, for:

— All stages of reconstruction of the breast on which the mastectomy was performed,

— Surgery and reconstruction of the other breast to produce a symmetrical appearance,

— Prostheses, and

— Treatment of physical complications of the mastectomy, including lymphedemas.

These benefits will be subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this plan.

PREMIUM ASSISTANCE UNDER THE CHILDREN’S HEALTH INSURANCE PROGRAM (CHIP)

If you or your children are eligible for Medicaid or CHIP and you are eligible for health coverage from your employer, your State may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children are not eligible for Medicaid or CHIP, you will not be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, you can contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, you can contact your State Medicaid or CHIP office or dial 1-877-KIDS NOW or www.insurekidsnow.gov to find out how to apply. If you qualify, ask your State if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you are not already enrolled. This is called a “special enrollment” opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance by contacting Danaher’s MyBenefits Call Center at 1-800-964-7985 and requesting that a special enrollment window be opened. If you have any additional questions about enrolling in your employer plan, contact the Department of Labor at www.askebsa.dol.gov or by calling toll-free 1-866-444-EBSA (3272).

If you live in one of the following States, you may be eligible for assistance paying your employer health plan premiums. The following list of States is current as of July 31, 2016. You should contact your State for further information on eligibility.

ALABAMA – Medicaid http://www.myalhipp.com 1-855-692-5447	KENTUCKY – Medicaid http://chfs.ky.gov/dms/default.htm 1-800-635-2570
ALASKA – Medicaid Health Insurance Premium Payment http://myakhipp.com 1-866-251-4861	LOUISIANA – Medicaid http://dhh.louisiana.gov/index.cfm/subhome/1/n/331 1-888-695-2447
ARKANSAS – Medicaid http://www.myarhipp.com 1-855-692-7447	MAINE – Medicaid http://www.maine.gov/dhhs/ofi/public-assistance/index.html 1-800-442-6003
COLORADO – Medicaid http://www.colorado.gov/hcpf 1-800-221-3943	MASSACHUSETTS – Medicaid and CHIP http://www.mass.gov/MassHealth 1-800-462-1120
FLORIDA – Medicaid https://www.flmedicaidtplrecovery.com/ 1-877-357-3268	MINNESOTA – Medicaid http://www.mn.gov/dhs/ma/ 1-800-657-3739
GEORGIA – Medicaid http://dch.georgia.gov/ > Click on Health Insurance Premium Payment (HIPP) 1-404-656-4507	MISSOURI – Medicaid http://www.dss.mo.gov/mhd/participants/pages/hipp.htm 1-573-751-2005
INDIANA – Medicaid http://www.indianamedicaid.com	MONTANA – Medicaid http://dphhs.mt.gov/montanahealthprograms/HIPP

1-877-438-4479	1-800-694-3084
IOWA – Medicaid www.dhs.state.ia.us/hipp/ 1-888-346-9562	NEBRASKA – Medicaid www.dphhs.ne.gov/Childrens_Family_Services/accessnebraska/pages/accessnebraska_index.aspx 1-855-632-7633
KANSAS – Medicaid http://www.kdheks.gov/hcf/ 1-785-296-3512	NEVADA – Medicaid http://dwss.nv.gov/ 1-800-992-0900
NEW HAMPSHIRE – Medicaid http://www.dhhs.nh.gov/oii/documents/hippapp.pdf 1-603-271-5218	SOUTH CAROLINA – Medicaid http://www.scdhhs.gov 1-888-549-0820
	SOUTH DAKOTA – Medicaid http://dss.sd.gov 1-888-828-0059
NEW JERSEY – Medicaid and CHIP Medicaid http://www.state.nj.us/humanservices/dmahs/clients/medicaid/ 1-609-631-2392 CHIP http://www.njfamilycare.org/index.html 1-800-701-0710	TEXAS – Medicaid http://www.gethipptexas.com/ 1-800-440-0493
	UTAH – Medicaid and CHIP Medicaid: http://health.utah.gov/medicaid CHIP: http://health.utah.gov/CHIP 1-866-435-7414
NEW YORK – Medicaid http://www.nyhealth.gov/health_care/medicaid/ 1-800-541-2831	VERMONT – Medicaid http://www.greenmountaincare.org/ 1-800-250-8427
NORTH CAROLINA – Medicaid http://www.ncdhhs.gov/dma 1-919-855-4100	VIRGINIA – Medicaid and CHIP Medicaid: http://www.converva.org/programs_premium_assistance.cfm 1-800-432-5924 CHIP: http://www.coverva.org/programs_premium_assistance.cfm 1-855-242-8282
NORTH DAKOTA – Medicaid http://www.nd.gov/dhs/services/medicalserv/medicaid/ 1-844-854-4825	
OKLAHOMA – Medicaid and CHIP http://www.insureoklahoma.org	WASHINGTON – Medicaid http://www.hca.wa.gov/free-or-low-cost-health-care/p

1-888-365-3742	rogram-administration/premium-payment-program 1-800-562-3022 ext. 15473
OREGON – Medicaid http://healthcare.oregon.gov/pages/index.aspx 1-800-699-9075	WEST VIRGINIA – Medicaid www.dhhr.wv.gov/bms/ 1-877-598-5820, HMS Third Party Liability
PENNSYLVANIA – Medicaid http://www.dhs.pa.gov 1-800-692-7462	WISCONSIN – Medicaid http://www.dhs.wisconsin.gov/publications/p1/p10095.pdf 1-800-362-3002
RHODE ISLAND – Medicaid www.eohhs.ri.gov/ 1-401-462-5300	WYOMING – Medicaid http://wyequalitycare.acs-inc.com/ 1-307-777-7531

To see if any more States have added a premium assistance program since July 31, 2015, or for more information on special enrollment rights, you can contact either:

U.S. Department of Labor
Employee Benefits Security Administration
www.dol.gov/ebsa
1-866-444-EBSA (3272)

U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
www.cms.hhs.gov
1-877-267-2323, Menu Option 4, Ext. 61565