

Need help? Visit MyDanaHerBenefits.com

What can we help you with?

Top questions

Get answers to top benefits questions.

1. How long do I have to enroll in DanaHer benefits?

If you're newly hired, be sure to enroll by the deadline on the enrollment email you receive. If you don't enroll by the deadline, you can enroll during next year's Annual Enrollment or if you have a qualifying event (like marriage or a new baby). Log on to Fidelity NetBenefits to obtain detailed information about enrolling in DanaHer's 401(k) plans. Be sure to designate your beneficiaries when you enroll.

If you're a current associate, each year you can review your coverage for the next year during the Annual Enrollment period or if you have a qualifying event during the year.

2. If I don't enroll before my enrollment deadline, what DanaHer coverage will I have?

If you're newly hired and don't enroll by the deadline, you'll have coverage under the [benefits that don't require enrollment](#). You won't have medical, dental, or vision coverage, since these benefits require enrollment if you want coverage.

3. Why am I getting communications from Alight Solutions?

Alight Solutions is our benefits administrator and trusted partner. You will get a variety of communications from them related to your benefits throughout the year. Here are a few exam

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materials that will have the Alight name on them:

- Notifications and reminders about enrolling in benefits
- Confirmation statements such as enrollment confirmations for Annual Enrollment (around October – November), merit (late March – early April) if there is benefit impact, or other pay increases related to promotions, etc. (anytime)
- Plan information and account statements
- COBRA notices
- Certificate of Group Health Plan Coverage
- Notices of special enrollment
- Family and Medical Leave Act notices
- HIPAA privacy notices
- Creditable coverage disclosure notices
- Life insurance conversion/portability notices
- Medicaid and Children’s Health Insurance Program (CHIP) notices

4. Why does Danaher offer a choice of medical insurance carriers?

Danaher is committed to offering you a choice of medical plans—because we know that’s important to associates and it’s important to Danaher.

To make it easier for you to choose, plan coverage is the same from all carriers, whether you choose Silver, Gold, or Platinum. You’ll see variations in the prices and in the extras they offer, like nurse lines and wellness coaching. (Note: Depending on where you live, you also may be offered a regional plan option.)

5. How can I get help choosing a medical plan?

Danaher’s [online tools](#) are a great place to start for guidance on your medical plan choice.

Start with the [Pricing Modeler](#). It shows what you could pay and helps you compare Danaher plans to other medical coverage you might have access to (like a spouse’s plan). You can contact the Danaher Health & Welfare Benefits Center at **800-964-7985** for the access code.

Note: Pre-enrollment medical plan pricing is not available to associates in Hawaii, Pall union, and U.S. Expatriates.

During the online enrollment process, the Help Me Choose tool on [MyDanaherBenefits.com](#) shows how plans and medical insurance carriers match to your needs. Enter some basic information about yourself and each medical plan gets a score. A higher score means a better match for your needs. Note that Danaher will not see any information you put into the tools.

6. How will I know if my current doctors are in-network?

This is something very important to consider when enrolling in a new plan. You’ll also want to see if any current prescriptions you use are covered.

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During enrollment, you can use our online tools, especially the [Help Me Choose](#) tool, where you can enter your doctors and prescriptions into the tool.

One of the great things about multiple carrier options is that if your current doctors and prescriptions aren't in-network for one carrier, you can weigh your options. You might even check to see if a regional carrier could fit your needs.

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7. How do I know if the Silver plan is a good choice for me?

The Silver plan can be a good option for many associates. It has lower paycheck costs and comes with the Health Savings Account (HSA) that you fund with pre-tax money.

During online enrollment, the [Help Me Choose](#) tool will help you get a good picture of your costs under different scenarios—whether you don't use much care other than preventive or you use a lot of care and prescriptions. And be sure to complete all the steps in the tool! The more information you provide, the more it will be personalized to your needs.

Beyond lower costs, when you use paycheck contributions to fund your HSA, you set aside money to pay for eligible health care expenses and lower your taxable income.

8. How is the Health Savings Account (HSA) different from the Health Care Flexible Spending Account (FSA)?

Both the HSA and the FSA are great ways to save before-tax dollars to pay for medical, prescription drug, dental, vision, and other health care expenses.

Here are three key differences.

The first key difference: Who can contribute. You can contribute to an HSA only if you're enrolled in the Silver plan. If you're in the Silver plan and enroll in the Health Care FSA, it becomes a limited purpose FSA, and you can use it only for dental and vision expenses—not medical or prescription drugs—until your expenses reach the Silver plan annual deductible. If you enroll in the Gold or Platinum plan, you can contribute to a full-purpose FSA—but not an HSA.

The second key difference: Availability of the funds. With the HSA, the money needs to be in the account in order to use it. Your contributions go into the account every pay period. With the FSA, you can use the money before it's in the account—up to the amount you plan to contribute for the year.

The third key difference: What happens to your money if you don't use it by the end of the year. This is where some people get confused. With the FSA, you lose any money not used for eligible expenses incurred during the year. With the HSA, you never lose any money you contribute. Whatever you don't spend during the year keeps carrying forward year after year—there's no limit on how much can build up in the account. And at any point during the year, you can change or stop the HSA paycheck contribution that you set up during enrollment.

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9. How do I transfer a balance from an existing Health Savings Account (HSA) to my Danaher account?

If you choose the Silver plan for medical coverage and would like to transfer a balance from an existing Health Savings Account to your Danaher Health Savings Account through Fidelity, log on to [NetBenefits.com](https://www.netbenefits.com). Note that transfer fees will apply.

10. Will I get ID cards for my Danaher coverage?

For medical, prescription drug, and vision coverage, you can expect ID cards mailed to your home within three weeks after you enroll.

Dental coverage cards are not issued. Your dental provider will look up your coverage.

You can print medical, dental, and vision ID cards on your [insurance carriers' websites](#).

11. As a new associate, can I roll my current 401(k) plan amount into the Danaher 401(k) savings plan?

Yes. You can access the Danaher 401(k) savings plan via [NetBenefits.com](https://www.netbenefits.com). Non-union associates will be automatically enrolled. You will receive a notice indicating the date you will become automatically enrolled (generally 45 days from the date of the notice) unless you log on to [NetBenefits.com](https://www.netbenefits.com) and make an election on your own. Don't forget to designate your beneficiaries when you enroll or are automatically enrolled! Follow the online instructions to roll your eligible 401(k) account balance into the Danaher 401(k) savings plan. You can also contact a Fidelity representative for assistance at **800-835-5092**.

Note: The only exception to rollovers is you cannot roll over any after-tax (non-Roth) contributions into the Danaher plan.

12. Will I need to designate a beneficiary for the Danaher 401(k) savings plan?

Yes. Beneficiary designations must be made separately for the Danaher 401(k) savings plan. Beneficiary designations can be made via [NetBenefits.com](https://www.netbenefits.com).

We strongly encourage you to designate beneficiaries as soon as possible, so if the unexpected happens, your money is distributed according to your wishes.

13. How can I learn more about the Danaher 401(k) savings plan?

More information is posted on the [401\(k\) savings plan](#) page, and you can access all plan information on [NetBenefits.com](https://www.netbenefits.com).

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14. How do I join the Danaher Wellbeing Program?

The Wellbeing Program is available to spouses and partners of associates who are benefits-eligible.

To get started, watch this [introductory video](#) and visit the [Danaher Wellbeing Program](#) page for more information.

15. Who do I contact if I have questions about my benefits? Who do I contact if I want help enrolling?

For assistance, call the Danaher Health & Welfare Benefits Center at **800-964-7985** or use the Web Chat on [MyDanaherBenefits.com](#).

For phone assistance regarding the 401(k) savings plan or the Health Savings Account (HSA), call Fidelity at **800-835-5092**.

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