

Optimize Your Marvell Benefits

Take a holistic look at your Marvell benefits to make the best decision for 2024.

2024 Open Enrollment: October 16 - October 30, 2023



Dear Marvell colleagues,

We want you to be your best self every single day. This is one of the biggest drivers behind offering a comprehensive selection of benefits to support your and your family's physical, mental and financial well-being. It's all about *Supporting a Healthy You*. But making these great benefits available to you only goes so far toward ensuring healthy outcomes. If you really want optimal results from your benefits, you need to use them!

Open Enrollment is your once-a-year opportunity to explore all the benefits available to you and to make sure you're getting the most out of them—from the basics like medical, dental and vision coverage to a wide assortment of well-being tools to help you maintain your mental health, support your family, plan for your future and much more.

We take a thoughtful approach when reviewing and modifying our benefit offerings. We want to make sure we're meeting as many of your needs as possible while staying competitive in the market and providing cost-effective solutions. Your feedback is also a huge factor. Based on what you told us in the Global Benefits Survey and on our #BenefitsWellness-US Slack channel, we're enhancing our dental plans for 2024. We heard you on the current pain points. With your input in mind, we conducted a comprehensive review, which included gleaning useful information from your dentists who had left the network and doing a full-scope vendor evaluation (comparing network coverage, reimbursement rates, etc.).

Due to high medical inflation, compounded by the rising cost of pharmaceutical drugs and treatments, Marvell's health care expenses are projected to increase significantly in 2024. Despite the challenge, we've worked hard to maintain our 80/20 cost-share philosophy. That means Marvell covers 80% of the healthcare costs, absorbing the bulk of the increase, and employees cover an average of 20% of the healthcare costs through monthly premiums, copays and coinsurance. By taking on most of the financial burden, we work to reduce the impact you feel from rising health care costs.

During Open Enrollment, I encourage you to not only consider what benefits you could be using more, but also to think about how you could be contributing more to your own optimal health. Because many of Marvell's plans are self-funded, your focus on wellness can help us all lower costs in the future. You can do this by:

- Practicing preventive care, like getting your annual checkups and all your recommended tests, screenings and vaccinations. Preventive care is covered at 100%, with no additional costs to you.
- Using your Marvell mental health and time off benefits to help manage stress and anxiety, some of the biggest contributors to physical illness.
- Exercising regularly and maintaining a healthy diet.
- · Encouraging your family members to utilize all the Marvell resources available to them.

Throughout 2024 let's all strive to make the most of our Marvell benefits on a regular basis, so we can bring our best selves to work and to our families every day.

Ali Taner

VP, Total Rewards

What's changing for 2024

Dental Plan Enhancements

After an extensive review of dental carrier plans, we've decided to stay with Delta Dental, as it still offers the most comprehensive coverage and retains the largest network. To improve your access to care, we've made three big changes:

- 1. We're aligning the plan benefits, so you'll pay the same coinsurance whether you receive care from a Delta PPO dentist, a Delta Premier dentist or an out-of-network dentist. This change, which applies to both the Base and the Buy-Up Plan, will give you more choices in where you go for dental care.
- 2. We're significantly increasing the reimbursements to out-of-network dentists. Balance billing may still apply if you go to an out-of-network provider for care, so typically you'll pay less if you stay in-network.
- 3. Under both the Base and Buy-Up Plans, you'll be able to receive diagnostic and preventive services without meeting your deductible. That means your annual preventive dental checkups will cost you \$0.

🔁 Anthem Plan Prescription **Drug Coverage**

You'll see changes to your prescription drug coverage under all Anthem medical plans.

- For Tier 2, Tier 3 and Tier 4 medications, you'll pay coinsurance with minimum and maximum costs per prescription (see Medical Plan Details). Anthem Blue Cross HDHP members will need to meet their deductible first. Log in to anthem.com/ca and find your medications using the "Price a Medication" tool; estimate your medication cost in 2024 by multiplying the price shown by your coinsurance. Tier 1 prescriptions will remain at a \$10 copay. If you're enrolled in the CarelonRx Cost Relief program, you'll continue to pay less for your eligible specialty medications.
- If your doctor prescribes a brand-name medicine that's available as a generic, your pharmacy will give you the preferred generic option unless your provider indicates "Dispense as Written." Generic medicines cost less but have the same strength and active ingredients as the brand-name versions.
- · Short-term medications—prescriptions for up to 30 days—can be filled at any in-network pharmacy. Longterm medications—prescriptions you take regularly for over 30 days-must be filled through mail order or specific Anthem pharmacies for a 90-day supply.

Find eligible medications and network pharmacies on marvellbenefits.com. If you're impacted by this change, you'll receive a letter from Anthem.

 The CarelonRx Specialty Condition Management program assists with managing your chronic condition. If enrolled, you'll be contacted by a nurse to quide you through your specific care goals and treatment options.

🚺 Lincoln Financial Group **Critical Illness**

The voluntary critical illness plan will move from MetLife to Lincoln Financial Group, the disability benefit administrator. By having disability and critical illness benefits under one administrator, we'll be able to lower your costs for coverage. If you're receiving short-term disability benefits, Lincoln will automatically process covered critical illness claims, as applicable.

Before you enroll in critical illness insurance, it's important to understand the limitations of the plan. Only certain conditions are considered covered conditions, the plan does not pay for all illnesses. Please carefully review the Benefits Plan Summary on marvellbenefits.com before you enroll, so you understand if critical illness coverage is right for your family's financial plan.

Premiums

To keep up with continually rising health care costs, employee medical contributions have changed. Marvell will continue to cover more than 80% of the medical plan costs. There will be no changes to what you pay for dental or vision plans.

Opt-Out Credit

In an effort to control costs for employees enrolled in our medical plans, the \$250 opt-out credit will be discontinued for employees who opt-out of Marvell's medical plans. If you previously opted out of Marvell's medical coverage because you're covered through your spouse's plan, it might be a good year to review your options and determine which plan makes the most sense for you and your family. Unless you make an active medical plan election, you will automatically continue to waive medical coverage in 2024.

Get Help Making Your Benefits Decisions

Not sure which medical plan is right for you? While you're enrolling through the benefits enrollment portal, look for the Begin MyChoice button. Just answer a few questions and the MyChoice plan selection tool will help you estimate your costs, compare the medical plan options, and choose the right medical plan for you and your family.

Want to speak with someone? Through Anthem Blue Cross, you have access to personal health consultants who can help you navigate complex health issues and better understand your medical plan coverage. You can reach Anthem Health Guides by calling (877) 898-0739 (Monday–Friday, 6 a.m.–10 p.m. PT), emailing them through anthem.com/ca (log in > Support > Contact Us > Message Us), or using the Chat feature by logging in to anthem.com/ca.

McGriff is Marvell's benefits administrator.

Contact the McGriff Benefits Information Center: (888) 754-6501, 6 a.m.-5 p.m. PT.

Email McGriff:

marvellbenefits@mcgriffinsurance.com.

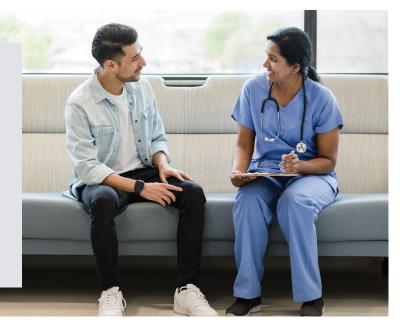
Save Money on **Health Care Expenses**

If you enroll in the Anthem High Deductible Health Plan (HDHP), you have access to one of the greatest ways to save: a tax-advantaged Health Savings Account (HSA). With an HSA, you can set aside money from your paycheck on a pre-tax basis to help you save on current and future health care expenses. Here are a few more benefits of being enrolled in the Anthem HDHP with HSA:

- · You reduce your taxable income through tax-free contributions and withdrawals (as long as you're using your HSA funds for eligible health care expenses).
- The money is yours to keep (even if you leave Marvell or change health plans).
- · Once you save \$500, you can invest any additional savings you contribute to your account.
- · The HSA can help you plan for your future. After you turn 65, the HSA functions like an IRA.
- · Marvell contributes upfront to your account: \$600 for employee-only coverage and \$1,200 for family coverage in 2024.
- The amount you can save on a pre-tax basis in 2024 is increasing from \$3,850 to \$4,150 for employee-only coverage and from \$7,750 to \$8,300 for family coverage.

Our Approach to Your Benefits

Catching health concerns before they become major issues can save you substantial amounts of time and money, not to mention seriously improve the quality of your life. We want you to be proactive with your health care. That's why we provide a full range of comprehensive health and well-being resources. It's all part of Marvell's approach to benefits: Supporting a Healthy You.



Your Mental **Health Matters**

If you're experiencing self-doubt, decreased satisfaction, helplessness or loss of motivation, you might be dealing with burnout. Now's the time to get help and get back on track—don't put off your own mental well-being any longer.

Our mental health program, provided by Lyra Health, provides assistance for you and your family members, including your children.

Through Lyra, you have access to:

- · Guided self-care with a coach
- In-person and video therapy
- Mental health coaching
- · Self-serve wellness tools
- · Lyra's Care Navigator Team: licensed clinicians available 24/7 to help with your entire family's care needs
- A wide selection of therapy services for children and teens (ages 0+) to address issues including behavior, stress and anxiety, and life transitions, as well as higher-level needs (e.g., anxiety, ADHD, autism)
- Support for the parenting journey, including mental wellness support and coaching

Lyra will custom-match you with a mental health coach or therapist who meets your needs. Visit marvellbenefits.com/us to find out how to access the Lyra website, download the Lyra app and contact Lyra Care Navigators. Care Navigators are available 24/7. The Engage wellness app is one of many Marvell-provided tools that can support your journey to better health. With Engage, you earn points by completing healthy actions, and those points can be redeemed toward quarterly raffle prizes.

Join the Fall Engage Step Challenge

Sign up your team of six for the fall Engage step challenge, Reach the Peak. It's happening November 1–28. Sync your fitness tracker or manually add activities to be converted to steps and then see your team's position on the leaderboard improve every time you move! Team registration starts October 25.



Scan the OR code to learn more and register.





	ANTHEM BLUE CROSS EXCLUSIVE	ANTHEM BLUE CROSS PREFERRED		ANTHEM BLUE CROSS HDHP		KAISER HMO (CA)	TUFTS HMO (MA)
	In-Network Only	In-Network	Out-of-Network ⁴	In-Network	Out-of-Network ⁴	In-Network Only	In-Network Only
Deductible	\$100/Individual \$300/Family	\$300/In \$900/I		\$2,000/lı \$2,800/Individual u		None	None
Percentage Co-Insurance	10%	20%	35%	10%	30%	None	None
Out-of-Pocket Maximum	\$2,000/Individual \$6,000/Family	\$2,000/Individual \$6,000/Family	\$4,000/Individual \$12,000/Family	\$5,000/Individual \$10,000/Family	\$5,000/Individual \$10,000/Family	\$1,500/Individual \$3,000/Family	\$3,000/Individual \$6,000/Family
Doctor's Office Visit	\$20 copay ¹	\$25 copay ¹	35%	10%	30%	\$20 copay	\$20 copay
Specialist Office Visit	\$30 copay ¹	\$35 copay ¹	35%	10%	30%	\$20 copay	\$35 copay
Telehealth Visit	No charge livehealthonline.com	No charge livehealthonline.com	35%	\$59; no charge after deductible livehealthonline.com	30%	No charge KP.org	\$20 copay teladoc.com
Urgent Care	\$20 copay ¹	\$25 copay¹	35%	10%	30%	\$20 copay	\$20 copay
Preventive Care Screening, Immunization, Radiology and Labs	No charge	No charge	35%	No charge	30%	No charge	No charge
X-ray and Advanced Imaging	10%	20%	35%	10%	30%	No charge	No charge
Lab	10%	20%	35%	10%	30%	No charge	No charge
Outpatient Surgery and Procedures	10%	20%	35%	10%	30%	\$20 copay	\$500 copay
Emergency Room Services	10% after \$100 copay (copay waived if admitted)	20% after \$100 copay (copay waived if admitted)	20% after \$100 copay (copay waived if admitted)	10%	10%	\$100 copay (copay waived if admitted)	\$150 copay (copay waived if admitted)
Inpatient Hospital ²	10%	20%	35% after \$250 copay	10%	30%	\$200 copay	\$500 copay
Behavioral Health Visit	10%	20%	35%	10%	30%	\$20 copay/Individual \$10 copay/Group	\$20 copay
Chiropractor Visit	\$20 copay 30-visit maximum per year	20% 30-visit maximum per year	35% 30-visit maximum per year	10% 30-visit maximum per year	30% 30-visit maximum per year	\$15 copay 30-visit maximum per year (combined with acupuncture)	\$35 copay 12-visit maximum per year
Acupuncture Visit	\$20 copay 30-visit maximum per year	20% 30-visit maximum per year	35% 30-visit maximum per year	10% 30-visit maximum per year	30% 30-visit maximum per year	\$15 copay 30-visit maximum per year (combined with chiropractor)	\$20 copay
Physical, Speech and Occupational Therapy	10%	20%	35%	10%	30%	\$20 copay	\$35 copay
PRESCRIPTION DRUGS							
Out-of-Pocket Maximum	\$2,000/Individual \$6,000/Family	\$2,000/II \$6,000 <i>/</i>		Included w Out-of-Pock	ith Medical et Maximum	Included with Medical Out-of-Pocket Maximum	Included with Medical Out-of-Pocket Maximum
Pharmacy—Retail ³	Tier 1: \$10 copay ¹ Tier 2: 10% (\$30 min./\$250 max.) ¹ Tier 3: 10% (\$50 min./\$250 max.) ¹ Tier 4: 10% (\$100 min./\$250 max.) ¹	Tier 1: \$10 copay ¹ Tier 2: 20% (\$30 min./\$250 max.) ¹ Tier 3: 20% (\$50 min./\$250 max.) ¹ Tier 4: 20% (\$100 min./\$250 max.) ¹	Tiers 1, 2, 3 and 4: 35% up to \$250 ¹	Tier 1: \$10 copay Tier 2: 10% (\$30 min./\$250 max.) Tier 3: 10% (\$50 min./\$250 max.) Tier 4: 10% (\$100 min./\$250 max.)	Tiers 1, 2, 3 and 4: 30% up to \$250	Generic: \$10 copay Brand: \$30 copay	Tier 1: \$15 copay Tier 2: \$30 copay Tier 3: \$50 copay
Pharmacy—Mail Order³	2x retail cost for 90-day supply	2x retail cost for 90-day supply	Not covered	2x retail cost for 90-day supply	Not covered	2x copay for 100-day supply	2x copay for 90-day supply

1 Deductible does not apply 2 Preauthorization required 3 Coinsurance (including minimum and maximum allowed amounts) is per prescription. 4 Costs in excess of the plan's maximum allowed amount may apply (balance billing).

Plan Delta Dental Plan Details

	DENTAL BASE PLAN	DENTAL BUY-UP PLAN	
	Delta Dental PPO, Delta Dental Premier and Out-of-Network	Delta Dental PPO, Delta Dental Premier and Out-of-Network	
Deductible	\$50/Person \$150/Family	\$50/Person \$150/Family	
Benefit Maximum (calendar year)	Plan pays \$2,000/Person	Plan pays \$3,000/Person	
Diagnostic and Preventive Services* (oral exams, cleanings, X-rays)	No copay or deductible	No copay or deductible	
Basic Services (oral surgery, fillings, root canals, etc.)	You pay 20%	You pay 20%	
Major Services (crowns, onlays, gum treatment, cast restorations, etc.)	You pay 50%	You pay 40%	
Prosthodontics (bridges, full and partial dentures)	You pay 50%	You pay 40%	
Dental Guards (once every three years)	You pay 50%, Plan pays \$500 maximum/Person	You pay 50%, Plan pays \$500 maximum/Person	
Retainer Replacement (once every five years)	You pay 50%, Plan pays \$500 maximum/Person	You pay 50%, Plan pays \$500 maximum/Person	
Implants	You pay 50%, Plan pays \$2,000 lifetime maximum/Person	You pay 40%, Plan pays \$3,000 annual maximum/Person	
Orthodontics (adults and children)	You pay 50%, Plan pays \$2,000 lifetime maximum/Person	You pay 40%, Plan pays \$3,000 lifetime maximum/Person	
Reimbursement is based on PPO-contracted fees for PPO dentists, Premier-contracted			

Reimbursement is based on PPO-contracted fees for PPO dentists, Premier-contracted fees for Premier dentists, and enhanced-program allowance for out-of-network dentists. Balance billing may still apply for out-of-network dentists.

*Not subject to benefit maximum

Vision Service Plan Details

BASE PLAN	In-Network	Out-of-Network		
Well Vision Exams	Plan pays 100% after \$10 copay	Plan pays up to \$50 after \$10 copay		
Primary and Diabetic Eye Care Services	\$20 copay	Not covered		
Lenses and Frames Copay	\$25 copay	See limits below		
Contact Lenses Copay	\$25 copay	See limits below		
LENSES AND FRAMES (ONCE EVERY CALENDAR YEAR)				
Single Vision Lenses	Plan pays 100%	Plan pays up to \$50		
Bifocal and Trifocal Lenses (Lined)	Plan pays 100%	Plan pays up to \$75 and \$100		
Standard Progressive Lenses	Plan pays 100%	Plan pays up to \$75		
Anti-Reflective Coating	\$30 copay	Not covered		
Adult and Child Polycarbonate Lenses	Plan pays 100%	Not covered		
Blue-light-filtering Lenses	Plan pays 100%	Not covered		
Frames	Plan pays up to \$200, plus 20% off any out-of-pocket cost Plan pays up to \$110 at Costco	Plan pays up to \$70		
CONTACT LENSES (IN LIEU OF LENSES AND FRAMES)				
Elective	Plan pays up to \$200 for contacts	Plan pays up to \$105 for contacts		
Necessary	Plan pays 100%	Plan pays up to \$210		
Laser Vision Correction (Lasik, Custom Lasik or PRK)	Plan pays up to \$1,000 per eye	Not covered		
BUY-UP				
Frames or Contacts	Same allowance for second pair of glasses or contacts	Same allowance for second pair of glasses or contacts		



Your Life. Your Benefits.

Marvell is dedicated to providing you with exceptional and comprehensive coverage designed to meet the diverse and unique needs of all our people. We have four pillars of focus for our benefit offerings: financial, family, mental and physical health, and recognition.

Here are a few benefits you may want to explore, so you can take advantage of them in 2024. Find more information at marvellbenefits.com/us.



We're excited to announce our partnership with **Medicare Transition** Services (MTS) to enhance our educational resources for Medicare. Through MTS, you have access to one-on-one Medicare consulting as well as various educational webinars. Visit marvellbenefits.com/us to learn more.

Financial

Marvell offers a wide selection of financial resources to help you make the most of your present and plan for your future.

- 401(k) Plan with 5% match (up to annual maximum)
- Employee Stock Purchase Plan (ESPP) with two-year look-back
- Health Savings Account (HSA) with employer contribution
- · Flexible Spending Accounts:
 - Health Care FSA/Limited Health Care FSA
 - Day Care FSA
- · Additional coverage options:
 - Life and accidental death and dismemberment (AD&D)
 - Disability
 - Critical illness
 - Legal
- · Family survivor benefits
- Commuter benefits with employer subsidy
- Fond employee discount platform
- Tuition reimbursement.
- Employee-referral program



Family

Marvell offers a wide variety of services that can benefit you and your family throughout every life stage.

- 12 weeks of paid bonding and family care leave
- Flexible return-to-work policy for new parents who are coming back to work after taking their first instance of bonding leave
- Adoption and surrogacy benefits
- On-demand tutoring
- College-prep assistance
- · Care services:
 - Care.com membership
 - Backup child, adult and pet care
 - Day care discount
 - Senior-care planning

Recognition

Marvell's global recognition program, We Appreciate, has two elements:

- 1. Recognition. Celebrate your colleagues' contributions by sending them an eCard or nominating them for an award.
- 2. Anniversary awards. When you reach your fifth year of continuous employment at Marvell (and at every five-year milestone after that), we'll celebrate your achievement with a special anniversary award.

Mental and **Physical Health**

Marvell offers a range of health care coverage and programs to help you prevent illness, get treatment and stay on top of your specific health care needs.

- · Comprehensive health plans
- Telemedicine
- · Lyra Health: counseling, coaching and digital courses
- SWORD Health virtual physical therapy for back, joint and muscle pain
- Bloom digital therapy for pelvic dysfunction
- · 2nd.MD second opinion services
- Anthem programs:
 - Health guides enhanced call center
 - Autism support
 - Cancer care
 - Diabetes prevention
 - Inclusive care services for LGBTQ+ members
- · Onsite fitness centers at some locations

Employee Contributions (per month)

MEDICAL PLAN	
ANTHEM BLUE CROSS EXCLUSIV	Έ
EE Only	\$126
EE + Spouse/DP	\$328
EE + Child(ren)	\$262
EE + Family	\$437
ANTHEM BLUE CROSS PREFERRI	ED
EE Only	\$155
EE + Spouse/DP	\$408
EE + Child(ren)	\$323
EE + Family	\$543
ANTHEM BLUE CROSS HDHP	
EE Only	\$66
EE + Spouse/DP	\$170
EE + Child(ren)	\$135
EE + Family	\$228
KAISER (CA)	
EE Only	\$93
EE + Spouse/DP	\$242
EE + Child(ren)	\$192
EE + Family	\$322
TUFTS (MA)	
EE Only	\$153
EE + Spouse/DP	\$399
EE + Child(ren)	\$341
EE + Family	\$496

DENTAL PLAN		
DELTA DENTAL (BASE PLAN)		
EE Only	\$12	
EE + Spouse/DP	\$42	
EE + Child(ren)	\$34	
EE + Family	\$61	
DELTA DENTAL (BASE + BUY-UP)		
EE Only	\$56	
EE + Spouse/DP	\$144	
EE + Child(ren)	\$120	
EE + Family	\$205	

VISION PLAN		
VSP (BASE PLAN)		
EE Only	\$6	
EE + Spouse/DP	\$21	
EE + Child(ren)	\$16	
EE + Family	\$28	
VSP (BASE + BUY-UP)		
EE Only	\$11	
EE + Spouse/DP	\$32	
EE + Child(ren)	\$26	
EE + Family	\$44	

Terms to Know

Balance billing: When you're charged the difference in cost between an in-network provider's negotiated rate and the rate of the out-of-network provider you saw for care.

Deductible: The amount you pay each year

before your plan starts to pay.

Co-insurance: Your percentage of the costs

after meeting your deductible.

Copay: A flat fee you pay for covered services like doctor visits.

Out-of-pocket maximum: The maximum amount you will pay out of your pocket for covered services for the plan year. This amount includes your deductible, copays and coinsurance.

Allowed Amount: The maximum a health plan pays for services. If you go out-of-network, you will be responsible for any costs over the Allowed Amount.

Prescription tier: The way a health plan categorizes each prescription into different levels to determine cost.

Next Steps

2024 Open Enrollment starts October 16 and ends October 30, 2023.

To take advantage of Marvell's new and existing benefits:

Visit the Open Enrollment page at marvellbenefits.com/oe2024 for more details about plan changes, 2024 premiums, informational webinars and more. The Marvell Benefits website is your go-to source for all things benefits related.

- Review your current benefits elections. If you take no action, your 2023 benefits will carry into 2024, unless you're currently enrolled in any of the following:
 - Health Care FSA or Limited Health Care FSA
 - Day Care FSA

Your elections in either type of FSA will not carry into next year.

IMPORTANT: Your FSA dollars DO NOT roll over from year to year. Claims that are incurred before December 31 but are not submitted by March 31 of the following year will not be eligible for reimbursement, so plan accordingly when you make your new FSA elections.

Log in to Okta and select the benefits enrollment portal to enroll by Monday, October 30 at 11:59 p.m. PT.



We are required to provide you with access to certain notices about your benefits. Find all required notices at marvellbenefits.com/us under Resources > **Plan Documents** and Forms.



The opt-out credit is going away in 2024. If you previously waived medical coverage and don't enroll during 2024 Open Enrollment, your coverage will continue to be waived.



Your Benefits Open Enrollment Checklist

Medical Plans

- Anthem Exclusive
- Anthem Preferred
- Anthem HDHP with Health Savings Account (HSA)
- Kaiser HMO (CA)
- ☐ Tufts HMO (MA)

Dental Plans

- O Delta Dental Base
- O Delta Dental Buy-Up

Vision Plans

- VSP Base
- VSP Buy-Up

Flexible Spending Accounts (FSA)

- O Day Care FSA
- Health Care FSA
- ☐ Limited Health Care FSA (allowed with HDHP)

Disability Insurance

- Short-Term Disability (auto-enrolled)
- Long-Term Disability (auto-enrolled)
- O Long-Term Disability Buy-Up

Life Insurance

- Opt-out of Basic Life (\$50,000 of coverage)
- Optional Life for Employee
- Optional Life for Spouse
- Optional Life for Child(ren)

Accidental Death and Dismemberment Insurance (AD&D)

- Optional AD&D for Employee
- Optional AD&D for Spouse
- Optional AD&D for Child(ren)

Supplemental Programs

- LegalEASE Group Legal Plan
- LegalEASE and Parent Coverage Group Legal Plan
- O Critical Illness with Lincoln Financial



Revisit your current Life and AD&D elections and consider whether you may want to increase coverage for yourself, your spouse or domestic partner, or your children. Open Enrollment is also a good time to review your beneficiary elections. As a reminder, your beneficiaries will receive benefits if you die. So it's very important to review these elections annually and discuss them with your family members. Reminder: You can list a Trust or an individual as a beneficiary.



This overview summarizes the Marvell Benefits Program. Full details of the benefit plans are contained in the official plan documents, which will govern in the case of any discrepancies.