MARVELL

Benefits that Are Built to Last

At Marvell, we are committed to providing a foundation that sustains your success and well-being far into the future.

2026 Open Enrollment: October 27–November 10, 2025

Dear Marvell colleagues,

At Marvell, your well-being is our priority—today and for the future. We're deeply committed to supporting your health, wellness and financial security. That's why our benefits are truly *built to last*—carefully designed to help you and your family thrive now and in the years ahead.

Thanks to our thoughtful, long-term approach to benefits management, Marvell is in a strong position heading into 2026. Despite economic pressures, we've fared better than many employers when it comes to health plan costs. While we continuously monitor market trends, our decisions are always guided by what's best for you and your families—balancing immediate needs with long-term sustainability.

Our benefits remain both competitive and high-quality, anchored by our 80/20 cost-share philosophy. Marvell covers 80% of health care costs while employees contribute an average of 20% through premiums, copays and coinsurance. We absorb the majority of the financial impact to help shield you from rising health care expenses.

This year we expanded our global offerings with exciting new resources, including Cleo for caregiving support and global walking challenges through our new wellness app, Espresa. These additions are part of our ongoing effort to provide meaningful physical, emotional and financial support.

To make the most of your Marvell benefits, we encourage you to:

- Schedule your annual health screenings and preventive care (covered at 100%)
- Use Lyra for mental health support and take advantage of time-off benefits to recharge
- Stay active and build healthy habits
- Explore new wellness tools like Cleo and Espresa
- Share Marvell's resources with your family—they're here for them too

Let's continue to prioritize our well-being—together. While we're proud of our benefits offerings, what matters most is helping you stay healthy, supported and ready for what's ahead.

Ali Taner
VP, Total Rewards

What's Changing for 2026

Health Savings Account

The maximum pre-tax contribution for 2026 is increasing from $4,300 to $4,400 for employee-only coverage and from $8,550 to $8,750 for family coverage.

To learn more about the tax advantages of a Health Savings Account (HSA) as well as how to use the HSA as a strategic component of your retirement plan, visit **www.marvellbenefits.com/oe2026**.

Day Care Flexible Spending Account

The maximum pre-tax contribution for 2026 is increasing from $5,000 to $7,500.

2026 Premiums

There will be minor increases to employee medical plan contributions in 2026. Otherwise, you will see no changes to what you pay for your benefits.

You can find all 2026 premiums on page 9.

Use Cleo for Caregiving Support

This year, we teamed up with Cleo to offer trusted caregiving resources and support. Cleo provides expert guidance for family planning, child-rearing and elder care—whether for yourself or a loved one. After registering, you'll be matched with a Cleo Guide for personalized advice.

Visit **marvellbenefits.com** under **Work & Life** > **Cleo Caregiving** for more information.

Anthem Members: How To Get the Most From Total Health Connections

All Anthem members have access to Total Health Connections, a white-glove customer service team specifically trained on Marvell's plans. Anthem Total Health Connections is designed to give you a seamless and hassle-free experience, so you can focus on your health and well-being.

Your personal Total Health Connections Family Advocate can help you manage your health information, discuss your claims and medical benefits, and give you wellness tips. Building a relationship with your Family Advocate can help you get faster, more personalized support—especially for complex questions.

Here's how to connect:

1. Call the Anthem Member Services number: (877) 898-0739.
2. Ask to speak with your dedicated Family Advocate. If your Family Advocate is unavailable, you'll be connected to a Marvell-trained advocate who can assist or leave a message for your dedicated Family Advocate.

Request a Callback

Use the Sydney Health app or **anthem.com** to request a callback from your Family Advocate.

Live Chat

While chat doesn't connect you directly to your Family Advocate, your conversation notes will be shared with your Advocate for follow-up.

Download the Sydney Health App

The Sydney Health app, available on your smartphone or online, allows you to easily manage your health care and connect with your Total Health Connections Family Advocate. You can use the app to:

- Find doctors, hospitals and pharmacies in your network
- Review costs for services—and get help finding the lowest cost option
- View your benefits, claims and ID card
- Manage your prescriptions
- Chat with a nurse 24/7 for health advice
- Schedule appointments and virtual visits
- Get personalized wellness tips and programs
- Track your health goals
- Find the name and telephone number for your Total Health Connections Family Advocate as well as send direct messages

The Sydney Health app is your one-stop shop for all your medical needs.

Download the Sydney Health app.

Your Mental Health Matters

In our busy lives, taking proactive steps to maintain and enhance our mental well-being is crucial. Seeking support can help you regain a sense of balance and fulfillment. Embrace the opportunity to prioritize your mental health and take action to ensure a healthier, happier you.

At Marvell, we understand the importance of mental health and provide a robust mental health program through Lyra Health. Lyra offers confidential, personalized, and evidence-based care from a network of top providers for you and your family members—including your children. Whether you're dealing with stress, anxiety, depression, relationship issues or any other mental health challenge, Lyra can help find the best solution for you.

You and your eligible dependents have access to **12 mental health coaching or therapy sessions** per year at no cost to you.

Through Lyra you have access to:

- 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. Learn more about Lyra and how to sign up at **marvell.lyrahealth.com**. Care Navigators are available 24/7.

Specialized Care for Teens

Lyra Care for Teens is a specialized virtual care model tailored to adolescents. This program features age-appropriate content, assessments, and virtual sessions led by therapists specializing in teen mental and behavioral health. After registering for their first appointment, your teen will create their own Lyra account to access online resources and messaging with their therapist. Parental consent is required, and parents must attend the initial session.

Marvell Benefits At-a-Glance 2026

Medical Plan Details

	ANTHEM BLUE CROSS EXCLUSIVE	ANTHEM BLUE CROSS PREFERRED		ANTHEM BLUE CROSS HDHP		KAISER HMO (CA)
	In-Network Only	In-Network	Out-of-Network[4]	In-Network	Out-of-Network[4]	In-Network Only
Deductible	$100/Individual $300/Family	$300/Individual $900/Family		$2,000/Individual $2,800/Individual, up to $4,000/Family		None
Percentage Co-Insurance	10%	20%	35%	10%	30%	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
Doctor's Office Visit	$20 copay[1]	$25 copay[1]	35%	10%	30%	$20 copay
Specialist Office Visit	$30 copay[1]	$35 copay[1]	35%	10%	30%	$20 copay
Telehealth Visit	No charge[1] livehealthonline.com	No charge[1] livehealthonline.com	35%	No charge[1] livehealthonline.com	30%	No charge KP.org
Urgent Care	$20 copay[1]	$25 copay[1]	35%	10%	30%	$20 copay
Preventive Care Screening, Immunization, Radiology and Labs	No charge	No charge	35%	No charge	30%	No charge
X-ray and Advanced Imaging	10%	20%	35%	10%	30%	No charge
Lab	10%	20%	35%	10%	30%	No charge
Outpatient Surgery and Procedures	10%	20%	35%	10%	30%	$20 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)
Inpatient Hospital[2]	10%	20%	35% after $250 copay	10%	30%	$200 copay
Outpatient Behavioral Health Visit	$20 copay/Individual[1] $20 copay/Group[1]	$25 copay/Individual[1] $25 copay/Group[1]	35%	10%	30%	$20 copay/Individual $10 copay/Group
Chiropractor Visit	$20 copay[1] 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)
Acupuncture Visit	$20 copay[1] 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)
Physical, Speech and Occupational Therapy	10%	20%	35%	10%	30%	$20 copay
PRESCRIPTION DRUGS						
Out-of-Pocket Maximum	$2,000/Individual $6,000/Family	$2,000/Individual $6,000/Family		Included with Medical Out-of-Pocket Maximum		Included with Medical Out-of-Pocket Maximum
Pharmacy—Retail[3] (30-day supply)	**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
Pharmacy—Mail Order[3] (Anthem: 90-day supply)	**Tier 1:** $20 copay[1] **Tier 2:** 10% ($60 min./$500 max.)[1] **Tier 3:** 10% ($100 min./$500 max.)[1] **Tier 4:** 10% ($200 min./$500 max.)[1]	**Tier 1:** $20 copay[1] **Tier 2:** 20% ($60 min./$500 max.)[1] **Tier 3:** 20% ($100 min./$500 max.)[1] **Tier 4:** 20% ($200 min./$500 max.)[1]	Not covered	**Tier 1:** $20 copay **Tier 2:** 10% ($60 min./$500 max.) **Tier 3:** 10% ($100 min./$500 max.) **Tier 4:** 10% ($200 min./$500 max.)	Not covered	2x copay for 100-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).

Delta Dental Plan Details

	DELTA DENTAL PPO PLAN
	Delta Dental PPO, Delta Dental Premier and Out-of-Network
Deductible	$50/Person $150/Family
Benefit Maximum (calendar year)	Plan pays $2,000/Person
Diagnostic and Preventive Services* (oral exams, cleanings, X-rays)	No copay or deductible
Basic Services (oral surgery, fillings, root canals, etc.)	You pay 20%
Major Services (crowns, onlays, gum treatment, cast restorations, etc.)	You pay 50%
Prosthodontics (bridges, full and partial dentures)	You pay 50%
Dental Guards (once every three years)	You pay 50%, Plan pays $500 maximum/Person
Retainer Replacement (once every five years)	You pay 50%, Plan pays $500 maximum/Person
Implants**	You pay 50%, Plan pays $2,000 calendar year maximum/Person
Orthodontics (adults and children)	You pay 50%, Plan pays $2,000 lifetime maximum/Person
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 **Separate from 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 either additional contacts or a second pair of glasses	Same allowance for either additional contacts or a second pair of glasses

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. Find more information at **marvellbenefits.com/us**.

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)
  - Available options: Pre-tax, ROTH, after-tax, and in-plan ROTH conversions
- Employee Stock Purchase Plan (ESPP) with two-year look-back
- Health Savings Account (HSA): $4,400 per year for individual coverage, $8,750 per year for family coverage
  - Employer contribution: $700 for employee-only coverage and $1,500 for family coverage
- Flexible Spending Accounts:
  - Health Care FSA/Limited Health Care FSA (HDHP only): $3,300 per year (pre-tax)
  - Day Care FSA: $7,500 per year ($3,750 if married and filing separate tax returns)
- Additional coverage options:
  - Life and accidental death and dismemberment (AD&D)
  - Disability
  - Critical illness
  - Legal
- Family survivor benefits
- Commuter benefits with employer subsidy
- Tuition reimbursement
- Employee referral program
- Company match of up to $500 per year for your contributions to eligible charitable organizations

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
- Cleo caregiving resources and support
- Care.com membership
- Three days each year of paid time off to volunteer at an eligible organization

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 virtual physical therapy for back, joint and muscle pain
- Bloom digital therapy for pelvic care
- 2nd.MD second-opinion services
- Anthem programs:
  - Total Health Connections Family Advocate
  - 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 EXCLUSIVE	
EE Only	$134
EE + Spouse/DP	$348
EE + Child(ren)	$278
EE + Family	$464
ANTHEM BLUE CROSS PREFERRED	
EE Only	$173
EE + Spouse/DP	$456
EE + Child(ren)	$361
EE + Family	$607
ANTHEM BLUE CROSS HDHP	
EE Only	$68
EE + Spouse/DP	$175
EE + Child(ren)	$139
EE + Family	$235
KAISER (CA)	
EE Only	$105
EE + Spouse/DP	$275
EE + Child(ren)	$217
EE + Family	$365

DENTAL PLAN	
DELTA DENTAL PPO PLAN	
EE Only	$12
EE + Spouse/DP	$43
EE + Child(ren)	$35
EE + Family	$62

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.

Open Enrollment Next Steps

2026 Open Enrollment starts October 27 and ends November 10, 2025. To take advantage of Marvell's new and existing benefits:

1 Visit the Open Enrollment page at **www.marvellbenefits.com/oe2026** for details about plan changes, 2026 premiums, informational webinars and more. The Marvell Benefits website is your go-to source for all things benefits-related.

2 Review your current benefits elections. If you take no action, your 2025 benefits will roll over into 2026 unless you're currently enrolled in the **Health Care Flexible Spending Account (FSA), Limited Health Care FSA or Day Care FSA.** Your elections will not roll over into next year.

IMPORTANT: 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.

3 Log in to Okta and select the **Benefits Enrollment Portal** to enroll by Monday, November 10 at 11:59 p.m. PT.

Get Help Making Your Benefits Decisions

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

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

Save Money on Health Care Expenses

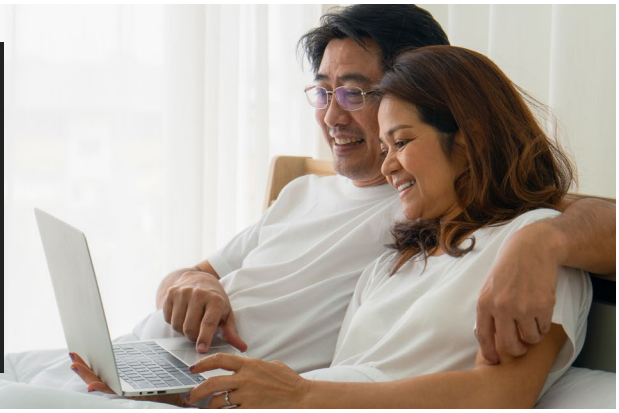
If you enroll in the Anthem High Deductible Health Plan (HDHP), you have access to one of the greatest ways to save: a tax-advantaged Health Savings Account (HSA). With an HSA, you can set aside money from your paycheck on a pre-tax basis to help you save on current and future health care expenses. Learn more on **marvellbenefits.com/us** under **Financial** > **Health Savings Account**.

Marvell Benefits Center

Give the Marvell Benefits Center a call if you have questions about enrolling in coverage.

Phone: (855) 400-MRVL (6785), 6 a.m. to 3 p.m. PT

Email: myHR@marvell.com



Your Benefits Enrollment Checklist

Medical Plans

- ○ Anthem Exclusive EPO
- ○ Anthem Preferred PPO
- ○ Anthem HDHP with Health Savings Account (HSA)
- ○ Kaiser HMO (CA)

Dental Plan

- ○ Delta Dental PPO

Vision Plans

- ○ VSP Base
- ○ VSP Buy-Up

Flexible Spending Accounts (FSA)

- ○ Day Care FSA
- ○ Health Care FSA
- ○ Limited Health Care FSA (allowed with HDHP enrollment)

Disability Insurance

- ☑ Short-Term Disability (auto-enrolled)
- ☑ Long-Term Disability (auto-enrolled)
- ○ Long-Term Disability Buy-Up

Life Insurance

- ☑ Basic Life 2.5x Salary (auto-enrolled)
- ○ 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)

- ☑ Basic AD&D 2.5x Salary (auto-enrolled)
- ○ Optional AD&D for Employee
- ○ Optional AD&D for Spouse
- ○ Optional AD&D for Child(ren)

Supplemental Programs

- ○ LegalEASE Legal Plan
- ○ LegalEASE and Parent Coverage Legal Plan
- ○ 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 child(ren). Open Enrollment is also a good time to review your beneficiary elections. As a reminder, your beneficiaries will receive a life insurance payment if you pass away, 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.

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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.

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