FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

	OMB APPROVAL							
IP	OMB Number:	3235-0287						

OMB Number: 3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Lauer Gary L</u>			2. Issuer Name and Ticker or Trading Symbol <u>eHealth, Inc.</u> [EHTH]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
(Last) (First) (Middle) C/O EHEALTH, INC. 440 EAST MIDDLEFIELD ROAD		3. Date of Earliest Transaction (Month/Day/Year) 09/05/2014									X	belov			,				
(Street) MOUNT VIEW (City)	C.		94043 Zip)		4. If	Ame	endment	, Date o	f Origina	l Filed	d (Month/Da	ay/Ye	ar)		. Individine)	Form	r Joint/Group n filed by One n filed by Mor on	e Reporting F	erson
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			Day/Year) if any		Execution f any	A. Deemed xecution Date, any Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acquired (A) I Of (D) (Instr. 3, 4			and Secu Bene Own		cially I Following	6. Ownershi Form: Direc (D) or Indire (I) (Instr. 4)	of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Price	, ·		ted action(s) 3 and 4)		(Instr. 4)
Common Stock 09/0			09/05/	/2014		F ⁽¹⁾		3,480 D		D	\$27	.07	.07 252,029		D				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day		Transaction Code (Instr.		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Prio Deriva Secur (Instr.	ative deriva ity Securi 5) Benefi Owned Follow Repor Transa	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersi Form: Direct (E or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)				
			Code V		(A)	(D)			Expiration Date	Title	or Nui of	ount nber ıres							

Explanation of Responses:

1. Represents the withholding of shares to satisfy tax withholding obligation.

Remarks:

/s/ Jennifer Thompson, as attorney-in-fact for Gary L.

09/09/2014

Date

<u>Lauer</u>

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.