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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL

Estimated average burden hours per response: 0.5		3235-0287
hours per response: 0.5	Estimated average burg	den
	hours per response:	0.5

			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) P.O. BOX 1714	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 06/15/2010		Officer (give title below)	Other (specify below)			
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)					
CAPE	МО	63702		X	Form filed by One Report	ting Person			
GIRARDEAU					Form filed by More than (Person	One Reporting			
(City)	(State)	(Zip)							

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(
Common Stock	06/15/2010		A ⁽¹⁾		3,000	A	\$ <mark>0</mark>	7,154	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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (right to buy)	\$12.2	06/15/2010		A		7,500		(2)	06/15/2020	Common Stock	7,500	\$0	7,500	D	

Explanation of Responses:

1. This represents an automatic annual award of restricted stock units. Each unit represents a contingent right to receive one share of the Issuer's common stock upon vesting. Subject to the director's continuous service with the Issuer, the restricted stock units will become 100% vested on the day prior to the Issuer's annual stockholder meeting approximately one year following the date of grant.

2. This represents an automatic annual stock option grant. Subject to the director's continuous service with the Issuer, the shares covered by this option will become 100% vested on the day prior to the Issuer's annual stockholder meeting approximately one year following the date of grant.

Remarks:

<u>/s/ Jennifer Thompson, as</u> <u>attorney-in-fact for Jack L.</u> <u>Oliver III</u>

06/16/2010

Date

** 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.