FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response:	0.5							

	tion 1(b).			Filed							es Exchang npany Act o		of 1934	ļ		liouis	per res	porise.	0.5
1. Name and Address of Reporting Person* Stelben John J				2. Issuer Name <b>and</b> Ticker or Trading Symbol eHealth, Inc. [ EHTH ]								ck all app Direc	tor	ng Pers	10% Ov	vner			
(Last)	(Fir	,	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 01/31/2024  X Officer (give title below) SVP, Chief Fi									nancia	Other (s below) al Officer	`			
13620 RANCH ROAD 620 N, SUITE A250				4. If Amendment, Date of Original Filed (Month/Day/Year)						Individual or Joint/Group Filing (Check Applicable Line)									
(Street)	TX	7	8717											X		filed by One filed by Mo		ŭ	- 1
(City)	(Sta	ate) (Z	ľip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	l - Noı	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or E	Bene	ficiall	y Own	ed			
Date			2. Transad Date (Month/Da	Execution Date,				ties Acquired (A i Of (D) (Instr. 3			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) (D)		rice	Transaction(s) (Instr. 3 and 4)				(IIISU: 4)
Common Stock 01/31				01/31/	/2024		F <sup>(1)</sup>		31,411	Ι		\$6.8	44	45,760		D			
		Tal									osed of, onvertib				Owned	t t			
1. Title of Derivative Security  1. Title of Conversion or Exercise Price of Derivative Security  2. Date (Month/Day/Nother)			3A. Deemed Execution Da if any (Month/Day/		Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis. Expiration Date (Month/Day/Yea		te	7. Title and Amount of Securities Underlying Derivative Security (In 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	Ownership	Beneficial Ownership ct (Instr. 4)
					Code V (A) (D)		Date Expiration Date		Title	Amou or Numb of Share	per								

## **Explanation of Responses:**

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

## Remarks:

/s/ Sonwha Lee as attorney-in-02/02/2024 fact for John J. Stelben

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.