FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL        |           |  |  |  |  |  |  |  |  |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number:         | 3235-0287 |  |  |  |  |  |  |  |  |
| Estimated average b | urden     |  |  |  |  |  |  |  |  |

0.5

hours per response:

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

| 1. Name and Address of Reporting Person*  Francis David K.  (Last) (First) (Middle)  C/O EHEALTH, INC. |   |  |   |         | 2. Issuer Name and Ticker or Trading Symbol  eHealth, Inc. [ EHTH ]  3. Date of Earliest Transaction (Month/Day/Year)  03/30/2018 |     |   |     |  |     |  |  | (Che                                   | elationship o<br>ck all application                 | able)   | g Perso        | on(s) to Issu<br>10% Ov<br>Other (s                                      | ner  |
|--|---|--|---|---------|---|-----|---|-----|--|-----|--|--|--|---|---|----------------|--|--|
|  |   |  |   |         |   |     |   |     |  |     |  |  |  | below)  | hief Fina   | ncial          | below)   | peony                                      |
| 440 EAST   | MIDDLEI   | FIELD ROAD                                 |   |         |   |     |   |     |  |     |  |  |  |   |   |                |  |  |
| (Street)  MOUNTAIN VIEW  CA 94043  |   |  |   |         | 4. If Amendment, Date of Original Filed (Month/Day/Year)  |     |   |     |  |     | Line   | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person |  |   |   |                |  |  |
| (City)   | (Sta  | ite) (2                                    | Zip)  | ,       |   |     |   |     |  |     |  |  |  |   |   |                |  |  |
|  |   | Tabl                                       | e I - Nor                                     | n-Deriv | ative   | Sec | urities   | Acq | uired,   | Dis | posed of   | f, or Ben  | eficiall                               | y Owned   |   |                |  |  |
| Date   |   |  |   | Date    | ate   E<br> onth/Day/Year)   if   |     | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |     | 3.<br>Transaction<br>Code (Instr.<br>8)                        |     | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4 |  |  | Securitie<br>Beneficia<br>Owned F                   | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following                           |                | : Direct<br>r Indirect<br>str. 4)  | 7. Nature of Indirect Beneficial Ownership |
|  |   |  |   |         |   |     |   |     | Code   | v   | Amount   | (A) or<br>(D)  | Price                                  | Reported<br>Transacti<br>(Instr. 3 a                | ion(s)  |                |  | (Instr. 4)                                 |
| Common Stock 03/31/  |   |  |   |         | /2018   |     | F <sup>(1)</sup>  |     | 131  | D   | \$14.3   | 169,072(2)   |  |   | D   |                |  |  |
|  |   | Т  |   |         |   |     |   |     |  |     | osed of,<br>onvertib                                       |  |  | Owned   |   |                |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deeme<br>Execution<br>if any<br>(Month/Da | Date,   | Date, Transact<br>Code (In  |     |   |     | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |     |  | 7. Title and Amor<br>of Securities<br>Underlying<br>Derivative Secur<br>(Instr. 3 and 4)   |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e<br>s<br>ully | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4)      |
|  |   |  |   |         | Code  | v   | (A)   |     | Date<br>Exercisa   |     | Expiration<br>Date   | Title  | Amount<br>or<br>Number<br>of<br>Shares |   |   |                |  |  |
| Performance<br>Stock Unit  | \$0.0   | 03/30/2018                                 |   |         | A   |     | 55,000  |     | (3)  |     | 03/30/2022   | Common<br>Stock  | 55,000                                 | \$0   | 55,00   | 0              | D  |  |

## **Explanation of Responses:**

- 1. Represents the withholding of shares to satisfy tax withholding obligation.
- 2. Total amount of shares beneficially owned includes shares deferred upon vesting of certain restricted stock units. The deferred shares will be settled in accordance with the terms of the deferral election.
- 3. The performance-based restricted stock units will be eligible to vest during a four-year performance period following the award's grant date based on the company's stock price trading at certain pre-determined price thresholds. Once a price threshold is achieved, the portion of the award related to that threshold will vest one year later, subject to the individual continuing to provide services to the company through the applicable vesting date. Any shares underlying the performance-based restricted stock units that vest will be settled pursuant to the terms of a deferral election.

## Remarks:

/s/ Scott Giesler, as attorney-infact for David K. Francis

04/03/2018

\*\* Signature of Reporting Person

Date

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.