FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPRO	VAL				
OMB Number:	3235-0287				
Estimated average burde	en				
hours per response:	0.5				

# 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* <u>Gibbs Samuel C III</u>							2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>eHealth, Inc.</u> [ EHTH ]									all app		g Persor	10% O	wner
(Last) (First) (Middle) C/O EHEALTH, INC. 440 EAST MIDDLEFIELD RD					3. Date of Earliest Transaction (Month/Day/Year) 02/16/2013										X	belov	cer (give title Other (sp below) res., eHealth Gov. Systems			
(Street)  MOUNTAIN VIEW  CA  94043  (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)										. Indiv ine) X	Form	al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date				Date	Date E (Month/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3, 4				Securities Beneficially		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount		(A) or (D)	Price	,	Transa	action(s) 3 and 4)			(Instr. 4)
Common Stock 02/1					16/2013						137		D	\$19	.71	13,652		Г	)	
		Та									sed of, onvertib					vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemo Execution if any (Month/Da	Date,	Date, Transactio Code (Inst				6. Date E Expiration (Month/I	n Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3		vative urity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owr Forr Dire or Ir (I) (II	nership n: ct (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nu of	ount mber ares						

#### **Explanation of Responses:**

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

## Remarks:

/s/ Jennifer Cashio, as attorneyin-fact for Samuel C. Gibbs III 02/20/2013

\*\* 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.