FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPROVAL OMB Number: Estimated average burden 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).

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

Name and Address of Reporting Person* Jennings Jay Walter						2. Issuer Name and Ticker or Trading Symbol eHealth, Inc. [EHTH]									Check	all app	licable)	1	Person(s) to Issu 10% Own Other (sp	
(Last) (First) (Middle) C/O EHEALTH, INC. 440 EAST MIDDLEFIELD ROAD					3. Date of Earliest Transaction (Month/Day/Year) 10/01/2017										X	belov			below)	
(Street) MOUNTAIN VIEW CA 94043 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									. Indivine)	·				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date					Date Exc Month/Day/Year) if a		Execution	A. Deemed xecution Date, any Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3, 4			and Secu Bene		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount		(A) or (D)	Price	Tran		action(s) 3 and 4)			(Instr. 4)
Common Stock 10/01/					01/2017						470		D	\$23.89		38,056		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)	ivative Conversion Date Eurity or Exercise (Month/Day/Year) if			recution Date, any		4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Pr Deriv Secu (Inst	ative crity :	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	of	nber ıres						

Explanation of Responses:

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

Remarks:

/s/ Scott Giesler as attorney-in-10/03/2017 fact for Jay W. Jennings

** 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.