eHealth

eHealth Signs Proxy Direct Enrollment Agreement With CMS to Enroll Customers Into Qualified Health Plans Using Advanced Premium Tax Credits Without Leaving eHealth.com for Open Enrollment for 2018 Coverage

November 2, 2017

MOUNTAIN VIEW, Calif.--(BUSINESS WIRE)--Nov. 2, 2017-- Today, eHealth, Inc. (NASDAQ: EHTH) (www.ehealth.com) confirms its operating subsidiary, eHealthInsurance Services, Inc., has entered into a Proxy Direct Enrollment Agreement (the "DE Proxy Agreement") with the Centers for Medicare and Medicaid Services (CMS).

The DE Proxy Agreement allows eHealth to utilize a new qualified health plan ("QHP") enrollment process through the Federally Facilitated Marketplace, (FFM or Healthcare.gov) that makes it possible for eHealth to enroll customers into QHPs, and apply for advanced payment of premium tax credits without leaving eHealth.com during the open enrollment period for 2018 coverage.

"We want to commend CMS for the way they've engaged with the private sector to aid the enrollment into qualified health plans," said eHealth CEO Scott Flanders. "The individual insurance market remains challenged, but these types of partnerships have the potential to increase access to coverage for millions of low-income consumers, which will ultimately help CMS achieve its goal of expanding access to quality, affordable health coverage that meets the needs of the American people."

"The Trump administration should be commended for the way its department of Health and Human Services has embraced the private sector to boost enrollment in ACA-compliant health coverage."

For additional details on the DE Proxy Agreement, please see eHealth's October 31, 2017 filing with the Securities and Exchange Commission on Form 8-K.

Forward-Looking Statements

This press release contains statements that are forward-looking statements as defined within the Private Securities Litigation Reform Act of 1995. These include statements regarding eHealth's ability to enroll customers into QHPs and apply for advanced payment of premium tax credits through the FFM without leaving eHealth's website during the open enrollment period for 2018 coverage, and the potential that the new QHP enrollment process will increase access to coverage for millions of low-income consumers, help CMS achieve its goal of expanding access to quality and affordable health coverage and boost enrollment in ACA-compliant health coverage. These forward-looking statements are inherently subject to various risks and uncertainties that could cause actual results to differ materially from the statements made, including risks associated with: our ability to enroll individuals in qualified health plans through the FFM without leaving our website; our ability to maintain the DE Proxy Agreement and other agreements with the CMS which need to be renewed every year; our ability to satisfy the conditions and requirements contained in the DE Proxy Agreement and applicable laws, regulations and regulatory guidance; our ability to maintain a compliant web platform incorporating the requirements of the DE Proxy Agreement, any other relevant agreements with CMS, and applicable laws, regulations and regulatory guidance; our ability to obtain qualified health plan information from our health insurance carrier partners and CMS and incorporate it into our web platform; our ability to maintain a privacy and security program to conform to the privacy and security requirements of the DE Proxy Agreement as well as laws, regulations and regulatory guidance applicable to us; the availability, reliability and performance of the new enrollment process, the FFM website and systems; our ability to timely meet the applicable requirements and potential changes in laws, regulations and regulatory guidance; our ability to enroll a large number of consumers into QHPs using this new enrollment process; the ability for the new QHP enrollment process to handle different types of health insurance applications; competition; a reduction of health insurance offerings among carriers and carriers exiting the market of selling individual and family health insurance; the impact of increased health insurance costs on demand; our success in marketing and selling QHPs; changes in member conversion rates and other factors that could cause operating, financial, and other results to differ, which are described in eHealth's most recent Annual Report on Form 10-K or Quarterly Report on Form 10-Q filed with the Securities and Exchange Commission and available on the investor relations page of eHealth's website at http://www.ehealthinsurance.com and on the Securities and Exchange Commission's website at www.sec.gov. eHealth undertakes no obligation to update any forward-looking statement to conform to actual results or changes in intentions or expectations.

About eHealth

eHealth, Inc. (NASDAQ: EHTH) owns eHealth.com, a leading private online health insurance exchange where individuals, families and small businesses can compare health insurance products from brand-name insurers side by side and purchase and enroll in coverage online and over the phone. eHealth offers thousands of individual, family and small business health plans underwritten by many of the nation's leading health insurance companies. eHealth (through its subsidiaries) is licensed to sell health insurance in all 50 states and the District of Columbia. eHealth also offers educational resources, exceptional telephonic support, and powerful online and pharmacy-based tools to help Medicare beneficiaries navigate Medicare health insurance options, choose the right plan and enroll in select plans online or over the phone through Medicare.com (www.Medicare.com), eHealthMedicare.com (www.eHealthMedicare.com) and PlanPrescriber.com (www.PlanPrescriber.com).

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