FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

	Check this box if no longer subjec
	to Section 16. Form 4 or Form 5
$\cup$	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* SOISTMAN FRANCIS S JR					2. Issuer Name and Ticker or Trading Symbol eHealth, Inc. [ EHTH ]								5. Relationship of Reporting Person(s) to Is (Check all applicable)  X Director 10% Ow						
(Last)	(Fir EALTH, IN	,	1iddle)		3. Date of Earliest Transaction (Month/Day/Year) 06/22/2023								X	belov	cer (give title ow) Chief Executiv		Other (specify below)  ve Officer		
2625 AUGUSTINE DRIVE, SUITE 150				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) SANTA CLARA	SANTA CA 95054											X	X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Sta	ate) (Z	ip)		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.										ended to				
		Table	- No	n-Deriva	tive S	ecur	rities	Acq	uired,	Dis	oosed of	f, or I	Benef	ficiall	y Owr	ned			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)				//Year)	eemed ution Date, th/Day/Year)				ies Acquired (A Of (D) (Instr. 3		, 4 and Secu		cially 1	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) (D)	or P	rice						
Common Stock 06/22/20					2023			<b>F</b> <sup>(1)</sup>		1,720	20 D		88.42	791,970		970 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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) of Dispo	erivative equired ) or sposed (D) estr. 3, 4		. Date Exercisable and expiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4		De Se (In:	Price of rivative curity str. 5)	tive derivative		10. 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						

## Explanation of Responses:

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

## Remarks:

/s/ Sonwha Lee as attorney-

in-fact for Francis S. 06/26/2023

Soistman

\*\* 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.