FORM 4

obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
Scenori 10. Form 4 of Form 5	

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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>Shaughnessy William T</u>						2. Issuer Name and Ticker or Trading Symbol eHealth, Inc. [EHTH]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
						cricata, mc. [Ellill]									X Direc		ctor	10% Owner			
(Last)	(Fii	(First) (Middle)				2 Date of Fedical Transaction (Month (Date))									X	Officer (give title below)			Other (specify below)		
C/O EHE	C/O EHEALTH, INC.					3. Date of Earliest Transaction (Month/Day/Year) 03/27/2014									President and COO						
440 EAST MIDDLEFIELD ROAD																					
(Street) MOUNTAIN CA 94043					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					·	
VIEW	/IEW															Form Pers	m filed by More than One Reporting				
(City)	(St	ate) (2	Zip)													1 013	OII				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispo		Disposed	ities Acquired (A) d Of (D) (Instr. 3, 4			and Secu Bene Own		cially d Following	6. Owner: Form: Dir (D) or Ind (I) (Instr.	ect irect	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount		A) or D)	Price	т	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock 03/27/2					/27/2014						3,262		D	\$48.71		42,647		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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	Code (Insti				6. Date E Expiration (Month/E	n Dat		7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		str. 3	8. Pric Deriva Securi (Instr.	ative irity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nur of	ount nber ires							

Explanation of Responses:

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

Remarks:

/s/ Jennifer Cashio, as attorney-

in-fact for William T.

03/31/2014

Date

Shaughnessy

** Signature of Reporting Person

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.