UNITED STATES SECURITIES AND EXCHANGE COMMISSION WASHINGTON, D.C. 20549

FORM 8-K

CURRENT REPORT

PURSUANT TO SECTION 13 OR 15(d) OF THE SECURITIES EXCHANGE ACT OF 1934

Date of Report (date of earliest event reported): February 18, 2021

EHEALTH, INC.

Delaware (State or other jurisdiction of incorporation)

(Exact Name of Registrant as Specified in its Charter)

001-33071
(Commission File Number)

56-2357876 (I.R.S. Employer Identification No.)

2625 AUGUSTINE DRIVE, SECOND FLOOR SANTA CLARA, CA 95054

	(Address of principal executive offices) (Zip Code)	
	(650) 584-2700 (Registrant's telephone number, including area code)	
	Not applicable (Former name or former address, if changed since last report.))
Check the appropriate box below if the Form 8-K filing is intended	to simultaneously satisfy the filing obligation of the registrant under any of the fo	ollowing provisions:
Written communications pursuant to Rule 425 under the Secur Soliciting material pursuant to Rule 14a-12 under the Exchang Pre-commencement communications pursuant to Rule 14d-2(b Pre-commencement communications pursuant to Rule 13e-4(c)	Act (17 CFR 240.14a-12) under the Exchange Act (17 CFR 240.14d-2(b))	
Securities registered pursuant to Section 12(b) of the Act:		
Title of each class	Trading Symbol(s)	Name of each exchange on which registered
Common Stock, par value \$0.001 per share	ЕНТН	The Nasdaq Stock Market LLC
Indicate by check mark whether the registrant is an emerging growt	company as defined in Rule 405 of the Securities Act of 1933 (17 CFR §230.40	05) or Rule 12b-2 of the Securities Exchange Act of 1934 (17 CFR §240.12b-2).
		Emerging growth company
If an emerging growth company, indicate by check mark if the regis the Exchange Act. \Box	rant has elected not to use the extended transition period for complying with any	y new or revised financial accounting standards provided pursuant to Section 13(a) of

Item 2.02 Results of Operations and Financial Condition.

On February 18, 2021, eHealth, Inc. (the "Company") issued a press release announcing its financial results for the fourth quarter and year ended December 31, 2020. A copy of the press release is furnished as Exhibit 99.1 to this Current Report on Form 8-K and is incorporated herein by reference.

On February 18, 2021, the Company posted supplemental investor material on its investor relations webpage at http://ir.ehealthinsurance.com. The Company intends to use its investor relations webpage as a means of disclosing material non-public information and for complying with its disclosure obligations under Regulation FD. A copy of the supplemental investor materials is also furnished as Exhibit 99.2 to this Current Report on Form 8-K and is incorporated herein by reference.

The information in Item 2.02 of this Current Report on Form 8-K and the exhibits attached hereto are intended to be "furnished" and shall not be deemed "filed" for purposes of Section 18 of the Securities Exchange Act of 1934, as amended. Except as shall be expressly set forth by specific reference in such filing, the information contained herein and in the accompanying exhibits shall not be incorporated by reference into any filing with the Securities and Exchange Commission made by the Company, whether made before or after the date hereof, regardless of any general incorporation language in such filing.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits

Exhibit No. Description

99.1 Press Release of eHealth, Inc. dated February 18, 2021 (eHealth, Inc. Announces Fourth Quarter and Fiscal 2020 Results)

99.2 Financial Results Conference Call Slides of eHealth, Inc. dated February 18, 2021

SIGNATURE

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

Date: February 18, 2021

eHealth, Inc. /s/ Derek N. Yung

Derek N. Yung Chief Financial Officer (Principal Financial Officer)



eHealth, Inc. Announces Fourth Quarter 2020 and Fiscal 2020 Results

Fourth Quarter 2020 Overview

- Revenue for the fourth quarter of 2020 was \$293.3 million, a 3% decrease compared to \$301.7 million for the fourth quarter of 2019.
- GAAP net income for the fourth quarter of 2020 was \$59.9 million compared to net income of \$88.8 million for the fourth quarter of 2019.
- · Adjusted EBITDA was \$84.2 million for the fourth quarter of 2020 compared to \$142.6 million for the fourth quarter of 2019.
- Revenue and adjusted EBITDA for the fourth quarter of 2019 include the positive impact of \$42.3 million in revenue resulting from a change in estimate for expected cash commission collections relating to Medicare Advantage plans enrolled in prior to the fourth quarter of 2019.
- Excluding the impact of the \$42.3 million change in estimate in the fourth quarter of 2019, our fourth quarter 2020 revenue increased 13% compared to a year ago.
- Fourth quarter 2020 approved members for Medicare Advantage products of 217,278, a 30% increase compared to the fourth quarter of 2019.
- Drove online penetration with 43% of major medical Medicare applications submitted online in the fourth quarter of 2020 compared to 36% in the fourth quarter of 2019.
- · Launched online Customer Center aimed at further enhancing consumer experience and increasing customer engagement and retention. Customer Center sign-ups are currently above 100,000.

SANTA CLARA, California — February 18, 2021 — eHealth, Inc. (NASDAQ: EHTH), a leading private online health insurance marketplace, today announced its financial results for the fourth quarter and fiscal year ended December 31, 2020.

"Although 2020 presented challenges, eHealth made notable progress building out our capabilities, and positioning the company to capture significant market opportunities ahead," said Scott Flanders, Chief Executive Officer of eHealth. "As part of our strategy to drive growth, increase quality of enrollments and achieve higher lifetime values, we made investments in our e-commerce platform and implemented a multifaceted program to improve member retention."

"We believe that issues that impacted our fourth quarter performance were isolated and can be corrected in the near term. We took decisive and critical actions to fix these issues and cement a strong foundation for our long-term performance. Our actions are already demonstrating results in the first quarter in the form of increased agent productivity, customer engagement and enrollment growth. Looking ahead, we are confident that we have taken steps necessary to put us on track to meaningfully improve performance in 2021 and beyond."

Mr. Flanders concluded, "Over the last four-plus years, we have built a strong foundation with a best-in-class consumer facing e-commerce platform and executed a deliberate plan that has enabled us to

achieve significant growth. As we move into eHealth's next stage, we are confident that we have the right strategy to continue driving growth, enhance profitability and deliver meaningful returns to shareholders."

GAAP — Fourth Quarter of 2020 Results

Revenue — Revenue for the fourth quarter of 2020 totaled \$293.3 million, a 3% decrease compared to \$301.7 million for the fourth quarter of 2019. Commission revenue for the fourth quarter of 2020 totaled \$254.2 million, a 10% decrease compared to \$282.1 million for the fourth quarter of 2019. Other revenue for the fourth quarter of 2020 was \$39.1 million, a 99% increase compared to \$19.7 million for the fourth quarter of 2019.

Excluding the impact of \$42.3 million in revenue resulting from a change in estimate for expected cash commission collections relating to Medicare Advantage plans enrolled in prior to the fourth quarter of 2019 that we reported with our fourth quarter 2019 results, fourth quarter 2020 total revenue and commission revenue increased 13% and 6%, respectively, compared to the fourth quarter of 2019.

Revenue from the Medicare segment was \$269.9 million for the fourth quarter of 2020, a 5% decrease compared to \$282.6 million for the fourth quarter of 2019. Excluding the \$42.3 million in revenue resulting from the change in estimate we reported for the fourth quarter of 2019, fourth quarter 2020 Medicare segment revenue increased 12% compared to the fourth quarter of 2019. Revenue from the Individual, Family and Small Business segment was \$23.4 million for the fourth quarter of 2020, a 22% increase compared to \$19.1 million for the fourth quarter of 2019.

Income from Operations — Income from operations was \$79.4 million for the fourth quarter of 2020, a 36% decrease compared to \$123.1 million for the fourth quarter of 2019.

Pre-Tax Income — Pre-tax income was \$79.3 million for the fourth quarter of 2020, a 36% decrease compared to \$123.4 million for the fourth quarter of 2019.

Provision for Income Taxes — Provision for income taxes was \$19.5 million for the fourth quarter of 2020, a 44% decrease compared to \$34.6 million for the fourth quarter of 2019.

Net Income — Net income was \$59.9 million for the fourth quarter of 2020, or \$2.20 net income per diluted share, a 33% decrease compared to \$88.8 million, or \$3.58 net income per diluted share, for the fourth quarter of 2019.

Segment Profit — Medicare segment profit was \$82.6 million for the fourth quarter of 2020, a 45% decrease compared to \$149.3 million for the fourth quarter of 2019. Excluding the impact of the \$42.3 million in revenue in the fourth quarter of 2019 related to the change in estimate discussed above, fourth quarter 2020 Medicare segment profit decreased 23% compared to the fourth quarter of 2019. Individual, Family and Small Business segment profit was \$15.9 million for the fourth quarter of 2020, a 91% increase compared to \$8.3 million for the fourth quarter of 2019.

Non-GAAP⁽¹⁾ — Fourth Quarter of 2020 Results

Non-GAAP Net Income — Non-GAAP net income for the fourth quarter of 2020 was \$63.1 million, or \$2.32 non-GAAP net income per diluted share, compared to non-GAAP net income of \$102.5 million, or \$4.13 non-GAAP net income per diluted share, for the fourth quarter of 2019.

Non-GAAP net income and non-GAAP net income per diluted share for the fourth quarter of 2020 are calculated by excluding \$3.5 million of stock-based compensation expense, \$0.3 million of amortization of intangible assets and \$0.6 million of the income tax effect of these non-GAAP adjustments from GAAP net income and GAAP net income per diluted share.

Non-GAAP net income and non-GAAP net income per diluted share for the fourth quarter of 2019 are calculated by excluding \$9.2 million of stock-based compensation expense, \$9.0 million expense related to the change in fair value of earnout liability related to our acquisition of GoMedigap,\$0.5 million of amortization of intangible assets, and \$5.0 million of the income tax effect of these non-GAAP adjustments from GAAP net income and GAAP net income per diluted share.

Adjusted EBITDA — Adjusted EBITDA was \$84.2 million for the fourth quarter of 2020 compared to \$142.6 million for the fourth quarter of 2019. Excluding the impact of the \$42.3 million in revenue in the fourth quarter of 2019 related to the change in estimate discussed above, our adjusted EBITDA was \$100.3 million in the fourth quarter of 2019.

Approved Members, New Paying Members and Estimated Membership

Approved Members — The number of approved members for all Medicare products, which includes Medicare Advantage, Medicare Supplement and Medicare Part D Prescription Drug Plans, was 281,044 in the fourth quarter of 2020, a 3% increase compared to 273,244 in the fourth quarter of 2019. The number of approved members for Medicare Advantage products was 217,278 in the fourth quarter of 2020, a 30% increase compared to 167,073 in the fourth quarter of 2019. The number of approved members for major medical individual and family plan products was 14,281 in the fourth quarter of 2020, a 2% decrease compared to 14,547 in the fourth quarter of 2019.

New Paying Members — The number of new paying members for all Medicare products was 172,365 in the fourth quarter of 2020, a 10% increase compared to 156,892 in the fourth quarter of 2019. The number of new paying members for Medicare Advantage products was 136,857 in the fourth quarter of 2020, an 18% increase compared to 116,351 in the fourth quarter of 2019. The number of new paying members for major medical individual and family plan products was 4,137 in the fourth quarter of 2020, a 36% increase compared to 3,032 in the fourth quarter of 2019. New paying members consist of approved members from the period presented and any periods prior to the period presented from whom we have received an initial commission payment during the period presented.

Estimated Membership — Total estimated membership as of December 31, 2020 was 1,285,346, an 12% increase compared to the 1,146,115 estimated members we reported as of December 31, 2019. Estimated Medicare membership as of December 31, 2020 was 875,973, a 23% increase compared to the 710,649 estimated members reported as of December 31, 2019. Estimated Medicare Advantage membership as of December 31, 2020 was 533,282, a 32% increase compared to the 404,694 estimated members reported as of December 31, 2019. Estimated major medical individual and family plan membership as of December 31, 2020 was 116,247, a 10% decrease compared to the 128,487 estimated members reported as of December 31, 2019.

⁽¹⁾ See Non-GAAP Financial Information section for definitions of our non-GAAP financial measures.

Online Submitted Applications — The percentage of applications for Medicare Advantage and Medicare Supplement products submitted online through our platform, which is a combination of agent unassisted and partially agent assisted online applications, increased from 36.1% for the fourth quarter of 2019 to 42.6% for the fourth quarter of 2020.

Cash - Fourth Quarter of 2020

Cash Flows — Net cash used in operating activities was \$96.9 million for the fourth quarter of 2020 compared to net cash used in operating activities of \$56.8 million for the fourth quarter of 2019.

GAAP — Fiscal Year 2020 Results

Revenue — Revenue for the year ended December 31, 2020 totaled \$582.8 million, a 15% increase compared to \$506.2 million for the year ended December 31, 2019. Commission revenue for the year ended December 31, 2020 totaled \$508.2 million, a 9% increase compared to \$466.7 million for the year ended December 31, 2019. Other revenue for the year ended December 31, 2020 was \$74.6 million, an 89% increase compared to \$39.5 million for the year ended December 31, 2019.

Excluding the impact of the \$42.3 million in revenue in the fourth quarter of 2019 related to the change in estimate discussed above, our full year 2020 total revenue and commission revenue increased 26% and 20%, respectively, compared to 2019.

Revenue from our Medicare segment was \$516.8 million for the year ended December 31, 2020, a 16% increase compared to \$447.0 million for the year ended December 31, 2019. Excluding the impact of the \$42.3 million in revenue in the fourth quarter of 2019 related to the change in estimate discussed above, our full year 2020 Medicare segment revenue increased 28% compared to 2019. Revenue from our Individual, Family and Small Business segment was \$66.0 million for the year ended December 31, 2020, an 11% increase compared to \$59.2 million for the year ended December 31, 2019.

Income from Operations — Income from operations for the year ended December 31, 2020 was \$53.3 million, a 34% decrease compared to income from operations of \$81.4 million for the year ended December 31, 2019.

Pre-Tax Income — Pre-tax income for the year ended December 31, 2020 was \$54.0 million, a 35% decrease compared to pre-tax income of \$83.5 million for the year ended December 31, 2019.

Provision for Income Taxes — Provision for income taxes for the year ended December 31, 2020 was \$8.5 million, a 49% decrease compared \$16.6 million for the year ended December 31, 2019.

Net Income — Net income for the year ended December 31, 2020 was \$45.5 million, or \$1.68 net income per diluted share, a 32% decrease compared to net income of \$66.9 million, or \$2.73 net income per diluted share, for the year ended December 31, 2019.

Segment Profit — Medicare segment profit was \$102.0 million for the year ended December 31, 2020, a 34% decrease compared to \$155.2 million for the year ended December 31, 2019. Excluding the impact of the \$42.3 million in revenue in the fourth quarter of 2019 related to the change in estimate discussed above, our full year 2020 Medicare segment revenue decreased 10% compared to 2019. Individual, Family and Small Business segment profit was \$39.4 million for the year ended December 31, 2020, a 69% increase compared to \$23.4 million for the year ended December 31, 2019.

Non-GAAP(1) - Fiscal Year 2020 Results

Non-GAAP Net Income — Non-GAAP net income for the year ended December 31, 2020 was \$65.6 million, or \$2.43 non-GAAP net income per diluted share, compared to non-GAAP net income per diluted share, for the year ended December 31, 2019.

Non-GAAP net income and non-GAAP net income per diluted share for the year ended December 31, 2020 are calculated by excluding \$25.2 million of stock-based compensation expense, \$1.5 million of amortization of intangible assets, and \$6.5 million of the income tax effect of these non-GAAP adjustments from GAAP net income and GAAP net income per diluted share.

Non-GAAP net income and non-GAAP net income per diluted share for the year ended December 31, 2019 are calculated by excluding \$22.6 million of stock-based compensation expense, \$24.1 million of expense for change in fair value of earnout liability, \$2.2 million of amortization of intangible assets, and \$13.7 million of the income tax effect of these non-GAAP adjustments from GAAP net income and GAAP net income per diluted share.

Adjusted EBITDA — Adjusted EBITDA was \$83.7 million for the year ended December 31, 2020 compared to \$133.2 million for the year ended December 31, 2019. Excluding the impact of the \$42.3 million in revenue in the fourth quarter of 2019 related to the change in estimate discussed above, adjusted EBITDA was \$90.9 million for the year ended December 31, 2019.

Approved Members and New Paying Members

Approved Members — The number of approved members for all Medicare products, which includes Medicare Advantage, Medicare Supplement and Medicare Part D Prescription Drug Plans, was 502,560 for the year ended December 31, 2020, a 16% increase compared to 434,926 for the year ended December 31, 2019. The number of approved members for Medicare Advantage products was 387,652 for the year ended December 31, 2020, a 39% increase compared to 279,561 for the year ended December 31, 2019. The number of approved members for major medical individual and family plan products was 33,328 for the year ended December 31, 2020, a 4% increase compared to 32,186 for the year ended December 31, 2019.

New Paying Members — The number of new paying members for all Medicare products was 465,398 for the year ended December 31, 2020, a 30% increase compared to 357,416 for the year ended December 31, 2019. The number of new paying members for Medicare Advantage products was 324,916 for the year ended December 31, 2020, a 38% increase compared to 235,978 for the year ended December 31, 2019. The number of new paying members for major medical individual and family plan products was 30,657 for the year ended December 31, 2020, a 1% decrease compared to 30,997 for the year ended December 31, 2019. New paying members consist of approved members from the period presented and any periods prior to the period presented from whom we have received an initial commission payment during the period presented.

Online Submitted Applications — The percentage of applications for Medicare Advantage and Medicare Supplement products submitted online through our platform, which is a combination of agent unassisted and partially agent assisted online applications, increased from 26.9% for the year ended December 31, 2019 to 36.6% for the year ended December 31, 2020.

⁽¹⁾ See Non-GAAP Financial Information section in this press release for definitions of our non-GAAP financial measures

Cash — Fiscal Year Results

Cash Flows — Net cash used in operating activities was \$107.9 million for the year ended December 31, 2020 compared to net cash used in operating activities of \$71.5 million for the year ended December 31, 2010

2021 Guidance

Based on information available as of February 18, 2021, eHealth is providing its guidance for the full year ending December 31, 2021, excluding the potential impact from the agreement with H.I.G. Capital for a \$225 million investment announced on January 29, 2021. These expectations are forward-looking statements and eHealth assumes no obligation to update these statements. Actual results may be materially different and are affected by the risk factors and uncertainties identified in this press release and in eHealth's annual and quarterly filings with the Securities and Exchange Commission.

The following guidance is for the full year ending December 31, 2021:

- Total revenue is expected to be in the range of \$660.0 million to \$700.0 million. Revenue from the Medicare segment is expected to be in the range of \$621.0 million to \$659.0 million. Revenue from the Individual, Family and Small Business segment is expected to be in the range of \$39.0 million to \$41.0 million.
- GAAP net income is expected to be in the range of \$42.0 million to \$57.0 million.
- Adjusted EBITDA^(a) is expected to be in the range of \$100.0 million to \$115.0 million.
- Medicare segment profit^(b) is expected to be in the range of \$138.0 million to \$155.0 million, and Individual, Family and Small Business segment profit is expected to be in the range of \$18.0 million to \$19.0 million.
- Corporate(c) shared service expenses, excluding stock-based compensation and depreciation and amortization expense, is expected to be in the range of \$56.0 million to \$59.0 million.
- Cash used in operations is expected to be in the range of \$85.0 million to \$95.0 million, and cash used for capital expenditures is expected to be in the range of \$24.0 million to \$27.0 million.
- GAAP net income per diluted share is expected to be in the range of \$1.53 to \$2.08 per share.
- Non-GAAP net income per diluted share^(a) is expected to be in the range of \$2.77 to \$3.26 per share.

⁽a) See Non-GAAP Financial Information section of this press release for definitions of our non-GAAP financial measures

⁽b) Segment profit is calculated as revenue for the applicable segment less marketing and advertising, customer care and enrollment, technology and content and general and administrative operating expenses, excluding stock-based compensation expense, depreciation and amortization, restructuring charges, and amortization of intangible assets, that are directly attributable to the applicable segment and other indirect marketing and advertising, customer care and enrollment and technology and content operating expenses, excluding stock-based compensation expense, depreciation and amortization, restructuring charges, and amortization of intangible assets, allocated to the applicable segment based on usage.

⁽c) Corporate consists of other indirect general and administrative operating expenses, excluding stock-based compensation and depreciation and amortization expense, which are managed in a corporate shared services environment and, since they are not the responsibility of segment operating management, are not allocated to the reportable segments.

Webcast and Conference Call Information

A Webcast and conference call will be held today, Thursday, February 18, 2021 at 5:00 p.m. Eastern / 2:00 p.m. Pacific Time. The live Webcast and supporting presentation slides will be available on the Investor Relations section of eHealth's website at http://ir.ehealthinsurance.com. Individuals interested in listening to the conference call may do so by dialing (877) 930-8066 for domestic callers and (253) 336-8042 for international callers. The participant passcode is 5692252. A telephone replay will be available two hours following the conclusion of the call for a period of seven days and can be accessed by dialing (855) 859-2056 for domestic callers and (404) 537-3406 for international callers. The call ID for the replay is 5692252. The live and archived webcast of the call will also be available on eHealth's website at http://www.ehealthinsurance.com under the Investor Relations section.

About eHealth, Inc.

eHealth, Inc. (NASDAQ: EHTH) operates a leading health insurance marketplace at hetalth.com and ehealth.com with technology that provides consumers with health insurance enrollment solutions. Since 1997, we have connected more than 8 million members with quality, affordable health insurance, Medicare options, and ancillary plans. Our proprietary marketplace offers Medicare Advantage, Medicare Supplement, Medicare Part D prescription drug, individual, family, small business and other plans from over 180 health insurance carriers across fifty states and the District of Columbia.

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 our expected growth and financial performance, our strategy to drive growth, increase quality of enrollments and achieve higher lifetime values, our member retention program, expectations regarding agent productivity, customer engagement and Medicare enrollment growth, our ability to correct issues that impacted our performance, our estimates regarding total membership, Medicare membership, lodividual and Family plan membership and ancillary and small business membership, our estimates regarding constrained lifetime values of commissions per member by product category, our estimates regarding costs per approved member, and our guidance for the full year ending December 31, 2021, including our guidance for total revenue and revenue from our Medicare segment and our Individual, Family and Small Business segment, GAAP net income, Adjusted EBITDA, profit from our Medicare segment and our Individual, Family and Small susiness segment, Corporate shared service expense, cash used in operations and cash used for capital expenditures, and GAAP net income per diluted share and non-GAAP net income per diluted share and non-GAAP net income per diluted share.

These forward-looking statements are inherently subject to various risks and uncertainties that could cause actual results to differ materially from the statements made. In particular, we are required by the Accounting Standards Codification 606 — Revenue from Contracts with Customers to make numerous assumptions that are based on historical trends and our management's judgment. These assumptions may change over time and have a material impact on our revenue recognition, guidance, and results of operations. Please review the assumptions stated in this press release carefully.

The risks and uncertainties that could cause our results to differ materially from those expressed or implied by such forward-looking statements include our ability to retain existing members and enroll new members during the annual healthcare open enrollment period, the Medicare annual enrollment period and a COVID-19 related or other special enrollment period; changes in laws, regulations and guidelines, including in connection with healthcare reform or with respect to the marketing and sale of Medicare plans; competition, including competition from government-run health insurance exchanges and other sources; the seasonality of our business and the fluctuation of our operating results; our ability to accurately estimate membership, lifetime value of commissions and commissions receivable; changes in product offerings among carriers on our ecommerce platform and the resulting impact on our commission

revenue; our ability to execute on our growth strategy in the Medicare market; the continued impact of the COVID-19 pandemic on our operations, business, financial condition and growth prospects, as well as on the general economy; changes in our management and key employees; exposure to security risks and our ability to safeguard the security and privacy of confidential data; our relationships with health insurance acriers; customer concentration and consolidation of the health insurance industry; our success in marketing and selling health insurance pans and our unit cost of acquisition; our bility to hire, train, retain and ensure the productivity of licensed health insurance agents and other employees; the need for health insurance carrier and regulatory approvals in connection with the marketing of Medicare-related insurance products; changes in the market for private health insurance; consumer satisfaction with our service; changes in member conversion rates; changes in commission rates; our ability to self qualified health insurance products; changes in the market for private health insurance; consumer satisfaction with our service; changes in member conversion rates; changes in commission rates; our ability to delive desired benefits from investments in our business, including membership growth and retention initiatives; reliance on marketing partners; the impact of our direct-to-consumer email, telephone and television marketing efforts; timing of receipt and accuracy of commission reports; payment practices of health insurance carriers; dependence on our operations in China; the restrictions in our debt obligations; the restrictions in our agreement with H.I.G. Capital; compliance with insurance and other laws and regulations; the outcome of litigation in which we are involved; and the performance, reliability and availability of our information technology systems, ecommerce platform and underlying network infrastructure. Other factors that could cause operating, financial and other results to differ a

All forward-looking statements in this press release are based on information available to eHealth as of the date hereof, and eHealth does not assume any obligation to update the forward-looking statements provided to reflect events that occur or circumstances that exist after the date on which they were made, except as required by law.

Non-GAAP Financial Information

This press release includes financial measures that are not calculated in accordance with U.S. generally accepted accounting principles (GAAP). To supplement eHealth's condensed consolidated financial statements presented in accordance with GAAP, eHealth presents investors with non-GAAP financial measures, including non-GAAP net income; non-GAAP net income per diluted share; and adjusted EBITDA.

- Non-GAAP net income consists of GAAP net income excluding the following items:

 the effects of expensing stock-based compensation related to stock options and restricted stock units,
 - change in fair value of earnout liability,
 - restructuring and reorganization charges.
 - purchase price adjustments,

 - amortization of intangible assets, other non-recurring charges (as noted below), and
 - the income tax impact of non-GAAP adjustments
- Non-GAAP net income per diluted share consists of GAAP net income per diluted share excluding the following items:
 - the effects of expensing stock-based compensation related to stock options and restricted stock units per diluted share, change in fair value of earnout liability per diluted share,

 - restructuring and reorganization charges per diluted share,
 - purchase price adjustments per diluted share,
 - amortization of intangible assets per diluted share,
 - other non-recurring charges (as noted below) per diluted share, and
 - the income tax impact of non-GAAP adjustments per diluted share.
- Adjusted EBITDA is calculated by excluding the impacts of interest income and expense, income tax expense (benefit), depreciation and amortization, stock-based compensation expense, change in fair value of earnout liability, restructuring and reorganization charges, purchase price adjustments, amortization of intangible assets, other income (expenses), net, convertible preferred stock dividends and other non-recurring charges to GAAP net income. Other non-recurring charges to GAAP net income may include transaction expenses in connection with capital raising transactions (whether debt, equity or equity-linked) and acquisitions, whether or not consummated, and the cumulative effect of a change in accounting principles.

eHealth believes that the presentation of these non-GAAP financial measures provides important supplemental information to management and investors regarding financial and business trends relating to eHealth's financial condition and results of operations. Management believes that the use of these non-GAAP financial measures provides consistency and comparability with eHealth's past financial reports. Management also believes that the items described above provide an additional measure of eHealth's operating results and facilitates comparisons of eHealth's core operating performance against prior periods and business model objectives. This information is provided to investors in order to facilitate additional analyses of past, present and future operating performance and as a supplemental means to evaluate eHealth's ongoing operations. eHealth believes that these non-GAAP financial measures are useful to investors in their assessment of eHealth's operating performance.

Non-GAAP net income, non-GAAP net income per diluted share and Adjusted EBITDA are not calculated in accordance with GAAP, and should be considered supplemental to, and not as a substitute for, or superior to, financial measures calculated in accordance with GAAP. Non-GAAP financial measures used in this press release have limitations in that they do not reflect all of the revenue and costs associated with the operations of eHealth's business and do not reflect income tax as determined in accordance with GAAP. As a result, you should not consider these measures in isolation or as a substitute for analysis of eHealth's results as reported under GAAP. eHealth expects to continue to incur the stock-based compensation costs and purchased intangible asset amortization costs described above, and exclusion of these costs, and their related income tax benefits, from non-GAAP financial measures should not be construed as an inference that these costs are unusual or infrequent. eHealth compensates for these limitations by prominently disclosing GAAP net income and GAAP net income per diluted share and providing investors with reconciliations from eHealth's GAAP operating results to the non-GAAP financial measures for the relevant periods.

The accompanying tables provide more details on the GAAP financial measures that are most directly comparable to the non-GAAP financial measures described above and the related reconciliations between these financial measures.

Investor Relations Contact

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http://ir.ehealthinsurance.com

(Tables to Follow)

EHEALTH, INC. CONDENSED CONSOLIDATED BALANCE SHEETS (In thousands)

	Decen	December 31, 2019		
Assets Current assets:	(Ui	naudited)		
Cash and cash equivalents	\$	43,759 \$	23,466	
Short-term marketable securities	·	49.620		
Accounts receivable		1,799	2,332	
Contract assets – commissions receivable – current		219,153	174,526	
Prepaid expenses and other current assets		16,661	7,822	
Total current assets		330,992	208,146	
Contract assets – commissions receivable – non-current		573,252	414,696	
Property and equipment, net		14,609	10,518	
Operating lease right-of-use assets		42,558	36,621	
Restricted cash		3,354	3,354	
Other assets		26,455	18,004	
Intangible assets, net		8,569	10,062	
Goodwill		40,233	40,233	
Total assets	\$	1,040,022 \$	741,634	
Liabilities and stockholders' equity				
Current liabilities:				
Accounts payable	\$	36,921 \$	24,554	
Accrued compensation and benefits		20,542	29,578	
Accrued marketing expenses		17,788	12,041	
Earnout liability – current		_	37,273	
Lease liabilities – current		5,192	4,759	
Deferred revenue		308	2,570	
Other current liabilities		3,657	2,210	
Total current liabilities	·	84,408	112,985	
Deferred income taxes – non-current		72,317	64,130	
Lease liabilities – non-current		41,369	34,305	
Other non-current liabilities		4,370	3,050	
Stockholders' equity:				
Common stock		38	35	
Additional paid-in capital		721,013	455,159	
Treasury stock, at cost		(199,998)	(199,998)	
Retained earnings		316,155	271,852	
Accumulated other comprehensive income		350	116	
Total stockholders' equity	\$	837,558 \$,	
Total liabilities and stockholders' equity	\$	1,040,022 \$	741,634	

EHEALTH, INC. CONDENSED CONSOLIDATED STATEMENTS OF OPERATIONS (In thousands, except per share amounts, unaudited)

	Three Months Ended December 31,				Year Ended December 31,					
	 2020		2019		2020		2019			
Revenue:			_		_		_			
Commission	\$ 254,203	\$	282,081	\$	508,189	\$	466,676			
Other	 39,113		19,667		74,585		39,525			
Total revenue	293,316		301,748		582,774		506,201			
Operating costs and expenses:										
Cost of revenue	1,923		1,956		4,083		2,738			
Marketing and advertising	105,298		77,392		209,340		150,249			
Customer care and enrollment	71,870		52,737		172,895		134,304			
Technology and content	18,402		15,598		65,188		47,085			
General and administrative	16,144		21,402		76,452		64,150			
Amortization of intangible assets	286		546		1,493		2,187			
Change in fair value of earnout liability	 		8,973				24,079			
Total operating costs and expenses	213,923		178,604		529,451		424,792			
Income from operations	 79,393		123,144		53,323		81,409			
Other income (expenses), net	(58)		266		666		2,090			
Income before income taxes	 79,335		123,410		53,989		83,499			
Provision for income taxes	19,462		34,586		8,539		16,612			
Net income	\$ 59,873	\$	88,824	\$	45,450	\$	66,887			
Net income per share:										
Basic	\$ 2.25	\$	3.74	\$	1.75	\$	2.90			
Diluted	\$ 2.20	\$	3.58	\$	1.68	\$	2.73			
Weighted-average number of shares used in per share:										
Basic	26,583		23,772		26,025		23,075			
Diluted	27,195		24,836		27,014		24,539			
(1) Includes stock-based compensation as follows:										
Marketing and advertising	\$ (36)	\$	2,018	\$	5,102	\$	4,230			
Customer care and enrollment	961		524		2,723		1,451			
Technology and content	2,495		1,665		5,460		3,611			
General and administrative	30		4,946		11,887		13,278			
Total stock-based compensation expense	\$ 3,450	\$	9,153	\$	25,172	\$	22,570			

EHEALTH, INC. CONDENSED CONSOLIDATED STATEMENTS OF CASH FLOWS (In thousands, unaudited)

	(In thousands, unaudite	ed)			
		Three Months En	ded December 31.		Ended nber 31.
	-	2020	2019	2020	2019
Operating activities:	· 				
Net income	\$	59,873	\$ 88,824	\$ 45,450	\$ 66,887
Adjustments to reconcile net income to net cash used in operating activities:					
Depreciation and amortization		1,090	830	3,694	2,983
Amortization of internally developed software		2,449	1,378	7,756	3,821
Amortization of intangible assets		286	546	1,493	2,187
Stock-based compensation expense		3,450	9,153	25,172	22,570
Deferred income taxes		19,799	34,363	8,817	16,197
Change in fair value of earnout liability		_	8,973	_	24,079
Other non-cash items		670	181	1,091	(755)
Changes in operating assets and liabilities:					
Accounts receivable		2,055	(1,650)	533	1,270
Contract assets – commissions receivable		(188,437)	(231,486)	(205,209)	(243,364)
Prepaid expenses and other assets		3,218	8,880	(6,180)	(466)
Accounts payable		15,490	6,539	12,294	19,694
Accrued compensation and benefits		(1,598)	11,438	(9,036)	8,814
Accrued marketing expenses		11,196	7,955	5,747	1,028
Deferred revenue		(26,163)	(6,513)	(2,262)	1,694
Accrued expenses and other liabilities		(279)	3,811	2,780	1,869
Net cash used in operating activities		(96,901)	(56,778)	(107,860)	(71,492)
Investing activities:					
Capitalized internal-use software and website development costs		(3,923)	(3,875)	(16,005)	(10,231)
Purchases of property and equipment and other assets		(1,297)	(1,025)	(7,751)	(6,641)
Purchases of marketable securities		_	_	(180,505)	_
Proceeds from redemption and maturities of marketable securities		60,228	_	130,978	_
Payments for security deposits		_	_	_	(72)
Net cash provided by (used in) investing activities	_	55,008	(4,900)	(73,283)	(16,944)
Financing activities:					
Proceeds from issuance of common stock, net of issuance costs		_	_	228,024	126,051
Net proceeds from exercise of common stock options		364	367	1,941	5,535
Repurchase of shares to satisfy employee tax withholding obligations		(2,634)	(2,770)	(19,808)	(14,281)
Debt issuance costs			(517)		(517)
Repayment of debt		_		_	(5,000)
Acquisition-related contingent payments		_	_	(8,751)	(9,542)
Principal payments in connection with leases		(36)	(24)	(157)	(105)
Net cash provided by (used in) financing activities	_	(2,306)	(2,944)	201,249	102,141
Effect of exchange rate changes on cash, cash equivalents and restricted cash		125	18	187	26
Net increase (decrease) in cash, cash equivalents and restricted cash	\$	(44,074)	\$ (64,604)	\$ 20,293	\$ 13,731
Cash, cash equivalents and restricted cash at beginning of period	·	91,187	91,424	26,820	13,089
Cash, cash equivalents and restricted cash at end of period	\$	47,113	\$ 26,820	\$ 47,113	\$ 26,820
•	<u> </u>	:7,110	. 10,020		

EHEALTH, INC. SEGMENT INFORMATION (In thousands, unaudited)

		Three Months Ended December 31,			Year Ended December 31,					
	·	2020	2019	% Change	2020		2019	% Change		
Revenue		,								
Medicare (1)	\$	269,871	\$ 282,60	4 (5)%	\$ 516,7	62 \$	446,961	16 %		
Individual, Family and Small Business (2)		23,445	19,14	4 22 %	66,0	12	59,240	11 %		
Total revenue	\$	293,316	\$ 301,74	8 (3)%	\$ 582,7	74 \$	506,201	15 %		
Segment profit			·	_	` <u> </u>					
Medicare segment profit (3)	\$	82,583	\$ 149,31	7 (45)%	\$ 101,9	63 \$	155,234	(34)%		
Individual, Family and Small Business segment profit (3)		15,924	8,32	3 91 %	39,3	83	23,368	69 %		
Total segment profit		98,507	157,64	0 (38)%	141,3	46	178,602	(21)%		
Corporate (4)		(14,288)	(14,99	4) (5)%	(57,6	64)	(45,374)	27 %		
Stock-based compensation expense		(3,450)	(9,15	3) (62)%	(25,1	72)	(22,570)	12 %		
Change in fair value of earnout liability		_	(8,97	3) (100)%		_	(24,079)	(100)%		
Depreciation and amortization		(1,090)	(83	0) 31 %	(3,6	94)	(2,983)	24 %		
Amortization of intangible assets		(286)	(54	6) (48)%	(1,4	93)	(2,187)	(32)%		
Other income (expenses), net		(58)	26	6 *	6	66	2,090	(68)%		
Income before income taxes	S	79.335	\$ 123.41	0 (36)%	\$ 53.9	89 \$	83.499	(35)%		

^{*} Percentage not meaningful.

Segment Information

We evaluate our business performance and manage our operations as two distinct reporting segments:

• Medicare; and
• Individual, Family and Small Business.

- The Medicare segment consists primarily of amounts earned from our sale of Medicare-related health insurance plans, including Medicare Advantage, Medicare Supplement and Medicare Part D prescription drug plans, and to a lesser extent, ancillary products sold to our Medicare-eligible customers, including but not limited to, dental and vision plans, as well as our advertising program that allows Medicare-related carriers to purchase advertising on a separate website developed, hosted and maintained by us and our marketing activities.
- The Individual, Family and Small Business segment consists primarily of amounts earned from our sale of individual, family and small business health insurance plans and ancillary products sold to our non-Medicare-eligible customers, including but not limited to, dental, vision, and short-term insurance. To a lesser extent, the Individual, Family and Small Business segment consists of amounts earned from our online sponsorship program that allows carriers to purchase advertising space in specific arrival products and an accordance of the Individual and Ind
- Segment profit is calculated as revenue for the applicable segment less marketing and advertising, customer care and enrollment, technology and content and general and administrative operating expenses, excluding stock-based compensation expense, depreciation and amortization, restructuring charges, and amortization of intangible assets, that are directly attributable to the applicable segment and other indirect marketing and advertising, customer care and enrollment and technology and content operating expenses, excluding stock-based compensation expense, depreciation and amortization, restructuring charges, and amortization of intangible assets, allocated to the applicable segment based on usage.
- Corporate consists of other indirect general and administrative operating expenses, excluding stock-based compensation expense, depreciation and amortization, which are managed in a corporate shared services environment and, because they are not the responsibility of segment operating management, are not allocated to the reportable segments.

EHEALTH, INC. SUMMARY OF SELECTED METRICS COMMISSION REVENUE BY PRODUCT (In thousands, unaudited)

Three Months Ended December 31,

Year Ended December 31,
December 31,

	Tillee Molitils Elited December 31,		December 51,	-		December 51,				
		2020		2019	% Change		2020		2019	% Change
Medicare:							<u>.</u>			
Medicare Advantage	\$	206,147	\$	226,625	(9)%	\$	374,981	\$	339,810	10 %
Medicare Supplement		16,142		15,263	6 %		48,526		40,345	20 %
Medicare Part D		5,761		20,918	(72)%		12,909		26,824	(52)%
Total Medicare		228,050		262,806	(13)%		436,416		406,979	7 %
Individual and Family: (1)										
Non-Qualified Health Plans		8,228		5,967	38 %		20,813		17,559	19 %
Qualified Health Plans		2,297		1,966	17 %		5,856		6,866	(15)%
Total Individual and Family		10,525		7,933	33 %		26,669		24,425	9 %
Ancillaries:										
Short-term		2,770		3,362	(18)%		9,494		10,524	(10)%
Dental		3,563		2,100	70 %		9,354		5,238	79 %
Vision		1,668		708	136 %		3,896		2,002	95 %
Other		1,699		1,207	41 %		4,392		3,985	10 %
Total Ancillaries		9,700		7,377	31 %		27,136		21,749	25 %
Small Business		2,593		3,346	(23)%		9,568		9,922	(4)%
Commission Bonus		3,335		619	439 %		8,400		3,601	133 %
Total Commission Revenue	\$	254,203	\$	282,081	(10)%	\$	508,189	\$	466,676	9 %

We define our individual and family plan offerings as major medical individual and family health insurance plans, which does not include Medicare-related, small business or ancillary plans. Individual and family health insurance plans include both qualified and non-qualified plans. Qualified health plans are individual and family health insurance plans that meet the requirements of the Affordable Care Act and are offered through the government-run health insurance exchange in the relevant jurisdiction. Non-qualified health plans are individual and family health insurance plans that meet the requirements of the Affordable Care Act and are not offered through the exchange in the relevant jurisdiction. Individuals that purchase on-qualified health plans cannot receive a substity in connection with the purchase of those plans.

EHEALTH, INC. SUMMARY OF SELECTED METRICS COMMISSION REVENUE SUMMARY (In thousands, unaudited)

	Three Months Ended December 31,			Year Ended December 31,			
	2020		2019		2020		2019
Medicare:	,						,
Commission Revenue from Members Approved During the Period (1)	\$ 235,392	\$	214,018	\$	440,722	\$	355,916
Net Commission Revenue from Members Approved in Prior Periods (2)	(3,301)		50,066		5,665		55,292
Total Medicare Segment Commission Revenue	232,091		264,084		446,387		411,208
Individual, Family and Small Business:							
Commission Revenue from Members Approved During the Period (1)	7,801		8,211		21,971		22,614
Net Commission Revenue from Members Approved in Prior Periods (2)	14,311		9,786		39,831		32,854
Total Individual, Family and Small Business Segment Commission Revenue	\$ 22,112	\$	17,997	\$	61,802	\$	55,468
Total Commission Revenue	\$ 254,203	\$	282,081	\$	508,189	\$	466,676

⁽¹⁾ These amounts include commission bonus revenue.

⁽²⁾ These amounts reflect our revised estimates of cash collections for certain members approved prior to the relevant reporting period that are recognized as net adjustment revenue within the relevant reporting period. The net adjustment revenue includes both increases in revenue for certain prior period cohorts.

EHEALTH, INC. SUMMARY OF SELECTED METRICS APPROVED MEMBERS (Unaudited)

Three Months Ended December 31, Year Ended December 31, % Change % Change 2020 2019 2020 2019 Medicare: Medicare Advantage Medicare Supplement Medicare Part D 217,278 13,463 50,303 167,073 16,178 89,993 30 % (17)% (44)% 3 % 387,652 40,551 74,357 279,561 42,688 112,677 39 % (5)% (34)% 16 % Medicare Part D Total Medicare Individual and Family: Non-Qualified Health Plans Qualified Health Plans Total Individual and Family Ancillaries: (6)% 8 % (2)% 9,937 19,578 20,187 (3)% 15 % 4 % 9,295 (29)% (7)% (13)% (38)% (22)% (11)% 6 % Ancillaries:
Short-term
Dental
Vision
Other
Total Ancillaries
Small Business
Total Approved M 10,272 12,887 6,510 3,008 32,677 4,615 332,617 13,996 11,619 6,283 5,326 37,224 6,317 331,332 58,687 43,640 21,391 22,980 146,698 16,685 (27)% 11 % 4 % (44)% (12)% (27)% 41,640 40,455 18,581 14,270 114,946 14,809 665,643 630,495

Approved Members

Approved members represents the number of individuals on submitted applications that were approved by the relevant insurance carrier for the identified product during the relevant period. Approved members may not pay for their plan and become paying members.

EHEALTH, INC. SUMMARY OF SELECTED METRICS NEW PAYING MEMBERS (Unaudited)

	Three Months Ended De	Three Months Ended December 31,		Year Ended Decemb	er 31,		
	2020	2019	% Change	2020	2019	% Change	
Medicare:							
Medicare Advantage	136,857	116,351	18 %	324,916	235,978	38 %	
Medicare Supplement	9,263	11,942	(22)%	35,649	37,069	(4)%	
Medicare Part D	26,245	28,599	(8)%	104,833	84,369	24 %	
Total Medicare	172,365	156,892	10 %	465,398	357,416	30 %	
Individual and Family:							
Non-Qualified Health Plans	2,359	2,146	10 %	18,279	20,687	(12)%	
Qualified Health Plans	1,778	886	101 %	12,378	10,310	20 %	
Total Individual and Family	4,137	3,032	36 %	30,657	30,997	(1)%	
Ancillaries:							
Short-term	9,660	12,678	(24)%	41,953	62,124	(32)%	
Dental	11,405	9,688	18 %	38,253	42,439	(10)%	
Vision	3,958	3,874	2 %	17,128	21,332	(20)%	
Other	2,629	4,144	(37)%	13,918	21,601	(36)%	
Total Ancillaries	27,652	30,384	(9)%	111,252	147,496	(25)%	
Small Business	2,550	4,000	(36)%	14,362	17,606	(18)%	
Total New Paying Members	206,704	194,308	6 %	621,669	553,515	12 %	

New Paying Members

New paying members consist of approved members from the period presented and any periods prior to the period presented from whom we have received an initial commission payment during the period presented.

EHEALTH, INC. SUMMARY OF SELECTED METRICS ESTIMATED MEMBERSHIP (Unaudited)

	As of Decemb	As of December 31,		
	2020	2019	% Change	
Medicare: (f)				
Medicare Advantage	533,282	404,694	32 %	
Medicare Supplement	104,188	93,477	11 %	
Medicare Part D	238,503	212,478	12 %	
Total Medicare	875,973	710,649	23 %	
Individual and Family ⁽²⁾	116,247	128,487	(10)%	
Ancillaries: (3)				
Short-term	23,088	27,862	(17)%	
Dental	118,647	127,083	(7)%	
Vision	68,587	71,277	(4)%	
Other	37,033	38,119	(3)%	
Total Ancillaries	247,355	264,341	(6)%	
Small Business (4)	45,771	42,638	7 %	
Total Estimated Membership	1,285,346	1,146,115	12 %	

(1)

(2)

To estimate the number of members on Medicare-related health insurance plans, we take the sum of (i) the number of members for whom we have received or applied a commission payment for a month that may be up to three months prior to the date of estimation (after reducing that number using historical experience for assumed member cancellations over the period being estimated); and (ii) the number of approved members over that period (after reducing that number using historical experience for an anoth during the period being estimated, we will take the number of members of the number of period being estimated, we will take the number of members of the number of period being estimated, we will take the number of members of the number of period being estimated, we will take the number of period being estimated, we will take the number of period being estimated (as the number of period being estimated). The number of period being estimated (as the number of period being estimated) and the number of period being estimated (as the number of period being estimated) and the number of period being estimated (as the number of period being estimated) and (ii) the number of period being estimated (as the number of period being estimated) and (ii) the number of approved members over that period (after reducing that number using historical experience for assumed member cancellations through the date of the estimated). To the extent the determine we have received or applied a commission payment for a month that number using historical experience for assumed member of period being estimated (as the number of members or whom we have received or applied a commission payment of the estimated) and (ii) the number of approved members of the estimated (as the estimated) and (ii) the number of period estimated the number of members of period being estimated (as the number of members of period being estimated). The destinate of the estimated (as the number of period being estimated) and (ii) the number of period being estimated (as the (3)

EHEALTH, INC. SUMMARY OF SELECTED METRICS ESTIMATED MEMBERSHIP (Continued) (Unaudited)

Estimated Membership

Estimated membership represents the estimated number of members active as of the date indicated based on the number of members for whom we have received or applied a commission payment during the month of estimation.

Health insurance carriers bill and collect insurance premiums paid by our members. The carriers do not report to us the number of members that we have as of a given date. The majority of our members who terminate their policies do so by discontinuing their premium payments to the carrier and do not inform us of the cancellation. Also, some of our members pay their premiums less frequently than monthly. Given the number of months required to observe non-payment of commissions in order to confirm cancellations, we estimate the number of members who are active on insurance policies as of a specified date.

After we have estimated membership for a period, we may receive information from health insurance carriers that would have impacted the estimate if we had received the information prior to the date of estimation. We may receive commission payments or other information that indicates that a member who was not included in our estimates for a prior period was in fact an active member at that time, or that a member who was included in our estimates was in fact not an active member of ours. For instance, we reconcile information carriers provide to us and may determine that we were not historically paid commissions owed to us, which would cause us to have underestimated membership. Conversely, carriers may require us to return commission payments paid in a prior period due to policy cancellations for members we previously estimated as being active. We do not update our estimated membership numbers reported in previous periods. Instead, we reflect updated information regarding our historical membership in the membership estimate for the current period. As a result of the delay in our receipt of information from insurance carriers, actual trends in our membership are most discernible over periods longer than from one quarter to the next. As a result of the delay we experience in receiving information about our membership in the information and active membership in the membership and our membership in the province of the delay we experience in receiving information about our membership in the province of the delay we experience in receiving information and its impacts as well as other factors could cause the assumptions and estimates that we make in connection with estimating our membership to be inaccurate, which would cause our membership estimates to be inaccurate.

EHEALTH, INC. SUMMARY OF SELECTED METRICS CONSTRAINED LIFETIME VALUE OF COMMISSIONS PER APPROVED MEMBER (Unaudited)

2020 % Change 2019 % Change Medicare
Medicare Advantage (1)
Medicare Supplement (1)
Medicare Part D (1)
Individual and Family
Non-Qualified Health Plans (1)
Confided Health Plans (1) (10)% \$ 13 % (15)% (6)% 15 % (10)% 952 \$ 949 \$ 1.052 1,013 1,121 198 1,125 215 (14)% 12 % (5)% 22 % 216 252 203 213 Qualified Health Plans (1)

Ancillaries

Short-term (1) 299 267 265 217 40 % 22 % 2 % 9 % 60 % 13 % (2)% (1)% 189 135 162 101 70 56 159 94 Dental (1 77 63 79 55 64 172 158 157

Constrained Lifetime Value of Commissions Per Approved Member

- Constrained lifetime value ("LTV") of commissions per approved member represents commissions estimated to be collected over the estimated life of an approved member's policy after applying constraints in accordance with our revenue recognition policy. The estimate is driven by multiple factors, including but not limited to, contracted commission rates, carrier mix, estimated average plan duration, the regulatory environment, and cancellations of insurance plans offered by health insurance carriers with which we have a relationship. These factors may result in varying values from period to period.

 For small business, the amount represents the estimated commissions we expect to collect from the plan over the following twelve months. The estimate is driven by multiple factors, including but not limited to, contracted commission rates, carrier mix, estimated average plan duration, the regulatory environment, and cancellations of insurance plans offered by health insurance carriers with which we have a relationship and applied constraints. These factors may result in varying values from period to period. (2)

EHEALTH, INC. SUMMARY OF SELECTED METRICS EXPENSE METRICS PER APPROVED MEMBER (Unaudited)

	Three Months Ended December 31,				Year Ended December 31,					_
		2020		2019	% Change	202	20		2019	% Change
Medicare:										
Estimated customer care and enrollment ("CC&E") cost per approved Medicare Advantage ("MA")-equivalent approved member (1)	\$	286	\$	242	18 %	\$	368	\$	355	4 %
Estimated variable marketing cost per MA-equivalent approved member (1)		401		317	26 %		384		330	16 %
Total Medicare estimated cost per approved member	\$	687	\$	559	23 %	\$	752	\$	685	10 %
Individual and Family Plan ("IFP"):										
Estimated CC&E cost per IFP-equivalent approved member (2)	\$	75	\$	80	(6)%	\$	92	\$	102	(10)%
Estimated variable marketing cost per IFP-equivalent approved member (2)		133		104	28 %		83		67	24 %
Total IFP estimated cost per approved member	\$	208	\$	184	13 %	\$	175	\$	169	4 %

MA-equivalent approved members is a derived metric with a Medicare Part D approved member being weighted at 25% of a Medicare Advantage member and a Medicare Supplement member based on their relative LTVs at the time of our adoption of Accounting Standards Codification 606 – Revenue from Contracts with Customers ("ASC 606"). We calculate the number of approved MA-equivalent members by adding the total number of approved Medicare Advantage and Medicare Supplement members and 25% of the total number of approved Medicare Part D members during the period presented.

Expense Metrics Per Approved Member

(2)

Marketing initiatives are an important component of our strategy to increase revenue and are primarily designed to encourage consumers to complete an application for health insurance. Variable marketing cost represents direct costs incurred in member acquisition from our direct, marketing partners and online advertising channels. In addition, we incur customer care and enrollment expenses in assisting applicants during the enrollment process.

The numerator used to calculate each metric is the portion of the respective operating expenses for marketing and advertising and customer care and enrollment that is directly related to member acquisition for our sale of Medicare Advantage, Medicare Supplement and Medicare Part D prescription drug plans (collectively, the "Medicare Plans") and for all IFP plans including individual and family plans and short-term health insurance (collectively, the "IFP Plans"), respectively. The denominator used to calculate each metric is based on a derived metric that represents the relative value of the new members acquired. For Medicare Plans, we call this derived metric Medicare Advantage ("MA")-equivalent members, and for IFP Plans, we call this derived metric is of MA-equivalent members, and for IFP-equivalent members and for IFP-equivalent members and IFP Plans in the second of IFP Plans in the second in the interval is a second in the interval is and IFP Plans in the second in the interval is a second in the interval in the interval is a second in the interval in the interval is a second in the interval is a second in the interval is a second in the in

IFP-equivalent approved members is a derived metric with a short-term approved member being weighted at 33% of a major medical individual and family health insurance plan member based on their relative LTVs at the time of our adoption of ASC 606. We calculate the number of approved IFP-equivalent members by adding the total number of approved qualified and non-qualified health plan members and 33% of the total number of short-term approved members during the period presented.

EHEALTH, INC. RECONCILIATION OF GAAP TO NON-GAAP FINANCIAL MEASURES (In thousands, except per share amounts, unaudited)

		Three Months Ended December 31,	i	Year Ended December 31,			
	20	020	2019	2020	2019		
GAAP net income	\$	59,873 \$	88,824	\$ 45,450	\$ 66,887		
Stock-based compensation expense (1)		3,450	9,153	25,172	22,570		
Change in fair value of earnout liability (2)		_	8,973	_	24,079		
Amortization of intangible assets (3)		286	546	1,493	2,187		
Tax effect of non-GAAP adjustments (4)		(553)	(4,965)	(6,520)	(13,747)		
Non-GAAP net income	\$	63,056 \$	102,531	\$ 65,595	\$ 101,976		
GAAP net income per diluted share	\$	2.20 \$	3.58	\$ 1.68	\$ 2.73		
Stock-based compensation expense (1)	·	0.13	0.37	0.93	0.92		
Change in fair value of earnout liability (2)		_	0.36	_	0.98		
Amortization of intangible assets (3)		0.01	0.02	0.06	0.09		
Tax effect of non-GAAP adjustments (4)		(0.02)	(0.20)	(0.24)	(0.56)		
Non-GAAP net income per diluted share	\$	2.32 \$	4.13	\$ 2.43	\$ 4.16		
GAAP net income	\$	59,873 \$	88,824	\$ 45,450	\$ 66,887		
Stock-based compensation expense (1)		3,450	9,153	25,172	22,570		
Change in fair value of earnout liability (2)		_	8,973	_	24,079		
Depreciation and amortization (5)		1,090	830	3,694	2,983		
Amortization of intangible assets (3)		286	546	1,493	2,187		
Other expenses (income), net (6)		58	(266)	(666)	(2,090)		
Provision for income taxes (7)		19,462	34,586	8,539	16,612		
Adjusted EBITDA	\$	84,219 \$	142,646	\$ 83,682	\$ 133,228		

Explanation of Adjustments

- (1) (2) (3) (4) (5) (6) (7)
- Non-GAAP net income, non-GAAP net income per diluted share and adjusted EBITDA exclude the effect of expensing stock-based compensation related to stock options and restricted stock units.

 Non-GAAP net income, non-GAAP net income per diluted share and adjusted EBITDA exclude the change in fair value of earnout liability related to the acquisition of GoMedigap, which was completed in January 2018.

 Non-GAAP net income, non-GAAP net income per diluted share and adjusted EBITDA exclude amortization of intangible assets.

 Non-GAAP net income, non-GAAP net income per diluted share exclude the tax effect of non-GAAP adjustments.

 Adjusted EBITDA excludes depreciation and amortization.

 Adjusted EBITDA excludes other expense (income), net.

 Adjusted EBITDA excludes provision for income taxes.

EHEALTH, INC. RECONCILIATION OF GAAP TO NON-GAAP FINANCIAL MEASURES ADJUSTED EBITDA EXCLUDING CHANGES IN ESTIMATES (In thousands, except per share amounts, unaudited)

		Three Mor Decem	nths Ended aber 31,	Year Decem		
	_	2020	2019	2020	2019	
GAAP net income	\$	59,873	\$ 88,824	\$ 45,450	\$ 66,887	
Change in estimate		_	(42,308)	_	(42,308)	
Stock-based compensation expense (1)		3,450	9,153	25,172	22,570	
Change in fair value of earnout liability (2)		_	8,973	_	24,079	
Depreciation and amortization (3)		1,090	830	3,694	2,983	
Amortization of intangible assets (4)		286	546	1,493	2,187	
Other income, net (5)		58	(266)	(666)	(2,090)	
Provision for income taxes (6)		19,462	34,586	8,539	16,612	
Adjusted EBITDA excluding changes in estimates	\$	84,219	\$ 100,338	\$ 83,682	\$ 90,920	

Explanation of Adjustments

- (1) (2) (3) (4) (5) (6)
- Adjusted EBITDA exclude the effect of expensing stock-based compensation related to stock options and restricted stock units.

 Adjusted EBITDA exclude the change in fair value of earnout liability related to the acquisition of GoMedigap, which was completed in January 2018.

 Adjusted EBITDA exclude depreciation and amortization.

 Adjusted EBITDA exclude amortization of intangible assets.

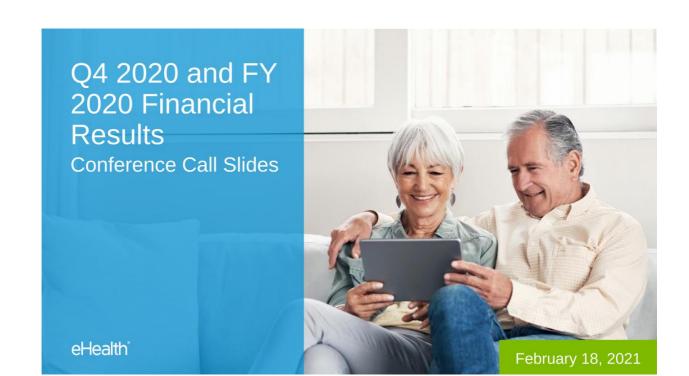
 Adjusted EBITDA excludes other income, net.

 Adjusted EBITDA excludes provision for income taxes.

EHEALTH, INC. RECONCILIATION OF NON-GAAP FINANCIAL MEASURES TO GUIDANCE (1) (In millions, except per share amounts, unaudited)

		Year Ending December 31, 2021	
	Low	ı	High
GAAP net income	\$	42.0 \$	57.0
Stock-based compensation expense		39.0	37.0
Restructuring Charges		2.1	2.1
Amortization of intangible assets		1.5	1.5
Tax effect of non-GAAP adjustments		(8.5)	(8.1)
Non-GAAP net income	\$	76.1 \$	89.5
GAAP net income per diluted share	\$	1.53 \$	2.08
Stock-based compensation expense		1.42	1.35
Restructuring Charges		0.08	0.08
Amortization of intangible assets		0.05	0.05
Tax effect of non-GAAP adjustments		(0.31)	(0.29)
Non-GAAP net income per diluted share	<u>\$</u>	2.77 \$	3.26
GAAP net income	s	42.0 \$	57.0
Stock-based compensation expense	•	39.0	37.0
Depreciation and amortization		5.5	4.5
Restructuring Charges		2.1	2.1
Amortization of intangible assets		1.5	1.5
Other income, net		(1.5)	(2.5)
Provision for income taxes		11.4	15.4
Adjusted EBITDA	\$	100.0 \$	115.0

⁽¹⁾ See Non-GAAP Financial Information section for definitions of our non-GAAP financial measures.



Safe Harbor Statement

Forward-Looking Statements
This presentation includes forward-looking statements within the meaning of the federal securities laws. Forward-looking statements generally relate to future events or our future financial or operating performance. Forward-looking statements in this presentation include, but are not limited to, the following: our operational focus in 2021, including our plans to increase the effectiveness of our telesales organization, our marketing strategy and our online capabilities; our expected cash collections for Medicare Advantage plans and member turnover rate; and our guidance for the full year ending December 31, 2021, including our guidance and revenue from our Medicare segment and our Individual, Family and Small Business segment, GAAP net income per flutured share segment and our Individual, Family and Small Business segment, Corporate shared service expense, cash used in operations and cash used for capital expenditures, and GAAP net income per diluted share and non-GAAP net income per diluted sha

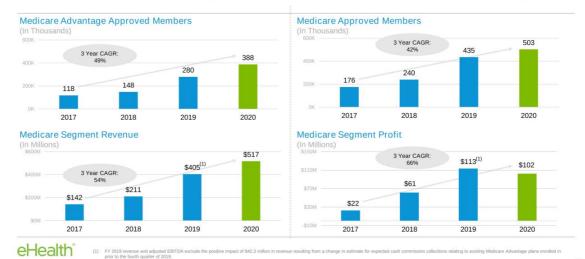
Non-GAAP Information

Non-GAAP Information

This presentation includes both GAAP and non-GAAP financial measures. The presentation of non-GAAP financial information is not intended to be considered in isolation or as a substitute for results prepared in accordance with GAAP. A reconcilitation of the non-GAAP financial measures included in this presentation to the most directly comparable GAAP financial measures is available in the earnings release issued by eHealth, Inc. on February 18, 2021 announcing its fourth quarter and fiscal year 2020 results. Management uses both GAAP and non-GAAP information in evaluating and operating its business internally and as such has determined that it is important to provide this information to investors.



eHealth: a Strong, Differentiated Growth Engine



eHealth FY 2020 Highlights

FY 2020 results reflect continuing enrollment growth in our Medicare business accompanied by a meaningful increase in the number and percentage of major medical Medicare enrollments completed online⁽²⁾



Revenue of \$583MM grew 26% compared to FY 2019⁽¹⁾



Medicare carrier advertising revenue grew 98% year-over-year



Net Income of \$45.5M and Adjusted EBITDA of \$83.7MM, compared to \$66.9M and \$90.9MM⁽¹⁾ in FY 2019 respectively



37% of Medicare major medical applications submitted online, compared to 27% in FY 2019⁽²⁾



Medicare Advantage approved members grew 39% year-over-



Estimated Trailing Twelve Month Turnover % for Medicare Advantage at 40% for Q4 20, compared to 42% in Q3 20

Implemented a multifaceted program to increase member retention



-) Fourth quarter 2019 and FY 2019 revenue and adjusted EBITDA exclude the positive impact of \$42.3 million in revenue resulting from a change in estimate for expected cash commission collections relating to existing Medicare Advantage plans enrolled in prior to the fourth quarter of 2019.
- (2) Major Medicare plans include Medicare Advantage and Medicare Supplement plans; Online % represents a combination of unassisted and partially agent-assisted online enrollments.

Q4 and FY 2020 Revenue





Q4 and FY Revenue growth driven primarily by an increase in approved Medicare Advantage members of 30% in Q4 and 39% in FY 2020 compared to Q4 and FY 2019



Medicare carrier advertising revenue grew 107% in Q4 and 98% in FY 2020 compared to Q4 and FY 2019

Positive impact of Medicare enrollment growth was partially offset by a decline in Medicare Advantage LTVs of 10% in Q4 and 6% in FY 2020 compared to Q4 and FY 2019



Revenue in our Individual & Family and Small Business group segment grew 22% in Q4 and 11% in FY 2020 driven primarily by growth in tail revenue



Fourth quarter 2019 and F 2019 revenue exclude the positive impact of \$42.3 million in revenue resulting from a change in estimate for expected cash commission collections relating to existing Medicare Advantage plans enrolled revenue in the positive interest of \$42.3 million in revenue resulting from a change in estimate for expected cash commission collections relating to existing Medicare Advantage plans enrolled revenue in the positive impact of \$42.3 million in revenue resulting from a change in estimate for expected cash commission collections relating to existing Medicare Advantage plans enrolled revenue in the positive impact of \$42.3 million in revenue resulting from a change in estimate for expected cash commission collections relating to existing Medicare Advantage plans enrolled revenue in the positive impact of \$42.3 million in revenue resulting from a change in estimate for expected cash commission collections relating to existing Medicare Advantage plans enrolled revenue in the positive impact of \$42.3 million in revenue resulting from a change in estimate the positive impact of \$42.3 million in revenue resulting from a change in estimate the positive impact of \$42.3 million in revenue resulting from a change in estimate the positive impact of \$42.3 million in revenue resulting from a change in estimate the positive in the positive impact of \$42.3 million in revenue resulting from a change in estimate the positive in the positive i

Q4 and FY 2020 Net Income and Adjusted $\mathsf{EBITDA}^{(1)}$











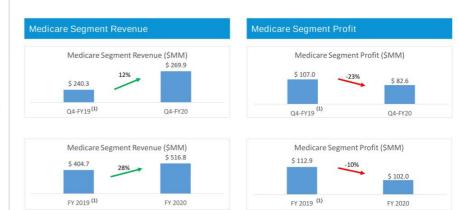
1. Adjusted ERITOA is calculated by excluding the impacts of interest income and experses, income tax expenses (benefit), depreciations and amortizations, stock-based compensation expenses, change in fair value of earmout liability, restricturing and erroganization of interest income and expenses, income tax expenses (benefit), depreciations deprehend stock devidends and other non-excurring changes to SAAP net income. DNAP net none. D

Fourth quarter 2019 and FY 2019 adjusted EBITDA exclude the positive impact of \$42.3 million in revenue resulting from a change in estimate for expected cash commission collections relating to existing Medicare Advantage plan enrolled in prior to the fourth quarter of 2019.

Q4 and FY 2020 Medicare Segment Revenue and Profit

Medicare Segment Revenue grew 12% in Q4 and 28% in FY 2020 compared to 2019⁽¹⁾

Medicare Segment Profit declined 23% in Q4 and 10% in Q4 2020 compared to 2019 driven primarily by underperformance of external telesales agents

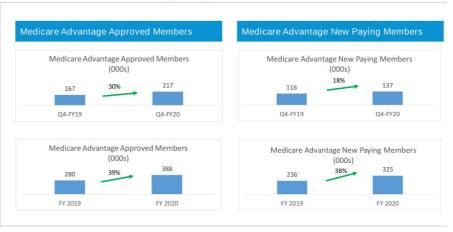




 Fourth quarter 2019 and FY 2019 Medicare segment revenue and Medicare segment profit exclude the positive impact of \$42.3 million in revenue resulting from a change in estimate for expected cash commission collections relating to existing Medicare Advantage plans enrolled in prior to the fourth quarter of 2019.

Q4 and FY 2020 Medicare Advantage Approved Members⁽¹⁾ and New Paying Members⁽²⁾

FY 20 Medicare Advantage approved members grew 39% YoY and Medicare Advantage new paying members grew by 38% YoY





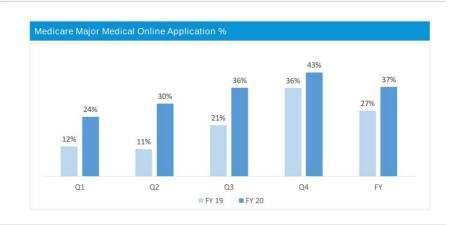
Approved members consist of the number of individuals on submitted applications that were approved by the relevant insurance carrier for the identified product during the period presented. Approved members may not pay for their plan and become paying members.

(2) New Paying Members consist of approved members from the period presented and any periods prior to the period presented from whom we have received an initial commission payment during the period presented.

Medicare Major Medical Online Application%(1)



for FY 2019





Major Medicare plans include Medicare Advantage and Medicare Supplement plans; online % represents a combination of unassisted and partially agent-assisted online enrollment

Trailing Twelve Months ("TTM") Medicare Segment Commissions Cash Collections

Q4 20 TTM Medicare Segment commissions cash collections increased by 48% year-over-year

Q4 20 TTM Medicare Segment commissions cash collections per MA equivalent member⁽¹⁾ of \$367 grew 17% year-overyear

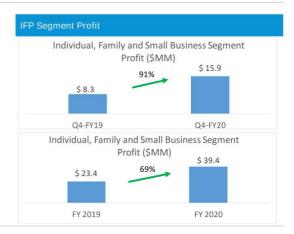




1) MA Equivalent member is calculated as the total number of estimated Medicare Advantage and Medicare Supplement membership and 25% of the estimated Medicare Part D membership during the period present

Q4 and FY 2020 IFP Segment Revenue and Profit





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Medicare Advantage Plan Member Turnover Trend Since Q4 2018

MA	Q4 2018	Q1 2019	Q2 2019	Q3 2019	Q4 2019	Q1 2020	Q2 2020	Q3 2020	Q42020
Approved Members ⁽¹⁾	83,376	40,741	36,576	35,171	167,073	64,898	60,477	44,999	217,278
Estimated Beginning (Paying) Membership (2)	235,269	276,357	280,763	291,171	309,180	404,694	404,262	407,243	421,237
New Paying Members ⁽³⁾	62,817	49,531	36,122	33,974	116,351	86,299	57,232	44,528	136,857
Estimated Ending (Paying) Membership (4)	276,357	280,763	291,171	309,180	404,694	404,262	407,243	421,237	533,282
Medicare Advantage Plan Member Turnover ⁽⁵⁾	21,729	45,125	25,714	15,965	20,837	86,731	54,251	30,534	24,812
Trailing Twelve Month Member Turnover ⁽⁶⁾	95,066	89,358	102,403	108,533	107,641	149,247	177,783	192,353	196,328
Average Trailing Twelve Month Estimated Membership Plus New Paying Members (7)	262,856	276,949	296,491	316,501	348,362	389,638	425,791	457,447	490,588
Trailing Twelve Month Member Turnover Rate (8)	36%	32%	35%	34%	31%	38%	42%	42%	40%



Medicare Advantage Plan Member Turnover Trend Since Q4 2018 (cont'd)

- Estimated Beginning (Paying) Membership is the Estimated Ending Membership for the period prior to the period of estimation. Membership is estimated using the methodology described in our periodic filings with the Securities and Exchange Commission.
- (3) New Paying Members consist of approved members from the period presented and any periods prior to the period presented from whom we have received an initial commission payment during the period presented.
- (4) Estimated Ending (Paying) Membership is the number of members we estimate as of the end of the period. Membership is estimated using the methodology described in our periodic filings with the Securities and Exchange Commission.
- (5) Medicare Advantage Plan Member Turnover for the period is derived as follows: Estimated Beginning Membership plus New Paying Members minus Estimated Ending Membership.
- (6) Trailing Twelve Month Member Turnover is the sum of Medicare Advantage Plan Member Turnover for the prior twelve months.
- (7) Average Trailing Twelve Month Estimated Membership Plus New Paying Members is the sum of (i) trailing twelve month Estimated Beginning Membership, plus (ii) New Paying Members for the trailing twelve month, divided by 4.
- (8) Trailing Twelve Month Member Turnover Rate is Trailing Twelve Month Turnover divided by Average Trailing Twelve Month Estimated Membership Plus New Paying Members.

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Key Areas of Operational Focus for 2021

- Increase effectiveness of our telesales organization
 - Shift to a predominately internal workforce
 - Enhance the agent onboarding and training process
 - Expand retention team
- Enhance marketing strategies
 - Emphasize online and strategic partner channels characterized by attractive ROI
 - Reduce reliance on Direct TV channel
 - Shift from transaction-driven marketing to a focus on customer lifecycle. Broaden selection of ancillary products
- Further expand our online/e-commerce capabilities with strong emphasis on personalization of consumer experience

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2021 Guidance(1)

For the full year ending December 31, 2021, we expect:

Total revenue is expected in the range of \$660M to \$700M

- Medicare segment revenue is expected in the range of \$621M to \$659M.
- Individual, Family and Small Business segment revenue is expected in the range of \$39M to \$41M.

GAAP net income is expected to be in the range of \$42M to \$57M

GAAP net income per diluted share is expected to be in the range of \$1.53 to \$2.08.

Adjusted EBITDA $^{(2)}$ is expected in the range of \$100M to \$115M.

- * Medicare segment profit $^{(3)}$ is expected in the range of \$138M to \$155M
- Individual, Family and Small Business segment profit is expected in the range of \$18M to \$19M.
- Corporate shared service expenses⁽⁴⁾ is expected in the range of \$56M to \$59M

Non-GAAP net income per diluted share $^{(5)}$ is expected to be in the range of \$2.77 to \$3.26.

Cash used in operations is expected to be in the range of \$85M to \$95M, and cash used for capital expenditures in the range of \$24M to \$27M $\,$

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2021 Guidance (cont'd)

- (1) Guidance excludes the potential impact from the agreement with HIG Capital for a \$225 million investment announced on January 29, 2021
- Adjusted EBITDA is calculated by excluding the impacts of interest income and expense, income tax expense (benefit), depreciation and amortization, stock-based compensation expense, change in fair value of earnout liability, restructuring and reorganization charges, purchase price adjustments, amortization of intangible assets, other income (expenses), net, convertible preferred stock dividends and other non-recurring charges to GAAP net income. Other income. Other non-recurring charges to GAAP net income may be include transaction expenses in connection with capital raising transactions (whether debt, equity or equity-linked) and acquisitions, whether or not consummated, and the cumulative effect of a change in accounting principles.
- Segment profit is calculated as revenue for the applicable segment less marketing and advertising, customer care and enrollment, technology and content and general and administrative operating expenses, excluding stock-based compensation expense, depreciation and amortization, restructuring charges, and amortization of intangible assets, that are directly attributable to the applicable segment and other indirect marketing and advertising, customer care and enrollment and technology and content operating expenses, excluding stock-based compensation expense, depreciation and amortization, restructuring charges, and amortization of intangible assets, allocated to the applicable segment based on usage.
- Corporate consists of other indirect general and administrative operating expenses, excluding stock-based compensation expense and depreciation and amortization, which are managed in a corporate shared services environment and, because they are not the responsibility of segment operating management, are not allocated to the reportable segments.

 Non-GAAP net income per diluted share consists of GAAP net income per diluted share excluding the following items: the effects of expensing stock-based compensation related to stock options and restricted stock units per diluted share, change in fair value of earnout liability per diluted share, restructuring and reorganization charges per diluted share, purchase price adjustments per diluted share, amortization of intangible assets per diluted share, other non-recurring charges per diluted share, and the income tax impact of non-GAAP adjustments per diluted share.

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