FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

1. Name and Address of Reporting Person* Galimi Gavin G.				2. Issuer Name and Ticker or Trading Symbol eHealth, Inc. [EHTH]								k all app Direc	nship of Reporting Pe applicable) Director		10% O	wner			
(Last)	(Fir	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/10/2024						X	belov	er (give title v) General		Other (below) usel & Sec	·			
13620 RANCH ROAD 620 N, SUITE A250				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	,							
(Street) AUSTIN	I TX	7	8717											X		filed by On filed by Mo on		•	
(City)	(Sta	ate) (Z	Zip)		$ _{\Box}$	Check t	his box	to indic	ate that a	a trans	tion Indi action was m ons of Rule 10	ade pur	suant to			uction or writ	ten pla	n that is inte	nded to
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or B	enefi	cially	y Own	ed			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D		Execution ny/Year) if any		cution Date,		Transaction Disposed Code (Instr. 5)		Disposed (ies Acquired (A Of (D) (Instr. 3,			Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D) Pr		ice	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 03/		03/10/2	2024			F ⁽¹⁾		2,035	D	\$	6.36 110),124 ⁽²⁾		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)	if any	emed ion Date, /Day/Year)	4. Transa Code (8)	instr.	of Deriv	r osed) r. 3, 4	6. Date Expirati (Month/	on Da		7. Title Amou Secur Under Deriva Secur 3 and	nt of ities lying ative ity (Inst	De Sei (In:	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

- 1. Represents the withholding of shares to satisfy tax withholding obligation.
- 2. Includes 500 shares acquired by the reporting person under the eHealth, Inc. 2020 Employee Stock Purchase Plan on November 9, 2023.

Remarks:

/s/ Sonwha Lee, as attorneyin-fact for Gavin G. Galimi ** Signature of Reporting Person

03/12/2024

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.