FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549
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Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 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 ar		2. Issuer Name and Ticker or Trading Symbol eHealth, Inc. [ EHTH ]									neck all a <sub>l</sub> Dire	nip of Reporti oplicable) ector cer (give title		rson(s) to Is 10% O Other (s	vner				
(Last) (First) (Middle) C/O EHEALTH INC. 2625 AUGUSTINE DRIVE, SECOND FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 10/07/2021										ow) Chief Dig	gital (	below) Officer	
(Street) SANTA CLARA CA 95054  (City) (State) (Zip)				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day						Exec if any	eemed ution Date, th/Day/Year)				es Acquired (A Of (D) (Instr. 3,			d Secu	nount of rities ficially ed Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)		Price	Trans	Transaction(s) (Instr. 3 and 4)			(111341. 4)
Common	2021				F <sup>(1)</sup>		346	I	)	\$43.5	53	44,365		D					
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date Security or Exercise (Month/Day/Year)			if any	emed ion Date, /Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisabl Expiration Date (Month/Day/Year)		ate	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		f g Instr.	8. Price o Derivative Security (Instr. 5)		i (	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	of	mber ares					

## Explanation of Responses:

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

## Remarks:

/s/ Scott Giesler as attorneyin-fact for Phillip A. Morelock

10/11/2021

\*\* Signature of Reporting Person Date

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.