FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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heck this box if no longer subject
Section 16. Form 4 or Form 5
bligations may continue. See
etruction 1(h)

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

Name and Address of Reporting Person* Goldberg Michael						2. Issuer Name and Ticker or Trading Symbol <u>eHealth, Inc.</u> [EHTH]									neck all app X Direc	all applicable) Director		10% Owner		
(Last) (First) (Middle) C/O EHEALTH, INC. 2625 AUGUSTINE DRIVE, SECOND FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 06/30/2021										Officer (give title below)		Other (s	specify	
(Street) SANTA CLARA (City)	CA	. 9	5054 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. I Lin	e) X Form Form					
		Table	I - Noi	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or	Bene	ficia	ally Own	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date					Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquinisposed Of (D) (I 5)						nd Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
										v	Amount	(A) or (D)		Price	Transa	ction(s) 3 and 4)			(Instr. 4)	
Common Stock 06/30/2					2021				A		3,221(1)		A	\$0	41	41,291(2)		D		
Common Stock													44	44,419			By Trust ⁽³⁾			
	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	nversion Exercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) Execution Date, if any (Month/Day/Year) 8			ransaction of Derivat Securi Acquir (A) or Dispos of (D) (Instr. and 5)		vative irities uired or osed o) r. 3, 4	6. Date Expirati (Month/	ion Da Day/Y		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) Amou or Numb of Title Share		unt ber	8. Price of Derivative Security (Instr. 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. This represents an annual award of restricted stock units to the Company's non-employee directors. Each unit represents a contingent right to receive one share of the Company's common stock upon vesting. Subject to the Reporting Person's continuous service with the Company, the restricted stock units will become 100% vested on the day prior to the Company's next annual stockholder meeting approximately one year following the date of grant. The restricted stock units will also become 100% vested if the Company is subject to a change in control before the Reporting Person's service
- 2. Total amount of shares beneficially owned includes shares deferred upon vesting of certain restricted stock units. The deferred shares will be settled in accordance with the terms of the deferral election.
- 3. Shares held by Michael D. Goldberg Family Trust dated June 3, 2011.

Remarks:

/s/ Scott Giesler as attorneyin-fact for Michael D. Goldberg

07/01/2021

** 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.