Wang Shelde	on											
Form 4												
February 18,	, 2010											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB APPROVAL					
<b>CURIVE 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549						OMMISSION	OMB Number:	3235-0287				
Check the				_						Expires:	January 31,	
if no long subject to		EMENT O	F CHAN	NGES IN BENEFICIAL OWN				L OW	NERSHIP OF		2003	
Section 1				SECURITIES						Estimated average burden hours per		
Form 4 o	or									response	0.5	
Form 5 obligation	<b>n</b> c <sup>4</sup>	*						U	e Act of 1934,			
may cont				•		•	- ·		1935 or Section	1		
<i>See</i> Instru 1(b).		30(h)	of the In	vestme	ent (	Compan	y Ac	t of 194	0			
(Print or Type I	Responses)											
Wang Sheldon Syn			Symbol	•					5. Relationship of Reporting Person(s) to Issuer			
eF				eHealth, Inc. [EHTH]					(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	f Earliest	Tra	ansaction			· ·		, 	
				nth/Day/Year)					Director 10% Owner X Officer (give title Other (specify			
	LTH, INC., 44 ELD ROAD	O EAST	02/16/2	010					below)	below) below)		
	(Street)		4 If Ame	endment	Dat	e Original			6 Individual or Io	int/Group Filin	or(Check	
· / / ·····				nendment, Date Original Ionth/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)			
MOUNTAI	N VIEW, CA	94043	Ň	ý	,				_X_ Form filed by C Form filed by M			
									Person			
(City)	(State)	(Zip)	Tabl	e I - Nor	n-De	erivative	Securi	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction I	Date 2A. Dee	med	3.		4. Securit	ties Ac	equired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye		on Date, if		ctio	n(A) or Di	•		Securities	Form: Direct		
(Instr. 3)		any (Month/	Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)					5)	Beneficially Owned		Beneficial Ownership	
			Day/Teal)	(msu. )	0)				Following	(Instr. 4)	(Instr. 4)	
							$(\mathbf{A})$		Reported	· · · ·	× ,	
							(A) or		Transaction(s)			
				Code	V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	02/16/2010			<b>S</b> <u>(1)</u>		5,074	D	\$ 16.27	28,911	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

Security (Instr. 3)	or Exercise Price of Derivative	(110111121)	any (Month/Day/Year)	Code (Instr. 8)	of Derivative Securities	(Month/Day/ e		Under Securi (Instr.	lying	Security (Instr. 5)
	Security				Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

## **Reporting Owners**

1. Title of 2.

Reporting Owner Name / Address	Relationships							
	Director	Director 10% Owner Officer		Other				
Wang Sheldon C/O EHEALTH, INC. 440 EAST MIDDLEFIELD ROAD MOUNTAIN VIEW, CA 94043			Executive VP, Technology					
Signatures								
/s/ Jennifer Thompson, as attorney-ir Wang	fact for	Dr. Sheldon	X. 02/18/2010					
<u>**</u> Signature of Reporting	g Person		Date					
Explanation of Respo	nses	-						

## chianalion or nesponses.

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

3. Transaction Date 3A. Deemed

Derivative Conversion (Month/Day/Year) Execution Date, if TransactionNumber Expiration Date

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) This transactions was effected pursuant to a Rule 10b5-1 trading plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

## Edgar Filing: Wang Sheldon - Form 4

4.

5.

6. Date Exercisable and 7. Title and

Amount of

8. Price of

Derivative

9. Nt

Deriv

Secu

Bene Own Follo Repo Trans (Insti