eHealth, Inc. Form 4 November 15, 2007

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB 33

Check this box

Number: 3235-0287

January 31,

OMB APPROVAL

if no longer subject to Section 16. Form 4 or Form 5

obligations

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response...

may continue. *See* Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Gibbs Samuel C III Issuer Symbol eHealth, Inc. [EHTH] (Check all applicable) (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) Director 10% Owner __Other (specify X_ Officer (give title _ C/O EHEALTH, INC., 440 EAST 11/13/2007 below) MIDDLEFIELD RD Senior Vice President (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting **MOUNTAIN VIEW, CA 94043** Person

(City)	(State)	(Zip) Tab	ole I - Non-	Derivative	Secui	rities Acquir	ed, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securit onor Dispos (Instr. 3, 4	ed of	` '	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	11/13/2007		M	12,500	A	\$ 1	12,500	I	By Trust
Common Stock	11/14/2007		M(3)	834	A	\$ 8.8	13,334	I	By Trust
Common Stock	11/14/2007		S(3)	834	D	\$ 33.1207	12,500	I	By Trust

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

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number.

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of or Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 1	11/13/2007		M	12,500	<u>(2)</u>	01/24/2011	Common Stock	12,500
Employee Stock Option (right to buy)	\$ 8.8	11/14/2007		M(3)	190	<u>(4)</u>	12/14/2015	Common Stock	190
Employee Stock Option (right to buy)	\$ 8.8	11/14/2007		M(3)	644	<u>(4)</u>	12/14/2015	Common Stock	644

Reporting Owners

Reporting Owner Name / Address	Relationships						
·r···	Director	10% Owner	Officer	Other			
Gibbs Samuel C III							
C/O EHEALTH, INC.			Senior Vice President				
440 EAST MIDDLEFIELD RD			Semoi vice Fiesident				
MOUNTAIN VIEW, CA 94043							

Signatures

/s/ Jennifer Thompson, as attorney-in-fact for Samuel C.
Gibbs III 11/15/2007

**Signature of Reporting Person Date

Reporting Owners 2

Explanation of Responses:

- * 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).
- (1) Shares are held by Samuel C Gibbs & Cynthia B Gibbs, TTEEs u/a DTD 4/27/1995 Gibbs Revocable Trust.
- (2) Immediately exercisable for all option shares. The option shares became fully vested on 1/24/2005.
- (3) The transactions reported on this date were effected pursuant to a Rule 10b5-1 trading plan.
- (4) Immediately exercisable for all option shares. The option shares become vested as to 20% of the shares 1 year after December 14, 2005 and 1/60th of the shares upon completion of each month of continuous service thereafter.

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.