

Innovation



Customer experience

Customer health and wellness

Community impact and support

Inclusive access to digital economy



eHealth significantly advanced the health insurance distribution industry through innovation by leveraging our technology platform to transform what used to be a complex, non-transparent process of researching and enrolling in a health plan.

Our technology is helping to solve critical challenges often experienced by consumers in the health insurance market by bringing choice, transparency, and decision support tools into this high-stakes process. Our innovation has not only benefited over 8 million customers served by us, but also the broader community. Technologies pioneered by eHealth, such as online plan selection assistance and enrollment, are now used by other companies in the private sector and by federal and state governments. But we did not stop there. Innovation is in our DNA, and we will continue to invest in developing advanced technology solutions and work with insurance carriers and our partners in the provider and pharmacy areas to further enhance consumer experience and contribute to a broader mission of connecting all Americans with quality, affordable health insurance.

Customer Experience

A customer centric approach to health insurance distribution, excellent customer service and ease of use are central to our mission. These principles apply across our online platform and the telephonic experience staffed by a team of highly trained customer care and enrollment agents. We believe in meeting customers on their terms. Consumers have the flexibility to interact with us online, by phone, or through a hybrid agent-assisted online process. In 2020, we also launched a retention team with a goal to further support our existing members by ensuring they fully understand their coverage and answering any questions they might have as they use their coverage to access healthcare.

The Medicare market is subject to stringent regulations by CMS,

state departments of insurance, and other regulatory bodies. It is the policy of eHealth to promptly respond to any compliance related issues discovered including customer complaints. Furthermore, it is our policy to have disciplinary standards for eHealth employees and downstream entities to promote compliance with all applicable regulatory requirements.

It is the policy of eHealth to establish and maintain an effective Medicare Compliance Committee that oversees the Compliance Program activities in accordance with the CMS guidance and Chapter 42 of the Code of Federal Regulations (Parts 422 and 423). The Medicare Compliance Committee consists of eHealth employees and executives with decision making authority and/or in-depth knowledge in their respective areas of expertise including, compliance,

Innovation Relevant SDGs

3 GOOD HEALTH AND WELL-BEING



9 INDUSTRY, INNOVATION AND INFRASTRUCTURE



11 SUSTAINABLE CITIES AND COMMUNITIES



17 PARTNERSHIPS FOR THE GOALS



human resources, sales, customer care, Medicare operations, product management and insurance carrier relations. The committee is chaired by our Chief Medicare Compliance Officer. It reports to and takes direction from the Board of Directors of eHealth Insurance Services, a subsidiary of eHealth, Inc. The Board is currently comprised of our chief executive officer and chief financial officer.

The Compliance Committee meets at least once a quarter or more frequently as necessary. The Committee's responsibilities include but are not limited to:

- Overseeing the Medicare Compliance Program.
- Updating Compliance Program as well as written policies and procedures that promote and pertain to compliance.
- Review and approval of regular, effective education and training programs addressing compliance issues and responsibilities.
- Development of a system for confidential reporting of instances of non-compliance and investigating and responding to these reports.
- Development of protocols for consistent enforcement of appropriate disciplinary action against persons who have engaged in acts or omissions constituting non-compliance.
- Assisting with the development and implementation of risk assessment associated with eHealth Medicare operations and the use of audits, investigations and other evaluation techniques to assess the effectiveness of compliance corrective measures.

We make customer needs our priority and take any consumer complaints extremely seriously. We view any indication of dissatisfaction from eHealth customer as a complaint and have a policy in place that outlines the process for complaint investigation and remediation. Reported concerns are logged in our database and tracked until resolved. As of April of 2021, we had 16 employees dedicated to customer complaint investigation and resolution. Our Medicare Compliance Officer or designee creates corrective action plans tailored to address the particular complaint and related compliance issues if any. In addition to internal review, eHealth reports any customer complaints that represent potential noncompliance to insurance carriers to allow for

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further investigation and self-reporting as required to CMS or other law enforcement bodies. All of our customer calls are recorded and the recordings are maintained for a minimum of 10 years for Medicare products and 7 years for IFP and other products for the purpose of compliance and quality review.

As part of our consumer-centric approach, we place a significant emphasis on responsible marketing practices with a goal to educate our customers and provide them with decision-support tools and information to help navigate the complex world of health insurance. It is the policy of eHealth to refrain from engaging in any marketing activities that may mislead or confuse a Medicare beneficiary – our key customer group. In addition to providing Medicare beneficiaries with the necessary information to make a fully-informed decision with respect to their enrollment in a plan, eHealth agents are required to conduct themselves in a manner consistent with applicable state laws, regulations and guidelines and our policies, procedures and Code of Business Conduct.

eHealth agents are required to complete annual training on our product offerings, sales and marketing practices, as well as on prevention, detection and reporting of Medicare Fraud, Waste and Abuse. In addition, regular training on a variety of topics is conducted based on trend identification and monitoring of social risk and impact of our products.

As part of our monitoring of risk and the impact of the products we sell, we conduct an annual risk assessment that involves evaluation of our business for non-compliance with CMS requirements that can result in risk to our

enrollees/customers. Risk is assessed through review of audit and monitoring results, interviews with relevant staff, evaluation of the effectiveness of systems, changes in laws, regulations and policy, and evaluation of eHealth resources.

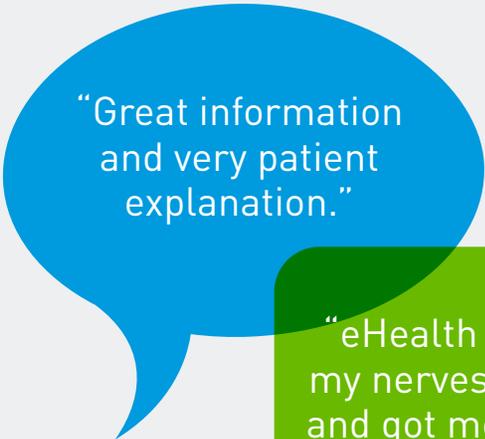
As of May 2022, our Medicare experience was rated 4.5 out of 5 stars on the Trustpilot online consumer review platform, with customers saying, “Great information and very patient explanation, “eHealth “calmed my nerves instantly and got me through the process seamlessly” and was “a great help” in “an overwhelming sea of Medicare information.”

We believe there may be more we can do in the future to improve the health and well-being of our customers by addressing social determinants of health, conditions that affect health and quality-of-life risks and outcomes. To address these issues, some health insurance plans that we offer now include benefits such as gym memberships, transportation to medical appointments, and access to healthy food.

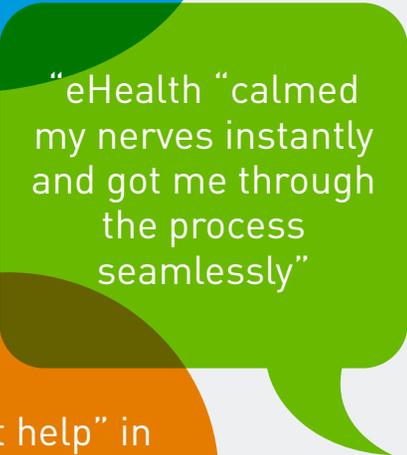
Access to An Inclusive Digital Economy

Our accomplishments in creating a digital platform to provide health insurance-related educational resources and support plan enrollment has expanded accessibility for groups of consumers who were previously underserved. However, we believe there is still work to be done to ensure that all consumers are able to access online health insurance tools and information and to help customers navigate the choices they face. For example, older, disabled, and low-income Americans are more likely than others to lack computer skills or access to the Internet. Health literacy could also be a problem for people of color who are more likely to be unfamiliar with health insurance terms, according to a study by the Urban Institute. Those customers are also less likely to take advantage of the savings from Medicare Advantage plans. To enhance the accessibility of our platform, we offer our customers a variety of ways to engage with us from calling one of our licensed agents to connecting with us online using a computer or a mobile device to a hybrid online/ telephonic approach. We also put in place a team of agents who are focused on making sure that the needs of our existing customers are met and that they are aware of features and benefits of their insurance plans.

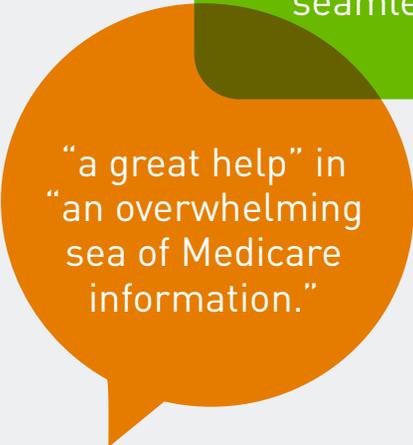
Our Medicare experience is currently rated 4.5 out of 5 stars on the Trustpilot online consumer review platform, with customers saying,



“Great information and very patient explanation.”



“eHealth “calmed my nerves instantly and got me through the process seamlessly”



“a great help” in “an overwhelming sea of Medicare information.”

An Age of Unprecedented Change/COVID Response

Our mission to help customers protect their health and well-being became more important than ever in 2020 as our employees, our customers, and our communities struggled to cope with the worldwide COVID-19 pandemic.

We responded quickly to the health crisis by closing our China office in February and our U.S.-based offices in March to ensure the health and safety of our workforce. Apart from a small number of employees needed to maintain essential operations, we enabled our global workforce to work from home and provided them the support they needed from office supplies to a Help Center for easy-to-access assistance. We provided reimbursement for cell phone and Internet access costs. Our use of shared systems to enable collaboration was in place before the pandemic and helped to ensure productivity while working from home. We are piloting ways to allow employees who are unable to work from home to safely return to the office. To allow safer in-person work, we installed automated temperature testing kiosks in each of our offices.

eHealth set up strict protocols to limit risks in the event any of our employees are diagnosed with COVID-19, experience COVID-19 symptoms, or come in close contact with someone who is potentially infected with COVID-19. We also established a COVID-19 Family Leave Policy to enable our employees to take time off to contain risks and address family needs in the event they are affected by COVID-19 or caring for a family member ill with COVID-19.

In addition to managing what is within our direct control, we have committed to strengthening communication with our customers and the larger marketplace by including coronavirus updates and resources in the “Insights Blog” section of our eHealth Newsroom.

