

OMB APPROVAL	
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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**

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 and Address of Reporting Person* <u>Kosloske Michael W</u>  (Last) (First) (Middle) 16221 VILLARREAL DE AVILA  (Street) TAMPA FL 33613  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Health Insurance Innovations, Inc. [ HIQ ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director <input checked="" type="checkbox"/> 10% Owner  Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) 06/27/2019	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially 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. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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)
			Code	V	Amount	(A) or (D)	Price			
Class A Common Stock	06/27/2019		S		1,600	D	\$25.0069 <sup>(1)</sup>	88,999	I	See Footnote <sup>(3)</sup>
Class A Common Stock	06/28/2019		S		39,793	D	\$25.6145 <sup>(2)</sup>	49,206	I	See Footnote <sup>(3)</sup>
Class A Common Stock								320	D	
Class A Common Stock								5,643	I	See Footnote <sup>(4)</sup>
Class B Common Stock <sup>(5)</sup>								2,416,667	I	See Footnote <sup>(6)</sup>

**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 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 Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V		Date Exercisable	Expiration Date					

1. Name and Address of Reporting Person* <u>Kosloske Michael W</u>  (Last) (First) (Middle) 16221 VILLARREAL DE AVILA  (Street) TAMPA FL 33613  (City) (State) (Zip)		
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1. Name and Address of Reporting Person*		
<a href="#">Health Plan Intermediaries, LLC</a>		
(Last)	(First)	(Middle)
C/O HEALTH INSURANCE INNOVATIONS, INC.		
15438 N. FLORIDA AVENUE, SUITE 201		
(Street)		
TAMPA	FL	33613
(City) (State) (Zip)		
1. Name and Address of Reporting Person*		
<a href="#">Health Plan Intermediaries Sub, LLC</a>		
(Last)	(First)	(Middle)
C/O HEALTH INSURANCE INNOVATIONS, INC.		
15438 N. FLORIDA AVENUE, SUITE 201		
(Street)		
TAMPA	FL	33613
(City) (State) (Zip)		

**Explanation of Responses:**

1. Represents the weighted average of a range of sale prices from \$25.00 to \$25.04. The reporting person undertakes to provide to the Staff of the Securities and Exchange Commission, the Company or any stockholder of the Company, upon request, full information regarding the number of shares sold at each separate price.
2. Represents the weighted average of a range of sale prices from \$25.00 to \$26.00. The reporting person undertakes to provide to the Staff of the Securities and Exchange Commission, the Company or any stockholder of the Company, upon request, full information regarding the number of shares sold at each separate price.
3. This number of shares consists of shares of Class A Common Stock held of record by Health Plan Intermediaries, LLC ("HPI") and Health Plan Intermediaries Sub, LLC ("HPIS"). HPIS owns 1,250 of such shares and the remainder are held by HPI. Michael Kosloske is the sole member and primary manager of HPI, and has sole voting and dispositive power over the shares held by HPI. HPI is the sole managing member of HPIS and has sole voting and dispositive power over the shares held by HPIS. Mr. Kosloske, by virtue of his control of HPI and HPI's control of HPIS, may be deemed to beneficially own all the shares of Class A Common Stock held of record by each of HPI and HPIS.
4. This number of shares consists of 2,391,701 shares of Class B Common Stock held of record by HPI and 24,966 shares of Class B Common Stock held by HPIS. Michael Kosloske is the sole member and primary manager of HPI, and has sole voting and dispositive power over the shares held by HPI. HPI is the sole managing member of HPIS and has sole voting and dispositive power over the shares held by HPIS. Mr. Kosloske, by virtue of his control of HPI and HPI's control of HPIS, may be deemed to beneficially own all the shares of Class B Common Stock held of record by each of HPI and HPIS.
5. Each share of Class B Common Stock held by the reporting persons, together with one Series B Membership Interest held by the reporting persons in Health Plan Intermediaries Holdings, LLC ("HPIH"), are together exchangeable, at any time, at the reporting persons' election, for one share of Class A Common Stock. This exchange right has no expiration date.
6. By Lori Kosloske. Michael Kosloske and Lori Kosloske are husband and wife.

/s/ Michael W. Kosloske      07/01/2019

\*\* 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.**