WELLCARE HEALTH PLANS, INC.

Form 4 June 14, 2007

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

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response...

Check this box if no longer subject to Section 16. Form 4 or

Form 5 obligations may continue. See Instruction

06/12/2007

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type I	Responses)											
Behrens Paul L Sym WE			Symbol WELLC	2. Issuer Name and Ticker or Trading Symbol WELLCARE HEALTH PLANS, NC. [WCG]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) 3. Date of (Month/D) C/O WELLCARE HEALTH 06/12/20 PLANS, INC., 8725 HENDERSON ROAD							Director 10% Owner Officer (give title Other (specify below) Sr. VP & CFO					
				nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
TAMPA, FI	L 33634							Form filed by M Person	Iore than One Re	porting		
(City)	(State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)		Code (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
Common Stock	06/12/2007			Code V S	Amount 57 (1)	(D)	Price \$ 90.35	250,432	D			
Common Stock	06/12/2007			S	114 (1)	D	\$ 90.34	250,318	D			
Common Stock	06/12/2007			S	57 <u>(1)</u>	D	\$ 90.33	250,261	D			
Common Stock	06/12/2007			S	57 <u>(1)</u>	D	\$ 90.32	250,204	D			

S

38 (1)

D

250,166

D

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Common Stock					\$ 90.31		
Common Stock	06/12/2007	S	38 (1)	D	\$ 90.3	250,128	D
Common Stock	06/12/2007	S	38 (1)	D	\$ 90.29	250,090	D
Common Stock	06/12/2007	S	57 <u>(1)</u>	D	\$ 90.28	250,033	D
Common Stock	06/12/2007	S	19 (1)	D	\$ 90.27	250,014	D
Common Stock	06/12/2007	S	76 <u>(1)</u>	D	\$ 90.26	249,938	D
Common Stock	06/12/2007	S	57 <u>(1)</u>	D	\$ 90.25	249,881	D
Common Stock	06/12/2007	S	19 (1)	D	\$ 90.24	249,862	D
Common Stock	06/12/2007	S	19 (1)	D	\$ 90.23	249,843	D
Common Stock	06/12/2007	S	38 (1)	D	\$ 90.21	249,805	D
Common Stock	06/12/2007	S	19 (1)	D	\$ 90.19	249,786	D

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

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SEC 1474 (9-02)

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)	4. Transac Code (Instr. 8	5. tionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	
			Code V	/ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

9. Nu

Deriv

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Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Behrens Paul L C/O WELLCARE HEALTH PLANS, INC. 8725 HENDERSON ROAD TAMPA, FL 33634

Sr. VP & CFO

Signatures

/s/ Michael Haber, attorney-in-fact

06/14/2007

**Signature of Reporting Person Date

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) Planned sale pursuant to the Reporting Person?s Rule 10b5-1 trading plan.

Remarks:

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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.

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