

Michalik Christian P  
 Form 4  
 March 07, 2013

**FORM 4**

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

OMB APPROVAL

OMB Number: 3235-0287  
 Expires: January 31, 2015  
 Estimated average burden hours per response... 0.5

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 OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
 Michalik Christian P

2. Issuer Name and Ticker or Trading Symbol  
 WELLCARE HEALTH PLANS, INC. [WCG]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

3. Date of Earliest Transaction (Month/Day/Year)  
 03/06/2013

Director  10% Owner  
 Officer (give title below)  Other (specify below)

C/O WELLCARE HEALTH PLANS, INC., 8725 HENDERSON ROAD

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

TAMPA, FL 33634

(City) (State) (Zip)

**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 Ownership (Instr. 4)
			Code	V	Amount or Price		
Common Stock	03/06/2013		M		11,000 A \$ 6.47	43,563	D
Common Stock	03/06/2013		S		4,388 D \$ 56.9	39,175	D
Common Stocki	03/06/2013		S		400 D \$ 56.91	38,775	D
Common Stock	03/06/2013		S		100 D \$ 56.92	38,675	D
	03/06/2013		S		12 D	38,663	D

Edgar Filing: Michalik Christian P - Form 4

Common Stock					\$ 56.93		
Common Stock	03/06/2013	S	100	D	\$ 56.96	38,563	D
Common Stock	03/06/2013	S	2,500	D	\$ 57	36,063	D
Common Stock	03/06/2013	S	1,400	D	\$ 57.1	34,663	D
Common Stock	03/06/2013	S	100	D	\$ 57.11	34,563	D
Common Stock	03/06/2013	S	1,500	D	\$ 57.12	33,063	D
Common Stock	03/06/2013	S	100	D	\$ 57.14	32,963	D
Common Stock	03/06/2013	S	400	D	\$ 57.18	32,563	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.**

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)	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 Underlying Securities (Instr. 3 and 4)	8. Amount or Number of Shares
Director Stock Option (right to buy)	\$ 6.47	03/06/2013		M	11,000	<u>(1)</u> 12/31/2013	Common Stock	11,000

## Reporting Owners

Reporting Owner Name / Address

Relationships

Reporting Owners

Edgar Filing: Michalik Christian P - Form 4

Director 10% Owner Officer Other

Michalik Christian P  
C/O WELLCARE HEALTH PLANS, INC. X  
8725 HENDERSON ROAD  
TAMPA, FL 33634

## Signatures

Michael Haber,  
Attorney-in-fact 03/07/2013

\_\_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) This option vested 25% on June 30, 2004 and as to 2.083% upon the end of each full calendar month 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.