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MAGELLAN HEALTH SERVICES INC Form 4 December 26, 2007

FORM	IΛ								OMB A	PPROVAL	
UNITED STATES SECURITIES AND EXCHANGE C Washington, D.C. 20549						COMMISSION	OMB Number:	3235-0287			
Check this box if no longer									Expires:	January 31, 2005	
STATEMENT OF Cl subject to Section 16. Form 4 or Form 5 Filed pursuant to Section				SECUR	ITIES				Estimated a burden hou response	average	
obligation may cont <i>See</i> Instru 1(b).	ns Section 17(a	a) of the Pu	ıblic Ut		ling Con	npany	y Act of	1935 or Section	ı		
(Print or Type I	Responses)										
1. Name and Address of Reporting Person *2. IssuerWEST JEFFREY NSymbol				r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
			MAGELLAN HEALTH SERVICES INC [MGLN]					(Check all applicable)			
(M			3. Date of Earliest Transaction (Month/Day/Year) 12/21/2007					Director 10% Owner Officer (give title Other (specify below) below) SVP & Controller			
				f Amendment, Date Original cd(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
MARYLAN HEIGHTS,								Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Ordinary				Code V	Amount		Price	(Instr. 3 and 4)			
Common Stock, \$0.01 par value	12/21/2007			X <u>(1)</u>	4,333	A	\$ 38.52	6,388	D		
Ordinary Common Stock, \$0.01 par value	12/21/2007			X <u>(1)</u>	3,333	A	\$ 38.21	9,721	D		
	12/21/2007			S <u>(1)</u>	7,666	D		2,055	D		

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Ordinary	\$
Common	48.58
Stock,	
\$0.01 par	
value	

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.

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. Transactio Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and <i>J</i> Underlying S (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 38.52	12/21/2007		X <u>(1)</u>	4,333	02/24/2007 <u>(2)</u>	02/24/2016	Ordinary Common Stock	4,333
Stock Option (right to buy)	\$ 38.21	12/21/2007		X <u>(1)</u>	3,333	03/20/2007 <u>(4)</u>	03/20/2016	Ordinary Common Stock	3,333

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
WEST JEFFREY N 14100 MAGELLAN PLAZA MARYLAND HEIGHTS, MO 63043			SVP & Controller				

Signatures

**Signature of

Reporting Person

/s/ Jeffrey N West

12/26/2007

	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 transaction was effectuated pursuant to a Rule 10b-5-1 plan and, accordingly, not on a discretionary basis by the reporting person.
- (2) Remainder of 8,667 options in this tranche vest and become exercisable in one half increments on February 24 of 2008 and 2009.
- (3) No price was applicable to the acquisition of this security.

(4) Remainder of 6,667 options in this tranche vest and become exercisable in one half increments on March 20 of 2008 and 2009.

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.