Edgar Filing: MAGELLAN HEALTH SERVICES INC - Form 4

MAGELLAN HEALTH SERVICES INC

Form 4

Ordinary

Common

11/22/2013

November 25, 2013

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL		
. •	UNITED STATE	OMMISSION	OMB Number:	3235-0287						
Check the if no lon	ger	Washington			Expires:	January 31, 2005				
subject t Section 1 Form 4 o Form 5	o STATEMENT C 16. or	SECUI	NGES IN BENEFICIAL OWNERSHIP OF SECURITIES					verage rs per		
Form 5 obligations may continue. See Instruction 1(b). 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 A	Address of Reporting Person *	2. Issuer Name an Symbol	d Ticker or	Tradir	ng	5. Relationship of Issuer	Reporting Pers	son(s) to		
		MAGELLAN H INC [MGLN]	EALTH S	SERV	/ICES	(Check all applicable)				
(Last)	(First) (Middle)	3. Date of Earliest TransactionX_ Dir (Month/Day/Year)Off					title _X_ Oth	Owner er (specify		
55 NOD RO	OAD	11/22/2013	below)					below) rman of the Board		
	(Street)	4. If Amendment, D Filed(Month/Day/Yea	y/Year) Applicable Line) _X_ Form filed by				oint/Group Filing(Check One Reporting Person More than One Reporting			
AVON, CT	06001					Person	iore than One Re	porung		
(City)	(State) (Zip)	Table I - Non-	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	any		4. Securit or(A) or Di (Instr. 3,	sposed	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
0 - 1'		Code V	Amount		Price	(Instr. 3 and 4)				
Ordinary Common Stock, \$0.01 par value	11/22/2013	X <u>(1)</u>	14,700	A	\$ 40.63	98,789	D			
Ordinary Common Stock, \$0.01 par value	11/22/2013	S <u>(1)</u>	5,500	D	\$ 60.68	93,289	D			

 $S^{(1)}$

1,000

D

\$

60.67

92,289

D

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Stock, \$0.01 par value							
Ordinary Common Stock, \$0.01 par value	11/22/2013	S <u>(1)</u>	6,300	D	\$ 60.66	85,989	D
Ordinary Common Stock, \$0.01 par value	11/22/2013	S <u>(1)</u>	1,900	D	\$ 60.65	84,089	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. Transactic Code (Instr. 8)	5. Number of orDerivative 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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 40.63	11/22/2013		X(1)	14,700	<u>(2)</u>	03/02/2017	Common	14,700

Reporting Owners

Reporting Owner Name / Address	Relationships						
· · · · · · · · · · · · · · · · · · ·	Director	10% Owner	Officer	Other			
LERER RENE 55 NOD ROAD	X			Chairman of the Board			
AVON, CT 06001	11			Chairman of the Board			

Reporting Owners 2

Signatures

/s/ Rene Lerer 11/25/2013

**Signature of Date
Reporting Person

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.
- (2) All options in this tranche have vested and are fully exercisable.
- (3) Not applicable.

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.

Signatures 3