Edgar Filing: Sattaur Imtiaz - Form 4

Sattaur Imtiaz									
Form 4 July 29, 2005									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								PPROVAL 3235-0287	
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation: may contin <i>See</i> Instruct 1(b).	Filed pu Section 17	rsuant to S (a) of the l	Section Public U	SECUE 16(a) of th Itility Hol	RITIES ne Securi ding Cor	ties Excha	WNERSHIP OF nge Act of 1934, of 1935 or Section 940	Estimated burden hoi response	urs per
(Print or Type R	esponses)								
1. Name and Address of Reporting Person <u>*</u> Sattaur Imtiaz			2. Issuer Name and Ticker or Trading Symbol WELLCARE HEALTH PLANS, INC. [WCG]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	(First) CARE HEALTH C., 8725 HEND			of Earliest T Day/Year) 2005	ransaction		Director X Officer (gives below) Pr		% Owner her (specify
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person			
TAMPA, FL	33634						Form filed by Person	More than One R	eporting
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	ally Owned
	. Transaction Date Month/Day/Year)		Date, if	Code (Instr. 8)	Disposed (Instr. 3, 4	(A) or of (D) 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
				Code V		(D) Price			
Reminder: Repo	rt on a separate lin	e for each cl	ass of sec	urities benef	ficially ow	ned directly o	or indirectly.		

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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)	TransactionDerivative Code Securities		Expiration Date		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (E) Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option (right to buy)	\$ 36.45	07/27/2005		A	38,900	<u>(1)</u>	07/27/2012	Common Stock	38,900	

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	lationships Officer President, Florida	Other	
Sattaur Imtiaz C/O WELLCARE HEALTH PLANS, INC. 8725 HENDERSON ROAD TAMPA, FL 33634			President, Florida		
Signatures					

/s/ Michael Haber, Attorney-in-fact

07/29/2005

**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) These options vest as to 20% on each one-year anniversary of the date of grant and shall expire on the seventh anniversary of the date of grant.

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.