

WELLCARE HEALTH PLANS, INC.

Form 4

June 27, 2007

FORM 4**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0287

Expires: January 31, 2005

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 *
Bereday Thaddeus

(Last) (First) (Middle)

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

(Street)

TAMPA, FL 33634

(City) (State) (Zip)

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

3. Date of Earliest Transaction
(Month/Day/Year)
06/25/2007

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

5. Relationship of Reporting Person(s) to
Issuer

(Check all applicable)

____ Director ____ 10% Owner
____X____ Officer (give title below) ____ Other (specify below)
Sr. VP & General Counsel

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

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 Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price		
Common Stock	06/25/2007		S		531 <u>(1)</u>	D	\$ 91.75	108,456	D
Common Stock	06/25/2007		S		19 <u>(1)</u>	D	\$ 91.73	108,437	D
Common Stock	06/25/2007		S		360 <u>(1)</u>	D	\$ 91.71	108,077	D
Common Stock	06/25/2007		S		19 <u>(1)</u>	D	\$ 91.69	108,058	D
	06/25/2007		S		19 ⁽¹⁾	D		108,039	D

Edgar Filing: WELLCARE HEALTH PLANS, INC. - Form 4

Common Stock					\$ 91.66		
Common Stock	06/25/2007	S	19 <u>(1)</u>	D	\$ 91.65	108,020	D
Common Stock	06/25/2007	S	95 <u>(1)</u>	D	\$ 91.62	107,925	D
Common Stock	06/25/2007	S	38 <u>(1)</u>	D	\$ 91.61	107,887	D
Common Stock	06/25/2007	S	19 <u>(1)</u>	D	\$ 91.59	107,868	D
Common Stock	06/25/2007	S	133 <u>(1)</u>	D	\$ 91.56	107,735	D
Common Stock	06/25/2007	S	361 <u>(1)</u>	D	\$ 91.55	107,374	D
Common Stock	06/25/2007	S	38 <u>(1)</u>	D	\$ 91.54	107,336	D
Common Stock	06/25/2007	S	19 <u>(1)</u>	D	\$ 91.53	107,317	D
Common Stock	06/25/2007	S	322 <u>(1)</u>	D	\$ 91.52	106,995	D
Common Stock	06/25/2007	S	57 <u>(1)</u>	D	\$ 91.51	106,938	D
Common Stock	06/25/2007	S	1,875 <u>(1)</u>	D	\$ 91.5	105,063	D
Common Stock	06/25/2007	S	38 <u>(1)</u>	D	\$ 91.47	105,025	D
Common Stock	06/25/2007	S	114 <u>(1)</u>	D	\$ 91.43	104,911	D
Common Stock	06/25/2007	S	208 <u>(1)</u>	D	\$ 91.42	104,703	D
Common Stock	06/25/2007	S	19 <u>(1)</u>	D	\$ 91.38	104,684	D
Common Stock	06/25/2007	S	826 <u>(1)</u>	D	\$ 91	103,858	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)

Edgar Filing: WELLCARE HEALTH PLANS, INC. - Form 4

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. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repor Trans (Instr
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Bereday Thaddeus C/O WELLCARE HEALTH PLANS, INC. 8725 HENDERSON ROAD TAMPA, FL 33634			Sr. VP & General Counsel	

Signatures

/s/ Michael Haber,
attorney-in-fact

06/27/2007

__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.

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.