**BERG CHARLES** 

Form 4 May 13, 2013

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

**OMB APPROVAL** 

response...

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations may continue. See Instruction

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

1(b).

Common

Stock

05/10/2013

05/10/2013

(Print or Type Responses)												
,			2. Issuer Name and Ticker or Trading Symbol WELLCARE HEALTH PLANS, INC. [WCG]				5	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
(M			(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 05/10/2013					_X_ Director 10% Owner Officer (give title below) Other (specify below)			
				If Amendment, Date Original led(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 More than One Reporting Person			
(City)	(State)	(Zip)	Tabl	le I - No	n-I	Derivative	Secui	rities Acqu	ired, Disposed of	, or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution		Code (Instr.	8)	4. Securi on(A) or Di (Instr. 3,	spose	d of (D)	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 Beneficial Ownership (Instr. 4)	
Common Stock	05/10/2013			S		4,100	D	\$ 57	3,333	D		
Common Stock	05/10/2013			S		200	D	\$ 57.01	3,133	D		
Common Stock	05/10/2013			S		300	D	\$ 57.02	2,833	D		

S

S

300

100

D

2,533

\$ 57.03 2,433

D

D

Common Stock							
Common Stock	05/10/2013	S	1,633	D	\$ 57.75	800	D
Common Stock	05/10/2013	S	200	D	\$ 57.8	600	D
Common Stock	05/10/2013	S	200	D	\$ 57.801	400	D
Common Stock	05/10/2013	S	100	D	\$ 57.81	300	D
Common Stock	05/10/2013	S	200	D	\$ 57.85	100	D
Common Stock	05/10/2013	S	100	D	\$ 57.858	0	D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

> 9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Titl	e and	8. Price of	•
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Da	ate	Amou	int of	Derivative	j
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Ì
	Derivative				Securities	3		(Instr.	3 and 4)		(
	Security				Acquired						1
					(A) or						1
					Disposed						,
					of (D)						
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date	Expiration	Title	Number		
						Exercisable	able Date		of		
				Code V	(A) (D)				Shares		
				Code v	(A) $(D)$				Shares		

# **Reporting Owners**

8725 HENDERSON ROAD

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Othe			
BERG CHARLES	X						
C/O WELLCARE HEALTH PLANS, INC.							

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**TAMPA**, FL 33634

## **Signatures**

/s/ Michael Haber, Attorney-in-fact

05/13/2013

\*\*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).

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.

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