#### Edgar Filing: MAGELLAN HEALTH SERVICES INC - Form 4

#### MAGELLAN HEALTH SERVICES INC

Form 4

January 07, 2010

# FORM 4

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

January 31, Expires: 2005

0.5

**OMB APPROVAL** 

Form 4 or Form 5 obligations may continue.

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

2. Issuer Name and Ticker or Trading

Symbol

burden hours per response...

5. Relationship of Reporting Person(s) to

Issuer

Estimated average

See Instruction

1(b).

LERER RENE

(Print or Type Responses)

1. Name and Address of Reporting Person \*

			MAGELLAN HEALTH SERVICES INC [MGLN]					(Check all applicable)			
(Last) 55 NOD RO	, ,	(	3. Date of Earliest Transaction (Month/Day/Year) 01/04/2010					_X_ Director 10% Owner _X_ Officer (give title Other (specify below)  Chief Executive Officer			
				ndment, Da hth/Day/Year	_	l		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
AVON, CT 06001								Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acqu	ired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Da	Date, if	3. Transactio Code (Instr. 8)	4. Securit n(A) or Dis (Instr. 3, 4	sposed	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)	
Ordinary Common Stock, \$0.01 par value	01/04/2010				17,500	` ´		55,950	D		
Ordinary Common Stock, \$0.01 par value	01/04/2010			S <u>(1)</u>	1,900	D	\$ 41.17	54,050	D		
Ordinary Common	01/04/2010			S(1)	3,100	D	\$ 41.2	50,950	D		

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Stock, \$0.01 par value							
Ordinary Common Stock, \$0.01 par value	01/04/2010	S <u>(1)</u>	2,500	D	\$ 41.33	48,450	D
Ordinary Common Stock, \$0.01 par value	01/04/2010	S <u>(1)</u>	2,500	D	\$ 41.41	45,950	D
Ordinary Common Stock, \$0.01 par value	01/04/2010	S <u>(1)</u>	2,500	D	\$ 41.51	43,450	D
Ordinary Common Stock, \$0.01 par value	01/04/2010	S <u>(1)</u>	2,500	D	\$ 41.53	40,950	D
Ordinary Common Stock, \$0.01 par value	01/04/2010	S <u>(1)</u>	2,500	D	\$ 41.6	38,450	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)

	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. 5. Number of TransactionDerivative		6. Date Exercisable and Expiration Date		7. Title and Amount of Underlying Securities		
Security	or Exercise		any	Code Securities		(Month/Day/Year)		(Instr. 3 and 4)		
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	) Ac	quired (A)				
	Derivative				or Disposed of					
	Security				(D)					
					(In	str. 3, 4,				
					and	d 5)				
				Code V	/ (A	) (D)	Date Exercisable	Expiration Date	Title	Amount or Number

of Shares

Stock

Option (right to \$ 34.57 01/04/2010  $X_{\underline{}}^{(1)}$  17,500  $\underline{}^{(2)}$  03/10/2015 Common Stock 17,500

buy)

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

LERER RENE

55 NOD ROAD X Chief Executive Officer

AVON, CT 06001

# **Signatures**

/s/ Rene Lerer 01/06/2010

\*\*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 and, accordingly, not on a discretionary basis by the reporting person.
- (2) Options vested in full as of 3/10/2009 and are currently 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.

Reporting Owners 3