Edgar Filing: MAGELLAN HEALTH SERVICES INC - Form 4

MAGELLAN HEALTH SERVICES INC

Form 4

Ordinary Common

\$0.01 par value

11/14/2005

Stock,

November 16, 2005

FORM	1 1								OMB AF	PPROVAL	
	UNITEDS	STATES S		ITIES A hington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check the if no long subject to Section 1 Form 4 c	CHANGES IN BENEFICIAL OWN SECURITIES						Expires: January 3 20 Estimated average burden hours per response 0				
Form 5 obligatio may com See Instr 1(b).	Section 17(a) of the P	ublic Ut		ding Con	npany	y Act of	e Act of 1934, 1935 or Section 0	n		
(Print or Type l	Responses)										
1. Name and Address of Reporting Person * DEMILIO MARK S			2. Issuer Name and Ticker or Trading Symbol MAGELLAN HEALTH SERVICES					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 55 NOD RO	(Last) (First) (Middle) 3.1			GLN] Earliest Ti ay/Year) 005	ransaction			Director 10% Owner Selection Other (specify below)			
AVON, CT	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 Form filed by More than One Reporting Person					
(City)	(State)	Zip)	Table	e I - Non-I	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	ty (Month/Day/Year) Execution Date, if			3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Ordinary Common				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			
Stock, \$0.01 par value	11/14/2005			S <u>(1)</u>	32	D	э 28.82	9,780	D		

 $X_{\underline{(1)}}$ 1 A $^{\$}_{10.43}$ 9,781 $^{\underline{(2)}}$ D

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

OMB APPROVAL

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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. orNumber 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. Pr Deri Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 10.43	11/14/2005		X(1)	1	01/05/2005	01/05/2014	Ordinary Common Stock	1	\$
Ordinary Common Stock Warrants (Right to Buy)	\$ 30.46	11/16/2005		D <u>(1)</u>	32	01/05/2004	01/05/2011	Ordinary Common Stock	32	\$ 1

Reporting Owners

Reporting Owner Name / Address	Relationships
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Director 10% Owner Officer Other

DEMILIO MARK S

55 NOD ROAD

Chief Financial Officer

AVON, CT 06001

Signatures

/s/ Mark S.

Demilio 11/16/2005

**Signature of Date

**Signature of
Reporting Person

Reporting Owners 2

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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) Balance reflects 9,780 shares of restricted stock granted on 3/10/05 as well as 1 additional share of stock as a result of the stock option exercise being reported.
- (3) Not applicable.
- (4) Total number of options exercisable as of 01/05/2005 were 82,601 shares, all of which have been exercised. The remainder of 165,201 options will vest in increments of one half on January 5, 2006 and 2007.

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.