

WELLCARE HEALTH PLANS, INC.

FORM 8-K

(Current report filing)

Filed 07/15/09 for the Period Ending 07/09/09

Address	8725 HENDERSON ROAD RENAISSANCE ONE TAMPA, FL 33634
Telephone	8132906200
CIK	0001279363
Symbol	WCG
SIC Code	6324 - Hospital and Medical Service Plans
Industry	Insurance (Accident & Health)
Sector	Financial
Fiscal Year	12/31

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

FORM 8-K

CURRENT REPORT
Pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): **July 9, 2009**

WELLCARE HEALTH PLANS, INC.

(Exact name of registrant as specified in its charter)

Delaware
(State or other jurisdiction
of incorporation)

001-32209
(Commission File Number)

47-0937650
(IRS Employer
Identification No.)

8735 Henderson Road, Renaissance One
Tampa, Florida
(Address of principal executive offices)

33634
(Zip Code)

Registrant's telephone number, including area code: **(813) 290-6200**

Not Applicable
(Former name or former address, if changed since last report.)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions (see General Instruction A.2. below):

- Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)
 - Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)
 - Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))
 - Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))
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Item 1.01 Entry into a Material Definitive Agreement.

On July 9, 2009, WellCare Health Plans, Inc. (the “*Company*”) received from the State of Florida’s Agency for Health Care Administration (“*AHCA*”) an executed copy of Amendment No. 11 (the “*StayWell Amendment*”) to Contract FA615, a Medicaid HMO Contract between AHCA and WellCare of Florida, Inc. (d/b/a StayWell Health Plan of Florida) (“*StayWell*”), a wholly-owned subsidiary of the Company. The Company also received on July 9, 2009, an executed copy of Amendment No. 9 (the “*HealthEase Amendment*”) and together with the StayWell Amendment, the “*Amendments*”) to Contract FA619, a Medicaid HMO Contract between AHCA and HealthEase of Florida, Inc. (“*HealthEase*”), another wholly-owned subsidiary of the Company.

Under the Amendments, each of StayWell and HealthEase is required to, among other things:

- Include in its fraud and abuse procedures details about certain matters such as the False Claims Act and whistleblower protections;
- Distribute written fraud and abuse policies to all employees and include information regarding Section 6032 of the federal Deficit Reduction Act of 2005, the Company’s policies and whistleblower protections in its employee handbook;
- Ensure that individuals and entities that are subcontracted to conduct utilization management activities are not compensated in a way to incentivize them to deny, limit or discontinue medically necessary services to members; and
- Ensure that its subcontracts contain details about certain matters such as the False Claims Act and whistleblower protections.

The foregoing description does not purport to be a complete description of the parties’ rights and obligations under the Amendments. The above description is qualified in its entirety by reference to the StayWell Amendment and the HealthEase Amendment, which are attached as Exhibits 10.1 and 10.2, respectively, to this Current Report on Form 8-K.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits.

The following exhibits are filed as part of this report:

- 10.1 [Amendment No. 11 to Contract FA615 between the Agency for Health Care Administration and WellCare of Florida, Inc. \(d/b/a StayWell Health Plan of Florida\)](#)
 - 10.2 [Amendment No. 9 to Contract FA619 between the Agency for Health Care Administration and HealthEase of Florida, Inc.](#)
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SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, as amended, the Registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

Date: July 15, 2009

WELLCARE HEALTH PLANS, INC.

/s/ Heath Schiesser
President and Chief Executive Officer

Exhibit Index

<u>Exhibit No.</u>	<u>Description</u>
10.1	Amendment No. 11 to Contract FA615 between the Agency for Health Care Administration and WellCare of Florida, Inc. (d/b/a StayWell Health Plan of Florida)
10.2	Amendment No. 9 to Contract FA619 between the Agency for Health Care Administration and HealthEase of Florida, Inc.

**WellCare of Florida, Inc. d /b/a
Staywell Health Plan of Florida**

Medicaid HMO Contract

**AHCA CONTRACT NO. FA615
AMENDMENT NO. 11**

THIS CONTRACT , entered into between the **STATE OF FLORIDA, AGENCY FOR HEALTH CARE ADMINISTRATION** , hereinafter referred to as the “Agency” and **WELLCARE OF FLORIDA, INC. D/B/A STAYWELL HEALTH PLAN OF FLORIDA** , hereinafter referred to as the “Vendor” or “Health Plan”, is hereby amended as follows:

1. Attachment II, Medicaid Prepaid Health Plan Model Contract, Section X., Administration and Management, Item I., Fraud Prevention, sub-item 4., is hereby amended to include the following:
 - I. Provide details about the following, as required by Section 6032 of the federal Deficit Reduction Act of 2005:
 - (1) the False Claim Act;
 - (2) the penalties for submitting false claims and statements;
 - (3) whistleblower protections;
 - (4) the law’s role in preventing and detecting fraud, waste and abuse; and,
 - (5) each person’s responsibility relating to detection and prevention.
2. Attachment II, Medicaid Prepaid Health Plan Model Contract, Section X., Administration and Management, Item I., sub-item 7. is hereby included as follows:
 7. In accordance with Section 6032 of the federal Deficit Reduction Act of 2005, the Health Plan shall distribute written Fraud and Abuse policies to all employees. If the Health Plan has an employee handbook, the Health Plan shall include specific information about Section 6032 of the federal Deficit Reduction Act of 2005, the Health Plan’s policies, and the rights of employees to be protected as whistleblowers.
3. Attachment II, Medicaid Prepaid Health Plan Model Contract, Section XVI., Terms and Conditions, Item 0., Subcontracts, sub-items 9. and 10., are hereby included as follows:
 9. The Health Plan must provide that compensation to individuals or entities that conduct utilization management activities is not structured so as to provide incentives for the individual or entity to deny, limit, or discontinue medically necessary services to any Enrollee.
 10. Provide details about the following, as required by Section 6032 of the federal Deficit Reduction Act of 2005:
 - (6) the False Claim Act;
 - (7) the penalties for submitting false claims and statements;
 - (8) whistleblower protections;
 - (9) the law’s role in preventing and detecting fraud, waste and abuse; and,
 - (10) each person’s responsibility relating to detection and prevention.

All provisions in the Contract and any attachments thereto in conflict with this Amendment shall be and are hereby changed to conform with this Amendment.

All provisions not in conflict with this Amendment are still in effect and are to be performed at the level specified in the Contract.

This Amendment, and all its attachments, are hereby made part of the Contract.

This Amendment cannot be executed unless all previous Amendments to this Contract have been fully executed.

IN WITNESS WHEREOF, the parties hereto have caused this two (2) page Amendment (including all attachments) to be executed by their officials thereunto duly authorized.

**WELLCARE OF FLORIDA, INC.
D/B/A STAYWELL HEALTH PLAN
OF FLORIDA**

**STATE OF FLORIDA, AGENCY FOR
HEALTH CARE ADMINISTRATION**

SIGNED

BY: /s/ Heath Schiesser

SIGNED

BY: /s/ Holly Benson

NAME: Heath Schiesser

NAME: Holly Benson

TITLE: President and CEO

TITLE: Secretary

DATE: June 29, 2009

DATE: 6/30/09

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HealthEase of Florida, Inc.

Medicaid HMO Contract

**AHCA CONTRACT NO. FA619
AMENDMENT NO. 9**

THIS CONTRACT , entered into between the **STATE OF FLORIDA, AGENCY FOR HEALTH CARE ADMINISTRATION** , hereinafter referred to as the “Agency” and **HEALTHEASE OF FLORIDA, INC.** , hereinafter referred to as the “Vendor” or “Health Plan”, is hereby amended as follows:

1. Attachment II, Medicaid Prepaid Health Plan Model Contract, Section X., Administration and Management, Item I., Fraud Prevention, sub-item 4., is hereby amended to include the following:
 - I. Provide details about the following, as required by Section 6032 of the federal Deficit Reduction Act of 2005:
 - (1) the False Claim Act;
 - (2) the penalties for submitting false claims and statements;
 - (3) whistleblower protections;
 - (4) the law’s role in preventing and detecting fraud, waste and abuse; and,
 - (5) each person’s responsibility relating to detection and prevention.
2. Attachment II, Medicaid Prepaid Health Plan Model Contract, Section X., Administration and Management, Item I., sub-item 7. is hereby included as follows:
 7. In accordance with Section 6032 of the federal Deficit Reduction Act of 2005, the Health Plan shall distribute written Fraud and Abuse policies to all employees. If the Health Plan has an employee handbook, the Health Plan shall include specific information about Section 6032 of the federal Deficit Reduction Act of 2005, the Health Plan’s policies, and the rights of employees to be protected as whistleblowers.
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 9. The Health Plan must provide that compensation to individuals or entities that conduct utilization management activities is not structured so as to provide incentives for the individual or entity to deny, limit, or discontinue medically necessary services to any Enrollee.
 10. Provide details about the following, as required by Section 6032 of the federal Deficit Reduction Act of 2005:
 - (6) the False Claim Act;
 - (7) the penalties for submitting false claims and statements;
 - (8) whistleblower protections;
 - (9) the law’s role in preventing and detecting fraud, waste and abuse; and,
 - (10) each person’s responsibility relating to detection and prevention.

All provisions in the Contract and any attachments thereto in conflict with this Amendment shall be and are hereby changed to conform with this Amendment.

All provisions not in conflict with this Amendment are still in effect and are to be performed at the level specified in the Contract.

This Amendment, and all its attachments, are hereby made part of the Contract.

