## Edgar Filing: Fritch Herbert A - Form 4

Fritch Herbe Form 4 March 08, 20								
FORM	UNITED STAT	ES SECURITIES AN Washington, D		E COMMISSION	OMB AF OMB Number:	PROVAL 3235-0287		
Check this box if no longer subject to Section 16. Form 4 or				OWNERSHIP OF	Expires: Estimated a burden hour			
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(c) Form 5 obligations Mage Comparison 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 (C) (C) (C) (C) (C) (C) (C) (C)								
(Print or Type l	Responses)							
1. Name and A Fritch Herb	address of Reporting Person $\underline{\overset{*}{}}$ ert A	2. Issuer Name <b>and</b> T Symbol HealthSpring, Inc.	-	Issuer				
(Last) 9009 CARO PARKWAY	(First) (Middle) OTHERS 7, SUITE 501	3. Date of Earliest Tran (Month/Day/Year) 03/07/2011	nsaction	_X_ Director _X_ Officer (give below)	X Officer (give title Other (specify			
	(Street)	(Street) 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			
FRANKLIN	I, TN 37067			Form filed by M Person	ore than One Re	porting		
(City)	(State) (Zip)	Table I - Non-Der	rivative Securities	Acquired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. D (Month/Day/Year) Execu any (Mont	tion Date, if Transaction Code h/Day/Year) (Instr. 8) Code V	(A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Pr	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock	03/07/2011		$7,500 D \frac{3}{37}$	2,525,802	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.

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

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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)	;	ate	7. Title Amoun Underl Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo 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			
Fritch Herbert A 9009 CAROTHERS PARKWAY SUITE 501 FRANKLIN, TN 37067	Х		Chairman & CEO				
Signatures							
/s/ J. Gentry Barden, Attorney-in-Fact	(	03/08/2011					
**Signature of Reporting Person		Date					
Attorney-in-Fact	(						

## **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) The sales reported in this Form 4 entry were effected pursuant to a 10b5-1 trading plan adopted by the reporting person on November 1, 2010.

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.