HealthMarkets, Inc. Form 4 December 20, 2007

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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may continue.

Check this box

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

See Instruction

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person * MYHRA PHILLIP J

(First)

(Street)

Symbol

(Middle)

HealthMarkets, Inc. [N/A]

3. Date of Earliest Transaction (Month/Day/Year)

12/19/2007

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner __X__ Other (specify Officer (give title below) below)

Former EVP

6. Individual or Joint/Group Filing(Check Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

NORTH RICHLAND HILLS, TX 76180

9151 BOULEVARD 26

(City) (State) (Zip) 1. Title of 2. Transaction Date 2A. Deemed Security

(Month/Day/Year) Execution Date, if Code (Month/Day/Year) (Instr. 8)

3. 4. Securities Acquired Transaction(A) or Disposed of (D) (Instr. 3, 4 and 5)

Owned Reported

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

5. Amount of Securities Beneficially Following

6. 7. Nature of Ownership Indirect Form: Direct Beneficial (D) or Ownership Indirect (I) (Instr. 4)

(Instr. 4)

Transaction(s) (Instr. 3 and 4)

Class A-1

(Instr. 3)

Common 12/19/2007 Stock

48,674 A M

(D) Code V Amount

Price

(A)

48,674

D

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

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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. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4,		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount o Underlying Securities (Instr. 3 and 4)	
					Code V	and 5	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
	Stock	\$ 26.49	12/10/2007		M		48,674	05/09/2007	00/21/2000(1)	Class A-1	48,674

M

Reporting Owners

(1)

Option

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

MYHRA PHILLIP J 9151 BOULEVARD 26 NORTH RICHLAND HILLS, TX 76180

Former EVP

(1)

05/08/2007 08/31/2008(1) Common

(1)

Stock

Signatures

Phillip J. Myhra by Peggy G. Simpson, POA

12/19/2007

**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).

On May 8, 2006, the reporting person was granted options to purchase the Company's Class A-1 Common Stock pursuant to the HealthMarkets, Inc. 2006 Management Option Plan. The options consisted of three tranches -- time based, increasing exercise price and performance based. The initial exercise price of each option was \$37.00. In connection with the extraordinary dividend payable and paid

(1) on May 14, 2007, the options were modified to reflect an initial exercise price of \$26.49. Pursuant to the terms of the reporting person's termination of employment in August 2007, the reporting person vested in an additional 25% of the performance based options and forfeited a portion of the remaining options, resulting in a total of 48,674 options (consisting of three tranches) remaining at an initial exercise price of \$26.49 and expiring one year from date of termination of employment.

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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