### Edgar Filing: Klein James R - Form 4

Klein James I Form 4	R										
August 25, 20	008										
FORM	4									PPROVAL	
Washington, D.C. 20549						COMMISSION	OMB Number:	3235-0287			
Check thi if no long subject to Section 10 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	er <b>STATEN</b> 5. 5. Filed pur <sup>18</sup> Section 17(	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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							Expires:     January 31       Expires:     200!       Estimated average     burden hours per       response     0.!		
(Print or Type R	esponses)										
Klein James R Symbol			r Name and Ticker or Trading RAMED CORP [QDHC]				5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle) 3. Da (Mor C/O QUADRAMED 08/2 CORPORATION, 12110 SUNSET			(Month/D	3. Date of Earliest Transaction Month/Day/Year) )8/22/2008				(Check all applicable) <u></u> Director <u></u> 10% Owner <u></u> Officer (give title <u></u> Other (specify below) <u>below</u> ) SVP and CTO			
				ndment, Date Original hth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
RESTON, V	A 20190								Aore than One Re		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Execution any		Code (Instr. 8)	on(A) or Di (D)	spose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	08/22/2008			S <u>(1)</u>	2,000	D	\$ 8.99	80,100 <u>(2)</u>	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. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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		
Klein James R C/O QUADRAMED CORPORATION 12110 SUNSET HILLS ROAD, SUITE 600 RESTON, VA 20190			SVP and CTO			

## Signatures

/s/ James R. 08/25/2008 Klein

\*\*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).

Mr. Klein received 20,000 shares of restricted stock on August 1, 2005 pursuant to a Restricted Stock Agreement with QuadraMed

- Corporation (the "Agreement"). In accordance with the Agreement, the contractual restrictions on the transfer of these 20,000 shares (1) lapsed on the following schedule: (i) 7,000 on August 1, 2006; (ii) 7,000 on August 1, 2007; and (iii) 6,000 on August 1, 2008. Each such lapsing of contractual restrictions triggers an immediate tax obligation for Mr. Klein.
- (2) 80,000 of such shares of common stock are issuable upon the exercise of options.

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.