Farris Michael Form 3 November 14, 2011 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number: January 31, **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** Expires: 2005 **SECURITIES** Estimated average

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

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Farris Michael			2. Date of Event Requi Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol HEALTHWAYS, INC [HWAY]			
(Last)	(First)	(Middle)	11/02/2011		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)	
701 COOL SPRINGS BOULEVARD				(Check	k all applicable))	· · /	
(Street) FRANKLIN, TN 37067			Director 10% Owne X Officer Other (give title below) (specify below) NavvisHealthcare, LLC CEO		r ow)	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	I - Non-Deriva	tive Securiti	ies Bei	neficially Owned	
1.Title of Secur (Instr. 4)	ity			int of Securities ially Owned)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owner (Instr.	•	
Restricted St	ock		389,61	1 (1)	Ι	Held	by MJLE, Inc.	
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.					SEC 1473 (7-02	2)		

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		4. Conversion or Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		(Instr. 4)	Price of	Derivative	(1154.5)
		Title	Derivative	Security:	
			Security	Direct (D)	

burden hours per

0.5

response...

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Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	rector 10% Owner Officer		Other			
Farris Michael 701 COOL SPRINGS BOULEVARD FRANKLIN, TN 37067	Â	Â	NavvisHealthcare, LLC CEO	Â			
Signatures							
/s/ Alfred Lumsdaine,by power of attorney for Michael 11/14/2011 Farris			11/14/2011				
 Signature of Reporting Person	ı						
Explanation of Responses:							
* If the form is filed by more than	If the form is filed by more than one reporting person, <i>see</i> Instruction $5(b)(v)$.						
** Intentional misstatements or omi	Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C.						

** Intentional missialements of omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) Shares issued as part of the purchase price of the acquisition of NavvisHealthcare, LLC by Healthways on August 31, 2011. Shares may not be transferred for 30 months from August 31, 2011.

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.