SIERRA HEALTH SERVICES INC

Form 4 May 17, 2006

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, Expires: 2005 Estimated average

Form 4 or Form 5 obligations **SECURITIES**

burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

may continue. See Instruction

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

1(b).

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person *

HOWARD LARRY S			Symbol SIERRA HEALTH SERVICES INC [SIE]					Issuer (Check all applicable)				
(Last) (First) (Middle) 2724 N. TENAYA WAY			3. Date of Earliest Transaction (Month/Day/Year) 05/16/2006					Director 10% Owner Selfow Officer (give title Other (specify below) Sr. V.P., Program Office				
				nendment, I onth/Day/Ye	Oate Original ear)		A_{j}	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
LAS VEG	AS, NV 89128						Pe	_ Form filed by Mor erson	e than One Rep	orting		
(City)	(State)	(Zip)	Tal	ble I - Non	-Derivative S	Securi	ties Acquir	ed, Disposed of, o	r Beneficially	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Dat any (Month/Day/Y			Date, if TransactiorDisposed of (D) Code (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Ownership Indirect Form: Beneficial Direct (D) Ownership or Indirect (Instr. 4) (I)) (Instr. 4)			
Common Stock	05/16/2006			S	1,348	D	\$ 40.0833	11,196	D			
Common Stock	05/16/2006			I	5,306.69	D	\$ 39.73	3,508	I	By 401(k) Plan		
Common Stock								598	I	By wife		

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

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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)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transactio	5. orNumber	6. Date Exerc Expiration D		7. Title		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(mondi, Day) Teal)	any (Month/Day/Year)	Code (Instr. 8)	of	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		Underlying Securities (Instr. 3 and 4)		Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title N	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

HOWARD LARRY S 2724 N. TENAYA WAY LAS VEGAS, NV 89128

Sr. V.P., Program Office

Signatures

Larry S. Howard/Jayne Primaky POA

aky POA 05/17/2006

**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).

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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