FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	INUAL S
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ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPRO	OVAL
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Form 3 Holdings Reported.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported.

1. Name and Address of Reporting Person* CORVESE RUSSEL J					2. Issuer Name and Ticker or Trading Symbol BioScrip, Inc. [BIOS]								ationship of Reporting all applicable) Director Officer (give title			g Person(s) to Issuer 10% Owner Other (specif		
	SCRIP, INC										Year)	X t	SVP of Columbus				below)	
(Street) ELMSFORD NY 10523 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)							_ine) X I	·					
		Tabl	e I - Non-Deriv	ative Sec	uritie	es Ac	quire	d, Di	sposed	of, or	Benefic	ially O	vne	ed				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	if any	xecution Date, any				4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			Securit Benefic		ies Ow cially For		ership n: Direct	. Nature of ndirect Beneficial		
			(MONITI/Day/					nt	(A) or (D)	Price		Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)		
Common Stock, \$.0001 Par Value			03/14/2012			F4		7,	,392	D	\$6.71	71 35		446	D			
		Та	ble II - Derivat (e.g., pı	ive Secur uts, calls,									ed					
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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)		ate	le and 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price Derivat Securit (Instr. 5	tive derivative		e Owners s Form: ally Direct (I or Indire g (I) (Instr		Beneficial Ownership (Instr. 4)	
					(A)	(D)	Date Exerc	cisable	Expiratior Date	n Title	Amount or Number of Shares							

Explanation of Responses:

/s/ Russel J. Corvese

02/13/2013

** Signature of Reporting Person

Date

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

- * 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.

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 Number.