

OMB APPROVAL	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).



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

1. Name and Address of Reporting Person* <u>HOLUBIAK MYRON Z</u> (Last) (First) (Middle) <u>C/O BIOSCRIP, INC.</u> <u>1600 BROADWAY, SUITE 950</u> (Street) <u>DENVER CO 80202</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>BioScrip, Inc. [BIOS]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>05/31/2016</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock, \$.0001 Par Value	05/31/2016		M		10,000 ⁽¹⁾⁽²⁾	A	\$0 ⁽¹⁾	50,000	D	
Common Stock, \$.0001 Par Value	05/31/2016		D		10,000 ⁽¹⁾⁽²⁾	D	\$2.7 ⁽¹⁾	40,000	D	

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

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 and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Phantom Stock	⁽¹⁾	05/31/2016		M			10,000	⁽³⁾	⁽³⁾	Common Stock, \$.0001 Par Value	10,000	⁽¹⁾	0	D	

Explanation of Responses:

- Under the terms of the market-based cash award, as publicly filed, each share of "phantom stock" is the economic equivalent of one share of the Issuer's common stock, par value \$0.0001 per share ("Common Stock"). Each share of "phantom stock" granted pursuant to the market-based cash award was entitled to a cash payment equal to the fair market value of a share of Common Stock as of the vesting date, which was \$2.70 based on the closing market price of the Common Stock on May 31, 2016.
- The cash settlement of the market-based cash award is reported solely for purposes of Form 4 as the deemed disposition of the market-based cash award and a deemed simultaneous acquisition and disposition of 10,000 shares of Common Stock.
- The market-based cash award vested on May 31, 2016, the business day immediately preceding the date of the Issuer's 2016 annual meeting of stockholders, because the reporting person served as a director of the Issuer as of such date. If unvested on the vesting date, the market-based cash award would have expired on May 31, 2016.

/s/ Myron Z. Holubiak 06/02/2016

** 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.