Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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>HUBERS DAVID R</u>						2. Issuer Name and Ticker or Trading Symbol BioScrip, Inc. [ BIOS ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner						
(Last) (First) (Middle) 100 CLEARBROOK ROAD					3. Date of Earliest Transaction (Month/Day/Year) 08/28/2013									Officer (give title Other (specify below) below)						
(Street)  ELMSFORD NY 10523  (City) (State) (Zip)				_	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
(0.5)				Non-Deri	ivativ	ve Sec	curiti	ies A	cauir	ed.	Disposed (	of. or I	Benefi	cial	llv Owned					
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				ion	Execution		ned n Date,	3. Transa Code (	ction	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Beneficially Owned Following			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Natu Indired Benefi Owner	ct icial rship	
									Code	v	Amount	(A) or (D)	Price		Reported Transaction( (Instr. 3 and				(Instr.	4)
Common Stock, \$.0001 Par Value 08/28/2				013	3		J <sup>(1)</sup>		26,600	D	(1)		0		I		David R. Hubers 2010 GRAT No. 1 U/A/D 07/29/2010 <sup>(2)</sup>			
Common Stock, \$.0001 Par Value 08/28				08/28/2	013	.3			J <sup>(1)</sup>		26,600	A	(1)		42,362		I		By The David R. Hubers Revocable Trust	
Common Stock, \$.0001 Par Value 08/28/2013				013	3		M		11,200	A	\$7.9	7	82,560		D					
Common Stock, \$.0001 Par Value 08/28/201				013	3		S		11,200	D	\$12.23	<b>3</b> <sup>(3)</sup>	71,360		D					
			Table								isposed of s, convert				/ Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed 4 Execution Date, 1 if any 0		4. Trans	saction (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exc Expiration (Month/Da		ercisable and Date	7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		ount	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 Exer	cisabl	Expiration e Date	Title	Amo or Nun of Sha							
Director Stock Option	\$7.97	08/28/2013			М			11,200		(4)	11/19/2013	Stock \$.000 Par	k, 01 11,	200	\$0		0	I	)	

## **Explanation of Responses:**

- 1. Distribution by grantor retained annuity trust in satisfaction of annuity obligation.
- 2. Mr. Hubers' spouse is the trustee of the trust. Mr. Hubers' daughters are remaindermen of the trust.
- 3. The price reported in Column 4 is weighted average price. These shares were sold in multiple transactions in prices ranging from \$12.20 to \$12.31, inclusive. The reporting person undertakes to provide BioScrip, Inc., any security holder of BioScrip, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.

4. Fully Vested

08/30/2013

\*\* 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.