BioScrip, Inc. Form 4 November 16, 2009

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPROVAL

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Expires:

5. Relationship of Reporting Person(s) to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Washington, D.C. 20549

subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box

if no longer

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

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

HUBERS D	OAVID R		Symbol BioScrij	p, Inc.	[BI	OS]		C	Issuer (Ch	ack all a nnli cah	Ja)	
(Last) (First) (Middle) 100 CLEARBROOK ROAD			3. Date of Earliest Transaction (Month/Day/Year) 11/12/2009						(Check all applicable) _X_ Director 10% Owner Officer (give title Other (specify below)			
(Street) ELMSFORD, NY 10523			4. If Amendment, Date Original Filed(Month/Day/Year)					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-Derivative Securities Acquired, Disposed of, or Beneficially Own								ally Owned				
1.Title of Security (Instr. 3) Common Stock, \$.0001 Par Value	2. Transaction Dat (Month/Day/Year) 11/12/2009		Date, if	3. Transa Code (Instr.	8)	4. Securit n(A) or Dis (D) (Instr. 3, 4) Amount 15,000 (1)	sposed	of	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)	
Common Stock, \$.0001 Par Value									16,000	I	By The David R. Hubers Grantor Retained Annuity Trust	
Common									25,000	I	By The	

Stock, \$.0001 Par Value 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 1474 (9-02)			

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)	cution Date, if TransactionNumber Expiration Date Code of (Month/Day/Year)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 I S (
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Director Stock Option	\$ 7.25					(2)	12/14/2010	Common Stock, \$.0001 Par Value	33,600	
Director Stock Option	\$ 4.22					(2)	11/27/2011	Common Stock, \$.0001 Par Value	11,200	
Director Stock Option	\$ 4.43					(2)	11/20/2012	Common Stock, \$.0001 Par Value	11,200	
Director Stock Option	\$ 7.96					(2)	11/19/2013	Common Stock, \$.0001 Par Value	11,200	
Director Stock Option	\$ 6.61					(2)	03/12/2015	Common Stock, \$.0001 Par Value	20,000	

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Option

To Purchase \$ 5.33 05/23/2007⁽²⁾ 05/23

05/23/2007(2) 05/23/2016 Stock, \$.0001

Par Value

5,000

Common

Common Stock

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

HUBERS DAVID R 100 CLEARBROOK ROAD X ELMSFORD, NY 10523

Signatures

David R. Hubers 11/16/2009

**Signature of Person Date

Reporting Person

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).
- (1) Bona fide gift of shares of Common Stock by the reporting person to The Minneapolis Foundation.
- (2) Fully Vested

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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