FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPRO	VAL
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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

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1. Name and Address of Reporting Person* POSNER BARRY A			2. Issuer Name and Ticker or Trading Symbol BioScrip, Inc. [BIOS] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner																
(Last) (First) (Middle) 100 CLEARBROOK ROAD				3. Date of Earliest Transaction (Month/Day/Year) 06/16/2010									X Officer (give title Other (specify below) Executive Vice President						
(Street) ELMSFORD NY 10523				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						
(City) (State) (Zip)				Person															
		Та	ble I - Non	-Deriva	ative	e Se	curitie	es A	cquired, D	isp	osed o	f, or Be	enefic	ially	Owned				
Date				action 2A. Deemed Execution Dat if any (Month/Day/Ye		ear) Code (In	str.	Disposed 5)	d Of (D) (Ir	s Acquired (A) or of (D) (Instr. 3, 4 and		Securities Beneficially		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common Stock, \$.0001 Par Value								Code	v 	Amount	nt (A) or P		ice	(Instr. 3 and 4)		D			
Common	Эιоск, φ.οс	OI Fai Value	Table II - I	Derivat	ive	Sec	urities	Δ.	quired, Di	enc	sed of	or Rer	eficia	ılly O		120		В	
									ts, options						wiieu				
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date ecurity or Exercise (Month/Day/Year) if any		Co	ransaction ode (Instr.) Deriva Securi Acquii (A) or Dispos of (D)		Derivati Securiti Acquire	ve ies ed ed nstr.	6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5) Benefic Owned Following Report Transa (Instr. 4)		e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Co	de V	/	(A)	(D)	Date Exercisable		xpiration ate	Title	Amou or Numb of Sh	oer					
Employee Stock Option (Right to Buy)	\$6.65	06/16/2010		A	A		50,000		06/16/2011 ⁽¹⁾	00	6/16/2020	Common Stock, \$.0001 Par Value	50,0	000	\$0	50,00	50,000		
Employee Stock Option (Right to Buy)	\$12.2								11/28/2002 ⁽²⁾	1:	1/28/2011	Common Stock, \$.0001 Par Value	70,0	000		70,00	0	D	
Employee Stock Option (Right to Buy)	\$7.95								09/24/2004 ⁽²⁾	09	9/24/2013	Common Stock, \$.0001 Par Value	75,0	000		75,00	0	D	
Employee Stock Option (Right to Buy)	\$6								02/28/2007 ⁽²⁾	00	6/30/2015	Common Stock, \$.0001 Par Value	13,8	300		13,80	0	D	
Employee Stock Option (Right to Buy)	\$2.47								11/01/2007 ⁽²⁾	1:	1/01/2016	Common Stock, \$.0001 Par Value	158,	587		158,58	37	D	
Option To Purchase Common Stock	\$6.52								04/29/2009 ⁽¹⁾	04	4/29/2018	Common Stock, \$.0001 Par Value	50,6	525		50,62	5	D	
Option To Purchase Common	\$2.73								04/28/2010 ⁽¹⁾	04	4/28/2019	Common Stock, \$.0001 Par	100,	000		100,00	00	D	

Explanation of Responses:

- 1. Vests and becomes exercisable in three equal annual installments commencing on the first anniversary of the date of grant.
- 2. Fully Vested

/s/ Barry A. Posner

06/21/2010 Date

** Signature of Reporting Person

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.