SEC	Form	4
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL MB Number: 3235-02

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB Number:	3235-0287
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hours per response:	0.5
 <u>,</u>	

1. Name and Address of Reporting Person* <u>POSNER BARRY A</u>				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) 04/28/2009								below)	icer (give title ow) Executive Vice		Other (: below) <mark>resident</mark>	specify	
(Street) ELMSF((City)		Y State)	10523 (Zip)		- 4.	4. If Amendment, Date of C			of Original I	inal Filed (Month/Day/Year)			Line	ndividual or Joint/Group Filing (Check Applicable)) X Form filed by One Reporting Person Form filed by More than One Reporting Person			n	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Trans. Date			nsactio			ar) 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ac Code (Instr. 8)		ed (A) or tr. 3, 4 and 9	5. Amount of Securities Beneficially Owned Following Reported		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
								Code	v	Amount	mount (A) or (D)		Transaction(s) (Instr. 3 and 4)				. ,	
Common	Stock, \$.00	01 Par Value							100,126			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. 3. Transaction Or Exercise Price of Derivative Security		ction 3A. Deemed Execution Da		te, 4. Code (I		5. Number Derivativ Securitie Acquired or Disposi of (D) (In	5. Number of 6. Derivative E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amoun of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				c	Code	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)			
Option To Purchase Common Stock	\$2.73	04/28/2009			A		100,000		04/28/2010	(1)	04/28/2019	Common Stock, \$.0001 Par Value	100,000	\$0	100,0	00	D	
Employee Stock Option (Right to Buy)	\$12.2								11/28/2002	(2)	11/28/2011	Common Stock, \$.0001 Par Value	70,000		70,000		D	
Employee Stock Option (Right to Buy)	\$7.95								09/24/2004	(2)	09/24/2013	Common Stock, \$.0001 Par Value	75,000		75,000		D	
Employee Stock Option (Right to Buy)	\$6								02/28/2007	(2)	06/30/2015	Common Stock, \$.0001 Par Value	13,800		13,800		D	
Employee Stock Option (Right to Buy)	\$2.47								11/01/2007	(1)	11/01/2016	Common Stock, \$.0001 Par Value	158,587		158,5	87	D	
Option To Purchase Common Stock	\$6.52								04/29/2009	(1)	04/29/2018	Common Stock, \$.0001 Par Value	50,625		50,62	25	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

<u>/s/ Barry A. Posner</u>

04/30/2009

** Signature of Reporting Person

son Date

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

 \ast 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.