BioScrip, Inc. Form 4 May 25, 2006

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

January 31, Expires: 2005

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

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

HUBERS DAVID R

BioScrip, Inc. [BIOS]

(Check all applicable)

(Last)

1.Title of

Security

(Instr. 3)

(First) (Middle) 3. Date of Earliest Transaction

X_ Director Officer (give title

10% Owner Other (specify

100 CLEARBROOK ROAD

(Month/Day/Year) 05/23/2006

below) 6. Individual or Joint/Group Filing(Check

4. If Amendment, Date Original Filed(Month/Day/Year)

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

(Instr. 4)

Person

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

ELMSFORD, NY 10523

(City) (State) (Zip)

2. Transaction Date 2A. Deemed

(Street)

4. Securities (Month/Day/Year) Execution Date, if TransactionAcquired (A) or

Disposed of (D)

(Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership

(Instr. 4)

SEC 1474

(9-02)

(A)

Code

(Instr. 8)

Following Reported Transaction(s)

or (Instr. 3 and 4) Code V Amount (D) Price

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

(Month/Day/Year)

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.

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount o
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	onof Derivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired		

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	Derivative Security			(A) or Disposed of (D) (Instr. 3, 4, and 5)				
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Option to Purchase Common Stock	\$ 5.33	05/23/2006	A	5,000	05/23/2007(1)	05/23/2016	Common Stock, \$.0001 par value	5,000
Director Stock Option	\$ 7.25				<u>(2)</u>	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				<u>(2)</u>	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				03/12/2006(1)	03/12/2015	Common Stock, \$.0001 par value	20,000

Reporting Owners

Reporting Owner Name / Address	Relationships				
Toporoug o water tune / Trust ess	Director	10% Owner	Officer	Other	
HUBERS DAVID R 100 CLEARBROOK ROAD ELMSFORD, NY 10523	X				

Signatures

Reporting Person

/s/ Hubers, David R.	05/24/2006
**Signature of	Date

Reporting Owners 2

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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) Vests and becomes exercisable in three equal annual installments commencing on the first anniversary of the date of grant.
- (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.