FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* FRIST ROBERT A JR						2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [HSTM]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner					
(Last) (First) (Middle) 209 10TH AVE. SOUTH SUITE 450					3. Date of Earliest Transaction (Month/Day/Year) 02/12/2013									Officer below)		EO	Other (s below)	specify		
(Street) NASHVILLE TN 37203					4. If	f Ame	ndme	nt, Date	of Original	f Original Filed (Month/Day/Year)			Line	6. 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					
		Tak	ole I - Non	-Deriv	ative	e Se	curit	ies Ac	quired,	Disp	osed o	of, or	Ben	eficiall	y Owned					
Dat				Date	. Transaction Pate Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired Disposed Of (D) (Instr. 5)			Securitie Beneficia Owned F	5. Amount of Securities Beneficially Owned Following Reported		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or D)	Price	Transact (Instr. 3	ion(s)			(IIISU. 4)	
Common Stock 02/1					2/201	/2013		М		56,00	00	A	\$3.18	5,25	57,003		D			
		-	Table II - I)						uired, D s, option						Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution E if any (Month/Day	ate, T	I. Fransaction Code (Instr. 3)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Year		of Se r) Unde Deriv		. Title and Amount f Securities inderlying erivative Security nstr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				C	Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title		Amount or Number of Shares						
Employee Stock Option (right to buy)	\$3.18	02/12/2013			М			14,000	02/25/200	6 0	2/25/2013	Comr		14,000	\$0.00	0		D		
Employee Stock Option (right to buy)	\$3.18	02/12/2013			М			14,000	02/25/200	7 0	2/25/2013	Comr		14,000	\$0.00	0		D		
Employee Stock Option (right to buy)	\$3.18	02/12/2013			M			14,000	02/25/200	8 0	2/25/2013	Comr		14,000	\$0.00	0		D		
Employee Stock Option (right to	\$3.18	02/12/2013			M			14,000	02/25/200	9 0	2/25/2013	Comr		14,000	\$0.00	0		D		

Explanation of Responses:

Remarks:

Robert A. Frist

02/13/2013

** Signature of Reporting Person

Date

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

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.

^{*} 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).