FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-028								
Estimated average h	ourden								

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 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

37 hours per response: 0.5

					or S	Sectio	on 30(h)	of the Í	nvestmer	nt Cor	mpany Act	of 194	0							
1. Name and Address of Reporting Person* SHMERLING MICHAEL D					2. Issuer Name and Ticker or Trading Symbol <u>HEALTHSTREAM INC</u> [HSTM]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
			.																	
(Last)						3. Date of Earliest Transaction (Month/Day/Year)									Officer (give title below)			Other (specify below)		
618 CHURCH STREET																				
SUITE 200			4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6.	6. Individual or Joint/Group Filing (Check Applicable							
					ii / iii chament, Date of Ongmart nea (Month Day/ Teal)									Line)						
(Street)		NT C	27240												X	Form	filed by One	e Repor	ing Pers	on
NASHVI 	LLE T	N :	37219 												Form Pers	n filed by Moi on	re than (One Rep	orting	
(City)	(5	itate) (Zip)																	
		Tabl	e I - Nor	า-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	ficia	ally O	wne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Day/Year) Ex		2A. Deemed Execution Date, f any (Month/Day/Year)		Code (Transaction Disposed Code (Instr. 5)					4 and Sec Ber Ow		ecurities eneficially		ership Direct ndirect r. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	((A) or (D)	Price	_ т	Transaction(s) (Instr. 3 and 4)				(1130.4)
Common Stock 11/06				6/2008		11/06/2008		P		13,02	13,029 A		\$2	2 95,560		5,560])		
	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)	erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price Derivati Security (Instr. 5		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owr Forr Dire or Ir (I) (II	nership m: ect (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Sha	ber						

Explanation of Responses:

Remarks:

Michael D. Shmerling

11/07/2008

** Signature of Reporting Person Date

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.