## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number	3235-029							

Estimated average burden hours per response: 0.5

## 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* FRIST ROBERT A JR				2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [ HSTM ]							(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director X 10% Owner							
(Last) 209 10TI SUITE 4	(Fi H AVE. SO 50	-	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/11/2008							X	X Officer (give title Other (specify below)  CEO						
(Street) NASHVI	ILLE TI	N	37203		4. If A						Line)	Individual or Joint/Group Filing (Check Application)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person							
(City)	(St	ate)	(Zip)																
		Tab	le I - No					1	Dis	posed o									
1. Title of Security (Instr. 3)		2. Transac Date (Month/Da	Execution Date	on Date,	Transaction Code (Instr. 5		5)			A) or , 4 and	and Securities Beneficiall Owned Fol Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
								Code	v	Amount	(A)	or F	Price		ction(s) 3 and 4)				
Common	Stock			11/11/	2008	11/1	1/2008	P		1,500	1	A	\$2.25	5,5	28,940	D			
Common	Stock			11/11/	2008	11/1	1/2008	P		340		A	\$2.35	5,5	29,280	D			
Common	Stock			11/11/	2008	<u> </u>	1/2008	P		100		A	\$2.36	5,5	29,380	D			
Common	Stock			11/11/	2008	11/1	1/2008	P		50,960	1	A	\$2.38	5,5	80,340	D			
Common	Stock													1	0,000	I	The Carolyn Marie Frist 2005 Vested Trust		
Common	Stock													1	0,000	I	The Cate Merriman Frist 2005 Vested Trust		
Common	Stock													1	0,000	I	The Eleanor Knox Frist 2005 Vested Trust		
		Т								sed of, o				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Conversion or Exercise Price of Derivative				5. I of of Ser Ac (A) Dis of (In:	5. Number of		6. Date Exercisa Expiration Date (Month/Day/Yea		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
Explanation of Responses:					Code V	/ (A)	(A) (D)			Expiration Date	Title	Amor or Numl of Share	oer						
NIJBIIBIUA_	i oi kespons	C3.																	

Remarks:

Robert A. Frist

11/13/2008

\*\* Signature of Reporting Person

Date

- $^{\star}$  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.