SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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 or Section 30(h) of the Investment Company Act of 1940

	JVAL
OMB Number:	3235-0287
Estimated average bur	den
hours per response:	0.5

I. Nume and Address of Reporting Ferson		n*	2. Issuer Name and Ticker or Trading Symbol <u>HEALTHSTREAM INC</u> [HSTM]		tionship of Reporting Pers all applicable) Director	10% Owner	
(Last) 209 10TH AVE. SUITE 450	(First) SOUTH	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/31/2006	Х	Officer (give title below) Chief Financial	Other (specify below) Officer	
(Street) NASHVILLE (City)	TN (State)	37203 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	idual or Joint/Group Filing Form filed by One Repu Form filed by More that Person	orting Person	

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

Table 1 Hon Derivative dedunties Adquired, Disposed of, or Denendrary officer											
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V		Amount	(A) or (D) Price		Transaction(s) (Instr. 3 and 4)		(1150.4)	
Common Stock	03/31/2006	03/31/2006	J ⁽¹⁾		2,500	Α	\$2.38	25,076	D		
Common Stock								600	Ι	By Spouse	

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. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr. 8)		of		Expiration Date (Month/Day/Year)		iration Date Amount of			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Exempt acquisition pursuant to Rule 16b-3(c) - HealthStream, Inc. Employee Stock Purchase Plan.

Remarks:

Susan A. Brownie

** Signature of Reporting Person Date

04/03/2006

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.