FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,

washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028		

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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

Name and Address of Reporting Person* Ducham Frederick Dennis						2. Issuer Name and Ticker or Trading Symbol CROSS COUNTRY HEALTHCARE INC [5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
Ducham Frederick Demis					Lcc	CCRN]												
(Last) (First) (Middle)						CORN J								X	X Officer (give title below)		Othe belov	r (specify v)
(Last)	•	,	,		3. D	3. Date of Earliest Transaction (Month/Day/Year)								President				
C/O CROSS COUNTRY HEALTHCARE, INC.						03/06/2018												
5201 CONGRESS AVENUE																		
0201 00	TOTAL OUT	IV LIVOL			/ If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable				
					- 4. "	4. II Amendment, Date of Original Filed (Month/Day/Year)								Line)				
(Street)														X	Forn	n filed by One	Reporting Pe	rson
BOCA R	ATON F	L 3	33487													•		
					-									Form filed by More than One Reporting Person				
(City)	(5	tate) (Zip)															
(City)	(~	tate) (<u> </u>															
		Tabl	e I - N	lon-Deriv	ative/	Sec	uritie	s Ac	quire	ed, Di	sposed o	f, or E	Benefic	ially (Owne	ed		
1. Title of S	ecurity (Ins	tr. 3)		2. Transact	ion	Execution Date,			3. 4. Securities Acquired (A) or					5. Amount of Securities Beneficially		6. Ownership	7. Nature	
	• •	•		Date (Month/Dox	./V==#\				Transaction Disposed Of (D) (Instr. 3, 4 and			r. 3, 4 and				Form: Direct (D) or Indirect		
(Month/Day/Y				/ rear)	ear) if any (Month/Day/Year)		Code (Instr. 8)				Owned Follov				Ownership			
										(4) as			Reported Transaction(s)			(Instr. 4)		
									Code	V	Amount	(A) or (D)	Price			3 and 4)		
Common Stock 03/06/201)18				S		10,000	D	\$11.50	97(1)	17	75,663	D	
		Т-	الحلط	Danima	C		4:	Λ	اء دين	Dian		Da		l	اء ۔ ۔ ۔ ا			•
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of	4.	4. 5. Number			6. Date Exercisable and 7. T			7. Title and 8		g Dri	8. Price of 9. Number of		f 10.	11. Nature				
Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date,		Transa	ction	of		Expiration Date		Amount of		Derivative		derivative	Ownership	of Indirect	
Security	or Exercise		if any		Code (Instr.	Derivative		(Month/Day/Year)			Securities		Security	Securities	Form:	Beneficial	
(Instr. 3) Price of Derivative Security (Month/Day/Year) 8			n/Day/Year)	8)	Securities Acquired			Underlying Derivative				(Instr. 5)		Beneficially Owned	Direct (D) or Indirect	Ownership (Instr. 4)		
				(A) or Security (Instr.							:1 1		Following	(I) (Instr. 4)				
				Disposed				and 4)						Reported	/-x			
				of (D) (Instr. 3, 4						Transaction(s) (Instr. 4)	(S)							
								and 5)								[`,		
												Amount	1					
													or					
									Date		Evniration		Number of					
					Code	v	(A)	(D)		isable	Expiration Date	Title	Shares					

Explanation of Responses:

1. The transactions were executed in multiple trades at prices ranging from \$11.49 to \$11.58. The price above reflects the weighted average sales price. Detailed information regarding the number of shares sold at each separate price will be provided upon request by the Commission staff, the Issuer or a security holder of the Issuer.

Remarks:

/s/ Frederick D. Ducham 03/07/2018

** 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.