FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO                | VAL       |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |
| 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

| 1. Name and Address of Reporting Person*  MASTALER RICHARD M                     |   |  |  |       |   |   | 2. Issuer Name and Ticker or Trading Symbol CROSS COUNTRY HEALTHCARE INC [ CCRN ] |     |                                     |        |                     |   |                                |       | Relationshi<br>eck all app<br>X Direc              | . ,   |  | n(s) to Is<br>10% O  |  |  |
|--|---|--|--|-------|---|---|---|-----|-------------------------------------|--------|---------------------|---|--------------------------------|-------|--|---|--|--|--|--|
| (Last) (First) (Middle) 6551 PARK OF COMMERCE BLVD., N.W.                        |   |  |  |       |   | 3. Date of Earliest Transaction (Month/Day/Year) 06/01/2013 |   |     |                                     |        |                     |   |                                |       | Offic<br>below                                     | er (give title<br>w)  |  | Other (specify below)  |  |  |
| (Street) BOCA RATON FL 33487 (City) (State) (Zip)                                |   |  |  |       |   | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |   |     |                                     |        |                     |   |                                | Line  | e)<br><mark>X</mark> Forn<br>Forn                  | ridual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person |  |  |  |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |   |  |  |       |   |   |   |     |                                     |        |                     |   |                                |       |  |   |  |  |  |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)                    |   |  |  |       |   | Execution Da  |   |     | , Transaction Di<br>Code (Instr. 5) |        | Disposed            | I. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4<br>5)                                  |                                |       | Securi<br>Benefi                                   | cially<br>I Following   | 6. Own<br>Form: I<br>(D) or I<br>(I) (Inst | Direct<br>ndirect  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)  |  |
|  |   |  |  |       |   |   |   |     |                                     | v      | Amount              | (A<br>(D  | ) or<br>)                      | Price | Transa   | action(s)<br>3 and 4)   |  |  | (msu. 4)   |  |
| Common Stock <sup>(1)</sup> 06/01/   |   |  |  |       |   | 2013  |   | A   |                                     | 10,55  | 6                   | A   | \$ <mark>0</mark>              | 3     | 30,562   |   | )  |  |  |  |
|  |   | Та   | ble II - D                                   |       |   |   |   |     |                                     |        | sed of,<br>onvertib |   |                                |       | Owned  |   |  |  |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                              | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deem<br>Execution<br>if any<br>(Month/Da | Date, | 4.<br>Transaction<br>Code (Instr.<br>8) |   |   |     | 6. Date E<br>Expiratio<br>(Month/D  | n Date | е                   | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |                                | tr. 3 | S. Price of<br>Derivative<br>Security<br>Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4)           | Ow<br>For<br>Dire<br>or I<br>(I) (         | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|  |   |  |  |       | Code                                    | v   | (A)   | (D) | Date<br>Exercisa                    |        | Expiration<br>Date  | Title   | Amo<br>or<br>Num<br>of<br>Shar | ber   |  |   |  |  |  |  |

## **Explanation of Responses:**

1. The restricted shares of common stock vest in four equal installments. The installments will vest on June 1, 2014, June 1, 2015, June 1, 2016 and June 1, 2017.

## Remarks:

06/04/2013 /s/ Richard M. Mastaler

\*\* 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.