FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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

obligations may continue. See Instruction 1(b).	Fi	iled pursuant to Section 16(a) of the Securities Exchange Act of 1934		hours per response:	0.5
		or Section 30(h) of the Investment Company Act of 1940			
1. Name and Address of Reporting P Fischer Timothy L (Last) (First) C/O CROSS COUNTRY HEA 5201 CONGRESS AVENUE	(Middle)	2. Issuer Name and Ticker or Trading Symbol <u>CROSS COUNTRY HEALTHCARE INC</u> [CCRN] 3. Date of Earliest Transaction (Month/Day/Year) 03/22/2017	5. Relationship of F (Check all applicate Director X Officer (gi below)	10% Own	ner
(Street) BOCA RATON FL	33487	4. If Amendment, Date of Original Filed (Month/Day/Year)	Line) X Form filed	nt/Group Filing (Check Appl d by One Reporting Person d by More than One Reporti	
(City) (State)	(Zip)				

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)					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)		(11311 4)	
Common Stock	03/22/2017		Α		3,430(1)	Α	\$ <mark>0</mark>	10,561	D	

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)	4. Transa Code (8)		of Deriv Secu Acqu (A) or Dispo of (D) (Instr	5. Number of Expiration Date Derivative Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ate	7. Title Amour Securi Underi Deriva Securi and 4)	nt of ties ying tive ty (Instr. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form:	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. Settlement of performance shares granted March 31, 2016 pursuant to the issuer's Omnibus Stock Incentive Plan, which were settled based on the achievement of performance targets and are payable in shares of restricted stock. The shares of restricted stock will vest on December 31, 2018, provided that the reporting person remains an employee of the issuer at such time.

Remarks:

<u>/s/ Timothy L. Fischer</u>

03/24/2017

Date

** Signature of Reporting Person

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.