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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

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours par response:	0 5								

1. Name and Address of Reporting Feison			2. Issuer Name and Ticker or Trading Symbol CROSS COUNTRY HEALTHCARE INC	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
HENSEL EMIL			CCRN]	X	Director	10% Owner			
(1 aat)	(First)	() (; - - -)		x	Officer (give title below)	Other (specify below)			
(Last) (First) (Middle) 6551 PARK OF COMMERCE BLVD			3. Date of Earliest Transaction (Month/Day/Year) 05/06/2010		Chief Financial Officer				
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	idual or Joint/Group Filing	(Check Applicable			
BOCA RATON	FL	33487		X	Form filed by One Repo	0			
(City)	(State)	(Zip)			Form filed by More than Person	One Reporting			

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. Transaction Code (Instr. 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
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	05/06/2010		F		859(1)	D	\$9.17	67,550	D	
Common Stock								156,502 ⁽²⁾	I	By wife

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)	f Expiration (Month/Day cquired A) or isposed f (D) nstr. 3, 4		6. Date Exercisable and Expiration Date (Month/Day/Year)		Amount of		Amount of Securities Security Underlying (Instr. 5) Derivative Security (Instr. 3		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. The shares were withheld to satisfy the Reporting Person's tax withholding obligation for restricted stock which vested on 5/6/10.

2. 156,502 shares are held by Mr. Hensel's wife.

Remarks:

<u>/s/ Emil Hensel</u>

** 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.

05/07/2010 Date