APRIA HEALTHCARE GROUP INC

Form 4

February 23, 2007

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

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OMB APPROVAL

response...

if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * MASTROVICH LAWRENCE A

2. Issuer Name and Ticker or Trading

Symbol

02/22/2007

APRIA HEALTHCARE GROUP INC [AHG]

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

Director

(Last)

(First)

(Street)

(Middle)

3. Date of Earliest Transaction (Month/Day/Year)

X_ Officer (give title below)

10% Owner _ Other (specify

C/O APRIA HEALTHCARE GROUP INC, 26220 ENTERPRISE

COURT

4. If Amendment, Date Original

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

President and COO

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

LAKE FOREST, CA 92630

(City)	(State) (Z	ip) Table	I - Non-De	rivative S	ecurit	ies Acqui	red, Disposed of	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	4. Securities Acquired ion(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	cecurities Ownership eneficially Form: wned Direct (D) ollowing or Indirect eported (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Commmon Stock	02/22/2007		M <u>(1)</u>	8,000	A	\$ 21.4	71,949	D	
Common Stock	02/22/2007		S	8,000	D	\$ 32.5	63,949	D	
Common Stock	02/22/2007		M(2)	8,040	A	\$ 21.4	71,989	D	
Common Stock	02/22/2007		S	8,040	D	\$ 32.75	63,949	D	

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

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. Transaction Code (Instr. 8)	orDerivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to Buy) (1)	\$ 21.4	02/22/2007		M		3,875	02/18/2006	02/17/2013	Common Stock	3,875
Employee Stock Option (Right to Buy) (2)	\$ 21.4	02/22/2007		M		12,165	02/18/2006	02/17/2013	Common Stock	12,165

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			

MASTROVICH LAWRENCE A C/O APRIA HEALTHCARE GROUP INC 26220 ENTERPRISE COURT LAKE FOREST, CA 92630

President and COO

Signatures

Lawrence A. Mastrovich by Raoul Smyth,
Attorney-In-Fact
02/23/2007

**Signature of Reporting Person Date

Reporting Owners 2

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Explanation of Responses:

- 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).
- (1) Exercise of employee stock option granted under the Issuer's 1998 Stock Incentive Plan which became fully vested on February 18, 2006.
- (2) Exercise of employee stock option granted under the Issuer's Amended and Restated 1997 Stock Incentive Plan which became fully vested on Februry 18, 2006.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.