Envision Healthcare Holdings, Inc.

Form 4 July 17, 2014

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL

OMB 3235-0287 Number:

January 31, Expires: 2005

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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 * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Van Horne Edward Issuer Symbol Envision Healthcare Holdings, Inc. (Check all applicable) [EVHC] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner Other (specify X_ Officer (give title (Month/Day/Year) below) 6200 S. SYRACUSE WAY, STE 07/16/2014 President of AMR 200 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting **GREENWOOD**

VILLAGE, CO 80111

(State)

(City)	(State)	(Zip) Tab	le I - Non-	Derivative S	Secur	ities Acqui	red, Disposed of,	or Beneficial	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securition Dispose (Instr. 3, 4	ed of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	07/16/2014		M	20,269	A	\$ 4.29	31,668	D	
Common Stock	07/16/2014		S	20,269	D	\$ 32.895 (1)	11,399	D	

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

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number.

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. Transactic Code (Instr. 8)	5. Number of corderivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		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
Options (Rights to Buy)	\$ 4.29	07/16/2014		M		20,269	<u>(2)</u>	06/14/2017	Common Stock	20,269

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Van Horne Edward 6200 S. SYRACUSE WAY STE 200 GREENWOOD VILLAGE, CO 80111			President of AMR				

Signatures

/s/ Craig A. Wilson, Attorney-in-Fact for Edward Van
Horne

07/17/2014

**Signature of Reporting Person Date

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) This amount represents the public offering price per share of the Issuer's common stock of \$34.00, less the underwriting discount of \$1.105.
 - These options were originally granted on June 14, 2007 as options to purchase common stock of Envision Healthcare Corporation ("EVHC"), formerly known as Emergency Medical Services Corporation, which were scheduled to vest on the first four anniversaries of
- (2) the grant date, subject to continued employment. In connection with the merger of an indirect subsidiary of the Issuer with and into EVHC, with EVHC as the surviving corporation and an indirect wholly owned subsidiary of the Issuer, the options converted to fully vested options to purchase common stock of the Issuer pursuant to a rollover agreement between the reporting person and the Issuer.

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.

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