

VISTACARE, INC.
Form 3
March 24, 2005

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â CRISCI JOHN		(Month/Day/Year)	VISTACARE, INC. [VSTA]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
		03/15/2005		
C/O VISTACARE, INC.,Â 4800			(Check all applicable)	
N. SCOTTSDALE RD., SUITE			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
5000			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
(Street)			(give title below)	(specify below)
			VP of HR & Education	
SCOTTSDALE,Â AZÂ 85251			6. Individual or Joint/Group Filing(Check Applicable Line)	
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Form filed by One Reporting Person	
			<input type="checkbox"/> Form filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	

				Shares		or Indirect (I) (Instr. 5)	
Employee Stock Option (right to buy)	Â (1)	05/22/2013	Class A Common Stock	20,000	\$ 23.41	D	Â
Employee Stock Option (right to buy)	Â (2)	02/10/2014	Class A Common Stock	15,000	\$ 34.09	D	Â
Employee Stock Option (right to buy)	Â (3)	08/10/2014	Class A Common Stock	30,000	\$ 15.67	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
CRISCI JOHN C/O VISTACARE, INC. 4800 N. SCOTTSDALE RD., SUITE 5000 SCOTTSDALE, AZ 85251	Â	Â	Â VP of HR & Education	Â

Signatures

Stephen Lewis,
Attorney-In-Fact

03/24/2005

**Signature of Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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) The option is currently exercisable as to 4,000 shares. The remaining 16,000 shares become exercisable in equal installments of 4,000 shares on each of May 22, 2005, 2006, 2007, and 2008.

(2) All of the shares subject to the option become exercisable on February 10, 2008; provided, however, that if the average trading price of the common stock over the 30 consecutive trading days ending on the following dates equals or exceeds the amounts specified on such dates, the shares subject to the option will become exercisable as follows: 02/10/2005, \$39.20, one-third; 02/10/2006, \$45.08, two-thirds; 02/10/2007, \$51.84, All.

(3) All of the shares subject to the option become exercisable on August 10, 2008; provided, however, that if the average trading price of the common stock over the 30 consecutive trading days ending on the following dates equals or exceeds the amounts specified on such dates, the shares subject to the option will become exercisable as follows: 08/10/2005, \$18.02, one-third; 08/10/2006, \$20.72, two-thirds; 08/10/2007, \$23.83, All.

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.