

OMB APPROVAL	
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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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person* <u>Whitworth Luke</u> (Last) (First) (Middle) C/O OPTION CARE HEALTH, INC. 3000 LAKESIDE DRIVE, SUITE 300N (Street) BANNOCKBURN IL 60015 (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Option Care Health, Inc. [OPCH]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director _____ 10% Owner _____ Officer (give title below) _____ Other (specify below) _____ Chief Operating Officer
	3. Date of Earliest Transaction (Month/Day/Year) <u>02/22/2023</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

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)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	02/22/2023		A		12,348 ⁽¹⁾	A	\$0	41,032	D	
Common Stock	02/22/2023		A		9,962 ⁽²⁾	A	\$0	50,994	D	
Common Stock	02/22/2023		A		26,360 ⁽³⁾	A	\$0	77,354	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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	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
Employee Stock Option (right to buy)	\$28.86	02/22/2023		A		22,668		(4)	02/22/2033	Common Stock	22,668	\$0	22,668	D	
Employee Stock Option (right to buy)	\$28.86	02/22/2023		A		18,293		(5)	02/22/2033	Common Stock	18,293	\$0	18,293	D	

Explanation of Responses:

- The restricted stock units granted in this award vest as to 25% of the underlying shares of Common Stock on each of the first, second, third and fourth anniversary of the grant date.
- All restricted stock units granted in this award vest on February 22, 2026.
- Represents shares of common stock issuable under a performance-based restricted stock unit award dated February 22, 2021. On February 22, 2023, a performance-based vesting condition was achieved with respect to these shares of common stock, which remain subject to time-based vesting and will vest on February 22, 2024, assuming continuous service on the vesting date.
- The stock option will vest as to 25% of the underlying shares of Common Stock on each of the first, second, third and fourth anniversaries of the grant date.
- All stock options will vest on February 22, 2026.

/s/ Sarah Kim, attorney-in-fact 02/24/2023
for Mr. Whitworth

** Signature of Reporting Person Date

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.