SEC For				_											_						
	FORM	4	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549																APPRO		
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 OWNER Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940																3235-0287	
transac contrac the pur securiti intende defens	chase or sale of ies of the issue ed to satisfy the	e pursuant to a r written plan for of equity r that is			0	5601			e inv	esuner			101 13-	.0							
1. Name and Address of Reporting Person* Bavaro Michael						2. Issuer Name and Ticker or Trading Symbol Option Care Health, Inc. [OPCH]										eck all appli Directo	cable)	•	son(s) to Iss 10% Ov Other (s	vner	
(Last) (First) (Middle) C/O OPTION CARE HEALTH, INC. 3000 LAKESIDE DRIVE, SUITE 300N					3. Date of Earliest Transaction (Month/Day/Year) 08/15/2024										Chief Human Resources Officer						
(Street) BANNOCKBURN IL 60015					_ 4. l1	Line)									Joint/Group Filing (Check Applicable filed by One Reporting Person filed by More than One Reporting n						
(City)	(S	tate)	(Zip)																		
		Tab	le I - Nor	ו-Deri	vative	Se	curit	ies Ac	cqui	ired,	Dis	posed o	of, or	Ben	eficial	y Owned	t				
(mean c)				Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		ar)	3. Transaction Code (Instr 8) Code V		Disposed	ties Acquired (A) I Of (D) (Instr. 3, 4 (A) or Pri			Reporte Transac	es ially Following d tion(s)	Form (D) o	n: Direct r Indirect I Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock				08/14	5/2024	1				M	v	1,220		o) A	\$18.9	(Instr. 3	and 4)	<u> </u>	D		
Common Stock					08/15/2024					M		2,153		A	\$23.9		46,807		D		
					5/2024				+	М		2,380		A	\$28.8		49,193		D		
Common Stock 08				08/1	3/15/2024				╈	S		5,765	5	D	\$31.4	2 43	43,428		D		
		1	able II -													Owned			1		
						calls			· ·	·		converti			ities)						
1. Title of Derivative Security (Instr. 3)	ve Conversion Date or Exercise (Month/Day/Year)		Execution Date, if any		4. Transaction Code (Instr. 8)		of Deri Sec Acq (A) Disp of (I	oosed D) tr. 3, 4	Exp	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		4)	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	e s Ily J	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	te ercisabl		Expiration Date	Title		Amount or Number of Shares						
Employee Stock Option (right to buy)	\$ 18.97	08/15/2024			М	М		1,226		(1)	(02/23/2031	Comm Stoc		1,226	\$ 0	1,226	5	D		
Employee Stock Option (right to buy)	\$23.96	08/15/2024			М			2,153		(2)	(02/17/2032	Comm Stoc		2,153	\$ 0	4,306	5	D		
Employee Stock Option (right to	\$28.86	08/15/2024			М			2,386		(3)	(02/22/2033	Comm Stoc		2,386	\$ 0	7,158	3	D		

Explanation of Responses:

buy)

1. Stock options that vest as to 50% of the underlying shares of Common Stock on February 23, 2023, and 25% of the underlying shares of Common Stock on each of February 23, 2024 and February 23, 2025. 2. Stock options that vest as to 25% of the underlying shares of Common Stock on each of February 17, 2023, February 17, 2024, February 17, 2025 and February 17, 2026.

3. Stock options that vest as to 25% of the underlying shares of Common Stock on each of February 22, 2024, February 22, 2025, February 22, 2026 and February 22, 2027.

/s/ Collin Smyser, attorney-in-08/19/2024

fact for Mr. Bavaro

** 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.