FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-0287									
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0.5

hours per response:

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 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

Name and Address of Reporting Person* Bodem Barbara W.				2. Issuer Name and Ticker or Trading Symbol Option Care Health, Inc. [OPCH]									ck all app	,	ng Per	son(s) to Is				
(Last)	(Fir	st) (M	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 04/01/2024									Office below	er (give title /)		Other (s below)	specify		
C/O OPTION CARE HEALTH, INC.				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Inc	6. Individual or Joint/Group Filing (Check Applicable							
3000 LAKESIDE DRIVE, SUITE 300N					, , , , ,								l '	Line)						
															X Form filed by One Reporting Person					
(Street)													Form filed by More than One Reporting Person							
BANNOCKBURN IL 60015					Dula 40h 5 4(a) Transportion Indication															
, , ,					Rui	Rule 10b5-1(c) Transaction Indication														
(City)	City) (State) (Zip)					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - Non	-Deriva	tive S	Secu	rities	Δca	uired	Disi	oosed of	or F	Renef	iciall	ly Own	ed				
4 Title of	Paarreiter (Imat		1 11011	2. Transa			Deeme		3.						5. Amo		6 0	nership	7. Nature	
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Exed if an	cution Date,					es Acquired (A) o Of (D) (Instr. 3, 4			Securit Benefic Owned	ties Fo cially (D d Following (I)		: Direct Indirect str. 4)	of Indirect Beneficial Ownership		
							Code	v	Amount	(A) or (D) Price		rice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common Stock 04/01/2				/2024				A		1,731	1	A	\$0	1	1,731		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. 3. Transaction 3A. Deemed		ned on Date,	4. Transaction Code (Instr. 8)		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. De Se (Ii	Price of erivative ecurity nstr. 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 Exercisa	able	Expiration Date	Title	Amou or Numb of Share	er						

Explanation of Responses:

/s/ Sarah Kim, attorney-in-fact 04/03/2024 for Ms. Bodem

** Signature of Reporting Person

Date

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

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.

^{*} 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).