FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20540	
Nashington,	D.C.	20049	

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
hours ner response	. 0.5									

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* GOLDING DAVID W						Susuer Name and Ticker or Trading Symbol Option Care Health, Inc. [OPCH] Date of Earliest Transaction (Month/Day/Year)								ck all app Direct Office	tor r (give title	ng Pers	10% Ov	vner	
(Last)	(Fir	,	/liddle)		05/1	05/15/2024							below	′)		below)			
		E HEALTH, INC			4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable						
3000 LA	KESIDE D	RIVE, SUITE 3	00N									1 ′	Line) X Form filed by One Reporting Person						
(Street)	CKBURN :	IL (60015			Form filed by More than One Reporting Person													
					Rul	Rule 10b5-1(c) Transaction Indication													
(City)	(Sta	ate) (Z	Cip) Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In									uction or writt	ten plan	that is inter	nded to				
		Table	I - Nor	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or E	Bene	ficiall	y Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			Execution Date,				es Acquired (A) Of (D) (Instr. 3, 4			5. Amo Securit Benefic Owned Reporte	ies cially Following	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Code	v	Amount	(A) or (D) Price		Price	Transaction(s)				(111511. 4)
Common	Stock			05/15/2	/2024				A		6,219(1)) A		\$ <mark>0</mark>	107,110			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 Execution Date, if any (Month/Day/Year) (Month/Day/Year) 4. Transaction Execution Date, if any (Month/Day/Year) (Month/Day/Year) 8)			of Deriv Secu Acqu (A) o Disp of (D	osed) r. 3, 4	6. Date Exercis Expiration Dat (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Se (In	Price of erivative ecurity nstr. 5)	e derivative	Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership Form:	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code			Date Exercis	able	Expiration Date Title Amo		ber							

Explanation of Responses:

1. The reporting person received an award of restricted stock units on May 15, 2024, which vest in equal installments on each of the first, second and third anniversaries of the grant date. The number of restricted stock units granted was calculated to reflect \$186,875 of value based on the closing price of the issuer's common stock on May 15, 2024.

/s/ Sarah Kim, attorney-in-fact 05/17/2024 for Mr. Golding

** 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.