FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSH	ΙIΡ
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OMB APPROVAL											
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hours per 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

Name and Address of Reporting Person*     Pate R Carter				2. Issuer Name and Ticker or Trading Symbol Option Care Health, Inc. [ OPCH ]							ck all app	,	ng Pers	son(s) to Is					
(Last)	(Fir	st) (M	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 05/15/2024								Office below	er (give title		Other (s below)	specify		
C/O OPTION CARE HEALTH, INC. 3000 LAKESIDE DRIVE, SUITE 300N				4. If <i>I</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	6. Individual or Joint/Group Filing (Check Applicabl Line)  X Form filed by One Reporting Person				`			
(Street) BANNOCKBURN IL 60015				Form filed by More than One Reporting Person															
Rule 10b5-1(c) Transaction Indication  (City) (State) Check this box to indicate that a transaction was made pursuant to a contract, instruction or written satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								en plan	that is inter	nded to									
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Bene	ficial	ly Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da			Execution Date		Date,	Transaction Disposed Code (Instr. 5)		Disposed 0	ties Acquired (A) d Of (D) (Instr. 3, 4		(A) or 3, 4 and		ies ially Following	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code	v	Amount	(A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				(msu. 4)			
Common Stock 05/15/2				2024		Α		5,325(1)	5,325 <sup>(1)</sup> A		\$ <mark>0</mark>	0 104,933			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)  1. Title of Conversion or Exercise Price of Derivative Security  1. Title of Date Execution Date (Month/Day/Year)  2. Conversion Date Execution Date, if any (Month/Day/Year)		Transaction Code (Instr. 8)		of Deriv	r osed ) r. 3, 4	Expiration Day/\(\text{Month/Day/\text{V}}\)		te	7. Title and Amount of Securities Underlying Derivative Security (In 3 and 4)		D Sc (Ii	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct ( or Indir (I) (Inst	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	nber							

## **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 \$160,000 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. Pate

\*\* 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.