SEC Form 3 FORM 3

# UNITED STATES SECURITIES AND EXCHANGE

COMMISSION Washington, D.C. 20549

### OMB APPROVAL

OMB Number: 3235-0104

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response: 0.5

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 <sup>*</sup> BRANDT ERIC	2. Date of E Requiring S (Month/Day 05/15/202	tatement /Year)	3. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Option Care Health, Inc.</u> [ OPCH ]						
(Last) (First) (Middle) C/O OPTION CARE HEALTH, INC.			4. Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date of Original Filed (Month/Day/Year)			
3000 LAKESIDE DRIVE, SUITE 300N			X Director Officer (give title below)	10% C Other below)	(specify		ck Applicable	int/Group Filing Line) by One Reporting	
(Street) BANNOCKBURN IL 60015								by More than One Person	
(City) (State) (Zip)									
Table I - Non-Derivative Securities Beneficially Owned									
Та	ble I - Non	-Derivativ	ve Securities Benefic	cially Ov	wned				
Ta 1. Title of Security (Instr. 4)	ble I - Non	2	2. Amount of Securities Beneficially Owned (Instr.	3. Owne Form: D (D) or In (I) (Instr	ership Direct ndirect		ure of Indire rship (Instr. (	ct Beneficial 5)	
1. Title of Security (Instr. 4)	Table II - D	erivative	2. Amount of Securities Beneficially Owned (Instr.	3. Owner Form: D (D) or In (I) (Instr Illy Own	ership Direct ndirect r. 5)	Owner			
1. Title of Security (Instr. 4) 	Table II - D	erivative s, warran isable and ate	2. Amount of Securities Beneficially Owned (Instr. I) Securities Beneficia	3. Owno Form: D (D) or li (I) (Instr ble sec	ership Direct ndirect r. 5)	owner			

Explanation of Responses:

**Remarks:** 

No securities beneficially owned. Exhibit List: Exhibit 24-Power of Attorney

No securities are beneficially owned.

<u>/s/ Sarah Kim, attorney-in-</u>	05/17/2024
fact for Mr. Brandt	03/17/2024
** 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 5 (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.

### POWER OF ATTORNEY

### FOR SECTION 16 REPORTING OBLIGATIONS

KNOW ALL BY THESE PRESENTS, that the undersigned hereby constitutes and appoints each of Michael Shapiro, Sarah Kim and Michael Bavaro, signing singly, the undersigneds true and lawful attorney-in-fact to: (i) execute for and on behalf of the undersigned, in the undersigneds capacity as an officer and/or director and/or owner of greater than 10% of the outstanding shares of common stock of Option Care Health, Inc., a Delaware corporation (the Company), Forms 3, 4 and 5 (including any amendments, supplements or exhibits thereto) in accordance with Section 16(a) of the Securities Exchange Act of 1934 and the rules thereunder; (ii) do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such Form 3, 4 or 5 (including any amendments, supplements or exhibits thereto) and timely file such form with the United States Securities and Exchange Commission (the SEC) and any stock exchange or similar authority, including the New York Stock Exchange, and including without limitation the filing of a Form ID or any other documents necessary or appropriate to enable the undersigned to file the Form 3, 4 and 5 electronically with the SEC; (iii) seek or obtain, as the undersigneds representative and on the undersigneds behalf, information on transactions in the Companys securities from any third party, including brokers, employee benefit plan administrators and trustees, and the undersigned hereby authorizes any such person to release any such information to each of the undersigneds attorneys-in-fact appointed by this Power of Attorney and ratifies any such release of information; and (iv) take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit to, in the best interest of, or legally required by, the undersigned, it being understood that the documents executed by such attorney-in-fact on behalf of the undersigned pursuant to this Power of Attorney shall be in such form and shall contain such terms and conditions as such attorney-in-fact may approve in such attorney-in-facts discretion.

The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary or proper to be done in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as the undersigned might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that such attorney-in-fact, or such attorney-in-facts substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted. The undersigned acknowledges that the foregoing attorneys-in-fact, in serving in such capacity at the request of the undersigned, are not assuming, nor is the Company assuming, any of the undersigneds responsibilities to comply with Section 16 of the Securities Exchange Act of 1934.

This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4 and 5 with respect to the undersigneds holdings of and transactions in securities issued by the Company, unless earlier revoked by the undersigned in a signed writing delivered to the foregoing attorneys-in-fact.

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of date first written above.

Signed and acknowledged:

/s/ Eric K. Brandt