SEC Form 4	
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FORM 4

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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OMB APPROVAL

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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*						2. Issuer Name <b>and</b> Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
RADEMACHER JOHN CHARLES						<u>Option Care Health, Inc.</u> [ OPCH ]								X		,		10% Ov	vner		
(Last) (First) (Middle) C/O OPTION CARE HEALTH, INC.						3. Date of Earliest Transaction (Month/Day/Year) 02/23/2021								- x	below)	(give title EXECU	JTIVI	Other (s below) E OFFICE			
		RIVE, SUITE 3																			
(Street)				- 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)								
BANNOCKBURN IL 60015					_										X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	itate)	(Zip)													Person					
		Та	ble I - Noi	n-Deri	vativ	ve S	ecuritie	s Ac	cqui	ired, Di	ispos	sed o	of, or Be	enef	icially	Owned					
Date				Fransaction te onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		₽,	Transaction Dispo Code (Instr.			ties Acqui d Of (D) (In			Beneficia Owned F	rities ficially ed Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
							-	Code V	Aı	mount	(A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common Stock, par value \$0.0001 02/23				23/20	3/2021			Α	5	52,716	16 <sup>(1)</sup> A		\$ <mark>0</mark>	62,	716		D				
			Table II -				curities Ils, warr									Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate,	4. Transa Code ( 3)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exp	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title ar of Securi Underlyir Derivativ (Instr. 3 a	ties 1g e Sec	curity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivativ Securitie Beneficia Owned Following Reported Transact	e s ally g	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A) (D)		Date	te ercisable	Expir Date	ration	Title	or Nu	nount mber Shares		(Instr. 4)				
Stock Option	\$19.07	02/22/2021			^		102 194			(2)	02/22	2/2021	Common	10	2 104	¢0	102.1	9.4	D		

Explanation of Responses:

(Right to Buy)

\$18.97

1. The reporting person received an award of restricted stock units on February 23, 2021. The number of restricted stock units granted was calculated to reflect \$1,000,000 of value based on the closing price of the issuer's common stock on February 23, 2021, the date when the issuer's compensation committee and board of directors approved changes to compensation for 2021.

(2)

02/23/2031

Stock

2. The stock option will vest as to 50% of the underlying shares of Common Stock on February 23, 2022, an additional 25% on February 23, 2023 and the remaining 25% on February 23, 2024.

103,184

v ,	0	<u> </u>
/ s/ Clifford E. Ber	<u>man, by</u>	07/13/2021
<u>power of attorney</u>		07/13/2021

103,184

D

\*\* Signature of Reporting Person Date

103,184

\$<mark>0</mark>

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).

02/23/2021

\*\* 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.