### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations  $\ \, \text{may continue.} \, \textit{See}$ Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

| (Print or Ty   | pe Response | es)  |   |  |        |  |   |   |              |                   |   |   |                   |  |                                       |   |                                    |  |            |
|--|-------------|--|---|--|--------|--|---|---|--------------|-------------------|---|---|-------------------|--|---------------------------------------|---|------------------------------------|--|------------|
| 1. Name and Address of Reporting Person *- BARON ROBERT A  |             |  |   | 2. Issuer Name and Ticker or Trading Symbol Opko Health, Inc. [OPK]              |        |  |   |   |              |                   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner |   |                   |  |                                       |   |                                    |  |            |
| (Last) (First) (Middle)<br>2401 INGLESIDE AVENUE, SUITE 1D |             |  |   | 3. Date of Earliest Transaction (Month/Day/Year) 01/22/2016                      |        |  |   |   |              |                   |   |   | e title below)    |  |                                       | cify below)   |                                    |  |            |
| (Street)   |             |  |   | 4. If Amendment, Date Original Filed(Month/Day/Year)                             |        |  |   |   |              |                   | _X_ F   | 6. Individual or Joint/Group Filing(Check Applicable Line)  _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person |                   |  |                                       |   |                                    |  |            |
| CINCINNATI, OH 45206 (City) (State) (Zip)                  |             |  |   | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |        |  |   |   |              |                   |   |   |                   |  |                                       |   |                                    |  |            |
| (Instr. 3)   |             | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date, if                            |  | 3. Tra | 3. Transaction<br>Code<br>(Instr. 8)   |   | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |              |                   | 5. Amount of Securities Beneficially  |   |                   | 6. 7. Ownership of Form:               |                                       | eneficial   |                                    |  |            |
|  |             |  |   | (Month/Day/Year)   |        |  | de  | V   | Amou         | (A) or            | r<br>Price  | (Insu   | (iiisu. 3 diiu 4) |  | or Indirect (Ins<br>(I)<br>(Instr. 4) |   | wnership<br>nstr. 4)               |  |            |
| Common Stock   |             |  | 01/22/2016  |  |        | N                                      | 1   |   | 5,000        | A                 | \$<br>0.41  | 300,  | 300,812           |  |                                       | D   |                                    |  |            |
| Common Stock   |             |  | 01/22/2016  |  |        | N                                      | Л   |   | 5,000        | A                 | \$<br>0.39  | 305,  | 5,812             |  | D                                     |   |                                    |  |            |
| Common Stock   |             | 01/22/2016                                 |   |  | N      | Л                                      |   | 20,00   | 0 A          | \$<br>1.54        | 325,  | ,812  |                   |  | D                                     |   |                                    |  |            |
| Common Stock   |             | 01/22/2016                                 |   |  | F      | 7                                      |   | 4,224<br>(1)  | D            | \$<br>8.24<br>(2) | 321,  | ,588  | 8                 |  | D                                     |   |                                    |  |            |
| Reminder:  | Report on a | separate line for eac                      | h class of securities                                       | benefici   | ally   | y owne                                 | ed direct                                   | I   | Pers         | ons wh            | n this f  | orm are   | not r             | equired                                | of inform                             | d unless t  | the                                | SEC 14   | 74 (9-02)  |
|  |             |  | Table II - 1  |  |        |  |   | uire  | d, Dis       | sposed o          | of, or Be   | neficiall   |                   |  | ontrol num                            | ber.  |                                    |  |            |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)        | Conversion  | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transac<br>Code  | ctio   | 5. Nof Der Secon Acquired (A) Disp (D) | ivative urities uired or posed of tr. 3, 4, | Expiration (Month/Date of dot)                                    |              |                   | xercisable and an Date lay/Year)  |   |                   |  |                                       | 9. Number<br>Derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | y Do<br>Se<br>Di<br>or<br>n(s) (I) | wnership<br>orm of<br>erivative<br>ecurity:<br>irect (D)<br>Indirect | (Instr. 4) |
|  |             |  |   | Code   | V      | (A)                                    | (D)   | Dat<br>Exe  | e<br>ercisal |                   | apiration   | Title   |                   | Amount<br>or<br>Number<br>of<br>Shares |                                       |   |                                    |  |            |
| Stock  |             |  |   |  | T      |  |   |   |              |                   |   |   |                   |  |                                       |   |                                    |  |            |

5,000 04/03/2006 04/02/2016

20,000 06/10/2010 06/09/2016

5,000 07/03/2006 07/03/2016 Common

Common

Stock

Common

Stock

5,000

5,000

20,000

\$ 0

\$ 0

\$ 0

0

0

0

D

D

D

# **Reporting Owners**

\$ 0.41

\$ 0.39

\$ 1.54

01/22/2016

01/22/2016

01/22/2016

M

M

M

Option

Buy) Stock

Option

Buy) Stock Option

(Right to

(Right to

Buy)

(Right to

| D # 0 N /411  | Relationships |           |         |       |  |  |  |
|---|---------------|-----------|---------|-------|--|--|--|
| Reporting Owner Name / Address  | Director      | 10% Owner | Officer | Other |  |  |  |
| BARON ROBERT A<br>2401 INGLESIDE AVENUE<br>SUITE 1D<br>CINCINNATI, OH 45206 | X             |           |         |       |  |  |  |

| Signatures                      |            |
|---------------------------------|------------|
| Adam Logal, Attorney-In-Fact    | 01/26/2016 |
| **Signature of Reporting Person | Date       |
|                                 |            |

## **Explanation of Responses:**

- \* 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).
- (1) Represents number of shares withheld by the Company at the direction of the reporting person for the payment of exercise price. No shares of Common Stock were sold by the reporting person in connection with this transaction. The reporting person has retained the net number of shares issued upon the exercise of the option (25,776 shares).
- (2) Closing market price of the Company's common stock on the transaction date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.