FORM 4

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

OIVID APPROVAL				
OMB Number:	3235-028			
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hours per response	0.			

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *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 Type Responses) 1. Name and Address of Reporting Person* HSIAO JANE PH D				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					
OPKO HEALTH, INC., 4400 BISCAYNE BLVD. (Street)				3. Date of Earliest Transaction (Month/Day/Year) 06/04/2020					X_Officer (give title below) Other (specify below) Vice Chairman & CTO					
			4. If Amendment, Date Original Filed(Month/Day/Year)					_X_	6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person uired, Disposed of, or Beneficially Owned					
MIAMI, FL 33137 (City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					es Acquired						
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year			Execution Date, if Co		Code (Instr	3. Transaction Code (A) or Disposed of (Instr. 8) (Instr. 3, 4 and 5)		Owned Followi Transaction(s)		decurities Beneficially ing Reported		Ownership o Form:	Beneficial	
			(Month	n/Day/Year	Co	de V	Amount (A) or (D)		nstr. 3 and 4)	or (I)	Indirect (In	Ownership Instr. 4)		
Reminder:							in this	form are not rently valid OM	equired to	respond u				171 (5 02)
							Person	is who respon	id to the co	ollection of	information	on containe	d SEC 14	474 (9-02)
1. Title of Derivative	2. Conversion		3A. Deemed Execution Date, if	(e.g., pu 4. Transact	5. Nurion Deriva	arrants ber of tive	in this a curre quired, Disp s, options, co	form are not rently valid OM osed of, or Benonvertible securerisable and Date	required to B control n eficially Own rities) 7. Title and of Underly	respond unumber. rned	8. Price of Derivative	9. Number of Derivative	f 10. Ownershi	11. Natu
1. Title of		Date	3A. Deemed Execution Date, if	4. Transacti	5. Nur ion Deriva Securi Acquir	arrants ber of tive ies ed (A) oosed of	in this a curred, Dispos, options, comparison of the Expiration (Month/Date 1) in this contract of the contrac	form are not rently valid OM osed of, or Benonvertible securerisable and Date	required to B control n eficially Own rities) 7. Title and	respond unumber. red d Amount	8. Price of	9. Number o Derivative Securities Beneficially Owned Following Reported Transaction(f 10. Ownershi Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indire Benefici ownersh (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transacti	5. Numion Securi Acquir or Dis (D) (Instr.	arrants ber of tive ies ed (A) oosed of	in this a curred, Dispos, options, comparison of the Expiration (Month/Date 1) in this contract of the contrac	form are not rently valid OMI osed of, or Bendonvertible securercisable and Date y/Year) Expiration	required to B control n eficially Own rities) 7. Title and of Underly Securities	respond unumber. red d Amount	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following Reported	To. Ownershi Form of Derivative Security: Direct (D) or Indirec	11. Nature of Indire Benefici ownersh (Instr. 4)

B (1 0 N /	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
HSIAO JANE PH D OPKO HEALTH, INC. 4400 BISCAYNE BLVD. MIAMI, FL 33137	X		Vice Chairman & CTO		

Signatures

Steven D. Rubin, Attorney-in-Fact	06/08/2020
-*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) This option will vest in four equal annual installments beginning June 4, 2021.

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

Potential persons who are to respond to the collection of information contained in this form are no	ot required to respond unless the form displays a currently valid OMB number.