FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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

1. Name and Address of Reporting Person* Odence-Ford Marion (Last) (First) (Middle) C/O OPTIMIZERX CORPORATION 400 WATER STREET, SUITE 200 (Street) ROCHESTER MI 48307 (City) (State) (Zip)					3. I 10	2. Issuer Name and Ticker or Trading Symbol OptimizeRx Corp [OPRX] 3. Date of Earliest Transaction (Month/Day/Year) 10/03/2022 4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Ir	Relationship of Reporting Person(s) to Issuer Check all applicable) Director 10% Owner Check all applicable) Very Minister (give title of the (specify below)) General Counsel and CCO Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,		Code (Ins	str.	5) (A) or		tr. 3, 4 and	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership Instr. 4)		
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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/	ate,	4. Transa Code (I		of		6. Date Exercisal Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares					
Restricted Stock Units	(1)	10/03/2022			A		19,947		(2)		(2)	Common Stock	19,947	\$0	19,947	7	D	
Stock Option	\$15.04	10/03/2022			Α		39,055		(3)	10	0/02/2027	Common Stock	39,055	\$0	39,055	5	D	

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of OptimizeRx common stock.
- 2. The restricted stock units vest in three equal annual installments beginning October 3, 2023, the first anniversary of the grant date.
- 3. The stock option vests in three equal annual installments beginning October 3, 2023, the first anniversary of the grant date.

Remarks:

The filing of this Statement shall not be construed as an admission (a) that the person filing this Statement is, for the purposes of Section 16 of the Securities Exchange Act of 1934, as amended, the beneficial owner of any equity securities covered by this Statement, or (b) that this Statement is legally required to be filed by such person.

10/04/2022 /s/ Marion Odence-Ford ** 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.