AN INDUSTRY WHITE PAPER FOR PAIN MANAGEMENT & SPINE GROUPS

State of Pain Management & Spine, 2026

Capital, Consolidation, and Strategic Considerations for Physician Groups

Prepared jointly by Vector Medical Group and Baker Donelson

with strategic commentary from:

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SEPTEMBER 2026

INTRODUCTION

Pain Management and Spine Care Are Entering a Period of Meaningful Transition

Independent spine surgeons and interventional pain physicians are seeing heightened interest from private equity firms, venture investors, family offices, and payor-aligned strategic buyers. Against this backdrop, forward-looking physician groups are reassessing their position, aligning on priorities, and taking deliberate steps to remain well-positioned as their markets continue to evolve.

MARKET FORCES DRIVING INTENSIFIED INTEREST IN PAIN MANAGEMENT AND SPINE

Pain management and spine practices sit at the intersection of patient complexity, clinical need, and shifting care delivery models — a combination that continues to draw capital and strategic attention.

Demographics & Demand

Chronic pain affects a significant portion of aging adults, and demand continues to rise as the baby boomer generation enters higher-utilization years.

Policy Tailwinds

Regulatory and clinical pressures are accelerating the shift toward minimally invasive, non-opioid, and non-pharmacologic treatments. The NO PAIN Act and CMS add-on payments for non-opioid therapies reinforce interventional pain care delivered in outpatient settings.

Interventional Economics

Conservative therapy, image-guided injections, radiofrequency ablation, neuromodulation, and surgical interventions each represent distinct clinical and financial events — many performed in office-based procedure rooms or ASCs, where scheduling is efficient and payer incentives align with lower-cost sites of service.

Room to Consolidate

The specialty remains less consolidated than other areas of medicine, creating opportunities for platform formation, roll-ups, regional density strategies, and multi-state consolidation efforts -- coupled with well-capitalized centralized practice management with seasoned executive teams.

THE PRACTICE LANDSCAPE

Pain management and spine practices operate across a range of structural models, yet all face the same pressures reshaping the healthcare landscape: payment shifts, consolidation, technology adoption, and increasing clinical complexity. While these dynamics affect every practice, the most strategic response varies based on practice size, patient population, payor mix, suite of ancillary services, and long-term goals.

Investors and payors evaluate all models through similar criteria — case mix, site-of-service strategy, ancillary integration, physician alignment, and scalability — but no single approach fits every organization.

One of the leading drivers of pain management and spine groups partnering with investor platforms is the desire to own ASCs, supported by the platforms' capital resources and experience in developing and operating successful pain- and spine-focused ASCs.

SITE OF SERVICE

The Shifting Landscape and the Central Role of Ambulatory Surgery Centers (ASCs)

Investor-backed pain management and spine platforms have expanded significantly in recent years — of the seventeen platforms tracked in this briefing, half were formed in the last four years, concentrated in Texas and the Southeast. Recapitalizations are becoming more common as early platforms mature, and new sponsors enter the space. At the same time, payment structures continue to move beyond traditional fee-for-service toward value-based arrangements, direct-to-employer contracts, and cash-pay models.

Investors increasingly recognize that they are not simply acquiring revenue; they are investing in physician alignment, infrastructure, and the ability to operate effectively in a more complex healthcare landscape. Ambulatory surgery centers sit at the center of this equation.

> *"For pain and spine practices, ASCs are no longer optional — ownership has become foundational and a defining element of long-term strategic value.*
>
> — VECTOR MEDICAL GROUP × BAKER DONELSON, STATE OF PAIN MANAGEMENT & SPINE 2026

ASC VALUE DRIVERS

- **Capture facility fees** alongside professional fees.
- **Enable efficient scheduling** for injections, ablations, neuromodulation, and spine procedures.
- **Align with payer preferences** for lower-cost, high quality sites of service.
- **Support risk-bearing contracts,** site-of-service bundles, and longitudinal care models through predictable costs and consistent outcomes.

From the physician perspective, ASCs help preserve independence. They allow physicians to control case selection, maintain governance, and participate directly in the value created by the care they deliver. In markets dominated by health systems, ASC ownership can mean the difference between remaining independent and being absorbed into an employed model.

Select Investor Pain Management & Spine Platforms

PLATFORM	INVESTOR(S) (START DATE)	LOCATIONS	SELECT AFFILIATED GROUPS
US Pain Care	Physician-Owned (2025)	**33 Locations:** AZ, CA, NV, TX, GA, OK, KS	Pain Arizona; AZPTC Interventional Pain Solutions; California Pain Consultants; Nevada Advanced Pain Specialists; Augusta Pain Center; Texas Pain Care; Southern Oklahoma Pain Management; Kansas Pain Consultants; Comprehensive Specialty Care; CSC Comprehensive Surgical Care
DxTx Pain & Spine	BC Partners Credit (July 2023)	**70 Locations:** AR, CO, FL, IL, IN, IA, LA, MI, MS, NE	SEPA Pain + Spine; ASPC Advanced Spine and Pain Centers; Colorado Pain Care; Illinois Pain & Spine Institute; midWest Pain Clinics; River Cities Interventional Pain Specialists
IPA Integrated Pain Associates	Triton Pacific Capital Partners (January 2023)	**7 Locations:** TX	Lubbock Spine Institute; Texas Spine #spinestrong
Resolve Pain Solutions	Compass Group Equity Partners (September 2022)	**21 Locations:** AL, GA, LA, MS, SC, TN	Louisiana Pain Specialists; Alabama Anesthesiology & Pain Consultants; Advanced Pain Management; Mays & Schnapp Neurospine and Pain; Spine Diagnostic & Pain Treatment Center
CPIhealth	Iron Path Capital (June 2022)	**20+ Locations:** TX, OH, KY, CO, MN, IN	Wellspring Pain Solutions; The Peak Physical Medicine; Nura Pain Clinics; Midwest Interventional Spine Specialists; Balcones Pain Consultants; Water Leaf Surgery Center; Capitol Pain Institute
triasMD	Chicago Pacific Founders (January 2022)	**13 Locations:** CA, FL	DISC Sports & Spine Center
Commonwealth Pain & Spine	AEA Investors, Leavitt Equity Partners (January 2022)	**37 Locations:** IL, IN, KY, NC, OH, SC, TN	Carolina Pain Physicians; Carolinas Center for Advanced Management of Pain; Piedmont Interventional Pain Care, PA
Centrata Pain Partners	Trinity Hunt Partners (January 2022)	**2 Locations:** CO	SpineOne Spine & Sport Medical Center
Anodyne Pain & Wellness Solutions	Caydan Capital Partners (f/k/a Asydan Capital Management) (November 2021)	**8 Locations:** AZ, FL, VA	Integrated Pain; InsightPhysicians P.C.

Source: Baker Donelson x Vector Medical Group platform tracking based on multiple press releases, articles, and platform websites.

Select Investor Pain Management & Spine Platforms

PLATFORM	INVESTOR(S) (START DATE)	LOCATIONS	SELECT AFFILIATED GROUPS
partnercare	Shore Capital Partners (October 2020)	**32 Locations:** GA, NC, FL, TN, MS	Jaffe Sports Medicine; Florida Spine & Pain Center; Comprehensive Pain Consultants of the Carolinas; Axis Spine & Pain; MidSouth Pain Treatment Center
Summit Spine & Joint Centers	Revelar Capital (f/k/a Wellspring Capital Management; April 2025), MSouth Equity Partners (June 2021) Past: Fulcrum Equity Partners (2018)	**43 Locations:** GA, SC, TN	Southeast Neurology & Pain Management; Savannah Pain Management & Savannah Pain Center; IPS Integrated Pain Solutions
Tricity Pain Associates — Quality Care, Delivered.	Spindletop Capital (May 2018)	**22 Locations:** TX	VIP Surgical Center; Advanced Consultants In Pain Care; Hill Country Pain; Austin Premier Surgery Center
APC American Pain Consortium	Cedar Pine (January 2024), Peakline Partners (f/k/a Cresset Partners; January 2024), American Discovery Capital (February 2018)	**44 Locations:** GA, IN, OH, KY	The Pain Treatment Center of the Bluegrass; Integrated Pain Solutions; AllianceSpine; Center for Pain Management
Clearway Pain Solutions	NexPhase Capital (February 2018)	**94 Locations:** AL, DE, FL, GA, MD, NJ, PA, TX, SC, VA	Eastern Neurodiagnostic Associates; Relievus; The Center for Pain; Pain Institute *Plus multiple "Clearway Pain" branded locations
Pain Specialists of America	CommonView Capital (October 2017)	**17 Locations:** TX	Central Texas Pain Center; Pain Specialists of Austin
Physician Partners of America	Physician-Founded (2013)	**30 Locations:** FL, TX	miSPINE & Joint Care; Crespo Injury Care Center
National Spine & Pain Centers	Piney Lake Capital Mgt. (2023), Avista Capital Partners & Constitution Capital (2017), Sentinel Capital Partners (September 2011)	**81 Locations:** AL, CT, FL, GA, MD, MS, NJ, NY, NC, VA	New York Spine & Pain Physicians; specialty spine & pain; The Spine Center of Southeast Georgia; AIPC; Premier Pain Centers; StemCell Arts; Southeastern Interventional Pain Associates

Source: Baker Donelson x Vector Medical Group platform tracking based on multiple press releases, articles, and platform websites.

ALIGNMENT & PARTNERSHIP

Benefits of Capital and Strategic Partners

Many pain management and spine groups are evaluating whether to remain independent or partner with larger organizations. These entities — investor-backed platforms, family-office supported groups, or strategic health-system affiliates — bring advantages that are increasingly difficult for independent practices to match on their own.

Data Analytics

Analytics that support employer contracts, bundles, and value-based arrangements.

Managed Care Expertise

Negotiation expertise that supports more favorable payer contracts, including value-based care and direct-to-employer.

Referral Network Expansion

Broader relationships with primary care, orthopedics, neurology, and hospital systems.

Capital Access

Capital for ASC development, de novo offices, and other ancillary revenue expansion.

Succession Planning

Support that stabilizes operations and ensures continuity of care upon founder and key executive retirements.

Group Purchasing Power

Implants, disposables, malpractice coverage, health insurance, EMR licensing, and revenue cycle services.

Seasoned Executives

Access to experienced C-Suite leaders for operations, compliance, and growth planning.

HR & IT Infrastructure

Recruitment, retention, training, IT hardware & support, cybersecurity, and data reporting capability.

These advantages do not make partnership the inevitable choice for every group, but they do underscore why many practices are thoughtfully evaluating their options.

STRATEGIC OPTIONS

Choosing a Path Forward — Intentionally

Pain and spine practices have several viable paths forward. When considering the path ahead, physicians and administrators should factor in their local market dynamics, group culture, group goals, and existing infrastructure.

> *Groups that thrive will be those who understand where the industry is heading and align their clinical, operational, and financial decisions with that future*

OPTIONS FOR PHYSICIAN GROUPS

- **Remain independent,** which requires:
  - **A defined ASC strategy** including advanced data gathering and payer negotiations.
  - **Maximize the ancillary footprint** by optimizing margin and patient access through the right mix of physical therapy, imaging, DME, and ASC integration.
  - **Preparation** for alternative payment models and employer-based arrangements.
- **Join or build** a larger musculoskeletal organization.
- **Partner with an investor-backed platform**, with a track record of improvements and physician satisfaction.
- **Pursue a strategic partnership with a healthcare system** in the region that values physician input and governance.

None of these paths is universally right or wrong. What matters is choosing intentionally and aligning decisions with long-term goals.

THE TIME IS NOW: ALIGN AND EXECUTE ON A STRATEGY

Pain management and spine care are becoming central to the evolution of musculoskeletal and chronic disease management, influencing both care delivery and the broader economic model. The pace of change is accelerating, and groups without a defined strategy risk being shaped by external forces rather than their own priorities.

A thoughtful approach requires:

- **An honest assessment of current position and vulnerabilities.**
- **A clear view of local and regional consolidation patterns.**
- **A realistic plan for ASC access, data integrity, and payer alignment.**
- **A succession roadmap that protects patient care and operational stability.**
- **Engagement with experienced advisors who understand capital, governance, and the specific dynamics of pain and spine.**

ABOUT THIS WHITE PAPER

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Dana Jacoby is CEO and Founder of Vector Medical Group, a strategic healthcare consulting firm specializing in musculoskeletal care strategy, M&A advisory, and value-based care design. Her work centers on the structures that determine whether spine, orthopedic, and pain enterprises thrive amid consolidation — joint-venture and partnership design, physician alignment and governance, ASC and case-mix strategy, alternative payment models, and succession planning.

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Gary W. Herschman is a shareholder in Baker Donelson's Metropark (Iselin), New Jersey office and co-chair of the Firm's Health Care Transactions Group. He guides health care providers, physician groups, and industry stakeholders through complex mergers, acquisitions, private equity partnerships, joint ventures, and affiliations — with a track record of successfully closing transactions, and negotiating physician group deals ranging from $5 million to more than $250 million. He has extensive experience throughout the MSK provider sector, including representing more than 30 spine, pain and orthopedic groups in strategic transactions, as well as dozens of ASCs.

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INDUSTRY WHITE PAPER — 2026

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