



Pain Practice M&A Market: Strong through Q3 2026

*Deal volume, buyer activity and sponsor exit timing
for pain practice owners*

Q3 2026 Pain Management M&A Update

Updated: September 30, 2026



PE Firms and PE-Backed Platforms Made 10 Pain Deals Through September 2026, Two More Than in All of 2025

PAIN M&A VOLUME STRONG IN '26

12

announced pain deals from Jan. 1 to Sep. 30, 2026, vs. 11 in all of 2024 and 13 in 2025

- PE physician practice deals across all specialties fell to 71 in Q2 2026 from 102 in Q4 2025 (PitchBook)
- PE-backed buyers made 10 of the 12 pain deals

ACTIVE ADD-ON MARKET

31 of 36

pain deals announced since Jan. 2024 were add-ons to an existing platform

- Sponsors formed 8 new pain platforms in 2022–23 and 4 since Jan. 2024
- Four PE-backed platforms (Resolve, Summit, Commonwealth and American Pain Consortium) announced 13 of the 31 add-ons

SPONSOR EXITS HAVE STARTED

2

pain platforms sold to a new sponsor since 2024: American Pain Consortium (2024) and Summit Spine (2025)

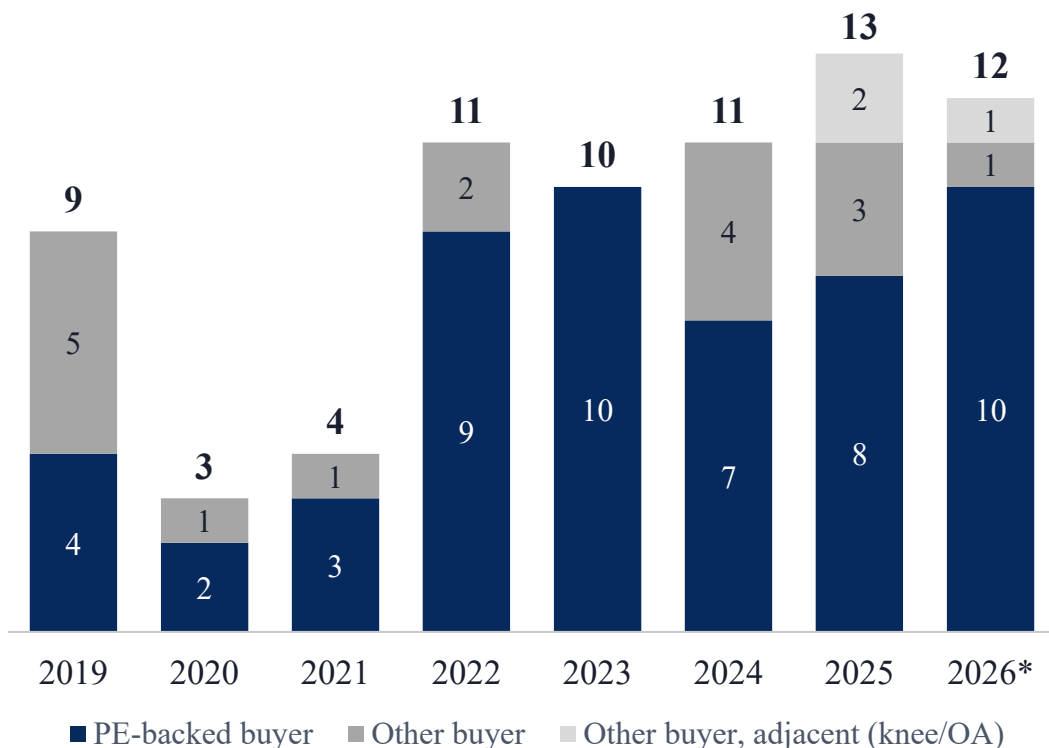
- Five platforms first funded in 2022 are four years into the hold in 2026
- National Spine & Pain restructured \$300M of debt in 2023, six years after Avista bought it in 2017

PE interest in pain management remains strong; 2026 already has 12 deals through September, one short of the 13 deals completed in 2025.

Pain Practices Announced 12 Deals Through September 2026, One Short of 2025's Full-Year Total

Announced pain deals per year

Bayshore database, 73 deals, Jan. 2019 to Sep. 30, 2026



PAIN DEALS VS. THE NATIONAL TREND

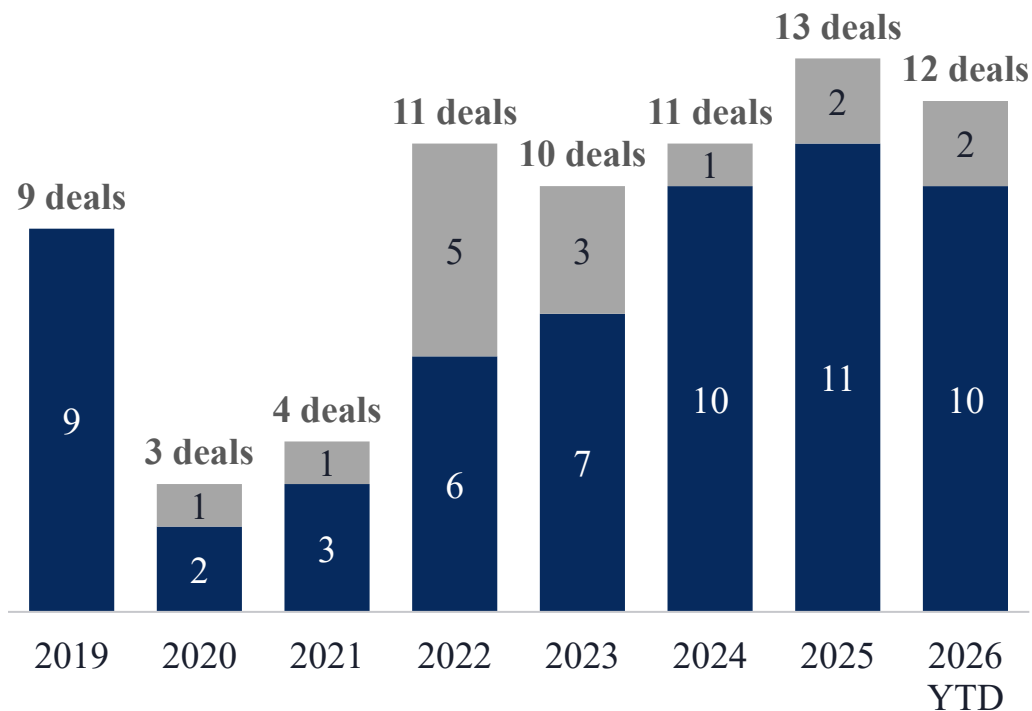
- 12 announced pain practice deals in the first nine months of 2026 vs. 13 in all of 2025
- PE-backed buyers made 10 of the 12 pain deals in 2026; 8 of the 10 were add-ons
- While pain M&A activity has been strong, physician specialty M&A continues to face challenges due to higher interest rates, softer utilization and state reviews of PE deals

PE-backed platforms made 8 of the 12 pain deals so far in 2026 as add-ons; pain platforms have remained very active, even as broader physician practice M&A by private equity faces challenges

Existing Platforms Are Actively Acquiring: 31 of 36 Pain Deals Since January 2024 Were Add-Ons

ANNOUNCED PAIN DEALS BY TYPE, JAN. 2019 TO SEP. 30, 2026

■ Add-on to existing platform ■ New platform or sponsor investment



ADD-ONS HELD UP AS NEW PLATFORMS SLOWED

New platform formation slowed

- Sponsors formed 8 new pain platforms in 2022–23 and 4 from Jan. 2024 to Sep. 30, 2026

Four PE-backed platforms made 13 of the 31 add-ons

- Resolve (4), Summit (3), Commonwealth (3) and American Pain Consortium (3)

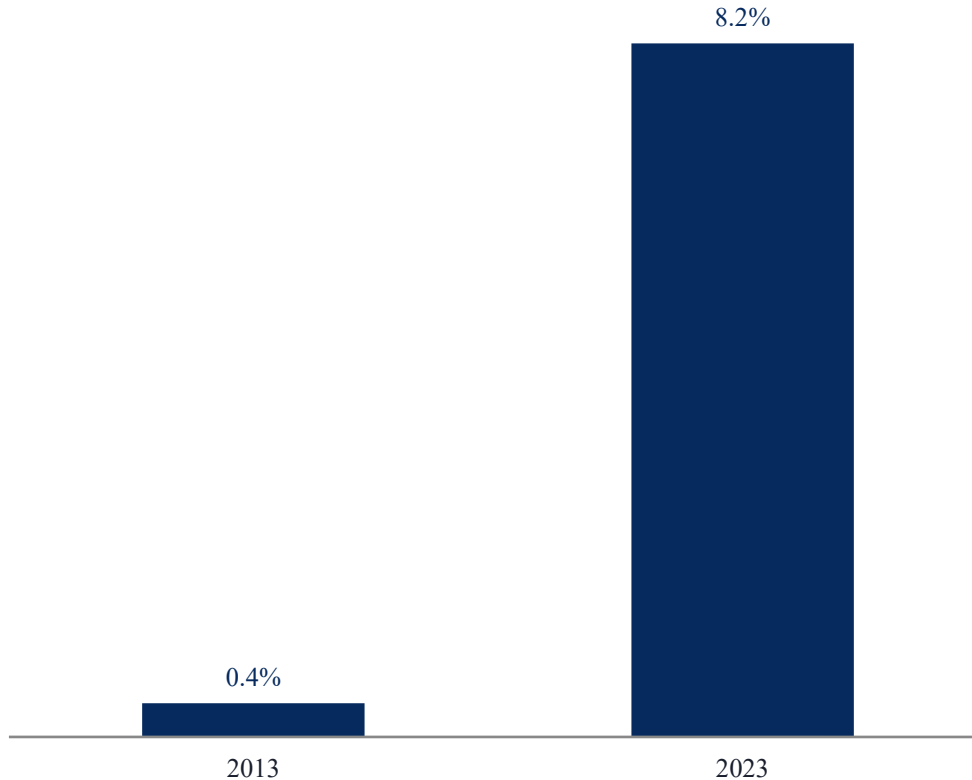
Add-on volume has held as new PE platform deal counts have fallen

- Platforms announced 10 add-ons in 2024, 11 in 2025 and 10 in 2026 through Sep. 30
- Platforms often fund add-ons from existing debt facilities, so many need no new equity from the PE fund
- Add-ons remain a main way PE firms grow platform value

A pain seller today is often choosing among existing platforms; larger pain practices may also attract interest from PE funds as a new platform.

8.2% of U.S. Pain Physicians Practiced at PE-Acquired Groups in 2023, Up From 0.4% in 2013

U.S. PAIN PHYSICIANS AT PE-ACQUIRED PRACTICES, 2013 VS. 2023



2019-21 **Slow start.** 16 tracked deals, 9 PE-backed. Sponsors formed PartnerCare (2020) and Summit Spine (2021).

2022-23 **Sponsor money arrives.** 21 deals, 19 PE-backed; sponsors formed eight new platforms.

2024-25 **Add-ons drive deal volume.** 24 deals (11 in 2024, 13 in 2025), 15 PE-backed; 21 were add-ons.

2026 **Ahead of 2025's pace.** 12 deals through Sep. 30 vs. 13 in all of 2025; 10 PE-backed, in GA, SC, KY, LA, PA, IN and CA.

About 92% of pain physicians practiced outside PE-acquired groups in 2023; 5 of the 9 platforms that bought a practice since Jul. 2025 were formed in 2022 or later.

PE-Backed Platforms Buy Most Add-Ons Early in the Hold; Activity Often Slows After 3–4 Years

Buyer type	Pain examples	What the rollover depends on	Questions for this buyer
Late-hold platform, funded 2017-18	Clearway (NexPhase, 2018): year eight, still buying. National Spine & Pain: \$300M restructuring (2023). Pain Specialists of America: \$35M of debt (2024).	How soon the sponsor sells, how much debt sits ahead of the seller's equity, valuation at sale	When does the sponsor plan to sell? What are leverage and debt maturities after this deal? How is equity value calculated for the rollover price?
Active platform, funded 2022-23	CPIhealth, Resolve, Commonwealth, Integrated Pain Associates and DxTx; Summit (new sponsor, 2025)	A longer runway to a sponsor exit, often with debt already available to fund add-ons	Which practices has it bought in the last 24 months, and what do those physicians earn now?
New platform, first sponsor money	Undisclosed “Ace” investment (Mar. 2026): 4 clinics and 1 ASC	Whether the founding group can build the platform; the founders keep more equity and governance	Has the sponsor owned a pain business before? Physician practice experience? How much capital is committed to add-ons?
Follow-on or ASC operator	Momentum's follow-on investment in Desert Pain Specialists (Aug. 2026); USPI and SCA Health for surgery centers	Often no rollover: the ASC operator buys a majority of the center for cash and the practice stays independent	What share of EBITDA comes from the ASC, and who controls the center after close?

In addition to cash at close, sellers should also weigh hold period, debt and rollover terms (share class, tag and drag rights, preferred return, valuation) before choosing a buyer.

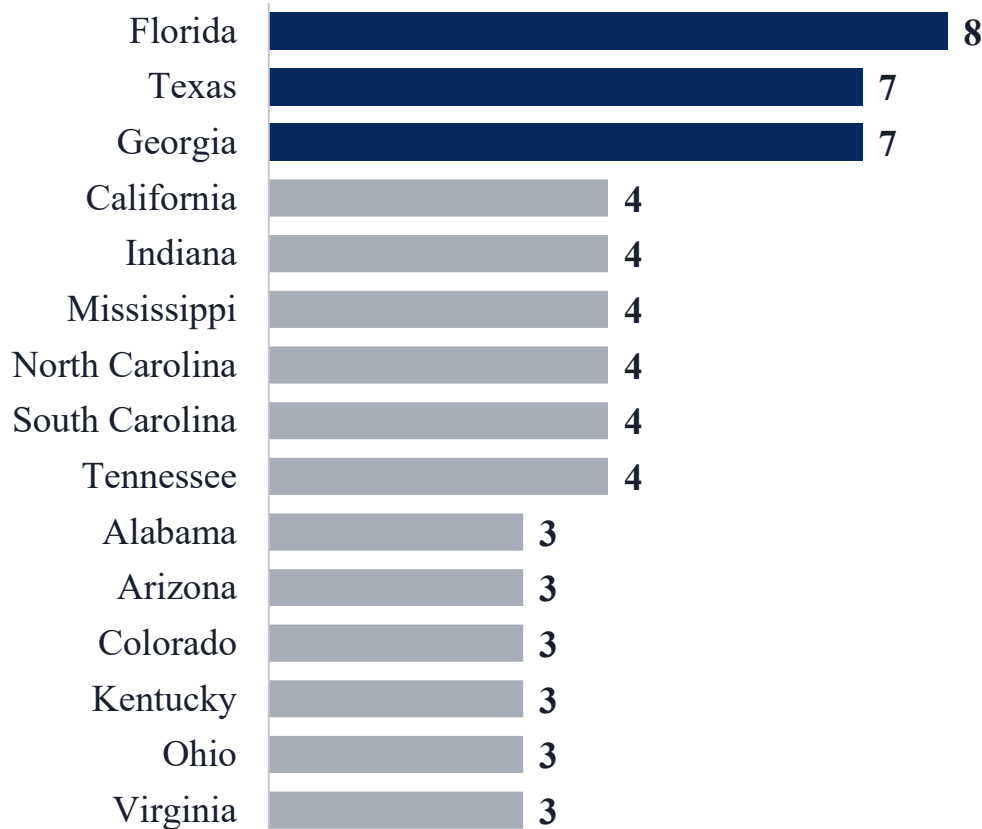
Buyers Price Pain Practices at a Multiple of Last-Twelve-Months (LTM) EBITDA, Adjusted for Known Changes

- 1 Platform fit and density.** In our experience, buyers pay more for a practice that fills a gap in their footprint or anchors a new state. An owned ASC adds facility EBITDA and a second buyer type (USPI, SCA Health).
- 2 Adjusted EBITDA.** Buyers pay a higher multiple for practices with higher EBITDA, after adjusting for market-rate physician pay and other normalizing adjustments.
- 3 Physician depth and succession.** Practicing physician partners often expected to stay 3 to 5 years post-acquisition to realize full value. Retention of employed physicians and other providers also critical through a sale.
- 4 Coverage exposure by procedure.** Share of revenue from codes under Medicare's WISer prior-authorization model (NJ, OH, OK, TX, AZ and WA) or contractor coverage review: epidurals, stimulators, peripheral nerve blocks and genicular denervation.
- 5 Payer mix and contracts.** Commercial and workers' comp share, negotiated rates against Medicare, and any out-of-network revenue buyers will discount.
- 6 Compliance and billing.** Coding and documentation audits, physician compensation, drug testing, DME and referral arrangements.

Practices that clear diligence at full price sit in an active platform's region, keep their physicians after close, and earn little from procedures under the new coverage reviews.

Florida, Texas and Georgia Each Have Seven or More Pain Platforms; 19 States Have None

TRACKED PAIN PLATFORMS PER STATE, STATES WITH THREE OR MORE



MOST OF THE COUNTRY HAS TWO OR FEWER

Two platforms

Illinois, Louisiana, Maryland, New Jersey, New York, Pennsylvania

One platform

Arkansas, Connecticut, Delaware, Iowa, Kansas, Michigan, Minnesota, Nebraska, Nevada, Oklahoma

No tracked platform (19 states)

New England outside Connecticut; the Dakotas and Wisconsin; Idaho, Montana, Utah, Wyoming and New Mexico; Washington and Oregon; Missouri, West Virginia, Alaska and Hawaii

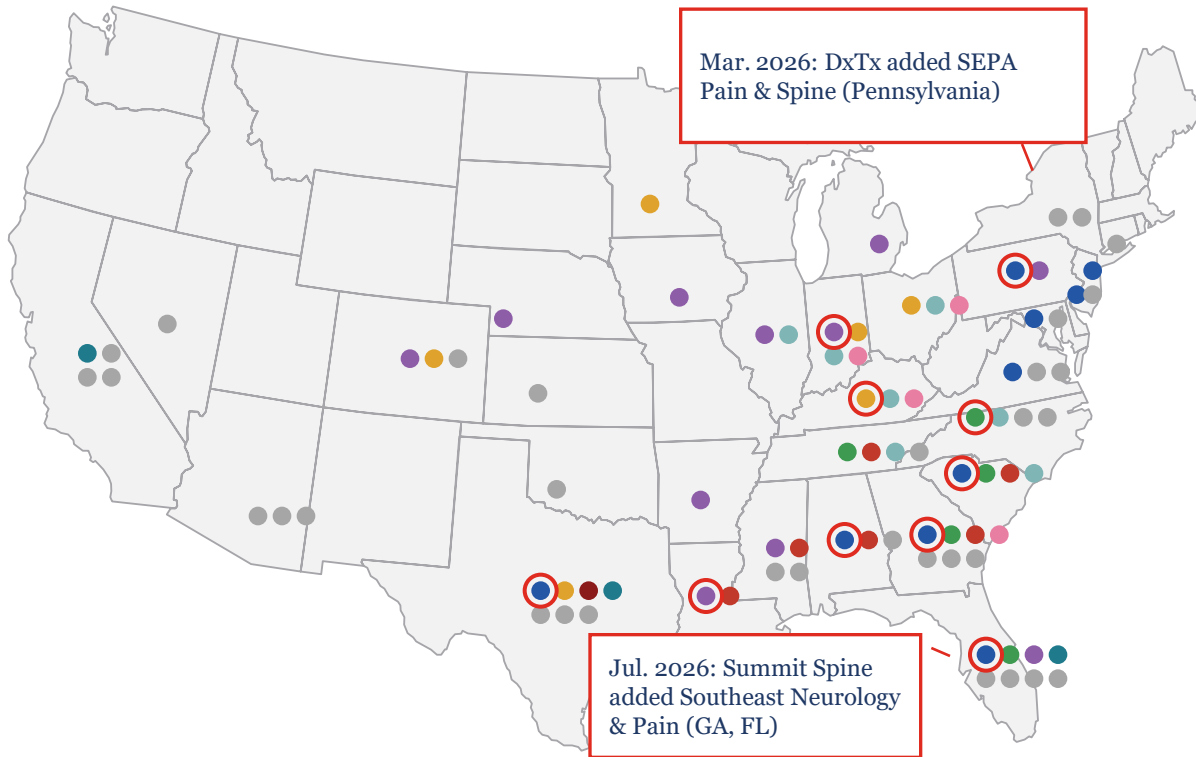
Who bought recently

9 of the 21 tracked platforms bought a practice from Jul. 2025 to Sep. 30, 2026; 8 of the 9 are PE-backed

A practice in Florida, Texas or Georgia can approach seven or more platforms already in its state. Elsewhere, the likely buyer is a platform entering a new state or private equity firms entering pain.

The Number of Potential Pain Buyers Varies Sharply by State

Florida has eight tracked platforms; Texas and Georgia have seven each



Pain platforms with a deal (Jul. 2025 to Sep. 2026)

- 9 of 21 tracked platforms bought a practice
- Eight of the nine are PE-backed

Platform footprints by state

- Clearway: AL, DE, FL, GA, MD, NJ, PA, SC, TX, VA
- Summit Spine: FL, GA, NC, SC, TN
- DxTx: AR, CO, FL, IA, IL, IN, LA, MI, MS, NE, PA
- CPIhealth: CO, IN, KY, MN, OH, TX
- Resolve: AL, GA, LA, MS, SC, TN
- Commonwealth: IL, IN, KY, NC, OH, SC, TN
- American Pain Consortium: GA, IN, KY, OH
- Integrated Pain Associates: TX
- Physician Partners of America: CA, FL, TX
- Other 11 tracked platforms (gray): National Spine & Pain, US Pain Care, PartnerCare, Anodyne, TriasMD, Pain Specialists of America, Tricity, Centrata, Desert Pain Specialists, Groth, Desert Spine

No tracked platform

- 19 states, including New England outside Connecticut, the Dakotas, the Pacific Northwest and most of the Mountain West



Practices in Florida, Texas and Georgia can approach seven or more platforms already in their state; most of the Southeast and Midwest has three or four. A large practice in one of the 19 states with no tracked platform may still interest a buyer entering a new market or a PE firm forming a new pain management platform.

Bayshore Growth Partners Advises Physician Practice Owners on the Sale of Their Practice

25+

physician groups advised

\$1M-\$20M

EBITDA range of represented clients

\$2B+

in transaction value the team has advised on*

QoE

dedicated quality-of-earnings and accounting support

WHAT WE DO FOR PRACTICE OWNERS

1 Prepare the financials

sell-side quality of earnings that documents each defensible add-back

2 Run a competitive process

more qualified bidders raise the multiple

3 Negotiate price and terms

purchase price, rollover equity, working capital, employment

BAYSHORE GROWTH PARTNERS TEAM



Steven Carmen
Managing Partner

- 15+ years of M&A and business development
- Previously BNP Paribas, PwC, and GCA
- MBA, Kellogg; BS, Florida State



Andrew Adams
Managing Director

- 15+ years of M&A, operations, and strategy
- Previously Bain, Lake Capital (\$1.3B PE firm), and JP Morgan
- MBA, Wharton; BBA, Michigan



Daniel Shaw
Managing Director

- 10+ years of diligence and accounting
- Previously Alvarez & Marsal and KPMG; CPA
- BS, Louisiana Tech



Dr. Keith Friedenber
Managing Director

- 30+ years of clinical experience
- Founder, Great Lakes Gastro and CTN
- MD, UCLA; MBA, Indiana; BA, Cornell



Alexander Dean
Vice President

- 10+ years of strategy and finance
- Previously DaVita and the U.S. Marine Corps
- MBA, Darden; BA, Seton Hall

25+ Physician-Group Sales, In-House QoE and Former PE Investor Experience Help Bayshore Clients Maximize Value



Physician-practice experience

More than 25 physician groups advised on successful sale transactions.



Defensible EBITDA

Dedicated quality-of-earnings and accounting support before buyers test the numbers.



A buyer's perspective

Our team includes a former PE investor who sat on investment committees. We know where buyers push on value and how to respond.



Licensed execution

FINRA-licensed bankers (through NC Securities, LLC), able to execute rollovers, earn-outs and co-investments.



Partner-led process

Partners lead strategy, buyer outreach, negotiation and closing.



Buyer knowledge

We have sold to these buyers and know who closes on LOI terms.

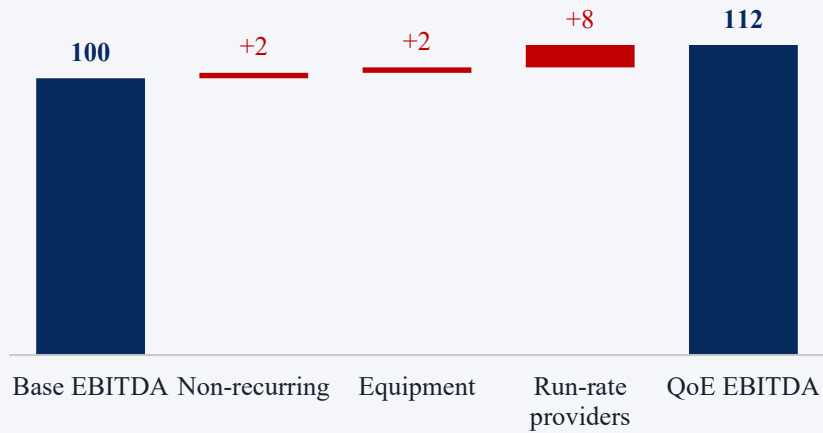
Bayshore Client Case Study: Financial Preparation and Buyer Competition Increased Owner Proceeds by About 30%

Practice value = EBITDA × valuation multiple. One completed Bayshore transaction, three sources of valuation increase:

1. Maximize EBITDA: financial preparation

+12%

Adjusted EBITDA bridge, indexed to base EBITDA = 100



- Bayshore sell-side quality of earnings financial preparation identified defensible adjustments: non-recurring expenses (+2%), equipment expensed (+2%), run-rate providers (+8%).

2. Maximize the multiple: run a process

+17%

50+

buyers contacted

7

first-round bids received

+1.0x

EBITDA multiple lift*

- 50+ buyers contacted and 7 first-round bids; final price was 1.0x EBITDA above the median first-round bid.

3. Protect value: negotiate deal terms

+1%

- Working-capital target and true-up, non-compete scope, rollover equity and employment terms.
- Our team includes a former PE investor, so we know how the other side extracts value.

Result: 12% + 17% + 1% = about 30% more value to the owner

Selected Physician Practice Transactions

Bayshore Growth Partners has served as exclusive financial advisor to 25+ physician practices, including:



Including ASC



Including Imaging Center



Including ASC



Including Clinical Trials



GHS Gastroenterology & Hepatology Specialists, Inc.

Including ASC



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OBSTETRICS & GYNECOLOGY
TERRY A. HUFF, M.D., F.A.C.O.G.
LISA ROSE HUFF, M.D., Ph.D., M.P.H.

