

The Era of the Unified Musculoskeletal Care Delivery Ecosystem

Redefining Value, Access, and the Patient Experience in 2026

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As we approach 2026, the landscape of musculoskeletal (MSK) care is poised for transformation. These shifts will **fundamentally redefine how value is delivered** and how millions of patients access treatment for back pain, joint issues, and mobility challenges. This article highlights Vori Health CEO, Jessica Landin's strategic outlook and what we can expect in the pivotal year ahead.

Meeting Patients Where They Are: The key for true personalization

THE BREAKTRHOUGH: PERSONALIZED CARE

A recent study of 2,851 patients demonstrated that even severely disabled individuals achieved 599% functional improvement (Telemedicine Reports, 2025) using digital multidisciplinary models. Even more impressive is many of these patients failed traditional inperson care. This isn't just a statistic.

For these patients, it is the difference between disability and a return to an active, vibrant life.

WHY IT WORKS NOW

The technology has finally caught up to the ambition. Emerging platforms now integrate Alpowered triage and standardized assessment, while maintaining rigorous physician oversight for clinical decision-making (HSS Journal, 2025). This combination solves the adoption puzzle by delivering safety and compliance clinicians demand, while providing the quality-of-life improvements patients deserve.

WHAT THIS MEANS FOR 2026

Al-assisted and self-guided care will not replace clinicians but rather extend their reach. It creates an ecosystem where patients with straightforward conditions receive immediate, evidence-based relief without waiting for an appointment while more complex cases are rapidly escalated to physician-led specialty teams.

The impact is significant:

- Immediate access: No wait lists, just care delivered via the channel the patient (not the clinician) prefers.
- **Efficiency**: Optimization of physician and clinician time.
- Results: Higher patient satisfaction and lower costs per care episode.

Organizations and clinicians that embrace Alassisted and self-guided pathway care integration into their care ecosystems today are doing more than just cutting costs, **they are driving access, improving outcomes and delivering truly personalized care.**

Medicare & Cost Uncertainty: Why flexibility creates winners and telehealth uncertainty creates winners and losers

THE WAKE-UP CALL: A LANDSCAPE IN FLUX

The October 2025 government shutdown was a stark warning. When Medicare telehealth flexibilities vanished, health systems like NYU Langone were forced to cease scheduling new Medicare virtual appointments entirely (Becker's Hospital Review, 2025), driving seniors back to in-person visits regardless of their mobility or care preference. While Medicare coverage for telehealth has been restored for now, the lesson is clear: reliance on regulatory stability is a risk we can no longer afford when it comes to patients.

Compounding this complexity is the evolving landscape of commercial payers, including the permanent introduction of first-dollar coverage for telehealth in High-Deductible Health Plans

(HDHPs) in the Big Beautiful Bill this past summer. The rules of engagement are shifting on all fronts.

THE HUMAN COST OF RIGIDITY

When systems break, patients pay the price.

Medicare patients with MSK conditions—
especially those with limited mobility,
transportation challenges, or geographic
barriers—are hit the hardest. For them, a policy
shift isn't just an inconvenience, it's a
blockage to appropriate and timely care.

THE STRATEGIC RESPONSE

Organizations with hybrid care models that combine virtual and in-person services, insulate themselves and their patients from external disruption and are better equipped to adapt to things like policy changes to ensure treatment can continue.

THE VISION FOR 2026

Healthcare can't wait for permanent policy adoption. The winning strategy for 2026 is to build care models that are policy-proof and truly meet patient needs through access to flexible care delivery models. Organizations must design care delivery systems that:

- Meet compliance requirements today while anticipating the changes of tomorrow.
- Adapt seamlessly to evolving Medicare and Offer patients multiple access points so that patient engagement never drops, regardless of what happens in Washington.

Ultimately, the best patient experience will drive utilization. Organizations that maintain flexible, hybrid MSK care delivery models will remain resilient, ensuring that care continues uninterrupted and always puts patients first.

Consolidation is accelerating but building value wins

THE LANDSCAPE

The race for scale is on. Physician practice acquisitions are at record levels, with nearly half (47%) of doctors now employed by health systems (Healthcare Dive, 2025). Healthcare M&A activity surged 56% in the first half of 2025 alone (KPMG, 2025). **The market is consolidating, but not all consolidation is creating value.**

THE MSK OPPORTUNITY: INTEGRATION OVER OWNERSHIP

The winners in this new landscape understand that integration, not just ownership, is key to building real value. Successful consolidation uses scale to drive coordination, blending quality care, physician oversight, and digital tools into a seamless patient journey with coordinated pathways that drive measurable value.

THE BLUEPRINT FOR WINNING ORGANIZATIONS

Successful consolidation improves patient access, care and outcomes.

The winning recipe includes:

- Centralized physician leadership: Doctors must guide clinical standards, integrated care teams and pathway design
- Intelligent scale: Leveraging shared technology and data to coordinate care and improve outcomes
- True MSK care integration: Creating a unified MSK ecosystem where patients don't feel the seams between providers, but rather a unified care delivery ecosystem where clinicians and solutions work together for the benefit of the patient
- Embedded AI & digital tools: Using technology to drive increased visibility, efficiency, and consistency across the expanded footprint.

THE 2026 TAKEAWAY

Scale alone is no longer enough. The organizations that win in 2026 will be those that pair strategic growth with true clinical integration, delivering a consistent, more efficient, and high-performing care delivery model that meets the demands and performance expectations of value-based care.



Value-Based Care (VBC): VBC in MSK specialty markets

THE OPPORTUNITY: ENDING THE ERA OF WASTE

Musculoskeletal care has long been a category defined by high cost and high variability. With up to 50% of MSK surgeries considered avoidable or inappropriate, the path forward is clear: evidence-based, outcomes driven care is not just clinically superior, it is the economic engine of the future. MSK care is no longer just a specialty vertical, it is the ideal proving ground for alternative care models that reward better outcomes, appropriate utilization, and a superior patient experience.

THE SHIFT IS ALREADY HERE

The market is moving rapidly from "episodic care treatment" to "outcome-based and total cost of care" delivery models. Health plans are moving quickly to adopt these progressive specialty care models. Partnerships like the Humana and Vori Health signal a new era of specialty value-based contracting. These models prioritize early risk identification, appropriate care pathways and measurable patient outcome improvement, proving that health plans are ready to invest in real value.

HOW TECHNOLOGY IS UNLOCKING THE DOOR

Until recently, barriers to VBC adoption in MSK included inconsistent measurement, limited data visibility and misaligned incentives.

Today, these barriers are coming down and:

 Predictive analytics now identify patients at high risk for unnecessary surgery, unnecessary injections, and unnecessary imaging months before escalation occurs.

- Automated Outcome Measurement
 Systems (AOMS) capture patient-reported outcomes, including function and pain levelsin real time, replacing guesswork with real data.
- Integrated Care Delivery Platforms ensure
 that physicians, therapists, and other care
 teams are moving in lockstep a critical
 requirement for shared-savings performance
 and other value-based economic
 arrangements.

THE FORMULA FOR SUCCESS

Winning organizations in this new landscape excel at three specific disciplines:

- **1. Managing total cost of care** and rigorously applying evidence-based care pathways and early intervention.
- Delivering consistent, measurable outcomes using standardized patient assessments to provide objective patient outcome data.
- **3. Aligning incentives** ensuring clinical governance leads the financial shift, rather than reacting to it.

THE 2026 OUTLOOK

Value-based MSK care is no longer an experiment—it is a competitive advantage. The organizations best positioned for the coming year are those that have already integrated technology, evidence-based multidisciplinary care models, and physician oversight into a unified strategy.

Those who move early will not just participate in the market, they will shape how payers structure contracts and how patients experience MSK care for the next decade.

Al Integration will enhance, not replace, clinical care teams

THE REALITY: FROM EXPERIMENTAL TO ESSENTIAL

Al in MSK care has moved from experiments to clinically proven. The impact is tangible as seen in a recent study in which **spine model preparation time dropped from 24+ hours to just 30 minutes using Al modeling** (World Neurosurgery, 2025).

Computer vision systems now provide real-time exercise feedback with reliability scores above 0.90 (Healthcare, 2025). These aren't just efficiency gains; they are transformations in day-to-day care delivery.

THE PHILOSOPHY – THE "PHYSICIAN-FIRST" PRINCIPLE

Research confirms a critical truth: Al works best as a clinical decision support tool, not a replacement (Cureus, 2025). Patients trust recommendations most when they know their clinician is clearly in the loop, using Al to enhance accuracy and personalization, not to outsource care.

THE PERFECT PARTNERSHIP

The best-performing organizations in 2026 will be those that understand the division of labor:

- What Al does best: Pattern recognition, measurement consistency, and processing vast volumes of data to spot trends long before the human eye can.
- What physicians do best: Contextual reasoning, nuanced diagnosis, and the critical human connection. In MSK care, where pain and lifestyle are deeply intertwined, the "human element" is a clinical necessity.

THE IMPLEMENTATION CHALLENGE: NO "BLACK BOXES

Adoption depends on trust. "Black box" tools, those that provide answers without rationale, face resistance and slow adoption. To be successful, Al systems must be explainable, transparent, and seamless. The winning models in 2026 will provide clear reasoning, integrate seamlessly into clinical workflows, and extend physician capacity rather than competing with it. Winning models will elevate not only the patient experience, but also the clinician experience.

THE 2026 STRATEGIC DIFFERENTIATOR

Al is now a strategic differentiator, but only when aligned with physician oversight and clinical rigor. Organizations that leverage Al to accelerate workflows and sharpen their decision-making will see the fastest gains in outcomes, patient satisfaction, and total cost of care reductions. However, leaders who chase automation at the expense of clinical judgment will find themselves falling behind.



What this means for your organization

WHAT'S NEXT

The future belongs to the organizations that act decisively today. The winners will be the organizations that stop viewing technology and physician expertise as competitors and start building models where they work in powerful concert.

THE WINNING FORMULA

Success requires a bold pivot: anchoring innovation in clinical oversight, embracing hybrid care delivery, and investing early in explainable Al. Those who who move will define the new standard of patient experience, cost efficiency, and clinical outcomes.

ARE YOU READY TO LEAD?

As we enter a period of rapid transformation, the organizations that succeed will be those that integrate technology and physician-led care, not as parallel systems, but as unified clinical ecosystems that deliver better outcomes for patients that need it the most in the next era of MSK care.

REFERENCES

- Telemedicine Reports, 2025: Grant, R. A., O'Connor, M. I., Myers, P., & Fiechtl, J. (2025). Transforming Musculoskeletal Care: Effectiveness of a Physician-Led Telemedicine Integrated Practice Unit. Telemedicine Reports, 6(1), 300–308. https:// doi.org/10.1177/26924366251382437
- HSS Journal, 2025: Pawelczyk, J., Kraus, M., Voigtlaender, S., Siebenlist, S., & Rupp, M. (2025). Advancing Musculoskeletal Care Using Al and Digital Health Applications: A Review of Commercial solutions. HSS Journal® the Musculoskeletal Journal of Hospital for Special Surgery, 21(3), 331–341. https:// doi.org/10.1177/15563316251341321
- 3. Becker's Hospital Review, 2025: Giles, B. Health systems pause Medicare telehealth visits during government shutdown. Becker's Hospital Review. https://www.beckershospitalreview.com/healthcare-information-technology/telehealth/health-systems-pause-medicare-telehealth-visits-during-government-shutdown/
- Healthcare Dive, 2025: Olsen, E. (2025, September 24). Physician practice acquisitions on the rise: GAO. Healthcare Dive. https:// www.healthcaredive.com/news/physician-practice-acquistionshealthcare-consolidation-rising-government-accountability-officegao/760919/
- KPMG, 2025: KPMG US. (n.d.). M&A trends in healthcare. KPMG. https://kpmg.com/us/en/articles/mergers-acquisitions-trends-healthcare-life-sciences.html
- World Neurosurgery, 2025: (2025). Ahmadi, M., Zhang, X., Lin, M., Tang, Y., Engeberg, E. D., Hashemi, J., & Vrionis, F. D. (2025). Automated finite element Modeling of the lumbar spine: a biomechanical and clinical approach to spinal load distribution and stress analysis. World Neurosurgery, 201, 124236. https:// doi.org/10.1016/j.wneu.2025.124236
- Healthcare, 2025: Alrwaily, M. (2025). Delivering Musculoskeletal Rehabilitation in the Digital Era: A perspective on Clinical Strategies for Remote practice. Healthcare, 13(18), 2286. https://doi.org/10.3390/ healthcare13182286
- Cureus, 2025: Mohamed, A., Elasad, A., Fuad, U., Pengas, I., Elsayed, A., Bhamidipati, P., & Salib, P. (2025). Artificial Intelligence in Trauma and Orthopaedic Surgery: A Comprehensive review From diagnosis to Rehabilitation. Cureus, 17(9), e92280. https://doi.org/10.7759/ cureus.92280

ABOUT VORI HEALTH

Vori Health is a specialty medical practice delivering a virtual-first musculoskeletal (MSK) solution to help members get back to their lives faster. As the only nationwide MSK practice with doctor-led care teams, Vori Health is the most convenient way to access appropriate care for back, neck, and joint pain without bouncing around the healthcare system. Whether members need a diagnosis, non-opioid prescription, personalized physical therapy, and/or health coaching, they can turn to Vori Health for evidence-based care and effective end-to-end support. Learn how this holistic model reduces unnecessary surgeries, enables faster recoveries, and lowers MSK spend with up to a 4:1 ROI.