



Pacira BioSciences to Present Real-World Data on EXPAREL® Showing Reduced Cost of Care at Orthopaedic Research Society 2026 Annual Meeting

March 30, 2026

-- Studies highlight reduced total cost of care and select healthcare resource utilization outcomes in total knee arthroplasty (TKA) and spinal fusion --

BRISBANE, Calif., March 30, 2026 (GLOBE NEWSWIRE) -- Pacira BioSciences, Inc. (NASDAQ: PCRX), the industry leader in its commitment to deliver innovative, non-opioid pain therapies to transform the lives of patients, today announced findings from two real-world studies evaluating the economic benefits of EXPAREL® (bupivacaine liposome injectable suspension) in orthopaedic procedures, including total knee arthroplasty (TKA) and spinal fusion. In both studies, EXPAREL was associated with lower total cost of care compared with ropivacaine in one study and standard of care options (non-LB) in the other, with reductions observed in both outpatient and inpatient surgical settings. The data will be presented at the Orthopaedic Research Society (ORS) 2026 Annual Meeting taking place March 27–31 in Charlotte, North Carolina.

Briefly, the analyses include two propensity score-matched cohort studies evaluating outcomes on surgery day and throughout 30 days of follow-up in commercial and Medicare Advantage populations. Across both studies, EXPAREL was associated with lower total costs and reductions in select healthcare resource utilization measures. In the spinal fusion study, these reductions were driven primarily by a shorter length of hospital stay.

“Pacira is committed to advancing the economic understanding of postsurgical pain management through real-world evidence that demonstrates the value of non-opioid approaches,” said Jonathan Slonin, MD, MBA, Chief Medical Officer at Pacira BioSciences. “These findings reinforce the role of EXPAREL within multimodal pain management strategies and underscore its potential to improve patient outcomes while removing economic barriers to access.”

Pacira Presentations at ORS 2026:

1. “Costs and Health Care Resource Utilization of Liposomal Bupivacaine and Ropivacaine in the Total Knee Arthroplasty in the Hospital Outpatient Department: a Propensity Score-Matched Cohort Study”

Presenter: Jennifer Lin, Senior Director, Epidemiology in Health Outcomes Economics Research & RWE Department, Pacira BioSciences

Poster Number: 1224

Date & Time: Monday, March 30, 4:45–5:30 p.m. ET

This study evaluated real-world outcomes of liposomal bupivacaine (LB) compared with ropivacaine in patients undergoing TKA in the HOPD setting, with a focus on healthcare resource utilization and total cost of care on surgery day and during the subsequent 30 days of follow-up. In a propensity score-matched analysis of commercial and Medicare Advantage populations (in the commercial cohort, there were 9463 patients each in the LB and ropivacaine group; for the MA cohort, there were 2924 patients in each group), LB was associated with significantly lower total costs versus ropivacaine (commercial: $-\$409$ [$\$37,466$ vs $\$37,875$]; Medicare Advantage: $-\$1,359$ [$\$19,814$ vs $\$21,173$]; $P<0.001$ for all), as well as lower index procedure costs (commercial: $-\$328$ [$\$33,539$ vs $\$33,867$]; Medicare Advantage: $-\$781$ [$\$16,693$ vs $\$17,474$]; $P<0.0001$ for all). Additional findings included reduced home health utilization in both cohorts for LB ($P<0.001$) and reduced inpatient admissions in the commercial population ($P<0.05$), alongside lower outpatient, pharmacy, and home health costs ($P<0.05$ for all).

2. Lower Costs and Health Care Resource Utilization of Patients Undergoing Spinal Fusion Treated With Liposomal Bupivacaine in the Inpatient Commercial Setting: a Propensity Score-Matched Cohort

Presenter: Jennifer Lin, Senior Director, Epidemiology in Health Outcomes Economics Research & RWE Department, Pacira BioSciences

Poster Number: 1798

Date & Time: Monday, March 30, 4:45–5:30 p.m. ET

This study evaluated real-world economic and healthcare resource utilization outcomes of LB compared with non-LB analgesia in commercially insured patients undergoing spinal fusion surgery in the inpatient setting on surgery day and over subsequent 30-day episode of care. In a propensity score-matched cohort ($n=478$ LB; $n=1,434$ non-LB), LB use was associated with significantly lower mean total costs ($-\$5,993.17$ [$\$75,703.78$ vs $\$81,696.95$]; $P<0.05$), driven primarily by reductions in total medical cost ($-\$6,001.19$; $P<0.05$), with additional decreases in outpatient costs ($P<0.05$). LB-treated patients also experienced a significantly shorter length of stay (-1.83 days [2.56 vs 4.39]; $P<0.0001$), with no differences in emergency department visits or inpatient readmissions, and a small increase in outpatient visits (0.31 ; $P<0.001$).

About Pacira

Pacira BioSciences delivers innovative, non-opioid pain therapies to transform the lives of patients. Pacira has three commercial-stage non-opioid treatments: EXPAREL® (bupivacaine liposome injectable suspension), a long-acting local analgesic currently approved for infiltration, fascial plane block, interscalene brachial plexus nerve block in adults, sciatic nerve block in the popliteal fossa in adults, and adductor canal block in adults for postsurgical pain management; ZILRETTA® (triamcinolone acetonide extended-release injectable suspension), an extended-release, intra-articular injection indicated for the management of osteoarthritis knee pain; and iovera®, a novel, handheld device for delivering immediate, long-acting, drug-free pain control using precise, controlled doses of cold temperature to a targeted nerve. The company is also advancing a pipeline of clinical-stage assets for musculoskeletal pain and adjacencies, its most advanced product candidate, PCRX-201 (enekenragene inzadenovec), a novel locally administered gene therapy in Phase 2 clinical development for osteoarthritis of the knee. To learn more about Pacira, visit www.pacira.com.

About EXPAREL® (bupivacaine liposome injectable suspension)

EXPAREL is indicated to produce postsurgical local analgesia via infiltration in patients aged 6 years and older, and postsurgical regional analgesia via an interscalene brachial plexus block in adults, a sciatic nerve block in the popliteal fossa in adults, and an adductor canal block in adults. The safety and effectiveness of EXPAREL have not been established to produce postsurgical regional analgesia via other nerve blocks besides an interscalene brachial plexus nerve block, a sciatic nerve block in the popliteal fossa, or an adductor canal block. The product combines bupivacaine with multivesicular liposomes, a proven product delivery technology that delivers medication over a desired time period. EXPAREL represents the first and only multivesicular liposome local anesthetic that can be utilized in the peri- or postsurgical setting. By utilizing the multivesicular liposome platform, a single dose of EXPAREL delivers bupivacaine over time, providing significant reductions in cumulative pain scores with up to a 78 percent decrease in opioid consumption; the clinical benefit of the opioid reduction was not demonstrated. Additional information is available at www.EXPAREL.com.

Important Safety Information about EXPAREL for Patients

EXPAREL should not be used in obstetrical paracervical block anesthesia. In studies in adults where EXPAREL was injected into a wound, the most common side effects were nausea, constipation, and vomiting. In studies in adults where EXPAREL was injected near a nerve, the most common side effects were nausea, fever, headache, and constipation. In the study where EXPAREL was given to children, the most common side effects were nausea, vomiting, constipation, low blood pressure, low number of red blood cells, muscle twitching, blurred vision, itching, and rapid heartbeat. EXPAREL can cause a temporary loss of feeling and/or loss of muscle movement. How much and how long the loss of feeling and/or muscle movement depends on where and how much of EXPAREL was injected and may last for up to 5 days. EXPAREL is not recommended to be used in patients younger than 6 years old for injection into the wound, for patients younger than 18 years old for injection near a nerve, and/or in pregnant women. Tell your health care provider if you or your child has liver disease, since this may affect how the active ingredient (bupivacaine) in EXPAREL is eliminated from the body. EXPAREL should not be injected into the spine, joints, or veins. The active ingredient in EXPAREL can affect the nervous system and the cardiovascular system; may cause an allergic reaction; may cause damage if injected into the joints; and can cause a rare blood disorder.

Forward-Looking Statements

Any statements in this press release about Pacira's future expectations, plans, trends, outlook, projections and prospects, and other statements containing the words "believes," "anticipates," "plans," "estimates," "expects," "intends," "may," "will," "would," "could," "can" and similar expressions, constitute forward-looking statements within the meaning of Section 21E of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), and the Private Securities Litigation Reform Act of 1995, including, without limitation, statements related to: the contributions of new directors; '5x30', our growth and business strategy, our future outlook, the strength and efficacy of our intellectual property protection and patent terms, our future growth potential and future financial and operating results and trends, our plans, objectives, expectations (financial or otherwise) and intentions, including our plans with respect to the repayment of our indebtedness, anticipated product portfolio and product development programs, strategic alliances, plans with respect to the Non-Opioids Prevent Addiction in the Nation ("NOPAIN") Act and any other statements that are not historical facts. For this purpose, any statement that is not a statement of historical fact should be considered a forward-looking statement. We cannot assure you that our estimates, assumptions and expectations will prove to have been correct. Actual results may differ materially from those indicated by such forward-looking statements as a result of various important factors, including risks relating to, among others: risks associated with acquisitions, such as the risk that the acquired businesses and/or assets will not be integrated successfully, that such integration may be more difficult, time-consuming or costly than expected or that the expected benefits of the transaction will not occur; our manufacturing and supply chain, global and United States economic conditions (including tariffs, inflation and rising interest rates), and our business, including our revenues, financial condition, cash flows and results of operations; the success of our sales and manufacturing efforts in support of the commercialization of EXPAREL, ZILRETTA and iovera®; the rate and degree of market acceptance of EXPAREL, ZILRETTA and iovera®; the size and growth of the potential markets for EXPAREL, ZILRETTA and iovera® and our ability to serve those markets; our plans to expand the use of EXPAREL, ZILRETTA and iovera® to additional indications and opportunities, and the timing and success of any related clinical trials for EXPAREL, ZILRETTA, iovera® and any of our other product candidates, including but not limited to PCRX-201; the commercial success of EXPAREL, ZILRETTA and iovera®; the related timing and success of United States Food and Drug Administration supplemental New Drug Applications and premarket notification 510(k)s; the related timing and success of European Medicines Agency Marketing Authorization Applications; our plans to evaluate,

develop and pursue additional product candidates utilizing our proprietary multivesicular liposome (“pMVL”) drug delivery technology or our proprietary high-capacity adenovirus (“HCAd”) vector platform; the approval of the commercialization of our products in other jurisdictions (by either us or our partners); clinical trials in support of an existing or potential pMVL- or HCAd-based product; our commercialization and marketing capabilities; our ability to successfully complete capital projects; the outcome of any litigation; the recoverability of our deferred tax assets; assumptions associated with contingent consideration payments; assumptions used for estimated future cash flows associated with determining the fair value of the company; the anticipated funding or benefits of our share repurchase program; and factors discussed in the “Risk Factors” of our most recent Annual Report on Form 10-K and in other filings that we periodically make with the Securities and Exchange Commission (the “SEC”). In addition, the forward-looking statements included in this press release represent our views as of the date of this press release. Important factors could cause actual results to differ materially from those indicated or implied by forward-looking statements, and as such we anticipate that subsequent events and developments will cause our views to change. Except as required by applicable law, we undertake no intention or obligation to update or revise any forward-looking statements, whether as a result of new information, future events or otherwise, and readers should not rely on these forward-looking statements as representing our views as of any date subsequent to the date of this press release.

These forward-looking statements involve known and unknown risks, uncertainties and other factors that may cause our actual results, levels of activity, performance or achievements to differ materially from those expressed or implied by these statements. These factors include the matters discussed and referenced in the “Risk Factors” of our most recent Annual Report on Form 10-K and in other filings that we periodically make with the SEC.

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