# FINANCING THE HEALTHCARE INTERNET

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#### **Overview**

- Finance and the industry life cycle
- Private equity: Venture capital, angels
- Public equity: IPO and the after-market
- Consolidation: M&A, leveraged buyout
- Conclusion: Finance and healthcare

# Finance and the Industry Life Cycle

- Emerging sectors: new products and firms
- Growth sectors: ramping up
- Mature sectors: large, consolidated firms
- Declining sectors: high revenue, low growth

# **Emerging Sectors**

- Emerging products and firms
  - Meagre revenues, no profits
  - Untested product, technology, demand
  - Great need for risk-friendly capital
- Angels, strategic investors, venture capital
- E-Health, biotechnology?

#### **Growth Sectors**

- Established products and markets
- Rapid growth in revenue, first profits
- Public capital markets: IPO
  - Equity, convertible debt
- Biotechnology, devices, home health?

#### **Mature Sectors**

- Predictable revenues, profits
- Secondary capital market
  - Secondary debt and equity offerings
  - Earnings as internal capital source
  - Repurchase shares and retire debt
- Managed care, long term care?

# **Declining Sectors**

- Consolidated firms, entry barriers
- Profits (free cash flow) but low growth
- Repurchase shares and retire debt
- Conglomerate diversification
- t Hospitals?

# E-Health: Private Equity

- Offer risk-tolerant capital to emerging firms
- Contacts with potential suppliers, distributors, partners
- Venture capital
- Angels and incubators
- Strategic investors

### The Venture Capital Revolution

- Overall VC investment:
  - 1997: \$11.5B; 1998: \$14.2B; 1999: \$35.6B
  - First quarter 2000: \$17.2B
  - Internet: 63% of total
  - ROI 1999: All 146%, early stage 248%
- Source: pensions (23%), individuals (22%), endowments (21%), corporations (15%)

# Venture Investments in Health

Services		238	
Biotech	153	146	585
Devices	168	223	350

# Other Private Equity Investments in E-Health

- 1 Angel investors, incubators
- **t** LBO/VC partnerships
  - KKR/Accel
- Strategic investors
  - Microsoft, Intel
  - UnitedHealth Group, PacifiCare

# **Public Equity Markets**

- Cheaper, more patient (?) investors
- Exit strategy for angels, VCs, stock options
- Equity as currency for M&A
- Continual oversight, always in play
- Nontrivial transactions costs

#### **E-Health IPO**

- 1999 and 1Q2000: 26 e-health IPO
- Raise \$1.5B at IPO
- Post-IPO price surges
  - Ventro (1520%), Healtheon (1480%), Trizetto (910%), Neoforma (500%), SciQuest (470%)

# E-Health After-Market Collapse

- © 2Q2000 major correction of tech equities
- E-health followed down, missed rebound
- t By June, of 26 e-health IPO firms:
  - c 21 trading 80% below 52-week high
  - Compare the compared to the

# Current Public/Private Equity Sentiment

- Resurgence of major stock indices
- Flight to quality: proven firms, products
- Internet: from B2C to B2B to infrastructure
- E-Health infrastructure firms?
- No rebound in e-health
- t VC, IPO refocus on biotechnology

#### Consolidation of E-Health Sector

- Logic of merger and acquisition
  - Horizontal, vertical, diversification
  - Network effects: winner take all?
  - Most M&A is diversification
  - Most VC investments end in M&A, not IPO
- Leveraged buyout?

# E-Health Merger and Acquisition

- t Established firms consolidate
  - The WEBMD conglomerate
  - Medscape/Medicalogic
- Equity volalitity has dampened acquisitions
  - Neoforma/Eclipsys
  - Trizetto/IMS Health

# Leveraged Buyout?

- LBO focus on rustbelt conglomerates
- PPM sector has gone LBO or BK
- t Of 1000 tech IPO since 1990:
  - © 200 trade below PE of 20; 300 trade below IPO
- Joint ventures between LBO and VC firms
- Junk bond market depressed

#### Clicks and Mortar in E-Health

- Content
  - Aetna/Harvard; Stanford eskolar
- Connectivity
  - MedUnite
  - WebMD and Humana
- Supply chain
  - Tenet/Broadlane and Ventro
  - t VHA, UHC, and Neoforma

#### The Future

- Go where the pain is greatest: Healthcare
- But healthcare problems appear intractable
- Administered pricing: Medicare BBA
- Consumers: cost-unconscious entitlement
- The last mile: connecting physicians
- Privacy is more important and difficult

#### The Three Axioms of Healthcare

- Americans want the best healthcare someone else will pay for
- We demand our fair share of unnecessary and inappropriate procedures
- When the going gets tough, the empowered consumer wants government regulation

# **Never Forget**

- t Revenue = cost
- $\mathbf{W}$ aste = jobs
- Profit = fraud
- t Good luck