ASC Industry Review



Number of Businesses

4,710

Industry Revenue

\$29.5 billion

Industry Profit

\$7.0 billion

Historical Revenue Growth (2013-2018)

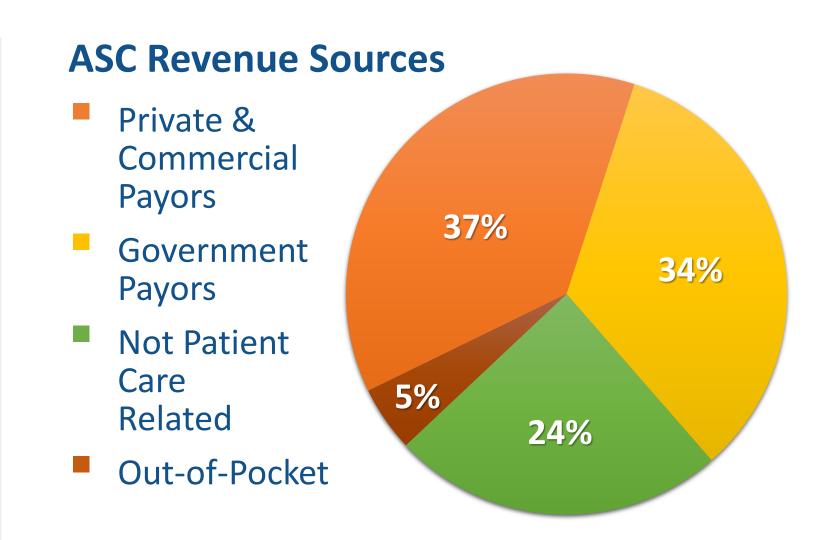
4.1%

Projected Revenue Growth (2018-2023)

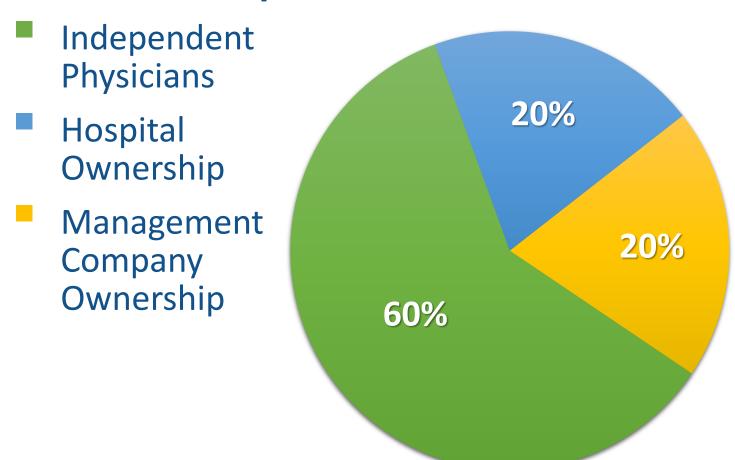
2.7%

Observed Sale Prices

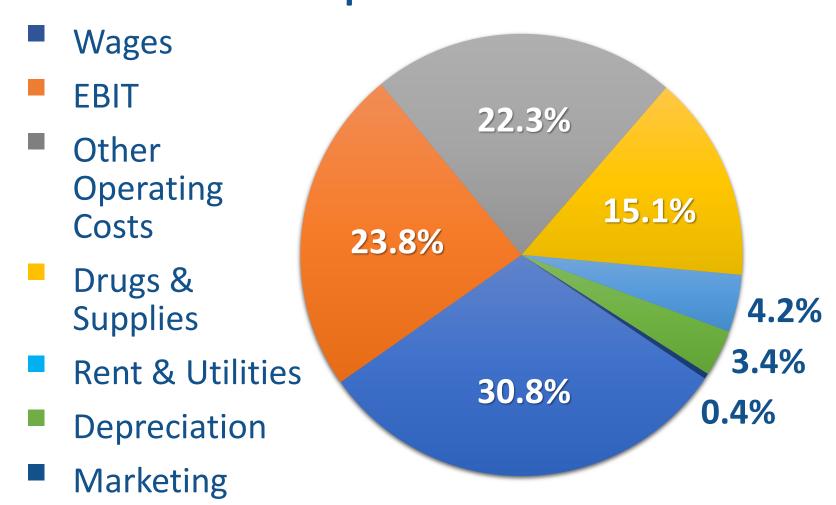
 $7 \times -10 \times EBITDA$



ASC Ownership Structure



ASC Revenue Components





ASC Transaction Trends

- Revenue & EBITDA multiples will increase in the near term
 - Post-transaction earnings growth: 3% 9% per year
 - Tax rate changes under the Tax Cuts & Jobs Act will drive earnings up
- Attractive debt markets will increase use of debt financing
- Trend towards industry consolidation will continue
 - Minimizes risks of reimbursement, regulation, & competition
- Hospitals will continue to seek partnerships with ASCs
 - Enables hospitals to diversify service lines & increase market share
 - ASCs can provide hospitals lower-cost outpatient settings
 - Hospitals can provide the large infrastructure needs of ASCs
 - Both Hospitals & ASCs benefit from shared resources
- Co-ownership with management companies will increase
 - Management fees average 5-6% of net revenue with \$100k minimum
 - Billing & collection fees average 3-4% of net revenue

ASC Reimbursement Trends

- ASC rates will increase 2% on average in 2019
- HOPD rates will increase 1.25% on average in 2019
- Shift from fee-for-service to alternative payment models:
 - Bundled Payments CapitationClinical Integration Shared Savings
- Revenue sources for specialties approved by CMS in 2017:
 - Cardiology
- Invasive Nephrology
- Vascular Cases

Current Range of EBITDA Multiples Controlling Minority Interest Interest 10.0× 9.0× 8.0× 7.0× 6.0× 5.0× 4.0× 3.0× 2.0× 1.0× Single-Multi-Single-Multi-**Specialty Specialty**

External Factors Promoting Growth

- Increased population of adults aged 65 and older
- Changing consumer demands
- Technology advancements

- Heightened price sensitivity
- Physician shortages
- Shift to value-based care

External Factors Limiting Growth

- Out-of-pocket costs
- Shift to physician offices for low-acuity procedures
- Federal healthcare policy reforms