



asceni  - on

Life Sciences into Business



global partners in life science transactions

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## **Valuation and Negotiation**

May 26<sup>th</sup> 2011, ASTP-conference, Stockholm

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## **1. Introduction**

## **2. Goals of the Workshop**

## **3. Valuation Methods**

## **4. Negotiation Framework**

## **5. Case Study**

## Ascenion

- Founded in 2001
- Focus on life sciences
- Marketing of >700 technologies and materials of public research institutions
  - Helmholtz Association
  - Leibniz Association
  - Hanover Medical School
  - TT in the NGFN
  - Mouse Genetics Cologne Foundation
- Team of 22 specialists with multiyear experience and sector specific expertise
  - Technology Managers (Scientists)
  - Analysts
  - Legal / Tax Advisors
- Offices in Munich, Berlin, Brunswick, Hamburg, Neuherberg, Hanover

## Anja Zimmermann

- Analyst at Ascenion since 2001
- Focus on life science and economics: Biologist (PhD) and business economist
- Based in Munich office
- Responsible e.g. for
  - licensing projects (patented and non patented technologies),
  - Ascenion's spin off portfolio
  - valuation issues (NPV, etc.)

## Short CV

- 2004 – today: General Partner JSB Partners LP (Managing Director, Zug-Switzerland)
- 1999 – 2003: Cofounder / COO of Xantos Biomedicine, Munich
- 1991 – 1999: Director Molecular Medicine, Boehringer Mannheim / Hoffman – La Roche
- 1981 – 1991: PhD in Immunology/Molecular Genetics (Hanover, Cologne, Heidelberg, Strassbourg)

## Overview on JSB Partners

- International transaction broker for the healthcare community doing licensing, M&A and financing transactions
- Deal volume since 2008 > US\$ 2 billion
- Major offices in New York, Boston, Munich and Zürich
- Spin-off from MPM Capital/Boston in 1999

## Short CV

- 2005 – today: Managing Director, Max Planck Innovation, Munich
- 2011 RTTP (Registered Technology Transfer Professional, ATTP)
- 2007 - 2011: Board Member ASTP
- 2002 – 2004: MBA Management, University of Applied Sciences Deggendorf
- 1991 – 2005: Patent- and Licensing Manager, Max Planck Innovation
- 1988 – 1991: PhD in Developmental Biology/Molecular Genetics (Heidelberg, Göttingen)

## Overview Max Planck Innovation

- technology transfer agency of the Max Planck Gesellschaft (largest basic research organization in Germany)
- 130-150 invention disclosures / 80 patent applications per year
- license income/year: € 16-17 million (US\$ 22-24 million)
- 90 Spin-offs since 1990

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- **Valuation**

- Understand several valuation techniques
- Be able to use rNPV calculation technique
- Get overview on relevant parameter required for rNPV valuation
- Develop valuation of „Case Study“

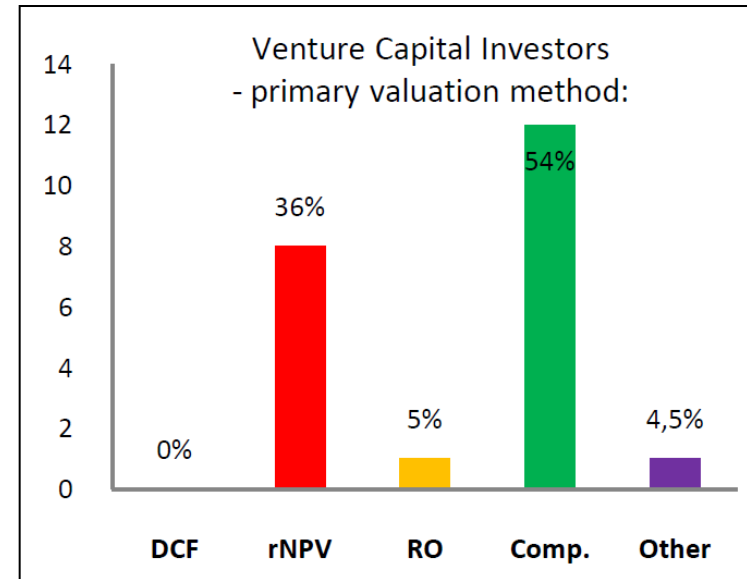
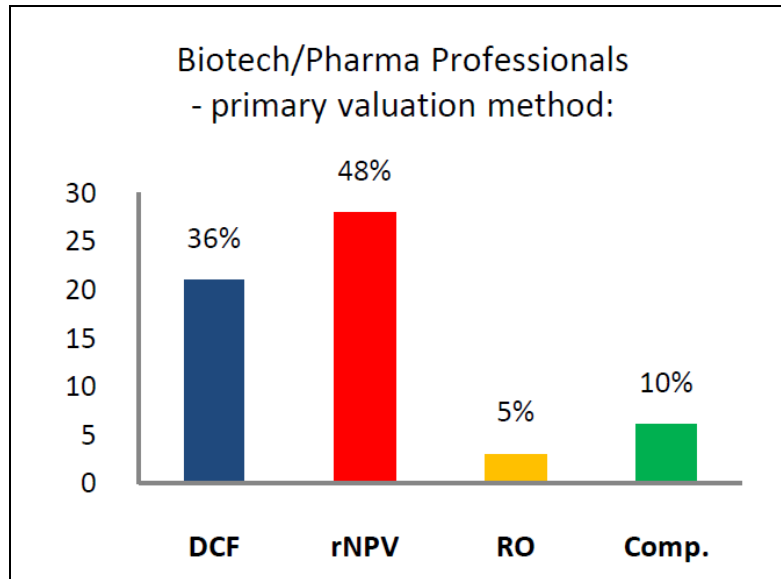
- **Negotiation**

- Understand negotiation processes in Biotech partnering
- Respect „don`ts“ and „dos“
- Avoid major mistakes in Biotech partnering

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# Project Valuation – What Pharma/Biotech or Venture Capital Professionals Use



Source: Biostrat Biotech Consulting ([www.biostrat.dk](http://www.biostrat.dk))

- **„rule of the thumb“**
- **25% rule**
- **Benchmarking**
- **Development costs**
- **Auction**
- **Sales Multiples**
- **Comparables**
- **DCF (Discounted cash flow)**
- **NPV (Net Present Value)**
- **Decision Tree**
- **Real Options**

- „rule of the thumb“ – common but not very professional
- 25% rule – based on out dated presumptions
- **Benchmarking – ok for some applications**
- Development costs – not applicable for governmentally funded research organisation
- Auction – hoped for but rarely if ever happening
- **Sales Multiples – IF there are sales**
- Comparables – good for real estate not good for biotech
- DCF (Discounted cash flow) – leaves out too many risks in our risky field
- **NPV (Net Present Value)**
- Decision Tree – required data in the biotech field can almost never be provided
- Real Options – too complicated and not widely accepted

- **Known at least since the 19th century**

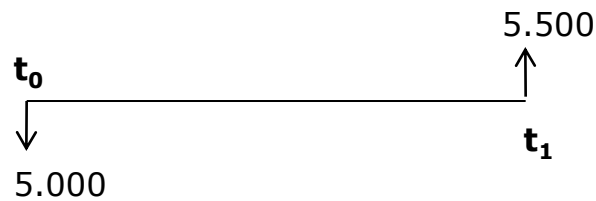
$$rNPV = -I_0 + \sum_{t=1}^T \frac{rCF_t}{(1+r)^t}$$

$I_0$  = Investment into the project at time 0 (=CF<sub>0</sub>)  
 $rCF_t$  = Risk adjusted cash flow at time  $t$   
 $r$  = Discount rate  
 $T$  = Endpoint of the project (if today is  $t = 0$ ,  $T$  = duration of the project)

- **Most common valuation method in Pharma/Biotech**
- **Important tool when negotiating partnering agreements**
- **Requires knowledge of**
  - All costs required
  - All income to be generated
  - All risks involved
  - Inflation rate / Cost of capital
- **Therefore beware: „garbage in, garbage out“**

# Background– Time Value of Money

A loan of 5.000 at 10% (i):



$$\text{Future Value} = 5.000 \cdot (1+0,1) = 5.500$$

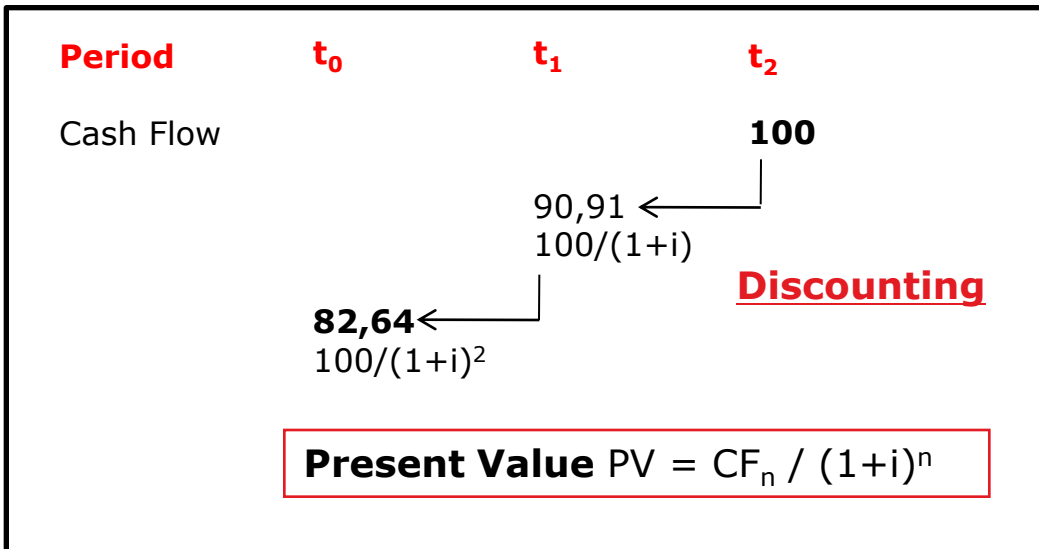
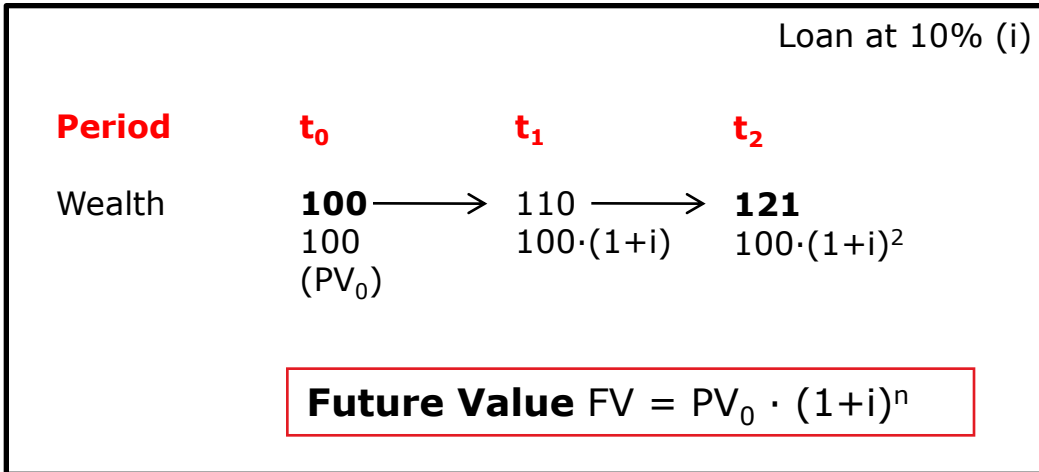
$$\text{FV} = \text{PV} \cdot (1+i)$$

$$\text{Present Value} = 5.500 / (1+0,1) = 5.000$$

$$\text{PV} = \text{FV} / (1+i)$$

**A dollar in your hand today has more value than a dollar tomorrow**

# Background – Present Value (Discounting)



# Background – Discounted Cash Flow (DCF) Analysis

**The value of an asset is the sum of all future cash flows discounted to today**

| Period       | PV             | t <sub>0</sub> | t <sub>1</sub> | t <sub>2</sub> | t <sub>3</sub> |
|--------------|----------------|----------------|----------------|----------------|----------------|
| Cash Flows   |                | +100           | +100           | +100           | +100           |
| Discount. CF | <b>+348,68</b> | +100           | +90,91         | +82,64         | +75,13         |

$$\text{Present Value PV} = CF_0 + \frac{CF_1}{(1+k)} + \frac{CF_2}{(1+k)^2} + \frac{CF_3}{(1+k)^3} + \dots + \frac{CF_n}{(1+k)^n}$$

# Background– Risk-Adjusted Net Present Value



| Year             | 0           | 1            | 2           | 3           | 4           | 5           | 6           |
|------------------|-------------|--------------|-------------|-------------|-------------|-------------|-------------|
| Expenses         | (\$ 50,000) | (\$ 500,000) | (\$ 10,000) | (\$ 20,000) | (\$ 30,000) | (\$ 20,000) | (\$ 10,000) |
| Revenues         |             |              | \$ 100,000  | \$ 200,000  | \$ 300,000  | \$ 200,000  | \$ 100,000  |
| Net CF           | (\$ 50,000) | (\$ 500,000) | \$ 90,000   | \$ 180,000  | \$ 270,000  | \$ 180,000  | \$ 90,000   |
| Probability      | 100%        | 50%          | 50%         | 50%         | 50%         | 50%         | 50%         |
| Risk adjusted CF | (\$ 50,000) | (\$ 250,000) | \$ 45,000   | \$ 90,000   | \$ 135,000  | \$ 90,000   | \$ 45,000   |
| Discount         | 100%        | 87%          | 76%         | 66%         | 57%         | 50%         | 43%         |
| rpCF             | (\$ 50,000) | (\$ 217,391) | \$ 34,026   | \$ 59,176   | \$ 77,187   | \$ 44,746   | \$ 19,455   |
| rNPV             | (\$ 32,801) |              |             |             |             |             |             |



## Clinical Projects are Biotech's Primary Assets

### Uncertainties:

### Time, risk and cost

#### Parameters for biotechnology

| Average risk mitigated<br>(when beginning the phase): | Time to complete:       | Number of clinical-<br>trial subjects: |
|---|-------------------------|--|
| Preclinical: 10%                                      |                         |  |
| Phase 1: 20%  | Phase 1: 0.5–1 year     | Phase 1: 20–80                         |
| Phase 2: 30%  | Phase 2: 1.5 years      | Phase 2: 100–300                       |
| Phase 3: 67%  | Phase 3: 3.5 years      | Phase 3: 1,000–5,000                   |
| FDA approval <sup>4</sup> : 81%                       | FDA approval: 1.5 years |  |

#### Costs:

Phase 1 and 2: Clinical trials (outsourced): \$8,000–\$15,000 per subject

Phase 3: Clinical trials (outsourced): \$4,000–\$7,500 per subject

Animal studies to support phase 1: ~\$500,000

Animal studies to support phase 2: ~\$1 million

Animal studies to support phase 3: ~\$1.5 million

FDA approval: \$0.8–\$1.8 million+ (\$300,000 for the Prescription Drug User Fee Act II fee and the remainder for preparation of the New Drug Application (NDA); NDA-preparation costs are highly variable and depend largely on the amount and the quality of data to be presented)

#### Financials:

Revenue reserved for manufacturing and marketing: 40–60% (choose the high end to justify a reasonable market percentage)

Discount rate (cost of capital for biotech firms<sup>1</sup>; R&D risk considered separately): 20%

# Praxis – Using Example Spreadsheets

| PARAMETERS         |                                |                                  |  |
|--------------------|--------------------------------|----------------------------------|--|
| COMPANY NAME       |                                | Neklim Biotech Co.               |  |
| PROJECT TITLE      |                                | Neklimed                         |  |
| Orphan Drug (y/n)? | N                              | Orphan if <200,000 U.S. patients | Financials                                 |
|                    |                                |                                  | Annual Market                              |
|                    |                                |                                  | Peak Market Penetration                    |
|                    |                                |                                  | Market Growth Rate                         |
| Preclinical        | Duration                       | 1                                | OR   |
|                    | Annual Cost                    | \$2,000,000                      | 8 Scientists at \$250,000 per scientist    |
|                    | Likelihood of Reaching Revenue | 10%                              |  |
|                    |                                |                                  | Patient Population                         |
|                    |                                |                                  | Annual Revenue Per Patient                 |
|                    |                                |                                  | Peak Market Penetration                    |
|                    |                                |                                  | Patient Population Growth Rate             |
| Clinical Phase 1   | Duration                       | 1                                | AND  |
|                    | Number of Subjects             | 60                               | 20-80                                      |
|                    | Cost Per Patient               | \$12,000                         | \$8,000-15,000                             |
|                    | Animal Studies Phase 1         | \$500,000                        |  |
|                    | Annual Overhead (Other Costs)  |                                  | Ramp to Market Peak                        |
|                    | Likelihood of Reaching Revenue | 25%                              | 20% for a chemical pharmaceutical          |
|                    |                                |                                  | Discount Rate                              |
|                    |                                |                                  | In-licensing Royalty Rate                  |
|                    |                                |                                  | Manufacturing and Marketing Offset         |
|                    |                                |                                  | Year Patent Protection and Revenues End    |
|                    |                                |                                  | Annual Ramp Overhead (Other Costs)         |
|                    |                                |                                  | Annual Peak Revenue Overhead (Other Costs) |
| Clinical Phase 2   | Duration                       | 2                                |  |
|                    | Number of Subjects             | 200                              | 100-300                                    |
|                    | Cost Per Patient               | \$12,000                         | \$8,000-15,000                             |
|                    | Animal Studies Phase 2         | \$1,000,000                      |  |
|                    | Annual Overhead (Other Costs)  |                                  |  |
|                    | Likelihood of Reaching Revenue | 35%                              | 30% for a chemical pharmaceutical          |
| Clinical Phase 3   | Duration                       | 3                                |  |
|                    | Number of Subjects             | 2000                             | 1,000-5,000                                |
|                    | Cost Per Patient               | \$6,000                          | \$4,000-7,500                              |
|                    | Animal Studies Phase 3         | \$1,500,000                      |  |
|                    | Annual Overhead (Other Costs)  |                                  |  |
|                    | Likelihood of Reaching Revenue | 72%                              | 67% for a chemical pharmaceutical          |
| Approval           | Duration                       | 2                                | 0.5-1 for fast-track                       |
|                    | FDA Fees (PDUFA II)            | \$309,647                        |  |
|                    | NDA/BLA Preparation Fees       | \$1,000,000                      | \$500,000-1,000,000                        |
|                    | Annual Overhead (Other Costs)  |                                  |  |
|                    | Likelihood of Reaching Revenue | 81%                              |  |

## Pro:

- Need for data research
- Creates transparency
- Easy to use

## Con:

- Only as good as input
- Very sensitive to discount rates, peak sales and risks!

- **rNPV very much dependent on input data; so do your analysis well**
- **rNPV very much dependent on three variables accounting more than 20% variability each:**
  - Discount factor,
  - Sales numbers and
  - Risk factors for the individual development phases
- **So whatever you calculate today, will be wrong in the future!!**



# Predicting the Future: Famous But Wrong Predictions by the Experts

- **"Louis Pasteur's theory of germs is ridiculous fiction".** -- Pierre Pachtet, Professor of Physiology at Toulouse, 1872
- **"Heavier-than-air flying machines are impossible."** -- Lord Kelvin, president, Royal Society, 1895.
- **"I think there is a world market for maybe five computers."** -- Thomas Watson, chairman of IBM, 1943
- **"There is no reason anyone would want a computer in their home."** -- Ken Olson, president, chairman and founder of Digital Equipment Corp., 1977
- **"640K ought to be enough for anybody."** -- Bill Gates, 1981
- **"\$100 million dollars is way too much to pay for Microsoft."** -- IBM, 1982



# Prediction of Drug Sales Potential



| Product            | Manufacturer                 | Use                                   | Estimated Peak Sales (2004) | Sales 2009* |
|--------------------|------------------------------|---------------------------------------|-----------------------------|-------------|
| <b>Avastin</b>     | Genentech                    | Cancer                                | <b>3000</b>                 | <b>5900</b> |
| <b>Exanta</b>      | AstraZeneca                  | Thrombosis                            | <b>1300</b>                 | <b>0</b>    |
| <b>Alvesco</b>     | Altana, Aventis              | Asthma                                | <b>1200</b>                 | <b>85</b>   |
| <b>Arcoxia</b>     | Merck                        | Osteoarthritis                        | <b>2500</b>                 | <b>377</b>  |
| <b>Caduet</b>      | Pfizer                       | Hypertension,<br>hypercholesterolemia | <b>1090</b>                 | <b>590</b>  |
| <b>Cymbalta</b>    | Lilly                        | Depression                            | <b>2200</b>                 | <b>3000</b> |
| <b>Zocor/Zetia</b> | Merck, Schering-Plough       | Cholesterol                           | <b>3000</b>                 | <b>6600</b> |
| <b>Genasense</b>   | Genta                        | Malignant melanoma                    | <b>900</b>                  | <b>0</b>    |
| <b>Lyrica</b>      | Pfizer                       | Neuropathic pain                      | <b>2000</b>                 | <b>2900</b> |
| <b>Spiriva</b>     | Boehringer Ingelheim, Pfizer | Pulmonary disease                     | <b>1340</b>                 | <b>3300</b> |

**M. Gröppel, 4SC (derived from Humphreys, A. (2004) 'Future Blockbusters', MedAdNews, January, 1-12; \*Peak Sales 2009 according to Medtrack**

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# Negotiation: Essentials of a Successful Partnering Process



- **Preparation is of key importance**
  - Understand interests on the table
  - Selling documentation
  - Unique selling point / competitive advantage
- **Define clear process timelines**
  - Internal and external coordination
  - Generation of competition
- **Follow process and timelines and always keep control**
  - Establish “give and take” scenario
  - Generate competition
- **Establish trust**
  - Never oversell
  - Focus on involved persons
  - Proactively present weak spots and offer solutions
- **Generate win-win solutions**
  - For most deals, value generation starts at closing
  - Stay involved in further development



# Negotiation: Managing a Successful Partnering Process

## INITIAL CONTACT WAVE

- App

- 

- 

- Follow

- 

- 

- Dev

- 

- 

- 

- Future planning

- Develop Data room

- Keep data available

- Define clear agreements

- Be present and

## CONFIDENTIAL PHASE

- Ensure

- 

- 

- Close

- 

- 

- Manage

- 

- 

- Establish

- 

- 

## TERM SHEET PHASE

- Model value of alternative bids
  - Understand incoming offers
  - Compare incoming offers
  - Prioritize offers for decision making
- Confirm capabilities of interested parties
  - Receive capability presentations
  - Understand future plans with asset(s)
- Support due diligence
  - Enable data exchange
  - Keep track record for all exchanged information (reduces later reps and warranties in licensing contracts)
- Steer towards appropriate confirmed offers
  - Keep all parties at similar development level
  - Receive offer at the predefined milestone

- **When?**
- **Where?**
- **Which team?**
- **planning**
- **attitude and language (cross cultural topics, how to work under pressure, etc.)**
- **Point by point**
- **Listen**
- **Prepare a draft + sum up negotiations in writing**
- **Options for mutual gain**
- **Know your BATNA (best alternative to a negotiated agreement)**

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- **Biopharmaceutical drug, inhibiting angiogenesis („Bludex“)**
- **Ready to enter phase I**
- **Potential indications: Colon Carcinoma (breast ca. as upside potential)**
  - 10% market reach on US market
  - US\$ 30,000 annual treatment costs
  - Annual incidence Colon Ca. in US: 120.000 (today)
  - IP coverage until 2025
  - Discount factor: 20%
- **Questions to be answered:**
  - What will be the peak sales potential in USA?
  - What is the current rNPV for USA?
  - What is happening when you have to half the market price?

- **For a general overview:**  
[http://web.mit.edu/biostrategy/files/031204\\_DiMasi\\_Slides.ppt](http://web.mit.edu/biostrategy/files/031204_DiMasi_Slides.ppt)
- **For incidence/mortality numbers e.g.** <http://globocan.iarc.fr/>
- **For clinical trials: e.g.** <http://clinicaltrials.gov/ct2/info/understand>
- **For discount factors e.g:**  
[http://www.avance.ch/newsletter/docs/Discount\\_1.pdf](http://www.avance.ch/newsletter/docs/Discount_1.pdf)

**Thank You!**

