

Rohit Chopra

UNITED STATES OF AMERICA Federal Trade Commission WASHINGTON, D.C. 20580

STATEMENT OF COMMISSIONER ROHIT CHOPRA

Regarding Private Equity Roll-ups and the Hart-Scott Rodino Annual Report to Congress Commission File No. P110014 July 8, 2020

Today, the Federal Trade Coccomissed for a hard ghe Department of Jsit-6 (o)-t e3 (t e3 (1T)-6q)-6 (m) fsiiid tgeneral f \$94 million. The FTC and the Department of Justice review gs to determine whether a transaction might violate the

dly provided needed market intelligence to antitrust ger transactions, the FTC must also increase its focus on nonader market trends. In particular, over the last decade, there has ough roll-up transactions not subject to HSR reporting.

gy where a buyer acquires many companies in a particular of roll-up strategies. In today's marketplace, many private buy-and-build" approaches. A buy-and-build strategy typically latform company with subsequent "bolt-on" and "tuck-in" gies, private equity sponsors can quietly increase market power is to a higher valuation when the combined company is

k, 68% of private equity buyouts are add-ons from previous private equity acquisitions are tied to an investment with at

112 acquisitions of other insurance brokerages, before selling to Apex Partners, another private equity fund. Under Apex's control, AssuredPartners subsequently executed another 124 acquisitions of insurance brokerages, before selling the company back to GTCR in 2019.²

While roll-ups are occurring across sectors of the economy, I am especially concerned about the unreported roll-ups in the health care sector. M&A activity in health care is among the highest of any sector in the U.S. economy, and the median deal size of leveraged buyouts by private equity firms is estimated to be between \$60-\$70 million – below HSR reporting thresholds.³

Private equity roll-ups occupy a growing proportion of this activity. For example, private equity firms are actively acquiring physician practices, with a particular focus on specialties like anesthesiology and emergency medicine.⁴