

Johnson & Johnson 2026 Case Competition

University of Florida



Meet the Team



Sebastian Bernal-Orta

Freshman, Mathematics &
Statistics



Trang Pham

Freshman, Finance &
Data Science



Jingrui Wang

Freshman, Accounting &
Philosophy



Bryce Gillingham

Freshman, Management



Sean Uctum

Freshman, Finance

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Market Landscape

The Shift to Barbed Sutures

Structural transition from non-barbed to barbed, driven by robotic surgery. Enables knotless closure, shorter operating times, reduced infection, robotic compatibility.

Key Milestones



Competitive Landscape

Company	Product	Status
Crius	Poseidon	FDA 2010; \$11.9B rev
Athena	Kronos	FDA 2005; EU 2007
Sutura	—	Active competitor
A&A	Entering	Non-barbed leader

Key Takeaways

A&A dominates non-barbed, transferable connections and expertise to barbed market

Symmetrical sutures are table-stakes. Spiral sutures are the premium frontier

No notable competitor has entered the spiral category

OUR STRATEGY:

**ACQUIRE PROVEN IP,
PIONEER NEW TECHNOLOGY,
BUILD MANUFACTURING EXCELLENCE,
DOMINATE THE MARKET.**

Our Strategy

Decision	Recommendation	Rationale
R&D	Buy Symmetrical IP + Build Spiral	Immediate parity + first-mover premium
Pricing	Medium	80% hospital access; Credo-aligned
Marketing	Silver Budget, Gold Allocation	70/30 split: standard + surgeon training
Supply Chain	Plant Expansion (Cornelia)	Existing FDA standing; ~3 yr timeline; commitment to quality
Human Capital	Full-Time Employees	Quality + Credo; learning curve offsets cost

Why this strategy excels

Early Revenue + Differentiation

01

- Symmetrical IP delivers year 1 revenue
- Positions A&A as sole premium competitor

Market Access + Credo Alignment

02

- Medium pricing reaches 80% of hospitals
- Honors "reasonable prices" mandate

Execution Feasibility + Robustness

03

- Plant expansion leverages existing FDA standing
- No single lever failure breaks the strategy

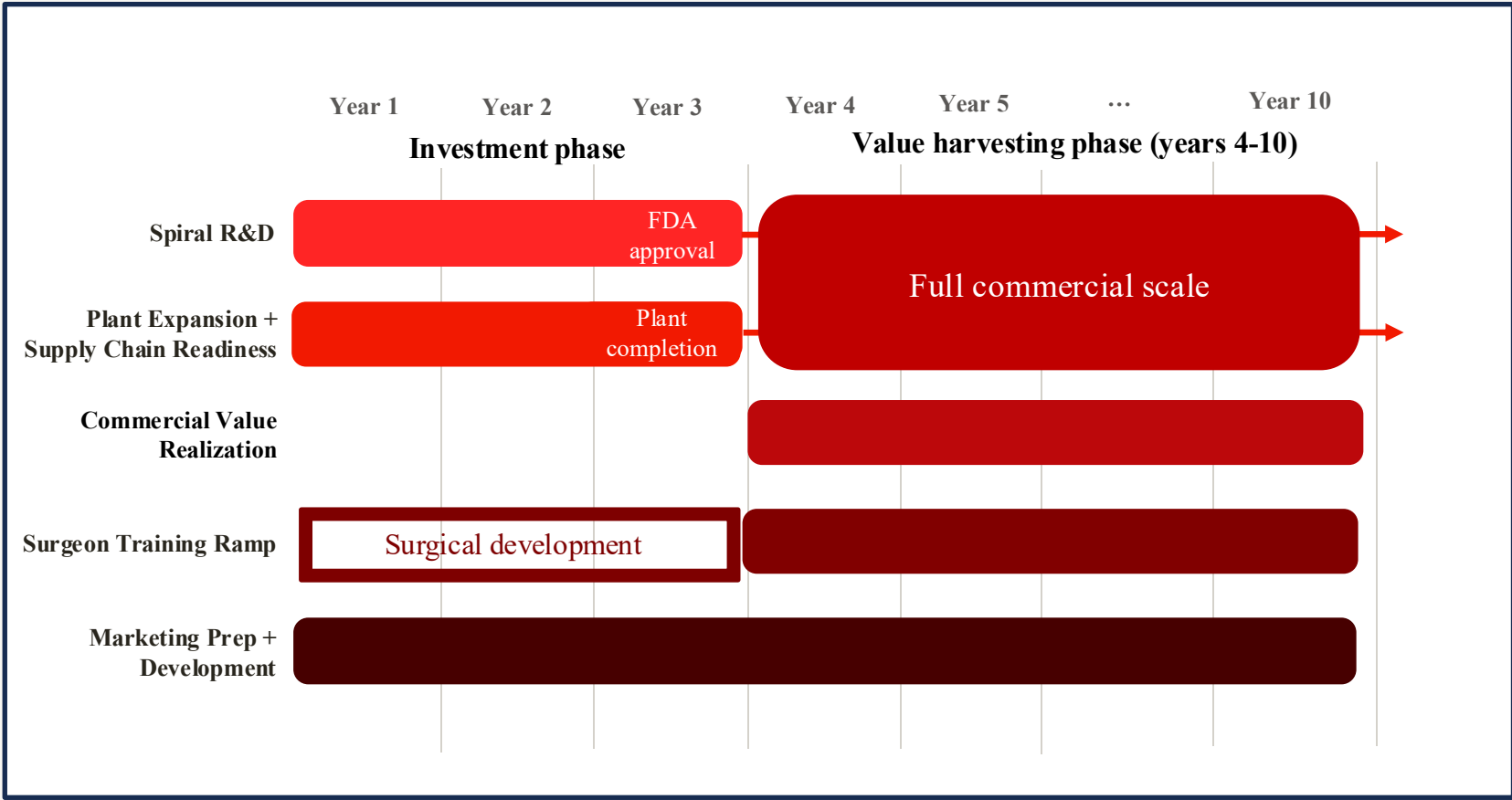
Strategic Coherence

04

- All five decisions reinforce each other
- Built-in protections against key execution risks

NPV Range: **\$16B – \$22B** | Baseline: **\$18.5B**

Execution Timeline



Dual Track: Buy what is Proven - Symmetrical, Develop what is New - Spiral

Comparison

Symmetrical - IP
Spiral - Internal

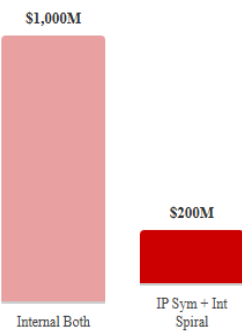
VS.

Develop both Internally

Capital Efficiency: CapEx and R&D Cost Comparison

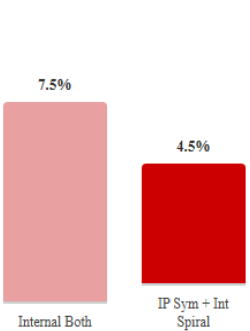
IP Sym + Int Spiral requires 80% less upfront capital and 40% lower R&D spend [1]

Upfront CapEx (\$M)



IP Sym + Int Spiral saves \$800M in upfront capital — a 5x difference

Annual R&D as % of Revenue



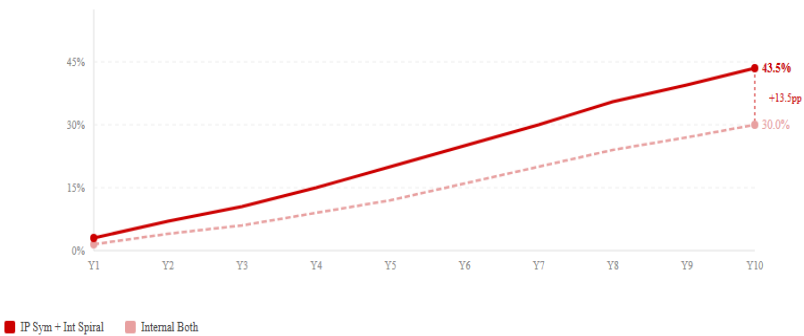
~\$195M/year in R&D savings on \$6.5B baseline

Credo alignment – Must Experiment

“We must experiment with new ideas. Research must be carried on, innovative programs developed,...”
=> **Have to Internally develop at least one product**

Cumulative Revenue Growth Uplift: Internal Both vs. IP Sym + Int Spiral

IP Sym + Int Spiral front-loads growth, compounding NPV advantage from Year 1



IP Sym + Int Spiral generates +3.0% from Year 1 vs. Internal Both's +1.5%. The front-loading effect means every dollar of extra growth is worth more in NPV terms due to discounting.

Higher growth + Earlier growth + Lower cost

R&D: Symmetrical IP Purchase + Spiral Internal Development

EXISTING

Symmetrical – Buy IP

NEW

Spiral – Build Internally

Instant competition with **existing** products
=> **Avoid Market delay**

Speed Game

Premium
segment capture

First-mover in untapped market

- Recurring R&D costs **erode** value yearly
- CapEx is a **one-time purchase**
=> **Early FCF**

Low R&D

Full Ownership

Long-term margin expansion + defensibility

High Long-term
Growth

+2.5% annual growth
Highest option

Self – Mitigation Strategy: Immediate Competition + Premium Differentiation

Pricing Strategy

Medium

1. Early Adoption

Stickiness

Surgeon and hospital standardizations

Long-term market share

Overpricing reduces trial and slows conversion

2. Support Two products Simultaneously

Symmetrical (IP)

Match existing benchmarks

Spiral (Internal)

Slow adoption curve of the new product

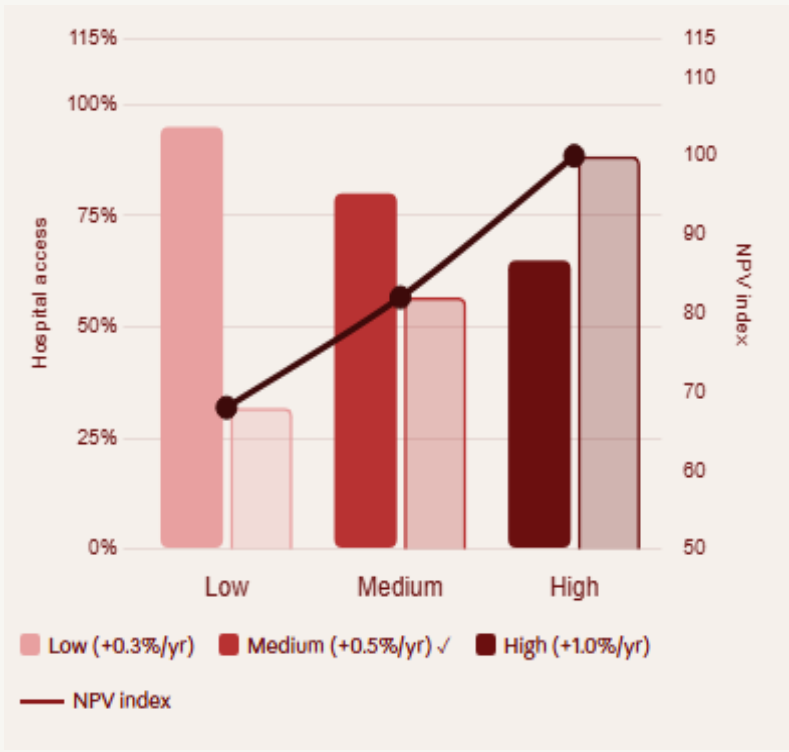
3. Price Positioning

Market Pricing

- Competitors have already set price expectations
- Medium pricing removes price as barrier

Credo

“Maintain reasonable price”
=> Align to maintain Trust

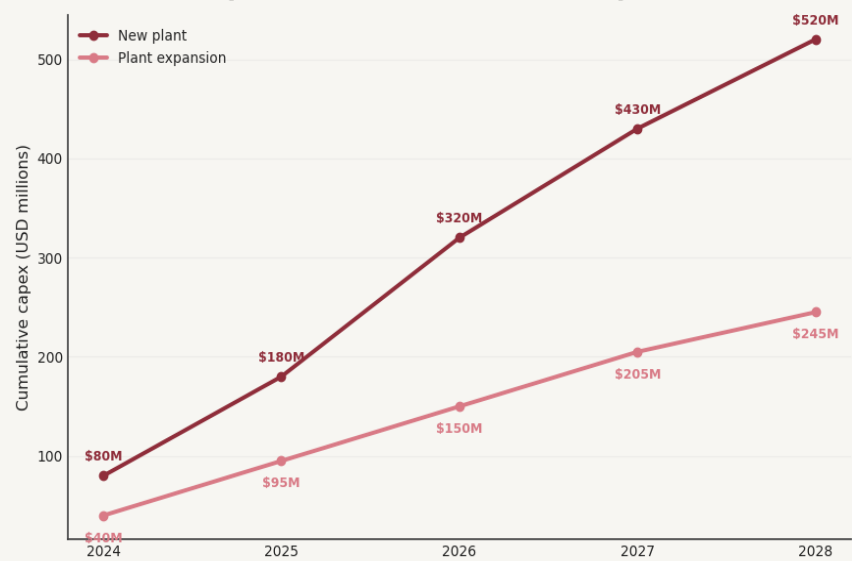


The model did not take into the 35% lower target market

Maximize adoption + preserve market access + correct model bias

Plant Expansion

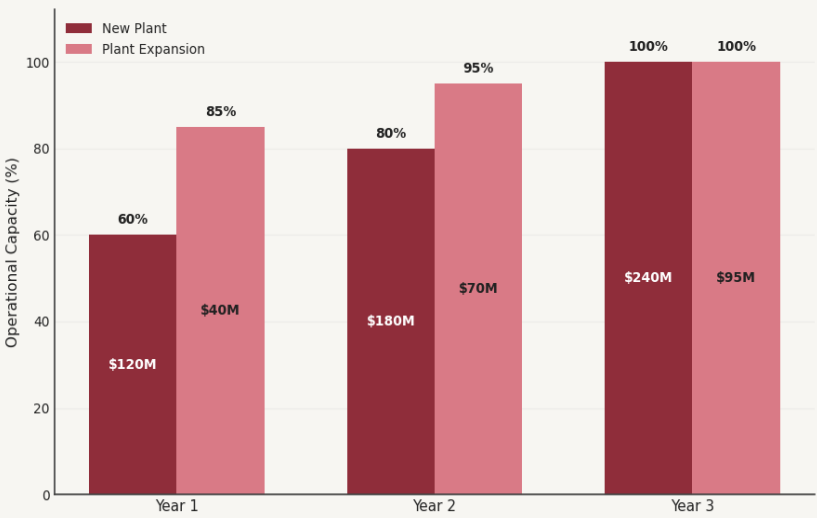
Capex Profile: New Plant vs Expansion



~50% Lower CapEx

Higher NPV – lower upfront investment

Operational Capacity Ramp



Faster Ramp

Immediate demand capture + supports adoption

Plant expansion is both **Cheaper** + **Faster** = maximizing FCF + immediate scale

Pricing: Benefits of Gold & Cost of Silver

70%

Standard: Print, Digital, Conference Presence

30%

High-Impact: Surgeon Training, KOL Partnerships

Strategic Value-Add: Financial analysis validates Silver's cost discipline. Strategic analysis transforms what Silver means in practice, redirecting budget toward the single most impactful adoption activity.

Silver ROI

0.33

Gold ROI

0.28

Gold Year 1 Net Impact

-\$49M in Cost

\$60M more in costs for \$10M more in revenue

Higher and Earlier growth + Lower cost

Full-Time: Quality and Values Over Cost

Cost Comparison

+\$240M/yr

Full-time cost premium over contractors

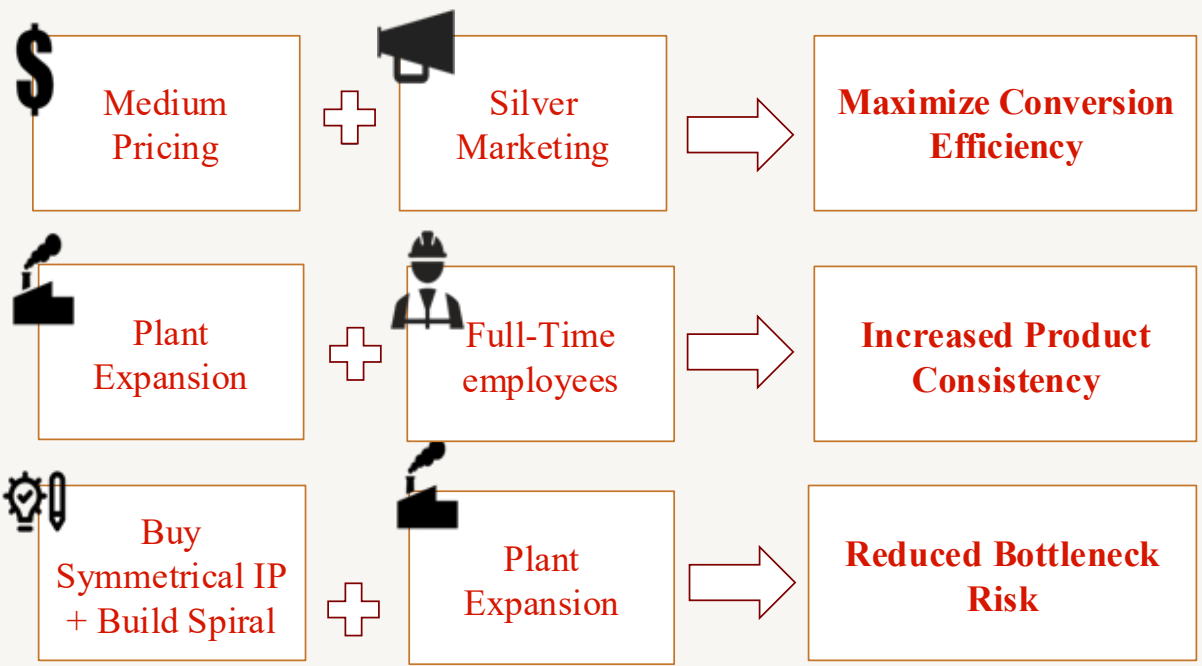
- Learning curve: COGS 10% --> **8%**
- GP efficiency offsets ~\$80M/yr
- Net premium narrows to ~\$160M by Year 10

Quality & Values

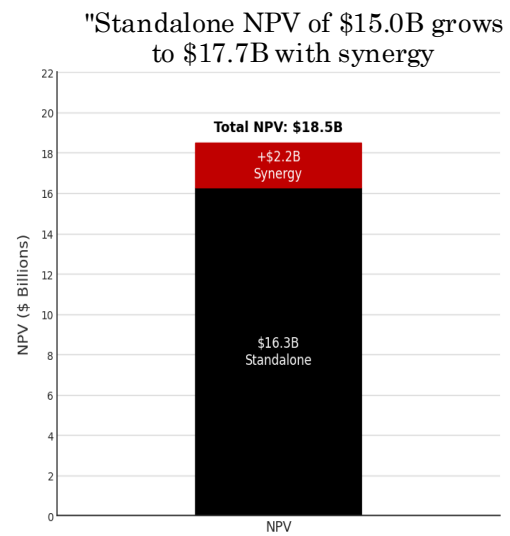
- Microscopic tolerances cascade to patient outcomes
- Contractor rotation = quality variation + knowledge loss
- Credo: "Security, fulfillment, and purpose",
- --> harder to fulfill for contractors
- Consistent quality --> surgeon trust --> long-term product loyalty + customer relationships

Both analyses converge on full-time. This is not an expense to minimize; **it is a competitive edge.**

Maximizing Synergies



Synergies Create a Meaningful but Realistic NPV Uplift



Source: UCC RL1 Financial Model — NPV at 7% discount rate, 10-year horizon

Key takeaway: Internal synergies between levers increase value beyond book value

Stress-Testing Key Assumptions

NPV Impact (–\$B)

Spiral dev: 5 yrs vs. 3

–\$1.5B to –\$2.5B

Hospital access: 80% → 65%

–\$1B to –\$2B

Plant expansion costs 2×

–\$0.8B to –\$1.2B

\$0 \$0.5B \$1B \$1.5B \$2B \$2.5B \$3B

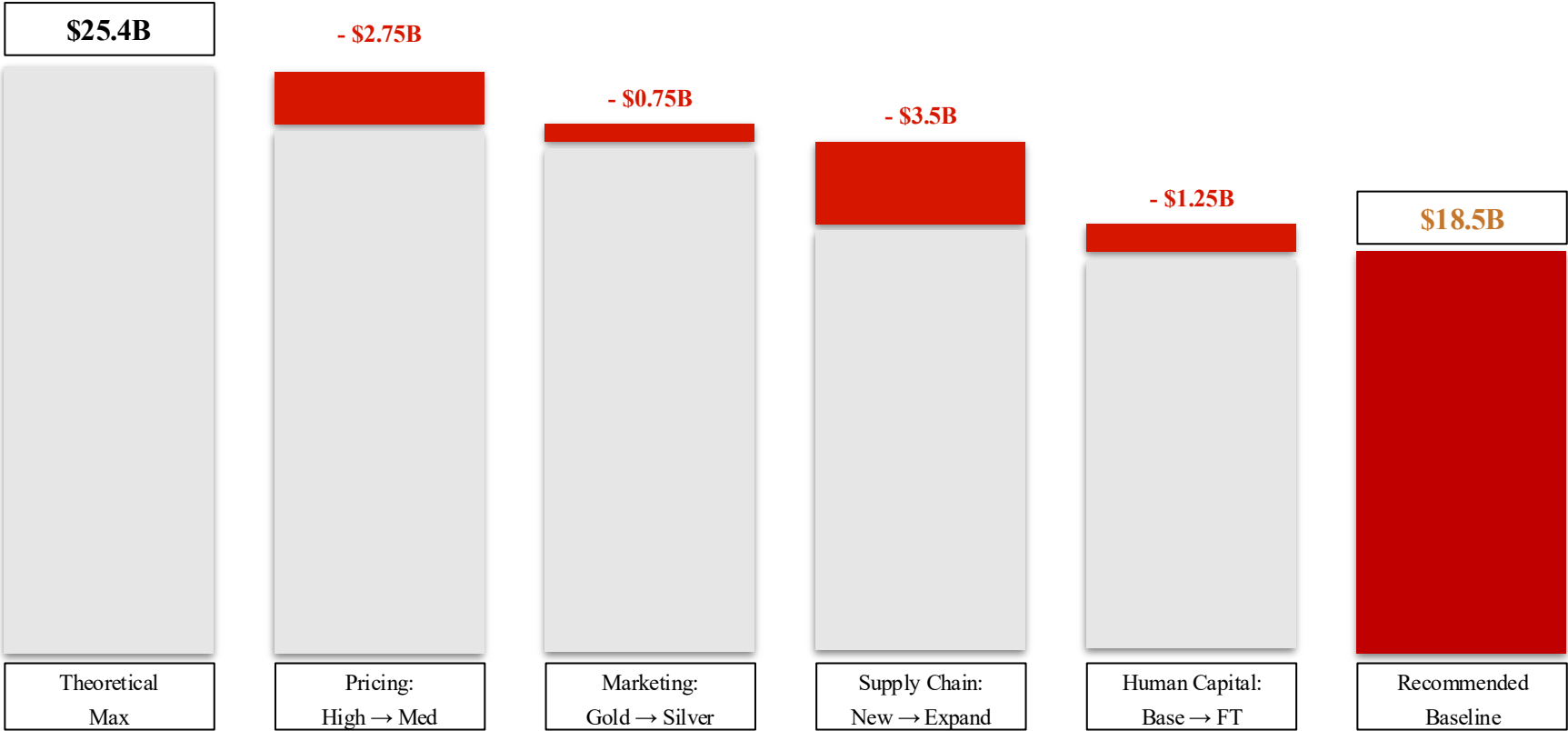
Strategy remains strongly positive NPV under all scenarios. No single assumption failure breaks the thesis.

Risk and Mitigant Matrix

Risk	L	S	Consequence	Mitigant
Spiral R&D faces delays	Med	Mod	Competitor window narrows	Purchasing symmetrical suture IP for early revenue
Competitor develops spiral	Med	Mod	Margin compression	Utilize strong hospital relationships and branding
Competitors undercut price	Med	Mod	Potential price war with Crius	Already at market average; differentiation/branding
Slowing of surgeon adoption	Med	Low	Lower than expected market opportunity	KOL networks + clinical data
Plant expansion delays	Low	Mod	6–12-month delays on expansion opening	Known site; existing infrastructure
Labor costs escalate	Med	Low	Wage inflation causing decreased margins	Automation of tasks and reorganizing labor
FDA spiral approval delay	Med	Mod	Time for competition to gain market share	Pre-Submission process; dual-track
Market shift decelerates	Low	High	Decreased market opportunity	Maintaining non-barbed suture product offerings

L = Likelihood | S = Severity

NPV Bridge: Theoretical to Recommended



NPV Range and Baseline

\$16.3B

Financial Floor

\$18.5B

Baseline

\$22B

Strategic Ceiling

73% of stated model maximum | ~85–90% of corrected achievable maximum

How Does This Hold Under Competitive Response?

01

Aggressive Price Cuts

THREAT

Competitor undercuts on price

DEFENSE

- Already at market average, competitors sacrifice margins.
- Quality and utility differentiate.

02

Fast-Follower R&D on Spiral

THREAT

Competitor copies spiral design

DEFENSE

- Patent filings + speed to market + surgeon training create switching costs.
- Installed base provides durable moat.

03

Marketing Blitz

THREAT

Competitor outspends on marketing

DEFENSE

- Training-focused approach builds stronger relationships.
- Guided workshops convert surgeons into advocates.

In conclusion, our thesis is superior because of:

01

Early Revenue + Differentiation

02

Strategic Cohesion

03

Execution Feasibility + Robustness

04

Market Access + Credo Alignment