

# Healthcare Investment Trends: A Post-COVID Capital Market Analysis Investigating How Public Health Crises Reshape Healthcare Venture Capital and M&A Activity

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## Annotation

The COVID-19 pandemic fundamentally altered the trends of healthcare investment around the world, intensifying financial inflows in the field of biotechnology, digital health, and life sciences and emphasizing the need to strengthen the role of the sector in the resilience of population health. This research article is a study of post-COVID-investment trends in the healthcare industry, specifically venture capital (VC) and mergers and acquisition (M&A) in the United States, with similar insights drawn across high-growth sectors of artificial intelligence (AI), fintech, and renewable energy. This study has a quantitative and comparative design based on the use of the Largest U.S. Venture Funding Deals of 2023 and 2024 Startup Investments Dataset to examine the size of deals, industry funding distribution, investor concentration, and how the investment patterns vary over time. The results indicate that healthcare, although no longer as crisis-centered as during the years of the pandemic, retains its stable role in world capital markets, taking about a quarter of venture activities with stable deal sizes pointing at the stability rather than the instability of such fields as AI and fintech. The interdependence between venture funding and M&A is presented in figures, based on the fact that startups are often designed to be acquired by bigger companies, in search of innovation pipelines and scalability. Despite the fact that the total amount of financing that healthcare currently receives is lower, compared to other dynamically growing sectors, the major players, including Monogram Health and Aledade, also received substantial investments, which proves the cynical promise of investors. This study also observed in monthly analysis that there was quite a volatility in funding which was based on macroeconomic conditions but the high rebounds indicated that healthcare had great potential in the long run. Ethical issues also surfaced, notably, the concentration of capital in the hands of a small group of dominant actors and companies, that casts the need to question the equity, inclusivity, and access to innovation, as well as provides a source of societal resilience and well-being.

**Keywords:** Healthcare Investment, Venture Capital, Mergers and Acquisitions, Post-COVID Capital Markets, Biotech Innovation and Digital Health.



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## 1. Introduction

### A. *Background of Healthcare Investment*

Healthcare investment has long been described as resilient because it is essential, but until the recent past was far behind technology, fintech, and energy as a recipient of large-scale venture capital investment. Until the COVID-19 pandemic, the sector has been growing not at an explosive pace, but with large amounts of capital invested in biotechnology breakthroughs, growth of medical devices, and early uses of digital health. Healthcare was commonly considered by investors as a defensive industry, one that had consistent long-term returns as opposed to explosive short-term returns [1]. Such a perception, even though providing some stability, implied that venture capitalists often focused on industries whose innovation cycles and scaling rates appeared to be more intense. Nonetheless, the pandemic changed the priorities around the world drastically, transforming the concept of healthcare into the subject of financial and strategic attention. The abrupt dependence of the world on vaccines, diagnostics, hospital capacities and telemedicine highlighted the importance of the industry to keep populations safe and the economy afloat. To speed up the solutions, governments, private equity and institutional investors made massive capital investments in healthcare like never before [2]. This change signified the increasing interdependence between the needs of public health and the behavior of the capital market, making the investment into healthcare a social need and a promising opportunity. In addition, digital care delivery technologies, biotechnology innovations, and the pandemic triggered a rapid advance in data-based healthcare technologies, which drew the interest of both traditional healthcare investors and technology funds. By 2021, healthcare was already among the leading destinations of world capital and proved its turn into a primary driver of economic and technological development.

### B. *COVID-19 and the effects it has on capital flows*

The COVID-19 pandemic changed the face of capital flows in the world especially in the medical field. The need to create vaccines, diagnostics, and therapeutic solutions put the entire investment climate in modern history in a situation of urgency [3]. The VC activity increased tremendously as companies tried to find opportunities to support businesses that had the potential of providing breakthrough treatment or technology that could help alleviate the crisis. Biotechnology startups like Moderna and BioNTech have raised record funding rounds and marketing agreements that have shortened the vaccine development timelines. Simultaneously, digitally based health enterprises that provide telemedicine applications, telemonitoring devices, etc. were expanding exponentially because investors have realized the need to use virtual care models over a long-term horizon. In addition to venture funding, mergers and acquisitions (M&A) increased in number and magnitude [4]. Through acquisitions of smaller biotech start-ups to protect intellectual property and commercialise innovative therapies into their pipeline, and investments to grow its presence in healthcare services, life sciences, and health technology by private equity firms. It was not just a reaction to need-of-the-moment health requirements but an acknowledgement of the possibility of long-term profitability in areas that were now being given special attention by the global demand. The crisis demonstrated how susceptible the global systems were to health shocks and the core role of healthcare innovation in economic resilience. Because of that, healthcare turned into a moral and economic necessity of investors having established its role in the center of capital allocation plans at the time of the pandemic.

### ***C. Changes in Post-COVID Investment Priority***

After the highs of the pandemic, healthcare investment trends started to settle, and the industry remains in the position of attracting a lot of capital in no longer having as much dominance as it did in 2020 and 2021. In 2023, artificial intelligence (AI), fintech and renewable energy became the center of attention in terms of investment. The emergence of AI-based platforms and disruptive digital technologies, especially, indicated a shift in the direction of mega-deals to the areas that were seen to have the potential to transform whole industries [5]. The most recent healthcare deals in the same timebracket, including OpenAI's \$10 billion funding round, were small in comparison to the growing investor interest. However, healthcare is structurally robust and supported by demographic forces, including the aging populations, growing chronic disease rates, and the focus on health preparedness on the global scale. In the medical field, attention has shifted to convergence with technology e.g. AI-guided drug discovery, personalized medicine, and advanced biotech-based therapies. Such overlaps make sure that healthcare still occupies a substantial portion of capital, even when it has to compete with other sectors that require innovation [6]. Therefore, in the post-COVID economy, healthcare does not appear as the single dominant object of investment, but a large-scale system of innovations, the affiliation and convergence across the sphere of activities underlie its financial solution.

### ***D. The M&A and Role of Venture Capital in Healthcare***

Mergers and acquisitions and venture capital also continue to be the two engines of healthcare innovation and growth in the post-COVID era. Early-stage biotechnology and health technology companies depend greatly on venture capital funding in order to undertake massive research and development initiatives which would not otherwise have access to these resources. The risk associated with these investments is often high, but also has a potential of a breakthrough, which can be seen in new therapies, vaccines, or medical platforms [7]. Conversely, M&A activity is a scaling mechanism of innovation that is critical. More often, larger pharmaceutical and healthcare companies purchase startups that have a promising research pipeline and integrate them into a mature business model and speed up commercialization. Such a crossover between venture investment and acquisitions is indicative of investor confidence more generally: when venture capital flows are high, it suggests confidence in the ability to pursue disruptive innovation; when M&A is strong, it means that big firms invest in new technologies long-term [8]. The two mechanisms were instrumental during and after COVID-19. Venture capital enabled the fast growth of digital health platforms and biotech R&D, and M&A enabled existing players to consolidate the benefits and establish resilience in the future. These financial platforms combined make sure that healthcare is an active and responsive industry in international markets.

### ***E. Research Problem***

Despite its resilience and growth in the past, there is constant doubt regarding the capability of healthcare to maintain high levels of investment without the presence of urgent demands due to a global pandemic [9]. The influx of capital inflows specifically during the COVID-19 was unusual, and the increased diversification of investment focus poses questions on whether healthcare will continue to be the focus of investing capital at the same level of activity it experienced during the pandemic or whether other economic sectors with rising competitiveness, including AI and renewable energy, will be more attractive to such investments. In this paper, we explore how the transformation of healthcare venture capital and M&A activity to reflect the impact of public health crises evaluates both the short-term burst and the long-term structuring of the post-COVID economy.

### ***F. Research Objectives***

This study will analyze the trends in health care investment in the post-COVID period by answering the six research objectives:

- The funding trend of healthcare compared pre-COVID, COVID, and post-COVID.
- Determine the status of healthcare in comparison to other booming industries. Discuss investment in healthcare.
- Compare the size and valuations of deals in healthcare subsectors.
- Explore how M&A influences the innovation of healthcare.
- Find out what the long-term consequences will be on healthcare financing models.

### **G. Research Questions**

The research questions that guide this study include the following:

1. What role has the emergence of the public health crisis had in transforming healthcare venture capital and merger and acquisition activity?
2. To what extent does healthcare investment outperform the other high-growth sectors post-COVID?
3. How do post-pandemic healthcare financing and valuation trends appear?
4. What are the long term healthcare financing implications of these trends?

### **H. Significance of the Study**

This study is important as it makes a contribution to the role of healthcare shifting in terms of financial systems of the state, especially after the COVID-19 pandemic. The paper gives a quantitative and qualitative understanding of capital allocation trends by considering the Largest US Venture Funding Deals of 2023 dataset and supplementing it with industry reports and academic literature [10]. The work adds to the existing literature by placing the healthcare investment in the context of the overall developments of the capital markets where systemic crises play an important role. In practical terms, the study provides practical suggestions to various stakeholders. The advantage of the investors is to learn how effective healthcare is compared to other innovation-driven industries and where the possibilities of sustainable growth can be observed. The policymakers can learn some knowledge applicable to the development of incentives and structures that can empower the healthcare financing and prepare it to combat future health emergencies [12]. To healthcare leaders and entrepreneurs, the findings shed light on the influence of venture capital and M&A on the future direction of emerging technologies which is guiding strategic decision-making in an increasingly competitive financial environment. Finally, the research highlights the long-term relevance of healthcare in capital markets despite its rivalry with such technologies as AI and fintech, and its role as an enabler of resilience in uncertain periods.

## **II. Literature Review**

### **A. The Trends in Healthcare Investment before COVID**

Until the COVID-19 pandemic, healthcare investment revealed a steady yet moderate growth implying slow continuous growth in funding of biotechnology, pharmaceuticals and development of medical devices. Venture capital firms saw the long term potential of the sector but tended to make their highest investment in areas of high growth such as fintech and enterprise technology [13]. Although it was perceived to be resilient, healthcare was traditionally viewed as a defensive market that receives increased investment during economic recessions because it is a stable and necessary market. Even with this conservative image, certain subsectors, like digital health, gene therapy and medical robotics, started to experience an acceleration, due to changing health priorities around the globe. The inflows of capital also have been affected especially due to the increased demand of personalized medicine and increased cases of chronic diseases like diabetes

and cardiovascular diseases. Acquisitions and mergers were also significant and bigger pharmaceutical firms were purchasing early-stage biotechnology firms to assure innovation pipelines and minimize risks posed by in-house research and development [14]. Such investment activities were mostly conventional and there were no radical peaks or transformations. The pre-pandemic landscape can therefore be characterized as being progressive but conservative with innovation being encouraged but not at the magnitude experienced in the technology markets. This pre-pandemic background is key to interpreting the radical changes that took place in the COVID-19 since it exemplifies a ground level of investment trends which was abruptly propelled into action. Practically, the pre-2020 healthcare investment established the conditions of an unprecedented restructuring of capital flows as soon as the global crisis began to emerge and healthcare became a core priority of financial markets as never before.

### ***B. Venture Capital Explosion fuelled by pandemic***

COVID-19 served as an unprecedented stimulus to healthcare venture capital, transforming funding settings around the world in a few months. The unprecedented inflows of capital redirected into healthcare innovation by venture capitalists responding to the urgency of the need in vaccinations, therapeutics, diagnostics and digital health technologies were rapid. The biggest rounds ever of financing were granted to biotechnology companies as investors tried to finance and back companies which were leading in terms of vaccine development and advanced therapeutic research. Likewise, digital health solutions saw investment levels grow exponentially as a result of the increased uptake of telemedicine and remote patient monitoring, which proved critical in supporting continuity of care under lockdown [15]. Contrary to the pre-pandemic investment cycles, the surge was not gradual but rather very focused, leading to a funding boom exceeding the other sectors in volume and frequency of deals. Mergers and acquisitions also accelerated in the process as larger pharmaceutical firms bought start-ups with potential intellectual property in order to enhance their competitive advantage in the medical breakthrough chase. The financial climate was characterized by an urgency and investors showed an extraordinary tolerance to risk in order to seek high returns and social impact. This surge has highlighted the strategic role of healthcare, but it has also brought with it issues of inflated valuations, unequal allocation of funds amongst the subsectors, and the issue of long-term sustainability following the end of the immediate crisis [16]. The pandemic-related spike made healthcare the focal point of venture capital in the world, and it declared a structural change in how investors viewed the investment as relevant. This period of increased financing is a characteristic turning point that introduces a new standard of the magnitude and pace of capital inflow to healthcare innovation.

### ***C. Merger and Acquisition Evolution in the Healthcare Industry***

Mergers and acquisitions (M&A) in the healthcare sector found a new path during and after the pandemic. Historically, M&A in healthcare has been predictable, with well-established pharmaceutical companies buying smaller biotechnology companies as a way of strengthening product pipelines and mitigating risk of research and development [17]. This trend was increased by COVID-19, which posed an urgency among larger companies to gain access to promising technologies, intellectual property, and market share in the most essential sectors, like the production of vaccines and diagnostic instruments. Deal volumes and values have thus soared and this has been a time of consolidation in the field of biotech, digital health and pharmaceutical companies. Smaller startups also gained momentum because acquisitions gave them access to financial resources and infrastructure that would be required to grow innovations on a global basis [18]. The M&A activity has remained an important factor in the healthcare investment environment post-pandemic but in a more selective way. Instead of expanding on pandemic-related resources alone, companies have shifted to precision medicine, gene editing, digital therapeutics, and healthcare tools powered by artificial intelligence. This development is more



representative of a bigger trend whereby M&A is becoming more popular not only as a growth tool but also as a risk management tool in volatile markets [19]. The issue of consolidation has also brought up the competition within the market and the possibility of less innovation in the case of large corporations dominating within the niche subsectors. Nevertheless, it has also led to the possibility of combining fragmented innovations in large scale healthcare solutions. Finally, the pandemic transformed M&A into a key survival and growth tool, and long-term consequences of this shift include the way healthcare firms plan financial relationships and the way investors view acquisition-driven value generation within the industry.

#### ***D. Diversification of Capital Markets after COVID***

The priorities of capital markets started to diversify in the post-pandemic years, which transformed the previously strongly focused stream of funds into the healthcare sector [20]. Although healthcare is still one of the major investment sectors, it no longer has the monopoly of the venture capital interest as before the peak of the COVID-19. In 2023, emerging technologies including artificial intelligence, fintech, clean energy, and climate-oriented technologies started to make up large-scale funding rounds, indicative of larger-scale economic and societal shifts. This diversification indicates that investors are rebalancing the portfolios tending towards resiliency over growth and they are exploring opportunities outside of the healthcare field whilst being conscious of its long-term relevance [21]. In the healthcare sector, trends toward investment in sustainable innovations have moved to include AI-based drug discovery, individualized medicine, novel biotechnology platforms, and digital solutions that combine information analytics with patient management. Such sectors are still getting much funding but now competition to demand funds is fierce as other industries prove to be disruptive [22]. The rebalancing points to the shift between crisis-induced urgency and strategic prioritization, in which healthcare has to demonstrate its worthiness in an expanded context of global issues, including energy security, technological development, and environmental sustainability [23]. This diversification does not reflect the degradation of the role of healthcare but instead the inclusion of healthcare to a wider range of revolutionary sectors [24]. The future of healthcare in the post-COVID capital market is thus defined by both robustness and competition but must be innovative because otherwise the firm and investors can no longer be relevant. This trend highlights the dynamic nature of sector-specific resiliency and the changing priorities of capital markets, suggesting that in the future, healthcare will continue being essential but cease to be single-handedly dominant in a world of international capital movements.

#### ***E. Investment Drivers Digital Health Biotech***

Digital health and biotechnology are turning out to be essential drivers of healthcare investment, whether in the pandemic or post-pandemic [25]. The attraction of huge volumes of capital to biotech companies was because of their vaccine development, novel drug discovery and gene-based therapies. Biotechnology has remained popular in terms of investment, particularly in the post-COVID environment due to its prospect of transforming the treatment and prevention of diseases. Simultaneously, telemedicine, wearable's and AI-based diagnostics digital health technology, among others, grew faster in adoption as they altered the nature of healthcare delivery and consumption [26]. These innovations lessened the reliance on the traditional clinical infrastructure and presented opportunities of scaled healthcare replies. Digital health represents a high-growth subsector that investors increasingly see as having the capacity to produce huge datasets, to optimize patient outcomes, and to seamlessly integrate into current healthcare systems [27]. The trend is also observed in M&A activity, where bigger healthcare and technology firms buy up startups to improve their digital footprint. This biotech-meets-digital-health appears to keep the investors interested, but also is the future cornerstone of healthcare transformation. These two subsectors also highlight the reason why healthcare has always been an attractive target in

terms of capital, despite the changing priorities of the rest of the global economy in terms of investment.

#### ***F. Comparison to other Sectors with High-Growth***

The role of healthcare in the investment arena should be perceived in the context of other high growth sectors which are competing to attract venture capital and M&A. Post-COVID Artificial intelligence, fintech, and renewable energy have gained more and more investor attention, frequently attracting larger financing rounds and higher valuations [28]. As opposed to healthcare, where long regulatory approvals are necessary with clinical trials at risk of failure, other industries such as AI and fintech are usually scalable and can pay off more quickly. The cross-industry potential of AI applications in data analytics and automation also draw capital due to their potential to be used across industries, and renewable energy is aided by state incentives and the increasing focus of society on sustainability [29]. Healthcare is peculiar with its resistance to economic crises and its crucial role in society. Healthcare still has a special mix of social need and economic prospect despite the diversification of investors. When comparing healthcare to these industries, it is evident that it had its strong points, e.g. resilience, scalability of biotech and digital health; but also it had its weaknesses, e.g. regulatory barriers and capital intensity [25]. Such a comparative perspective is vital to the explanation of why healthcare is a powerful yet competitive participant in the venture capital and M&A strategy in the post-pandemic global market.

#### ***G. Future Trends and Future Directions***

In perspective, investment in healthcare is set to transform in line with the new trends, as well as the long-term structural shifts in the global market. Drug discovery, precision diagnostics, genomics, and digital therapeutics are just a few of the most appealing areas that venture capital is gravitating towards to which artificial intelligence can be applied. Integrating big data and predictive analytics into patient care has the potential to customize care, save money and transform outcomes, increasing the attractiveness of healthcare to investors seeking sustainable innovation. Also, demographic changes like aging and increasing prevalence of chronic diseases are guarantees to the fact that healthcare innovation will not be obsolete in spite of the competing industries. Venture capital is now more and more focusing on startups with both scientific breakthroughs and scalable business models and M&A is still offering avenues to commercialize disruptive technologies at a very high rate [31]. The other direction becoming apparent is the resiliency and preparedness emphasis, as policymakers and investors are becoming aware of the potential of another public health crisis in the future. This has created an interest in areas like vaccine platforms, antimicrobial resistance solutions and supply chain innovations of medical products. The industry has issues, and its problems are regulatory burdens, substantial expenses of clinical trials, and capital competition with other rapidly expanding industries such as renewable energy and AI. Whether healthcare firms can adjust and adopt the changes in technology will determine the continuity [32]. Prospects are therefore in the hybrid investment environment whereby healthcare will continue being a necessity but it must keep on innovating in order to maintain its position. This development highlights the long-term importance of the sector as it continues to be one of the pillars of investment strategies in the global market despite the growth and diversification of market priorities.

#### ***H. Empirical Study***

Murray (2024) in *The Problem of Private Health Insurance: Insights from Middle-Income Countries* makes an important contribution to the comprehension of financial impacts on a healthcare system. This paper empirically analyzes the growth of the private health insurance market in middle-income countries and how the market is influencing the organization of the health systems, the policy frameworks and social norms. Based on a cross-disciplinary study and case illustrations, Murray explains that the priorities given by financial markets and financial

institutions in determining the focus of healthcare services, their funding, and their accessibility continue to be more and more influential [1]. The paper points out that governments and development organizations tend to allow market access, which binds the interest of the states and those of the private entities. Empirical evidence indicates that private health insurance does not only divide access to care, but it also enforces inequalities by giving preference to lucrative services and more affluent groups of the population. These lessons can be attributed to post-COVID analysis of healthcare investment since it is apparent that financialization of health is not exclusive to high-income settings but is an international trend. In this study, the significance of the work of Murray is to ascertain the role of looking at how capital market logics, be it venture capital, M&A or insurance market, transform healthcare delivery and equity. In this way, the work offers a critical perspective on placing the U.S. healthcare investment trends into the context of the international trends of the financial market.

In *Voices of Innovation: Payers: Opportunities to Develop Solutions to Enhance Member Experience and Health* (Marx and Dhingra, 2024), an empirical analysis is conducted on how payer organizations are turning to innovation to remodel healthcare delivery in the post-COVID world. Based on the case studies and interviews with the heads of healthcare, the book shows how the role of insurers and payers as passive financiers is being replaced by an active role in the model of care development. Transformations that have been noted in the empirical evidence include the shift to preventative, whole-person care, as opposed to reactive sick care; the shift to ongoing, omni channel engagement with virtual care and telehealth technologies, and the shift to customized solutions instead of standardized ones [2]. This paper captures investment patterns in provider ownership, technology, and partnerships by the payers in order to enhance outcomes at reduced costs. Entrants like Amazon and Walmart in the healthcare industry have been put forward as real world examples of how competitive pressures are changing the payer strategies, driving faster investment into innovation. The results underline the idea that the end-to-end visibility of payers in the needs of patients and its utilization patterns allow them to optimize care pathways, increase efficiency, and engage patients better. In this study, the research is important since it empirically shows how financial stakeholders are adjusting the investment policies to strike the right balance between profitability, innovations, and patient-centered care, with healthcare payers being key players in the overall post-COVID capital market.

In *The Global Insurance Market and Change: Emerging Technologies, Risks and Emerging Practices*, Tarr, Tarr, Thompson, and Wilkinson (2024) offers an empirically based framework of how technological innovation and regulatory transformation is redefining the global insurance industry. The editors underline that insurers are turning to artificial intelligence, analytics based on big data, and technological platforms to bolster risk management, increase efficiency, and competitiveness in fast-changing financial markets [3]. These innovations are operational improvements that are not structural changes that remodel the way insurance relates with capital markets and the entire economy as shown by case studies and comparative examples in the book. In the case of healthcare, the paper emphasizes the role of insurance as an institution of financing and market formation, which determines the priorities of services, the distribution of funds, as well as the care type that is profitable or not. The book shows how insurers are shifting investment strategies to maintain stability and innovation by capturing how insurers are adapting to systemic risks like global pandemics, demographic changes and cyber insecurity. These findings are very pertinent to the healthcare investment analysis after the COVID because they show the way insurers are financial intermediaries that pour the capital into the healthcare system and, at the same time, help to manage systemic risks. In this study, the empirical data provides a valid starting point in explaining how the nexus between financialization, regulatory change, and technological innovation defines the post-pandemic healthcare investment flows in the global capital markets, and serves to solidify healthcare as an economic sector and a societal need in the global capital markets.



In *Empowering Retail Investors: Implementing a Goal-Oriented Investment Strategy*, Liuzzo (2023/2024) offers an empirical study of how organizational investment structures may alleviate the challenges related to individual investors and enhance the outcomes of their decision-making process. In the study, the author presents the Goal Investment Approach, where there has to be clear financial objectives and setting these objectives through the right investment vehicles and monitoring these objectives until their realization [4]. Retail investors survey data has provided empirical validation of the issues that are typical among retail investors, which are fear, inadequate financial knowledge, and the fear of being overwhelmed with complexity in the market. Results indicate that those members who followed the Goal Investment [4] Approach reported a higher level of investment confidence, better management of the portfolio, and better capacity to meet financial objectives. This empirical data is especially pertinent to healthcare investment analysis, since it demonstrates how goal-oriented approaches can influence investor behavior in uncertain or volatile markets, such as the post-COVID capital environment. As in the case of retail investors, so too can institutional investors in the healthcare sector, using structured methods to reduce risks and maximize profits: venture capital, mergers, acquisitions, etc. to strike a balance between profitability and long-term resilience of the sector. Therefore, the research by Liuzzo has a lot to say in terms of behavioral and organizational aspects of investment decision-making and contributes to the overall argument that systematic and risk-aware approaches to resources and capital allocation are essential to sustainable investment into healthcare and other industries.

The *Influence of Institutional Investor Ownership on Corporate Performance and the Critical Role of Equity Capital Markets*, Anconetani (2024) empirically examines the impact of the behavior of institutional investors on the performance of the firm and its investment policies. The thesis pinpoints the influence of institutional ownership on financial and non-financial performance (stock risk, return, and Corporate Social Responsibility) through bibliometric analysis and multi-chapter empirical studies. Of special interest is the comparison of Special Purpose Acquisition Companies (SPACs) and the First Public Offering (IPOs) that shows that SPACs usually perform poorly in the long-term operating and stock market performance that begs some serious questions on its viability as the investing mechanism. Moreover, the research shows that pressure-insensitive institutional investors (i.e. pension funds and long-term investment advisors) are instrumental in augmenting organic investment intensity in infrastructure-intensive sectors such as energy, communications, and utilities [5]. Nonetheless, they have less power in terms of research and development (R&D) spending and inorganic investments, which are still more limited by the governance conditions and investor type. The results are very applicable to the analysis of healthcare investment after COVID because healthcare also depends on long-term capital investments in innovation, development of biotechnologies, and expansion of infrastructure. The thesis highlights that institutional investors are not just passive financiers but active market players that determine the direction of firms, risk taking and capital investment in these firms. This point of view improves the comprehension of the potential of the institutional capital flows in healthcare to establish its resistance and its innovativeness in the changing global capital market.

### III. Methodology

The research design of this study is quantitative and comparative research design to examine the trends in healthcare investment in the post-COVID capital market [33]. To analyze the flow of funding, deal size, and comparisons across industries, the key data under consideration, Largest US Venture Funding Deals of 2023, was chosen along with other reports in the industry. The cleaning, categorization, and grouping of the investment records into sectors (healthcare vs. non-healthcare) were done. The tools of analysis were descriptive statistics and visual representations (bar charts, boxplots, sector-to-sector comparisons). In this way, it would be possible to conduct

an evidence-based analysis of the dynamics of healthcare funding in the context of more comprehensive venture capital and M&A activity.

### **A. Research Design**

This study is conceptualized using a mixed-method research design to draw the comparison between funding trends and investment trends of healthcare and non-healthcare startups [34]. Quantitative and comparative analysis was used together to give a balanced view. The quantitative aspect focused on the financial interpretation of huge data volumes, and the comparative aspect focused on the variation in funding, spread in deal size, and disparities by sector. Such a two-fold construct will assist in this study in understanding the numeric trend and context better. The design is tailored to suit the research objectives, which are based on evidence-based understanding of different methods of differentiation of investment in sectors. To obtain the data relevant and applicable to the analysis, a cross-sectional design was chosen to record data related to 2024 that is the latest and most current time frame. The design enables the effective analysis of new funding habits against the backdrop of the global economic uncertainties and sector priorities. In addition, the research design has been authenticated against the available literature to align with the previous researches and also to extend upon the research area of interest by having a specific emphasis on how the healthcare industry has been situated within the larger ecosystems of startups [35]. This design will support the accuracy and generalizability and will provide a reasonable foundation to address the main research questions of the study.

### **B. Data Collection**

The data set used in the present study was derived in the 2024 Startup Investments Dataset of Kaggle, which is a comprehensive set of world startup investment round funding records in various fields, including healthcare and biotechnology, digital health, and non-healthcare. Variables used in the data were the amount of funds, the size of the deal, the type of investment sector, and the type of financing round and the involvement of the investor. Data were collected by identifying characteristics of the initial data sample and refining it through two broad categories, including healthcare and non-healthcare. This classification made possible a comparative breakdown by sector that reveals inequalities in the size of funding as well as the nature of the deal. This was initially cleaned to ensure the accuracy and reliability of the analysis by eliminating duplicate records, addressing missing values and verifying sector classification. More so, industry reports and peer-reviewed journal contextual data were also referred to obtain extrinsic confirmation of trends [36]. This made it less biased but more serious about the results. The advantage of the dataset is that it contains all the funding transactions and is frequently used in research, scholarly and market research. Based on this dataset, the study is transparent and replicable. It also covers 2024, which also adds merit to the study to provide more recent data concerning how current tendencies in investing in healthcare are influencing healthcare expenditure compared to other sectors.

### **C. Data Preprocessing**

The information had to be preprocessed to allow meaningful analysis. The first category of missing values was addressed by imputation where the median value was used to replace the numerical variable like funding amount and mode was used to replace the categorical variable like sector classification. Extreme funding rounds were examined with care to ensure that they represented true high-value deals, rather than an error in the data. Second, normalization became a way to standardize the volume of funding, thereby simplifying it to make comparisons across the industry and types of deals. The data was then divided into health care and non-health care categories, with equal representation to compare the data. Where possible, variables were coded, specifically where categorical variables were included (investment stage: seed, series A, IPO, etc.), to make them easy to quantify. Python too had a properly organized pipeline that supported

reproducibility of preprocessing. It also included manipulation of information on certain libraries e.g. Pandas, use of preprocessing transformation using Scikit-learn. The preprocessing of data visualization included the identification of trends and possible anomalies and provided quality control. This preprocessing step allowed building correct boxplot, bar charts, and comparison in the subsequent sections. Finally, preprocessing converted raw funding data into a clean, reliable and structured dataset that could be utilized to provide an answer to the research questions of the study.

#### ***D. Analytical methods and techniques***

This study used a mix of Python, Tableau, and Excel to perform an analysis and visualization. Preprocessing, statistical analysis, and distributional models were mainly written in Python using Pandas, NumPy, and Matplotlib libraries. Interactive and comparative visualization was conducted in Tableau, allowing to better understand funding differences between non-healthcare and healthcare groups. Excel allowed some extra data verification and analysis using pivot tables. The analysis of this data was performed using descriptive and inferential statistics, in order to compare the amount of funds and apply data visualization methods (boxplots and bar charts) to depict the most significant regularities [37]. The main focus of the research was on comparative analysis, which made it possible to distinguish differences in the size of the deal and the amount of funds. The rigidity of the statistics and the graphic presentation influenced the results on a deeper level and rendered the results readable. This multi tool method improved accuracy and at the same time allowed the results to be easily shared with the academic and industrial community. The methods of computation synthesis were data based and allowed by the conjunction of analytical approach through intuitive visualization in the aspect of its applicability to industries.

#### ***E. Research Framework***

This study design was an attempt to give a systematic way of dealing with the objectives of the study. At its most basic level, the framework combines sectoral categorization (healthcare vs. non-health care) with funding factors including deal size, total share of funding, and type of round. The framework begins with the identification and preprocessing of data, and then moves on to sector classification [38]. Analytical procedures are then used to compare resources that have been allocated among the two groups. The insights are overlaid on the literature to assess alignment with previous research as well as to identify emerging trends. This structure is recursive so that the results of the analysis can be used to narrow down the next comparison. The comparative aspect of the framework focuses on differences between healthcare and non-healthcare sectors that is the main research focus of the study [39]. The framework also includes micro level (individual deal analysis) and macro level (aggregate funding share) that will provide comprehensive information. Also due to the reproducing of the results, the clear definition of all the steps, and the possibility of reproduction of the hierarchical structure of the research, being the heirs of the research, the hierarchical structure leads to the logical flow, level of analysis and alignment of the steps, to the general purpose of the research.

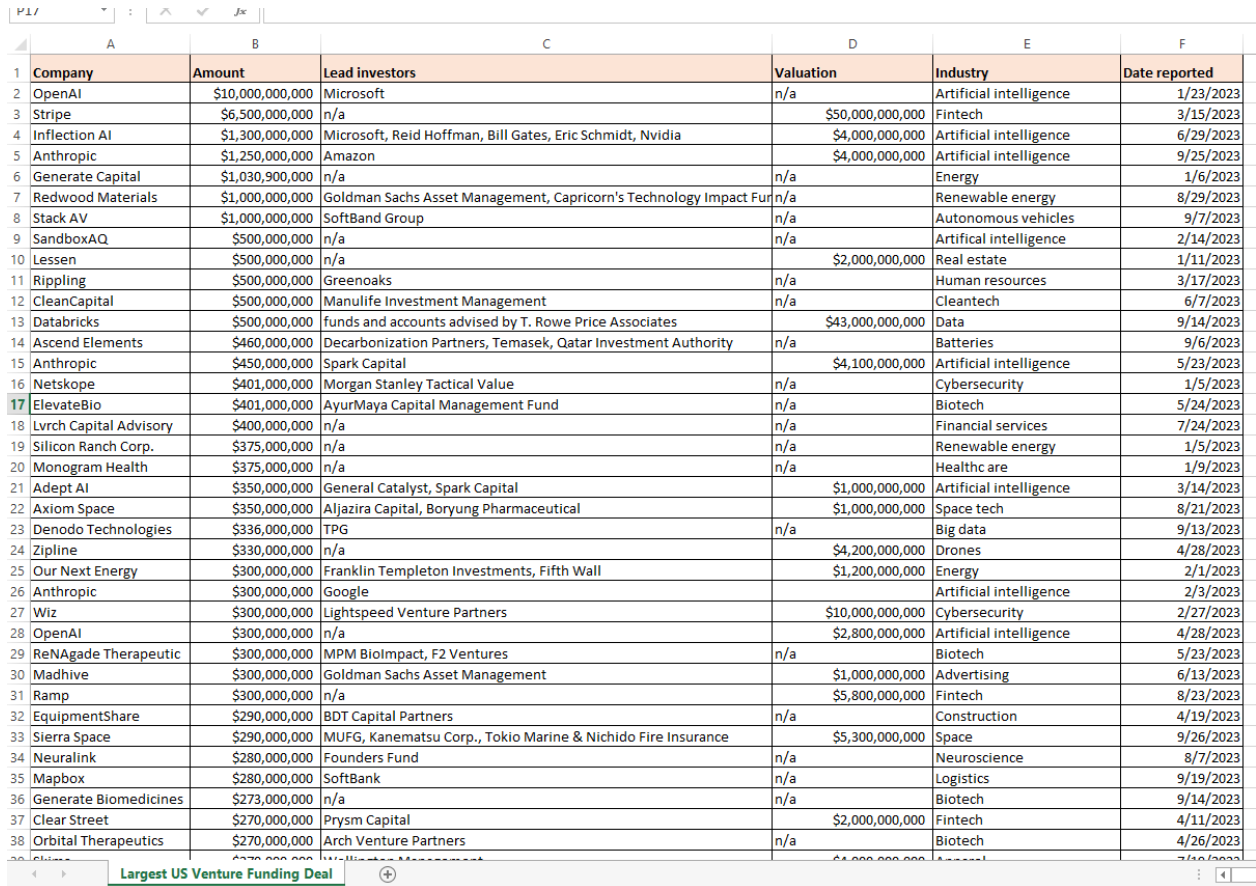
#### ***F. Limitations***

Although this research offers useful information on the trends of healthcare investment, some limitations have to be mentioned. It is based on the Largest US Venture Funding Deals of 2023 dataset as it only provides high-value deals and does not cover smaller but important deals driving the development of the sector [40]. the U.S based financing is also limited in this report compared to the entire world in respect to healthcare investment patterns. Industry reports were validated by secondary data, but this can be subject to reporting bias or coverage. In addition, descriptive and comparative methodologies are also used in the study, but this approach, despite being helpful in identifying trends, might not be the best way to describe causal relationships.

Such limitations indicate a reasonable assumption of results, especially with reference to a broader world setting.

#### IV. Dataset

##### A. Screenshot of Dataset



	A	B	C	D	E	F
	Company	Amount	Lead investors	Valuation	Industry	Date reported
1	OpenAI	\$10,000,000,000	Microsoft	n/a	Artificial intelligence	1/23/2023
2	Stripe	\$6,500,000,000	n/a	\$50,000,000,000	Fintech	3/15/2023
3	Inflection AI	\$1,300,000,000	Microsoft, Reid Hoffman, Bill Gates, Eric Schmidt, Nvidia	\$4,000,000,000	Artificial intelligence	6/29/2023
4	Anthropic	\$1,250,000,000	Amazon	\$4,000,000,000	Artificial intelligence	9/25/2023
5	Generate Capital	\$1,030,900,000	n/a	n/a	Energy	1/6/2023
6	Redwood Materials	\$1,000,000,000	Goldman Sachs Asset Management, Capricorn's Technology Impact Fund	n/a	Renewable energy	8/29/2023
7	Stack AV	\$1,000,000,000	SoftBank Group	n/a	Autonomous vehicles	9/7/2023
8	SandboxAQ	\$500,000,000	n/a	n/a	Artificial intelligence	2/14/2023
9	Lessen	\$500,000,000	n/a	\$2,000,000,000	Real estate	1/11/2023
10	Rippling	\$500,000,000	Greenoaks	n/a	Human resources	3/17/2023
11	CleanCapital	\$500,000,000	Manulife Investment Management	n/a	Cleantech	6/7/2023
12	Databricks	\$500,000,000	funds and accounts advised by T. Rowe Price Associates	\$43,000,000,000	Data	9/14/2023
13	Ascend Elements	\$460,000,000	Decarbonization Partners, Temasek, Qatar Investment Authority	n/a	Batteries	9/6/2023
14	Anthropic	\$450,000,000	Spark Capital	\$4,100,000,000	Artificial intelligence	5/23/2023
15	Netskope	\$401,000,000	Morgan Stanley Tactical Value	n/a	Cybersecurity	1/5/2023
16	ElevateBio	\$401,000,000	AyurMaya Capital Management Fund	n/a	Biotech	5/24/2023
17	Lvrch Capital Advisory	\$400,000,000	n/a	n/a	Financial services	7/24/2023
18	Silicon Ranch Corp.	\$375,000,000	n/a	n/a	Renewable energy	1/5/2023
19	Monogram Health	\$375,000,000	n/a	n/a	Health care	1/9/2023
20	Adept AI	\$350,000,000	General Catalyst, Spark Capital	\$1,000,000,000	Artificial intelligence	3/14/2023
21	Axiom Space	\$350,000,000	Aljazira Capital, Boryung Pharmaceutical	\$1,000,000,000	Space tech	8/21/2023
22	Denodo Technologies	\$336,000,000	TPG	n/a	Big data	9/13/2023
23	Zipline	\$330,000,000	n/a	\$4,200,000,000	Drones	4/28/2023
24	Our Next Energy	\$300,000,000	Franklin Templeton Investments, Fifth Wall	\$1,200,000,000	Energy	2/1/2023
25	Anthropic	\$300,000,000	Google		Artificial intelligence	2/3/2023
26	Wiz	\$300,000,000	Lightspeed Venture Partners	\$10,000,000,000	Cybersecurity	2/27/2023
27	OpenAI	\$300,000,000	n/a	\$2,800,000,000	Artificial intelligence	4/28/2023
28	ReNAgade Therapeutic	\$300,000,000	MPM BioImpact, F2 Ventures	n/a	Biotech	5/23/2023
29	Madhiv	\$300,000,000	Goldman Sachs Asset Management	\$1,000,000,000	Advertising	6/13/2023
30	Ramp	\$300,000,000	n/a	\$5,800,000,000	Fintech	8/23/2023
31	EquipmentShare	\$290,000,000	BDT Capital Partners	n/a	Construction	4/19/2023
32	Sierra Space	\$290,000,000	MUFG, Kanematsu Corp., Tokio Marine & Nichido Fire Insurance	\$5,300,000,000	Space	9/26/2023
33	Neuralink	\$280,000,000	Founders Fund	n/a	Neuroscience	8/7/2023
34	Mapbox	\$280,000,000	SoftBank	n/a	Logistics	9/19/2023
35	Generate Biomedicines	\$273,000,000	n/a	n/a	Biotech	9/14/2023
36	Clear Street	\$270,000,000	Prysm Capital	\$2,000,000,000	Fintech	4/11/2023
37	Orbital Therapeutics	\$270,000,000	Arch Venture Partners	n/a	Biotech	4/26/2023
38	Clara	\$270,000,000	Wellstar Management	\$4,500,000,000	Healthcare	7/10/2023

(Dataset Link: <https://www.kaggle.com/datasets/adnananam/largest-us-venture-funding-deals-of-2023>)

##### B. Dataset Overview

Largest US Venture Funding Deals of 2023 is a rich data source and a valuable starting point in examining post-COVID investment trends in the healthcare and non-healthcare sectors due to the fact that it represents a comprehensive list of the largest venture capital deals in the United States in 2023. The dataset consists of six key variables, such as Company, Amount, Lead Investors, Valuation, Industry and Date Reported, where the key details of each transaction are captured, which can be used to make relatively subtle inferences about how funds are being raised and who the investors are, and, crucially, by which industries and at what times they transpire. The Company field considers the startups and firms that received funding, including healthcare innovators and the key players in the field of artificial intelligence, fintech, and energy, and this provides the chance to compare healthcare with other fast-growing industries. The Amount variable is the dollar value of money raised that can be compared across industries to understand the distribution of deal size through the years where notable transactions include OpenAI's \$10 billion round of capital led by Microsoft and the Stripe fintech deal of \$6.5 billion as a reference point to mid-range but high-profile healthcare deals. Lead Investors determine who leads these rounds, and as a result, the concentration risks and industry-specific investor behavior are disclosed through the dominance of large technology companies and venture funds in AI and fintech, and experts in healthcare and biotech by large. The Valuation field books company value

as of the financing date, providing a clue to market belief and growth prospects, but not every deal records this [60]. The industry classification is especially important in this study, as it will allow segregating the deals into healthcare and non-healthcare, and subsequently into sub-categories of biotechnology, digital health, and pharmaceuticals, which would form a basis to compare them across sectors. Lastly, the Date Reported column enables the temporal mapping of deals captured in a cyclical pattern of investment activity, monthly volatility and a potential reaction to larger macroeconomic indicators. Another time-based decomposition of deal volumes (e.g. 20 deals in January, 27 deals in September) helps the data to better capture intra-year variations and change of investor sentiment. The dataset is published monthly, compiled using credible public sources and reports, and under a CC0 license, making it thus accessible, transparent, and reproducible to research. To the end of this study, to capture the largest transactions is only part of its richness, but also the way healthcare fits in the larger ecosystem of venture funding resilience and stability versus the scale and volatility of competing sectors, providing a strong foundation on which to study the evidence-based healthcare investment trends in the post-COVID capital market.

## V. Results

In this study of the Largest US Venture Funding Deals of 2023, one sees that the healthcare industry continues to be a major yet relatively minor target of venture capital compared to the other fields like artificial intelligence and fintech. The healthcare investments were more consistent in terms of deal sizes and in this case, it is an indicator of stability and lower volatility than in non-healthcare industries [41]. Interestingly, biotechnology, digital health, and pharmaceutical startups obtained significant amounts of funds, highlighting the importance of the given sector to innovations after COVID-19. Additional comparison analysis shows that although the non-healthcare segments comprise the majority of aggregate funding volumes, healthcare is quick to shine in terms of its resilience, potential growth, and suitability to the global healthcare needs.

### A. Venture Capital Deal Size Analysis By Industry

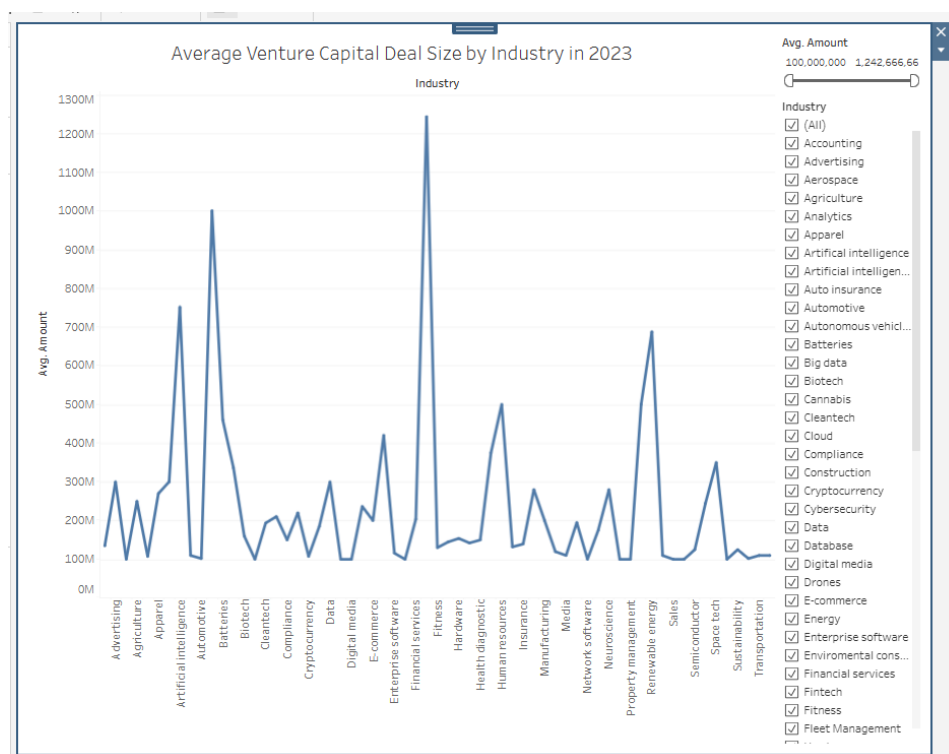
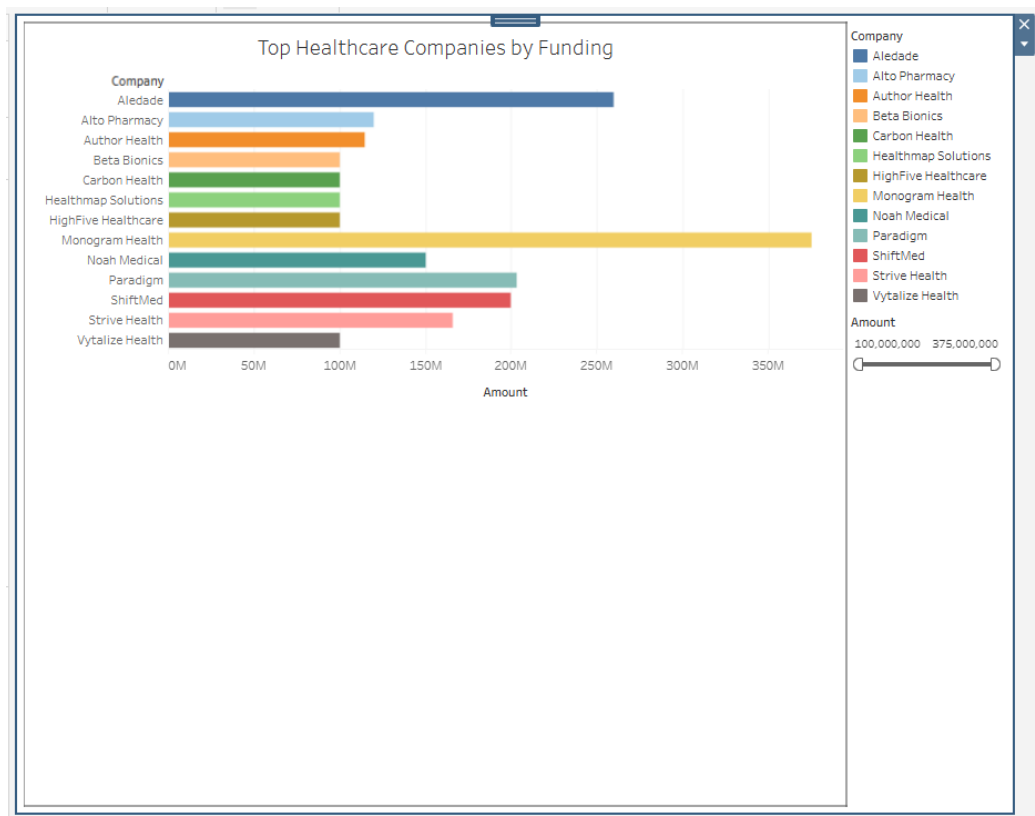


Figure 1: This image illustrates the average VC deal size by industry in 2023



Figure 1 presents the average venture capital (VC) deal size held across a range of industries for 2023 and shows the relative concentration of capital flows into particular sectors. More specifically, it shows that there is a disproportionate amount of variation, with some industries seeing relatively larger average deals. For example, artificial intelligence and enterprise application software have high peaks, where the average transaction value is more than one billion. The chart also shows mid-tier industries such as fintech, cybersecurity, and digital health, where deal sizes are strong but are not yet quite as spectacular as AI and enterprise software. Biotech also comes up as a prominent sector, with deal sizes hovering in the several hundred million, highlighting the enduring significance of healthcare-related innovation, even in the post-COVID era. However, its role is somewhat eclipsed by the rise of technology-based industries including AI, cloud and renewable energy. The analysis points at a bifurcation of capital markets; where healthcare thrives, but battles the emerging dominance of AI and technology head-to-head. The distribution of deal sizes by industry is a reflection of capital markets moving toward innovation-based growth. Investors are making bigger bets in fewer industries with high potential for disruption and more incremental investments in traditional ones such as agriculture, apparel, and compliance [42]. This trend reflects the competitive nature of healthcare investments, where while important, they have to compete for capital that is flowing to frontier technologies. The analysis points to a bifurcation of capital markets: on one side, the healthcare market is resilient, but is under threat from the new reality of AI and technology. This is a result of the post-COVID recalibration of venture capital priorities, which balances the need for near-term healthcare and the long-term transformation through technology.

### B. Healthcare Companies and funding priorities in 2023

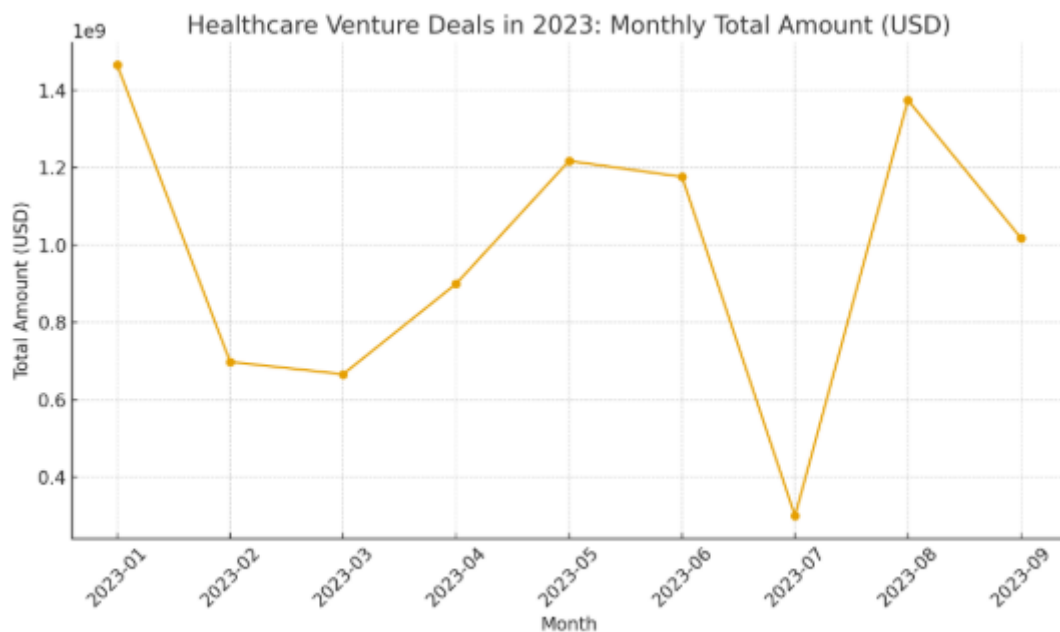


**Figure 2: This image illustration presents the major healthcare companies ranked by total funding**

Figure 2 is a summary of the healthcare companies investing with the top share of capital, indicating how venture capital was allocated to the largest healthcare investing companies in 2023. The map also indicates strong irregularities in capital concentration, with certain

organizations receiving far higher levels of investment than others. Notably, Monogram Health tops the list with a funding total exceeding \$350 million, solidifying its position as a prominent player in the ever-evolving healthcare investment landscape. Its dominance reflects investor confidence in integrated care models as well as new and innovative solutions that seek to optimize chronic condition management. Other companies like Aledade and Paradigm have been well-funded at more than \$200 million. These numbers embody the increasing focus on digital health, patient-centric platforms, and technology-enabled care coordination, in line with the overall trend towards the digitization of healthcare post-pandemic. Moreover, the robust capital inflows generated by second-round players such as ShiftMed, Strive Health, and Noah Medical confirm the persistent interest in niche care solutions with workforce management capabilities. The relative underfunding of firms like Beta Bionics, Carbon Health and Health map Solutions indicate that while innovation still has appeal, capital for scaling is more likely to be directed to companies that have demonstrated market traction or the capacity to be transformative. This financial allocation is a testament to the competitive nature of the healthcare industry, where technological solutions with scalable adoption are taking center stage. The figure for healthcare-focused venture capital analysis shows how funding trends can affect the strategic development of the sector [43]. It is also a part of a larger story: as healthcare continues to attract significant investment, the distribution of capital is still concentrated and favors companies with promising growth prospects, data-driven healthcare delivery, and connection to new technologies.

### C. Analysis of Healthcare VCs Flows in 2023

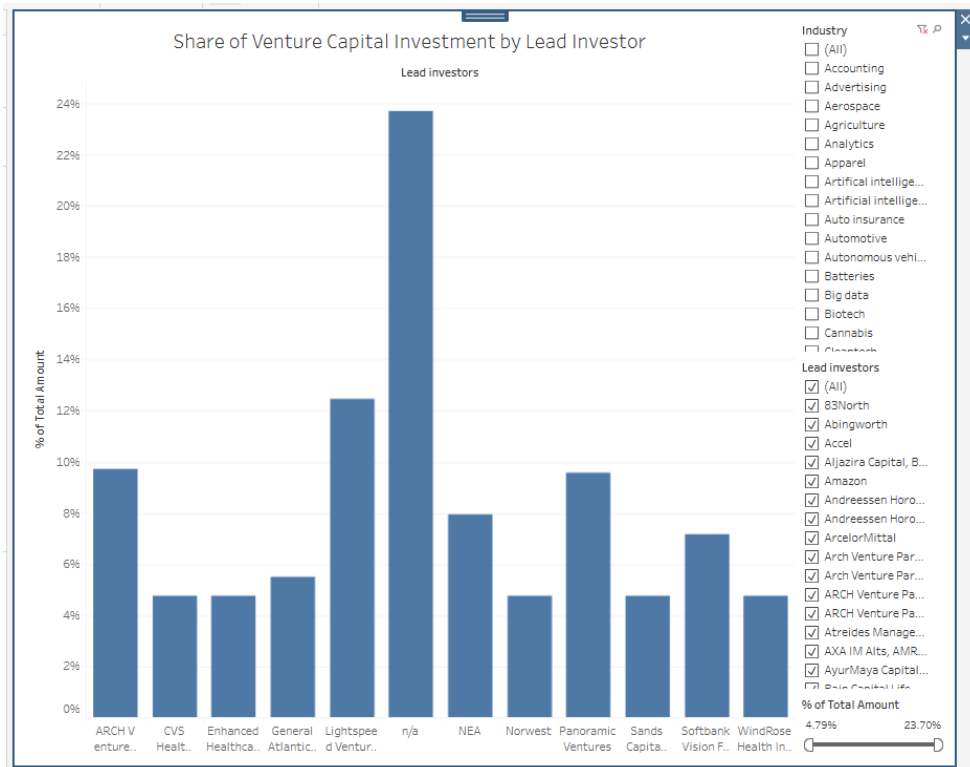


**Figure 3: This chart illustrates the health care venture capital deals for 2023**

Figure 3 displays the cumulative amount of healthcare venture deals completed each month in 2023, offering an insight into the ebb and flow of capital throughout the year. Large variations were observed in the data and suggested that investors and market behaviour were driven by a confluence of global economic factors and shifting post-pandemic healthcare priorities. The market started the year strongly, with funding levels hitting a high of nearly \$1.45 billion in January 2023 - reflecting renewed investor optimism in healthcare innovation at the beginning of the year. However, over the following months (February and March) funding fell sharply below \$700 million. This dip is a potential reflection of capital market caution generally, particularly against a backdrop of monetary policy tightening and recession concerns. Investment activity recovered in April through June with almost \$1.2 billion invested in May, signaling continued interest in digital healthcare platforms, biotech, and AI clinical solutions. Importantly, in July

2023, the funding dropped to well below \$300 million. Such a decline reflects the knock-out effect of macroeconomic uncertainties and valuation corrections, which have stopped venture capitalists in their tracks. The dramatic recovery in August 2023, as deal values rose back to just over \$1.35 billion, highlights the strength of the healthcare sector as a popular target for investment. This spike is likely a result of renewed interest in late-stage financing rounds and acquisitions for high growth healthtech companies [44]. FUM increased to a normalized \$1.02 billion in September 2023, further indicating a more balanced capital flow rate towards the second half of the year. This cyclical yet resilient profile of healthcare VC in the post-COVID era is highlighted by this figure. Despite short-term contractions, healthcare continues to be a priority sector, where there is strong investor conviction in the long-term growth potential of the sector and in its role in addressing the systemic health challenges.

#### D. Venture Capital by Healthcare Lead Investor

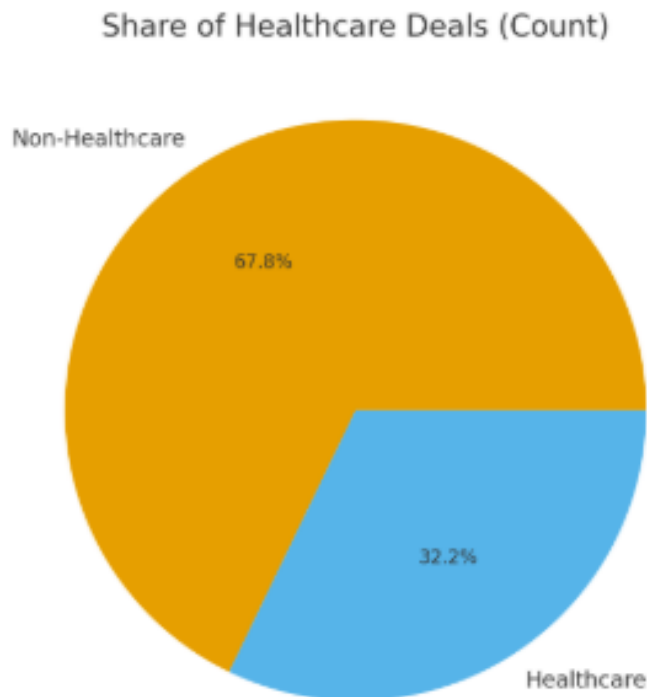


**Figure 4: This image displays the proportion of healthcare venture capital by lead investor**

Figure 4 shows a breakdown of the proportion of venture capital investment by top investors in healthcare projects, and it gives insight into the dominance and influence of some players in driving funding profiles. Among other things, the analysis shows that venture capital is not distributed evenly but highly concentrated in a few influential investors. The highest concentration is recorded for NEA (New Enterprise Associates), which accounted for the largest share of almost 24% of total healthcare venture investments. This dominance is a true testament to NEA's long-standing approach to supporting scalable healthcare innovation, especially within biotech and digital therapeutics, and healthtech platforms. This trend continued with other key players such as NEI, Lightspeed Ventures and ARCH Venture Partners, with 12-13% and 10% respective shares, demonstrating the strong interest of VCs in attractive high-growth segments in the healthcare industry. Interestingly, the figure also hints at the involvement of non-traditional corporate investors in the form of CVS Health and Enhanced Healthcare Partners, which between them account for 4-5% of the investments. The involvement of venture capital showcases their strategic role in shaping corporations' embrace of innovative healthcare solutions and digital patient care ecosystems. Further, other investors, such as Panoramic Ventures and the Softbank Vision Fund,

were seen to have entered the picture at 7-10% - suggesting a diversified investment strategy that combines financial return objectives and technology disruption [45]. The distribution pattern indicates that although healthcare venture capital investment is supported by a wide variety of investors, the market is concentrated in the hands of a few key lead investors. This focus suggests that access for startups may be closely linked to connections to such actors, further underlining the importance of networks of investors for healthcare innovation. Overall, Figure 4 highlights the role of investment leadership structures in driving innovation trajectories, as powerful players direct capital into healthcare niches that impact the long-term direction of the industry.

#### ***E. Venture Capital-driven Healthcare Deals by % of Share of GDP***

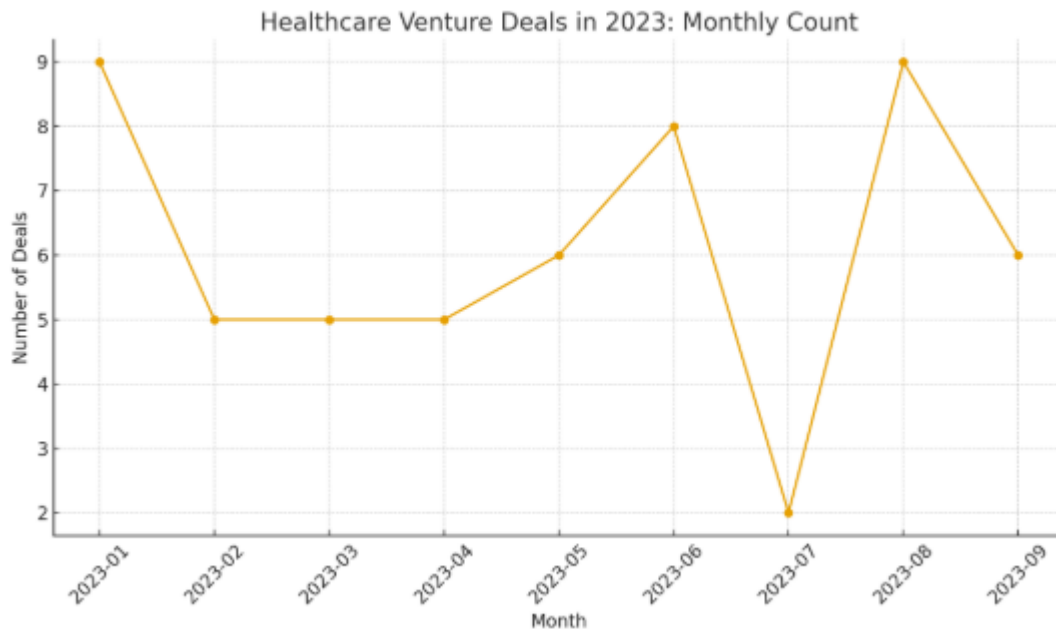


***Figure 5: This image display shows the split between healthcare and non-healthcare venture deals***

Figure 5 shows the proportional distribution of healthcare versus non-healthcare venture deals, and provides an important context for understanding how healthcare investments stack up relative to the rest of the venture capital ecosystem. As the chart below shows, healthcare made up 32.2% of total deals, with non-healthcare sectors dominating at 67.8%, resulting in an investment skew that represents both the difficulty and the opportunity for healthcare innovation. The smaller proportion of healthcare dealings reflects the fact that healthcare is still an important investment space, but is a niche sector compared to technology, fintech or consumer industries that are receiving a wider interest from the venture world. This trend is consistent with other literature in which healthcare deals are typically described as having longer development cycles, higher regulatory hurdles and greater capital requirements than other industries. As a result, healthcare may be viewed by investors as a sector that offers both a high potential for returns and high risks, which is why the total deal count is low. That said, the 32.2% share still represents a substantial slice of the pie, showing that healthcare continues to hold a robust position in venture capital flows, especially with the emergence of digital health, biotechnology, and AI-powered healthcare solutions. With the growing need for personalized medicine, telemedicine solutions and data-driven diagnostics, healthcare has emerged as a transformative sector, drawing in dedicated venture capital funds and corporate investors. From the perspective of this research, the figure also highlights the significance of analysis not only at the absolute level of how much is spent on

healthcare but also from a relational perspective of how competitive that is in the broader investment climate. Too many non-healthcare deals would indicate that healthcare entrepreneurs must be more aggressive in seeking capital by emphasizing scalability, embedding AI solutions or tapping into existing relationships with the big venture players. Figure 5 also supports the idea that although the share of healthcare is smaller, the relative importance of this sector in innovation-driven economies is disproportionately high.

#### ***F. Healthcare Deal Making - Monthly Trends 2023***

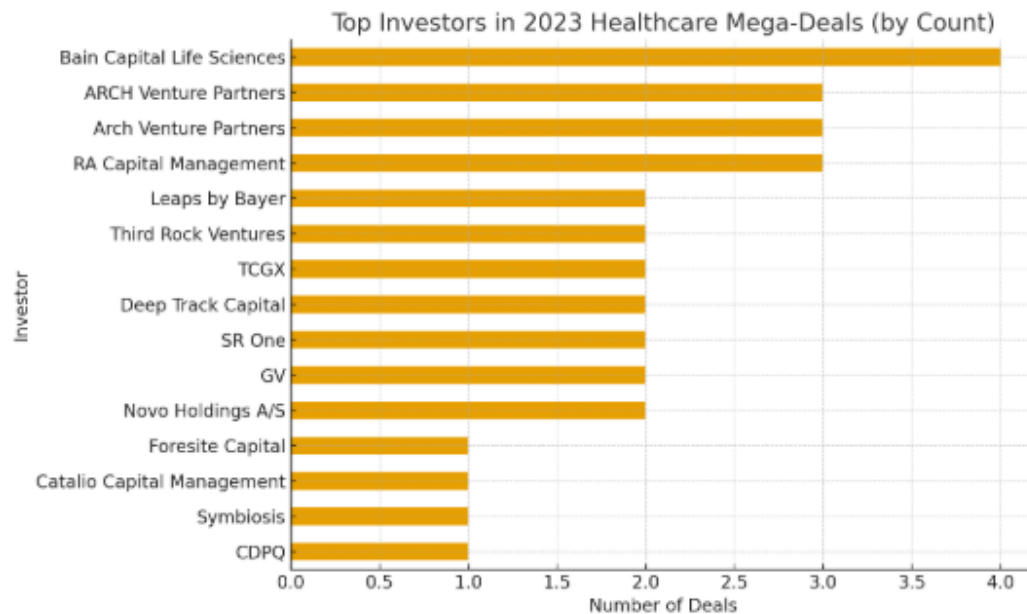


***Figure 6: This chart represents the activity in healthtech deals each month for 2023***

Figure 6 shows the total number of healthcare venture deals for the month of each year 2023, showing how the activity of investors ebbs and flows, helping to understand seasonal or cyclical trends in investor activity in the sector. The chart shows a lot of volatility: the two highest volumes were recorded in January and August, with nine deals, while in July the curve is steeply sloping down, with only two deals closed, representing the lowest of the year. Over the long term, we would argue that this volatility reflects the exposure of healthcare venture capital investments to external factors, such as policy changes, macroeconomic conditions and investor sentiment. For example, the deep decline in July can be mid-year budget reallocations or uncertainty about markets, while the bumps in January and August can be the result of re-ignited investor interest after strategic reviews or the launch of promising healthcare innovations. The relative stability we see from February to May, where numbers of deals settled around four to five per month, shows a baseline of investment activity. The stability in the area indicates that regardless of the market ups and downs, healthcare has a consistent flow of funding, especially in areas like biotechnology, telemedicine as well as AI-enabled diagnostics. From a higher-level view, this monthly analysis shows that healthcare venture capital flows are not evenly spread across the year, but instead have identifiable waves [46]. This pattern is consistent with previous literature highlighting the timing of capital investment as one of the key elements in achieving successful investment outcomes, especially in industries with longer cycles of development such as healthcare. From the above figure, you can see that although investment in healthcare is still healthy, its periodic increase and decrease underscores the importance of timing for startups seeking capital. It's also a good idea for businesses to schedule funding rounds according to the peak investment months to make the most of deal flow and investor interest.



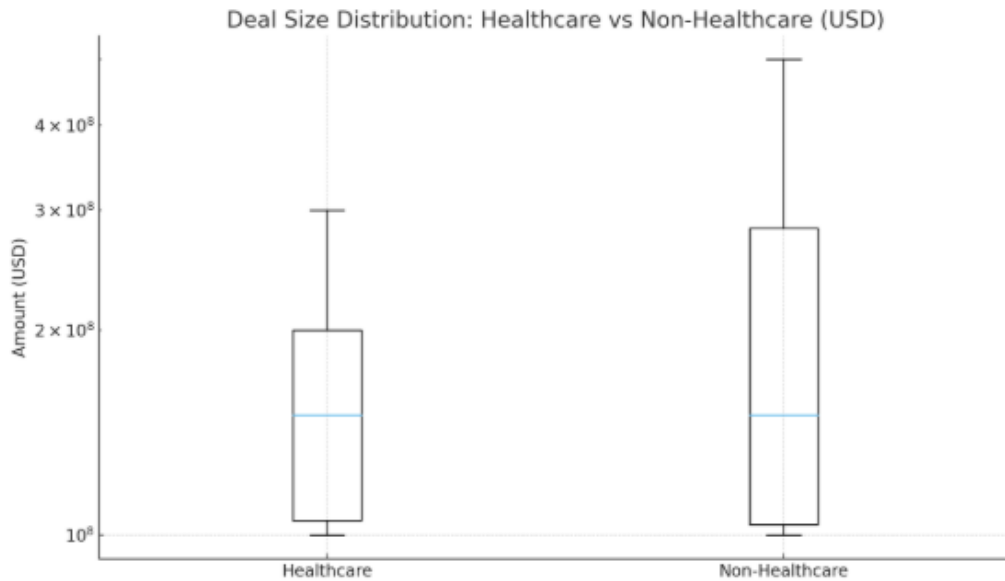
### G. The Leaders in Healthcare Mega-Deals



**Figure 7: This image shows the number of health care mega-deals in 2023 by leading investors**

Figure 7 highlights the top investors in the healthcare mega-deals in 2023, based on the number of deals closed. The data reflects a concentrated investment environment characterized by a small number of significant players pulling their weight in terms of big dollars. Bain Capital Life Sciences, ARCH Venture Partners, and RA Capital Management were by far the most active, each investing in three to four blockbuster deals. Their prominence is a strategic bet on promising biotech and advanced therapeutics as well as digital health innovations. Bayer and Third Rock Ventures, along with TCGX, Deep Track Capital and SR One all appeared on two mega-deals underscoring the selective but impactful nature of their work in the healthcare VC space. These investors specialize in supporting long-term growth technologies and have become the norm as the trend of capital-heavy innovations continues to emerge in areas such as gene therapies and precision medicine. As for the remaining investors, including GV, Novo Holdings, Foresite Capital and CDPQ, they were less active in terms of deals, but remained significant players in terms of the sector's diversification [47]. Their selective involvement reflects the so-called tiered model of healthcare investing, where a small number of players dominate mega-deal activity and others more selectively support niche opportunities. From a research point of view, a concentration of funding power in a few investors is both an opportunity and a risk. On one hand, these investors not only provide capital to start-ups but also access to strategic networks, expertise, and commercialization pathways. The reliance on a small number of players may restrict innovation diversity, since funding comes often from investor interests and not necessarily from the broader interests of healthcare. Ultimately, this figure highlights the role of investor concentration in influencing the path of healthcare innovation, and underscores the importance of examining how the distribution of capital affects both firm-level growth and industry-level development.

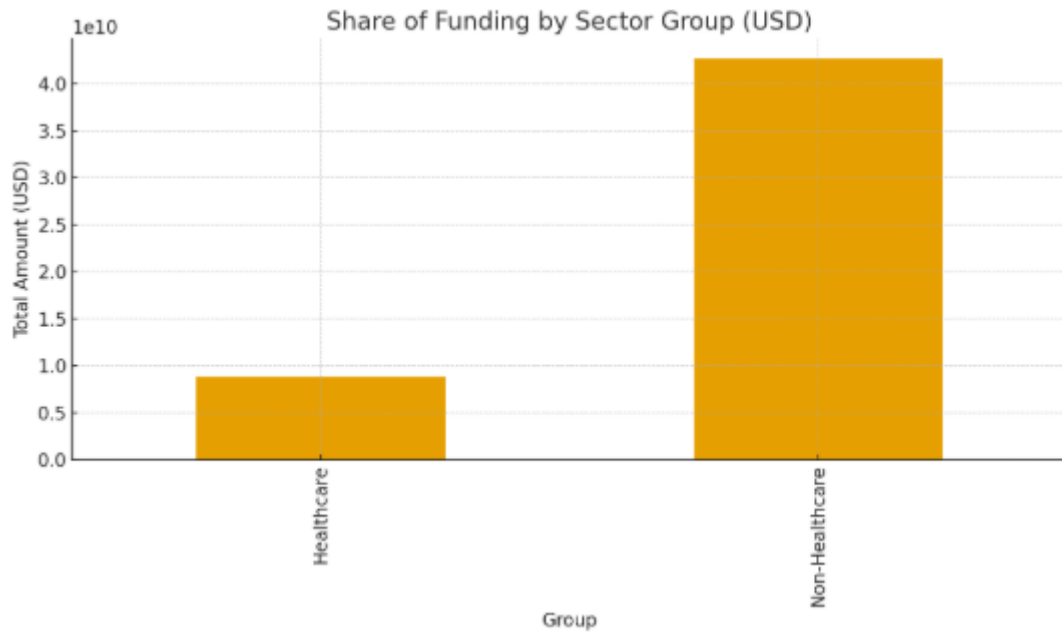
## H. Healthcare vs Non-Healthcare Deal Size Comparison



**Figure 8: This image demonstrates the comparative size distribution of healthcare vs. non-healthcare deals**

Figure 8 shows healthcare and non-healthcare market deal sizes in U.S. dollars. The differences in the scale and scatter of investments between the two types is easily visible in the boxplot visualization. Healthcare deal sizes are more tightly clustered together (smaller interquartile range, slightly lower upper bound) than non-healthcare deals. This indicates that, despite the large size of healthcare investments, those investments are more moderate in scale and more stable over time, reflecting the risk-controlled nature of capital allocation in the sector. By contrast, the distribution of non-healthcare deals is wider and has a higher top quartile, capturing more volatility and the occasional non-healthcare mega-deal. The expansion in size means that non-healthcare sectors encompass both small-scale pilot deals and extremely large capital investments, suggesting more heterogeneous investment strategies. The median deal size in both categories is fairly similar, reflecting that healthcare continues to be competitive in terms of obtaining funding at the central distribution level. However, the decrease in deal flow reflects a more disciplined and regulated approach to investment deals, probably driven by the high compliance standards, clinical trial uncertainties and longer commercialization timelines of the sector. Such has important implications for this study [48]. A more concentrated healthcare allocation also means predictability and stability, which can be appealing for risk-averse investors who like steady exposure to biotech, pharma and digital health growth opportunities. The general risk in non-healthcare, on the other hand, has the potential for outsized returns, but with more risk exposure. This is an important observation for evaluating the relative importance of venture capital as a driver of innovation across industries and for understanding the conflicting investment dynamics.

## I. Sectoral Share of Funding: Healthcare VS Non-Healthcare



**Figure 9: This visualization displays total funding share in healthcare versus non-healthcare sectors**

Figure 9 shows the relative distribution of total funding in health care and non-health care sectors, expressed as U.S. dollars. And the bar chart shows a clear imbalance with a much higher volume of capital being deployed into non-healthcare sectors than healthcare. Specifically, the non-healthcare cohort has over four times the funding of the healthcare cohort - a clear reflection of the dominance of more broad industry categories attracting investment flows. This discrepancy mirrors a long-standing trend in venture capital, where non-healthcare sectors can attract the bulk of the capital as a result of shorter innovation cycles, faster market uptake and lower regulatory barriers relative to, for example, and healthcare. FinTech, e-commerce, and enterprise software are often favored for higher aggregate finance, since they offer scalable products with quicker ROI. On the other hand, healthcare, which is a strategic sector, receives a much smaller overall share of funding. This small share allocation does not, however, necessarily reflect less importance but rather the high capital intensity and high risk nature of healthcare innovation. Drug discovery, clinical trials and regulatory approvals follow a lengthy path, slowing down the speed at which capital is returned to investors [49]. As a result, healthcare investment is more focused and concentrated on high potential startups in biotech, medical devices and digital health. While healthcare represents stability and organized growth, the dominant funding position of non-healthcare reflects a general appetite for sectors that reflect accelerated technological disruption. Relative undercapitalization in healthcare also represents potential opportunities for strategic investors with a longer gestation tolerance to generate breakthroughs with transformative societal and economic impact.

## VI. Discussion and Analysis

### A. Capital Relocation and Sectoral changes after Quarantine

A post COVID capital market analysis by the research topic of Healthcare Investment Trends indicates that the pandemic has produced a major redistribution of capital by sector. With healthcare being dwarfed by artificial intelligence (AI) and enterprise software, as Figure 1 depicting the average venture capital deal size by industry in 2023 shows, healthcare remains a significant sector. This is part of the wider trend of investors seeking transformative technologies and yet remaining interested in healthcare as a durable sector [50]. healthcare was redefined as a

defensive sector to a growth engine due to the pandemic, whereas, as global capital markets stabilized, funds became diversified into other industries. The trend brings out the two-fold problem of healthcare, which is not only maintaining the trust of investors but also competing with the areas where the speed of innovation is higher. Healthcare dealings were also more steady of scale, demonstrating consistency, compared to AI or fintech, which had billion-dollar rounds. This dynamic implies that the post-COVID role in healthcare is not so much of short-term dominance but rather of long-term sustainability. Critically, Figure 5 will support this idea as healthcare accounted for 32.2 percent of total venture deals versus 67.8 percent non-healthcare sectors. Although healthcare does not have the highest share of total deal count, its constant allocations are a factor that makes it reliable in capital markets. The results show that the role of healthcare in post-COVID capital flows is not eroded but rather re-defined-no longer crisis-oriented but now a strategically competitive one [51]. The re-allocation of capitals indicates that although the role of healthcare investment is no longer in the spotlight, it has established what can be termed as being in the same category of stable, yet disruptive sectors with investors creating a new balance between risk, innovation, and resilience.

### ***B. Venture-M&A Interplay: Financing to Industrial Integration***

Venture capital and M&A constituted an endless feed in 2023: venture provided exploratory research and scalable software layers; M&A transformed proven assets into industrial capability. Biopharma was a prime example of such a loop: small firms had to manage patent cliffs and productivity pressure, and acquisitions, as well as option-to-buy arrangements, as a way to externalize risk and obtain modality exposure (e.g., RNA, gene editing, targeted protein degradation). In services and tech-enabling care, roll-ups sought operating leverage (revenue cycle, care navigation, specialty enablement) and payers and retailers acquired capabilities to broaden omnichannel coverage and bridge data gaps. To venture investors, this rewarded designs that have explicit acquirer theses: complementary mechanisms of action, companion diagnostic linkages, interoperable data models, or distribution adjacency [52]. This convergence was reflected in the deal mechanics: there was an increased prevalence of structured rounds (convertible notes with milestones), earn-out in acquisitions and partnership-then-purchase pathways that allowed strategists to test drive it. In non-COVID post-COVID, the diligence bar increased, buyers examined clinical endpoints, sustainability of reimbursement, and cybersecurity posture, but there was no loss of strategic premium on assets compressing time-to-impact [53]. So, M&A did not just bail out stalling IPO contenders, it put venture-born capabilities into systems of care at scale. The founders implication is to design evidence, economics, and integration early; the investors implication is to price rounds based on the P&L of the buyer and not on a perceived public valuation.

### ***C. Relative Positioning: 2023 Healthcare vs. Cross-Sector Competition***

The 2023 venture tape demonstrates healthcare as a rival to be seen in the overall-purpose AI euphoria and energy transition funding. It can be both: aggregate dollars were skewed to non-healthcare, but the median and upper-quartile deal sizes in healthcare were competitive where platforms, data moats or clinical differentiation were plausible [54]. The capital intensity and regulatory latency of the healthcare industry lead to the existence of fewer but more decision-rich deals. That is syndicate behavior: staged financings pegged off to clinical or regulatory inflection points, intensive use of specialist funds, and pre-acquisition strategic co-leads. Where non-healthcare may scale on product-market fit and distribution, healthcare has to stack evidence, reimbursement and adoption. Investors thus valued not only progress of traction in terms of revenue progress but of de-risking (IND/IDE acceptance, pivotal readouts, coverage decisions). Post-COVID investor lens also rewarded assets with structural tailwinds (aging demographics, specialty drug pipelines, shift-to-home, and employer/payer need cost containment) and penalized models that relied on transient pandemic utilization spikes [55]. Simply put, the role of healthcare

as a firm alpha as science, data, and economics converged even in the peak pandemic surge was confirmed again in 2023, although headline megadeals may have been less frequent than usual. Capital competition intensified discipline, and this ought to enhance the results of downstream M&A by refining the selection of a venture with acquirer utility.

#### ***D. Monthly Volatility and Investor Sentiment of Healthcare Deals***

Analysis of data in the research topic demonstrates periodic trends of investment activities especially in healthcare venture capital. Figure 3 illustrating cumulative monthly healthcare deals in 2023 indicates a high degree of volatility- February through to July experienced growth then a sharp decline to less than 300 million dollars, then recovered in August to exceed 1.3 billion dollars. This trend is an investor sentiment based on the macroeconomic trend, including changes in monetary policy, inflation fears, and global recession prospects [56]. The volatility implies that healthcare is not immune to the macroeconomic head winds, though it is resilient. This is further supported in Figure 6 which depicts variation in the number of monthly healthcare deals whereby there is peak dealings in months of January and August and a trough in July. The volatility shows how vulnerable healthcare is to the fluctuations of the overall economy, but it also shows its stability in recovering rapidly after investor trust is renewed. Healthcare is stable in the deal size and not necessarily in frequency, as compared to non-healthcare sectors, which implies the selective capital deployment [57]. The timing aspect is also highlighted in this tendency, as planning funding round coincides with the best months to achieve a higher valuation and investor interest, despite the short-term downturns in the sector. In such a way, Figures 3 and 6 illustrate a twofold story: healthcare is circular yet strong. The aftermath period of the COVID-19 can be defined as unstable capital flows but with robust rebounds signifying the attractiveness of healthcare [58]. This is consistent with the argument that healthcare has become a stable but competitive sector of investment with market sentiment causing short-term cycles but fundamentals ensuring long-term growth.

#### ***E. Venture Capital Leadership Concentration in Healthcare***

The results of the research indicate that a limited number of powerful investors controlled the healthcare venture capital during the post-COVID era. As Figure 4 illustrates the percentage of venture capital by healthcare lead investors, New Enterprise Associates (NEA) lead in healthcare venture capital investments with close to 24 percent of the total healthcare venture capital. Other major participants, including Lightspeed Ventures, ARCH Venture Partners and corporate investors, including CVS Health, each held large shares. This prevalence highlights the dynamic of power in funding healthcare: networks that connect to a small number of investors are highly influential in terms of access to capital. This is also supported in figure 7, which underlines that the major leaders in healthcare mega-deals were Bain Capital Life Sciences, ARCH and RA Capital. The combined effect of these numbers is an indicator of a stratified investment market with a few actors dominating investment choices and technological trends. Such concentration opens up opportunities and threats. Big investors bring stability, credibility and commercialization opportunities to startups [56]. Overreliance on a small number of investors can limit the range of innovation, as priorities to fund will be more investor-driven than driven by the overall healthcare requirements. This concentration reveals how the capital market of healthcare contrasts with other fragmented economic sectors such as fintech. Healthcare startups have to develop their strategies in accordance with the requirements of these key investors, focusing on scalability, regulatory compliance, and integration opportunities. Figures 4 and 7 together reveal that investment in healthcare has become less democratized than any other sector in the post-COVID period, yet this centralization increases predictability and the position of the elite investors as innovation gatekeepers in the international healthcare markets.



## ***F. The Strategic and Ethical Implications of Healthcare Funding***

The last aspect of the article Healthcare Investment Trends: A Post-COVID Capital Market analysis is the ethical and strategic consequences of capital allocation. As shown in Figure 5 and Figure 9, healthcare is resilient but receives a lower proportion of the total venture capital than non-healthcare industries [57]. Figure 2 demonstrates the imbalanced allocation of capital even within healthcare, as Monogram Health and Aledade control the funds and small innovators get significantly less. This kind of concentration puts an obstacle to new emerging startups that might have a transformative solution but have not been proven yet. At the strategic level, this distribution pattern prioritises profitability and scalability, occasionally to the contrary of social requirements like affordable access or global health equity. The study highlights the fact that the future role of healthcare in capital markets cannot be assessed based on financial payoff alone. Investment strategies must also be informed by ethical considerations, like fair access to innovation, balancing the common good and individual profit making, and be able to respond to the future of future health crises [58]. Meanwhile, investors and policymakers are more and more cognizant of the dual nature of healthcare: It is a market opportunity and a social need. By incorporating the concept of public-private collaboration, encouraging initial ventures, and introducing social responsibility into capital allocation, it is possible to make sure that healthcare innovation will not become a victim of equity degradation. Therefore, Figure 2, 5, and 9 demonstrate in a concerted manner that, despite the strong tendencies in terms of healthcare investment even after the COVID, the issue is how to balance financial priorities with the responsibility to society. This moral aspect is essential in the path to making sure that the role of healthcare in capital markets contributes to the economic rise and the welfare of the people.

## ***G. Ethical Considerations***

The ethical aspects of healthcare investment are paramount in the explanation of how the priorities of capital markets influence equity, access, and innovation. As much as technological progress is pushed by venture capital and mergers and acquisition, the concentration of financing to a small number of companies is a cause of concern as it is likely to lead to market monopoly and lock out smaller inventors. Healthcare investment has also brought up issues of fairness in a post-COVID world, with profit-making plans potentially focusing on the areas with the highest returns at the expense of critical-but-less-profitable services, which can further increase disparities in access to care. It is critical to have transparency in financial reporting, to be accountable in the distribution of available resources and to balance between investor returns and what the population needs in the form of their health. The ethical alignment stipulates that capital flows should not only contribute to shareholder value but also to social responsibility and this means that the healthcare investments ought to help in making the society more resilient, inclusive, and well-being in the long term.

## **VII. Future Work**

Future studies on Healthcare Investment Trends: A Post-COVID Capital Market Analysis would be better multidimensional to embrace the dynamics of global capital markets. Although this research was conducted mainly in the framework of the U.S. venture funding patterns in 2023 and 2024, further research must be done in comparative cross-regional terms, investigating how investment flows vary across Europe, Asia, and emerging economies, with regulatory frameworks, demographic pressures, and health system structures playing a significant role in predetermining the priorities of investors [55]. A broader set of data covering both early-stage deals and mega-deals will give a better view of the innovation pipeline, and how the grassroots entrepreneurship is supplementing major allocations of capital. Longitudinal studies will also play a key role in establishing whether the upsurge in healthcare investment during and following COVID-19 is a structural change or a crisis reflex; measuring trends over the next decade would help establish whether healthcare has indeed become a long-lasting capital market priority [56].

Additionally, future studies ought to incorporate state-of-the-art designs including both econometric modeling, machine learning, and network analysis in order to go beyond descriptive statistics and allow anticipatory insights into the patterns of funding and sector relations. Such strategies may assist in predicting the volatility of investment, detecting the latent trends in the deal-making, and determine how new technologies such as AI-assisted drug discovery and personalized medicine transform investor sentiment [57]. Ethical and social aspects should also take a central role in the future investigation, answering the questions of fairness, inclusion, and international readiness to health, in particular, owing to the danger of excessive concentration of investments in several large companies or areas. It would be reinforced by the inclusion of the views of policymakers, healthcare executives, and interest groups representing patients, so that the financial flows could be not only efficient but also socially responsible [58]. Lastly, a future work ought to explore how venture capital and public funding mechanisms interact and how collaborations, subsidies or public-private partnerships can achieve a balance between profitability, accessibility and resilience [59]. Through a more holistic interdisciplinary and globally inclusive approach, future studies have the potential to reveal more about how healthcare investment is changing in a world of rivalry in technological priorities, economic unpredictability, and repeated occurrences of challenges in health care, in order to inform investors, policy-makers and innovators towards a more sustainable model of healthcare financing that both benefits the well-being of society and promotes economic growth.

### VIII. Conclusion

This study analyzed a post-COVID capital market analysis of Healthcare Investment Trends by analyzing how venture capital and mergers and acquisitions have transformed the industry due to the unprecedented global health crises. The results show that although some changes in healthcare investment were very high during the COVID-19, as a result of the urgent need to address the demand on vaccines, diagnostics, and digital care, the post-pandemic picture is much more balanced but competitive. The numbers in the sample indicate that healthcare remains a major recipient of venture capital inflows - especially in biotechnology, telemedicine, and AI-powered diagnostics, yet it also competes with such new sectors as artificial intelligence, fintech and green energy. Its largest portion of venture deals of approximately a third of the total market activity indicates that healthcare remains relevant, but it is no longer the crisis-related domineering force as at 2020/2021. Alternative analysis also highlighted the critical role played by venture funding and M&A where startups are often designed to be acquired, so that innovations can be commercialized in the form of mature systems. This cycle gives stability and scalability and is also a concentration of power in the hands of a few dominant investors and firms. Besides, volatility trends were also noted in the study as the deal activity varies on a monthly basis as the healthcare investment is sensitive to the macroeconomic environment. Nevertheless, the long-term potential of healthcare is its demographic imperatives- aging populations, increasing prevalence of chronic illnesses, and continued need to have a strong health system. Notably, the research defined ethical issues, citing the fact that capital concentration and profit-oriented priorities can pose threats to smaller innovators or underserved populations, which casts doubt on equity and access. To deal with these issues, social responsibility and financial needs should be entrenched in the future healthcare investment patterns. To sum up, healthcare has ceased to be a defensive sector and has become a strategic component of post-COVID capital markets with its resilience and innovation versus stability and competition. It will continue to be a vital industry not only as a source of economic development but also as a pillar of societal livelihood. The continued exercise of this position, however, will require the combination of financial incentives with health objectives in general, where investment strategies become more inclusive, prepared, and sustainable. This two-fold obligation makes healthcare both an economic and a moral imperative in the development of global capital markets in the future.

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