

May 26, 2022

National Stock Exchange of India Limited, Compliance Department, Exchange Plaza, Bandra Kurla Complex, Bandra (East), Mumbai - 400051, Maharashtra, India BSE Limited,

Compliance Department, Phiroze Jeejeebhoy Towers, Dalal Street, Mumbai - 400001, Maharashtra, India

Dear Sir/Madam,

Subject :		Investor Presentation – updated file
Stock Code :	:	<u>BSE – 539787, NSE – HCG</u>

This is with reference to the Investor Presentation filed by the Company today with respect to the Audited Financial Results (Standalone and Consolidated) of the Company for the quarter and year ended March 31, 2022.

Kindly note that there is a typo in page number 31 and 32 of the investor presentation filed with the Exchanges. We are attaching the corrected file for your records.

Request you to take this on record.

Thanking you,

For HealthCare Global Enterprises Limited

mananum

Sunu Manuel Company Secretary & Compliance Officer

Encl: a/a.

HealthCare Global Enterprises Limited

HCG Tower, # 8, P Kalinga Rao Road, Sampangi Rama Nagar, Bangalore - 560027. 080 33669999 | info@hcgoncology.com | www.hcgoncology.com | CIN : L15200KA1998PLC023489



HealthCare Global Enterprises Limited

HEALTHCARE GLOBAL ENTERPRISES LIMITED Q4 & FY22 INVESTOR PRESENTATION



The Specialist in Cancer Care



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INDIA'S LEADING ONCOLOGY FOCUSED NETWORK



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The Specialist in Cancer Care

adding life to years

OVERVIEW

Cancer Care



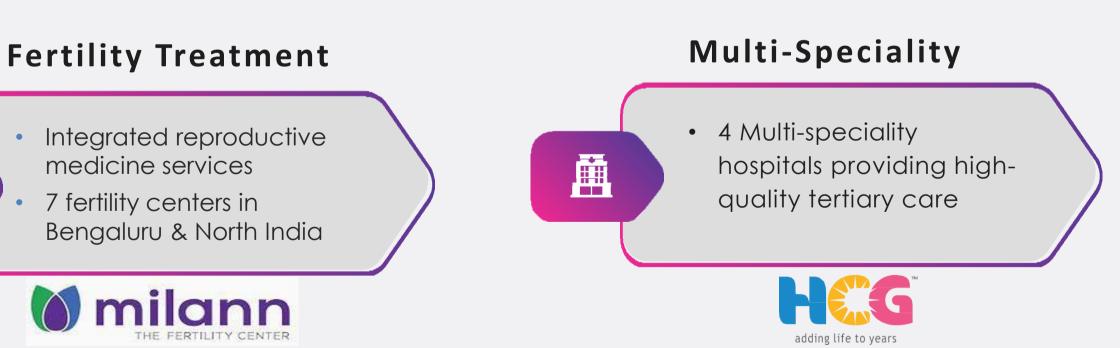
The Specialist in Cancer Care



BACKGROUND

- One of the Largest¹ provider of cancer care in India under "HCG" brand
- Leading provider of fertility treatments under the "Milann" brand





¹In terms of the total number of cancer treatment centers licensed by AERB as of March 31, 2015 (Source: Government of India, Atomic Energy Regulatory Board); ²Includes center in Kenya; Bhavnagar multispeciality also includes comprehensive cancer services hence included in CCC count;

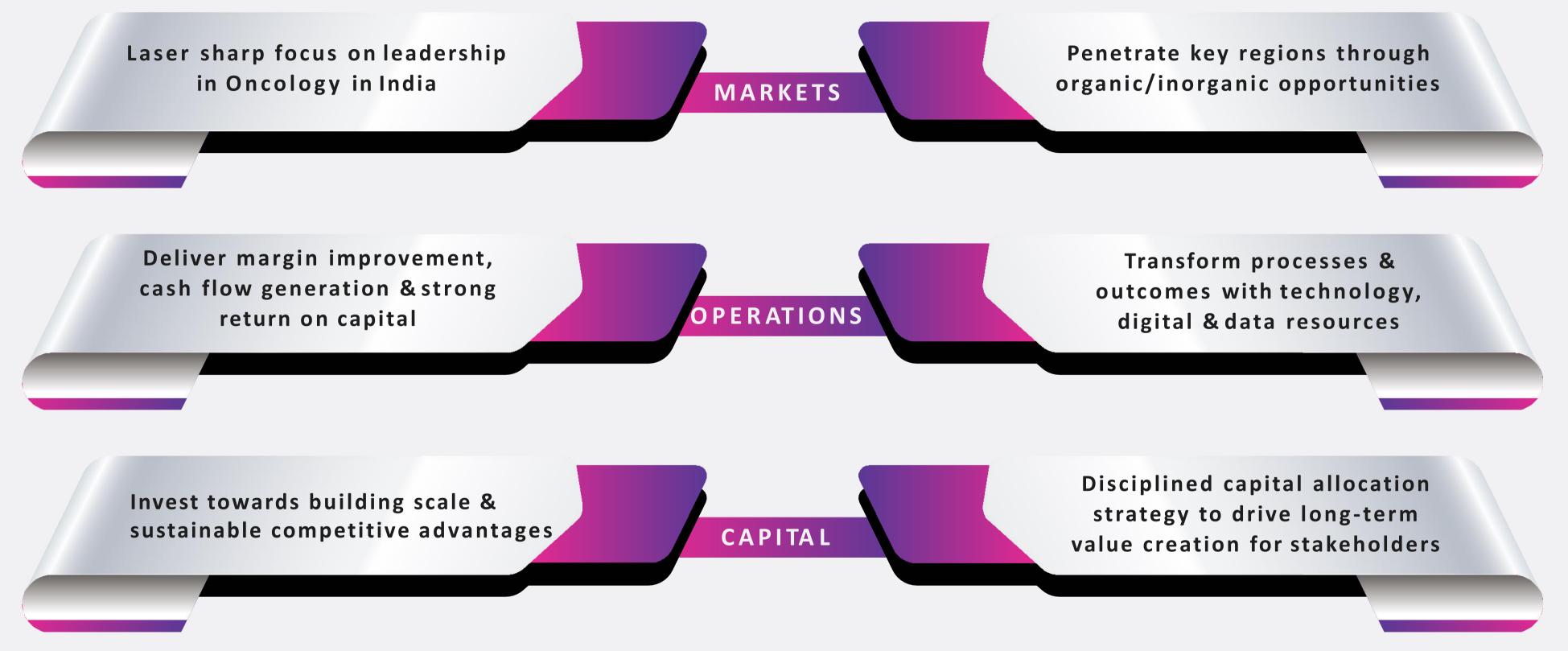
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• Comprehensive cancer diagnosis and treatment services (offering radiation therapy, medical oncology and surgery)

• 22² comprehensive cancer centers (including Kenya)

EXECUTION FOCUSED





KEY INVESTMENT HIGHLIGHTS

FAVORABLE INDUSTRY DYNAMICS: Oncology growing faster than market



LEADING ONCOLOGY NETWORK: No.1 market position in 12+ cities

STRONG TEAM & BOARD: Marquee shareholders, Professional management & competent Board



QUALITY: Infra, technology, talent, outcomes meeting global standards

FOCUSED CARE MODEL: Independent comprehensive cancer centers

TRACK RECORD: Consistent growth across Revenues & Operating profits

SUSTAINABLE GROWTH: Key investments in expansions /capacities completed



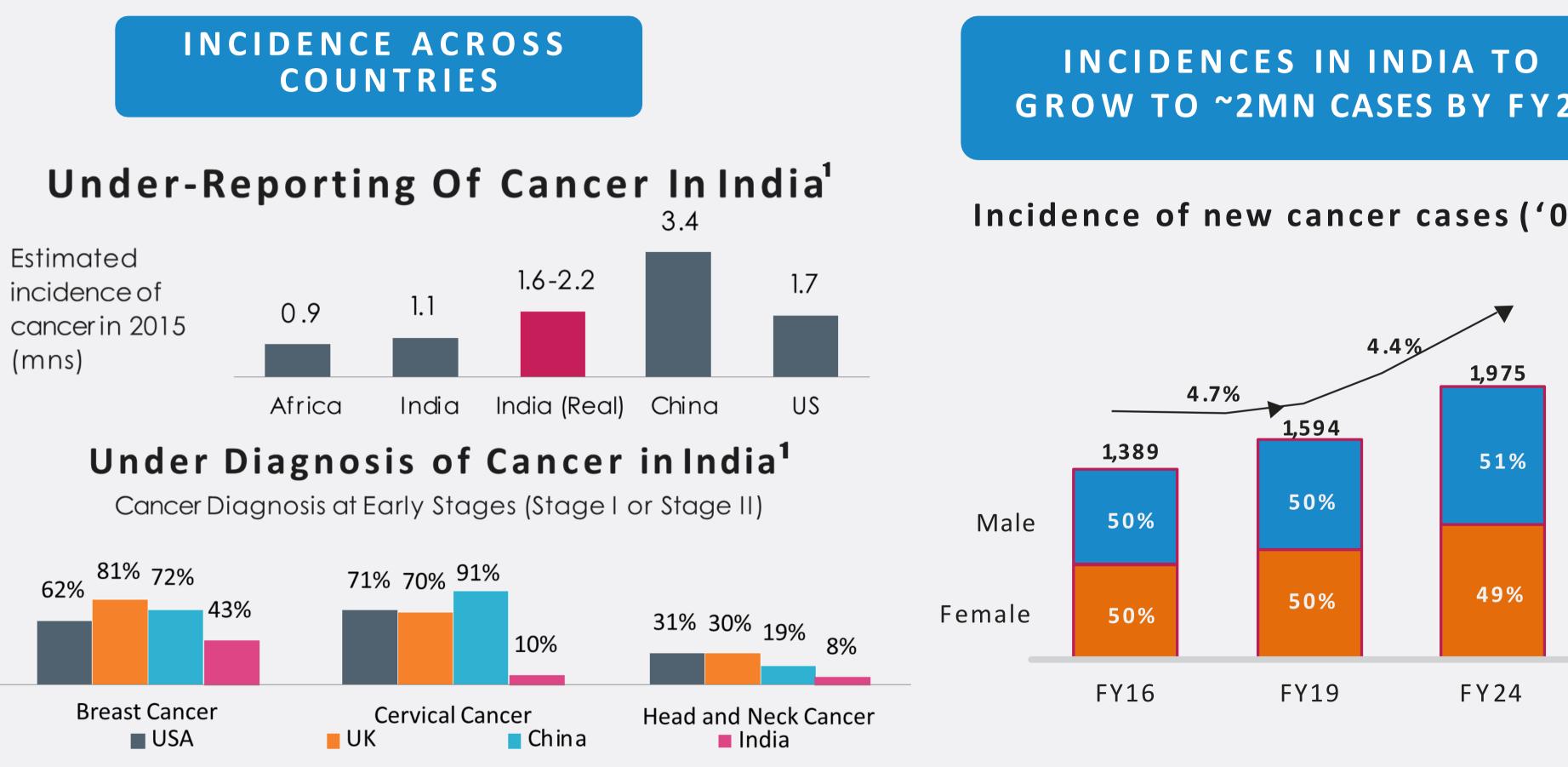
SAVITA DEVI, CANCER WINNER

" I chose the hospital that said my cancer could be treated over the hospital that said I only had six months.



BUSINESS MODEL





¹Call for Action: Expanding cancer care in India dated July 2015, published by Ernst & Young; ²A&M Research

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GROW TO ~2MN CASES BY FY24

Incidence of new cancer cases ('000)²

KEY DRIVERS OF ONCOLOGY OPPORTUNITY

2

Demographic Changes

1

4

Incidences increases with ageing - population >50+ yrs to increase to 262mn, expected to increase 100K to 350K cases a year

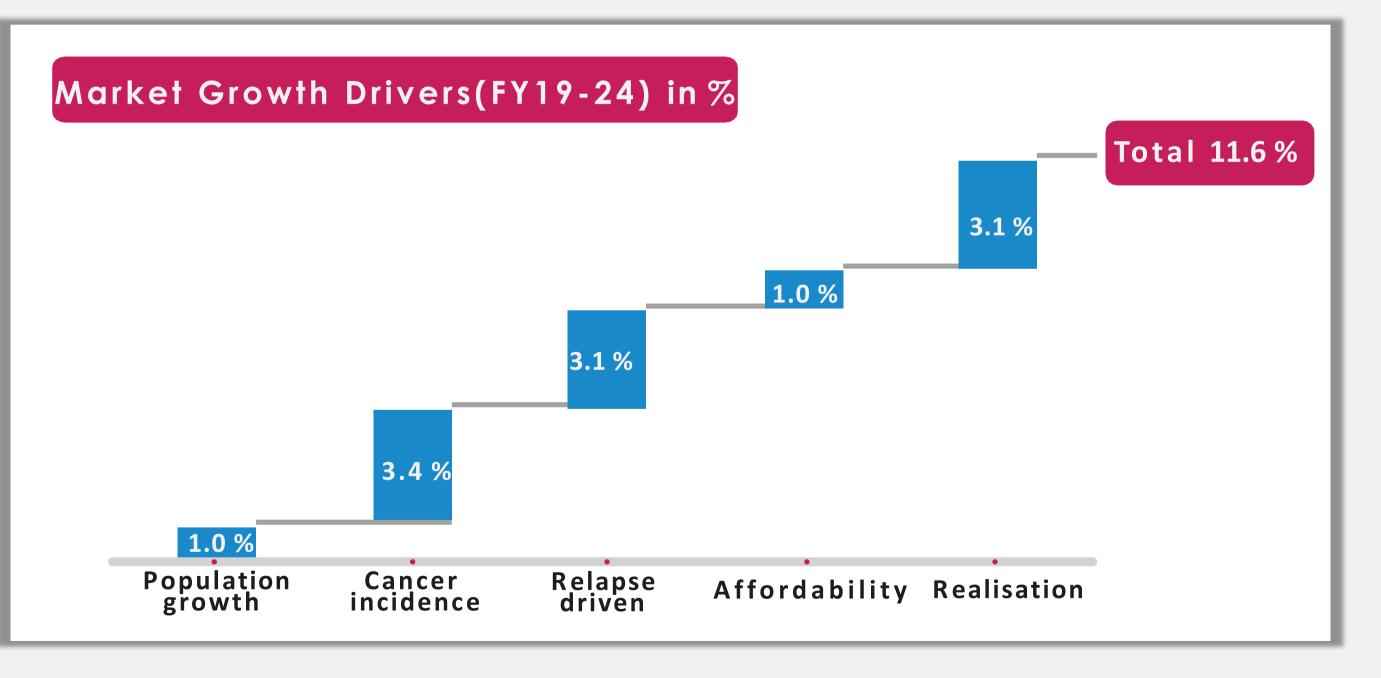
Exposure to Risk Factors

Tobacco use, alcohol consumption, use of processed food and air pollution expected to increase **350K-450K** cases a year

Inadequate Infrastructure Availability of PET CT 1,238 200 137 110 77 China US Africa India UK 0.92 0.05 0.10 0.31 6.20 Per mn Incidence Per mn Population

Availability of LINACs

Region / Country	Number of LINACs (2015)	LINACs per Million Population	Cancer Prevalence per LINAC	Cancer Incidence per LINAC
US	3,818	11.9	1,572	419
UK	323	5.0	3,096	929
China	986	0.7	6,288	3,144
India	342	0.3	7,310	3,216



¹Call for Action: Expanding cancer care in India dated July 2015, published by Ernst & Young; A&M Research

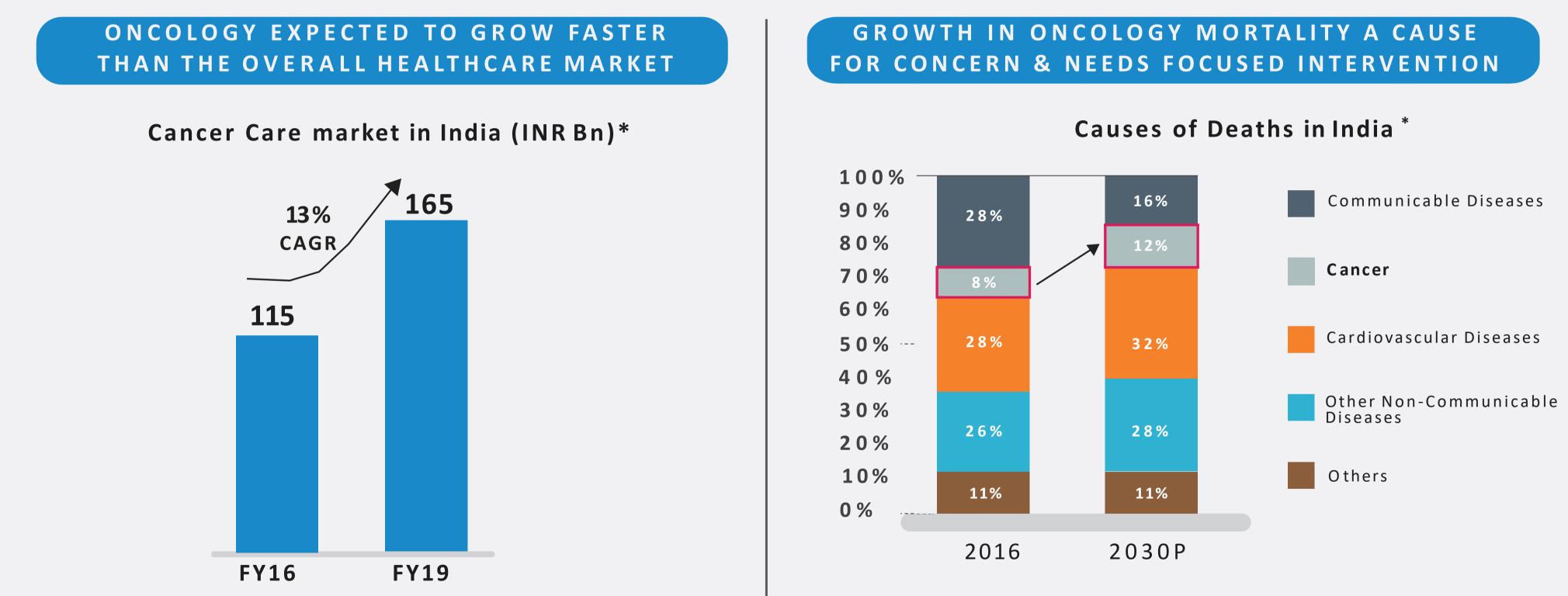
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3 Narrowing Diagnosis Gap

Growing awareness and greater public emphasis on screening expected to result in increased reported cancer rates

ONCOLOGY OPPORTUNITY: GROWING FASTER THAN MARKET



*Call for Action: Expanding cancer care in India dated July 2015, published by Ernst & Young; A&M Research

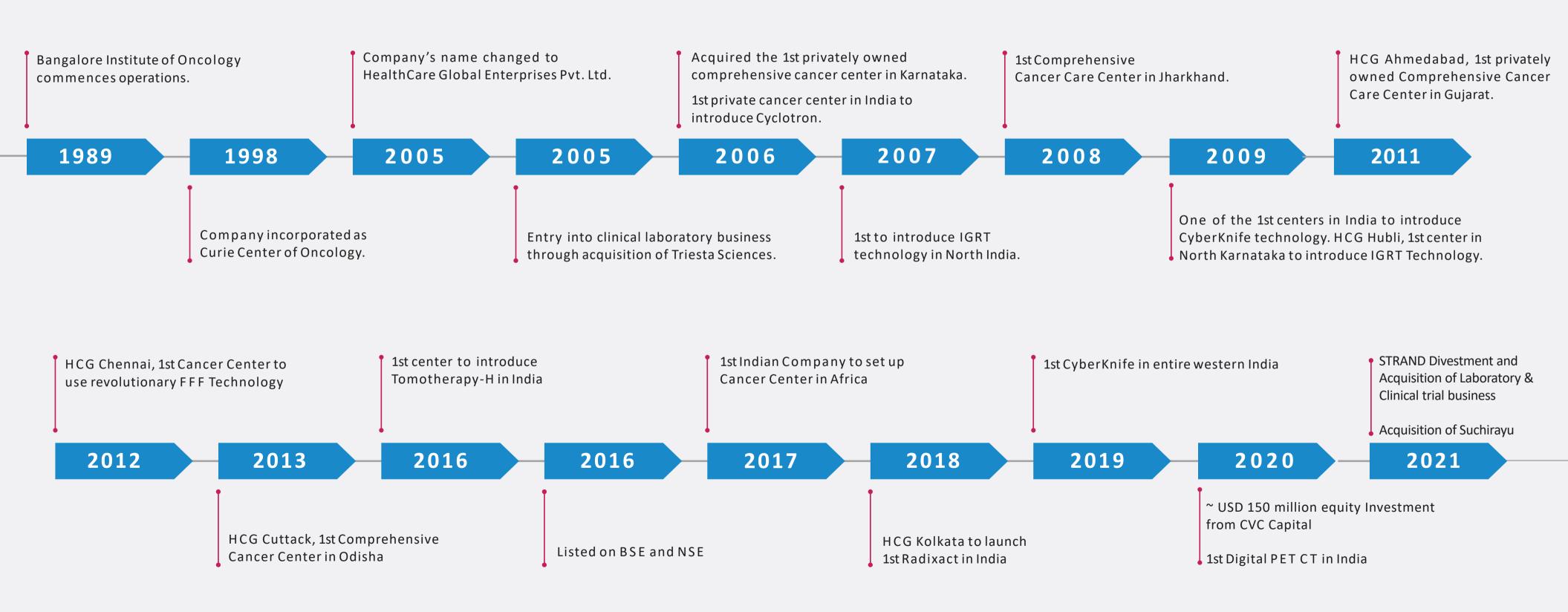
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Source: WHO global burden of disease, India: Health of Nation's States, CRISIL Research

HCG JOURNEY





SUSTAINABLE BUSINESS MODELIN ONCOLOGY



Oncologist promoted with local collaborations have built strong legacy as a Premier Oncology institution



Latest tech. driven excellence at delivering care as per **global** quality standards & outcomes



Largest team of expert Oncologists & domain focused subspecialists









Largest oncology brand & network with hybrid presence (metros / Tier 2,3 towns) pan-India



 Integrated oncology ecosystem driving focus on research & academics economies of scale and



• Investing in oncology IT systems & getting **Digital ready**



SHANKAR, CANCER WINNER

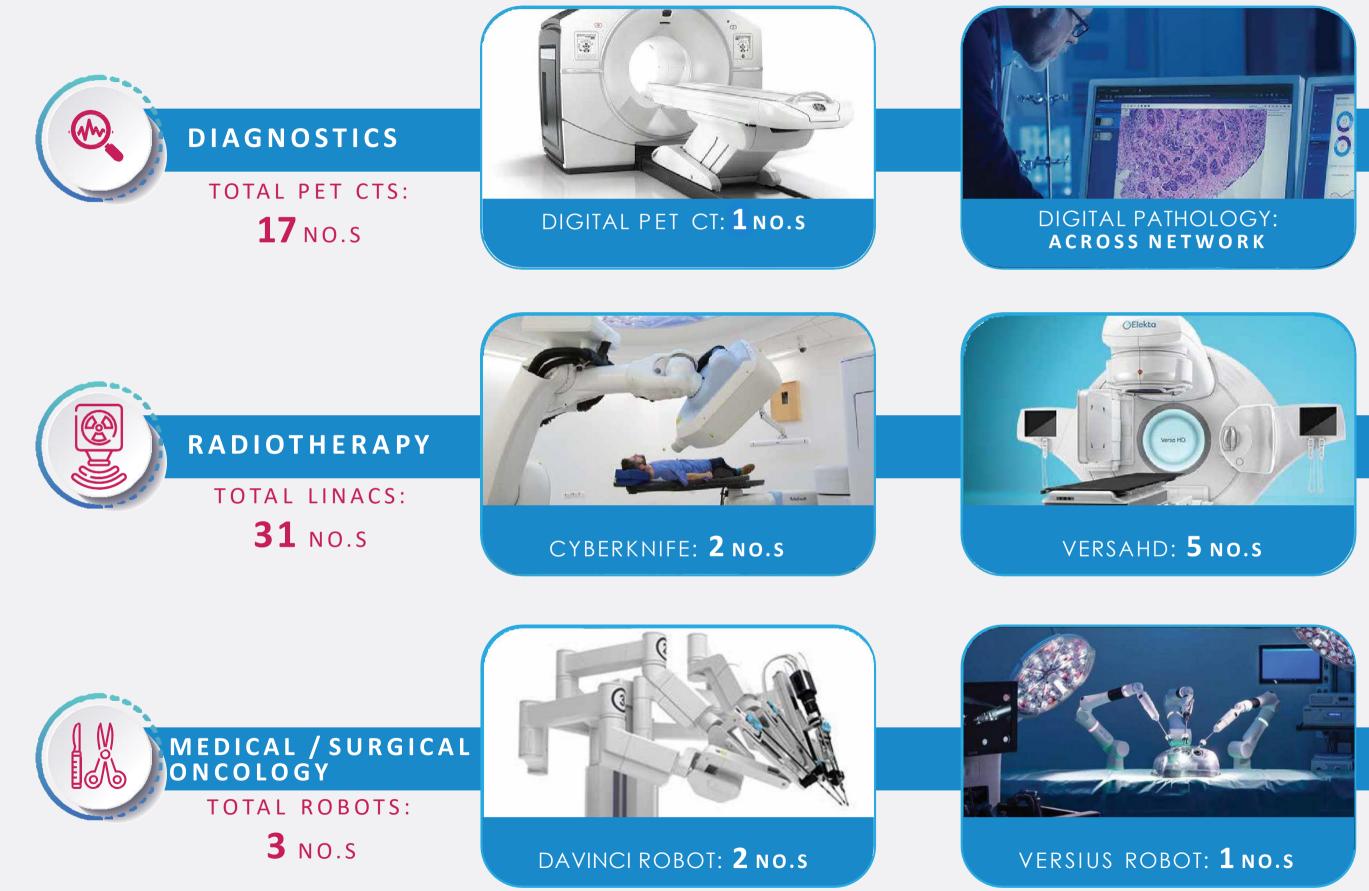
The days I was at HCG, I felt like I was sleeping at home. They never stop caring for you. The doctors and nurses are always finding ways to make this diicult journey as comfortable as possible.

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QUALITY FOCUSED

LEADERSHIP ACROSS ADVANCED & PRECISION **TECHNOLOGIES / SPECIALIZED PROCEDURES**



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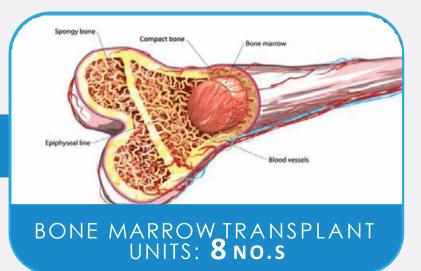




MOLECULAR / GENOMICSLAB: **1** NO.S



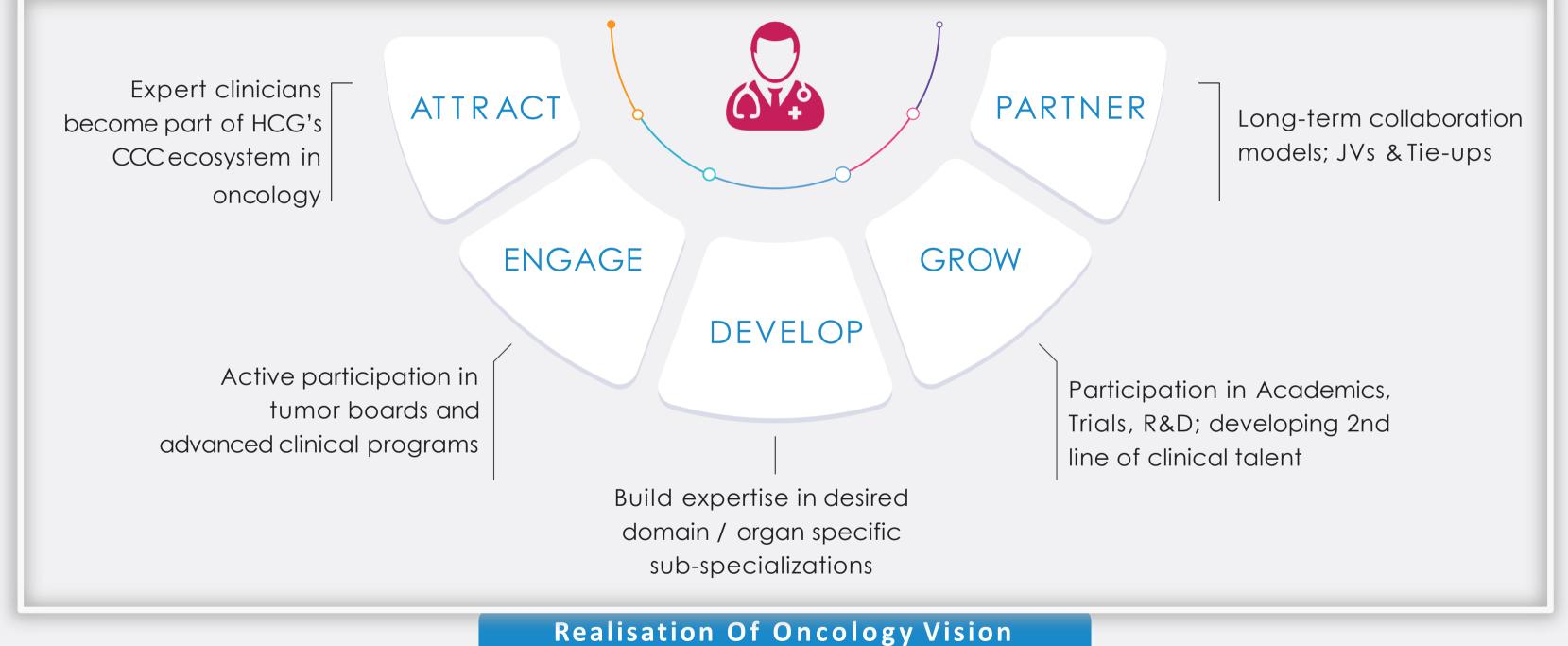
TOMOTHERAPY: **5** No.s



UNIQUE ONCOLOGIST ENGAGEMENT MODEL

INSTITUTION-FIRST

Exclusive engagement with flexibility on pay-out structures (payroll, consultant, fee-for-service)



Realisation Of Oncology Vision for HCG & Clinicians





LOYALTY AND SUSTAINABILITY

Access to best practices, leading technologies, complex cases & large patient volumes

CCC / Comprehensive cancer care center: Defined as offering surgical, medical and radiation oncology services onsite, accompanied by diagnosis / PET CT as well in some cases

QUALITY, RESEARCH & ACADEMICS ECOSYSTEM

QUALITY & RESEARCH INITIATIVES

- Grants by Ministry of AYUSH and DST
- Oral presentations at: Harvard University
- ASTRO meeting
- ESMO meeting
- Society for Integrative Oncology

SELECT CLINICAL TRIALS

- Genomics: Mutations & treatment response and outcomes
- Radiation response & Radio sensitivity using Radiomics and radiogenomics
- Whole exome sequencing to identify novel Targets in head and neck cancers
- Immunotherapy PDL1 inhibitors, T cell activation, Dendritic celltherapy

HCG ACADEMICS

Oncology

- DNB
- Fellowships
- Certificate programs

Allied health services

- B.sc.
- Bachelor: Hospital administration
- Certificate programs

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PUBLICATION PUBLISHED

* CLINICAL AUDITS CONDUCTED

Innovation @ HCG

Life of a Laryngectomy person Is marked by many problems including no voice box, breathing through a Trachea-stoma, absence of nasal breathing unable to smell and altered taste & swallow. In order to aid their problems, we at Hcg, supporting our In-house Doctor/inventor introduced Aum - Voice Box. It is an Innovative device made of Silicone, helping people to regain their voice at a fractional Cost.





Courses Offerec



Diploma

Certificate programs

#For financial year FY21

FOCUS ON EXPERTISE & EXCELLENCEIN ONCOLOGY



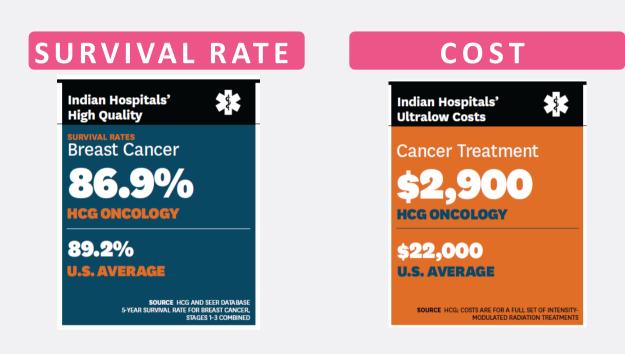
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COVERAGE BY HARVARD

GLOBALLY COMPARABLE OUTCOMES

N9-313-030 JULY 27, 2012



STUDY FINDING | Seo • amsterdam economics

The quality indicators by HCG suggest that the experienced quality of care at HCG is high. The outpatient satisfaction ratio was 87.4% on average during 2018 while the inpatient satisfaction ratio was similarly high at 86.5%. This is high when compared with, for example, the Overall (inpatient) Patient Experience Score of 76.2% for NHS hospitals in the UK during 2018-19

*Only for COE, Bangalore

CLINICAL MILESTONES



Asia's first bloodless Bone Marrow Transplant was performed by our experts.



We introduced biological reconstruction to treat bone cancer in India.



India's first Computer Assisted Tumour Navigation Surgery (CATS) was brought in by us.



Cyberheart – First hospital in India to remove a tumour in the left ventricle of the heart through CyberKnife.



HCG is the first hospital in India to introduce Flattening Free Filter (FFF) mode technology for treatment.



We were the first in India to save a patient's vocal cord through the world's most advanced laser technology.



It is also the first in Asia to have treated a patient with 3D radio-guided surgery – Surgic Eye.



It is the first hospital in India to introduce high precision, Trans-Oral, Laser Surgery (TOLS), endoscopically.

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HCG has conducted the largest number of Breast Conservation Surgeries in India.



It was the first in India to introduce Hyperthermia as a form of treatment.



HCG is the first hospital in India to introduce TomoTherapy H®.



First in the world to perform the quickest Radio Surgery to treat Trigeminal Neuralgia ("The Suicide Disease").



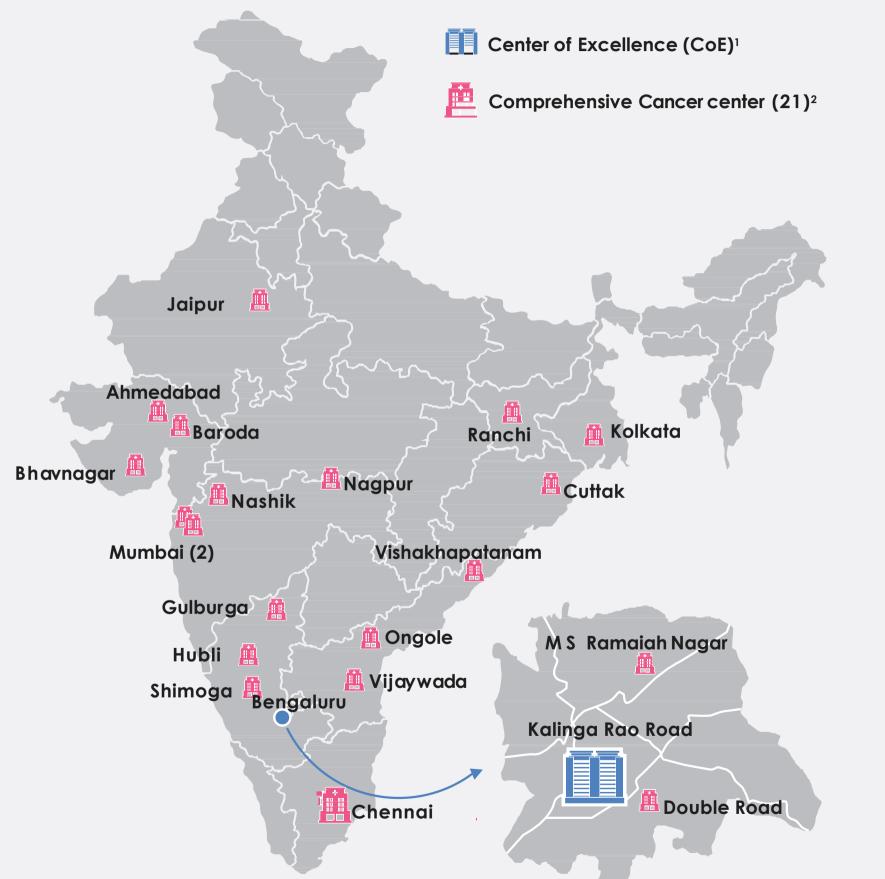
MARKET LEADERSHIP

ARJUN MANDAL, CANCER WINNER

I wholeheartedly thank Dr Aftab and HCG team for diligently handling my case and helping me recover without any diiculties. I am delighted to say that today I am leading a healthy and cancer-free life.



INDIA'S PREMIER CANCER CARE NETWORK



¹ Includes 2 centers, KR & DR; ² As on 31st March' 2022 includes COE & center in Kenya, Bhavnagar multispecialty also includes comprehensive cancer services hence included in CCC count ; ³ Beds include the Beds at Multispecialty also

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HCG NETWORK



1,944 CAPACITY BEDS³



1,702 OPERATIONAL BEDS³



31 LINEAR ACCELERATORS



PET-CT SCANNERS



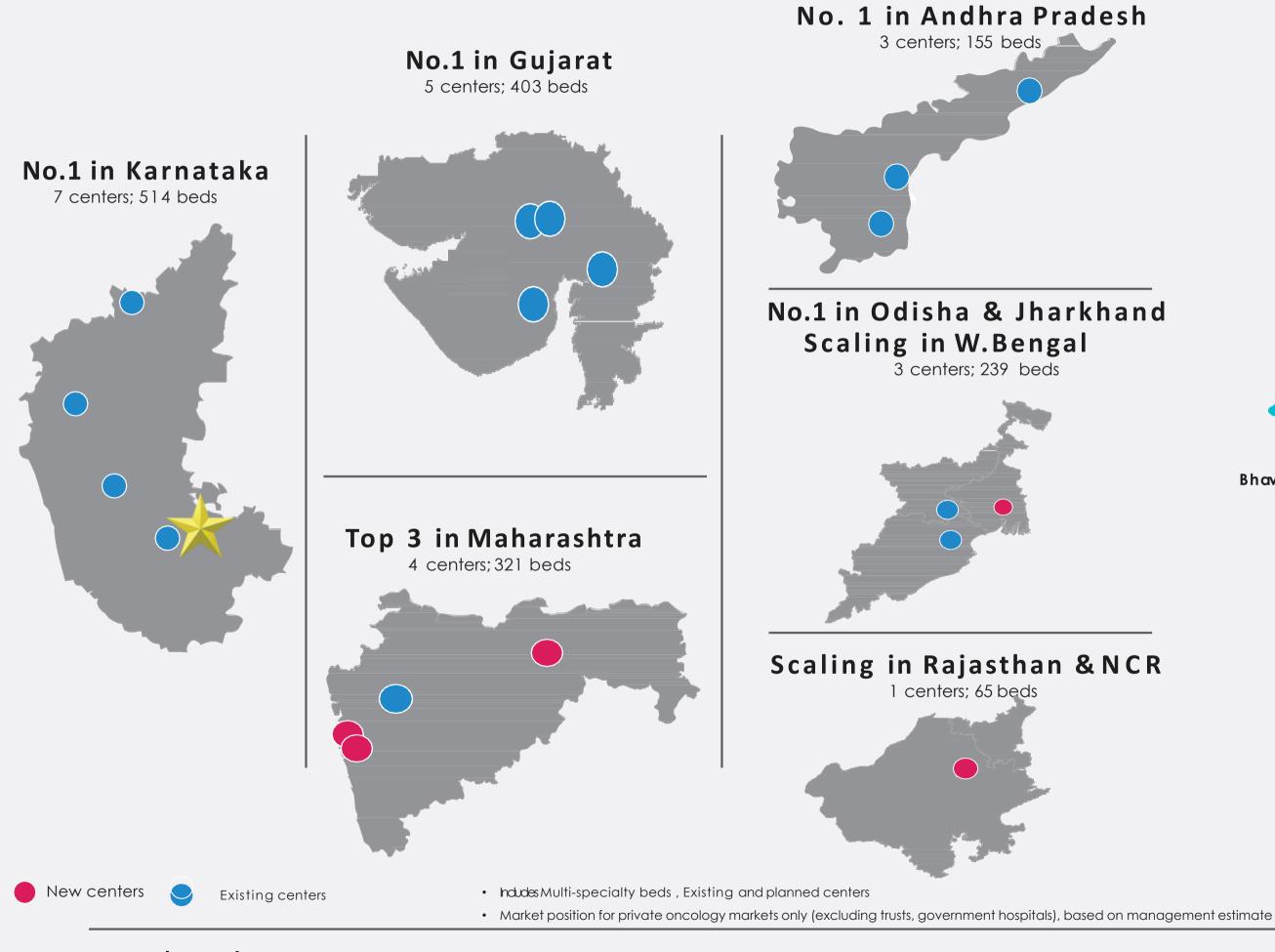
80 **OPERATION THEATRES**

HCG ACCESS / PATIENT CATCHMENT





INDIA'S PREMIER CANCER CARE NETWORK







UNMATCHED PRESENCE IN NON-METROMARKETS

COMPREHENSIVE CANCER CENTERS

NON-METRO CENTERS	B E D S (#)	MARKET POSITION	
ΝΑSΗΙΚ	206	NO.1	
N A G P U R	121	NO.1	Over 60%
CUTTACK	116	NO.1	hospitals,
BHAVNAGAR ¹	87	NO.1	Accounts
VIJAYAWADA	75	NO.1	over 50%
RANCHI	74	NO.1	
BARODA	63	NO.1	Estab
SHIMOGA	47	NO.1	leadi
G U L B A R G A	43	NO.1	orgar
HUBLI	31	NO.1	
ONGOLE	30	NO.1	
VIZAG	50	NO.2	Орро
Total	943		demo
	945		onco
% of Total Cancer Beds	61.7 %		

• Market position for private oncology markets only (excluding trusts, government hospitals), based on management estimate; ¹Includes Multispecialty Beds

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THE 'BHARAT' OPPORTUNITY:

GAPS IN RURAL HEALTHCARE MARKET

- % of population has access to less than 30% of
- , beds and doctors
- s for 70% communicable disease cases, and
- of non-communicable disease

olished high-quality infrastructure and ing technologies with relatively little nized competition in most regions

ortunity to create leadership with growing and from Tier II/III cities while delivering ology care last-mile / inclusively

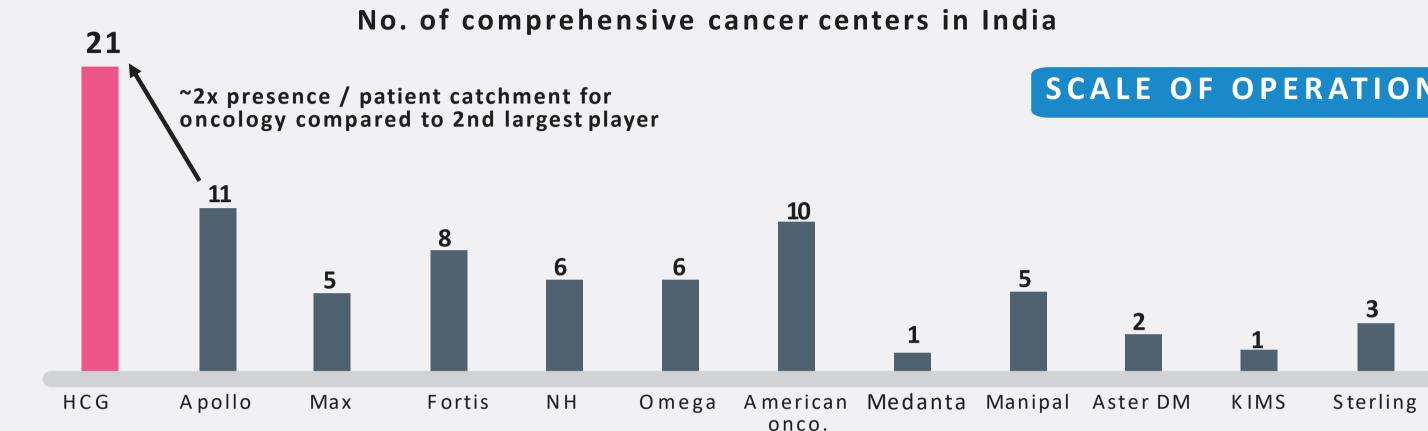
SPECIALIZATION DRIVING COMPETITIVE ADVANTAGES

PARAMETERS DRIVING EXCE	HCG MODEL	MULTI-SPECIALTY MODEL		
1. Dedicated / Independent and 'built-to-	suit' facilities	Ä	Established	Absent
2. Comprehensive/integrated oncology se	ervice offerings(er	nd-to-end) 🛞 🎉 🕅	Established	Lacking
3. Attracting / retaining expert oncologist	s on exclusive/full	-time basis 🛛 🍅	Established	Executing
4. Advanced technologies, sub-specializat	tion and complext	reatments	Executing	Executing
5. Genomics driven pathways, MDT (multi	-disciplinary tumo	rboards) 🎽 🍥	Executing	Lacking
6. Oncology specific R&D, Academics and	training programs		Executing	Lacking
7. Onco-focused brand recall, trust of refe	rral network, scale	e benefits	Executing	Executing
8. 2+ decades legacy, treated over 1mn on	co. patients & com	plex cases 🛛 🎁	Established	Lacking
9. Capital efficiency & sustainability (o	Established	Absent		
SCORE	Established (network-wide)	Executing (focused adoption)	Lacking (selective adoption)	Absent (no adoption)
HCG MODEL (Independent cancer-only centers) MULTI-SPECIALITY MODEL	5 -	4 3	- 4	- 2

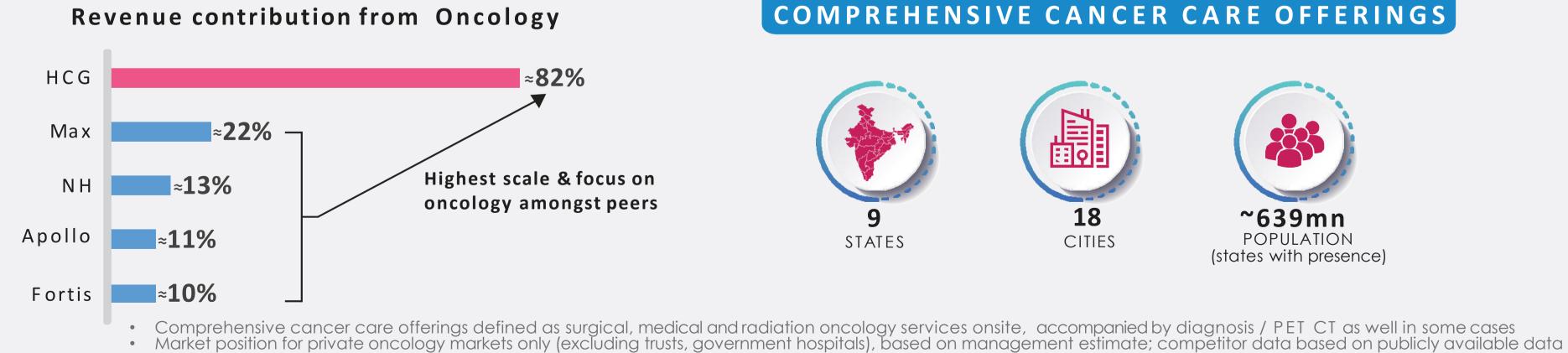
Comprehensive cancer care offerings defined as surgical, medical and radiation oncology services onsite, accompanied by diagnosis / PET CT as well in some cases



SIGNIFICANT SCALE, FOCUS & PRESENCE OVER PEERS



FOCUS OF BUSINESS



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SCALE OF OPERATIONS & INFRASTRUCTURE

PRESENCE / CATCHMENT WITH





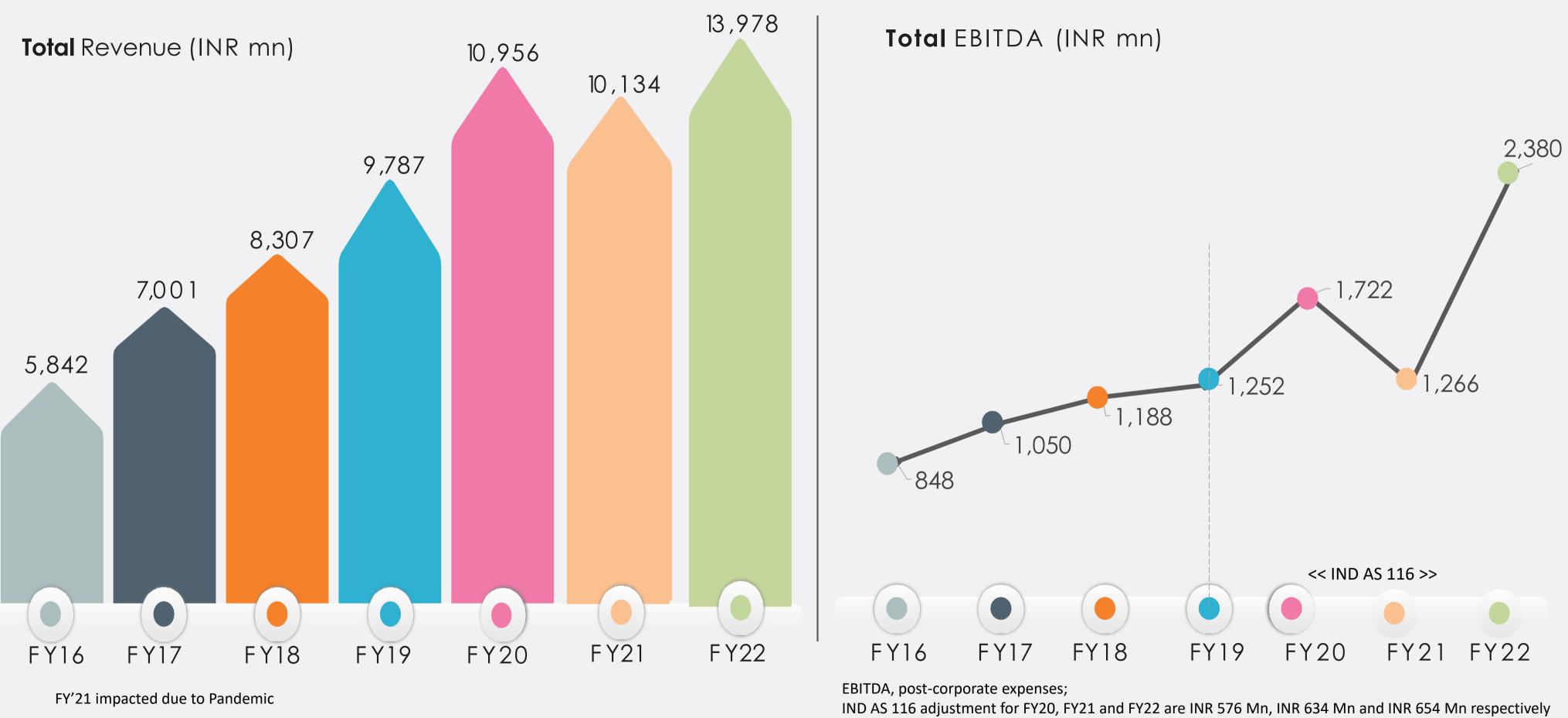
SUBASINI LENKA, CANCER WINNER

am eternally thankful to Dr Panda and other specialists at HCG Panda Cancer Hospital, as the specialists were able to treat my condition the right way, the first time.



SUSTAINABILITY

DEMONSTRATED TRACK RECORD





STRONG GROWTH & LEADERSHIP STRATEGY

Existing Centers

- Singular organization focus driving growth
- Optimization measures to improve margin
- Cohesive engagement of clinical, sales & Ops to
- increase market share

Trusted Brand

HCG as the destination for quality cancer in India

 Direct-to-patient promotion strategies, including investments in leveraging network & enhancing patient experience

IP/ Digital Technology / Data

- Cutting edge R&D in cancer care (cell therapies, personalized radiotherapy, genomics etc.)
- Leverage internal technologies (HIS, EMR, Images, Dig. pathology) and Digital health initiatives





New Centers

- Stabilize operations and drive strong ramp-up
- Clinical engagement to bring best talent and
 - establish quality as per benchmarks
 - Preference for brownfield v/s greenfield centers

Asset Light Growth

- Shift from equipment purchase to pay-per-use
- Hospital buildings primarily on lease, Investment focus on medical equipment and technology

PROMOTERS WITH STRONG PEDIGREE

Dr. BS Ajaikumar **Promoter &** Executive Chairman

ONCOLOGY DOMAIN KNOWLEDGE AND EXPERIENCE IN INDIA/USA

- MBBS from St.Johns & Radiation / Medical oncologist from MD Anderson
- Over 40yrs+ of experience in practicing oncology in India & US
- Awarded the Ernst and Young Entrepreneur of the Year Award, the CII Regional Emerging Entrepreneurs Award, and the BC Roy Award by the Indian Science Monitor
- Successfully raised capital and provided exits to marguee PE investors and led public listing of HCG

TRACK RECORD OF VALUE CREATION ACROSS INVESTMENTS

- of over US\$100bn
- 34+ yrs of proven record of Private Equity investment success
- 300+ investments since 1981 with global offices leading buyout deals
- 180+ investment professionals from over 31 nations
- USD 85bn funds committed generating compelling returns across sector, geography and cycles with a loyal & diversified investor base
- Home(Spain), Mehilainen (Finland), Elsan (France) and Hitowa Holdings (Japan)



Promoter & Member of Board



Stakes in more than 50 companies worldwide, employing around 300,000 people and generating annual sales

Marquee current and prior investments in healthcare services including PT Siloam (Indonesia), Afinity Health (Australia), Metropolitan Hospital (Greece), General Healthcare Group (UK), Medivet (UK), Vitalia

RESPONSIBLITY & GOVERNANCE FOCUSED

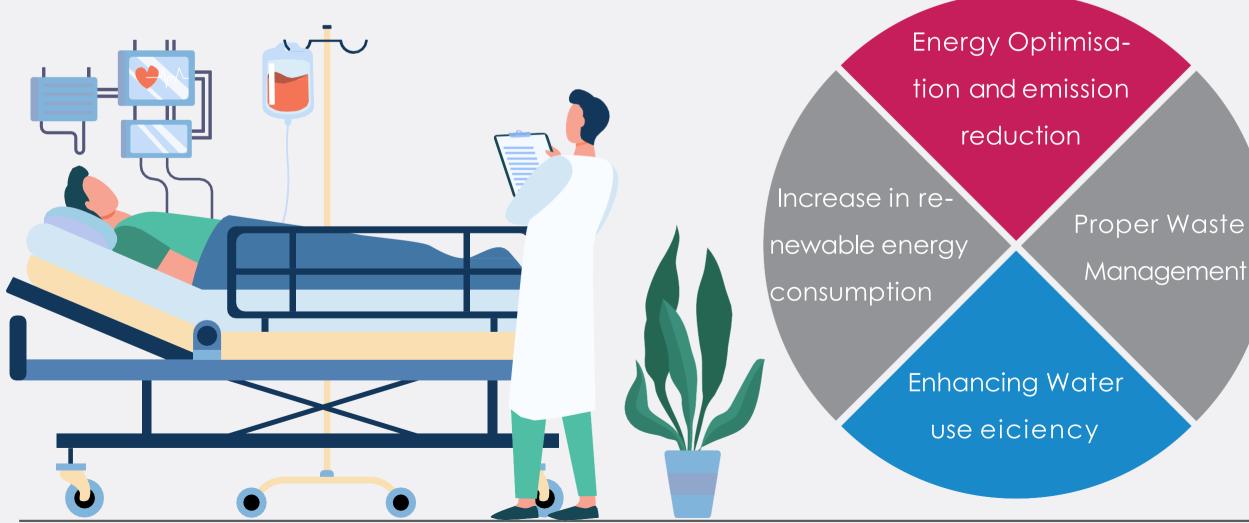
SETTING ESG BENCHMARKS

- Establishing an environmental policy
- Assessing the impact of operations on the environment
- Implementing ESG standards, laws and procedures
- Raising awareness and initiating behavioural changes
- Auditing community contributions & sustainability



Pioneer among hospitals to adopt Integrated **Reporting (IR)** disclosures covering performance against Financial, the organization

Framework in FY19 with Manufactured, Social, Intellectual, Natural & Human Capitals across



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- Managing energy needs as an integral part of operational strategy to ensure eicient energy utilization
- Constantly monitor and record our energy consumption across operations and set thresholds to keep consumption within prescribed limits
- Adopt renewable energy to ensure optimum utilization of resources
- Installed solar roof tops, LED lights etc. initiatives towards reducing carbon footprint

1593 KVA Capacity of solar rooftop



INDIA'S LEADING ONCOLOGY FOCUSED NETWORK

PE FOR CANCER PATIENTS

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FINANCIAL HIGHLIGHTS

FINANCIAL HIGHLIGHTS: Q4-FY22

INR million except earnings per share

Period ended Mar'22	Q4-FY22	Q4-FY21	Growth (y-o-y)
Income from Operations	3,646	2,981	22.3%
EBITDA ⁽¹⁾	661	438	51.2%
EBITDA margin (%)	18.1%	14.7%	
Operating EBITDA ⁽²⁾	631	394	60.4%
Op. EBITDA margin (%)	17.3%	13.2%	
PBT ⁽³⁾	9	(1044)	NM
PBT margin %	0.2%	-35.0%	
PAT ⁽⁴⁾	60	(1022)	NM
PAT margin %	1.6%	-34.3%	
Earnings per share (EPS)	0.43	(8.49)	NM
Proforma Op. EBITDA ⁽⁵⁾	676	394	72 %
Proforma EBITDA margin	18.5%	13.2%	
Proforma PAT ⁽⁶⁾	67	(155)	NM

- 1) Profit before depreciation/amortization, finance costs, exceptional items and taxes
- 2) EBITDA excluding other Income, Includes new ESOP scheme expenses INR 19 Mn-Q4'22 and onetime project fee for support on strategic and operational objectives, INR 25 Mn – Q4'22
- 3) Profit / (Loss) before tax and after share of profit / (loss) of equity accounted investee.
- 4) Profit / (Loss) for the period after share of profit / (loss) of equity accounted investee, taxes and minority interests
- 5) Proforma Op. EBITDA is after normalizing for ESOP scheme expenses and one-time project fee
- 6) Proforma PAT is after normalizing for one-time project fee, impairment loss and exceptional gain and tax implications there of

Note: Effective April 2019, the Company has adopted IND AS 116'Leases' standards, applied to lease contracts existing on April 2019 and all financials are as per IND AS 116. Operating EBITDA adjustment on account of IND AS 116was INR 164.5 mn for Q4-FY22 as against INR 159.5 mn for Q4-FY21

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Q4'22 Revenue grew by 22.3% y-o-y

- HCG⁽¹⁾ centers grew by 22.9 %
- Milann centers grew by 11.4 %
- International business ramping up and near to pre COVID levels

Q4'22 Operating EBITDA

- Existing centers⁽²⁾: INR 610 Mn (22.0% margin vs 18.3% margin in Q4-FY21)
- New centers⁽²⁾⁽³⁾: INR 21 Mn (vs. loss of INR (46) Mn in Q4-FY21)

Q4'22 Proforma PAT: INR 67 Mn is after adjusting below

- and tax implications there of;
 - Onetime project fee of Q4'22 INR 25 Mn
 - ESOP Scheme expense of Q4'22 INR 19 Mn
 - DTA recognized on tax expense through the year, on account of discontinuation of Kochi project, INR (25) Mn

1) 22 comprehensive cancer centers, 3 multispecialty hospitals

3) 8 HCG centers and 3 Milann centers that commenced operation after April 1, 2017

²⁾ Corporate cost allocated between existing and new centers in proportion to gross block

FINANCIAL HIGHLIGHTS: FY22

INR million except earnings per share

Period ended Mar'22	FY22	FY21	Growth (y-o-y)
Income from Operations	13,978	10,134	37.9%
EBITDA ⁽¹⁾	2506	1435	74.6%
EBITDA margin (%)	17.9%	14.2%	
Operating EBITDA ⁽²⁾	2380	1266	88.0%
Op. EBITDA margin (%)	17.0%	12.5%	
PBT ⁽³⁾	878	(2287)	NM
PBT margin %	6.3%	-22.6%	
PAT ⁽⁴⁾	537	(1935)	NM
PAT margin %	3.8%	-19.1%	
Earnings per share (EPS)	4.34	(9.41)	NM
Proforma Op. EBITDA ⁽⁵⁾	2480	1266	96 %
Proforma EBITDA margin	17.7%	12.5%	
Proforma PAT ⁽⁶⁾	(13)	(980)	NM

- 1) Profit before depreciation/amortization, finance costs, exceptional items and taxes
- 2) EBITDA excluding other Income, Includes new ESOP scheme expenses 55 Mn –FY'22 and one-time project fee for support on strategic and operational objectives, INR 45 Mn FY'22
- 3) Profit / (Loss) before tax and after share of profit / (loss) of equity accounted investee. FY'22 is adjusted for the impairment of NCR project of INR 472 Mn and exceptional gain of INR 1,419 Mn arising out of Strand and Suchirayu acquisition
- 4) Profit / (Loss) for the period after share of profit / (loss) of equity accounted investee, taxes and minority interests
- 5) Proforma Op. EBITDA is after normalizing for ESOP scheme expenses and one-time project fee
- 6) Proforma PAT is after normalizing for one-time project fee, impairment loss and exceptional gain and tax implications there of

Note: Effective April 2019, the Company has adopted IND AS 116'Leases' standards, applied to lease contracts existing on April 2019 and all financials are as per IND AS 116. Operating EBITDA adjustment on account of IND AS 116 was INR 654 mn for FY22 as against INR 634 mn for FY21

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FY22 Revenue⁴ grew by 37.9 % y-o-y

- HCG⁽¹⁾ centers: +37.8 %
- Milann centers: +39.8 %

FY22 Operating EBITDA⁴

- Existing centers⁽²⁾: INR 2,308 Mn (21.5% margin vs 17.4% margin in FY21)
- New centers⁽²⁾⁽³⁾: INR 72 Mn (vs. loss of INR (157) Mn in FY21)

FY'22 Proforma PAT: INR (13) Mn is after adjusting

below and tax implications there of;

- Impairment of NCR Project INR 472 Mn
- Exceptional gain of INR (1419) Mn arising out of Strand and Suchirayu acquisition
- Onetime project fee of FY'22 INR 45 Mn
- ESOP Scheme expense of FY'22 INR 55 Mn
- DTA recognized on tax expense through the year, on account

of discontinuation of Kochi project, INR (25)Mn

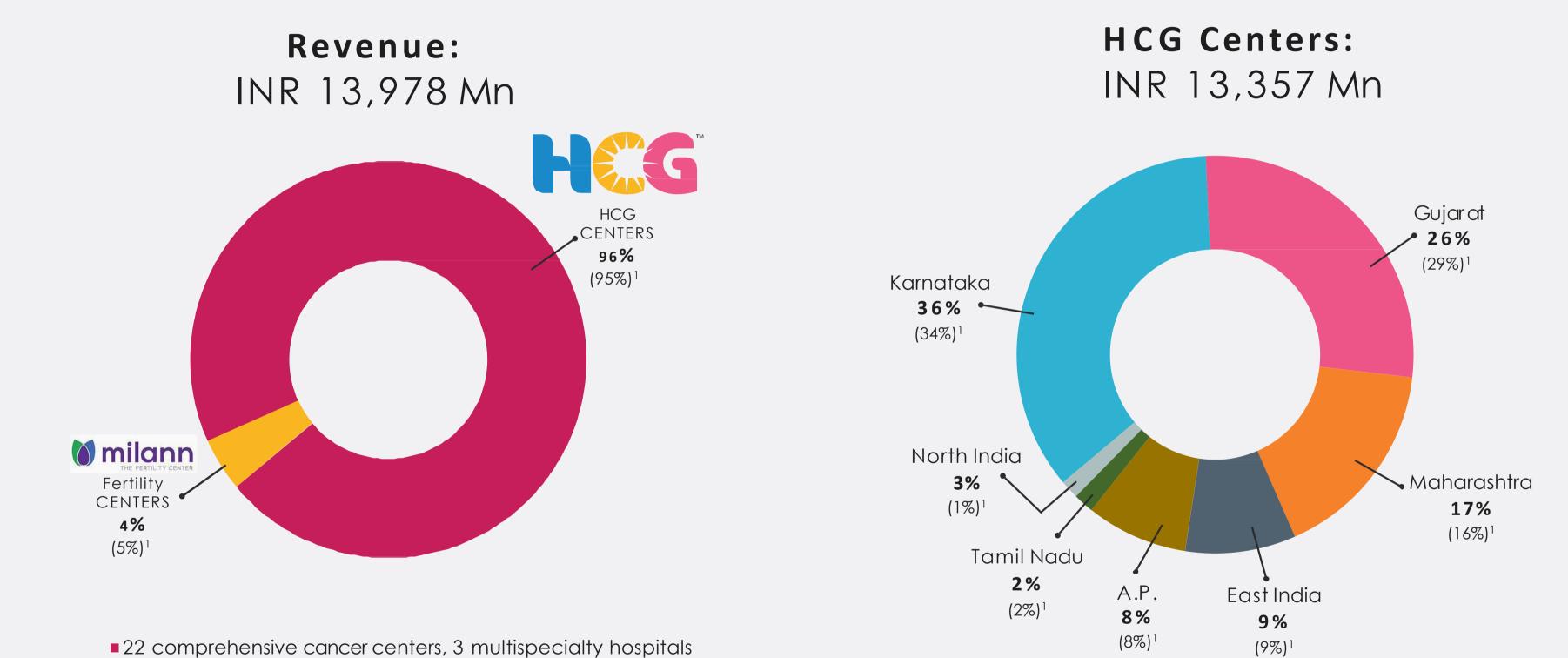
4) Revenue and Operating EBITDA inclusive of Vaccination Business; Revenue INR 414 Mn and Contribution of INR 106 Mn

^{1) 22} comprehensive cancer centers, 3 multispecialty hospitals

²⁾ Corporate cost allocated between existing and new centers in proportion to gross block

^{3) 8} HCG centers and 3 Milann centers that commenced operation after April 1, 2017

REVENUE MIX: FY22



7 fertility centers operated under "Milann" brand



¹F Y 2 1

HCG CENTERS: Q4-FY22 REVENUES

INR million

Period ended Mar'22	Q4-FY22	Q4-FY21	Growth (y-o-y)	FY22	FY21	Growth (y-o-y)
Karnataka	1,262	1,038	21.5%	4,748	3,426	38.6%
Gujarat	913	757	20.6%	3,518	2,673	31.6%
Maharashtra	529	475	11. 4 %	2,275	1,607	41.6%
East India	301	248	21.7%	1,168	872	33.9%
Andhra Pradesh	281	234	20.1%	1,047	804	30.3%
Tamil Nadu	60	47	29.4%	231	160	44.7%
North India	129	40	220.6%	343	148	132.2%
Africa	13	NA	NA	27	NA	NA
	3,488	2,839	22.9 %	13,357	9,690	37.8%



trong growth in revenue continues across enters in Q4-FY22

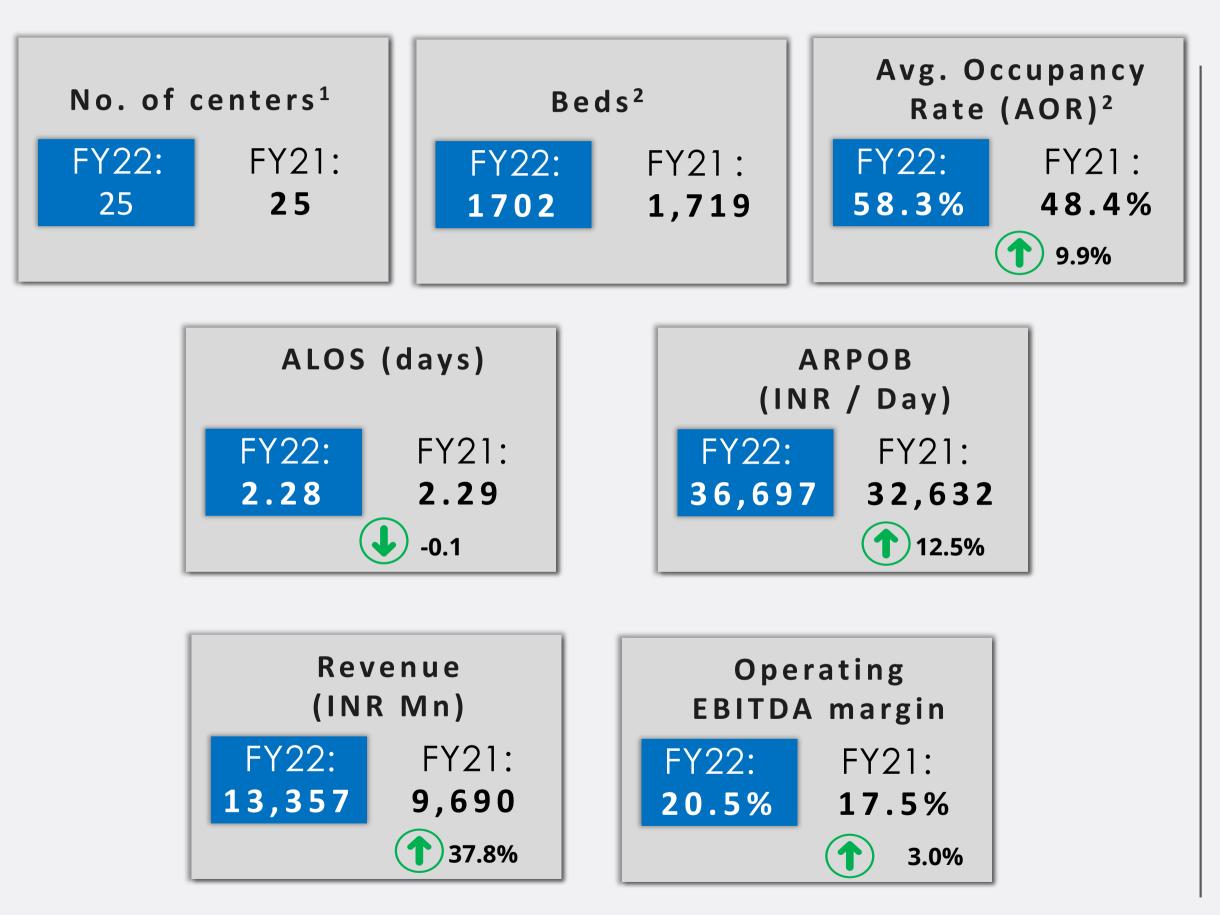
- Jaipur: +220.7 % y-o-y
- South Mumbai +89.2 % y-o-y
- Nagpur: +49.3 % y-o-y
- Ranchi: +41.4 % y-o-y
- HMS: +38.0 % y-o-y

evenue from New Centers of INR 826 Mn in

- Q4-FY22 vs 535 Mn in Q4-FY21, a growth of
- 54.3% (y-o-y)

xisting Centers Revenue Growth of +15.6% in Q4-FY22 (y-o-y)

HCG CENTERS: FY22 OPERATING METRICS



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Increase in Avg. Occupancy Rate in Q4-FY22 (y-o-y)

- 59.9% vs 54.1%% (Consolidated)
- 59.1% vs 55.5 % (Existing centers)

Increase in Existing center ARPOB in Q4-FY22 (y-o-y)

INR 39,725 vs INR 35,545 11.8% y-o-y growth

Notes:

- 1) No. of Centers includes Cancer and Multispecialty hospitals operated under HCG brand and managed by HCG
- 2) Number of operational beds as at the last day of the period. Q4'21 is recast as organization has transitioned reporting metrics from capacity beds to operational beds basis
- 3) Occupied Bed Days calculated based on mid-day census
- 4) Average Occupancy Rate ("AOR") calculated as Occupied Bed Days divided by operational bed days in the period
- 5) Average Revenue per Occupied Bed ("ARPOB") calculated as Revenue (gross for the hospital) divided by Occupied Bed Days
- 6) Average Length of Stay ("ALOS") calculated as Occupied Bed Days divided by number of admissions (including day care admissions)
- 7) Operating EBITDA margin before corporate expenses
- 8) ARPOB is excluding COVID Vaccination Revenue. With Vaccination the ARPOB for FY22 at consolidated level is INR 37.8K, at existing center is INR 38.2K

HCG CENTERS: FY22 REGIONAL HIGHLIGHTS

1200	Centers	Beds	AOR	ARPOB/Day	Revenue (INR Mn)	Operating EBITDA%	
•••	Karnataka	514	62.8% 16.5%	41.8 K 1 5.9%	4,748 38.6%	23.8%	 COE performance in FY22 Revenue growth 39.6% y-o-y ARPOB of INR 56.8k vs 48.8K (FY21) 25.8% operating EBITDA margin Tier 2 Oncology Growth led by; Hubli 43.6% in FY22 y-o-y
	Gujarat	403	54.9% 14.0%	43.4 K 14.2%	3,517 31.6%	21.8%	 Strong revenue growth in FY22 on y-o-y basis: Oncology revenue grew by 33.2% Multispecialty revenue grew by 28.0% ARPOB Increase is led by HCC, due to better revenue mix
	Maharashtra	321	52.4%	35.3 K 14.9%	2,275 1 .6%	15.2%	 New centers grew by 79.3% in FY22 y-o-y, led by Nagpur y-o-y growth in AOR is led by increased surgery volumes at New centres. South Mumbai BAU revenue continues to grow. CK recorded 94 cases in FY'22 Vs 56 in FY'21
	East India	239	53.2% 15.5%	24.6 K 13.3%	1,168 (1) 33.9%	11.5%	 The regional revenue growth is led by Existing centres. Which has grown by 34.1% in FY22 y-o-y primarily contributed by growth in medical oncology Growth in ARPOB is due to improved service mix and high end procedures.
	Andhra Pradesh	155	76.9%	23.5 K 3.7%	1,047	21.6%	 Strong revenue growth across the region Vizag and Vijayawada delivered revenue growth of 45.2% and 26.9% in FY22 y-o-y respectively Focus on improving revenue mix
 New centers Existing centers No 	ote: Effective 1April 2019 , the Company ha	as adopted IND AS 116'	Leases' standards,				 Growth numbers are year-on-year basis Change in AOR:Increase/ (Decrease) in Occupied Bed Days Op. EBITDA% before corporate expenses Beds are Operational Beds ARPOB is excluding COVID Vaccination Revenue



MILANN: IMPLEMENTING STRATEGIC INITIATIVES

Period ended Mar'22	FY22	FY21	Growth (y-o-y)
New Registrations	4,633	3,578	29.5 %
IVF Cycles	1,747	1,450	20.5%
Revenues (INR mn)	621	444	39.8 %

Good recovery demonstrated in FY22 across all metrics

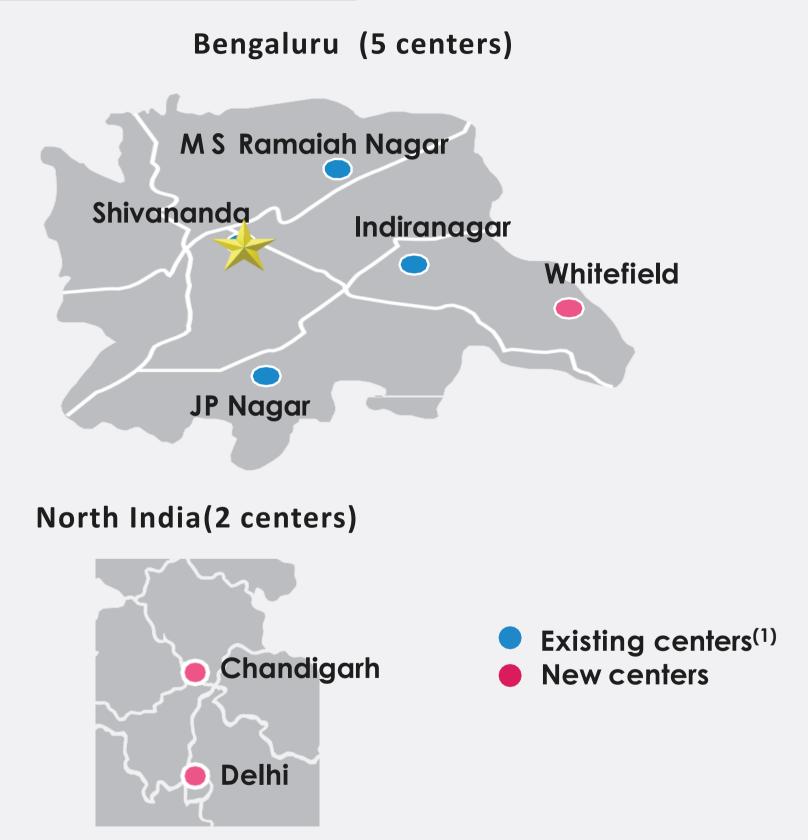
- New centers Revenue grew by 45.3% y-o-y
- Continued effort on digital campaigns have resulted growth in new registrations
- Continuous focus on strengthening clinical talent

Looking to focus on market leadership in Bangalore and scaling-up North India centers in near term

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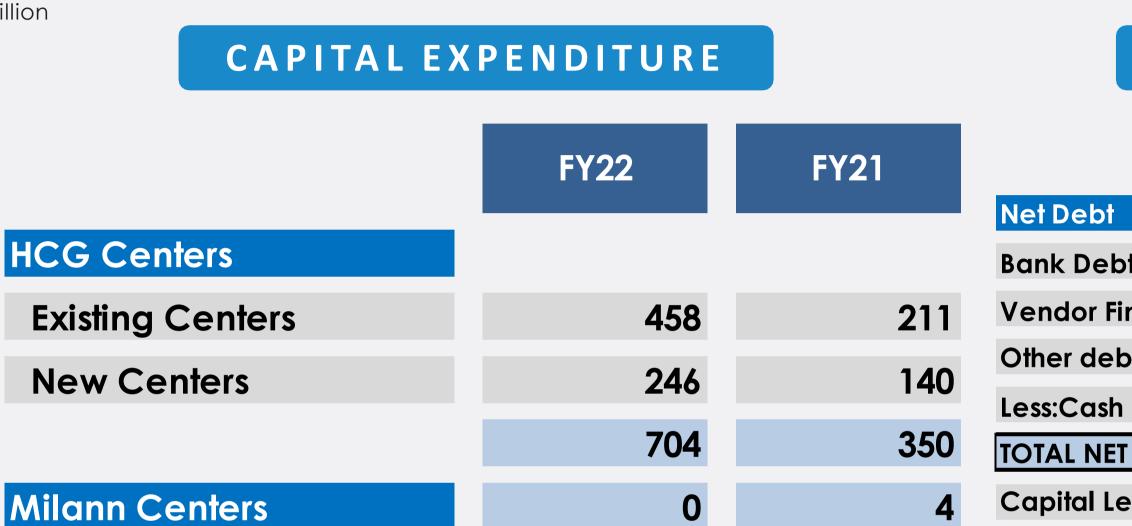




1) Centers in operation prior to April 1,2016, i.e. Shivananda, JP Nagar and Indiranagar

CAPITAL EXPENDITURE & NET DEBT

INR million



 TOTAL CAPEX
 Net Debt

 Including Led

 Net of Bank balance held as margin money of INR 161 Mn and investment in fixed deposits of INR 33 Mn as of 31st Mar-22, margin money of INR 175 Mn and investment in fixed deposits of INR 33 Mn as on 31st Dec-21. The unamortized portion of processing fees amounting to INR 32 Mn as of 31st Mar-22 & INR 26 Mn as on 31st Dec-21 netted off against Bank Debt
 Vendor Finance: Includes Forex reinstatement of INR 14 Mn as of 31st Mar-22 and INR 2 Mn as on 31st Dec-21 on account of exchange rate fluctuation.

2) Vendor Finance; Includes Forex reinstatement of INR 14 Mn as of 31st Mar-22 and INR 2 Mn as on 31st Dec-21 on account of exchange rate fluctuation

3) Cash and cash equivalents : Includes investment in mutual funds of INR 16 Mn as on 31st Mar-22 and INR 16 Mn as at 31st Dec-21



Ν			
	31 Mar' 22	31 Dec' 21	31 Mar' 21
bt ⁽¹⁾	3,543	3,451	3,954
inance ⁽²⁾	333	248	453
bt	34	40	57
n & Equivalents ⁽³⁾	(2,008)	(1,713)	(1,582)
T DEBT	1,901	2,025	2,882
eases: IndAS116	5,070	4,873	5,058
eases)	6,972	6,898	7,940

For updates and specific queries, please visit <u>www.hcgel.com</u> or feel free to contact <u>investors@hcgoncology.com</u>

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THANK YOU