

# Max Group

# Investor Presentation April 2016

www.maxfinancialservices.com www.maxindia.com www.maxvil.com

BSE Scrip Code: 500271, NSE Ticker: MFSL, Bloomberg: MAXF:IN



## **Max Group Vision**

## "To be the most admired corporate for service excellence"

Excellence	Sevabhav	<ul><li>Positive social impact</li><li>Helpfulness</li></ul>	<ul><li>Culture of Service</li><li>Mindfulness</li></ul>
	Excellence	<ul><li>Expertise</li><li>Dependability</li></ul>	<ul><li>Entrepreneurship</li><li>Business performance</li></ul>
	Credibility	<ul><li>Transparency</li><li>Integrity</li></ul>	<ul><li>Respect</li><li>Governance</li></ul>

Max Way as an underlying ethos

courtesy transparency respect/dignity performance orientation

progressiveness ethicality



## Max India demerged into 3 legal entities to create undiluted access, focused growth thereby unlocking value in each business vertical

#### MAX GROUP ARCHITECTURE

MAX GROUP

Multi-business corporate

Focused on people and service



HOLDING COMPANIES



Life Insurance business



**Health and Allied businesses** 



Manufacturing & other businesses

Manufacturing (Speciality Films) -Niche high barrier polymer films &



Life Insurance # - Protecting Life

OPERATING COMPANIES

GROUP CSR ARM



Healthcare \*\* - Caring for Life



Health Insurance - Enhancing Life Investments



Senior Living - Continuing care in

**Leather Finishing Foils** 

**Real Estate** 

**Education** 

Retirement community

**Corporate Social Responsibility** 

- Focus on healthcare, children and the environment

- #74:26 JV with Mitsui Sumitomo; Largest non bank lead private life insurer

  \*\* Equal JV with Life Healthcare, SA; with 2,500 beds capacity

  \* Max Financial services listed on Jan 27, 2016

  \* Max India & MVIL listing to be initiated post FIPB approval

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  \* Max Financial



## A unique investment opportunity and a resilient business model

- INR 149 billion+ Revenues\*... 7.5 Mn Customers... 20,000 Employees... ~52,000^ Agents... 2,600+ Doctors...
- Strong growth trajectory even in challenging times; a resilient & diversified business model
- Steady revenue growth and cost rationalization leads to strong financial performance
- Well established board governance....internationally acclaimed domain experts inducted
- Diversified ownership.....marquee investor base
- Superior brand recall with a proven track record of service excellence
- Strong history of entrepreneurship and nurturing successful business partnerships



**Pharma** 

**Electronic** Component

**Mobile Telephony**  Communication Services

**Plating Chemicals** 

Medical **Transcription** 

Life Insurance



Hutchison

**COMSAT** 

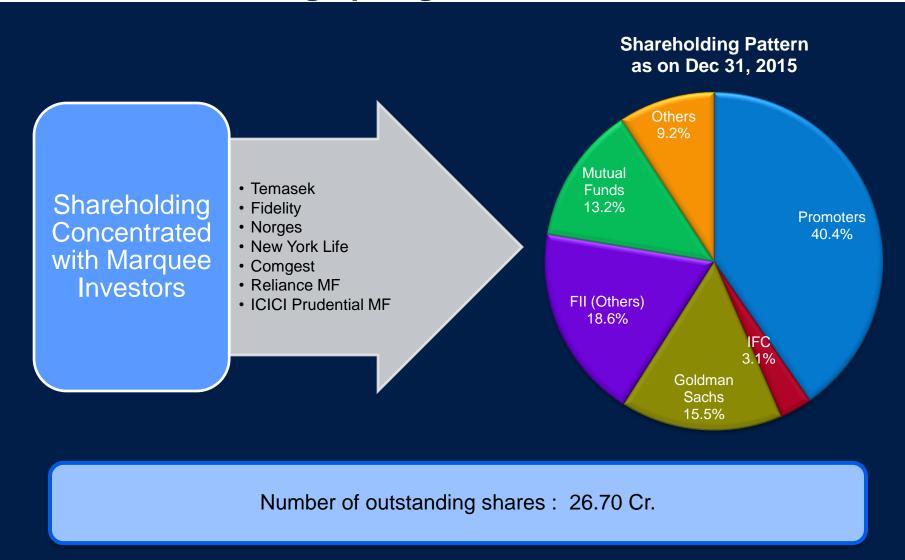
**ATOTECH** 

**HEALTH S**CRIBE





# Growth potential recognized by the market.... high pedigree investor base







## MAX FINANCIAL SERVICES

- MAX LIFE INSURANCE COMPANY -

www.maxfinancialservices.com

www.maxlifeinsurance.com



## **Key Summary Messages**

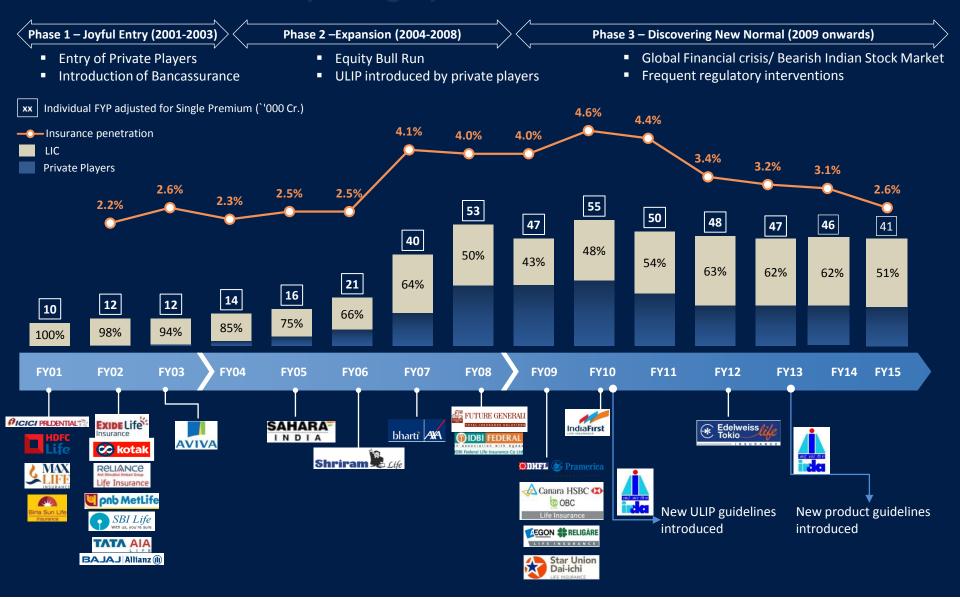


- Indian Life Insurance Industry has evolved rapidly; significant headroom still available for growth due to low penetration and favourable demographic profile
- Aided by strong Governance and stable Management, Max Life is a differentiated Life Insurer with key strengths of Multi-Channel Distribution, Balanced Product Mix and Digital capabilities
- We have been one of the fastest growing players with equal emphasis on profitability We are in the top quartile across the comprehensive measures of success
- With Rs 5,363 cr of MCEV, our net Margins and RoEV are amongst the best in the Industry
- We have been consistently recognized for our performance, industry best practices, brand and technology



## Life insurance industry has evolved since the opening up of the sector in 2000-01

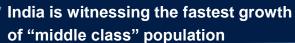


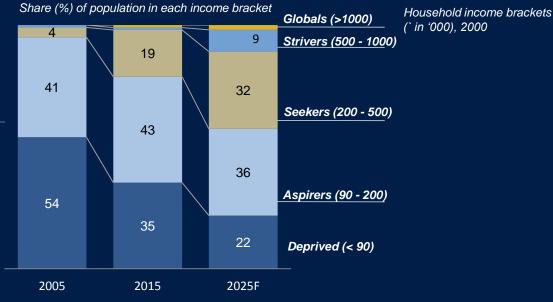




# Changing demographics and rising affluent class are potential factors to drive life insurance penetration







Population distribution is shifting towards 25-45 age group...

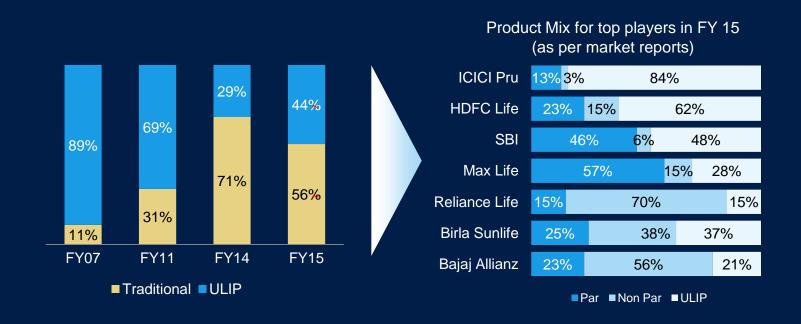
**Life Insurance Penetration (Premium/GDP)-%** 





# Product structure is evolving, Private industry is seen moving towards a balanced product mix





#### KEY INSIGHTS

- ➤ Improved performance of capital markets has revived interest in ULIPs. Some top players leveraged it to record high new sales growth (individual adjusted @10% SP) ICICI Prudential (YoY: +41%), HDFC Life (YoY: +25%) and SBI Life (YoY: +11%)
  - While ICICI Prudential and SBI Life had a high UL share across channels, HDFC Life delivered growth driven by high UL share in their banca channel only
- > Top agency led players like Reliance Life and Birla Sunlife continued to have a Traditional heavy portfolio
- Max Life's UL share accounted for 28% of total portfolio as a result of increased customer demand



# Max Life Long Term strategy is driven by our vision to be the "Most Admired Life Insurance Company"







### **Max Life Strategy – Key Levers:**

Building a comprehensive multi-channel business with superior customer outcomes, focus on LTSP and profitable growth



4	

#### Comprehensive multi-channel distribution model

- Highly efficient and productive agency channel with focus on quality of advice
- Largest Banca relationship for a Non Bank promoted insurer: Axis Bank
- Relationship with growing Banks: Yes Bank and LVB
- Well positioned for in-organic growth in distribution



#### Balanced Product Mix with focus on Long Term Savings and Protection (LTSP)

- Focus on protection oriented balanced product mix
- Triangulation of customer, product and channels to drive profitability

## 3

#### **Superior Customer Outcomes and Retention**

- Top quartile on all customer measures i.e. Retention, Claims and Customer Servicing
- "Treating Customers Fairly" framework adopted to drive our customer centricity agenda
- Differentiated brand with "Sachchi Advice"



#### **Superior Financial Performance with Profitable Growth**

- Bias for profitable growth against sales growth
- Industry best margins and RoEV
- Strong track record of profits and dividends

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#### **Invest in future ready Digital solutions**

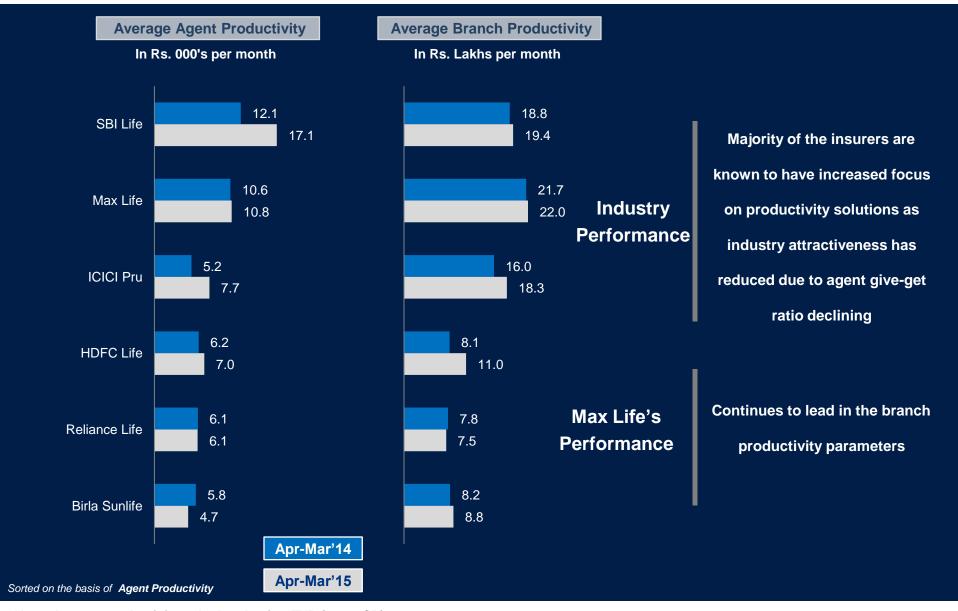
- Turbo charge through technology and to create distribution capabilities
- Invest in digitising customer journeys

Active advocacy with Regulator on regulatory changes to drive business and Industry best practices



## KI FINANCIAL Max Life continues to maintain top quartile performance amongst top private insurers on agency efficiency





Note: Agency productivity calculated using FYP (100% SP)

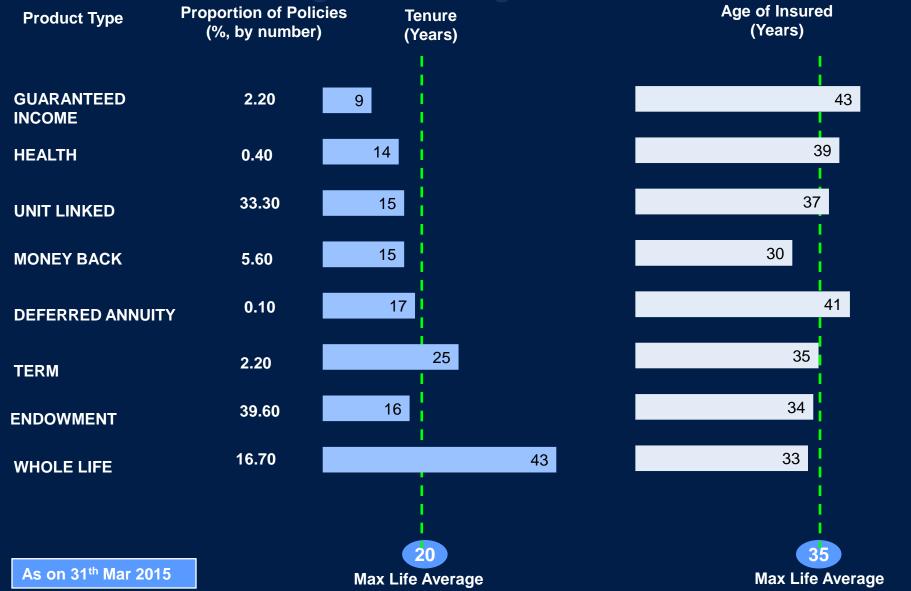
**SOURCE: Market Intelligence & Internal Estimates | Public Disclosures** 



#### **Balanced Product Mix with focus on**

MAX LIFE INSURANCE

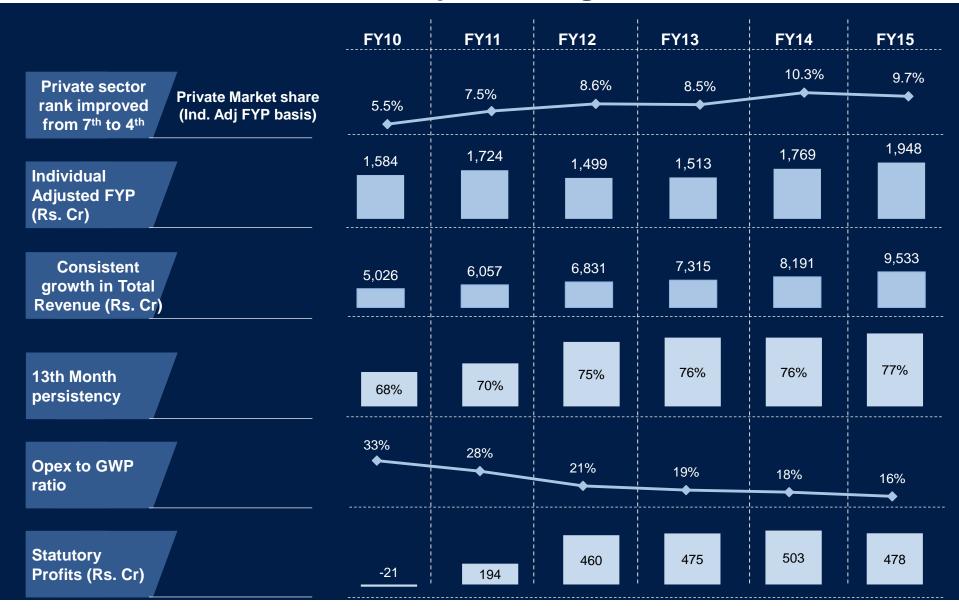
**Long Term Savings & Protection** 





## X FINANCIAL Track record of strong financial performance with profitable growth



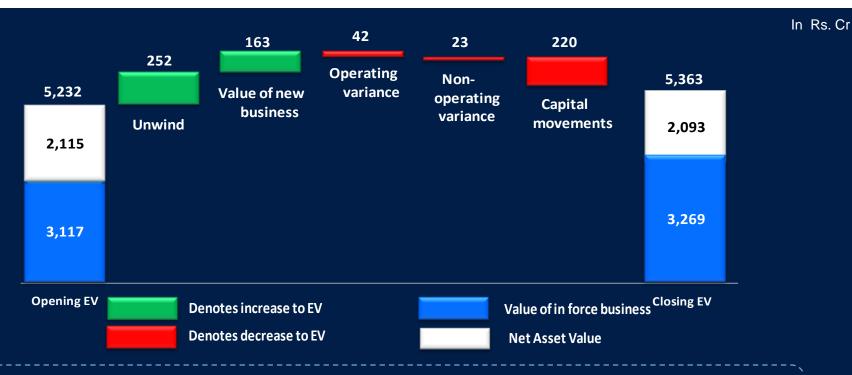




#### Quality orientation is evidenced by significant value creation:

FINANCIAL Quality orientation is evidenced 2, 13 market Consistent Methodology SERVICES EV movement – 31st Mar, 2015 to 30th Sep, 2016 on Market Consistent Methodology





- The EV as at 30th September 2015 is Rs 5,363 Cr, after allowing for shareholder dividend payout of Rs 220 Cr in H1 FY16.
- The annualised Return on EV1 over H1 FY16 is 13.8 per cent while the annualised Operating Return on EV is 14.8 per cent
- The Value of New Business (VNB) written during H1 FY16 is Rs 163 Cr and the portfolio new business margin is 20.2 per cent (before cost overrun) and 17.0 per cent (after cost overrun of Rs. 25 Cr.)
- EV as at March 2015 was reviewed by Milliman and their opinion was shared along with the disclosure at March 2015. The latest disclosures follow the same methodology

Note: The results are developed using market consistent methodology, but they are not intended to be compliant with the MCEV Principles issued by the Stichting CFO Forum Foundation (CFO Forum) or the Actuarial Practice Standard 10 (APS10) as issued by the Institute of Actuaries of India.

<sup>&</sup>lt;sup>1</sup> The Return on EV is calculated before capital movements during the year.

<sup>&</sup>lt;sup>2</sup> 1 Annual Premium Equivalent (APE) is calculated as 100% of regular premium + 10% of single premium (FY15 APE: 1967 cr.)



## Max Life has undertaken initiatives which has defined benchmarks in the industry; won awards and accolades (1/2)





#### **OVERALL PERFORMANCE RECOGNITION**

- Won the Indian Insurance Awards, 2015 for "Bancassurance Leader Award" and "Agency Productivity Award"
- Awarded the "World Finance Best Life Insurance Company India", 2015
- Sole Life insurer recognized for Analytics capability Predictive Underwriting (NASSCOM)



#### **INDUSTRY FIRST- CREATING BENCHMARKS**

- First to offer Freelook period of 15 days to the customer; which was later made mandatory by Regulator
- First private life insurer to launch integrated customer strategy including Treating Customer Fairly
- First life insurance company in India to be awarded ISO 9001:2008 certification
- Only life insurance company in India to implement Lean methodology of service excellence





- Underwriting standard ranked 'Excellent' by Swiss Re after benchmarking against global and local best practices;
- Declared Best Underwriting Initiative of the year in the Asia Banking, Financial Services & Insurance Excellence Awards
- Won Two Awards at ASQ World Conference 2015 for Quality Impact Story Board and Use of Emerging Technology
- Second Runner up trophy in 'National Excellence Practice Competition (Service category)'By CII



## Max Life has undertaken initiatives which has defined benchmarks in the industry; won awards and accolades (2/2)





#### **CLAIMS SETTLEMENT**

- ET Wealth rated Max Life claims settlement highest in the Industry at 99.58%
- Ranked #1 in Claims Paid % with 95.5% (93.9% in FY14) and Outstanding Claims Ratio of 0.1% in FY15
- Swiss Re-commendation for claims settlement TAT (2012)



#### **ACCOLADES FOR PEOPLE PRACTICES**

- Recognized amongst India's Best Companies to Work For (Ranked 51st up from 58th last year by Great Places To Work). Ranked 2nd in Insurance Industry
- Max Life has featured in the top 100 GPTW list for last 4 consecutive years
- Employee Engagement score among top 10 percentile of IBM Kenexa's global database (Employee Engagement Index : 85% favorable vs 83% in 2014)



#### **DISTINCTIVE BRAND**

- Brand Excellence Award and recognition as Superbrand (2013-14),
- 1st on Customer Loyalty (57% vs. 53% market average of Top 10 private insurers) in FY14
- Max Life i-genius won Silver and Bronze 'Abby' award at Goafest 2014



#### **TECHNOLOGY**

- CIO 100 Award for technology implementation (2008/2009/2010/2011
- Won CII Industry Innovation award 2015 for Maxis 2020 (synergy between technology & process related improvements between Max Life & Axis Bank), from amongst 400 submissions across sectors





## MAX INDIA

- MAX HEALTHCARE -

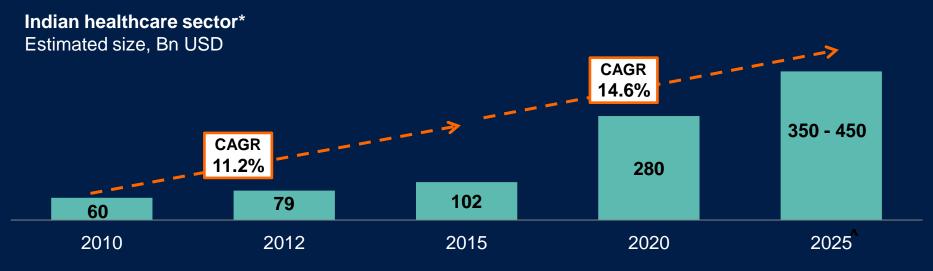
www.maxindia.com

www.maxhealthcare.in



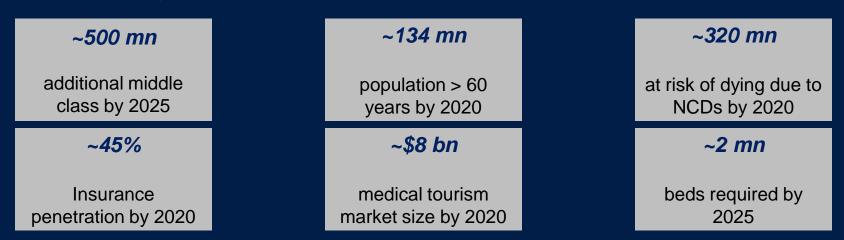
# Indian healthcare industry is expected to reach ~\$400 billion fuelled by multiple demand drivers





<sup>^</sup> Depending upon public spending levels, insurance proliferation, and success of public-private partnerships by 2025

#### **Demand drivers for growth**

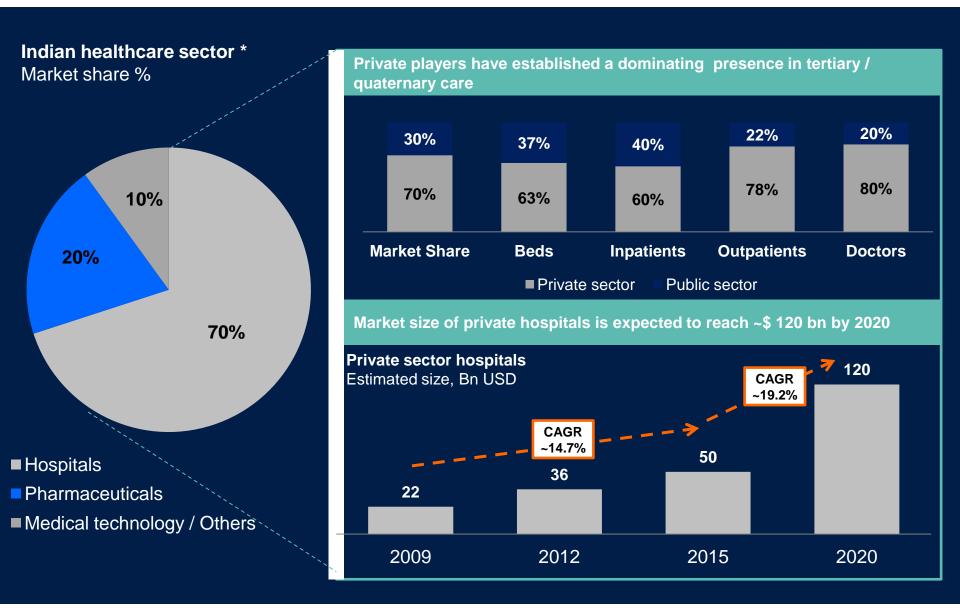


<sup>\*</sup> Healthcare sector includes hospitals, pharmaceuticals, and medical technology sub-sectors
Sources: India Brand Equity Foundation – Healthcare report, 2012; BofA Merrill Lynch Global Research, IBEF Mar'15



# Hospitals constitute ~70% of Indian healthcare market with increasingly dominant role of private sector





<sup>\*</sup> Includes hospitals, pharmaceuticals & medical technology / other companies Sources: BofA Merrill Lynch Global Research, IBEF Mar'15

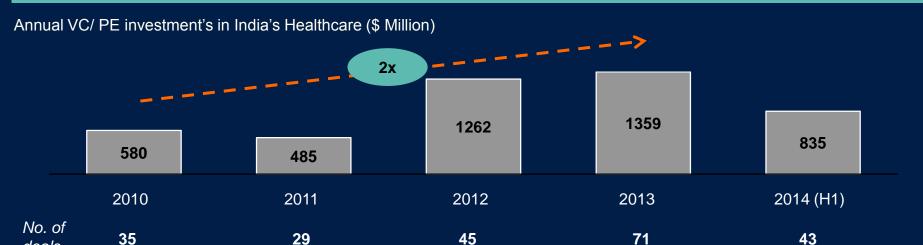


deals

## Competition is intensifying with scale-up of well funded incumbents & availability of capital for new players



#### The surge of VC/ PE investments in recent years has eased funding constraints on growth



#### Scale up of well funded incumbents

	CURRENT SCALE	FUNDING (RS. CR.)	!	CURRENT SCALE	FUNDING (RS. CR.)
Apollo Hospitals	8,600	550, (2013 - KKR)	Narayana Health	6,500	290, (2014 - CDC)
Fortis HOSPITALS	4,800	820, (2013 - Stan Chart, IFC)	ManipalHospitals LIFE'S ON ■	4,900	900, (2015 - TPG Capital)
medanta medanta	1,300	700, (2015 - Temasek/Punj Lloyd)	CARE	2,500 (2012)	560, (2012 - Advent)







## To become an admirable institution known for service excellence, medical excellence, scientific research, and medical education

#### WHAT WILL WE BE KNOWN FOR



- Integrated care
- Clinical excellence
- Transparency
- Speed
- Tech enabled continued care

#### **KEY ENABLERS**



- **Strong talent pool** of clinicians, nurses and healthcare leaders
- Technology and analytics enabled clinical outcomes and customer experience

#### WHERE DO WE WANT TO BE

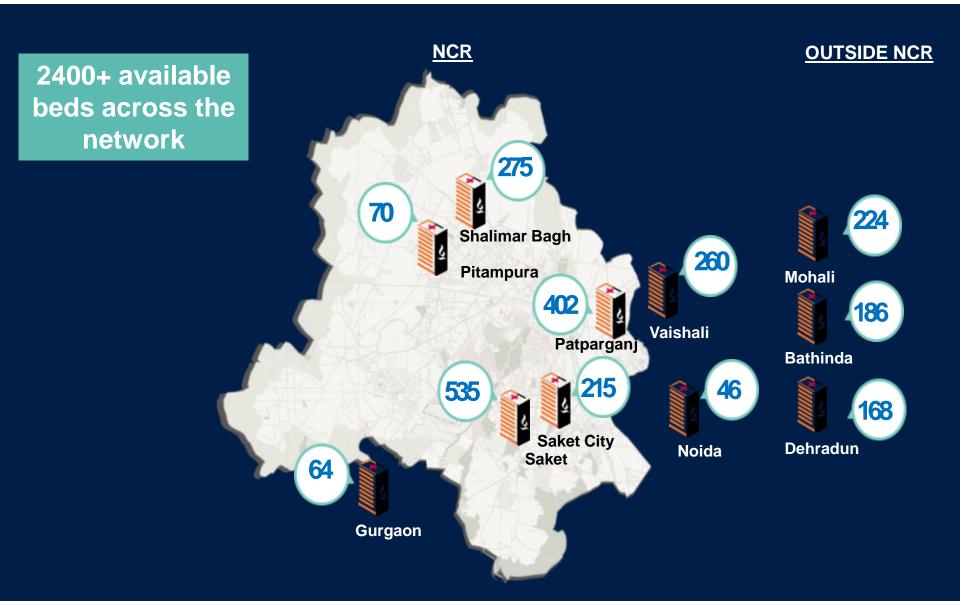


- #1 in selected specialties in chosen geographies
- Focus on Tertiary and Quaternary care
- Physical infrastructure in North India; however serving more than 300 towns in India and 30+ countries



## MHC has a strong focus on North India





# MHC has invested in state of the art equipment to achieve clinical excellence (1/2)

PET-CT



Advanced robotics provides high precision, and minimum invasive surgery across multiple specialities such as Oncology, Neurology



Advanced image guided surgery provides real-time views and automated image processing



High dose radiation with extreme precision (~ 0.5 mm accuracy)



Provides precise correlation and facilitates proper treatment for Oncology, surgical planning and radiation therapy



## MHC has invested in state of the art equipment to achieve clinical excellence (2/2)



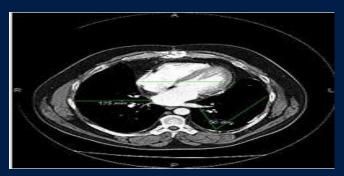




Robotic radio-surgery (non-invasive) system for both cancerous & non-cancerous systems



Designed for revolutionary single incision laproscopic surgery through catheter-based, flexible instruments



**Picture Archiving & Communication System - PACS** 

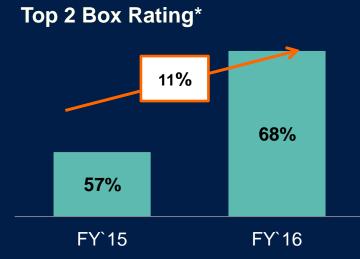
Economical digital storage and convenient access to medical images from multiple modalities



# MHC has a robust service excellence & quality framework which has resulted into enhanced customer experience





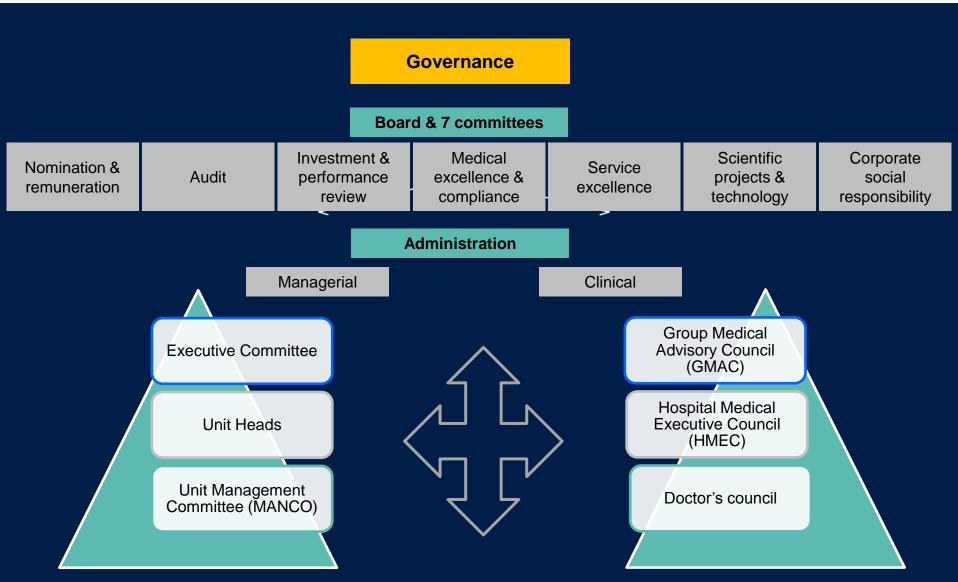


- "Sevabhav" trainings and Reward & Recognition platform has led to positive shift in mindset
- Structural Interventions through Six Sigma and other methodologies has resulted into business impact of over 15 Mn USD



# Our strong Governance Model helps us bring alignment and improve accountability







#### We have a proven record of building an institution







Network of highly qualified doctors, nurses and medical

tertiary & quaternary care

personnel

Strengthened capabilities to provide comprehensive

Organic growth through expansion of hospital network

First MHC hospital started in 2002

JV with *Life Healthcare, South Africa*, extending expertise and global reach





MHC is one of the top
3 healthcare chains
in India

ISO 9001:2000 & ISO 14001: 2004 certified DL Shah National Award on 'Economics of Quality'

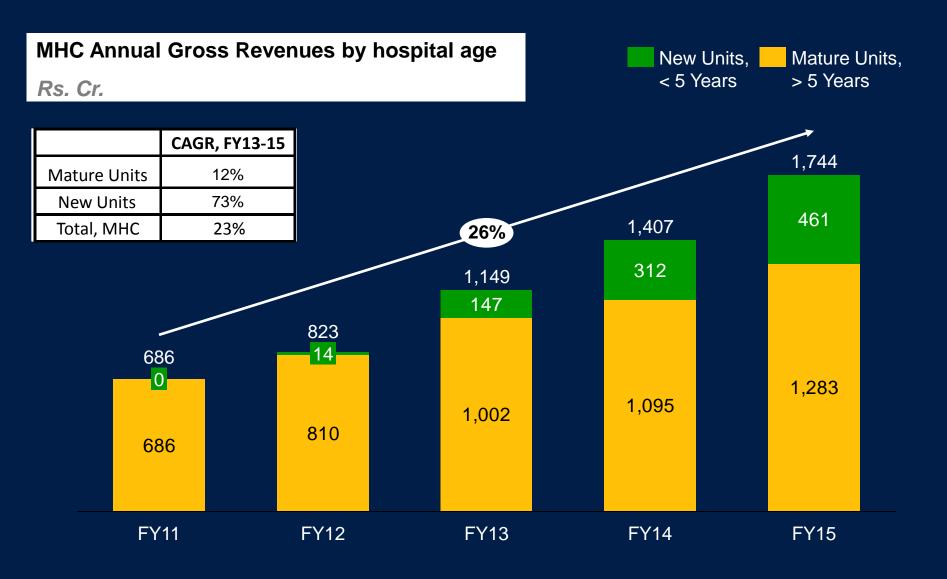
FICCI
Excellence
Awards Operational
Excellence

NABL | NABH accredited Leadership positions in NatHealth and CII healthcare



# Healthy revenue growth driven by new & mature hospitals

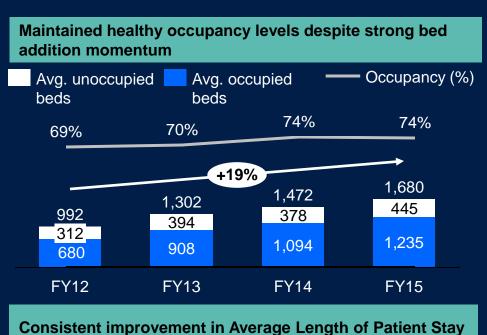


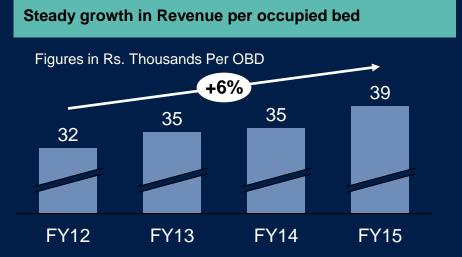




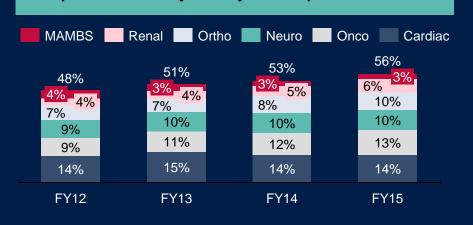
# MHC has built momentum across all volume and value levers during the last 5 years







# FY12 FY13 FY14 FY15

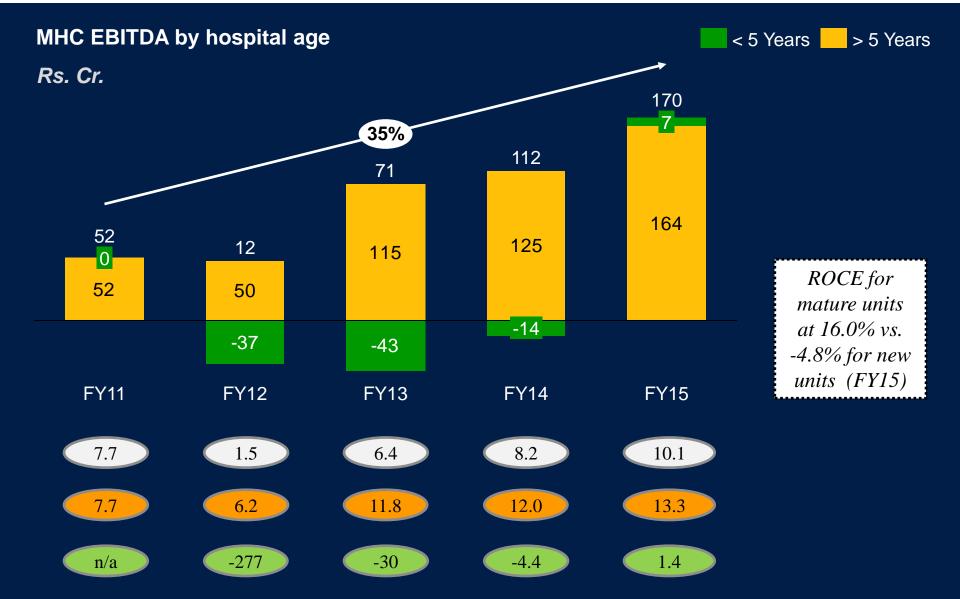


Sharper focus on key tertiary tower specialities



# Margin expansion driven by cost efficiency build-up in mature units and revenue scale-up at new units







# MHC growing faster than competition; profitability ratios to improve with maturity of beds and further expansion



FY15	МНС	Fortis	Apollo	
Operational Beds	+1700	+3700	~4200 (standalone)	
Capital Employed	1345 Cr	6656 Cr	3530 Cr	
Annual Revenue	1739 Cr, +24%	3206.5 Cr, +15%	3526 Cr, +13.0%	
International Revenue/ Qtr.	167 Cr +40%, 9.6% of total	318 Cr + 33% 9.9% of total	N.A	
Operating EBIDTA	170.4	14.7*	626.9**	
EBITDA Growth (YOY)	50.4%	N/A	6.8%	
ROCE	6.8%	-0.60%	12.8%	
ALOS (days)	3.42	3.64	4.43	
ARPOB	1.37 Cr p.a	1.26 Cr p.a	1.16 Cr p.a**	
EBITDAR/ Bed	23.33 Lacs p.a	18.08 Lacs p.a	21.36 Lacs p.a	
Top Specialties***	Cardiac 14%, Onco 13%, Ortho 10%, Neuro 10%, Renal 6%	Cardiac 28%, Ortho 8%, Neuro 8%, Renal 7%, Onco 5%	Cardiac 25%, Neuro 12%, Ortho 11%, Oncology 8%	

<sup>\*</sup> Apollo: Revenue and EBIT has been adj. for doctor fees and 80% of total depreciation is assumed to pertain to hospitals

<sup>\*\*</sup> MHC EBITDAR excludes Lease Rentals and EWS discounts; excludes non-hospital business



# During FY16, MHC acquired Pushpanjali hospital in NCR with potential to grow up to 540 beds





Pushpanjali Crosslay Hospital (Before acquisition)



Rechristened MHC Vaishali Post acquisition



- Founded by prominent Delhi clinician; operational since 2010
- Strategically situated on National Highway 24; 5 minutes from Max PPG - Potential to dominate the E. Delhi and Western UP
- Large asset with potential to grow
  - 340 beds, expandable to 540
  - Built on a plot size of 3.46 acres with 0.4 Mn. sq. ft. Builtup
- Infrastructure matching MHC's LTFS standards

Metric	Unit of Measure	Pre Aquisition	July-15	Avg. (Dec-15 - Feb-16)
Financial Indicators:				
Revenue	Rs Lacs	1209	1,207.8	1,596.0
EBITDA	Rs Lacs		12.5	250.9
EBITDA Margin	% to Net Rev.		1%	15%
ARPOB	Rs. per OBD	15583	17,396	21,945
Bed Utilization :				
Available Beds	Nos	260	256	260
Beds occupancy	%		56%	68%
Tertiary : Secondary Mix :	Ratio	57:43	57:43	61:39
ER conversion	%		45%	54%



# Saket City Acquisition: Opportunity to create one of Asia's largest Medicity in the heart of South Delhi



#### What will it be?



Largest private facility in India - 2000 beds in fully built state



Top 3 in Asia for tertiary and quaternary care – destination centre of choice



Integrated complex with Max Saket – dedicated OPD tower, clusters of OTs and ICUs, centralized lab and ER



#### How will we get there?



Facility design based on comprehensive demand mapping – demand from NCR, catchment areas in North India and international markets



7 centres of excellence – oncology, neurosciences, transplants, cardiac-sciences, orthopaedics, MAMBS and mother & child



Asia's most pre-eminent oncology centre – dedicated tower with 300-500 beds



State-of-the-art transplant centre - for all transplants including heart, liver, kidney, bone marrow



India's first international patient centre - catering to patients from developing and developed markets



Structured plan for clinician recruitment- attracting renowned clinicians from India and overseas, especially for focus specialties by creating an attractive ecosystem, including research and education

Enterprise Value of Rs. 1,025 Cr. (Equity Value Rs. 325 Cr. for 51% stake and debt of Rs. 325 Cr. to be assumed; Rs. 375 Cr. (+12% p.a.) to be paid within 3 years for the balance 49% stake)



## X INDIA Four dimensions to value creation for MHC



 Improve profitability of mature, at-scale hospitals through improvements in specialty/channel mix and cost structures

A. Optimize current network

B. Create additional bed capacity

- Potential to add ~2500 beds to reach ~5000 beds in end state
- Healthy mix of old and new beds to be maintained over next 5 years of growth

 Identified as one of most attractive alternate business opportunity

 Allows MHC to leverage strengths while looking outwards C. Expand Pathology business outside of hospitals D. Launch Oncology Day care centres

 Innovative/scaleable patient care model driven by our belief that patients are increasingly seeking access to personalized treatment

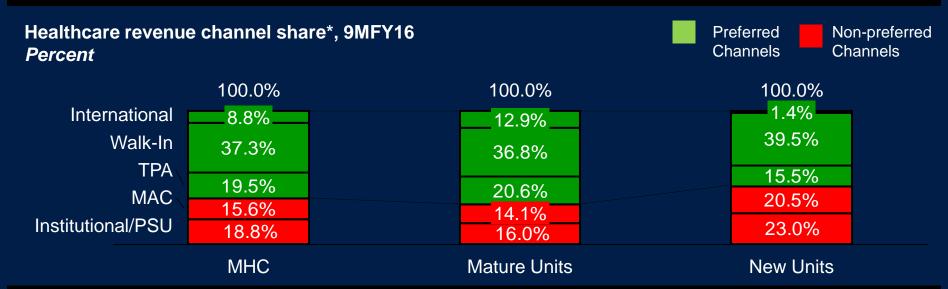




# Increasing share of preferred channels to improve profitability



As the new units in the network mature, the share of preferred channels will increase in the revenue mix and tend to mirror the share in current mature units



### Action plan in place to further increase the share of preferred channels in the mature units

Walk-in

- Sustained brand effort / experience delivery on new positioning
- ATL/BTL campaigns for key specialties
- Strengthen ER capabilities

International

- Establish direct presence and digital footprint in select markets
- Expand in attractive new markets
- JCI Accreditation at flagship units

TPA

- Seek new engagement models in the prevention/ wellness space
- Assess co-development of product targeted at new customer segments

MAC

Institutional

- Maintain share & improve quality of business via upcountry channel
- Deprioritize; profitability improvement through focus on collections, material cost, and ALOS

<sup>\*</sup> Does not include Max Smart



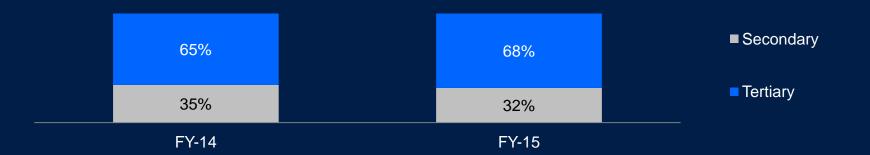


# Increasing share of preferred specialties to improve profitability



Share of preferred tertiary/surgical specialties to increase in the revenue mix, in line with the historic trends

Healthcare revenue specialty share\*, FY15 *Percent* 



#### Action plan in place to grow focused specialties



- Build distinguished leadership in all DMGs
- Establish a standalone centre
- Personalized medicine



- Build comprehensive transplant center in Saket complex; launch LTP
- Establish KTP and BMT programs in selected locations



- Provide end to end service offering
- Launch specialized clinics
- Invest in high end Neuro equipment



- Focus on high-end procedures
- Partnerships with renowned global institutions – people & best practices



# Focus on structural cost efficiency built up through a programmatic approach



#### Rs. ~40 Cr. of cost saving achieved during FY16

## MATERIAL COST

- Procurement efficiency and formulary driven substitutions
- Materials management and control, spl. In PSU cases

#### CLINICIAN COST

Contract negotiations and optimization

## PERSONNEL COST

- Organization restructuring
- Physician compensation remodelling

# OTHER INDIRECT COST

- Contract negotiations
- Work optimization by leveraging benchmarks

Rs. 40 Cr. of further cost efficiency built up being targeted for FY17

#### **Focus on structural improvements**

### **Build strength in procurement**



- Best in class cost
- Optimized formulary
- Support low cost supplier/vendor ecosystem

#### Invest in technology / digital



- Best in class manpower productivity (Smart Kiosks, e-ICU etc.)
- Leverage technology to provide health services outside of hospital

## Re-engineer/simplify processes



 Reduce manpower and other indirect costs through elimination of wasteful steps





# MHC will continue to derive growth from its healthy mix of old and new beds









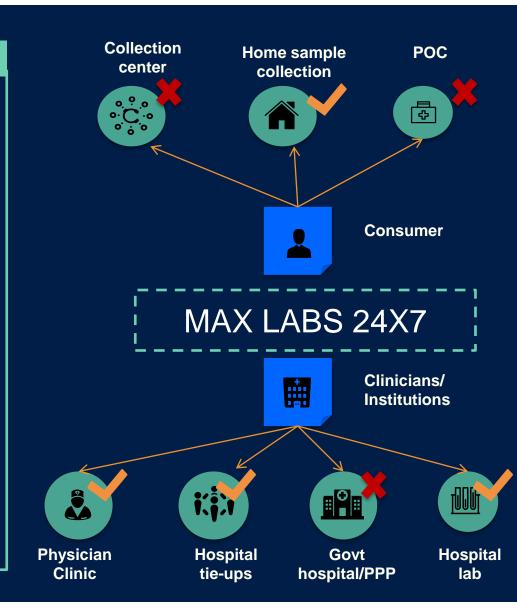
# Max Lab: Looking outwards while leveraging our strengths



### Why will MHC succeed?

- Significant demand:
  - Path market in NCR poised to grow 3X by 2020 – INR 2100 Cr to ~Rs 6,200 Cr
- Supportive supply situation:
  - Organized players (CAGR ~ 26%) outpacing industry growth
  - Very few organized players currently. No significant consolidation expected
- Attractive entry model
  - Possible for MHC to enter B2C & B2C business models with low-capex by leveraging existing infrastructure
- Encouraging financials
  - Existing players have EBITDA margins of 20%+,, EBITDA on incremental revenues for MHC expected to be significantly higher (> 35%)

Rs. ~205 Cr. of Revenues from in-house IPD/OPD Pathology services (FY15)





# Cancer Day Care Centre – Launching an innovative patient care model in Q1 FY17



### Our belief

Patients are increasingly seeking access to a more personalized treatment (vis-à-vis at a hospital) along with a unique adjunctive ambience/experience and a high focus on efficiency

### **Our differentiators**

- 1. Led by a stalwart Med. Oncologist
- End to end design partnership with GE
- Staff expertise and iron clad processes
- 4. Comforting ambience







## MAX INDIA

- MAX BUPA HEALTH INSURANCE -

www.maxindia.com

www.maxbupa.com



## X INDIA A symbiotic partnership in health insurance





- India's leading conglomerate
- Successful track record of building market leading businesses
- Expertise in life insurance, health insurance & healthcare businesses
- Group revenues in FY 2015 INR 149 billion
- In-depth understanding of the Indian market
- Strong DNA of service excellence
- Strong track record of creating value and sharing it with its strategic partners

## Max Bupa Health Insurance

- 74:26 JV of Max and Bupa, with Bupa's stake to increase to 49% post regulatory approvals
- Perfect blend of global expertise and local knowledge of Healthcare and Insurance
- Started in Apr 2010
- JV to be Indian owned and controlled with Bupa contributing it's global expertise in Health Risk Management & product development and Max contribution on other aspects such as people, policies, regulatory etc.



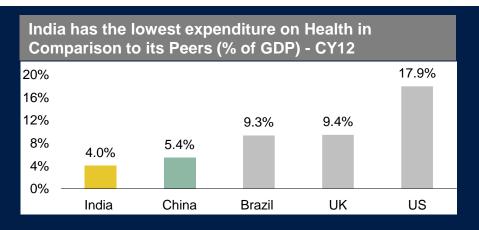
- Largest independent health insurance provider in UK
- Global Expertise in health insurance and healthcare
- 22 million customers in over 190 countries
- Group revenues in 2014 -~£9.1 billion
- Voted as best international health care provider globally
- Bupa is committed to supporting Max Bupa's growth and helping Indian consumers live healthier and more successful lives
- Bupa sees Max Bupa as a huge growth opportunity and a chance to truly impact the health of millions of people.

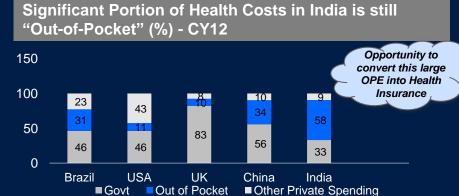
Leveraging the strengths of both partners to build a robust and profitable enterprise with focus on service excellence



## **Health Insurance : Key Drivers**



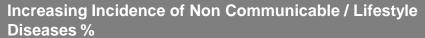


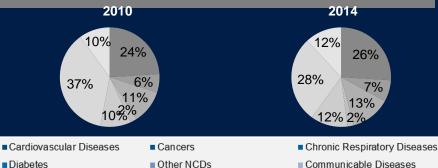


**Source:** World Health Organization

DiabetesInjuries

Source: World Health Organization





- **Health Insurance Drivers**
- Only **15%** of the population of India is covered under some form of health insurance with private health cover available for only **2.2%** of population
- Health care costs accounted for only 4% of GDP; 58% of the health costs of this met as 'out-of-pocket' expenditure
- Rising health costs and increased incidence of life-style diseases have brought the spot-light on benefits of health insurance
- Growing real income, urbanization and increased corporatization of health care leading to exponential growth in the health insurance segment

WHO - Non Communicable Disease Country Profile 2014

Health Insurance is Poised to Grow at 21% CAGR to reach Rs. 55,000 Cr in GWP by FY20



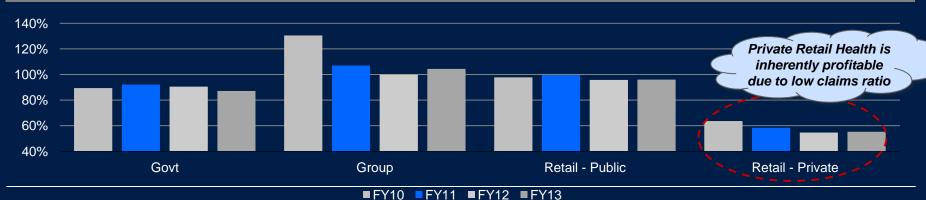
# Private Retail Health Insurance: fastest growing segment



Private-Retail Health segment has seen highest growth over last 5 years with a CAGR of 38%... Segment wise distribution of Gross Written Premium %







=1110 =1111 =1112 =



# Recent regulatory developments indicate a consumer-centric agenda



#### **Objectives of IRDA**

- Protection of Policy Holder
- 2. Stability of the Industry
- 3. Increase penetration of Health Insurance

### **Proposed changes**

- ☐ Policy level changes by the Union government
  - Insurance laws (amendment) bill
  - Universal Health Assurance Mission fully funded for poor; incentives for others
  - Tax exemption for HI increased in latest Union budget
  - RSBY might be shut for private insurers
- □ **Distribution related changes** around Bancassurance, Agent recruitment & licensing, Deregulation of commission rates, Rural and social obligations etc.
- □ Pro-consumer regulatory activism
  - Exposure draft on Protection of Policyholder's interest
  - Regulatory environment moving towards customer centricity
- □ Product/Services
  - Pricing control Limited flexibility in re-pricing of B2C books (min 3 years) & unfair pricing of group health cover by insurers under IRDA scanner now
  - IRDA encouraging insurers to focus on non-indemnity products and innovate on payment mechanisms (EMI options etc.)



## MBHI's operating model choices



Choices	Specifics
Segment	<ul> <li>Focus on B2C segment, with limited play in B2B (renew only profitable accounts) &amp; B2G (to meet regulatory obligations)</li> </ul>
People	<ul><li>Making Max Bupa a 'workplace of choice'</li></ul>
Distribution	Distribution model to focus on Agency & Banca
Distribution	Investments in direct channels to support the "pull" model
Product	<ul> <li>Focus on urban B2C segment, Heartbeat is flagship product, while Health Companion complements by targeting mass affluent customers</li> </ul>
	<ul> <li>Product portfolio approach with HRM lens and continuing focus on comprehensive product features</li> </ul>
HRM	<ul> <li>Bedrock of the company – Executed via TQM philosophy to become enterprise DNA</li> </ul>
THXW	Invest in HRM capabilities to enable benefit management
Claims	<ul> <li>Claims philosophy of paying all genuine claims as per contract</li> </ul>
Mgmt	<ul> <li>In-house claims processing &amp; operations</li> </ul>
Customer experience	<ul> <li>Exemplar service based on customer segments and partners; enable self-service</li> </ul>
Marketing	<ul> <li>'Family positioning' with industry first propositions</li> </ul>
Marketing	<ul> <li>Focus on health and well-being – initiatives like 'Walk for Health'</li> </ul>



# Extensive focus on key growth levers to maximize long-term value



#### Leveraging Max India and BUPA capabilities

- Max India strong understanding of Indian Insurance landscape, learning's from Max Life's success and leverage synergies with Max Life and MHC
- BUPA Product design, underwriting and clinical expertise

#### Bancassurance would catapult growth

- Opened up to Standalone Health insurers in February 2013
- 4 tie-ups Standard Chartered, Deutsche, Federal Bank and Ratnakar Bank successfully launched

#### Pricing for profitability

- Value based pricing based on data and analysis
- Selective targeting of profitable Group business

#### Continuous product innovation

- · Build a culture of innovation and expertise.
- Focus on wellness and specialized products with no age limit and high sum assured.
- Emphasis on Health Risk Management

#### Focused customer profile

- · Focus on the mass affluent+ customer base
- · Robust underwriting procedure

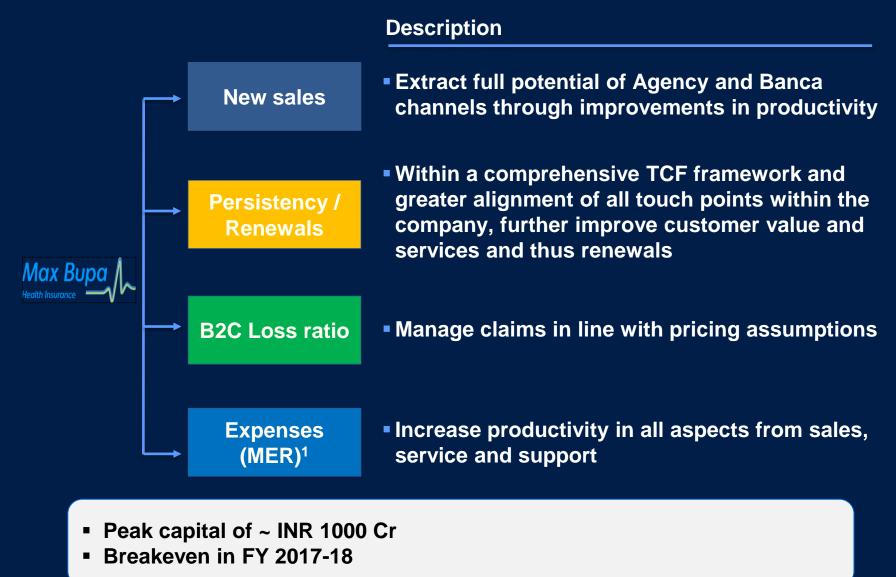
## Factsheet\* – Max Bupa

Gross Written Premium^	INR 373 Cr.
Customer Base^	~800K
Number of Employees	~1,500
Number of Agents	~9,000
Number of Offices	26
Partner Hospitals	~3,500



## Max Bupa's strategic imperatives









## MAX VENTURES & INDUSTRIES

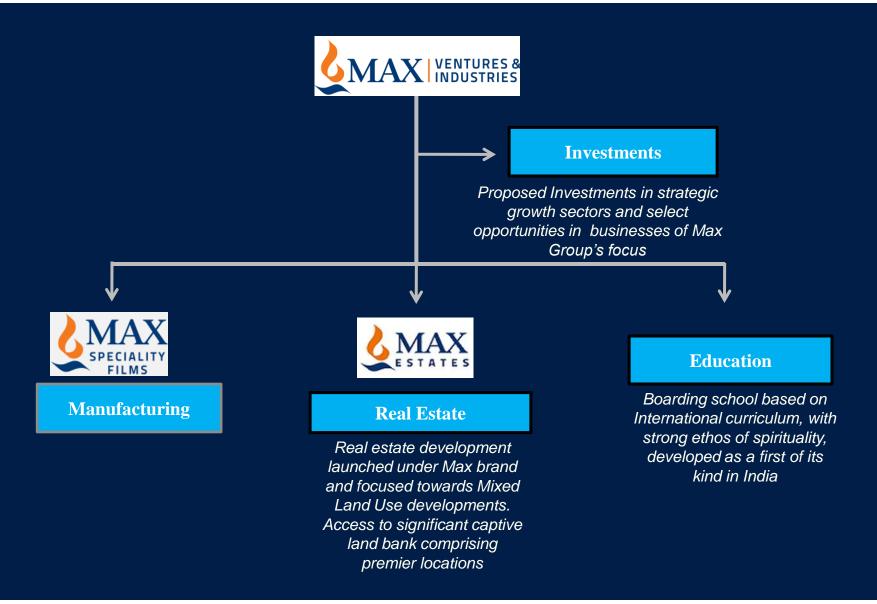
- INVESTEMENTS
- REAL ESTATE (MAX ESTATES)
- EDUCATION
- MANUFACTURING (MAX SPECIALITY FILMS)

www.maxvil.com

www.maxspecialityfilms.com



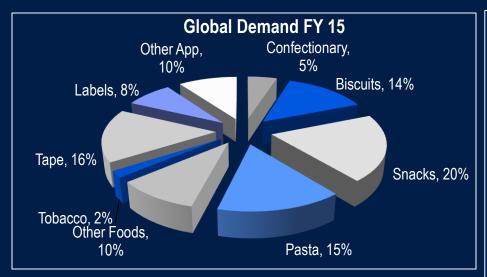


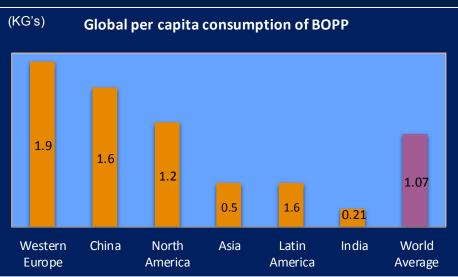




# Industry marked by robust global and domestic demand







## **Key Highlights**

- •Growth of flexible packaging Industry ~ 12-14% in India
- •Per capita consumption of BOPP in India relatively lower
- •Growth in FMCG and organized retail and changing urban life styles & rural demand.
- •Competitive pricing and costs spurs exports from India and restricts imports.
- •Shift from PET to BOPP (Indian BOPP:PET products ratio around 1:2 against 3:1 globally)
- •BOPP films are recyclable and have a competitive advantage over other plastic and traditional products
- •Convertor industry growing & India becoming global hub for supplies of Flexible Laminates

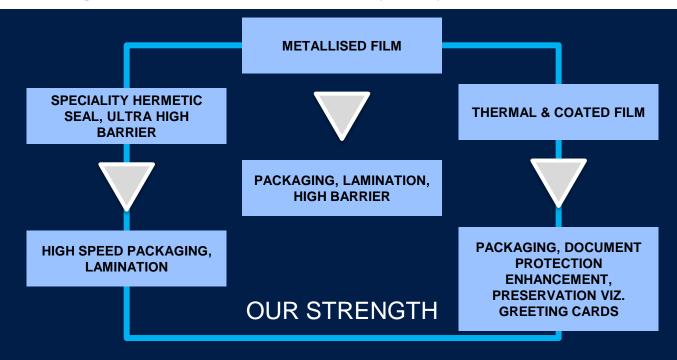


## X | VENTURES & | MSF uniquely positioned to be India's most admired & preferred global supplier of Specialty Polymer films









### Max Speciality Films is much more than packaging...

- Established in 1990 MSF manufactures 'Speciality' BOPP (Bi- axially Oriented Polypropylene) & Thermal Lamination Films
- Committed to innovation, product quality and service excellence
- Deep Partnerships with Brands and converters in India & Abroad
- Significant market share of converts 65-70% output served to FMCG industry
- Geographical footprint covers Europe, the middle East, the US, Latin America, Africa, Australia, South Korea, CIS countries & SAARC



### **Business evolution & infrastructure**





**MSF Growth - FY07-15** 

Revenue CAGR: 20 % Quantity CAGR: 18 % EBITDA CAGR: 19 % CAPACITY GROWTH

CAGR of 25%

**CURRENT CAPACITY** 

4 METALLIZERS

4 BOPP LINES

3 EXTRUSION LINES

3 COATING LINES

R & D LAB

54 KTA

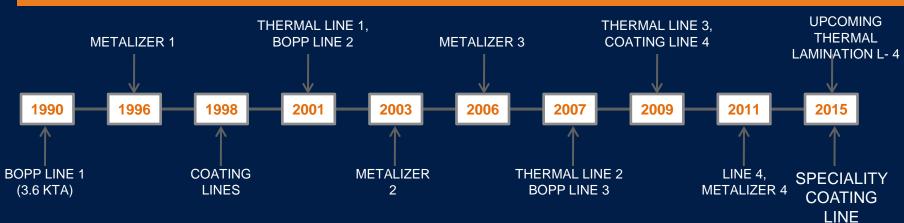














## **Visibility in Top Brands**



## Our Customers ... Brands / Converters































































#### **Markets We Serve**

**FOOD PACKAGING** 

NON FOOD PACKAGING

INDUSTRIAL PACKAGING

GRAPHIC LAMINATION









Plain Coextruded Pigmented Metalized Overwrap

Overwrap Metalized Release Cable Insulation Labels

Thermal Lamination Films Wet Lamination films



Enhances Aesthetics & Longevity of documents



## **Awards & Recognition**



Recognized by National & International organizations for "product development" & "process innovation"







GOLDEN PEACOCK AWARD IN 2011 WORLD STAR AWARDS IN 2010 & 2012 INDIA STAR AWARD IN 2010, 2012& 2015

Recently won INDIASTAR AWARD 2015 in INNOVATION & PACKAGING DESIGN Category for its ANTI SKID FILM





## MAX INDIA FOUNDATION (MIF)

www.maxindiafoundation.org



### MAX INDIA FOUNDATION

Making a difference... to life



### **Max India Foundation**

 Corporate Social Responsibility (CSR) Arm of the Max India Group focused on providing quality healthcare to the underprivileged, facilitating awareness of health related issues, and promoting and fostering an ecofriendly healthy environment.

#### **Awards Received:-**

- Golden Peacock Award for CSR 2015
- Best Overall CSR Practices 2015" at the World CSR Day
- "Outstanding Social Impacts" Award 2014 at the World CSR Day Congress
- Golden Peacock Award for CSR 2013
- "Best CSR Practices 2013" at the World CSR Day
- "Best CSR Practices 2013" at 7<sup>th</sup> Indy's Award
- Golden Peacock Award for CSR 2012
- Global CSR Awards at the World CSR Day 2012
- Golden Peacock Global CSR Award 2011



3 to mo	
Facts	sheet* – MIF
Locations	652
NGO Partners	394
Beneficiaries	16,31,883
Initiatives	<ul> <li>"Dhakrani" Village Adoption in Dehradun district to address healthcare needs, waste disposal and sanitation.</li> <li>Pan India Immunization</li> <li>Artificial Limbs &amp; Polio Callipers</li> <li>Health Camps</li> <li>Surgeries &amp; Treatment</li> <li>Palliative Care</li> <li>Lifeline Express Camps</li> <li>Multi-speciality Camps</li> <li>Cancer Awareness</li> <li>Environment Awareness</li> </ul>



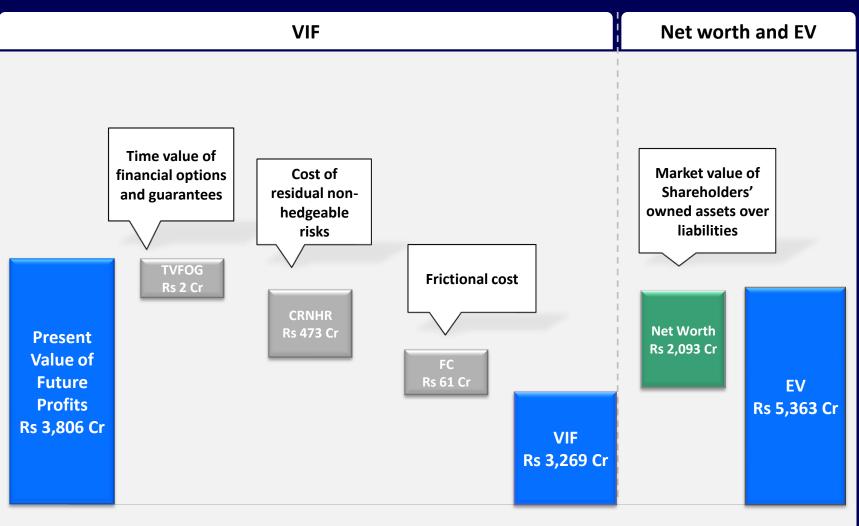
## Annexures



# Overview of the components of the EV as at 30<sup>th</sup> September 2015



All figures in Rs Cr





## Sensitivity analysis as at 31st March 2015



Sancitivity Baculta	Е	V	VNB			
Sensitivity Results	Value (Rs Cr)	% change	Value (Rs Cr)	% change		
Base Case	5,232	-	460	-		
Downward shift of 100 bps in the risk free interest rate curve <sup>Note1</sup>	5,347	2%	419	(9%)		
10% increase in expense	5,178	(1%)	443	(4%)		
10% increase in mortality	5,168	(1%)	449	(2%)		
10% increase in lapse / surrender	5,127	(2%)	435	(6%)		
10% immediate fall in equity values	5,167	(1%)	460	negligible		

#### Notes:

- 1. The EV and VNB sensitivities are calculated annually. The sensitivity impacts are not expected to change materially from March 2015.
- 2. Reduction in interest rate curve leads to an increase in the value of assets which offsets the loss in the value of future profits.
- 3. Reserving assumptions are unchanged in all the sensitivities.



## **Key Assumptions (1/2)**



#### **Economic Assumptions**

- The EV is calculated using risk free (government bond) spot rate yield curve taken from FIMMDA<sup>1</sup> as at 30<sup>th</sup>
   September 2015. The spot rates beyond the longest available term of 30 years are assumed to remain at 30 year term spot rate level.
- No allowance has been made for liquidity premium because of lack of credible information on liquidity spreads in the Indian market.
- A flat rate adjustment is made to the yield curve such that the market value of government bonds is equal to discounted value of future cash flows of those bonds.
- Samples from the un-adjusted spot rate yield curve as on 30<sup>th</sup> September 2015 and 31<sup>st</sup> March 2015 are given here:

Year	1	2	3	4	5	10	15	20	25	30 +
Sep 2015	7.37%	7.67%	7.62%	7.71%	7.84%	7.62%	7.91%	8.10%	8.22%	7.93%
Mar 2015	8.01%	7.96%	7.93%	7.89%	7.89%	7.95%	8.04%	8.12%	8.03%	7.79%

#### **Demographic Assumptions**

The lapse and mortality assumptions are approved by a Board committee and are set by product line and distribution channel on a best estimate basis, based on the following principles:

- Assumptions are based on past experience and expectations of future experience given the likely impact of current and proposed management actions on such assumptions.
- Aims to avoid arbitrary changes, discontinuities and volatility where it can be justified.
- Aims to exclude the impacts of non-recurring factors.



## **Key Assumptions (2/2)**



#### **Expense and Inflation**

- Maintenance expenses are based on the recent expense studies performed internally by the Company. The VIF is
  reduced for the value of any maintenance expense overrun in the future. The overrun represents the excess
  maintenance expenses expected to be incurred by the Company over the expense loadings assumed in the
  calculation of PVFP.
- Expenses are denominated in fixed Rupee terms and are inflated at 6.25% per annum.
- The commission rates are based on the actual commission payable (if any).

#### Tax

- The corporate tax rate is assumed to be 14.42% for life business and nil for pension business.
- For participating business, the transfers to shareholders resulting from surplus distribution are not taxed as tax is assumed to be deducted before surplus is distributed to policyholders and shareholders.
- The mark to market adjustments are also adjusted for tax.



## **Max Life: Market Position Insurance Sales**



Rank	Company	Individual New Business Premium (Rs. Cr) Premium Adjusted for 10% single premium								
		FY15	FY14	Growth (%)	Private Market Share					
1	ICICI Prudential	4,596	3,253	41%	23.0%					
2	SBI Life	3,120	2,811	11%	15.6%					
3	HDFC Life	2,967	2,374	25%	14.8%					
4	Max Life	1,948	1,769	10%	9.7%					
5	Reliance Life	1,202	1,121	7%	6.0%					
6	Bajaj Allianz	775	1,002	-23%	3.9%					
7	Birla Sunlife	738	837	-12%	3.7%					
8	PNB MetLife	712	577	23%	3.6%					
9	Kotak Life	617	465	33%	3.1%					
10	Exide Life	441	500	-12%	2.2%					
	Others	2,874	2,536	13%	14.4%					
	Private Total	19,992	17,243	16%						
	LIC	20,774	28,520	-27%						
	<b>Grand Total</b>	40,765	45,763	-11%						
	Market Share of Pvt. Players	49.0%	37.7%							



## Max Life: Q3 & 9MFY16 Performance



Key Business Drivers	Unit	Quarter	Ended	Y-o-Y	9 months ended		Y-o-Y
		Dec'15	Dec'14	Growth	Dec'15	Dec'14	Growth
a) Gross written premium income	Rs. Cr						
First year premium		456	480	-5%	1,242	1,267	-2%
Renewal premium		1,602	1,399	15%	4,186	3,754	12%
Single premium		203	174	17%	520	426	22%
Total		2,260	2,052	10%	5,949	5,447	9%
b) Shareholder Profit (Pre Tax)	Rs. Cr	140	73	92%	401	356	13%
c) Policy holder expense to Gross Premium	%	13.7%	15.2%	-	15.0%	16.9%	-
d) Individual Adjusted Premium (APE*)	Rs. Cr	465	489	-5%	1,257	1,281	-2%
e) Conservation ratio**		85.3%	81.8%		83.4%	82.9%	
f) Average case size (Agency)	Rs.	39,529	37,930	4%	36,075	33,067	9%
g) Case rate per agent per month	No.	0.35	0.29	20%	0.32	0.30	6%
h) Number of agents (Agency)	No.	40,351	47,128	-14%	40,351	47,128	-14%
i) Paid up Capital	Rs. Cr	2,013	2,013	-	2,013	2,013	-
j) Individual Policies in force	No. Lacs	37	36	1%	37	36	1%
k) Sum insured in force (Individual)	Rs. Cr	1,79,178	1,45,591	23%	1,79,178	1,45,591	23%

<sup>\*</sup>Individual First Year Premium adjusted for 10% single pay
\*\*Conservation Ratio = Renewal Premium for the current period / (First Year + Renewal Premium for the previous period)



### **Key Physicians**





**Dr. Pradeep Kumar Chowbey, Padmashri**Director of Max Institute of Minimal Access, Metabolic and Bariatric Surgery. More than 35 yrs of experience in Lap Surgery, completed 70,000 major Lap procedures



**Dr. Sandeep Buddhiraja**Director- Clinical Directorate & Institute of Internal Med.
Over 23 years of experience in the field of Internal
Medicine



**Dr. S.K.S. Marya**Chairman - Orthopaedics & Joint Replacement
Renowned Joint Replacement Surgeon having 30 years
experience



**Dr. K.K. Talwar**Chairman - Cardiology, Max Healthcare
Clinical experience of more than 39 years
Former Head, Department of Cardiology, AIIMS



**Dr. Harit Chaturvedi**Chairman – Cancer Care, Director & Chief Consultant - Surgical Oncology.
Over 25 years of experience in Surgical Oncology.



**Dr. A.K. Singh**Director – Max Institute of Neurosciences, Dehradun
Renowned Neuro Surgeon having 40 years experience
Recipient of the BC Roy award



**Dr. Anurag Krishna**Director- Paediatrics & Paediatrics Surgery
Over 20 years of experience in Paediatric surgery complex congenital malformations

Strong consultant bench strength of **350+** across specialities :

- Cardiac 100+
- Oncology **50**+
- Orthopaedics **50**+
- Neurosciences 50+
- Renal **50+**
- MAMBS **25+**



## **Max Healthcare\***



Key Business Drivers	Unit	Quarter Ended		Y-o-Y	Nine months Ended		Y-o-Y
Rey Busiliess Drivers	Offic	Dec-15	Dec-14	Growth	Dec-15	Dec-14	Growth
a) Financial Performance	Rs. Cr						
Revenue (Net)		529	424	25%	1,523	1,246	22%
Contribution Margin	%	66.2%	64.7%	150 bps	65.0%	64.0%	100 bps
EBITDA	Rs. Cr	54	42	29%	152	128	19%
EBITDA Margin	%	10.3%	10.0%	30 bps	10.0%	10.2%	(20 bps)
Cash Profit	Rs. Cr	23	22	8%	84	62	35%
Profit	Rs. Cr	(5)	(1)	-	7	(7)	2x
b) Financial Position							
Net Worth	Rs. Cr				1,071	726	47%
Net Debt	Rs. Cr				1,048	586	79%
Tangible Fixed Assets - Gross Block	Rs. Cr				1,935	1,438	35%
c) Patient Transactions (No. of Procedures)	No.						
Inpatient Procedures		42,181	32,649	29%	1,20,645	98,643	22%
Day care Procedures		9,034	6,805	33%	23,040	19,850	16%
Outpatient Registrations		13,47,117	10,72,689	26%	40,22,985	33,04,297	22%
d) Average Inpatient Operational Beds	No.	2,139	1,823	17%	2,064	1,756	18%
c) Average Inpatient Occupancy	%	69.7%	69.4%	30 bps	71.7%	74.1%	(240 bps)
d) Average Length of Stay	No.	3.20	3.36	-5%	3.21	3.43	7%
e) Avg. Revenue/Occupied Bed Day (IP)	Rs.	30,153	29,996	0.5%	30,296	28,512	6%

<sup>\*</sup>The above results are for MHC Network of hospitals and includes results for Max Super Specialty Hospital, Saket, unit of Devki Devi Foundation, Max Super Speciality Hospital, Patparganj, unit of Balaji Medical and Diagnostic Research Centre & Saket City Hospital unit of Gujarmal Modi Hospital & Research Centre



## **Max Bupa Health Insurance**



Key Business Drivers		Quarte	r Ended	Y-o-Y	Nine months Ended		Y-o-Y
		Dec-15	Dec -14	Growth	Dec-15	Dec -14	Growth
a) Gross written premium income	Rs. Cr						
First year premium		46	34	36%	127	97	31%
Renewal premium		68	56	21%	198	152	30%
Total		113	90	26%	325	249	30%
b) Net Earned Premium	Rs. Cr	102	82	26%	286	235	22%
c) Net Loss	Rs. Cr	(9)	(19)	53%	(49)	(67)	28%
d) Claim Ratio(B2C Segment, normalized)	%	55%	51%	-420 bps	56%*	52%	-450 bps
e) Avg. premium realization per life (B2C)	Rs.	6,756	6,478	4%	6,794	6,278	8%
f) Conservation ratio (B2C Segment)	%				83%	82%	170 bps
g) Number of agents	No.				11,975	9,756	23%
h) Paid up Capital	Rs. Cr				876	763	15%



## **Max Specialty Films**



Key Business Drivers	Unit			Y-o-Y Nine months Ended			Y-o-Y	
				Growth	Dec-15	Dec -14	Growth	
a) Sales Quantity – BOPP	Tons	10,701	10,399	3%	32,858	32,885	-	
b) <b>Revenue</b>	Rs. Cr.	165	175	-6%	543	565	-4%	
c) Profitability:								
Contribution	Rs. Cr.	39	33	16%	125	100	25%	
	%	23%	19%		23%	18%		
EBITDA	Rs. Cr.	19	16	18%	68	54	28%	
	%	12%	9%		13%	10%		
PBT	Rs. Cr.	5	0.3	>100%	27	6	4x	
	%	3%	0.2%		5%	1%		



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