



MAX
Healthcare

Q4 & FY21 – Earnings update

May 28, 2021



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1. Healthcare undertaking of Radiant Life Care Private Limited ("Radiant") and residual business of erstwhile Max India Limited have merged into Max Healthcare Institute Limited ("MHIL" or "the Company") through a NCLT approved Composite Scheme of Amalgamation and Arrangement on June 1, 2020
2. Earlier, Radiant had acquired 49.7%* stake of MHIL from Life Healthcare at ~ INR 2,136 Cr @ INR 80 per share in June, 2019
3. Upon merger of the healthcare undertaking** of Radiant with MHIL, the Radiant shareholders have been issued 635,042,075 shares by MHIL (merged entity) based on approved swap ratio (9,074 shares of MHIL for 10 shares held in Radiant) and its pre-acquisition stake of 49.7%* stands cancelled. The merger results into Radiant promoters controlling the merged MHIL
4. The transaction results into a business combination under Ind AS 103 "Business Combinations" and further applying the criteria laid in the accounting standard, the merger is being accounted for as follows:
 - a) Radiant has been identified as the accounting acquirer and thus the merger qualifies as a "reverse acquisition"
 - b) MHIL financials are considered to be the continuation of Radiant's healthcare undertaking financials (accounting acquirer) and thus all assets & liabilities of MHIL have been fair valued as per principles laid down in Ind AS 103. Demerged undertaking of Radiant is being accounted for at its carrying amounts
 - c) Further, since the business combination and control of Radiant over MHIL is achieved in stages, Radiant's previously held stake of 49.7%* (in pre-merger MHIL) is fair valued as on June 1, 2020 and the resulting loss, has been recognized in profit or loss
5. Strictly applying the principles of Ind AS 103, the financial result of MHIL (merged) for year ended March 31, 2021 consist 12 months of operations of Radiant and 10 months of operations of MHIL (merged).
6. However, in view of the significant network bed capacity at partner healthcare facilities and note 5 above, it is considered appropriate to disclose the financial performance of the Network Hospitals for the year ended March 31, 2021 by way of a management consolidated of 12 months operations of MHIL, its subsidiaries, managed facilities and partner healthcare facilities.
7. The financial information contained in this presentation is thus different from that of MHIL Group since the financial information of partner healthcare facilities is also included. It is drawn up based on management consolidation of the audited financials of the Company, its subsidiaries, managed facilities along and the audited financials (prepared under IGAAP) of the partner healthcare facilities as received from such partners, duly updated for intra-network eliminations and IND AS related adjustments. The financial information post IND AS adjustments, has been certified by an independent firm of chartered accountants
8. The Company, while accounting for the Business Combination has carried out a fair valuation exercise earlier in the year, whereby the assets and liabilities of the acquired entity & its subsidiaries (i.e. MHIL) and effects thereof have been captured in the financials. The fair valuation has led to increase in the tangible and intangible assets of the Network by INR 3,662 Cr, which, includes INR 252 Cr towards the partner healthcare facilities
9. The Abridged Profit and Loss account thus, takes into account line by line consolidation of the financials in an investor friendly format of the Network Healthcare Facilities. Further, In order to better explain the financial results, the items which don't truly represent the operating income/expenditure have been identified and reported separately to reflect the Operating EBITDA

* % are with respect to the issued share capital at that point of time

** Mainly consisting of O & M arrangements with Dr. Balabhai Nanavati Hospital, Mumbai and Dr. B. L. Kapur Memorial Hospital, New Delhi

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Q4 FY21 Highlights

Executive Summary (1/2)

Financial highlights

- ✱ Q4 FY21 gross revenue at INR 1,159 Cr versus INR 1,100 Cr in Q4 FY20 (+5% YoY) and INR 1,160 Cr in Q3 FY21 (at similar levels QoQ)
- ✱ Operating EBITDA¹ for Q4 FY21 was highest ever at INR 263 Cr versus INR 156 Cr in Q4 FY20 (+68% YoY); INR 253 Cr in Q3 FY21 (+4% QoQ)
 - ✱ Operating EBITDA improved over Q3 FY21 despite reinstatement of Covid-19 related transitory cost cuts and lower occupancies due to both decline in Covid-19 cases leading to underutilization of Covid-19 reserved beds and farmer agitation in early part Q4 FY21
 - ✱ Margin expansion driven by higher ARPOB post normalization of IPD admissions and OPD footfalls in almost all the non-Covid specialties, underpinned by impact of structural cost initiatives implemented in FY20 and FY21
 - ✱ EBITDA margin² for the quarter stood at 24.1% versus 15.5% in Q4 FY20; 23.2% in Q3 FY21
- ✱ The quarter saw decline in Covid-19 admissions leading to bed occupancy³ dropping to ~35% on Covid-19 beds while those for non-Covid were ~78%. The change in mix of occupancies led to improvement in ARPOB
- ✱ Q4 FY21 PAT was INR 109 Cr versus INR 45 Cr in Q4 FY20 (+141% YoY); INR 135 Cr in Q3 FY21 (-20% QoQ)
- ✱ Net debt⁴ of the company reduced by INR 1,323 Cr and stands at INR 544 Cr as on March 31, 2021 driven by equity fund raise of INR 1,200 Cr through a Qualified Institutional Placement (QIP), further supplemented by internal accruals

Operational highlights

- ✱ Occupancy for Q4 FY21 stood at 69.8% similar to Q4 FY20; 76.2% in Q3 FY21
 - ✱ Later half of Mar'21 has witnessed an upward trend in Covid-19 occupancy due to second wave
 - ✱ ~80% of bed capacity was available for non-Covid patients during the quarter
- ✱ Q4 FY21 ARPOB stood at INR 56.9k versus INR 53.9k in Q4 FY20; +5% YoY; +11% QoQ
 - ✱ YoY ARPOB higher despite low international and lower ARPOB from Covid-19 patients
 - ✱ QoQ increase in ARPOB is primarily due to relative increase in non-Covid admissions in tower specialties⁵, growth in OPD business and overall improvement in surgical-medical mix

Executive Summary (2/2)

Operational Highlights (contd..)

- ✦ ALOS was 4.6 days in Q4 FY21 versus 4.5 days in Q4 FY20; better than 5.4 days in Q3 FY21
- ✦ OP consults stood at 4.9L in Q4 FY21 (+25% QoQ). Video consults during the quarter exceeded 17.5k
- ✦ ~39,300 OPD and ~990 IPD patients from economically weaker section treated free of charge
- ✦ Maxlab - captive retail pathology business handled ~4.5 lacs samples, thus serving ~2.1 lacs patients
- ✦ Max@home - homecare business recorded 20% volume growth over Q3 FY21 backed by revival of non-Covid demand and extension of services to Mumbai

Clinical highlights

Clinical update:

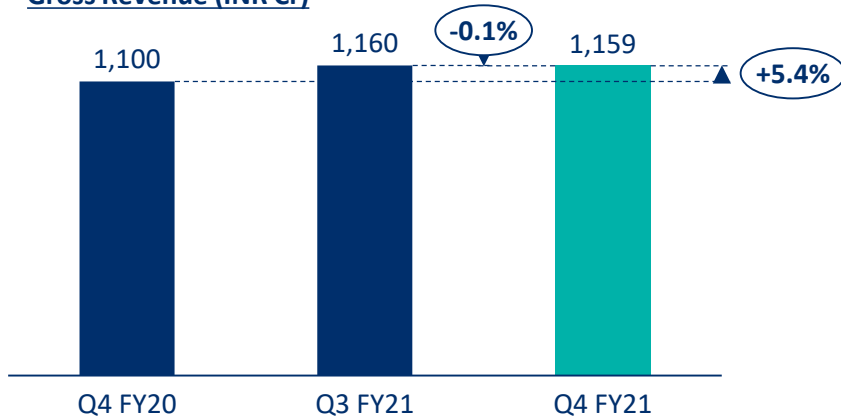
- ✦ Treated ~31,000 Covid-19 patients at hospitals and ~3,500 patients at home/extended care facilities as of May 15, 2021
- ✦ ~5.4L RT-PCR tests done and ~1.4L Covid-19 vaccination doses administered as of May 15, 2021
- ✦ Successfully implanted bluetooth enabled MRI computability AICD to prevent sudden cardiac death
- ✦ Treated a 6 Month old Infant with Intracranial Extradural Hematoma successfully
- ✦ Saved a young man's life suffering from a fulminating case of Fournier's Gangrene
- ✦ Successful Video Assisted Anal Fistula Treatment (VAAFT) in a 36 years old patient with a complex perianal fistula

Research and academics:

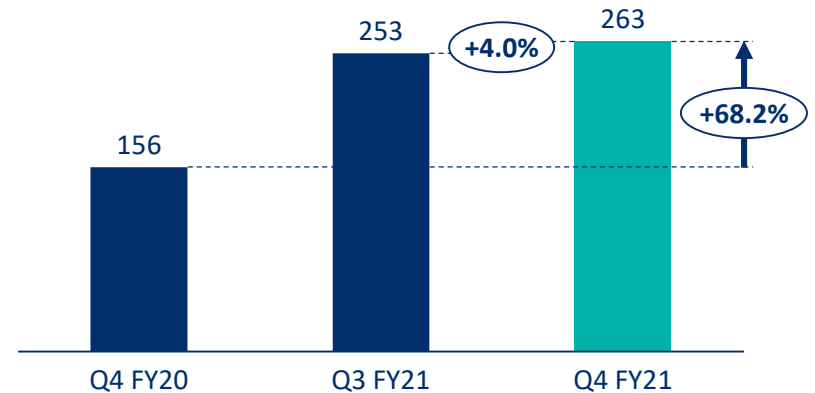
- ✦ 116 national and international publications in Q4 FY21; 81 clinical trials and 13 grants ongoing across MHC
- ✦ ~400 allied health internship, 15 observorship and 15 fellowship students joined
- ✦ Total numbers of candidates trained in American Heart Association(AHA) certified BLS/ACLS/PALS provider courses – 608, in Max Emergency life support – 910, MECP trainings – 33, Bespoke – 121
- ✦ DNB accreditation approval in 35 specialties across network; total strength of DNB residents across Max network at 433 currently
- ✦ Masters in Emergency Medicine International course extended to BLK and Nanavati Hospitals

Key Financial Highlights

Gross Revenue (INR Cr)

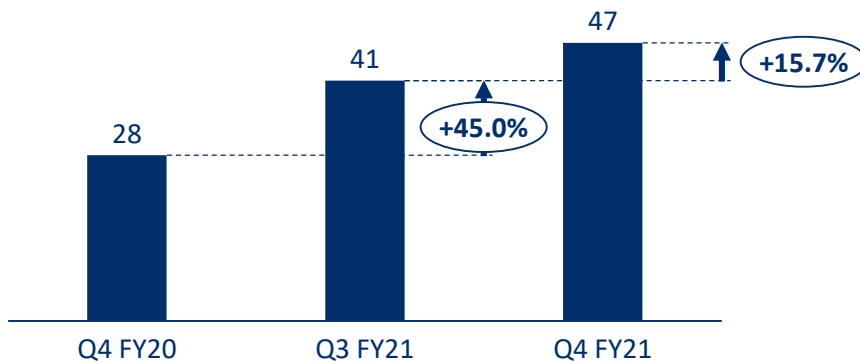


Operating EBITDA¹ (INR Cr)

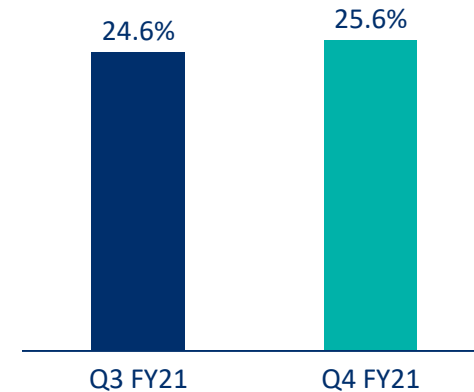


Margin² (%) Q4 FY20 : 15.5% | Q3 FY21 : 23.2% | Q4 FY21 : 24.1%

Operating EBITDA per bed³ (INR Lacs)

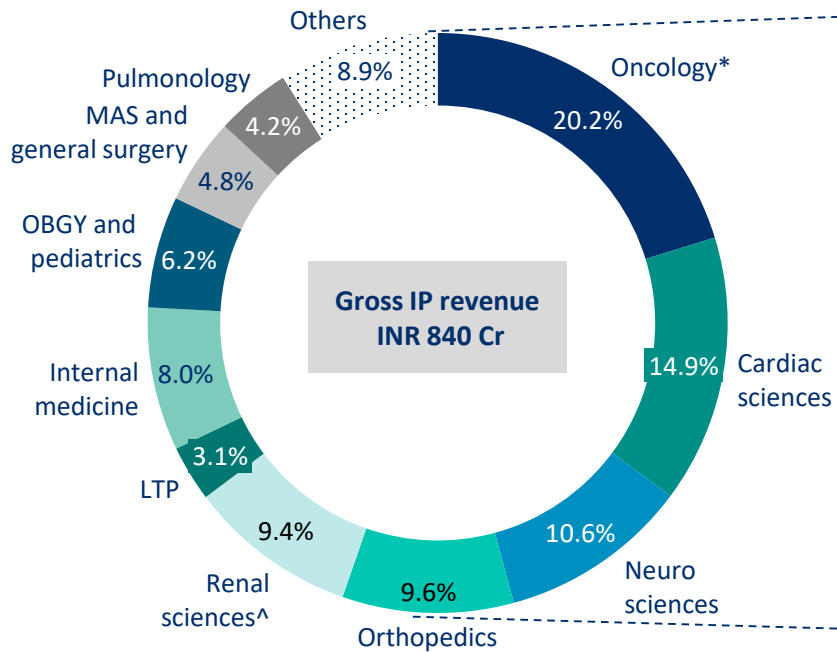


ROCE⁴

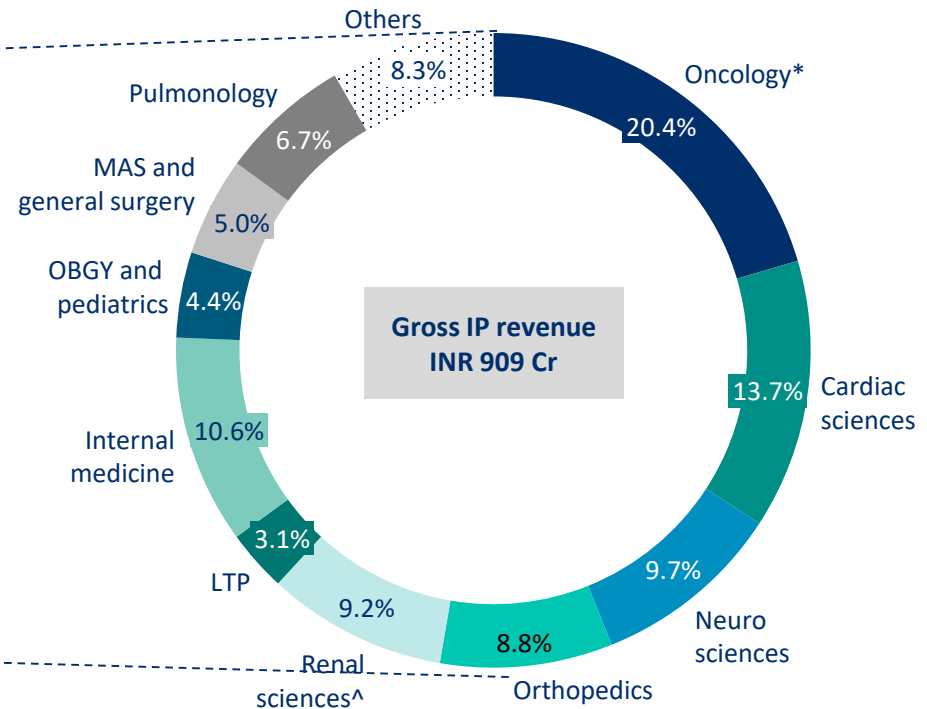


(1) Post Ind AS 116 | (2) Margin calculated on net revenue | (3) EBITDA per bed is annualized and basis occupied beds | (4) Capital employed excludes the impact of Purchase price allocation under Ind AS 103 carried out on June 01, 2020 for Max Healthcare and partner healthcare facilities; EBIT annualized (Quarter * 4). The depreciation has been considered based on normalized replacement capex

Q4 FY20



Q4 FY21



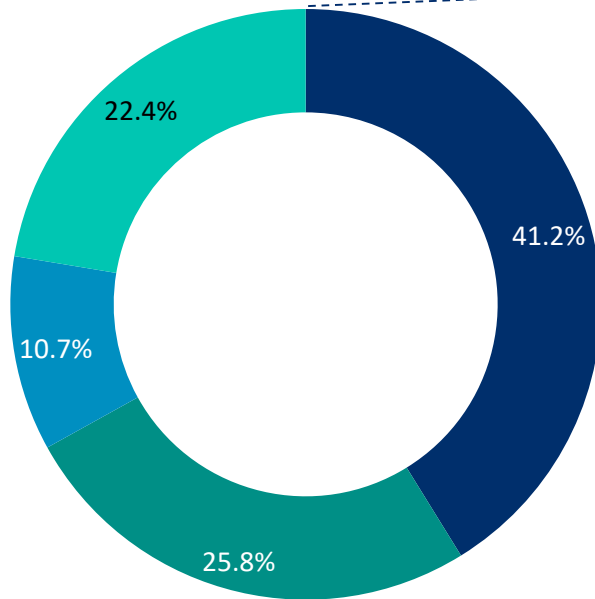
Note: Excludes OP and day care revenue, revenue from SBUs and other operating income

* Includes chemotherapy and radiotherapy

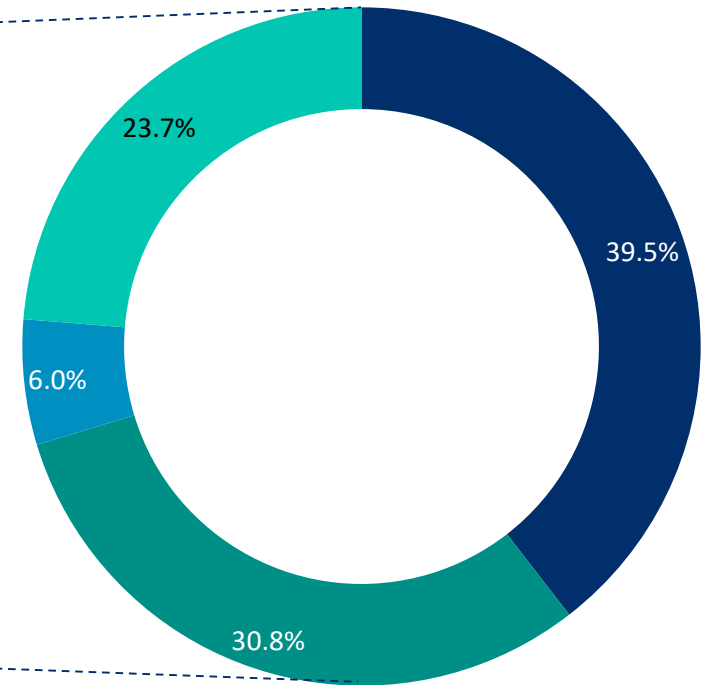
^ Includes Dialysis

Payor Profile

Q4 FY20



Q4 FY21



■ Self pay ■ TPA & corporates ■ International ■ Institutional

Note: Excludes revenue from SBUs and other operating income

Figs in INR Cr

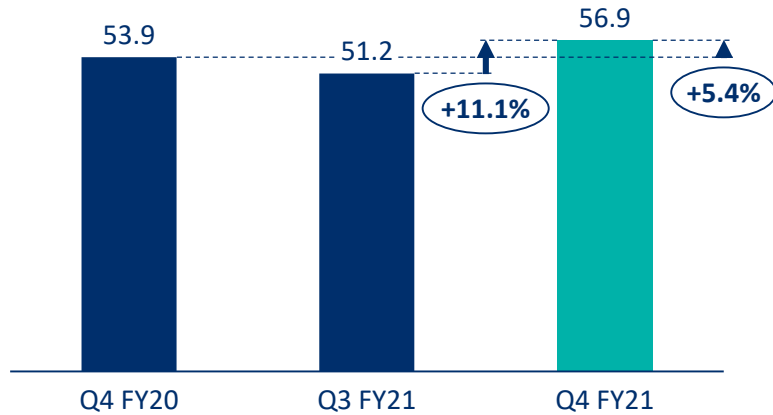
	Q4 FY20		Q3 FY21		Q4 FY21	
	Amount	% NR	Amount	% NR	Amount	% NR
Gross revenue	1,100		1,160		1,159	
Net revenue	1,005	100.0%	1,086	100.0%	1,089	100.0%
Direct costs	430	42.8%	448	41.2%	435	40.0%
Contribution	575	57.2%	638	58.8%	654	60.0%
Indirect overheads	419	41.7%	386	35.5%	391	35.9%
Operating EBITDA (post Ind AS-116)	156	15.5%	253	23.2%	263	24.1%
ESOP (Equity-settled scheme)	-	-	14	1.3%	13	1.2%
Movement in fair value of contingent consideration and amortisation of contract assets ¹	(20)	(2.0%)	(15)	(1.4%)	2	0.2%
Transaction cost	20	2.0%	-	-	-	
Reported EBITDA	157	15.6%	254	23.3%	248	22.8%
Finance cost (net) ²	54	5.4%	47	4.4%	50	4.6%
Depreciation and amortisation	52	5.1%	55	5.1%	52	4.8%
Profit before tax	51	5.1%	151	13.9%	146	13.4%
Tax	6	0.6%	16	1.4%	37	3.4%
Profit after tax	45	4.5%	135	12.5%	109	10.0%

Note : The numbers for the previous period have been recasted and regrouped to make them comparable with the disclosure in the current period

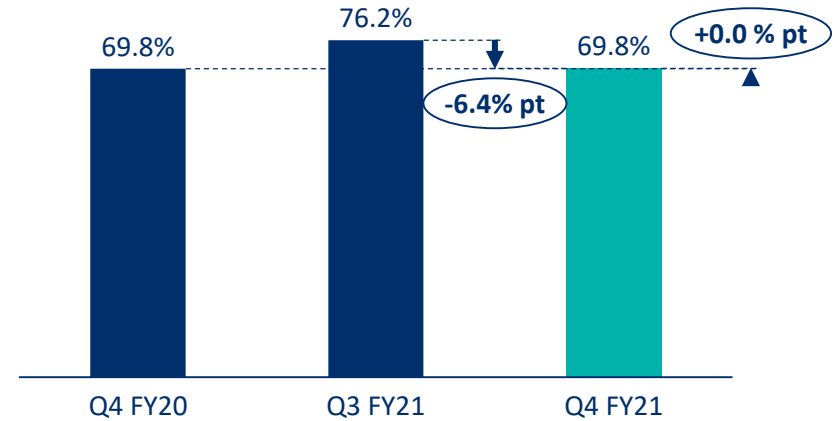
1. Non cash item representing change in fair value of contingent consideration payable to Trust/Society over balance period (~22 to 33 years) under O&M Contract. The change reflect the impact of revisions in base projections at the end of each period and change in WACC used for fair valuation
2. Q4 FY21 includes forex gain of INR 1.3 Cr on put option liability for SCHPL shares of US\$ 64.25 mn (Q3 : INR 4.7 Cr)

Key Operational Highlights

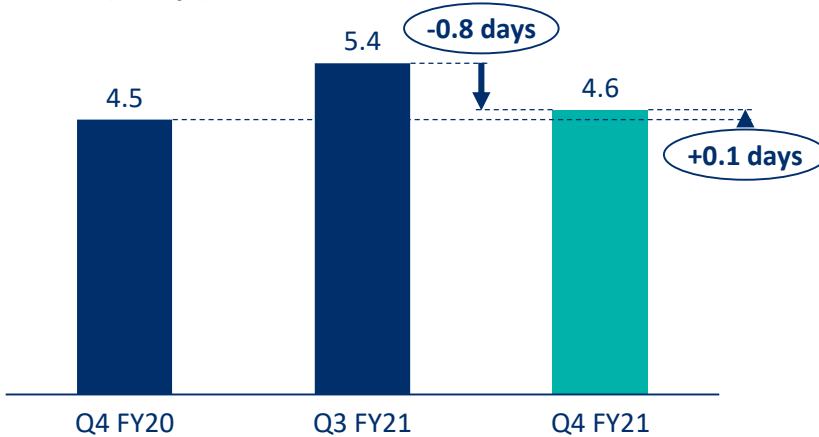
ARPOB¹ (INR/OBD) ('000)



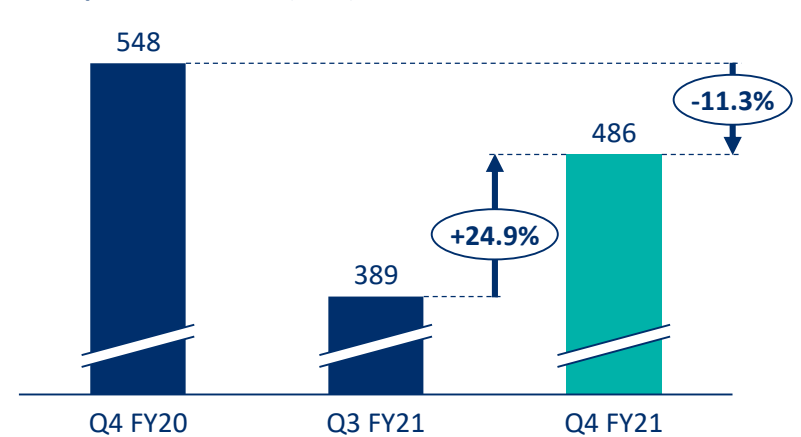
Avg. Inpatient Occupancy (%)*



ALOS² (in days)



Outpatient consults ('000)



(1) ARPOB calculated as gross revenue / total OBD | (2) ALOS calculated for discharged IP patients

*The average occupancies during Q4 for beds available for Covid-19 and non-Covid patients were ~35% and ~78% respectively

- ✱ Successfully **implanted bluetooth enabled** MRI computability AICD to prevent sudden cardiac death
- ✱ **Treated a 6 Month old Infant** with Intracranial Extradural Hematoma successfully
- ✱ Cured a 21 Years old woman with **Progressive Acute Inflammatory Demyelinating Polyradiculopathy (AIDP)** on ventilator with Intravenous Human Immunoglobulins
- ✱ Successfully conducted Core Decompression and Osteoblast cell cultured Bone Implant in a patient of **Multifocal Osteonecrosis at four sites** in a single lower limb of the patient
- ✱ Saved a young man's life suffering from a fulminating case of **Fournier's Gangrene**
- ✱ Successful **Video Assisted Anal Fistula Treatment (VAAFT)** in a 36 years old patient with a complex perianal fistula
- ✱ Conducted laparoscopic subtotal cholecystectomy successfully with removal of 5cms sized stone and Choledochoplasty by cuff of gall bladder on a patient with a **rare Mirizzi's syndrome**

✧ National and international publications

✧ **116 publications** across units for Q4 FY21

✧ **Top high index and high impact factor** being from Oncology, Pediatrics, Orthopedics, Neurology and Radiology departments

✧ **11 studies and trials on Covid-19** indications are going on across MHC

✧ **70 non-Covid-19 clinical trials** are going on across MHC

✧ **13 ongoing grants** across MHC comprising of 3 International (European Union, NIHR & Innovate UK) and 10 national grants

✧ Masters in Emergency Medicine International **course extended to BLK and Nanavati Hospitals**

✧ **~400 allied health internship, 15 observorship and 15 fellowship** students joined

✧ **3 hospitals** approved as **exam centres** for DNB students board by National Board of Examination

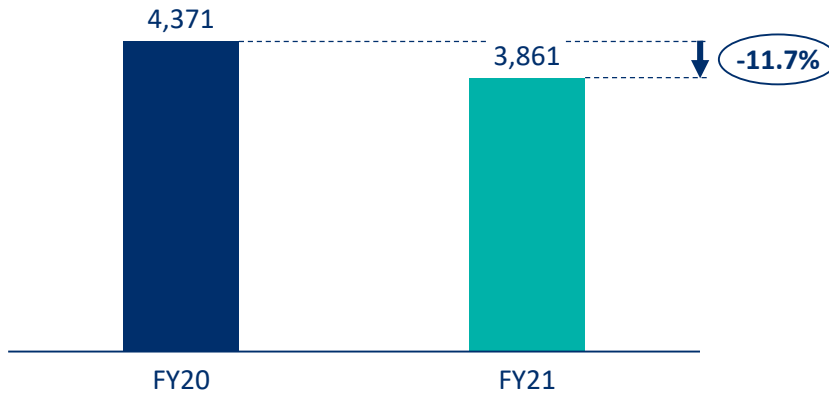
✧ **DNB accreditation** approval in 35 specialties; total strength of DNB residents across network hospitals at 433 currently

✧ **Para-medical** courses under the aegis of **National institute of open schooling (NIOS) & Indian Medical Association** are running in 'Diploma in Medical Laboratory Technology' (DMLT), 'Diploma in Operation Theatre Technology' (DOTT) & 'Diploma in X- Ray Technology' (DXRT)

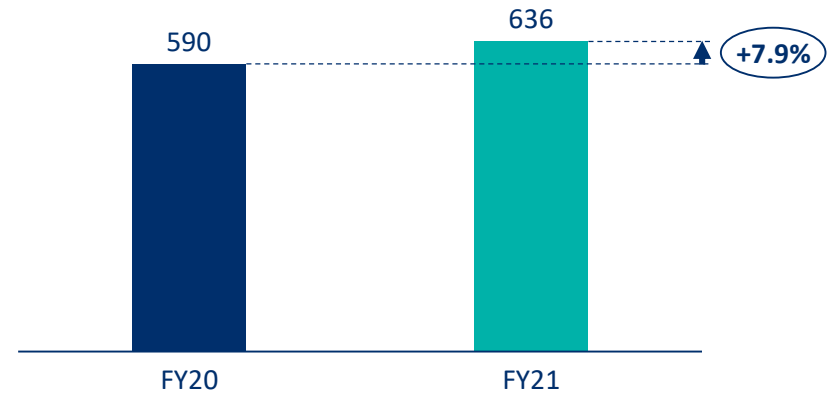
FY21 Highlights

Key Financial Highlights

Gross Revenue (INR Cr)

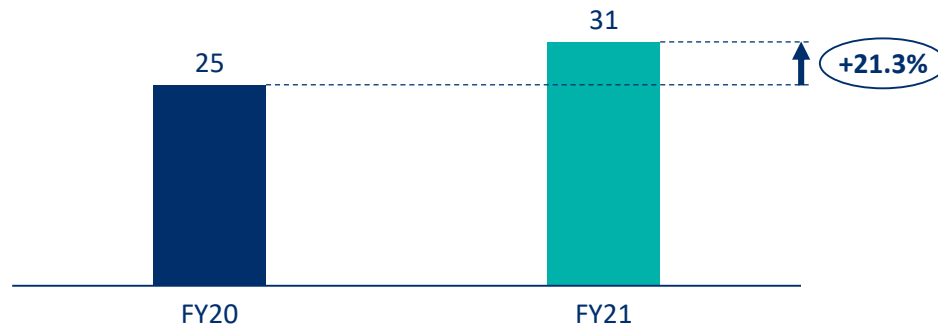


Operating EBITDA¹ (INR Cr)



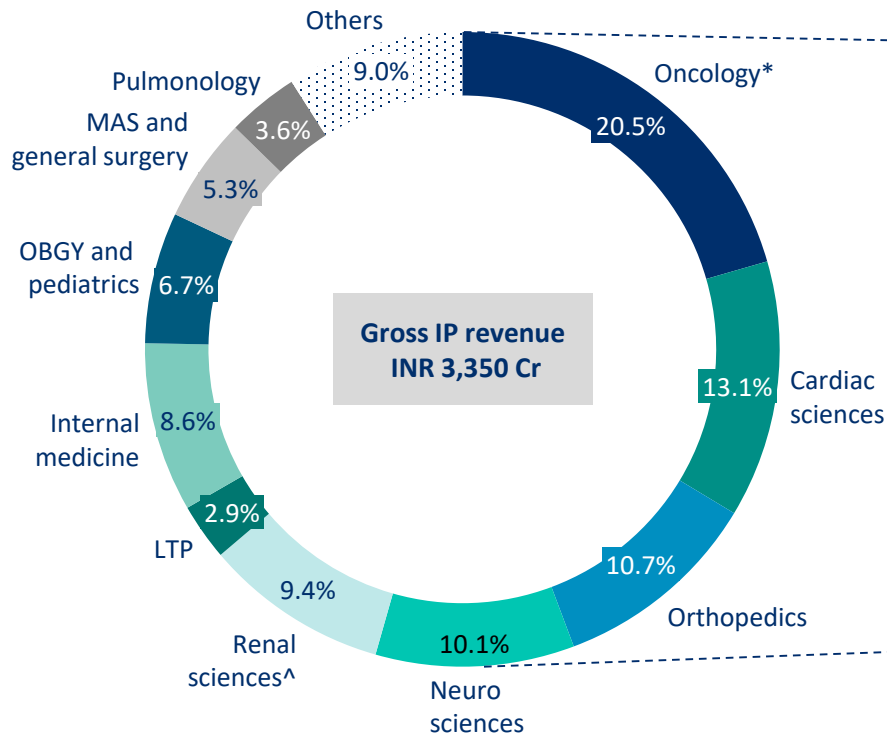
Margin² (%) FY20: 14.7% | FY21: 17.5%

Operating EBITDA per bed³ (INR Lacs)

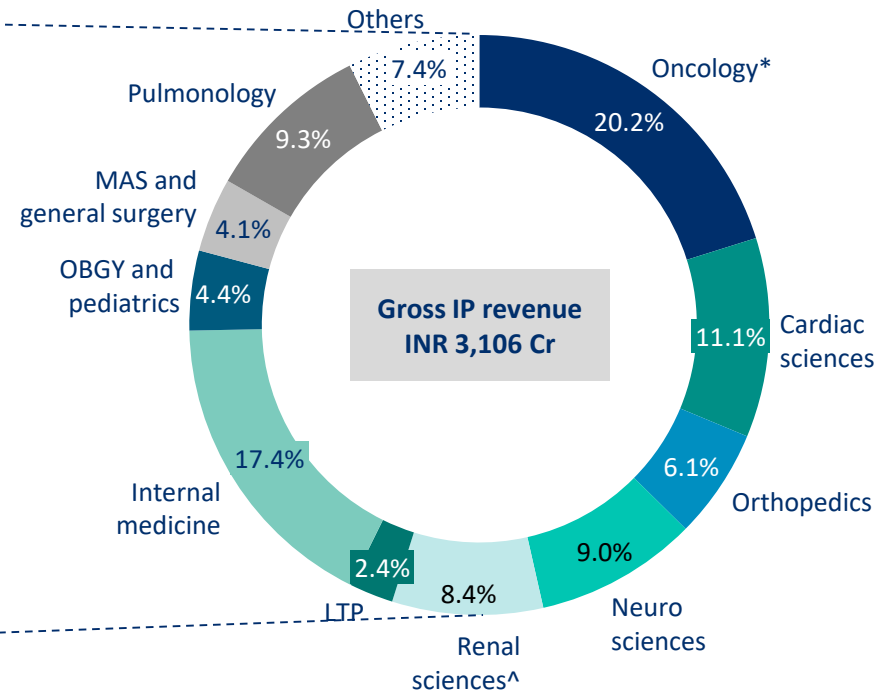


(1) Numbers are post IND AS 116 | (2) Margin calculated on net revenue | (3) EBITDA per bed is annualized and basis occupied beds

FY20



FY21

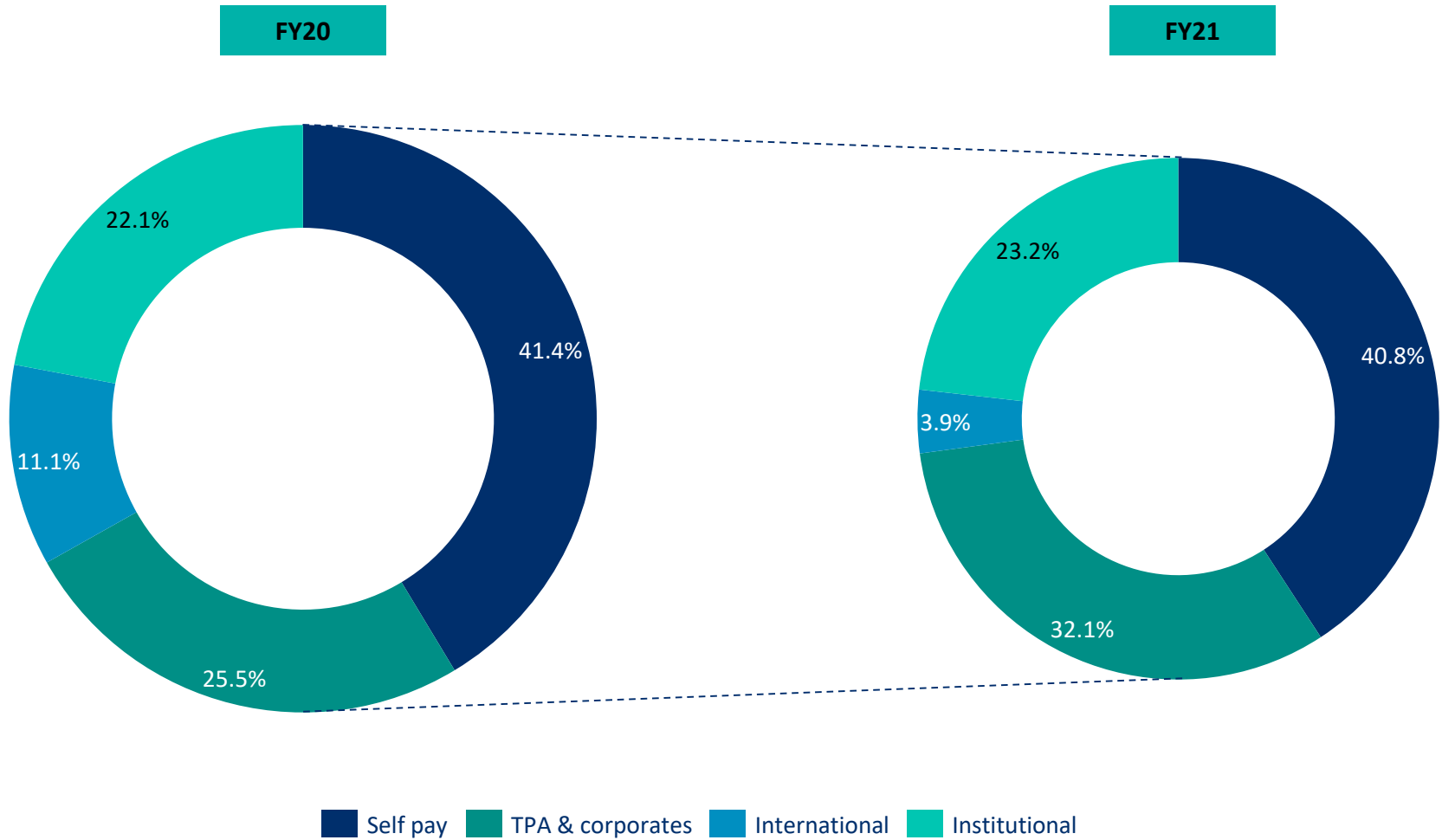


Note: Excludes OP and day care revenue, revenue from SBUs and other operating income

* Includes chemotherapy and radiotherapy

^ Includes Dialysis

Payor Profile



Note: Excludes revenue from SBUs and other operating income

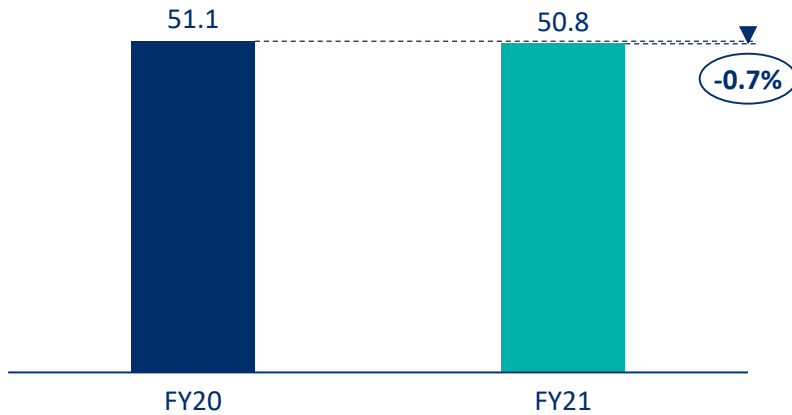
Figs in INR Cr

	FY19		FY20		FY21		Change over LY
	Amount	% NR	Amount	% NR	Amount	% NR	
Gross revenue	3,920		4,371		3,861		(11.7%)
Net revenue	3,599	100.0%	4,023	100.0%	3,629	100.0%	(9.8%)
Direct costs	1,566	43.5%	1,715	42.6%	1,508	41.6%	(12.0%)
Contribution	2,033	56.5%	2,308	57.4%	2,121	58.4%	(8.1%)
Indirect overheads	1,685	46.8%	1,719	42.7%	1,485	40.9%	(13.6%)
Operating EBITDA (post Ind AS-116)	348	9.7%	590	14.7%	636	17.5%	7.9%
Loss on fair valuation of pre-merger holding of Radiant under IND AS 103	-	-	-	-	196	5.4%	
Transaction cost	30	0.8%	43	1.1%	48	1.3%	10.8%
ESOP (Equity - settled scheme)	-	-	-	-	27	0.7 %	
One time policy harmonization impact	-	-	-	-	5	0.1%	
Movement in fair value of contingent consideration and amortisation of contract assets	19	0.5%	(3)	(0.1%)	1	0.0%	
Reported EBITDA	299	8.3%	549	13.6%	359	9.9%	(34.7%)
Finance cost (net)	155	4.3%	215	5.3%	187	5.2%	(12.9%)
Depreciation and amortisation	186	5.2%	208	5.2%	216	6.0%	3.6%
Profit before tax	(42)	(1.2%)	126	3.1%	(45)	(1.2%)	
Tax	18	0.5%	(3)	(0.1%)	50	1.4%	
Profit after tax	(60)	(1.7%)	129	3.2%	(95)	(2.6%)	

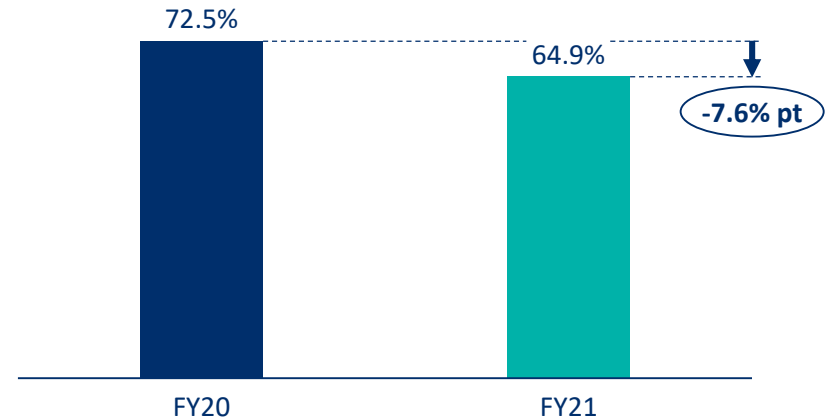
Note:

1. The numbers for the previous period have been recasted and regrouped to match with the disclosure in the current period
2. FY19 financials are pre-IND AS -116 unaudited numbers based on arithmetic total of line items appearing in the pre-merger P&L of Max Healthcare and Radiant Lifecare
3. Operating EBITDA (pre Ind AS-116) stood at INR 548 Cr in FY20 and INR 601 Cr in FY21

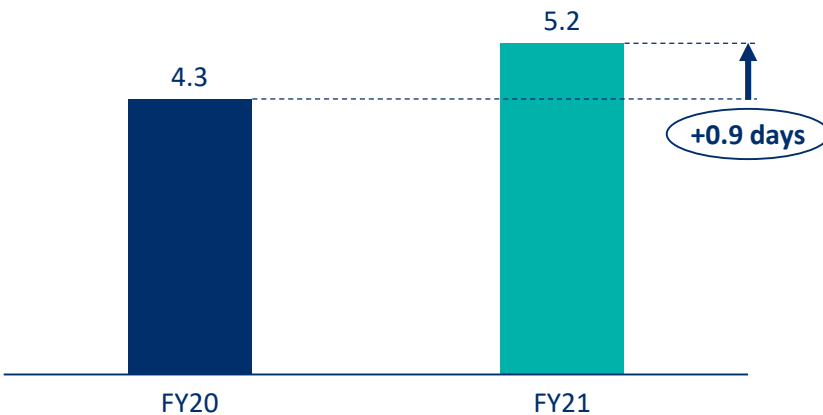
ARPOB¹ (INR/OBD) ('000)



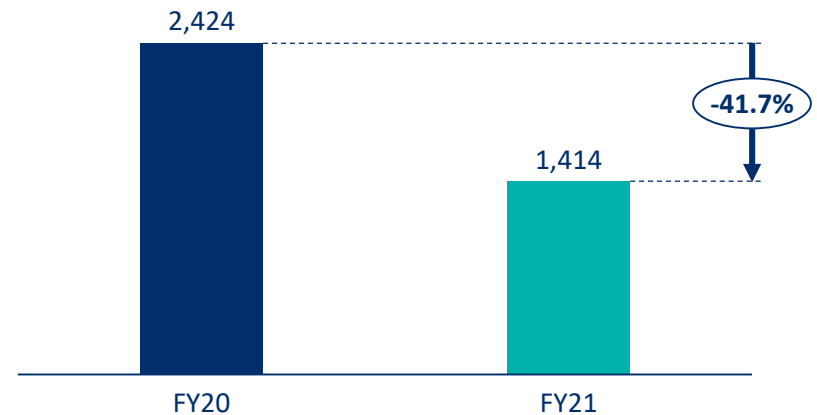
Avg. Inpatient Occupancy (%)



ALOS² (in days)



Outpatient consults ('000)



(1) ARPOB calculated as gross revenue / total OBD | (2) ALOS calculated for discharged IP patients only

Balance Sheet

(Includes Managed & Partner Healthcare Facilities)

Figs in INR Cr

Mar 20 ¹	Particulars	Sep 20 ²	Mar 21 ²
3,386	Shareholders' Equity	4,293	5,738
1,927	Gross Debt	1,853	1,128
586	Put Option Liability	549	82
244	Lease Liabilities (Ind AS 116)	194	198
247	Deferred/Contingent Consideration Payable ³	442	428
(2)	Deferred Tax Liability/Deferred Tax Asset	92	158
6,388	Total Liabilities	7,424	7,731
2,713	Net Fixed Assets (Tangible & Intangible incl CWIP)	3,201	3,190
158	Right to Use Assets (Ind AS 116)	239	242
768	Goodwill	3,754	3,773
94	Inventories	80	74
2,138	Investments	2	2
411	Cash & Bank balance	414	666
106	Net Current & Non-Current Assets/(Liabilities) ⁴	(266)	(215)
6,388	Total Assets	7,424	7,731

Note : The numbers for the previous period have been recasted and regrouped to match with the disclosure in the current period. This is a simplified version.

1. Based on arithmetic total of line items appearing in the pre-merger Balance Sheet of Max Healthcare and Radiant Lifecare
2. Includes impact of fair valuation under Purchase Price Allocation (PPA) carried out on June 1, 2020 for Max Healthcare and Partner Healthcare facilities
3. Represents fair value of long term liabilities payable to Trust/Societies over the remaining contract period ranging from 22 to 84 years
4. Includes unfavorable lease liability (INR 231 Cr as at end of March 31, 2021) recognized on PPA. The balance movement is mainly due to Income tax refunds & collections of old AR

Memorandum Consolidation of MHIL and Partner Healthcare Facilities financial results for year ended March 31, 2021

(INR Cr)	MHIL & its subsidiaries & Silos	MHIL & it's subs (Apr & May 20)	Partner Healthcare Facilities ("PHF") Financials (IGAAP Audited)				Eliminations & Adjustment (2)	MHC Network (Certified by ICA)
	Audited	(Pre Merger : Certified by Management)	Balaji Society	GM Modi Society	Devki Devi Society	IND AS Adjustment ⁽¹⁾		
Revenue from operations	2,505	178	394	255	533	-	(263)	3,601
Other Income ⁽³⁾	38	-	2	4	5	1	(22)	28
Total Operating income	2,543	178	396	259	538	1	(285)	3,629
Purchase of pharmacy, drugs, consumables & implants	594	45	78	49	186	-	21	973
Employee benefits expense ⁽⁴⁾	562	57	73	47	68	-	143	950
Other expenses	900	81	183	129	215	(3)	(436)	1,069
Total Expenses	2,057	183	334	224	469	(3)	(272)	2993
Operating EBITDA	486	(5)	62	34	69	4	(13)	636
Less : non-operating expenses								
Loss on fair valuation of pre-merger holding of Radiant under Ind AS 103	196	-	-	-	-	-	-	196
Transaction cost ⁽⁵⁾	48	-	-	-	-	-	-	48
ESOP (Equity-settled Scheme)	27	-	-	-	-	-	-	27
One time policy harmonization impact	5	-	-	-	-	-	-	5
Movement in fair value of contingent consideration and amortisation of contract assets	1	-	-	-	-	-	-	1
Reported EBITDA	208	(5)	62	34	69	4	(13)	359
Finance Cost (Net)	103	18	10	30	27	1	(1)	187
Depreciation & Amortization	174	20	18	11	17	2	(27)	216
Profit / (Loss) before tax	(69)	(43)	33	(7)	25	1	15	(45)
Tax expenses	45	(3)	-	-	-	-	7	50
Profit / (Loss) after tax (before share in associates)	(114)	(41)	33	(7)	25	1	7	(95)

(1) Mainly relates to Ind AS 116 (Accounting for Leases) at Partner Healthcare Facilities;

(2) Eliminations mainly relate to revenue earned from PHF by way of fees under various medical service agreements, ambulance services and income from sale of pharmaceuticals etc. These include consequential impact of reversal of Intangible assets recognized in MHIL & its subsidiaries for contracts with PHFs on amortization. The interest on deferred consideration payable over the contract period by a society to unconsolidated part of the other Society has been included in Finance costs. Further, forex gain has also been reclassified under Finance costs.

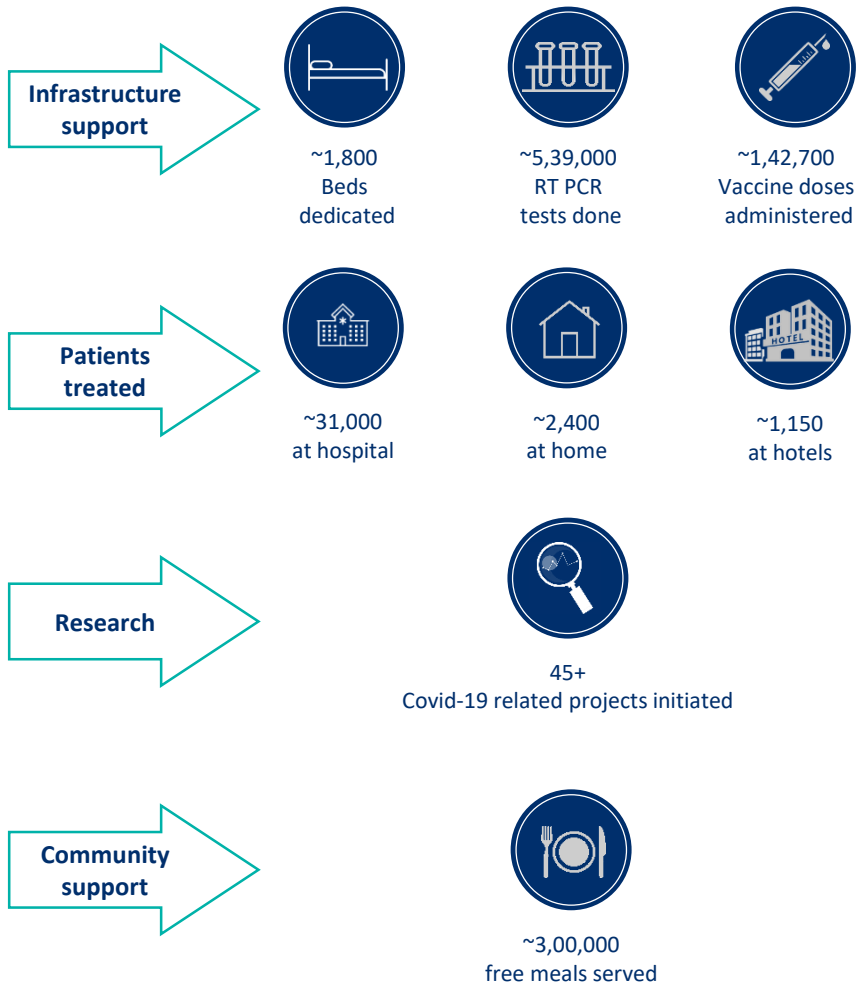
(3) Other Income includes income from Clinical trials, EPCG, Unclaimed Balances written back, Sponsorships and Contributions received etc

(4) Includes movement in OCI for actuarial valuation impact but excludes ESOP (Equity Settled) expenses

(5) Represents expenses incurred on stamp duty and fees for lawyers and bankers etc in relation to Composite Scheme of Amalgamation & Arrangement

Covid-19 Update

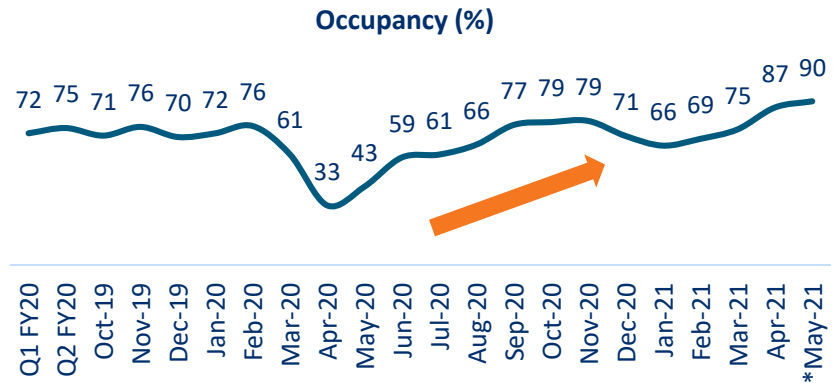
Key contributions* :



Our response :

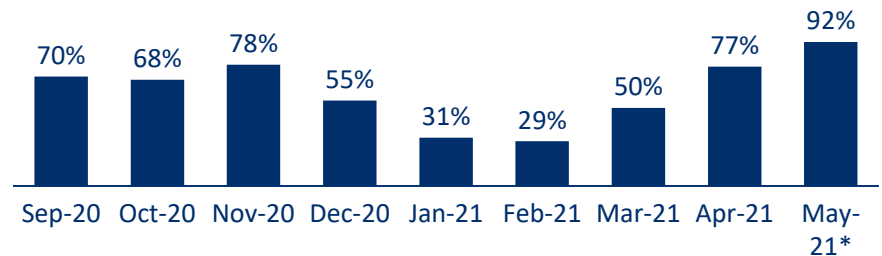
- * First private hospital to offer a dedicated facility in Delhi for Covid-19 care
- * Operationalized India's one of the largest vaccination centers
 - * spread over 1.65 acres; can operate 50 billing and 40 nursing counters
 - * capacity to administer ~10,000 vaccine doses in a day
- * Installed O₂ generators at two of our network hospitals in NCR and expect two more to get operational by end of May 2021 thereby reducing dependence on liquid medical oxygen
- * One of the first private sector labs to start Covid-19 testing
- * First of its kind convalescent plasma therapy trial for critically ill patients
- * Set up Covid-19 related medical processes-
 - * Formulated detailed clinical protocols for clinical management and infection prevention
 - * Created isolation areas for segregation
 - * Provided intensive training to frontline medical personnel
- * Effectively managed supply chain to prioritise availability of Covid-19 related materials
- * Implemented measures to conserve cash including material rate renegotiations and deferment of discretionary expenses
- * Reduced salary for senior and middle management – these have been fully re-instated in the course of Q3 FY21
- * Strengthened digital platforms-
 - * Significantly ramped up tele-consulting- ~8% of total consultations were digital in FY21
 - * Developed remote monitoring capabilities, particularly during lockdown, in Tri-city

- ❖ Post sharp fall in occupancy rate at the start of first wave of Covid-19 at the end of Mar'20, the occupancy steadily rose back to its peak levels in Nov'20
- ❖ In Jan 21 occupancy decreased to ~66% levels with decline in Covid cases leading to underutilization of Covid-19 reserved beds and farmer's agitation impacting flow of upcountry non-covid patients
- ❖ Occupancy rebounded to ~75% levels in Mar'21 as second wave of Covid-19 hit India and rose to ~90% levels during first half of May'21

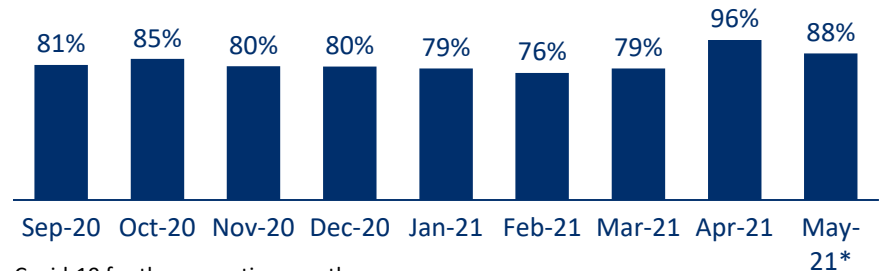


- ❖ During H2 FY21, Covid-19 occupancy declined post peaking out in Nov-2020 . However, following the second wave of Covid-19 it rebounded to over 90% during first half of May'21
- ❖ Covid-19 reserved beds were varied in tandem with the rate of Covid-19 admissions and advisory from the regulatory bodies
- ❖ Non Covid-19 discharges grew steadily during Q4 FY21

Covid-19 occupancy¹ (%)



Non Covid-19 occupancy¹ (%)

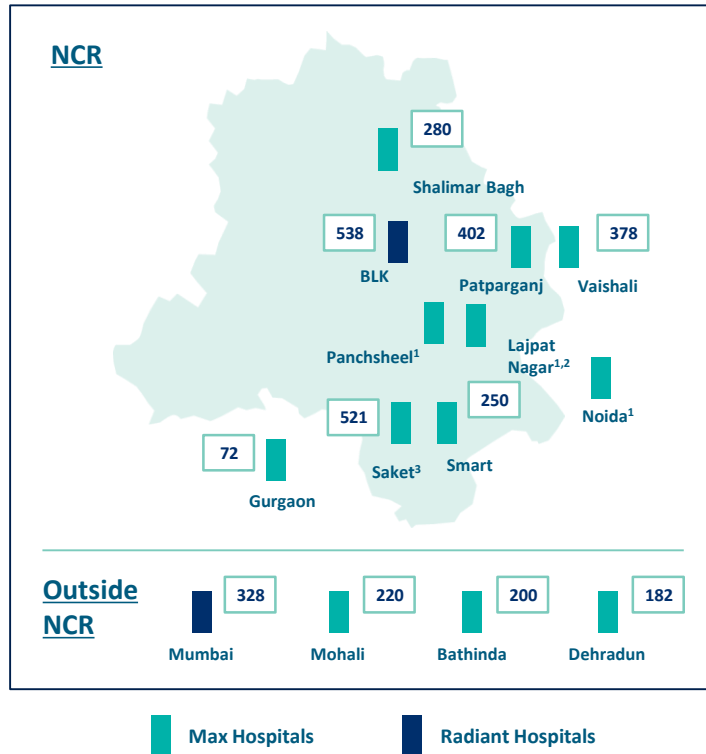


1) Occupancy calculated on the basis of beds dedicated to Covid-19 and non Covid-19 for the respective month

*Based on average occupancy for first 15 days of May 2021

About the Company

Max Healthcare and Radiant merged their healthcare businesses to create the second largest healthcare chain in India by revenue



16
Facilities

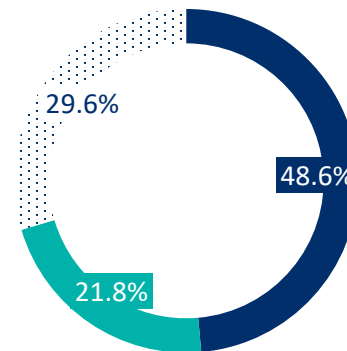


~3,400
Bed capacity



~85%
Beds in metros

Shareholding structure (as on March 31, 2021)



Top Public investors

(>1% shareholding) includes -

- Smallcap World Fund
- WF Asian Reconnaissance Fund
- HDFC Flexi Cap Fund
- SBI focused equity fund
- Ashish Dhawan
- Briarwood Capital Master Fund
- Ellipsis Partners

Legend: Kayak (Dark Blue), Abhay Soi (Teal), Public & Others[^] (Dotted)

* By revenue

[^] Others include 4.82% of the equity share capital of the Company, which has not currently been considered towards compliance with the minimum public shareholding threshold

(1) Standalone specialty clinics with outpatient and day care services | (2) 2 facilities at Lajpat Nagar | (3) 320 beds in East Block and 201 in West Block

Vision: To be the Most Well Regarded Healthcare Provider in India

To be the **most well regarded healthcare provider** in India committed to the highest standards of **clinical excellence and patient care** supported by **latest technology and cutting edge research**



Robotics



Advanced robotics provides high precision and enables minimal invasive surgery across multiple specialties such as Oncology, Neurology

S8 Navigation with O-Arm



StealthStation™ S8 navigation integrates with the O-arm(opens new window)™ imaging system, replacing intraoperative fluoroscopy with a fluid, 3D-navigated surgical experience

Radixact – TomoTherapy System



Next generation TomoTherapy platform, designed to enable more efficient, effective and precise delivery of radiation to the entire spectrum of cancer indications

PET-CT



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

Cath Lab – Artis Zee Pure



Artis zee floor-mounted system with a large detector offers excellent performance for an improved clinical workflow with a larger field of view

Intra OP Portable CT



BodyTom® has the ability to perform axial, helical (CTA), and dynamic scanning, making it ideal for providing multi-departmental imaging solutions

Research:



Significant **strategic partnerships** including Deakin University, Australia and Imperial College London – 15,000+ research participants and 1 million pound research grant



900+ high index journal **research publications** in last 5 years



Private **bio bank** - ~15,000 bio samples stored



Several **research grants** from leading organisations such as CSIR, DBT, ICMR, INSA, etc.



Researching use of Artificial Intelligence in Radiology with leading international partners



80+ on-going clinical **research projects**

Academics:

Max Institute of Medical Excellence (MIME) is the **education division** of MHC for medical education & training

- ✳ Hosts prestigious Royal college of Physicians exam - successfully hosted 4 examinations
- ✳ Recognized by JRCPTB to deliver post graduate Internal medicine training outside UK
- ✳ Conducts Masters in Emergency program in collaboration with George Washington University, USA
- ✳ 15,000+ students trained in Life Support programmes in last 5 years
- ✳ ~12,000 trainees participate in various training programmes and exams annually
- ✳ ~1,200 trainees undergo CMEs, workshops and bespoke trainings annually
- ✳ 430+ post graduate students enrolled across 30 specialties

Clinical Safety

- * Patient Safety Award by FICCI
- * Diamond Award for Stroke Ready Centre by the World Stroke Organization
- * Times Healthcare Achievers Award



- * Nursing Excellence Award at AHPI Healthcare Excellence Awards 2020



Operational Excellence

- * Best use of six sigma in Healthcare



- * FICCI Excellence Awards for 'Operational Excellence'
- * Best green hospital (reducing carbon foot print of tertiary care hospital)
- * Best hi-tech hospital at ET Healthcare awards 2020



Service Quality

- * Best customer service in Healthcare



- * Bronze award for 'Life savers' project (Max Bike responder) at 'American Society for Quality'
- * BPM Asia Star 2017 by CII Institute of Quality
- * D.L. Shah National Award for 'Economics of Quality' by QCI



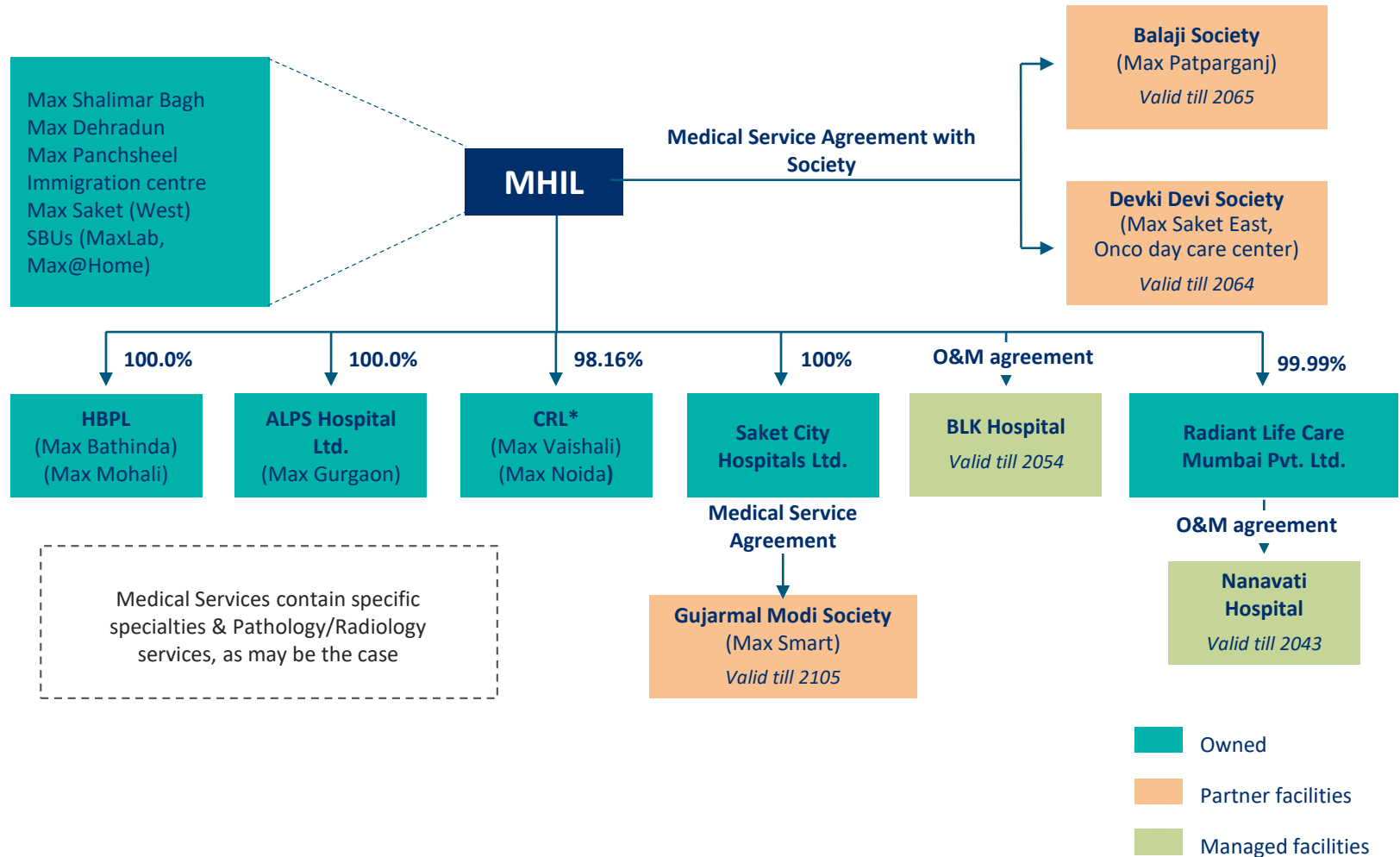
Others

- * ET Best Healthcare brand
- * HIMSS-Elsevier Digital Healthcare Award 2019



- * Best organization for staff/employee engagement for patients by the CRM Academy of Asia
- * Gold award from Hospital Management Asia





Corporate structure as on May 20, 2021

Validity includes extensions available under the contract

Application for merger of ALPS with SCHL was filed on April 9, 2021 with NCLT, Mumbai

MHIL – Max Healthcare Institute Limited; CRL – Crosslay Remedies Limited; HBPL – Hometrail Buildtech Private Limited

List of Network Healthcare Facilities

Name	Location	Description
Max Super Speciality Hospital, (West Block) Saket	Delhi	Hospital
Max Super Speciality Hospital, (East Block) Saket	Delhi	Hospital
Max Smart Super Speciality Hospital, Saket	Delhi	Hospital
Dr. B L Kapur Memorial Hospital	Delhi	Hospital
Dr. Balabhai Nanavati Hospital	Mumbai	Hospital
Max Hospital, Gurugram	Gurugram	Hospital
Max Super Speciality Hospital, Patparganj	Delhi	Hospital
Max Super Speciality Hospital, Vaishali	Ghaziabad	Hospital
Max Super Speciality Hospital, Shalimar Bagh	Delhi	Hospital
Max Super Speciality Hospital, Mohali	Mohali	Hospital
Max Super Speciality Hospital, Bhatinda	Bathinda	Hospital
Max Super Speciality Hospital, Dehradun	Dehradun	Hospital
Max Multi Speciality Centre, Panchsheel Park	Delhi	Medical centre
Max MedCentre, Lajpat Nagar – Immigration Department	Delhi	Medical centre
Max Institute of Cancer Care, Lajpat Nagar	Delhi	Medical centre
Max Multi Speciality Centre, Noida	Noida	Medical centre

Max Healthcare Institute Limited (MHIL) is India's leading provider of healthcare services. It is committed to the highest standards of medical and service excellence, patient care, scientific and medical education.

MHIL has major concentration in north India consisting of a network of 16 healthcare facilities. Out of the total network, eight hospitals and four medical centres are located in Delhi and the NCR and the others are located in the cities of Mumbai, Mohali, Bathinda and Dehradun. The Max network includes all the hospitals and medical centres owned, operated and managed by the Company and its subsidiaries, and partner healthcare facilities. These include state-of-the-art tertiary and quaternary care hospitals at Saket, Patparganj, Vaishali, Rajendra Place, and Shalimar Bagh in NCR Delhi and one each in Mumbai, Mohali, Bathinda and Dehradun, secondary care hospital in Gurgaon and Day Care Centres at Noida, Lajpat Nagar and Panchsheel Park in NCR Delhi. The hospitals in Mohali and Bathinda are under PPP arrangement with the Government of Punjab.

In addition to its core hospital business, MHIL has two SBUs - Max@Home and MaxLab. Max@Home is a platform that provides health and wellness services at home and MaxLab offers diagnostic services to patients outside its network.

**For further information,
please contact:**

For more information, visit

www.maxhealthcare.in

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