

November 19, 2025

То

The Secretary, Listing Department, BSE Limited, 1st Floor, Phiroze Jeejeebhoy Towers, Dalal Street, Mumbai 400001. To

The Manager, Listing Department, The National Stock Exchange of India Ltd, Exchange Plaza, Bandra Kurla Complex, Bandra (East), Mumbai 400051.

Scrip Symbol: ASTERDM

Scrip Code: **540975**

Dear Sir/Madam,

Sub: Investor Presentation

With reference to the captioned subject, please find enclosed the Investor Presentation as on September 30, 2025.

Kindly take the above said information on record.

Thank you

For Aster DM Healthcare Limited

Hemish Purushottam

Company Secretary and Compliance Officer M. No. A24331



Investor Presentation

November 2025



Disclaimer



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Prospective and existing investors should make their own evaluation of the Company as the information provided here does not purport to be all inclusive or to contain all of the information a prospective or existing investor may desire. Interested parties shall conduct their own due diligence and investigation on the information, before relying and acting thereon. Company makes no representation or warranty as to the accuracy or completeness of this information and shall not have any liability for any representations (expressed or implied) regarding information contained in, or for any omissions from, this information or any other written or oral communications transmitted to the recipient in the course of its evaluation of the Company.

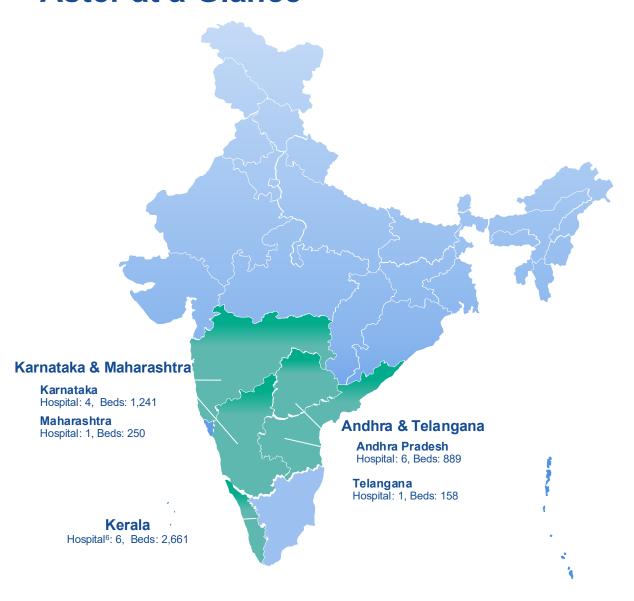
This presentation may contain certain "forward looking statements", which are based on certain assumptions and expectations of future events. Actual future performance, outcomes and results may differ materially from those expressed in forward-looking statements as a result of a number of risks, uncertainties and assumptions. Though such forward-looking statements are based on reasonable assumptions, it can give no assurance that such expectations will be met. Neither the Company nor any of its advisors or representatives assumes any responsibility to update forward-looking statements or to adapt them to future events or developments.

Note- QCIL Numbers are Indicative and subject to statutory audit adjustments. Proforma numbers for merged entity are also subject to finalization and audit of the merged accounts. Actual amounts, losses or impact on net profit could materially differ from those that have been estimated. In addition, other factors that could cause actual results to differ materially from those estimated include harmonization of accounting policies and practices.



Aster at a Glance









15 Cities and 5 States



19² Hospitals



283 Labs and PECs



5,199 Capacity beds



203 Pharmacies³

Operational metrics (H1FY26)



61% Occupancy



3.1 days ALOS



INR 50,400 ARPOB

Financial metrics (H1FY26)



Revenue INR 2,275 Cr

20% 5 Year CAGR⁵



Op. EBITDA Margin: 21%⁴

38% 5 Year CAGR⁵



Capex INR 302 Cr

~INR 1,230 Cr 5 Year Capex⁵

- 1. Presence and Operational metrics are as on September 30, 2025
- 2. Count includes 4 O&M Asset Light hospital beds with a capacity of 554 beds
- 3. Pharmacies in India operated by ARPPL under brand license from Aster
- 4. Operating EBITDA Margin has been rounded off
- 5. Five Year Revenue & Operating EBITDA CAGR and 5 Year Capex are till the year ending FY25
- 6. Kerala hospital and bed count excludes WIMS.
- PECs: Patient Experience Centers; ALOS: Average Length of Stay; ARPOB: Average revenue per occupied bed;

Our Vision and Core Values





Dr. Azad Moopen
Founder Chairman & Managing Director

Our Vision

Our Promise

"We'll treat you well"



A caring Mission with a global vision to serve the world with accessible and affordable quality healthcare

Excellence

"Surpassing current benchmarks constantly by continually challenging its ability and skills to take the organisation to greater heights"

- Albert Einstein

Compassion

"Going beyond boundaries with empathy and care"

- Mother Teresa

Integrity

Our Values

"Doing the right thing without any compromises and embracing a higher standard of conduct"

- Nelson Mandela

Respect

"Treating people with utmost dignity, valuing their culture contributions and fostering a culture that allows each individual to rise to their fullest potential"

- Mahatma Gandhi

Passion

"Going the extra mile willingly, with a complete sense of belongingness and purpose while adding value to the stakeholders"

- Steve Jobs

Unity

"Harnessing the power of synergy and engaging people for exponential performance and results"

- H.H. Sheikh Zayed Bin Sultan Al Nahyan

From Clinic to a Healthcare Powerhouse: A Transformational Journey to a Thriving Hospital Network...





2024

QCIL Merger Announcement Completed Segregation of GCC and India



2023

Aster Whitefield Block A&B, Bengaluru



2022

O&M Asset Light Model introduced



2021

Large Expansion of Facilities Aster Whitefield in Bengaluru*

Aster Wholesale Pharmacy



2020

Aster Labs



2018

Listing on NSE & BSE





Aster CMI in Bengaluru Aster Medcity in Kerala

2001



Commenced operations in India at MIMS Kozhikode



Commenced operations as a single doctor clinic in Dubai

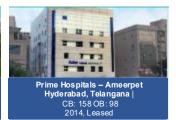
Kerala Cluster



2014, Owned







Andhra Pradesh & Telangana



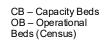












(As on 30th Sep 2025)











Aster Ramesh Labbipet Vijayawada, AP CB:54 OB:47 | 2016, Leased

Aster Narayandari

Tirupati, AP | CB: 150 OB: 136

Karnataka & Maharashtra









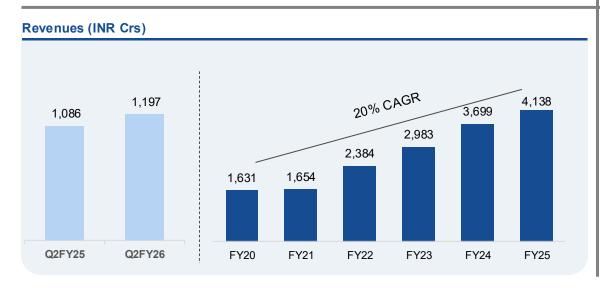


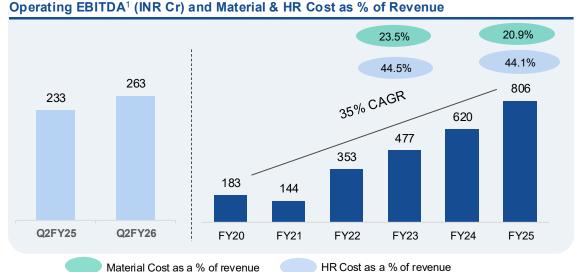
Sustained improvement in our India Business performance over the Aster past few years











^{1.} FY 19 numbers are Pre-Ind AS 116

^{2.} Operating EBITDA for the period Q2 FY26 excludes the ESOP Cost of Rs. 3.5 Cr [Q2 FY25: 2.2 Cr], Movement in fair value of contingent consideration payable of Rs. Nil Cr [Q2 FY25: 2.7 Cr], Variable O&M fee amounting to Rs.9.7 Cr [Q2 FY25: 6.8 Cr]. [Our Operating & Management (O&M) agreements, encompasses both fixed and variable component. While the fixed component of the O&M fee is delineated into depreciation and finance costs as per Ind AS 116, whereas the variable component falls outside the scope of IndAS 116, leading to an incomplete reflection of the standard's impact in EBITDA]

^{3.} Material cost & Manpower cost as a % of revenue for FY25 excludes wholesale pharmacy



Merger of Aster DM & Blackstone backed Quality Care

Aster DM and Blackstone-backed Quality Care to merge and create one of the top 3 hospital chains in India with 10,360+ beds



Transaction Overview



- The board of directors of Aster DM Healthcare Limited ("Aster" or "Aster DM") approved the merger of Quality Care India Limited ("Quality Care" or "QCIL") with Aster in one of the largest M&A in the hospital space in India¹
- The merged listed entity will be named Aster DM Quality Care Limited ("Merged Entity")
- Aster acquired a 5.0% stake in QCIL from Blackstone and TPG in consideration of primary share issuance by Aster for 3.6% stake² followed by merger of QCIL into Aster by way of a scheme of amalgamation

Merged Entity

Capacity Beds³: 10,360+

Revenue⁴: INR 8,105 Cr Operating EBITDA^{4,5}: INR 1,661 Cr

Valuation



- The transaction values Aster at 36.6x FY24 Adj. Post INDAS EV/ EBITDA^{5,6}, which is 45% higher than the relative multiple ascribed to QCIL i.e., 25.2x FY24 Adj. Post INDAS EV/ EBITDA^{5,6}
- Inter-se shareholding between Aster DM and Quality Care shareholders would be 57.3% and 42.7% respectively
- The merger is cash neutral and is expected to be EPS accretive from 1st full year of operations

Governance



- Aster promoters, along with Blackstone, will hold equal representation on the board and jointly control the Merged Entity. Independent directors to have a 50% representation on the board of the Merged Entity
- Dr. Azad Moopen will continue in his role as the Executive Chairman; Mr. Varun Khanna (Group MD, QCIL) and Mr. Sunil Kumar (CFO, Aster) will be promoted to the position of MD & Group CEO and Group CFO of the Merged Entity respectively

consideration and variable O&M fee

The above is subject to necessary approvals

- One of the largest M&A in India for listed hospitals based on number of operational beds
- On post preferential allotment basis
- As of September 25 For the period FY25

Issue price in compliance with SEBI regulations for Scheme transaction and preferential allotment

Combined Operating EBITDA is Post INDAS EBITDA adjusted for one-time & non-cash expenses, ESOP cost, movement in fair value of contingent

All numbers of QCIL are indicative and subject to statutory audit adjustments, if any

Aster DM & Quality Care - Business snapshot



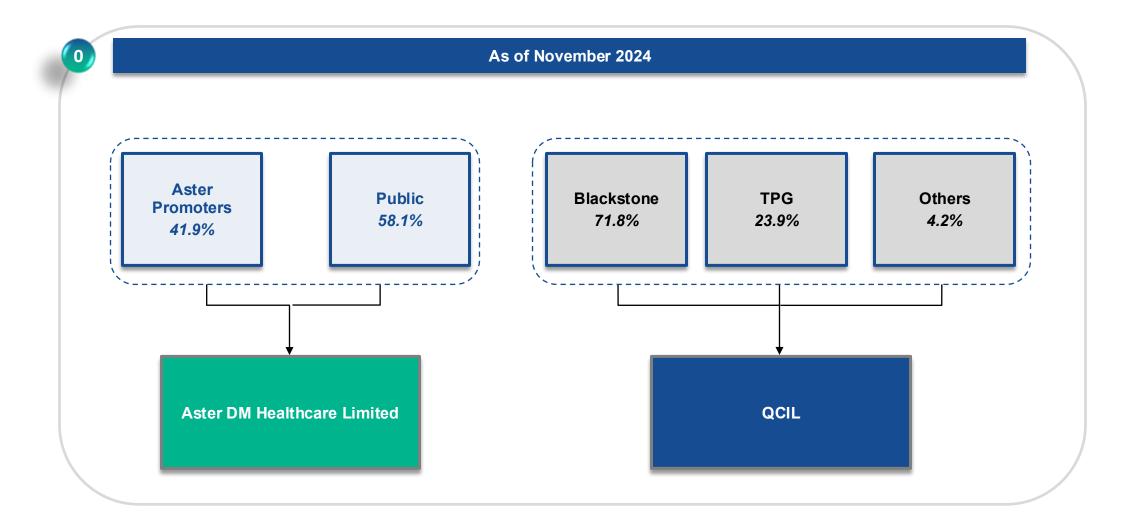
	ASTER DM	QUALITY CARE	ASTER DM QUALITY CARE		
OVERVIEW	 One of the leading integrated healthcare providers in South India operating 19¹ hospitals across 15 cities Network of 10 Clinics, 283 labs & PECs, and 203² pharmacies to complement its hospitals Amongst the top players in Kerala, Andhra Pradesh, and Karnataka 	 One of the leading healthcare providers with 19 hospitals & 7 medical centres across 14 cities Network focused on non-metro markets A troika of brands: CARE Hospitals, KIMSHEALTH and Evercare 	 ✓ One of the top 3 hospital chains in India by revenue. Building a growing 360-degree healthcare ecosystem of labs & pharmacies ✓ Presence in 9 states and 27 cities in India ✓ A quartet of brands: Aster DM, CARE Hospitals, KIMSHEALTH and Evercare 		
KEY FINANCIALS (FY25)	 Revenues: INR 4,138 Cr Operating EBITDA³: INR 806 Cr RoCE⁴: 20.9% Net Debt⁶: INR (636) Cr 	 Revenues: INR 3,967 Cr Operating EBITDA³: INR 855 Cr RoCE⁴: 24.1% Net Debt⁶: 1,320 Cr 	 ✓ Revenues: INR 8,105 Cr ✓ Operating EBITDA³: INR 1,661 Cr ✓ RoCE⁴: 22.6% ✓ Net Debt⁶: INR 684 Cr 		
KEY OPERATING METRICS (Q2FY26)	 Bed Capacity: 5195+ Occupancy: 64% ARPP IP: INR 118,552 # Physicians / Doctor⁷: 3,495+ # Employees^{7,8}: 16,065+ 	 Bed Capacity: 5,165+ Occupancy: 65% ARPP IP: INR 125,243 # Physicians / Doctor⁷: 3,200+ # Employees^{7,8}: 12,860+ 	 ✓ Bed Capacity: 10,360+ ✓ Occupancy: 64% ✓ ARPP IP: INR 121,734 ✓ # Physicians / Doctor: 6,700+ ✓ # Employees⁸: 28,925+ 		

Note

^{1.} Include WIMS; 2. Pharmacies in India operated by Alfaone Retail Pharmacies Private Ltd. under brand license from Aster; 3. Combined Operating EBITDA is Post INDAS EBITDA adjusted for one-time & non-cash expenses, ESOP cost, movement in fair value of contingent consideration and variable O&M fee; 4. RoCE is computed on average capital employed excl. revaluation reserves and CWIP and Intangibles (as of September 2025); 6. As of September 2025, QCIL includes deferred consideration payable for Chemistry Intermediate Holdings Limited of INR 680 Cr and excludes lease liability of INR 242 Cr; 7. As of Mar 2025; 8. Refers to count of employees excluding outsourced employees & doctors: | QCIL Numbers are Indicative and subject to statutory audit adjustments.

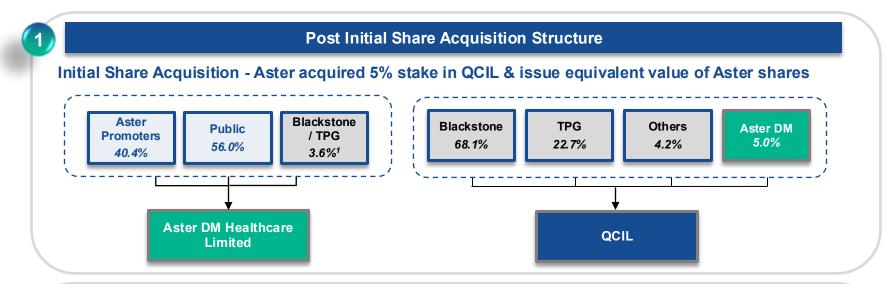
Transaction structure (1/2)





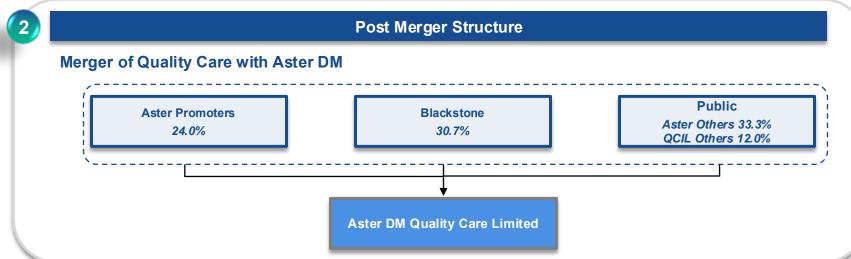
Transaction structure (2/2)





Step 1

 Aster DM purchased 5.0% stake in QCIL from Blackstone and TPG in consideration of primary share issuance by Aster for 3.6% stake¹



Step 2

- Post the initial share acquisition, QCIL will be merged into Aster by way of a scheme of amalgamation
- QCIL shareholders will be issued Aster DM shares in the agreed swap ratio²

The swap ratio for both the steps is the same and hence the eventual shareholding of Aster shareholders in the merged entity will be the same as compared to a scenario, where one step merger would have happened

Note:

On post preferential allotment basis

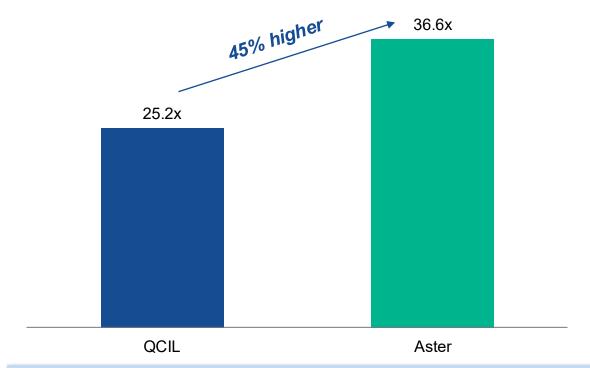
^{2.} For every 1,000 shares of QCIL, QCIL shareholders will get 977 shares of Aster

Interse Valuation – Aster's valuation reflects a 45% higher multiple relative to QCIL



FY24 EV/EBITDA (Adj. Post INDAS1)





Interse Snareholding					
Aster	QCIL				
22,7942	16,983 ²				
57.3%	42.7%				
	Aster 22,794 ²				

Shareholding Pattern post merger					
Aster Promoters	24.0%				
Blackstone	30.7%				
Aster – Public	33.3%				
QCIL - Others	12.0%				

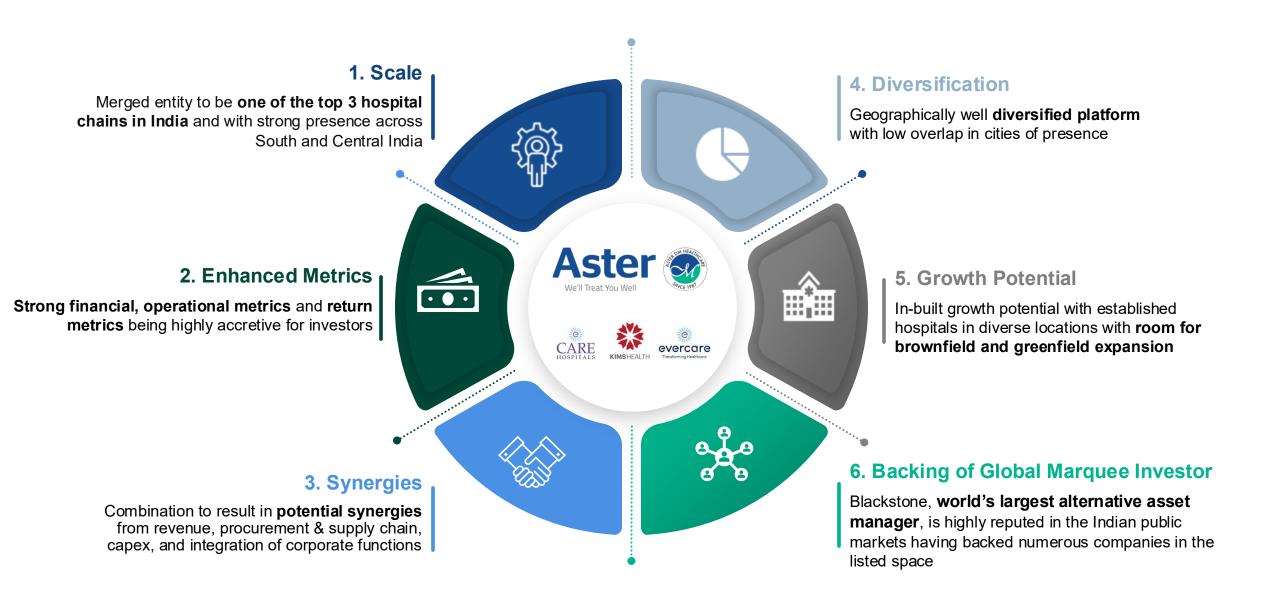
Aster is valued at 36.6x FY24 Adj. Post INDAS EV/ EBITDA^{1,2}, which is 45% higher than the relative multiple ascribed to QCIL i.e., 25.2x FY24 Adj. Post INDAS EV/ EBITDA^{1,2}

Note:

- . Operating EBITDA for Aster; Post INDAS EBITDA adjusted for one-time and non-cash expenses for QCIL
- 2. Issue price in compliance with SEBI regulations for Scheme transaction and preferential allotment (VWAP of 10 days as of 28th Nov 2024)
- Aster metrics FY24: Net debt incl. GCC cash INR (949) Cr, Minority Interest INR 158 Cr, and Lease liabilities INR 714 Cr; QCIL metrics FY24: Net debt INR 893 Cr, Minority Interest INR 1,518 Cr, and Lease liabilities INR 179 Cr

Strategic rationale behind the merger





Merged Entity to be one of the top 3 hospital chains in India by Bed Capacity & Revenue





Note: In the unlisted space, Manipal Hospitals has ~10,500 capacity beds currently; Players include other listed hospital chains ranked by bed capacity

- Note: In the unlisted space, Manipal Hospitals has revenue of INR 6,500 Cr (FY24); Players include other listed hospital chains ranked basis revenue
- 1. Revenue for the period FY25
- 2. Company AA's and AC's revenue consist of Hospital segment only
- 3. Based on market data as of 31st Mar 2025 (LTM)

^{1.} Includes both census and non-census Beds as of Sep'25

^{2.} Refers to operational beds

Combined Proforma Numbers for H1FY26





^{*} Proforma financials for merged entity are subject to finalization and audit of the merged accounts. Actual amounts, losses or impact on net profit could materially differ from those that have been estimated. In addition, other factors that could cause actual results to differ materially from those estimated include harmonization of accounting policies and practices.

QCIL numbers are indicative and subject to statutory audit adjustments, if any

Combined Operating EBITDA is Post INDAS EBITDA adjusted for one-time & non-cash expenses, ESOP cost, movement in fair value of contingent consideration and variable O&M fee RoCE is computed on average capital employed excl. revaluation reserves and CWIP and Intangibles

The PAT H1FY26 includes an amount of ₹ 42.1 Cr [H1FY25 : 59.4 Cr] from the interest/gain earned on the investment of sale proceeds from the segregation of GCC vertical and excludes Rs 4.8 Cr relating to merger cost

Combined Proforma Numbers for H1 FY26





^{*} Proforma numbers for merged entity are subject to finalization and audit of the merged accounts. Actual amounts, losses or impact on net profit could materially differ from those that have been estimated. In addition, other factors that could cause actual results to differ materially from those estimated include harmonization of accounting policies and practices.

Notes:

[.] Includes WIMS

^{2.} Includes Nagercoil facility (Tamil Nadu) which was operationalized in Sep'24

^{3.} Refers to total capacity beds as of Sep '25

Combined Proforma Numbers for Q2FY26





^{*} Proforma financials for merged entity are subject to finalization and audit of the merged accounts. Actual amounts, losses or impact on net profit could materially differ from those that have been estimated. In addition, other factors that could cause actual results to differ materially from those estimated include harmonization of accounting policies and practices.

^{1.} QCIL numbers are indicative and subject to statutory audit adjustments, if any

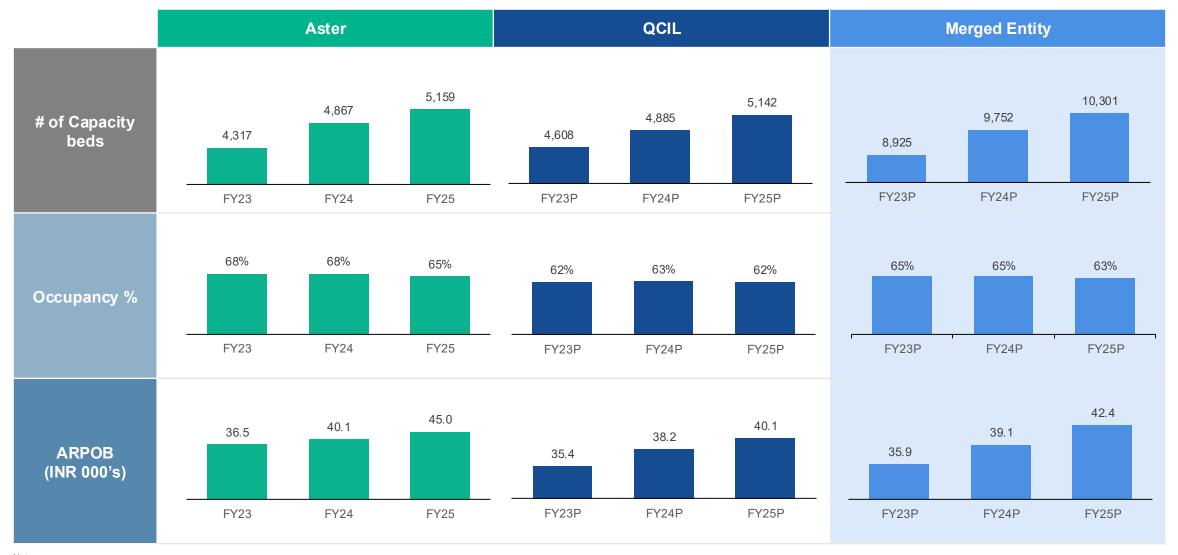
^{2.} Combined Operating EBITDA is Post INDAS EBITDA adjusted for one-time & non-cash expenses, ESOP cost, movement in fair value of contingent consideration and variable O&M fee

RoCE is computed on average capital employed excl. revaluation reserves and CWIP and Intangibles

The PAT for Q2FY26 includes an amount of ₹ 20.3 Cr [Q2FY25 : 32.8 Cr] from the interest/gain earned on the investment of sale proceeds from the segregation of GCC vertical and excludes Rs 0.4 Cr relating to merger cost

Entities of similar scale with strong operating metrics creating a robust merged entity





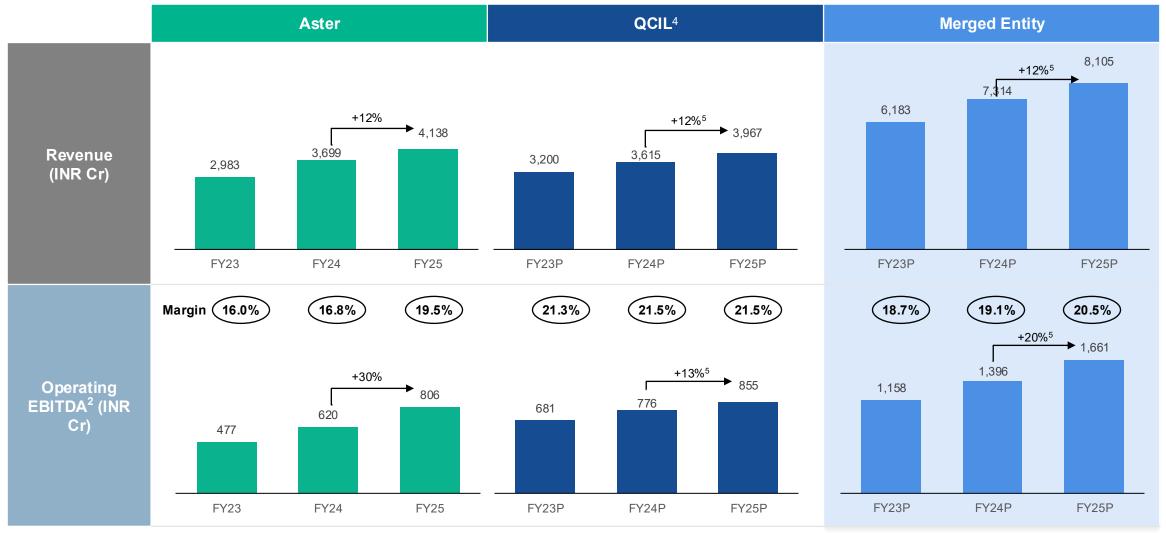
Note

- 1. Figures reflect QCIL's consolidated proforma metrics, including CARE Hospitals, KIMSHEALTH and Evercare. The acquisition of KIMSHEALTH was completed in Q4 FY24
- 2. QCIL Historical financials have been converted at a different exchange rate vis-à-vis FY25
- . All numbers of QCIL are indicative and subject to statutory audit adjustments , if any

P stands for Pro-forma

Merged entity with diversified revenue mix and strong margin profile





Note:

- 1. Financials reflect QCIL's consolidated proforma metrics, including CARE Hospitals, KIMSHEALTH and Evercare. The acquisition of KIMSHEALTH was completed in Q4 FY24
- Combined Operating EBITDA is Post INDAS EBITDA adjusted for one-time & non-cash expenses, ESOP cost, movement in fair value of contingent consideration and variable O&M fee
- QCIL Historical financials have been converted at a different exchange rate vis-à-vis FY25
- 4. All numbers of QCIL are indicative and subject to statutory audit adjustments , if any
- All humbers of QCIL are indicative and
 Growth assuming constant currency

P stands for Pro-forma

Multiple avenues of synergies poised to accelerate growth and profitability





Scale

2

Enhanced Metrics

3

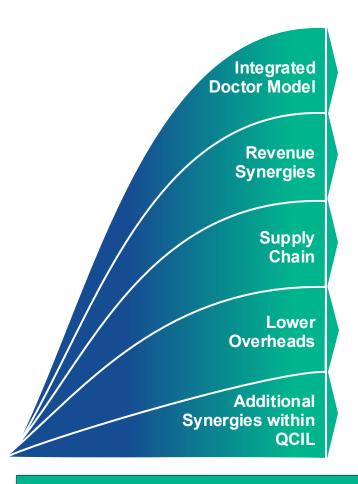
Synergies



Diversification



Growth Potentia



- ✓ Broader base of star senior specialists and exchange of learnings
- ✓ Greater ability to attract and retain medical talent with state-of-the-art medical facilities
- ✓ Adopt best marketing practices across Aster and QCIL to maximize patient outreach and conversion
- Strengthened initiatives to attract international patients
- ✓ Expanded coverage by insurance companies with integrated operations
- ✓ Rationalization of spends on procurement of drugs, consumables & other expenses through centralization
- ✓ Leveraging scale to negotiate, streamline vendors and enhance formulary compliance
- Optimization of corporate functions
- ✓ Leverage best practices, technology and channel mix optimization
- ✓ Increased revenue potential from international patients, optimized RCM, and better realization
- Cost savings including improvement in material margin, manpower optimization, corporate overheads, and other indirect expenses

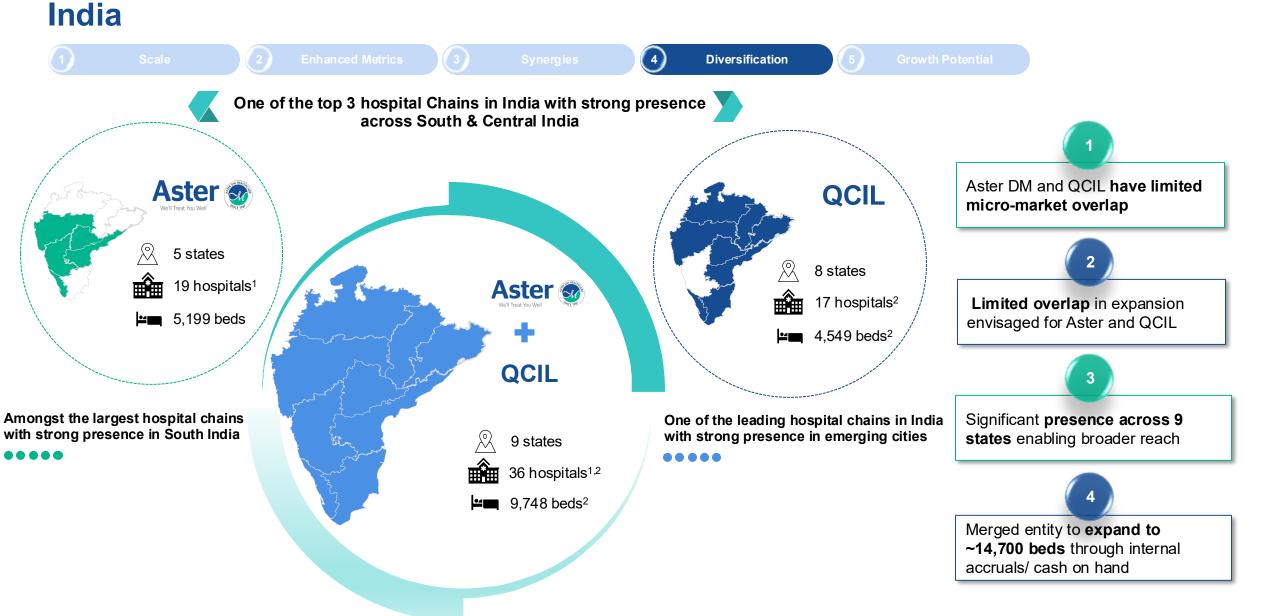
Identified synergies to have a near-term EBITDA upside potential of 10-15%1

Notes:

1. As % of FY24 Pro-forma EBITDA of the merged entity

Well diversified platform with presence across South and Central





Note

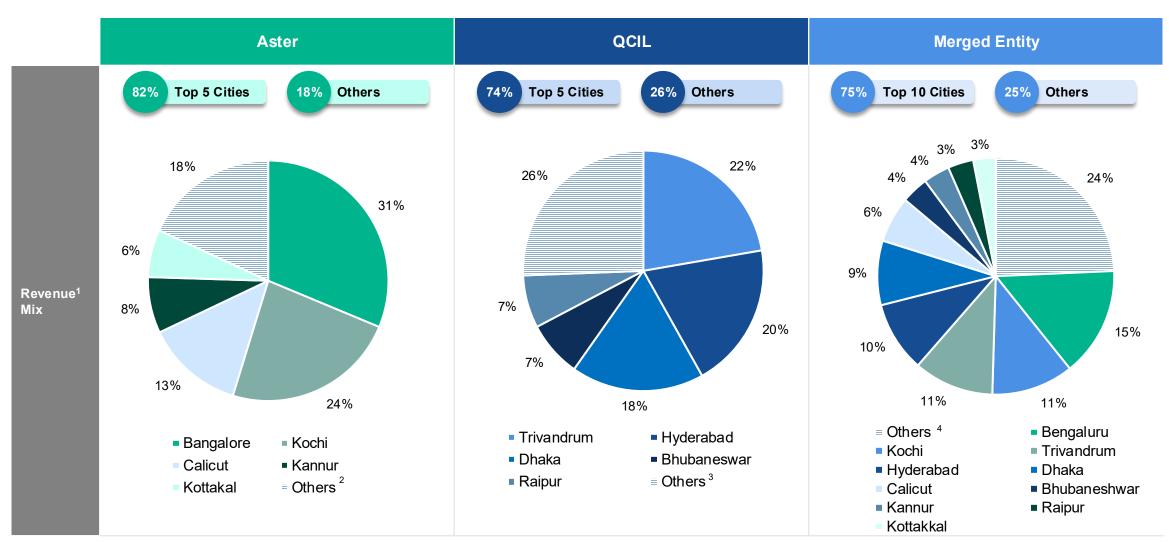
2. Count includes India operations only as of September'25

Includes WIMS

Well diversified platform with presence across 27 cities





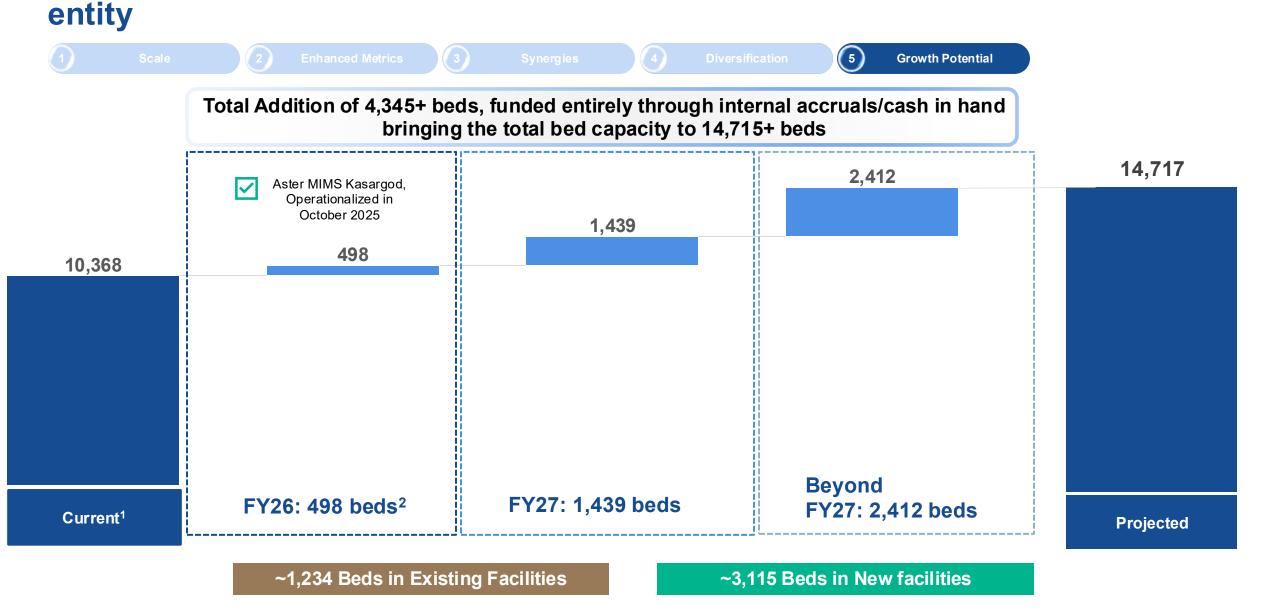


Note

- 1. For the period Sep'25; All numbers have been computed based on revenue from Hospital & Clinics
- 2. Others include Kolhapur, Guntur, Ongole, Tirupati, Areekode, Kollam, Hyderabad, Wayanad, Vijayawada and Mandya
- 3. Others Include Perinthalmanna, Vizag, Kollam, Nagpur, Kottayam, Indore, Aurangabad, and Chattogram
- 4. Others include Indore, Aurangabad, Perinthalmanna, Kolhapur, Guntur, Vizag, Chattogram, Vijayawada, Nagpur, Ongole, Kollam, Mandya, Tirupati, Areekode, Wayanad and Kottayam

Favorable mix of scaled and growing hospitals for the merged





Notes:

[.] Total bed capacity as of September 2025

^{2.} Kasargod 264 beds commissioned on 2nd Oct 25.

Indicative transaction timeline & an update on key steps



Q3FY25	Q4FY25	Q1FY26	Q2FY26	Q3FY26	Q4FY26	Q1FY27
Board	d Approval					
Re	ceived shareholders' app	proval with overwhelming n	najority for Preferential Allotn	nent as a consideration for In	tial Acquisiton	
		Received C	CCI for approval of Preferenti	al Allotment, Initial Acquisitio	n and Scheme of Amalgamati	on
	Application mad approact	le for no-objection letter fro h NCLT	m the Stock Exchanges pos	t which the Company will		
				Receipt of no-objection	letter from the stock exchang	es
					Shareholders'/ Croconsider approval	editors' meeting to for the scheme
				1	NCLT procedures	
						NCLT Order
						Listing & trading of new shares

Implementation of the scheme is expected to be completed by Q1 FY27 subject to receipt of requisite approvals

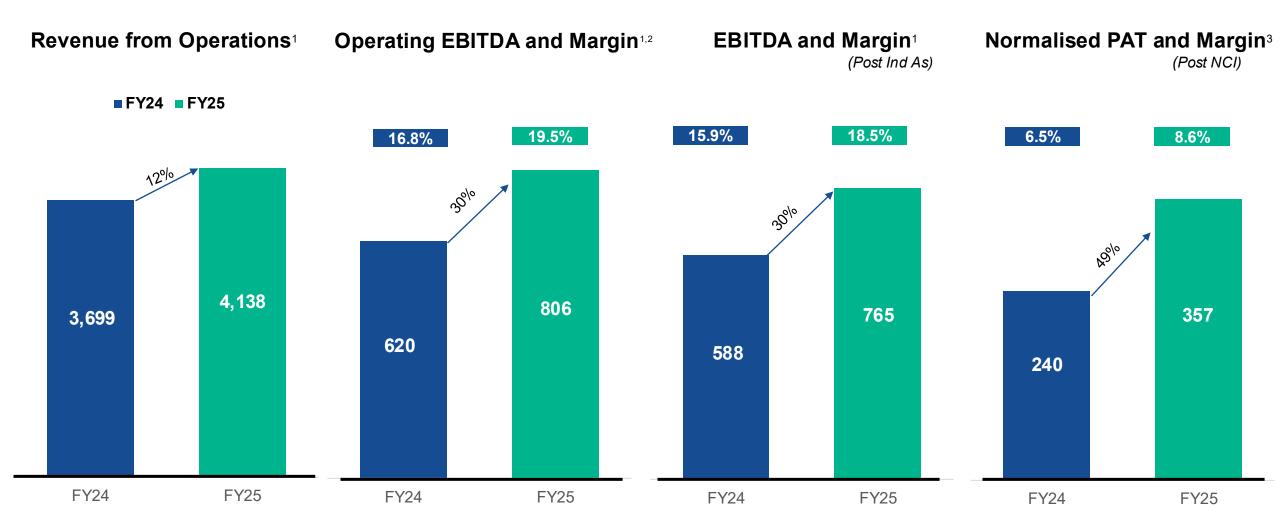


Aster DM Healthcare Performance

For Quarter ending Sep 30, 2025

Revenue and Profitability Snapshot – FY25



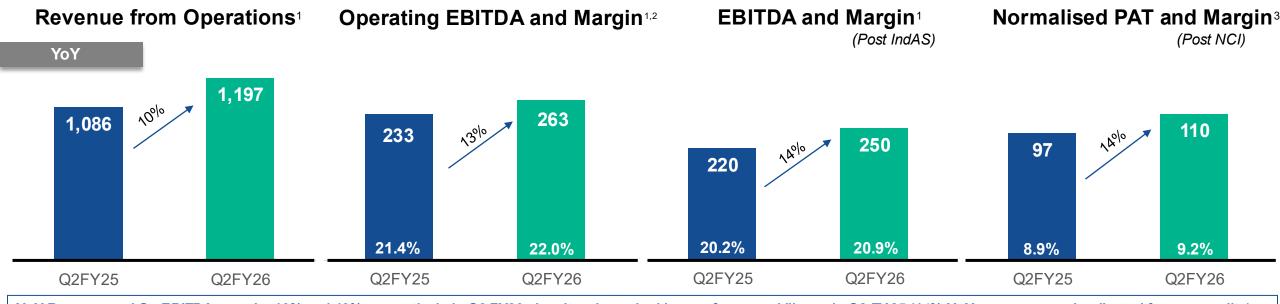


Notes:

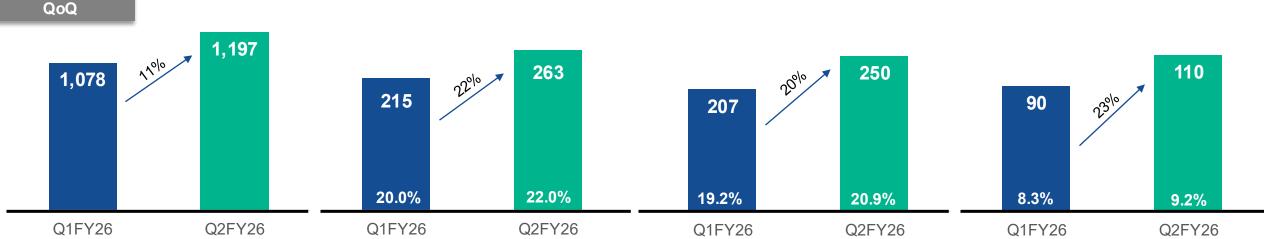
- 1. Revenue, Operating EBITDA and EBITDA excludes other income
- 2. Operating EBITDA for the period FY25 excludes the ESOP Cost of Rs. 8.4 Cr [FY24: 5.3 Cr], Movement in fair value of contingent consideration payable of Rs. 0.8 Cr [FY24: -4.4 Cr], Variable O&M fee amounting to Rs.31.8 Cr [FY24: 31.0 Cr]. [Our Operating & Management (O&M) agreements, encompasses both fixed and variable component. While the fixed component of the O&M fee is delineated into depreciation and finance costs as per Ind AS 116, whereas the variable component falls outside the scope of IndAS 116, leading to an incomplete reflection of the standard's impact in EBITDA.]
- 3. PAT FY25 includes an amount of ₹ 108.3 Cr from the interest/gain earned on the investment of sale proceeds from the segregation of GCC vertical and excludes project unity transaction cost of Rs 50.1 Cr. PAT FY24 excludes a one-time impact due to recognition of Net Deferred Tax Liability to the tune of ₹52.4 cr

Revenue and Profitability Snapshot – Q2 FY26





YoY Revenue and Op EBITDA grew by 10% and 13% respectively in Q2 FY26, despite a lower incidence of seasonal illness in Q2 FY 25 (14% YoY revenue growth adjusted for seasonality)



Notes:

3. The PAT for Q2FY26 includes an amount of ₹ 20.3 Cr [Q2FY25 : 32.8 Cr] [Q1FY26: 21.8 Cr] from the interest/gain earned on the investment of sale proceeds from the segregation of GCC vertical and excludes transaction cost of Rs 0.4 Cr [Q1FY26: 4.4 Cr]

^{1.} Revenue, Operating EBITDA and EBITDA excludes other income

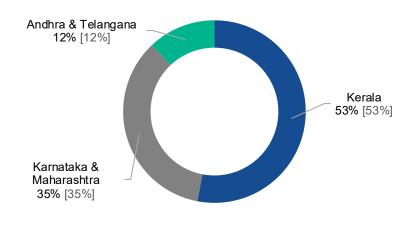
^{2.} Operating EBITDA for the period Q2 FY26 excludes the ESOP Cost of Rs. 3.5 Cr [Q2FY25: 2.2 Cr], [Q1FY26: 0.8 Cr], Movement in fair value of contingent consideration payable of Rs. Nil Cr [Q2FY25: 2.7 Cr], [Q1FY26: Nil], Variable O&M fee amounting to Rs.9.7 Cr [Q2FY25: 8.3 Cr], [Q1FY26: 7.2 Cr]. [Our Operating & Management (O&M) agreements, encompasses both fixed and variable component of the O&M fee is delineated into depreciation and finance costs as per Ind AS 116, whereas the variable component falls outside the scope of IndAS 116, leading to an incomplete reflection of the standard's impact in EBITDA]

Consciously built a de-risked business model with healthy presence across multiple specialties

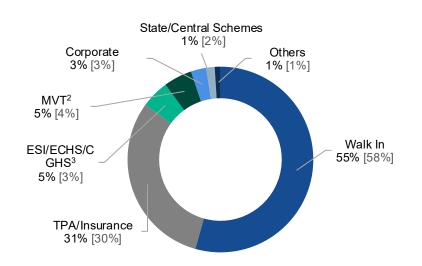


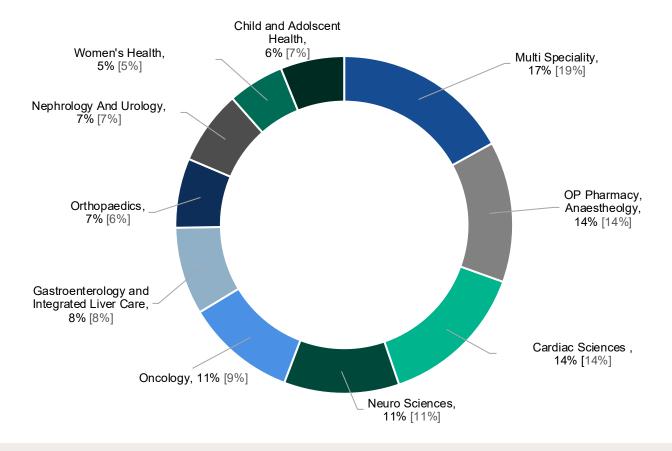
Geographical Revenue Mix¹ Q2 FY26





Payor Revenue Mix Q2 FY26





Contribution from Oncology increased to 11% in Q2FY26 from 9% in Q2FY25

No single specialty accounts for more than 15% of total revenue.

^{1.} Geographical Revenue Mix refers to the revenue from hospitals only

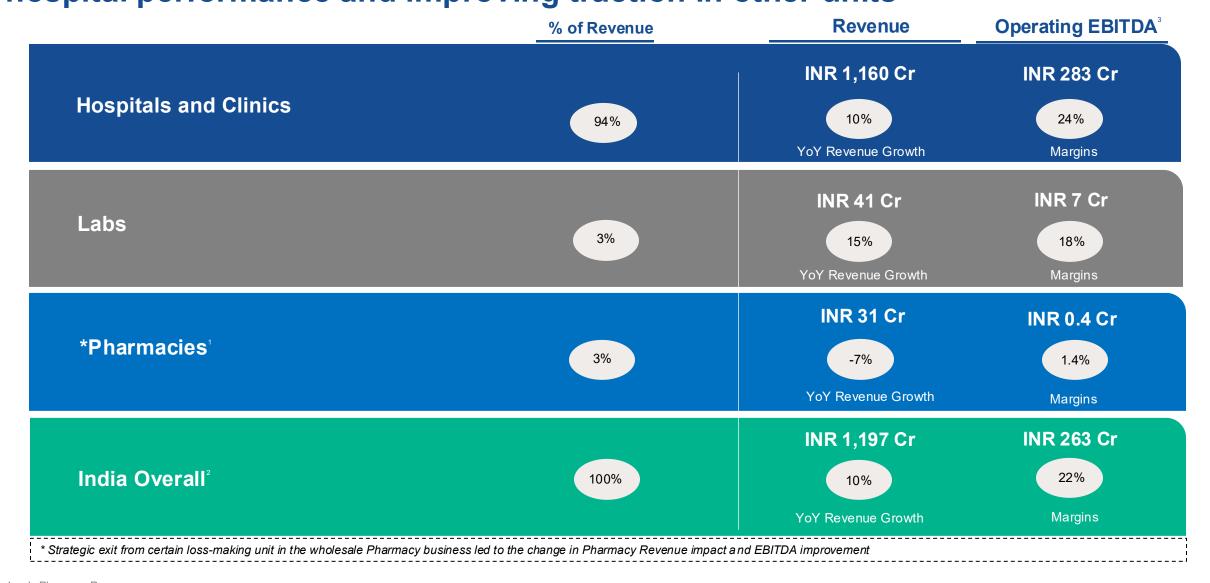
^{2.} MVT: Medical Value Travel; TPA: Third Party Administrator; ESI: Employee State Insurance

^{3.} ECHS: Ex-Servicemen Contributory Health Scheme; CGHS: Central Government Health Scheme

Numbers in brackets are for corresponding quarter prior year

For Q2FY26, Aster DM delivered steady growth driven by strong core hospital performance and improving traction in other units





^{1.} Wholesale Pharmacy Revenue

^{2.} Aster India overall numbers are after eliminations of INR 34 Cr (Q2FY25: 33 Cr.) of intercompany revenue and INR 28 Cr. (Q2FY25: INR 23 Cr.) of unallocated expenses.

^{3.} Operating EBITDA for the period Q2FY26 excludes the ESOP Cost of Rs. 3.5 Cr [Q2 FY25: 2.2 Cr], Movement in fair value of contingent consideration payable of Rs. Nil Cr [Q2FY25: 2.7 Cr], Variable O&M fee amounting to Rs. 9.7 Cr [Q2FY25: 8.3 Cr]. [Our Operating & Management (O&M) agreements, encompasses both fixed and variable component falls outside the scope of IndAS 116, leading to an incomplete reflection of the standard's impact in EBITDA]

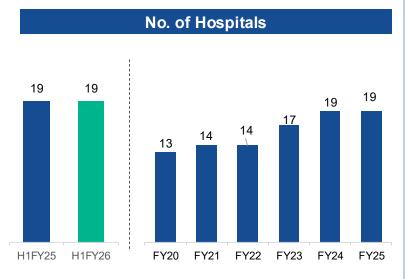
The core hospitals business has shown consistent improvement

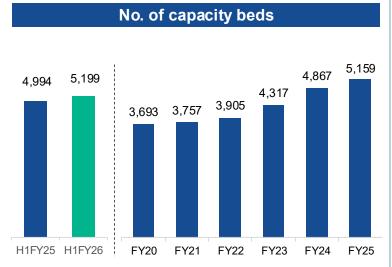
optimized payor mix and

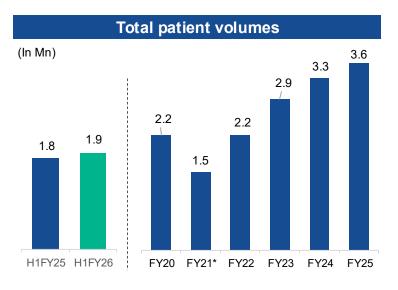
seasonal impact

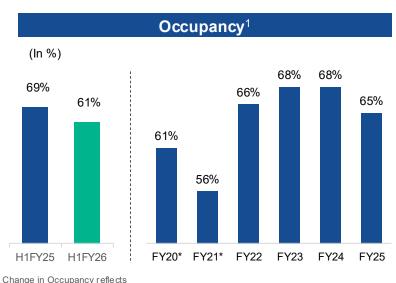


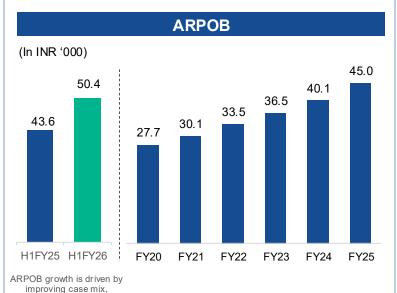
across all operational parameters...

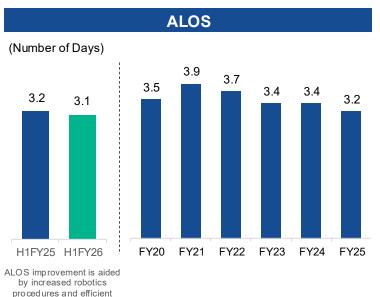












hospital operations

the addition of new beds as well

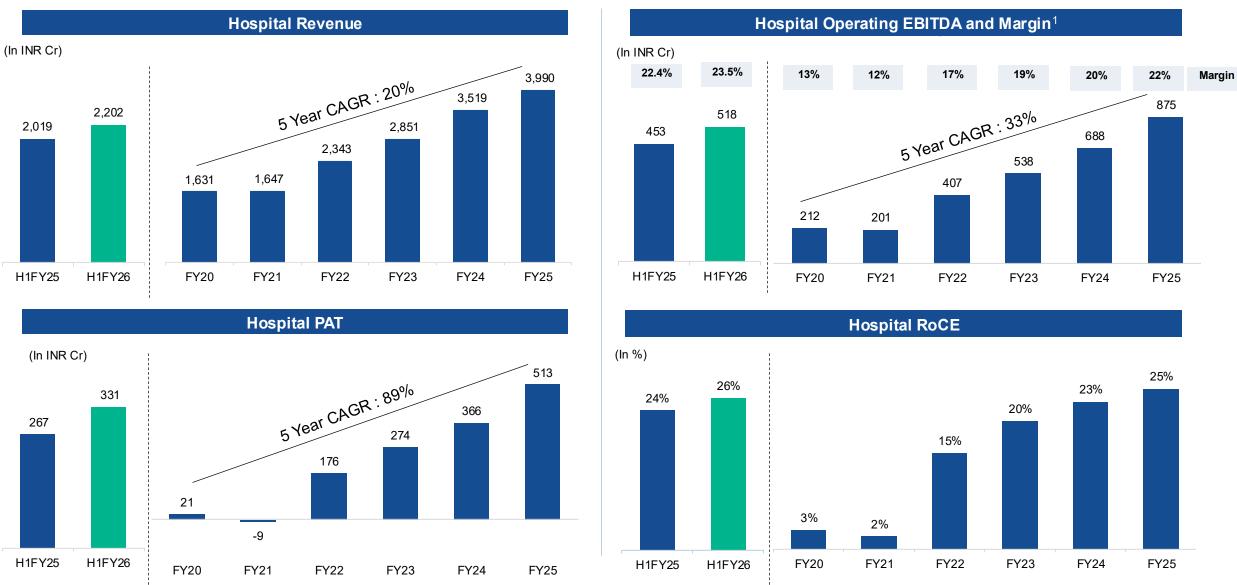
as improvements in ALOS

30

^{*}Drop in Patient Volumes and Occupancy during FY20 and FY21 due to COVID | 1. Occupancy as per operational census bed

...resulting in a robust financial performance trajectory over these years...





Vote:

^{1.} Operating EBITDA for the period H1FY26 excludes the ESOP Cost of Rs. 4.4 Cr [H1FY25: 5.1 Cr], Movement in fair value of contingent consideration payable of Rs. Nil Cr [H1FY25: 5.4 Cr], Variable O&M fee amounting to Rs.16.9 Cr [H1FY25: 16.5 Cr]. [Our Operating & Management (O&M) agreements, encompasses both fixed and variable component falls outside the scope of IndAS 116, leading to an incomplete reflection of the standard's impact in EBITDAI

Maturity Wise Hospital Performance – Q2FY26



				Key Performance indicators			
Maturity	Hospitals ³	Revenue⁴ (INR in Cr)	Operational Beds ⁵ (Census)	ARPOB	Operating EBITDA⁴ (INR Cr)	Operating EBITDA % ⁴	ROCE
Over 7 Years	10	71% ₹807	69% 2,638	₹ 52,300	₹214	26.5%	34%
3-7 Years ²	3	15% ₹178	16% 622	₹ 45,400	₹40	22.5%	24%
0-3 Years¹	5	14% ₹159	15% 564	₹ 49,100	₹29	18.2%	5%
	18	1,143	3,824	50,600	283	24.7%	26%

 ⁰⁻³ Years Hospitals include: Aster Whitefield Hospital, Aster Narayanadri, Ramesh (IB), Aster G Madegowda, Aster PMF
 3-7 Years Hospital include: Aster RV, Aster MIMS Kannur & Aster Mother Hospital Areekode

Wayanad Institute of Medical Sciences (WIMS) details are not included above. Considering WIMS, count of hospitals in India is 19

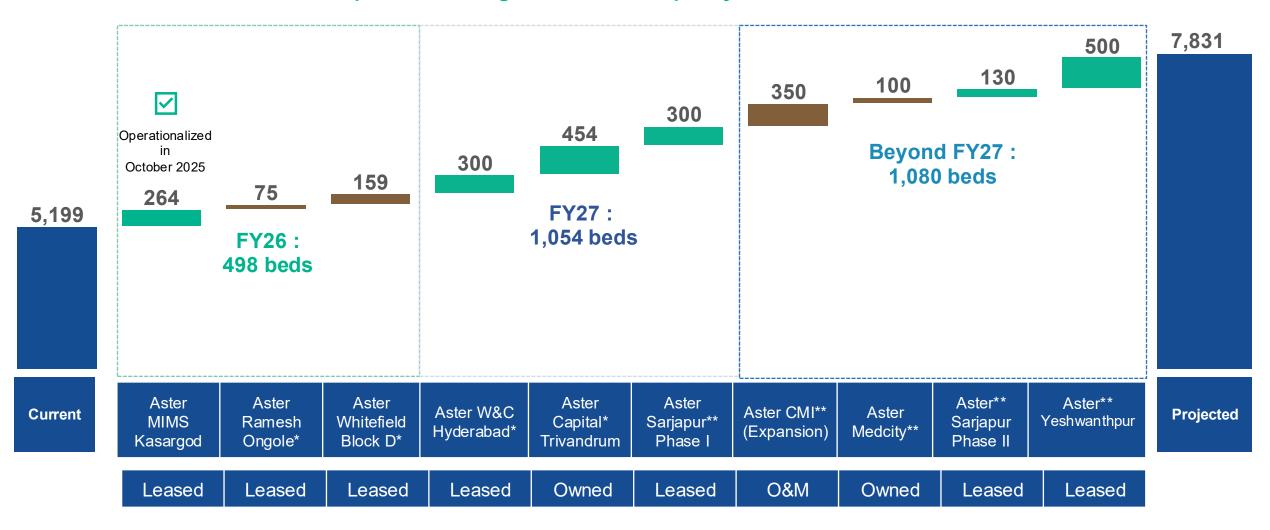
^{4.} Revenue and Operating EBITDA shown above excludes other income

^{5.} Operational Beds (Census) are beds as on 30th Sep, 2025.

Clear capital allocation strategy for India Business going forward



Following the commissioning of the 264-bed Aster MIMS Kasaragod, further addition of 2,300+ beds is planned, taking the total bed capacity to over 7,800 beds.



Projects Current Status:

Brownfield: - 684 beds; Greenfield: - 1,948 beds.

^{*}Aster Whitefield block D, Aster Ramesh Ongole, Aster W&C Hyderabad and Aster Capital are in Construction phase

^{**} Aster CMI, Aster Medcity (PMR block), Aster Sarjapur and Yeshwanthpur are in design phase.

7th Multispecialty hospital in Kerala : Aster MIMS Kasargod



Aster MIMS Kasaragod, a 264-bed multispecialty hospital, brings world-class and affordable healthcare to northern Kerala with advanced infrastructure (including 61 ICU beds for critical care)













Inaugurated on 2nd October 2025 by Hon'ble Chief Minister of Kerala, Shri Pinarayi Vijayan and Karnataka Minister for Health and Family Welfare, Shri Dinesh Gundu Rao reinforcing Aster's presence in Northern Kerala

264-bed multi-specialty hospital, built with a INR 190 Cr investment in a 2.1 lakh sq. ft. facility

Promising start with strong early traction, offering comprehensive multi-specialty services including Oncology from inception

State-of-the-art infrastructure featuring advanced imaging and interventional systems, with planned additions of **Neuro Navigation** and **CRRT technologies**, reinforcing Aster's tertiary care leadership.

Greenfield Expansion





Aster Yeshwanthpur, Bangaluru



30 year long term Lease 5 lakhs sq.ft Built up Area

Total Investment: INR 580 Cr

To be operational by H2FY29

Architectural and design phase.



Aster Capital, Trivandrum

Multispecialty | 454 Beds (Phase 1)

Construction start date: July 2024

Floors: G+7 Floors

6.5 Acre Land – Owned 6.2 lakh sq.ft Built up Area incl. MLCP area

Expected Timeline: H2FY27

Civil works completed. MEP work in progress on site.



Aster Sarjapur, Bengaluru

Multispecialty | 430 Beds in two phases

Design Phase

30 year long term Lease 4.2 lakhs sq.ft Built up Area

Expected Timeline: 300 beds by H2FY27 | 130 beds by FY29

Architectural and design phase.



Aster W&C, Hyderabad

Mother and Child Care | 300 Beds

Construction start date: June 2025

Floors: A block G+11 Floors and B block G+5 Floors, 3B common

2 Acre Land – Leased 3.23 lakhs sq.ft Built up Area

Expected Timeline: H1FY27

Construction started. Civil work in progress

Brownfield Expansion





Aster Medcity

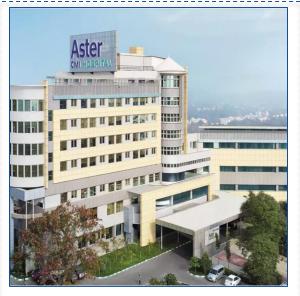
Multispecialty | Current: 878 Beds

Bed Expansion :100 Beds

Ownership: Owned

Expected Timeline: H1FY28

Waiting for statutory approvals. All design and other pre-construction activities completed



Aster CMI

Multispecialty | Current: 509 Beds

Bed Expansion: 350 Beds

Ownership: Leased (O&M)

Expected Timeline: H1FY28

Architectural and design phase.



Aster Whitefield

Multispecialty | Current : 380 Beds

Bed Expansion: 159 Beds

Ownership: Leased

Expected Timeline: H2FY26

Interior works are in progress.



Aster Ramesh Ongole

Multispecialty | Current: 150 Beds

Bed Expansion: 75 Beds

Ownership: Leased

Expected Timeline: H2FY26

Significant construction work is completed. Certification from external Chartered Engineer is pending.

Awards and Recognition



Padmashree Dr. Azad Moopen and Pravasi Bharatiya Samman awardee Founder, Chairman and MD

Recognised as

'Legend in the Healthcare Industry' at the 19th Edition of FICCI Heal 2025

Awarded the 'Healthcare Icon of the Year' at the Economic Times Healthcare Awards 2025

Honoured with 'Lifetime Achievement Award' by Entrepreneur India 2025

Honoured with the 'Healthcare Leader of the Year' award by Financial Express Healthcare Awards 2025

Received 'Lifetime Achievement Award' in April 2025, by Association of Kerala Medical Graduates (AKMG) MARAAYA 2025 Convention

Named among **Top 5 in Forbes Middle East's Top Healthcare Leaders 2025** (Founders and Shareholders)

Dr. Azad Moopen honoured among Forbes Middle East Sustainability Leaders 2025 for leading Aster's journey towards a greener, more equitable healthcare future.





Ms. Alisha Moopen Deputy Managing Director

Received the

'Dynamic Entrepreneur of the Year' award at the Entrepreneur India Awards 2025

Featured in the 'Fortune India 100 Most Powerful Women' in Business 2025

Awarded
'Women Entrepreneur of the year'
at Financial Express Awards 2025

Named among **Top 5 in Forbes Middle East's Top Healthcare Leaders 2025** (Founders and Shareholders)

Honoured as 'Healthcare Visionary Leader of the Year' at the Economic Times Healthcare Leaders Awards 2025 (Middle East).















Awards, Recognition and Rankings





AHPI Excellence in Healthcare



Aster Medcity, Kochi – Excellence in Emergency services



Aster MIMS Calicut & Kottakkal – Employees Centric Hospital



Aster Medcity | Aster CMI | Aster MIMS Calicut

Outlook

Best Multispecialty Hospital Ranking 2025

Aster Medcity:
All India Best
Multispeciality
Hospital



Aster CMI : All India Best Multispecialty Hospital Aster CMI: South Best Multispecialty Hospital









Global Hospital Rating

Aster MIMS Calicut



First hospital in India to receive certification & accreditation as a "Comprehensive Chest Pain Center by the American Heart Association"



Best Hospital Chain of the Year 2024



Best Hospital Chain & Healthcare Brand of the Year 2024

Newsweek

The Worlds Best Hospitals 2025



Aster CMI, Bengaluru





Best Multispecialty
Hospital India







Aster DM Healthcare has been awarded Excellence in Mergers & Acquisitions by Business World



Great



Aster Digital Health won
'Most Impactful Digital
Transformation in Healthcare' at
the Elets Technomedia Healthcare
Innovation Awards 2025.

HALL HEART SOZE

ET Healthcare Awards

Hospital of the Year

Aster Medcity National for Organ Transplantation

Aster CMI Oncology (South)

Aster Whitefield Critical Care, Reconstructive Surgery

Aster RV Organ Transplantation

Hospital of the Year

Aster CMI (South)

TOI

Times All India Critical Care Rankings 2025

The COEs of Aster Medcity, Aster
CMI and Aster MIMS are ranked
under Top 10



Technology
Transformation
Initiative of the Year

Aster Whitefield Hospital won Technology Transformation Initiative of the Year award at FICCI Heal 2025



Aster Medcity, Kochi

3 Golds (Emergency & Critical Care, Neurosciences, Robotic Surgery)

1 Silver (Organ Transplant)

Aster Whitefield

Silver (Oncology, Neurosciences) **Bronze** (Multi-Specialty Care)

Aster CMI

Bronze in Multi-Specialty Care.

High standards of clinical excellence



Select Firsts achieved by Aster

1st in South Asia mixed reality-based International Institute of Neuroscience and Spine Care.

1st in India brainsensing device PERCEPT RC for a 72vear-old Parkinson's patient

1st in North Kerala Robotic Hysterectomy using the Da Vinci Robotic System.

1st in Kerala to implant the Tecnis Pure See EDOF IOL, presbyopiacorrecting Intraocular Lens

Accreditations







1st CART cell infusion usina **ACTALYCABTAGENE AUTOLEUCEL** for refractory Diffuse Large **B-Cell Lymphoma**

1st in Kerala. Percutaneous Endoscopic Lumbar Discectomy led by Dr. Faisal M Igbal

1st in North Kerala. Laparoscopic Right Pyeloplasty in the youngest child.

1st in South India to obtain NABH Digital Health Accreditation in the Platinum category

Research & Academics

Research collaboration with NIT, Tata Elxsi, CUSAT and Kerala University

PI initiated extramural research grant from Indian Council of Medical Research, New Delhi

37 New courses launched (14 - Clinical, 12 - Management, 10 - L&D. Technology - 1) at Aster Health Academy in FY25



41.950+ CIG/PTCA (Angiogram & Angioplasty)



2,175+ Robotic surgeries



1.420+ Cardio-vascular



540+ Transplants¹



completed & 40+

ongoing



Training Programs

Affiliations



10.300+ Urology procedures



5.640+ Neuro surgeries



3,660+ Joint replacements



4,835+ Gastro-intestinal surgeries

Projects completed Research Publication 395+ 710+ Trainees in Indexed journal **Clinical Trials** International 370+ 43+

TTM basis

Comprehensive multi-specialty clinical services backed by highly experienced clinician team and best-in-class medical technology

FY22

Best-in-class Medical Technology



31 Cathlabs

7 LINACs **17** MRI Machine 10 Robots

Surgical Robot, SSI Mantra 3.0



India's first indigenous surgical robot. Cost effective with advanced features including telesurgery and teleproctoring capabilities

Ortho Robot, ROSA Recon



A robotic surgical system, specifically a stereotaxic instrumentation system, designed to assist surgeons in performing total/partial knee arthroplasty & THA

Philips Excimer Laser



Aster CMI becomes the first in Kamataka to install the advanced Philips Excimer Laser Atherectomy System for coronary and peripheral vascular procedures.

O-arm



A surgical imaging system that provides intraoperative 2D and 3D imaging during spine, orthopaedic, and trauma surgeries. It acts as an intraoperative CT scanner

Surgical Robot, Da Vinci XI



A cost-effective robotic surgical system by Intuitive Surgical, designed to help hospitals adopt or expand robotic surgery programs

Ortho Robot, Cuvis



Cuvis Joint is a robotic system for orthopaedic surgeries, specializing in knee and hip replacements

Brain Lab, Loop X



Mobile intraoperative imaging robot allowing neurosurgeons to obtain large, real-time field view of the patient during surgery

Digital PET - CT



The uMi 550 is an 80-slice digital PET/CT system delivering combined functional and anatomical imaging.

Digital Initiatives



Strengthening Footprints Through a Robust Phygital Ecosystem

Updates

The "Aster Health"
App has clocked over 2,00,000 downloads since its launch in November 2024, marking a milestone in digital convenience.

Aster HIEALTH

Aggregating Hospitals, Labs, and Pharmacy services

Enables anytime, anywhere patient access to healthcare services

Live at 10 Hospitals



Data-Driven Patient Engagement

Harnessing Online Behaviour, impacting patient care & Drive Enterprise Growth

Live at 2 Hospitals



Digitizing Relationships, Personalizing Experiences, Powering Growth

Live at 8 Hospitals

Updates

Radiology Reports and Images are now visible on the "Aster Health" App; enabled reduction of paper, films and CDs.

Significant Expansion of Patient Base through Aster Health App

Higher Patient Retention and Lifetime
Value through Personalized Engagement
via Aster Care

Building the Digital Front Door to an Integrated Healthcare Experience

Enabling Future Growth in Patient Funnel, Lifetime Value, and Clinical Outcomes

Better Clinical Outcomes through Data-Driven Precision Care

Operational Efficiency & Cost
Optimization through integration of
Hospital, Labs and Pharmacy Systems

ESG Milestones*



*All numbers are based on FY25

E

~577 ton

Waste reduction is achieved in FY25,, i.e. 18% from the previous year

~7,414 KL

Reduction in Water consumption in FY25 i.e.~ 0.6% from previous year

97%+

Energy Consumption sourced from renewable (solar & wind) energy at Aster CMI and RV, Bangalore

~8,681 tCO2e

Reduction in Carbon emission in FY25 through renewable energy resources

INR 3.3 Mn

Worth of reduction in Annual Paper Usage across all Aster facilities, i.e. 2.4% from the previous year 16,100+

Trees Planted in FY25



51

No. of People of determination in workforce in India

7,23,642

Beneficiaries of the Aster Volunteers Community engagement initiatives during FY25

6.022

Free Medical camps conducted through the network of Aster Volunteers Mobile Medical Services (AVMMS)

34

Mobile Medical services in India offering free health screening services in the regions where healthcare is least accessible

7.047

Patients from economical poor background benefitted through Free/discounted surgeries worth of INR 5.74 crore

5

Standalone Tele Medicine Centers (AVCMS) in Rajasthan, J&K, Karnataka and Gujarat



100%

Resolution of reported whistleblowing cases

25%

Women representation in Board of Directors

50%

of the Board of Directors comprises Independent Directors

15

Policies supporting
Governance framework
including ESG Policy, CSR
policy, Business
Responsibility policy, etc

3,200+

Employees participated for cyber security awareness program through a gamebased learning methodology

2,732

Employees participated in a week-long training program under a new initiative for adhering to our code of conduct



Aster DM Healthcare won the **Gold Award for the CSR Health System**Strengthening Project at the 9th CSR
Health Impact Awards



Global ESG Awards and Gulf Sustainability Awards 2025

Gold Award – Terrestrial Biodiversity Conservation & Afforestation Initiatives Aster India Platinum Award – Water Conservation Initiatives



Aster Volunteers team won the **CSR Times Award 2025** for their continuous outreach programmes in the underserving communities

Financial Summary – Profitability Statement



Particulars	Q2FY26	Q2FY25	YoY %	Q1FY26	QoQ%	H1FY26	H1FY25	YoY %
Revenue from Operations	1,197	1,086	10%	1,078	11%	2,275	2,088	9%
Material Cost ²	271	237		247		518	466	
Doctors Cost	257	236		240		497	462	
Employee Cost	212	193		195		407	384	
Other Cost	194	187		181		375	366	
Operating EBITDA	263	233	13%	215	22%	478	410	17%
Employee Stock Option Expenses	4	2		1		4	5	
Movement in FV of contingent consideration payable	0	3		0		0	5	
Variable operation and management fees	10	8		7		17	16	
EBITDA Post INDAS	250	220	14%	207	20%	457	383	19%
Depreciation	66	62		63		129	123	
Finance Cost	31	31		31		62	61	
Other Income	28	35		33		61	84	
Profit Before Tax	181	161	12%	147	24%	328	284	15%
Tax	46	53		43		88	92	
Profit After Tax (Before exceptional item)	136	108	25%	104	31%	239	192	25%
Exceptional Item	0	0		-4	_	-5	0	
Profit After Tax ³	135	108	25%	99	36%	235	192	22%
Share of Profit/(Loss) of Associates	-14	-3		-6		-20	-5	
NCI	11	9		8		19	16	
Profit After Tax (Post Non-Controlling Interest)	110	97	14%	86	29%	196	171	14%
Normalised PAT ³	110	97	14%	90	23%	200	171	17%
EBITDA Pre INDAS	224	196	14%	181	24%	405	340	19%

Above numbers are in INR crore

^{2.} Operating EBITDA Margin excluding Whitefield is 25.9% in Q2FY26 as compared to 27.9% in Q2FY25, 25.0% in H1 FY26 as compared to 25.8% in H1FY25.

^{3.} Normalised PAT for Q2 and H1FY26 excludes an amount of ₹ Rs 0.4 Cr and Rs. 4.8 Cr for project unity transaction cost, respectively.

Financial Summary- Balance Sheet

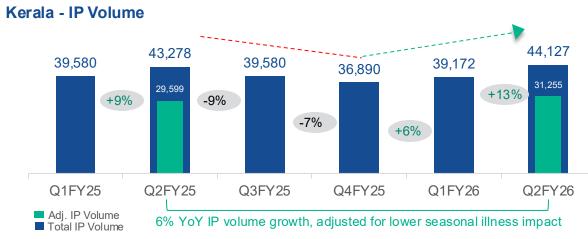


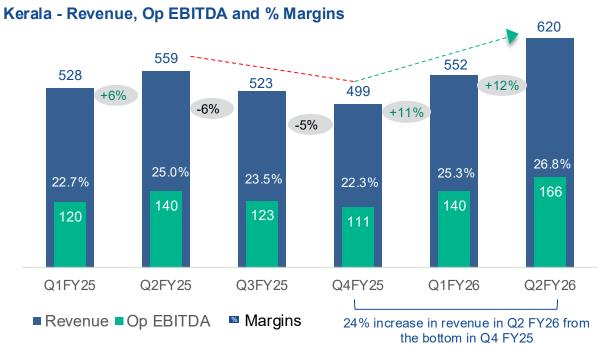
Particulars (INR Cr)	As at Sep 30, 2025	As at Mar 31, 2025	As at Mar 31, 2024
LIABILITIES			
Shareholders' Equity	518	500	500
Minority Interest	239	224	158
Other Reserves	3,555	2,469	2,353
Land Revaluation Reserve	460	460	460
Gross Debt	639	642	669
Lease Liabilities - INDAS116	1,450	1,376	714
Other non-current liabilities	245	246	429
Other current liabilities	701	690	581
Total Liabilities	7,809	6,607	5,865
ASSETS			
Property, Plant and Equipment (including CWIP)	2,863	2,694	2,474
Investments (including Goodwill)	1,447	508	278
Right to Use Assets - INDAS116	1,297	1,255	608
Inventories	93	93	111
Cash, Bank Balance and Current Investments	1,276	1,381	1,570
Other non-current assets	323	247	285
Other current assets	510	429	541
Total Assets	7,809	6,607	5,865

Key financial ratios	As at Sep 30, 2025	As at Mar 31, 2025	As at Mar 31, 2024
Net Debt and Lease Liabilities/Equity ratio (x times) (Ex. Affinity)	0.2	0.2	0.6
Net Debt and Lease Liabilities/EBITDA ratio (x times)	1.0	0.8	2.2
Net Debt /EBITDA (Pre INDAS) ratio (x times)	-0.9	-1.1	1.1
ROCE - Pre-Tax (%) (EBIT / Average Capital Employed)	20.9%	19.5%	16.4%

Kerala Cluster Recovery and Performance Momentum







Significant Recovery in Q1FY26 and Peak Performance in Q2FY26

- Recovery in In-patient volume in Q1FY26 and Q2FY26 by 6% and 13% respectively surpassing its earlier peak levels
- Achieved highest ever quarterly revenue in Q2FY26 at INR 620 Cr, registered an increase of 24% from INR 499 Cr in Q4FY25
- MVT business delivered a strong performance; revenue grew by 67% QoQ and 49% YoY in Q2FY26
- Significant expansion in EBITDA margins to 26.8% in Q2FY26 from 22.3% in Q4FY25

Strategic Interventions and Strengthened Leadership Team

- Strengthened the leadership team by onboarding experienced professionals bringing renewed focus and execution strength
- On MVT front Re-engaging with partners in key geographies and expanding our outreach into newer markets and enhancing referral partner network
- Brought desired improvement in processes and controls with operational efficiencies

Temporary Headwinds in Q3 and Q4FY25

 Noticed soft performances in Q3FY25 and Q4FY25 on account of leadership change, impact of Ramadan in March 2025, shorter days in February 2025 and lower international patient volumes

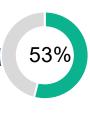
Kerala cluster has delivered strong sequential performance in Q2FY26, reached earlier levels of Inpatient volumes and achieved one of highest revenue and Operating EBITDA in any quarter along with margins expansion.

Kerala Cluster: Hospitals and Bed Capacity





Revenue Contribution¹





Aster Medcity Kochi, Kerala 2014. Owned



MIMS Calicut Kozhikode, Kerala 2013, Owned



MIMS Kottakkal Kottakkal, Kerala 2013, Owned



MIMS Kannur Kannur, Kerala 2019, Owned



Aster PMF Kollam, Kerala 2023, O&M Asset Light



Aster Mother Hospital Areekode, Kerala 2022, O&M Asset Light

2,661 Total Capacity Beds

Planned Expansion



Aster Capital Trivandrum 454 beds



Kasargod 264 beds

Aster MIMS

Commissioned on October 2nd, 2025



Aster Medcity Kerala 100 beds (Expansion)

554 Beds Planned for Expansion post commissioning of 264 beds at MIMS Kasargod

454 Greenfield Beds

100 Brownfield Beds

- Kerala to have nearly ~3,500 beds
- Aster Medcity on its way to become a 950+ bedded hospital

Kerala Cluster - Performance

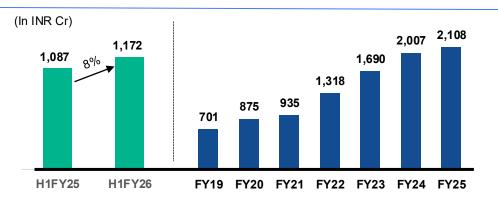


Financial Metrics	Q2FY26	Q2FY25	YoY	Q1FY26	QoQ
Revenue	620	559	11%	552	12%
Op. EBITDA	166	140	19%	140	19%
Op. EBITDA Margin	26.8%	25.0%	180 bps	25.3%	150 bps

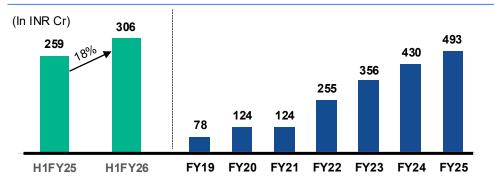
Highlights:

- Regaining growth momentum, Kerala cluster achieved its highest ever quarterly revenue up 11% YoY (12% QoQ) in Q2FY26 driven by growth in MVT and increase in Oncology revenue.
 - 6% YoY IP volume growth adjusted for seasonality; 13% QoQ increase in IP volumes, driving occupancy to 69% in Q2FY26 from 64% in Q1FY26
 - o MVT business revenue jumped by 49% YoY
 - ARPP (IP) grew 5% YoY, supported by higher MVT revenue, and an improved case mix led by Oncology.
 - Aster Medcity, our flagship hospital, revenue grew by 14% YoY supported by 7% growth in IP volume.
- Operating EBITDA grew significantly by 19% YoY with margin expanding to 26.8% in
 Q2FY26, led by cost efficiencies and operating leverage in manpower and overhead costs.

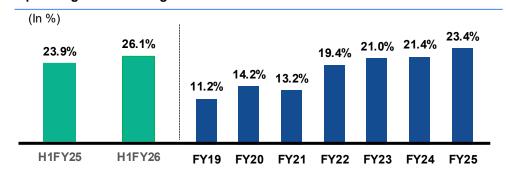
Revenue



Operating EBITDA¹



Operating EBITDA Margin¹



Karnataka & Maharashtra Cluster: Hospitals and Bed Capacity





Revenue Contribution¹

35%



Aster CMI Bengaluru, Karnataka 2014, O&M



Aster Whitefield Bengaluru, Karnataka 2021, Leased

250



252

Aster RV Bengaluru, Karnataka 2019, O&M

100



Aster Aadhar Kolhapur, Maharashtra 2008, Owned



Aster G Madegowda Mandya, Karnataka 2023, O&M Asset Light

1,491 Total Capacity Beds

Planned Expansion



Aster Yeshwanthpur Bengaluru 500 beds



Aster Sarjapur Bengaluru 430 beds

Aster CMI Bengaluru 350 beds (Expansion)



Aster Whitefield Bengaluru 159 beds (Expansion)



1,430+ Beds Planned for Expansion

930 Greenfield Beds

500+ Brownfield Beds

 Strengthening leadership position in Bangalore by adding 430 beds at Sarjapur and 500 beds at Yeshwanthpur taking bed capacity to 2500+ beds

Hospital Revenue Contribution
 Capacity Beds

Karnataka & Maharashtra Cluster - Performance

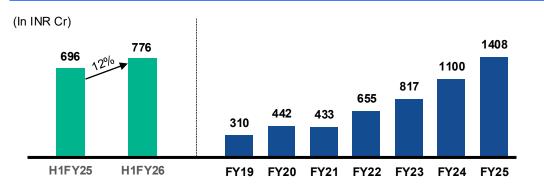


Financial Metrics	Q2FY26	Q2FY25	YoY	Q1FY26	QoQ
Revenue	405	367	10%	372	9%
Op. EBITDA	99	94	6%	86	15%
Op. EBITDA Margin	24.5%	25.6%	-110 bps	23.2%	130 bps

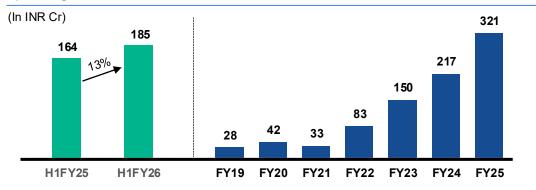
Highlights:

- Revenue grew 10% YoY supported by healthy growth in Aster Whitefield and strong ARPP
 (IP) improvement
 - 6% YoY growth in IP volume (adjusted for seasonality and exit from scheme business in Aster Aadhar) reflects higher contribution from CONGO mix.
 - Excluding scheme and seasonality, ARPP IP grew by 11% YoY driven by higher contributions from high-value procedures, mainly in Oncology and Neurosciences
 - o Aster Whitefield revenue grew by 27% YoY in Q2FY26.
- Operating EBITDA grew by 6% YoY (15% QoQ) despite higher material costs on account of growth in medical oncology services.

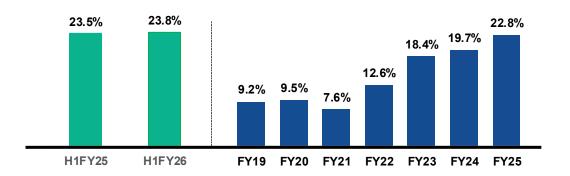
Revenue



Operating EBITDA¹



Operating EBITDA Margin²



2. Operating EBITDA Margin excluding Whitefield is 25.0% in H1FY26 as compared to 25.8% in H1FY25

^{1.} From FY19 to FY22 is reported as EBITDA and FY23 onwards it is operating EBITDA

Andhra & Telangana Cluster: Hospitals and Bed Capacity





Revenue Contribution¹

12%

150

54



Ramesh Guntur Guntur, AP





Aster Ramesh Ongole 75 Beds (Expansion)



Aster W&C Hyderabad 300 Beds



Prime Hospitals - Ameerpet Hyderabad, Telangana 2014, Leased





Ramesh Labbipet Vijayawada, AP 2016, Leased



Ramesh Adiran (IB) Vijayawada, AP 2023, Leased



300 Greenfield Beds

75 Brownfield Beds

- Andhra & Telangana cluster to reach 1422 beds
- Aster W&C hospital at Hyderabad is expected to be commissioned in H1FY27 with 300 bed capacity



135

Ramesh Main Centre Vijayawada, AP 2016, Leased

1,047 Total Capacity Beds



Planned Expansion

350

150

50



Aster Narayanadri Tirupati, AP 2023, O&M Asset Light



Andhra & Telangana - Performance

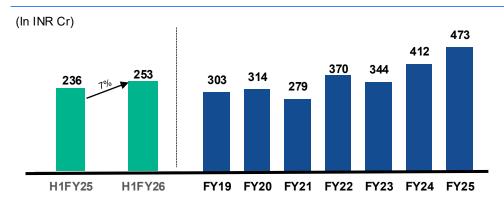
Financial Metrics	Q2FY26	Q2FY25	YoY	Q1FY26	QoQ
Revenue	135	125	8%	118	14%
Op. EBITDA	18	19	-5%	9	91%
Op. EBITDA Margin	13.2%	15.0%	-180 bps	7.9%	530 bps

Highlights:

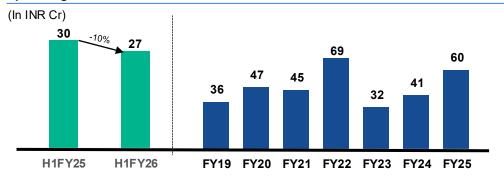
- Aster increased its stake in Aster Ramesh Hospitals by 13% taking the total stake to over 70%
- Revenue grew 8% YoY (14% QoQ) led by growth in IP volume and ARPP (IP)
 - o IP volume increased by 4% YoY (16% QoQ)
 - o ALOS improved by 7% YoY to 3.6 days in Q2FY26 from 3.9 days in Q2FY25
 - o ARPP IP remained healthy with 4% YoY growth, indicating better case mix
- YoY Operating EBITDA decreased marginally by 5% on account of higher manpower cost.
 However, on QoQ basis it almost doubled.



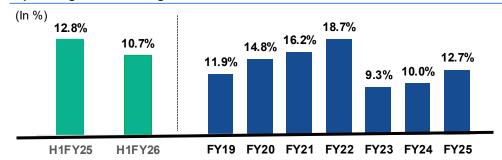
Revenue



Operating EBITDA¹

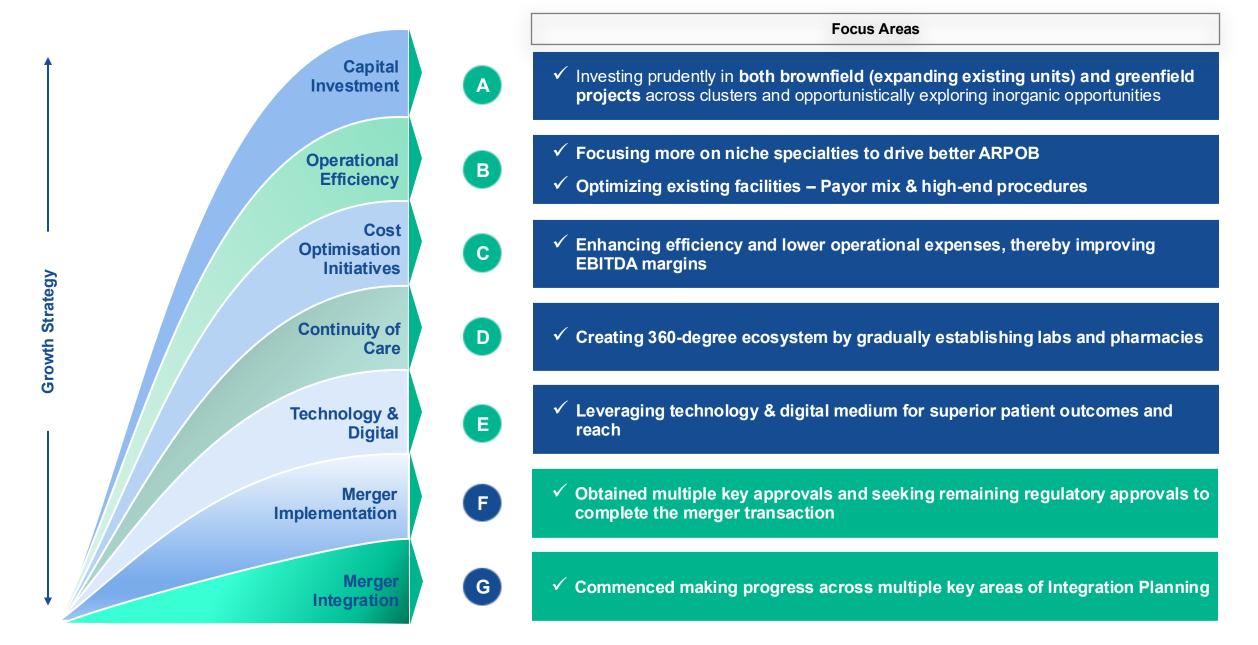


Operating EBITDA Margin



Our Strategic Priorities







Appendix

Combined Proforma Numbers



(Figur	res for FY25)	Aster +	QCIL	Merged Entity*
	Revenue (INR Cr)	4,138	3,9671	8,105
rics	YoY (%) Revenue Growth	12%	12%	12%
Financial Metrics	Operating EBITDA ² (INR Cr)	806	855	1,661
Fin	Op EBITDA Growth YoY (%)	30%	13%	20%
	Op EBITDA Margin %	19.5%	21.5%	20.5%
	ROCE ³ (%)	20.7%	20.4%	20.5%

^{*} Proforma financials for merged entity are subject to finalization and audit of the merged accounts. Actual amounts, lossesor impact on net profit could materially differ from those that have been estimated. In addition, other factors that could cause actual results to differ materially from those estimated include harmonization of accounting policies and practices.

QCIL numbers are indicative and subject to statutory audit adjustments, if any
 Combined Operating EBITDA is Post INDAS EBITDA adjusted for one-time & non-cash expenses, ESOP cost, movement in fair value of contingent consideration and variable O&M fee
 RoCE is computed on a verage capital employed excl. revaluation reserves and CWIP and Intangibles (as of June 2025).

Aster Performance Highlights - FY 2025



Financial

Revenue

FY25: INR 4,138 cr

12%

FY24: INR 3,699 cr

Operating EBITDA¹

FY25: INR 806 cr

30%

FY24: INR 620 cr

Op EBITDA Margin

FY25: **19.5**%

270 bps

FY24:16.8%

Normalised PAT² (Post-NCI)

FY25: INR 357 cr

49%

FY24: INR 240 cr

RoCE³ (Pre-Tax)

FY25: 19.5%

310 bps

FY24: 16.4%

Capacity Beds

FY25:5,159

290+

FY24:4,867

Avg. Occupied Beds

FY25: 2,390

+28

FY24: **2,362**

ARPOB

FY25: INR 45,000

12%

FY24: **INR 40,100**

ALOS

FY25: 3.2

-6%

FY24: 3.4

Total Patient

FY25: 3.57 mn



8%

FY24: 3.30 mn

^{1.} Operating EBITDA for the period FY25 excludes the ESOP Cost of Rs. 8.4 Cr [FY24: 5.3 Cr], Movement in fair value of contingent consideration payable of Rs. 0.8 Cr [FY24: -4.4 Cr], Variable O&M fee amounting to Rs.31.8 Cr [FY24: 31.0 Cr]. [Our Operating & Management (O&M) agreements, encompasses both fixed and variable component. While the fixed component of the O&M fee is delineated into depreciation and finance costs as per Ind AS 116, whereas the variable component falls outside the scope of IndAS 116, leading to an incomplete reflection of the standard's impact in

^{2.} The FY25 PAT excludes project unity transaction cost of Rs 50.1 Cr and FY24 PAT excludes a one-time impact due to recognition of Net Deferred Tax Liability to the tune of ₹52.4 Cr. arising out of transition to New Tax Regime under the Income Tax Act, following the segregation of the GCC

Aster - Performance Financial Highlights for Q2FY26



Revenue

Q2FY26: INR 1,197 Cr

10%

Q2FY25: INR 1,086 Cr

Operating EBITDA¹

Q2FY26: INR 263 Cr

13%

Q2FY25 : INR 233 Cr

Op EBITDA Margin

Q2FY26: **22.0%**

53 bps

Q2FY25 : **21.4%**

PBT

Q2FY26: INR 181 Cr



12%

Q2FY25: INR 161 Cr

Normalised PAT²

(Post-NCI)

Q2FY26: INR 110 Cr



14%

Q2FY25: INR 97 Cr

Revenue

Q2FY26: INR 1,197 Cr

11%

Q1FY26: INR 1,078 Cr

Operating EBITDA1

Q2FY26: INR 263 Cr



Q1FY26: INR 215 Cr

Op EBITDA Margin

Q2FY26: 22.0%



200 bps

Q1FY26: 20.0%

PBT

Q2FY26: INR 181 Cr



24%

Q1FY26: INR 151 Cr

Normalised PAT²

(Post-NCI)

Q2FY26: INR 110 Cr



23%

Q1FY26: INR 90 Cr

1. Revenue, Operating EBITDA and EBITDA excludes other income

2. Operating EBITDA for the period Q2 FY26 excludes the ESOP Cost of Rs. 3.5 Cr [Q2 FY25: 2.2 Cr], [Q1FY26: 0.8 Cr], Movement in fair value of contingent consideration payable of Rs. Nil Cr [Q2 FY25: 2.7 Cr], [Q1FY26: Nil], Variable O&M fee amounting to Rs.9.7 Cr [Q2 FY25: 8.3 Cr], [Q1FY26: 7.2 Cr]. [Our Operating & Management (O&M) agreements, encompasses both fixed and variable component of the O&M fee is delineated into depreciation and finance costs as per Ind AS 116, whereas the variable component falls outside the scope of IndAS 116, leading to an incomplete reflection of the standard's impact in EBITDA

Aster - Key Highlights for Q2FY26



Double-digit YoY growth in Revenue and Operating EBITDA led by substantial recovery in Kerala, strong growth in international revenue and better case mix

10% YoY (11% QoQ) overall revenue growth despite lower incidence of seasonal illness unlike Q2FY25 (13% YoY growth adjusted for seasonality)

- ARPP IP rose 10% YoY to INR 1,18,552 in Q2FY26, driven by improved specialty mix. CONGO mix increased by 240 bps to 51% in Q2FY26
- ALOS improved by 5% YoY to 3.1 days in Q2FY26 from 3.2 days in Q2FY25 aided by increased robotics surgeries and efficient hospital operations
- Total patient volume grew by 15% QoQ with IP volume growing by 12% QoQ (6% YoY adjusted for seasonality and discontinuation of scheme in one of our hospital) and OP volume growing by 15% QoQ in Q2FY26
 - Occupancy grew to 64% in Q2FY26 from 59% in Q1FY26; Kerala at 69% (64% in Q1FY26); K&M at 62% (56% in Q1FY26) and A&T at 55% (50% in Q1FY26)
 - Kerala total patient volume increased by 17% QoQ (Inpatient by 13% QoQ and Outpatient by 17% QoQ) delivering 12% QoQ revenue growth
 - Andhra & Telangana revenue grew 14% QoQ, supported by 16% QoQ increase in total patient volume (IP and OP volume each grew by 16% QoQ)
- Significant growth in MVT revenue by 26% YoY (60% QoQ), led by growth in Kerala MVT revenue of 49% YoY (67% QoQ) during the quarter

13% YoY (22% QoQ) overall Op EBITDA growth in Q2FY26 driven by cost efficiencies and improved Lab business performance

- Overall Operating EBITDA margins expanded to 22.0% in Q2FY26 as compared to 21.4% in Q2FY25 (20.0% in Q1FY26)
- Kerala Cluster Operating EBITDA grew by 19% YoY with margins expanding to 26.8% in Q2FY26 from 25.0% in Q2FY25
- Andhra & Telangana cluster Operating EBITDA margin grew significantly to 13.2% in Q2FY26 from 7.9% in Q1FY26
- Labs' Operating margins significantly improved to 17.8% in Q2FY26 as compared to 11.0% in Q2FY25 (7.6% in Q1FY26)

Healthy growth in Oncology revenue by 26% YoY; contribution increased to 11% in Q2FY26 from 9% in Q2FY25

Added 200+ beds during the last year taking bed capacity to 5,199 as on Sep 30, 2025, (largely driven by 160 beds added in Kerala)

Aster MIMS Kasargod commenced on 2nd Oct 2025, reinforcing presence in Northern Kerala; Aster Whitefield and Ramesh Ongole to commence in H2 FY26

Merger Update: Received No-Objection Letters from both stock exchanges – BSE and NSE

Aster - Other Highlights for Q2FY26



Aster CMI becomes Karnataka's 1st to install the Philips Excimer Laser Atherectomy System MIMS Kottakkal's cardiology team implanted Malappuram's 1st dual-chamber leadless pacemaker (Micra2) First Valve in Valve at Aster Whitefield on a 77-year-old lady using the self-expanding Evolute valve with excellent results Clinical 1-year-old underwent Van Nes Rotationplasty, a rare limb-sparing procedure at CMI Bengaluru Highlights Recurrent Tracheal Stenosis Refractory to Standard Interventions Managed with Montgomery T-Tube at Medcity Kochi First Renal Transplant – MIMS Kannur: Hospital's first successful renal transplant on a 51-year-old patient. Successful fetal preservation during 2nd-trimester surgery for borderline seromucinous ovarian carcinoma at Aster Aadhar, Kolhapur Core hospitals & clinics business delivered an Operating EBITDA margin of 24.4% in Q2FY26 (24.0% in Q2FY25) Other Matured hospital Operating EBITDA margins stood at 26.5% in Q2FY26 (25.9% in Q2FY25) Business Aster Medcity revenue grew by 14% YoY and Op. EBITDA grew by 28% YoY in Q2FY26; Op EBITDA Margin at 32% **Highlights** Aster Whitefield revenue grew by 27% YoY and Op. EBITDA grew by 41% YoY in Q2FY26 Aster Labs revenue grew by 15% YoY in Q2 FY26 and Op. EBITDA grew by 86% YoY Strengthening Aster's position in Northern Kerala with the commencement of operations at Kasargod

Capex

- Adding 2,300+ beds to reach 7,800+ capacity 234 beds in FY26, 1,054 beds in FY27, 1,080 beds beyond FY27
- FY 26 Expansion Aster Whitefield | Aster Ramesh Ongole
 FY 27 Expansion Aster Capital, Trivandrum | Aster Sarjapur Phase-I | Aster W&C, Hyderabad

Transforming Lives
Through Clinical
Excellence¹



41,950+ CIG/PTCA (Angiogram & Angioplasty)



2,175+Robotic surgeries



1,420+
Cardio-vascular surgeries



540+ Transplants



10,300+ Urology procedures



5,640+ Neuro surgeries



3,660+Joint
Replacements



4,835+Gastro-intestinal surgeries

1. Surgery counts are on TTM basis

Aster - Other Highlights for Q2FY26



ESG¹ Highlights

- 8.5 MW solar park commissioned in Kasargod, Kerala, reducing 11.5K tonnes of CO₂e annually
- 9 new Mobile Medical Units launched, expanding the fleet to 45 in India and 62 globally
- 3.19 lakh lives impacted in India, including 2.23 lakh through mobile medical services
- Received top honours including Gold (CSR Health Impact Award), Platinum and Gold (Global ESG), and CSR Times Award 2025.

Recognition













Padmashree Dr. Azad Moopen, Founder Chairman and Managing Director

- Honoured as "Healthcare Icon of the Year" at ET Healthcare Awards 2025
- Awarded "Legend in the Healthcare Industry" at FICCI Heal 2025
- Featured among Top 5 Healthcare Leaders 2025 by Forbes Middle East
- Ms. Alisha Moopen, Deputy Managing Director
 - Recognized as "Dynamic Entrepreneur of the Year" at Entrepreneur India Awards 2025
 - Named "Healthcare Visionary Leader of the Year" at ET-Middle East Awards 2025
 - Featured among Top 5 Healthcare Leaders 2025 by Forbes Middle East

Aster Hospitals

- ET Healthcare Awards 2025:
- Aster CMI Hospital of the Year; Oncology (South)
- Aster Medcity Organ Transplantation (National)
- Aster Whitefield Critical Care, Reconstructive Surgery (South)
- Aster RV Hospital Organ Transplantation (South)
- Multiple Doctors of Aster MIMS Kannur recognized for excellence in their specialties in the South region
- FICCI Heal 2025 Aster Whitefield awarded "Technology Transformation Initiative" of the Year
- Elets Technomedia Awards 2025 Aster Digital Health won "Most Impactful Digital Transformation in Healthcare"

1. ESG highlights are for Q2FY26

Board of Directors





Dr. Azad Moopen

Founder Chairman and
Managing Director



Alisha Moopen

Deputy Managing Director



T. J. Wilson

Non-Executive Director



Shamsudheen Bin Mohideen Mammu Haji Non-Executive Director



Purana Housdurgamvijaya
Deepti
Independent Director



Chenayappillil John George Independent Director



James Mathew
Independent Director



Emmanuel David Gootam

Independent Director



Maniedath Madhavan Nambiar

Independent Director



Sunil Theckath Vasudevan

Independent Director



Anoop Moopen



Dr. Zeba Azad Moopen

Non-Executive Director

Non-Executive Director

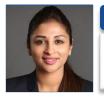
Leadership Team





Dr. Azad Moopen

Founder Chairman and Managing Director



Alisha Moopen

Deputy Managing Director



T. J. Wilson

Group Head - Governance & Corporate Affairs



Ramesh Kumar S

Chief Operating Officer



Dr.Somashekhar S P

Chairman-Medical Advisory Board & Director - Aster International Institute of Oncology



Sunil Kumar M R

Chief Financial Officer



Hitesh Dhaddha

Chief Investor Relations & M&A officer



Dr. Prashanth N

Chief Executive Officer -Karnataka Cluster



Kannan Srinivas

Director - Aster Health Academy



Durga Prasanna

Head - HR



Vineesh Kumar Ghei

Country Head - Sales, Marketing & RCM



Sudeep Dey

Chief - Information Officer & Information Security Officer



Hari Prasad V K

Head - Internal Audit, Risk & Compliance



Dr. Anup Warrier

Chief - Medical Affairs & Quality



Hemish Purushottam

Company Secretary



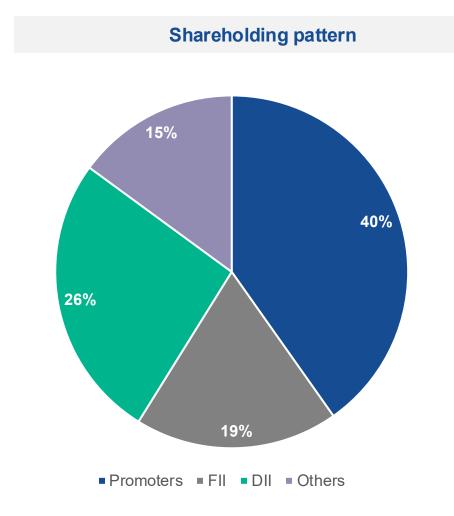
Hemakumar Nemmali

Country Head - SCM & Central Procurement

Current Shareholding pattern and Key shareholders



Marquee domestic and foreign institutional investors are currently invested in Aster







Quality Care Overview

Quality Care – One of the largest hospital chains with focus on emerging cities in India



About QCIL

Leading Hospital Network

- Troika of brands: CARE Hospitals, KIMSHEALTH and Evercare
- Extensive network of 19 hospitals in 14 cities

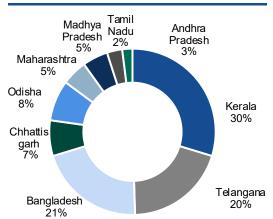
Diverse Geographic Reach

- One of India's largest hospital network focused on non-metro markets (4,500+ beds across 8 states)
- Bangladesh's leading multi-specialty hospital network (500+ beds across 2 cities)

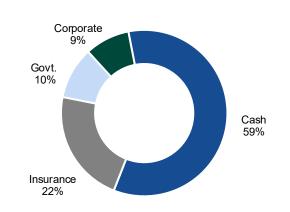
Strong Clinical Capabilities

- All India hospitals accredited by NABH
- Dhaka hospital accredited by JCI
- High tertiary/quaternary mix, on back of an experienced clinician team

Geography mix (Q2 FY26)¹



Payor mix (Q2 FY26)



Key Stats









Clinical Capabilities





15+ years average experience



H1FY26 Financial Performance



INR 2,271 Cr Revenue (20% 3Y CAGR)





Notes

- . Considered hospital revenue
- 2. Includes Nagercoil (Tamil Nadu) which got operational in Sep'24
- 3. As of Sep 2025
- 4. Post INDAS EBITDA adjusted for one-time and non-cash expenses for QCIL
- 5. CAGR is calculated on Pro-forma Pre-INDAS EBITDA

Quality Care – High standards of clinical excellence



Select firsts achieved by QCIL

in India to use an 1st indigenous coronary

in India to perform heart surgery on a foetus

in Central India to 1st start 3D laparoscopy surgery

in India to perform womb transplant

Infrastructure

Accreditation

equipment ³

High-end





Renal transplant in a private hospital in Bangladesh

Haploidentical bone marrow transplant in Bangladesh

Hospital in Kerala to set up a division in medical genetics

Hospital in Kerala to have a NABH accredited Blood bank







38,165+ CAG/PTCA/ CABG²



1.810+ brain tumour/ craniotomy



36,165+ oncology procedures



195+ renal & liver transplants





635+ MVR/AVR/ DVR²



2,620+ spine/ laminectomy



930+ reconstructions



2,880+ cystoscopies Robotic surgery capabilities, LINAC, PET CT, Cath Labs, MRI, CT Scan, Neuro Microscopes and other high-end equipment installed in various facilities

27 Cathlabs

6 LINACs

17 MRI machine

12 Robots

Comprehensive multi-specialty clinical services backed by highly experienced clinician team and bestin-class medical technology

Notes:

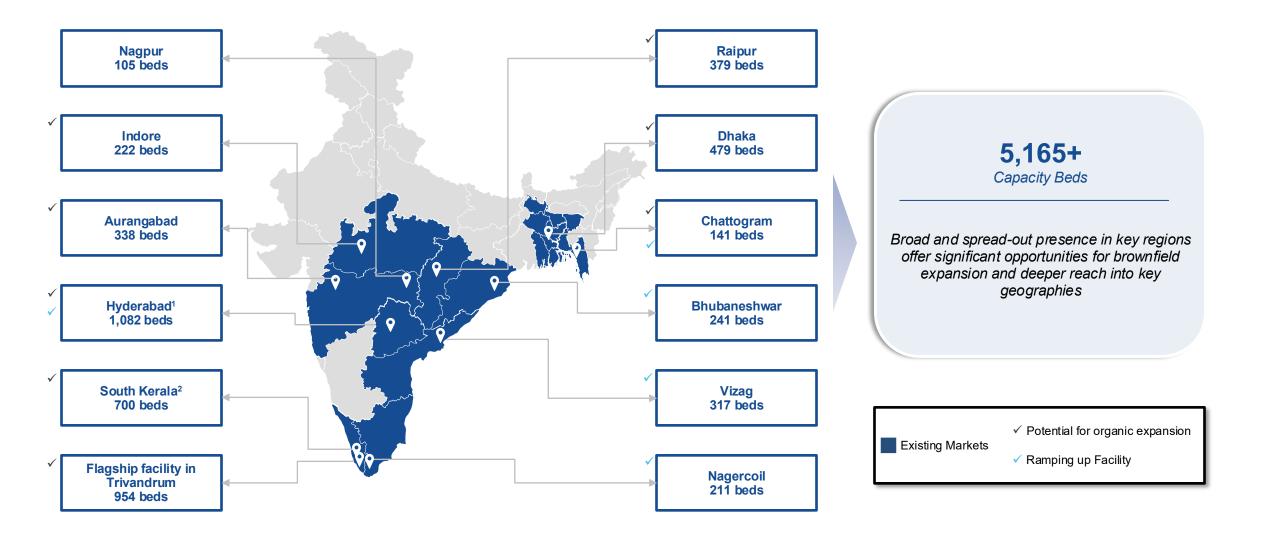
Key tertiary care procedures¹

Select firsts

- CAG: Coronary artery angiography, PTCA: Percutaneous transluminal coronary angioplasty, and CABG: Coronary artery bypass grafting; MVR: Mitral Valve replacement, AVR: Aortic Valve replacement, and DVR: Double Valve replacement
- As of Sep'25

Quality Care – Diversified presence across 14 cities





Notes

Capacity beds as of Sep'25

1. 5 Facilities: Banjara, Hitech, Nampally, Malakpet, Musheerabad

2. 3 Facilities: Perinthalmanna, Kollam, and Kottayam

Performance Highlights – Quality Care



>0

Revenue

Q2FY26: INR 1,193 cr



Q2FY25: INR 1,036 cr

Operating EBITDA¹

Q2FY26: INR 287 cr



Q2FY25 : **INR 236 cr**

Op. EBITDA Margin

Q2FY26: 24.1%



Q2FY25: 22.8%

IP Volumes

Q2FY26: 66,558



4%

Q2FY25 : **64,027** Q2FY25 : **841,896**

QoQ

Revenue

Q2FY26: INR 1,193 cr



Q1FY26: INR 1,078 cr

Operating EBITDA¹

Q2FY26 : **INR 287 cr**



27%

Q1FY26 : INR 227 cr

Op. EBITDA Margin

Q2FY26 : **24.1%**



300 bps

Q1FY26: 21.1%

IP Volumes

Q2FY26: 66,558



12%

Q1FY26: **59,459**

OP Volumes

OP Volumes

Q2FY26: 932,933

11%

Q2FY26: 932,933



12%

Q1FY26: 833,126

QCIL Key Highlights – Q2FY26



Strong double-digit growth for the business driven by robust performance across clusters

- Growth driven by higher IP volumes, favorable payor mix shift toward cash and insurance, increased share of complex procedures, and ALOS reduction
- Kerala cluster delivered 11% YoY driven by Trivandrum performance and Tamil Nadu saw strong ramp of Nagercoil unit launched in Oct'24
- Of the other units, Hyderabad units delivered 9% YoY and Bangladesh units delivered 30% YoY growth

Overall operating EBITDA grew by 22% YoY largely driven by operational excellence and better leverage

- Initiatives around procurement centralization, F&B in-sourcing, and clinical talent are showing continued success
- Procurement synergies across QCIL entities delivered ~INR 20 crore+ of EBITDA uplift during the quarter
- Nagercoil unit launched in Oct'24 achieved EBITDA breakeven within 3 quarters

ALOS has improved by 6% YoY to 3.9 days in Q2 FY26, reflecting better clinical protocols

Deeper clinical mix and better payor mix drove 10% YoY growth in IP ARPP, reaching ~INR 125k in Q2 FY26 (~INR 114k in Q2 FY25)

- Payor mix shift led by 270 bps reductions in scheme mix and 240 bps increase in share of cash and TPA business on a YoY basis
- ARPP growth supported by improved specialty mix CONGO-T share increased by 80 bps to 58.5% in Q2FY26

Strengthened clinical teams by onboarding 100+ doctors across the QCIL hospital network

Augmented management team by further adding 1 senior leader (11 professionals added in last 18 months)

CARE and KIMSHealth recognized for clinical leadership, nursing excellence, and research focus by The Economic Times, NABH, and Medical Dialogues

Merger Implementation – Progress Update



Transaction Announcement

In Nov'24, Company announced:

- Merger of Quality Care with the Company ("Merger") and
- Preferential allotment of ~3.6% stake to Blackstone and TPG in the Company in lieu of initial acquisition of 5.0% stake in Quality Care by the Company ("Share Swap")



Share Swap

- Company has received shareholders approval, CCI approval and stock exchange approval
- Post receipt of the statutory approvals, company has completed the Share Swap, thereby owing 5.0% stake in Quality Care and the shares issued by Aster to Blackstone and TPG are now listed on the stock exchanges



CCI Approval

Company has received the CCI approval for the Share Swap and the Merger



Stock Exchanges/ SEBI NOC (Merger) Latest

 Company has received no-objection letter with no adverse observations from the Stock Exchanges/ SEBI, and now the Company will approach NCLT



NCLT Approval and Listing

- Post application to NCLT, shareholders' meeting will be scheduled to consider and approve the Merger
- NCLT to review the application post receipt of shareholders' approval and once approved, Merger will be made effective and new shares of the company will be issued

Expected timeline for the completion of the Merger: Q1 FY27



Thank You

Investor Relations: investors@asterdmhealthcare.in