adding life to years

August 12, 2021

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

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

Dear Sir/Madam,

Subject : *Investor Presentation*
Stock Code : *BSE – 539787, NSE – HCG*

We wish to inform you that the Board of Directors of the Company, at their meeting held on August 12, 2021, *inter alia,* has approved the Unaudited Financial Results (Standalone and Consolidated) of the Company for the quarter ended June 30, 2021.

In this respect, we enclose herewith the Presentation on the Financial Results of the Company for the quarter ended June 30, 2021.

Request you to take this on record.

Thanking you,

For **HealthCare Global Enterprises Limited**

Sunu Manuel
Company Secretary & Compliance Officer

Encl: a/a.

HealthCare Global Enterprises Limited

adding life to years

HEALTHCARE GLOBAL ENTERPRISES LIMITED

Q1-FY22 INVESTOR PRESENTATION

The Specialist in Cancer Care

adding life to years

DISCLAIMER

THIS PRESENTATION AND ITS CONTENTS ARE CONFIDENTIAL AND ARE NOT FOR RELEASE, PUBLICATION OR DISTRIBUTION, IN WHOLE OR IN PART, DIRECTLY OR INDIRECTLY, IN OR INTO OR FROM THE UNITED STATES OF AMERICA, CANADA, AUSTRALIA, JAPAN OR ANY JURISDICTION WHERE SUCH DISTRIBUTION IS UNLAWFUL.

This presentation has been prepared by HealthCare Global Enterprises Limited (the "Company"). These materials are not for publication or distribution, directly or indirectly, in or into the United States (including its territories and possessions, any state of the United States and the District of Columbia). These materials are not an offer of securities for sale into the United States, Canada or Japan or any other jurisdiction. Any securities of the Company have not been and will not be registered under the U.S. Securities Act of 1933, as amended, and may not be offered or sold in the United States, except pursuant to an applicable exemption from registration. No public offering of any securities of the Company is being made in the United States.

The information contained in this presentation is for information purposes only and does not constitute or form part of an offer or invitation for sale or subscription of or solicitation or invitation of any offer to buy or subscribe for any securities, nor shall it or any part of it form the basis of or be relied on in connection with any contract, commitment or investment decision in relation thereto in India, the United States or any other jurisdiction.

No person accepts any liability whatsoever for any loss howsoever arising from the use of this document or of its contents or otherwise arising in connection therewith. The information set out herein may be subject to updating, completion, revision, verification and amendment without notice and such information may change materially. Financial information contained in this presentation has been derived from the restated consolidated and standalone financial statements of the Company and have been rounded off to the next integer, except percentages which have been rounded off to one decimal point.

This presentation contains certain "forward looking statements". Forward-looking statements 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. Although the Company believes that 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.

This presentation includes certain industry data and projections that have been obtained from industry publications and surveys. Industry publications and surveys and forecasts generally state that the information contained therein has been obtained from sources believed to be reliable, but there is no assurance that the information is accurate or complete. Neither the Company nor any of its advisors or representatives have independently verified any of the data from third-party sources or ascertained the underlying economic assumptions relied upon therein. No representation or claim is made that the results or projections contained in this presentation will actually be achieved. All industry data and projections contained in this presentation are based on data obtained from the sources cited and involve significant elements of subjective judgment and analysis, which may or may not be correct. For the reasons mentioned above, you should not rely in any way on any of the projections contained in this presentation for any purpose. No responsibility or liability whatsoever is undertaken for the contents hereof.

This presentation is based on information regarding the Company and the economic, regulatory, market and other conditions as in effect on the date hereof. It should be understood that subsequent developments may affect the information contained in this presentation, which neither the Company nor its advisors or representatives are under an obligation to update, revise or affirm.

adding life to years

The Specialist in Cancer Care

OVERVIEW

Cancer Care

- **Comprehensive cancer diagnosis and treatment services (offering radiation therapy, medical oncology and surgery)**
- **22[3] comprehensive cancer centers (including Kenya)**

The Specialist in Cancer Care

adding life to years

BACKGROUND

- One of the Largest[1] provider of cancer care in India under "HCG" brand
- Leading provider of fertility treatments under the "Milann" brand

Fertility Treatment

- Integrated reproductive medicine services
- 7 fertility centers in Bengaluru & North India

milann THE FERTILITY CENTER

Multi-Speciality

- 4[4] Multi-speciality hospitals providing high-quality tertiary care

adding life to years

[1]In terms of the total number of cancer treatment centers licensed by AERB as of March 31, 2015 (Source: Government of India, Atomic Energy Regulatory Board); [2] NABH accreditation for HCC Bengaluru, HMS Ahmedabad; ISO 9001 certification for pathology laboratory at HMS; NABL and CAP accreditations for Strand; [3] Includes center in Kenya; Bhavnagar multispeciality also includes comprehensive cancer services hence included in CCC count; [4] Suchiaryu, Hubli hospital managed under Operations and Management contract, not branded as HCG Hospital; as on 30th June'2021

EXECUTION FOCUSED

adding life to years

MARKETS

Laser sharp focus on leadership in Oncology in India

Penetrate key regions through organic/inorganic opportunities

OPERATIONS

Deliver margin improvement, cash flow generation & strong return on capital

Transform processes & outcomes with technology, digital & data resources

CAPITAL

Invest towards building scale & sustainable competitive advantages

Disciplined capital allocation strategy to drive long-term value creation for stakeholders

KEY INVESTMENT HIGHLIGHTS

adding life to years

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

FAVORABLE INDUSTRY DYNAMICS:
Oncology growing faster than market

FOCUSED CARE MODEL:
Independent comprehensive cancer centers

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

TRACK RECORD:
Consistent growth across Revenues & Operating profits

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

SUSTAINABLE GROWTH:
Key investments in expansions /capacities completed

SAVITA DEVI, CANCER WINNER

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

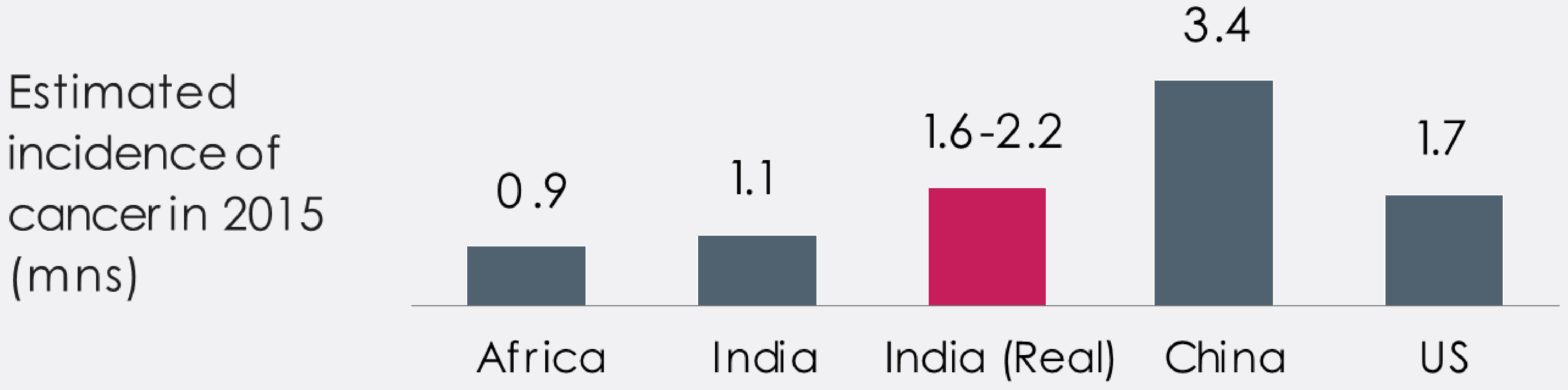
BUSINESS MODEL

ONCOLOGY INCIDENCE IN INDIA

adding life to years

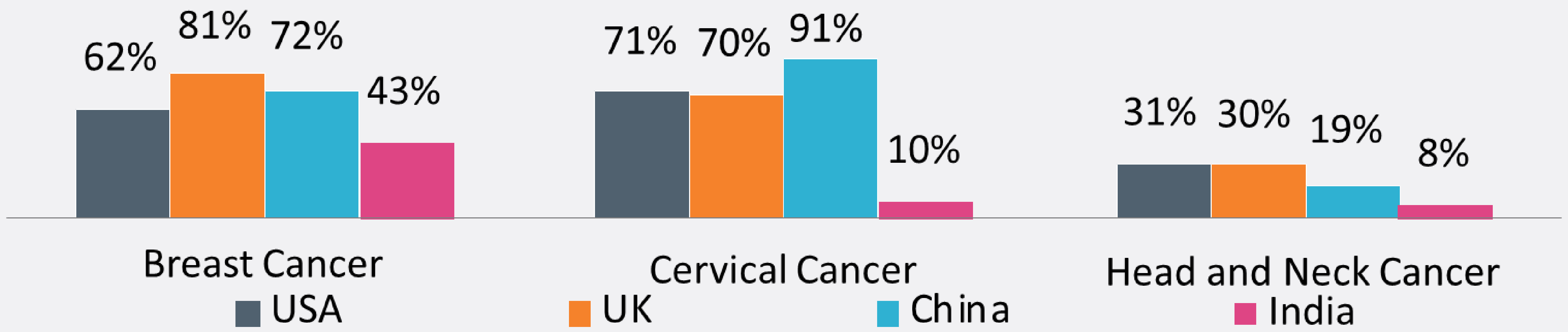
INCIDENCE ACROSS COUNTRIES

Under-Reporting Of Cancer In India[1]



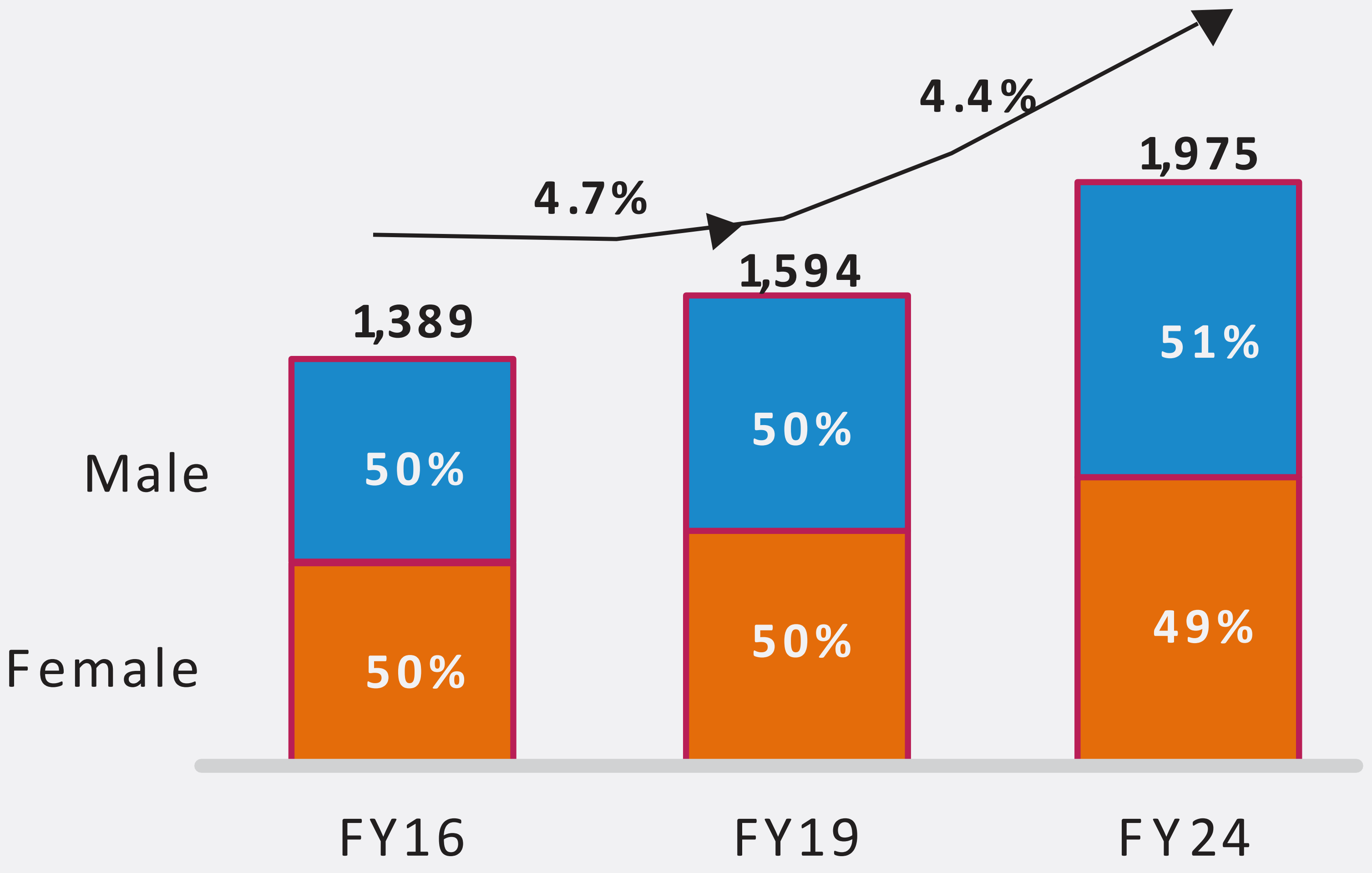
Under Diagnosis of Cancer in India[1]

Cancer Diagnosis at Early Stages (Stage I or Stage II)



INCIDENCES IN INDIA TO GROW TO ~2MN CASES BY FY24

Incidence of new cancer cases ('000)[2]



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

KEY DRIVERS OF ONCOLOGY OPPORTUNITY

adding life to years

1 Demographic Changes

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

2 Exposure to Risk Factors

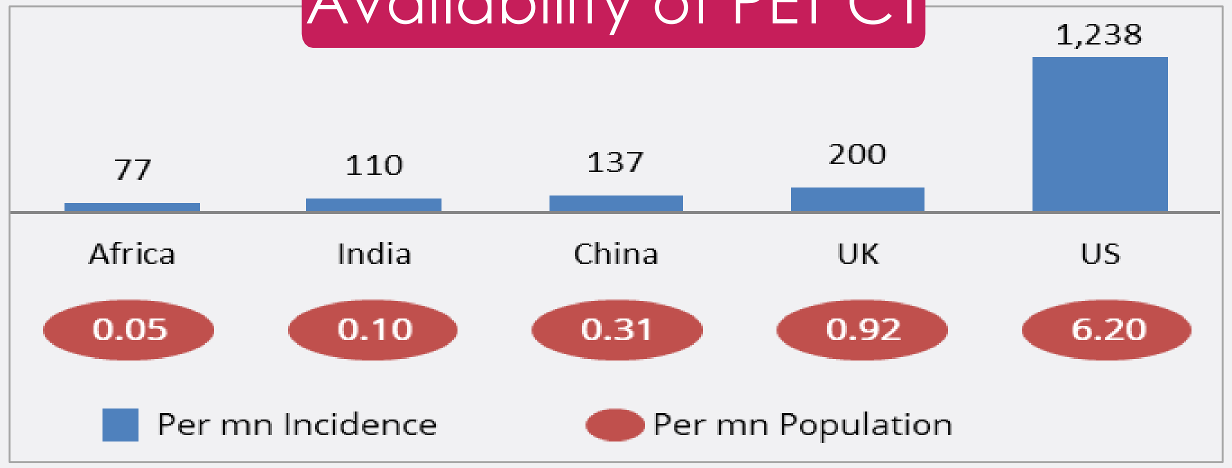
- Tobacco use, alcohol consumption, use of processed food and air pollution expected to increase **350K- 450K** cases a year

3 Narrowing Diagnosis Gap

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

4 Inadequate Infrastructure

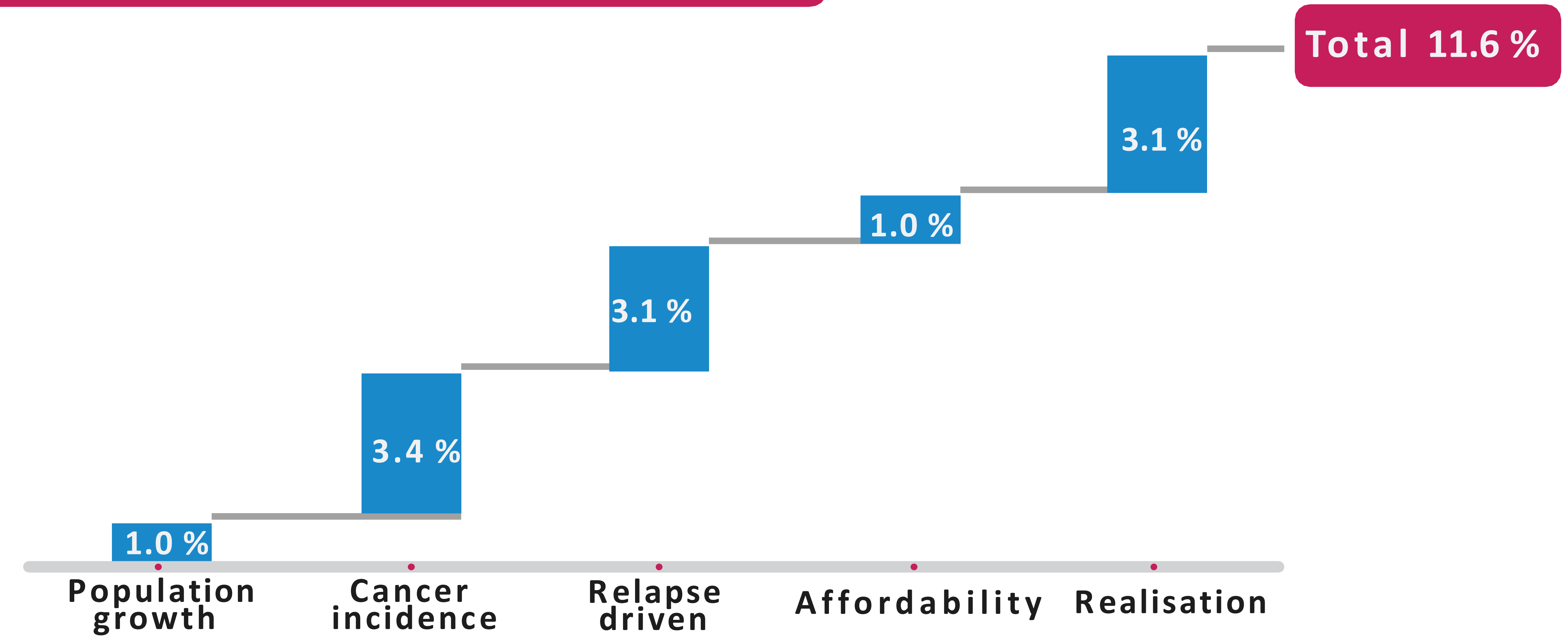
Availability of PET CT



Availability of LINACs

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

Market Growth Drivers(FY19-24) in %



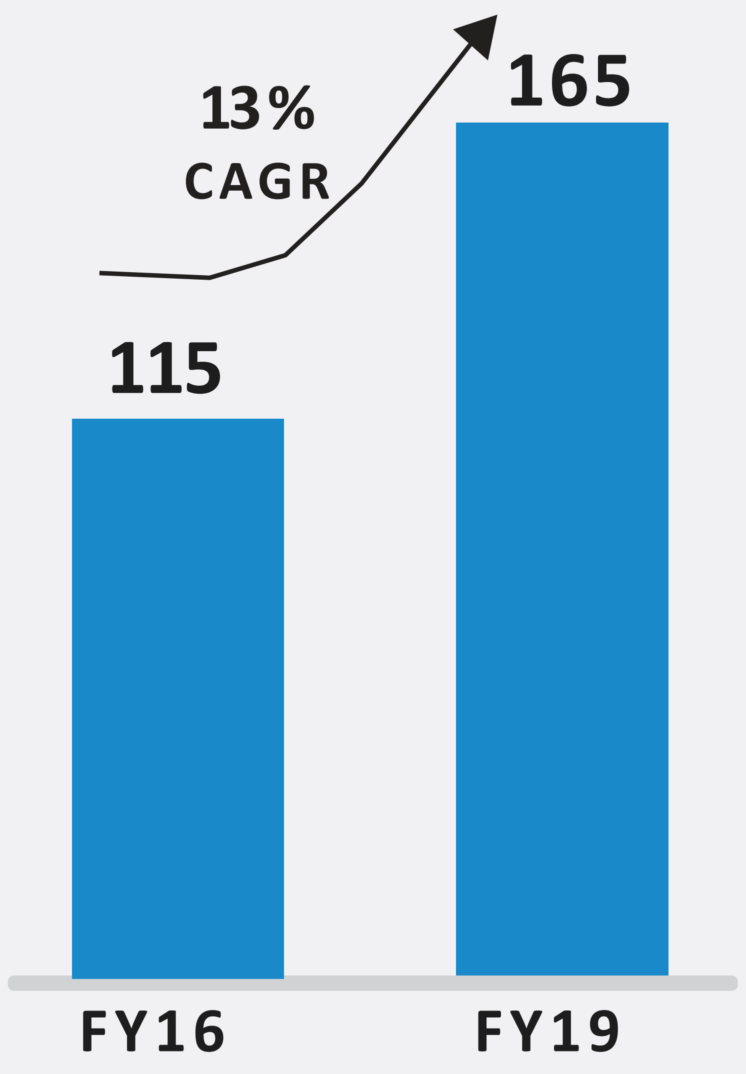
[1]Call for Action: Expanding cancer care in India dated July 2015, published by Ernst & Young; A&M Research

ONCOLOGY OPPORTUNITY: GROWING FASTER THAN MARKET

adding life to years

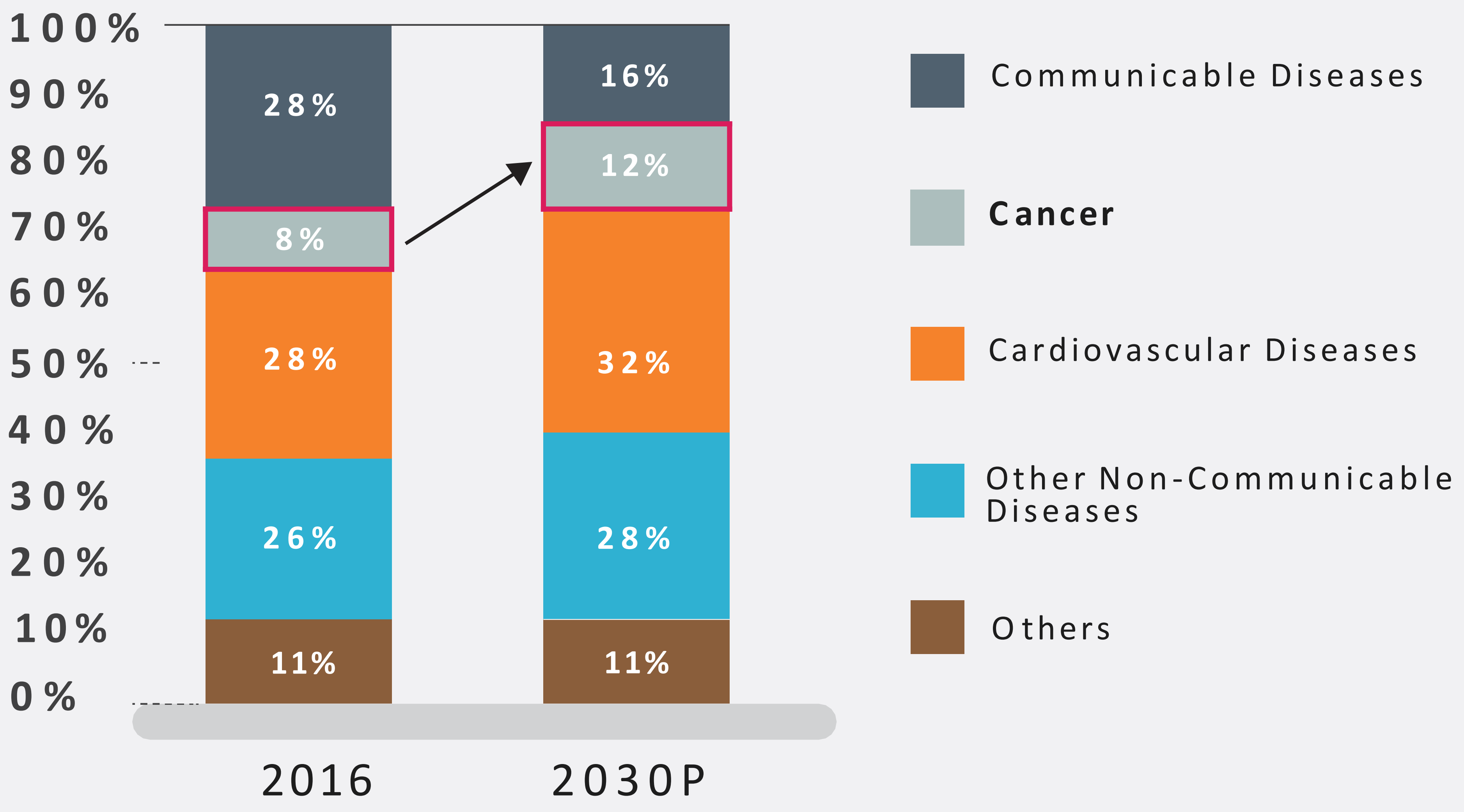
ONCOLOGY EXPECTED TO GROW FASTER THAN THE OVERALL HEALTHCARE MARKET

Cancer Care market in India (INR Bn)*



GROWTH IN ONCOLOGY MORTALITY A CAUSE FOR CONCERN & NEEDS FOCUSED INTERVENTION

Causes of Deaths in India *



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

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

HCG JOURNEY

adding life to years

1989 – Bangalore Institute of Oncology commences operations.

1998 – Company incorporated as Curie Center of Oncology.

2005 – Company's name changed to HealthCare Global Enterprises Pvt. Ltd.

2005 – Entry into clinical laboratory business through acquisition of Triesta Sciences.

2006 – Acquired the 1st privately owned comprehensive cancer center in Karnataka.

1st private cancer center in India to introduce Cyclotron.

2007 – 1st to introduce IGRT technology in North India.

2008 – 1st Comprehensive Cancer Care Center in Jharkhand.

2009 – One of the 1st centers in India to introduce CyberKnife technology. HCG Hubli, 1st center in North Karnataka to introduce IGRT Technology.

2011 – HCG Ahmedabad, 1st privately owned Comprehensive Cancer Care Center in Gujarat.

2012 – HCG Chennai, 1st Cancer Center to use revolutionary FFF Technology

2013 – HCG Cuttack, 1st Comprehensive Cancer Center in Odisha

2016 – 1st center to introduce Tomotherapy-H in India

2016 – Listed on BSE and NSE

2017 – 1st Indian Company to set up Cancer Center in Africa

2018 – HCG Kolkata to launch 1st Radixact in India

2019 – 1st CyberKnife in entire western India

2020 – 1st Digital PET CT in India

SUSTAINABLE BUSINESS MODEL IN ONCOLOGY

adding life to years

1

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

2

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

3

- **Largest team of expert Oncologists** & domain focused sub-specialists

4

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

5

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

6

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

SHANKAR, CANCER WINNER

QUALITY FOCUSED

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

LEADERSHIP ACROSS ADVANCED & PRECISION TECHNOLOGIES / SPECIALIZED PROCEDURES

HCG adding life to years

DIAGNOSTICS

TOTAL PET CTS:
17 NO.S

DIGITAL PET CT: **1 NO.S**

DIGITAL PATHOLOGY: **ACROSS NETWORK**

MOLECULAR / GENOMICS LAB: **1 NO.S**

RADIOTHERAPY

TOTAL LINACS:
30 NO.S

CYBERKNIFE: **2 NO.S**

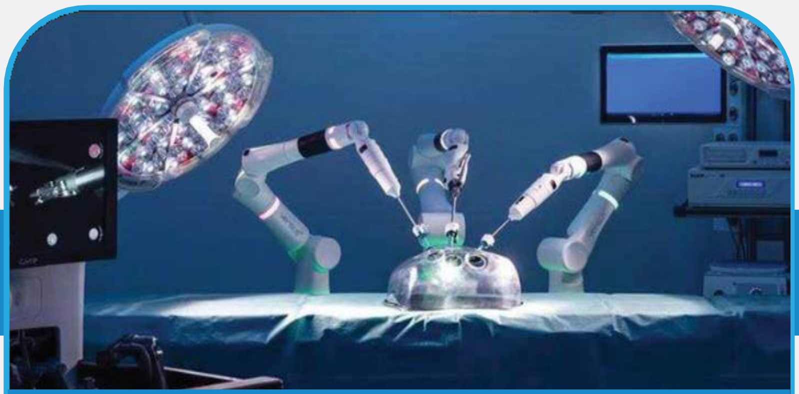
VERSAHD: **4 NO.S**

TOMOTHERAPY: **2 NO.S**

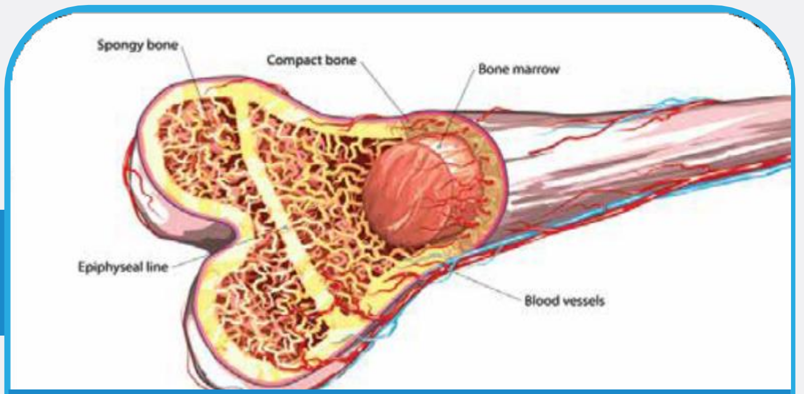
MEDICAL / SURGICAL ONCOLOGY

TOTAL ROBOTS:
3 NO.S

DAVINCI ROBOT: **2 NO.S**



VERSIUS ROBOT: **1 NO.S**



BONE MARROW TRANSPLANT UNITS: **7 NO.S**

UNIQUE ONCOLOGIST ENGAGEMENT MODEL

adding life to years

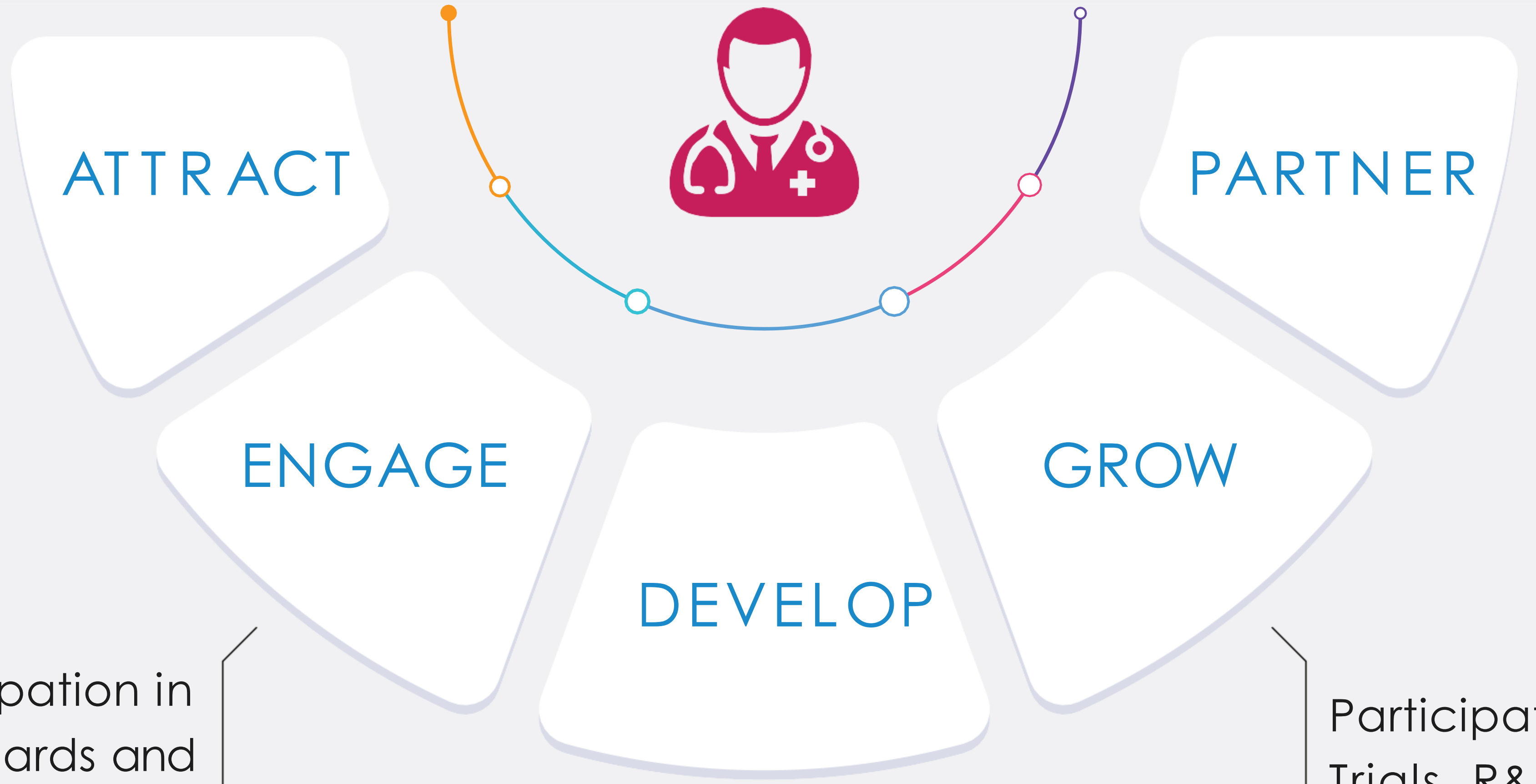
INSTITUTION-FIRST

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

LOYALTY AND SUSTAINABILITY

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

Expert clinicians become part of HCG's CCC ecosystem in oncology



Long-term collaboration models; JVs & Tie-ups

Active participation in tumor boards and advanced clinical programs

Participation in Academics, Trials, R&D; developing 2nd line of clinical talent

Build expertise in desired domain / organ specific sub-specializations

Realisation Of Oncology Vision for HCG & Clinicians

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

QUALITY, RESEARCH & ACADEMICS ECOSYSTEM

HCG
adding life to years

QUALITY & RESEARCH INITIATIVES

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

101* PUBLICATION PUBLISHED

28* CLINICAL AUDITS CONDUCTED

Innovation @ HCG

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

SELECT CLINICAL TRIALS

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

HCG ACADEMICS

Oncology

- DNB
- Fellowships
- Certificate programs

Allied health services

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

Nursing

- Diploma
- Certificate programs

155* Students Registered For Various Courses In FY 2020-21

45+* Courses Offered

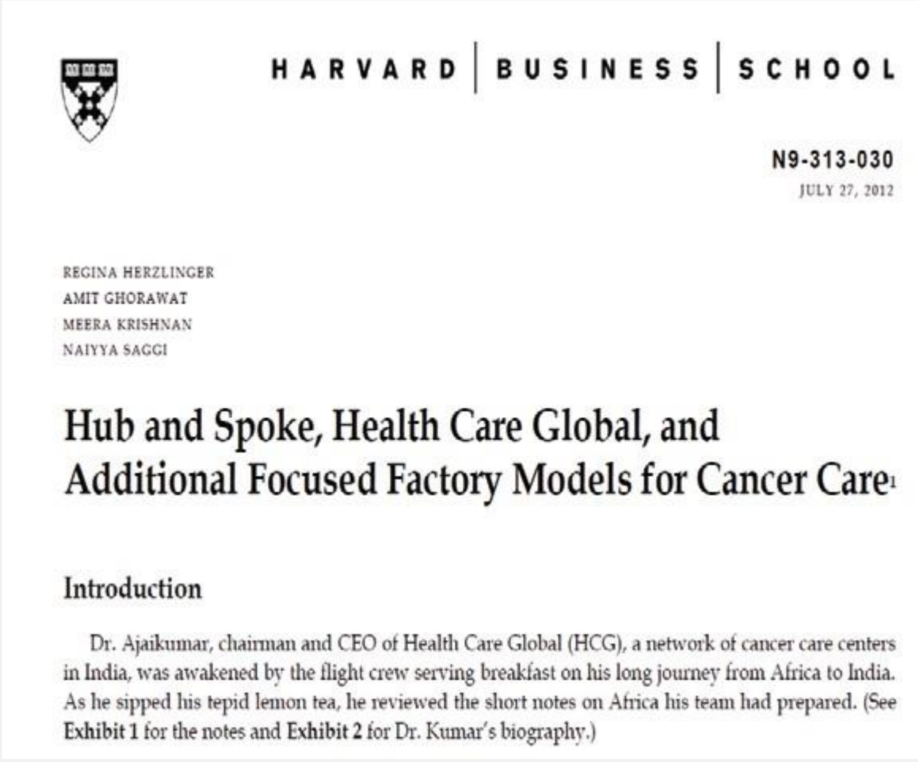
#For financial year FY21

FOCUS ON EXPERTISE & EXCELLENCE IN ONCOLOGY

HCG adding life to years

COVERAGE BY HARVARD

UNIQUE BUSINESS MODEL



HARVARD | BUSINESS | SCHOOL

N9-313-030
JULY 27, 2012

REGINA HERZLINGER
AMIT GHORAWAT
MEERA KRISHNAN
NAIYYA SAGGI

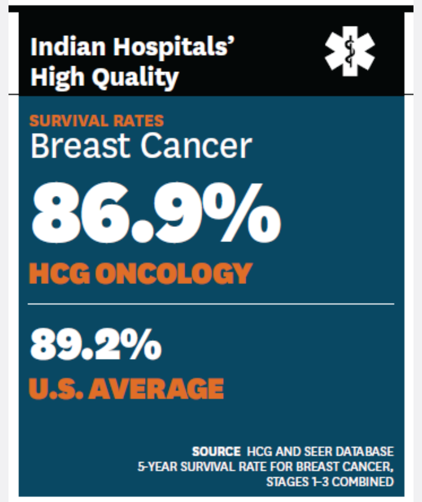
Hub and Spoke, Health Care Global, and Additional Focused Factory Models for Cancer Care[1]

Introduction

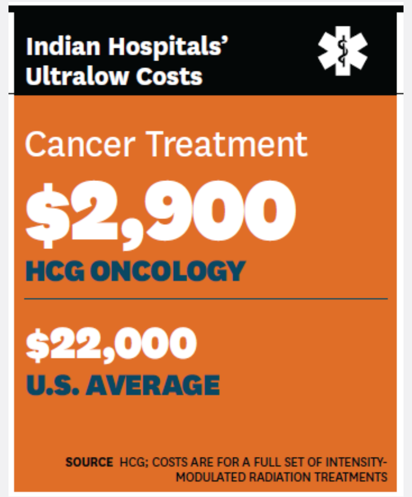
Dr. Ajaikumar, chairman and CEO of Health Care Global (HCG), a network of cancer care centers in India, was awakened by the flight crew serving breakfast on his long journey from Africa to India. As he sipped his tepid lemon tea, he reviewed the short notes on Africa his team had prepared. (See **Exhibit 1** for the notes and **Exhibit 2** for Dr. Kumar's biography.)

GLOBALLY COMPARABLE OUTCOMES

SURVIVAL RATE



COST



STUDY FINDING | seo • amsterdam economics

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

*Only for COE, Bangalore

CLINICAL MILESTONES

adding life to years

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

We introduced biological reconstruction to treat bone cancer in India.

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

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

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

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

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

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

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

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

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

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

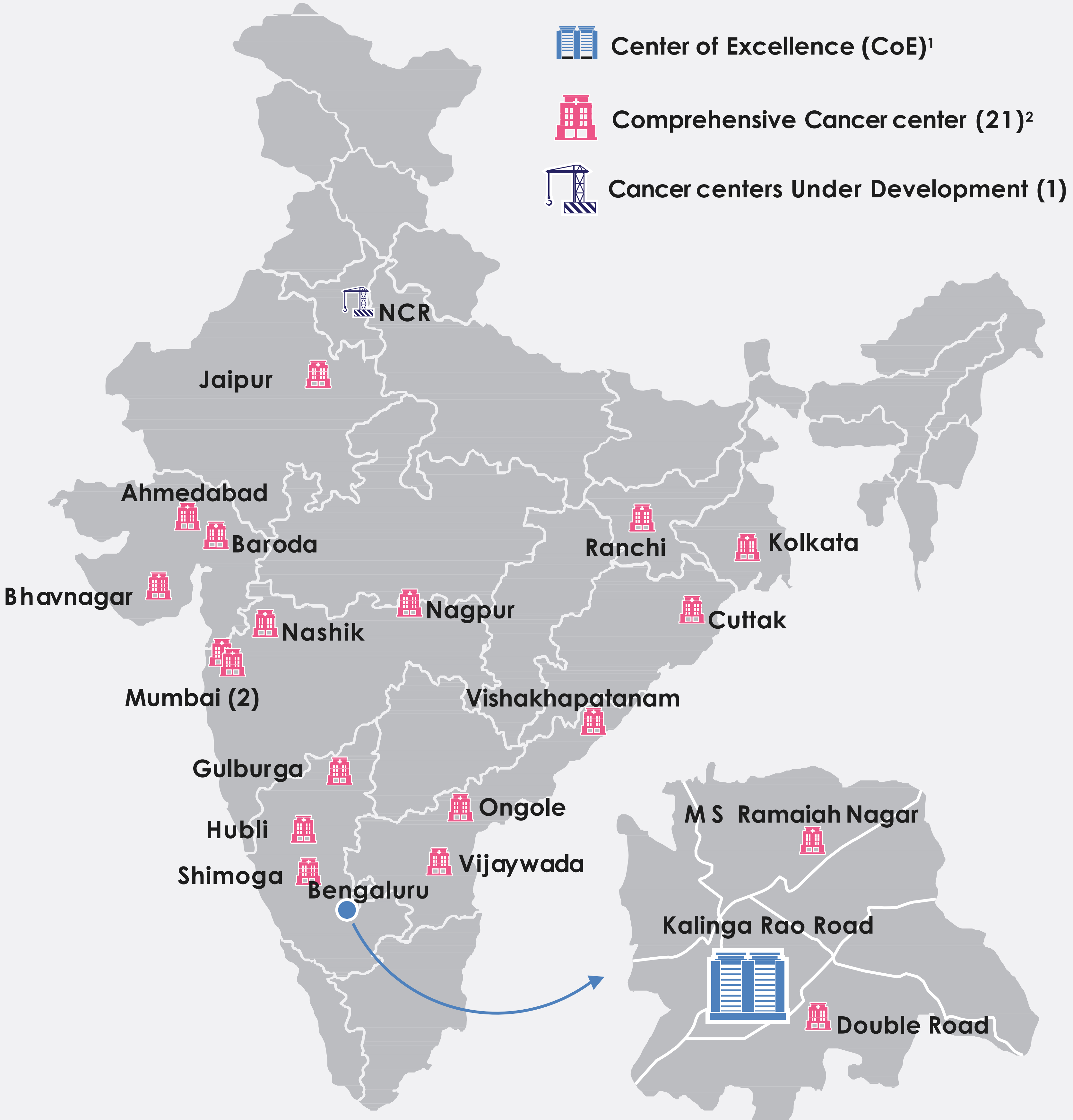
ARJUN MANDAL, CANCER WINNER

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

MARKET LEADERSHIP

INDIA'S PREMIER CANCER CARE NETWORK

adding life to years



[1] Includes 2 centers, KR & DR; [2] As on 31st March' 2021 includes COE & center in Kenya, Bhavnagar multispecialty also includes comprehensive cancer services hence included in CCC count

HCG NETWORK

- **1,926** CAPACITY BEDS
- **1,684** OPERATIONAL BEDS
- **30** LINEAR ACCELERATORS
- **17** PET-CT SCANNERS
- **300+** ONCOLOGISTS
- **65** OPERATION THEATRES

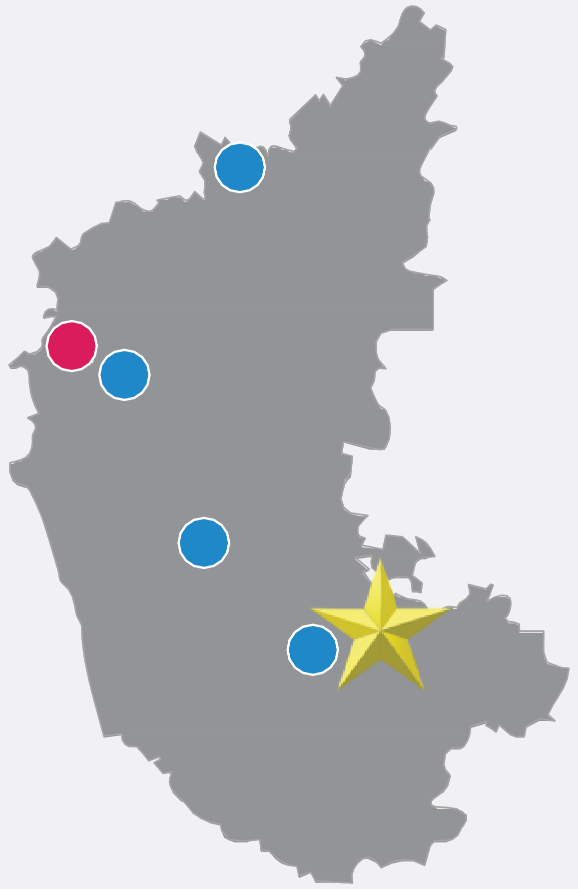
HCG ACCESS / PATIENT CATCHMENT

- **9** STATES
- **17** CITIES
- **~639mn** POPULATION (states with presence)

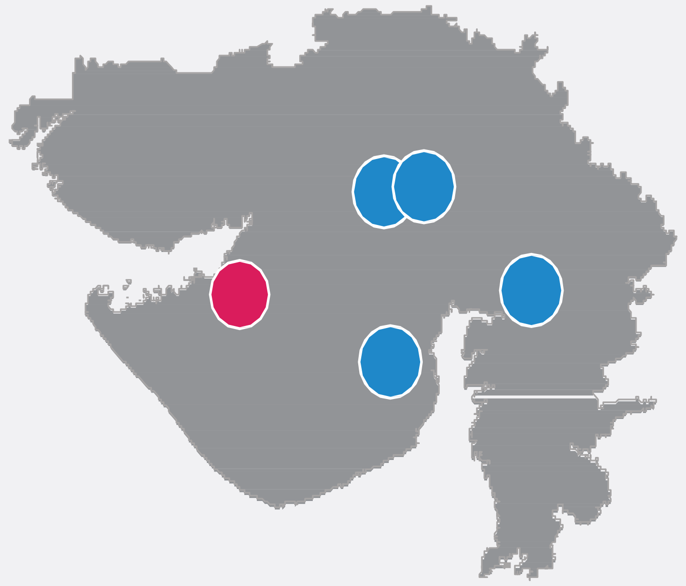
adding life to years

INDIA'S PREMIER CANCER CARE NETWORK

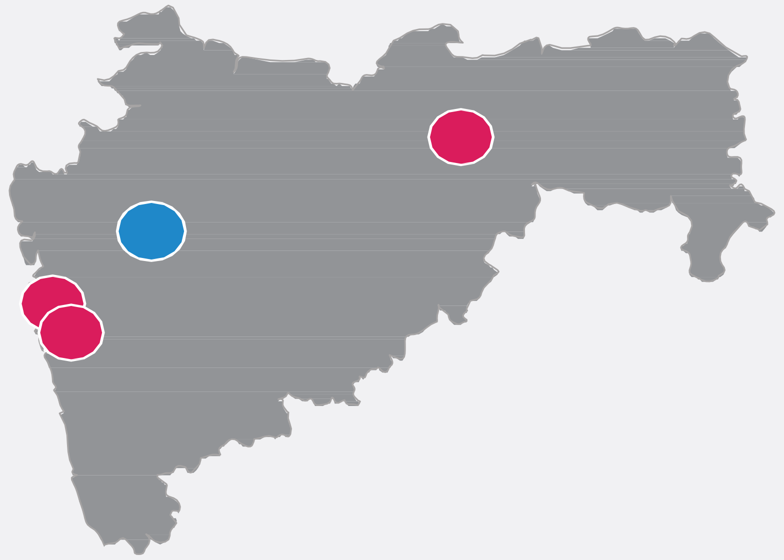
No.1 in Karnataka
7 centers; 508 beds



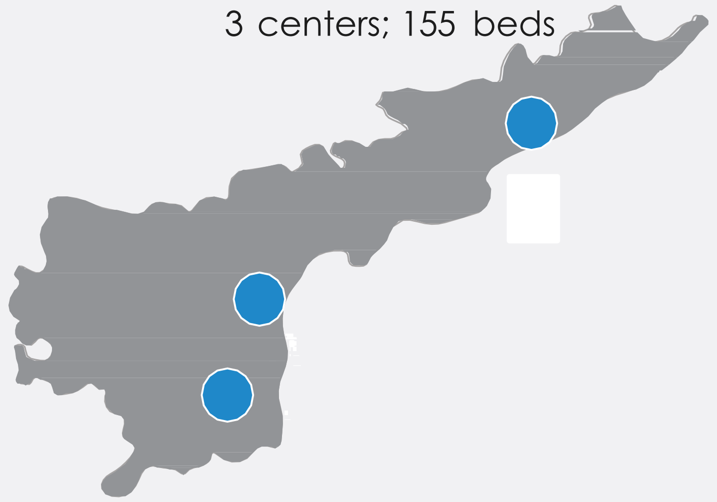
No.1 in Gujarat
5 centers; 448 beds



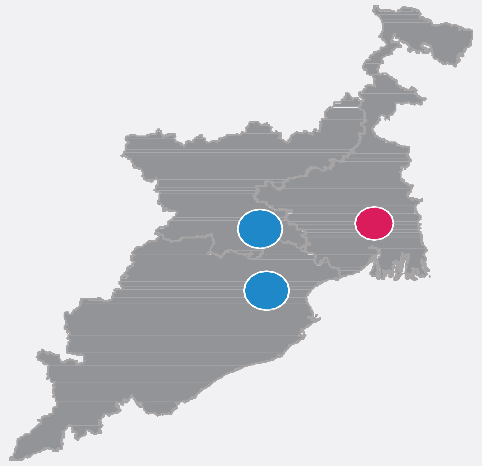
Top 3 in Maharashtra
4 centers; 468 beds



No. 1 in Andhra Pradesh
3 centers; 155 beds



No.1 in Odisha & Jharkhand
Scaling in W.Bengal
3 centers; 277 beds



Scaling in Rajasthan & NCR
2 centers; 125+ beds

New centers
Existing centers
Under Development

New centers
Existing centers

- Includes Multi-specialty beds , Existing and planned centers
- Market position for private oncology markets only (excluding trusts, government hospitals), based on management estimate

UNMATCHED PRESENCE IN NON-METRO MARKETS

adding life to years

COMPREHENSIVE CANCER CENTERS

NON-METRO CENTERS	BEDS(#)	MARKET POSITION
NASHIK	206	NO.1
NAGPUR	121	NO.1
CUTTACK	116	NO.1
BHAVNAGAR[1]	77	NO.1
VIJAYAWADA	75	NO.1
RANCHI	74	NO.1
BARODA	63	NO.1
SHIMOGA	47	NO.1
GULBARGA	43	NO.1
HUBLI	31	NO.1
ONGOLE	30	NO.1
VIZAG	50	NO.2
Total	933	
% of Total Cancer Beds	58 %	

THE 'BHARAT' OPPORTUNITY:

GAPS IN RURAL HEALTHCARE MARKET

- Over 60% of population has access to less than 30% of hospitals, beds and doctors
- Accounts for 70% communicable disease cases, and over 50% of non-communicable disease

Established high-quality infrastructure and leading technologies with relatively little organized competition in most regions

Opportunity to create leadership with growing demand from Tier II/III cities while delivering oncology care last-mile / inclusively

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

SPECIALIZATION DRIVING COMPETITIVE ADVANTAGES

PARAMETERS DRIVING EXCELLENCE IN ONCOLOGY	HCG MODEL	MULTI-SPECIALTY MODEL
1. Dedicated / Independent and 'built-to-suit' facilities	Established	Absent
2. Comprehensive/integrated oncology service offerings(end-to-end)	Established	Lacking
3. Attracting / retaining expert oncologists on exclusive/full-time basis	Established	Executing
4. Advanced technologies, sub-specialization and complex treatments	Executing	Executing
5. Genomics driven pathways, MDT (multi-disciplinary tumor boards)	Executing	Lacking
6. Oncology specific R&D, Academics and training programs	Executing	Lacking
7. Onco-focused brand recall, trust of referral network, scale benefits	Executing	Executing
8. 2+ decades legacy, treated over 1mn onco. patients & complex cases	Established	Lacking
9. Capital efficiency & sustainability (optimal scale/size, asset-light)	Established	Absent

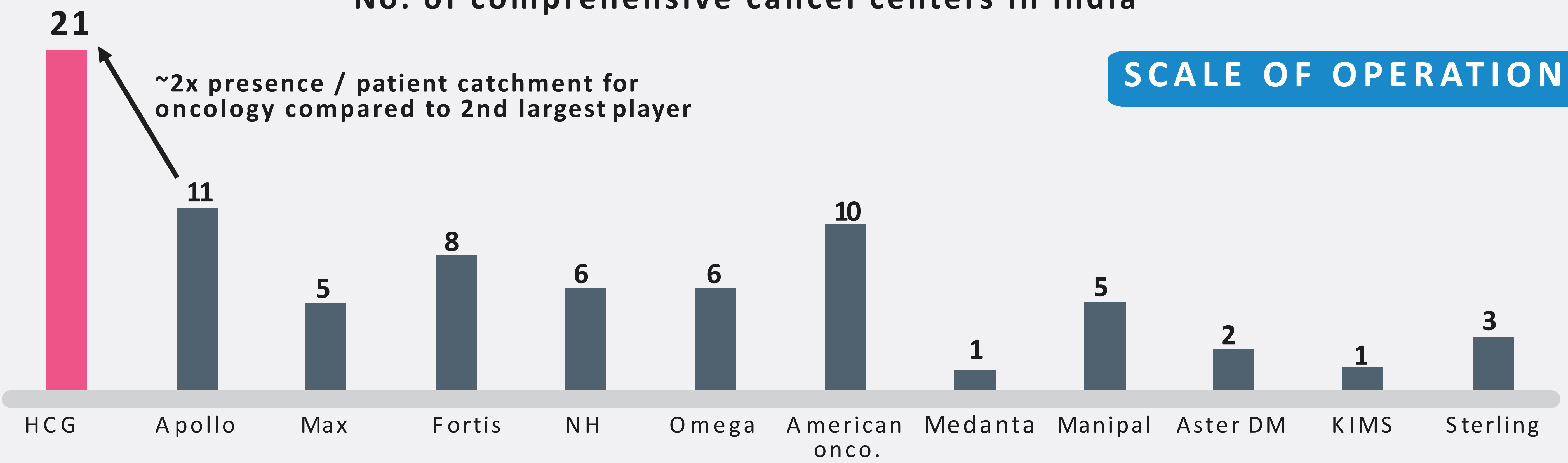
SCORE	Established (network-wide)	Executing (focused adoption)	Lacking (selective adoption)	Absent (no adoption)
HCG MODEL *(Independent cancer-only centers)*	5	4	-	-
MULTI-SPECIALITY MODEL	-	3	4	2

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

SIGNIFICANT SCALE, FOCUS & PRESENCE OVER PEERS

adding life to years

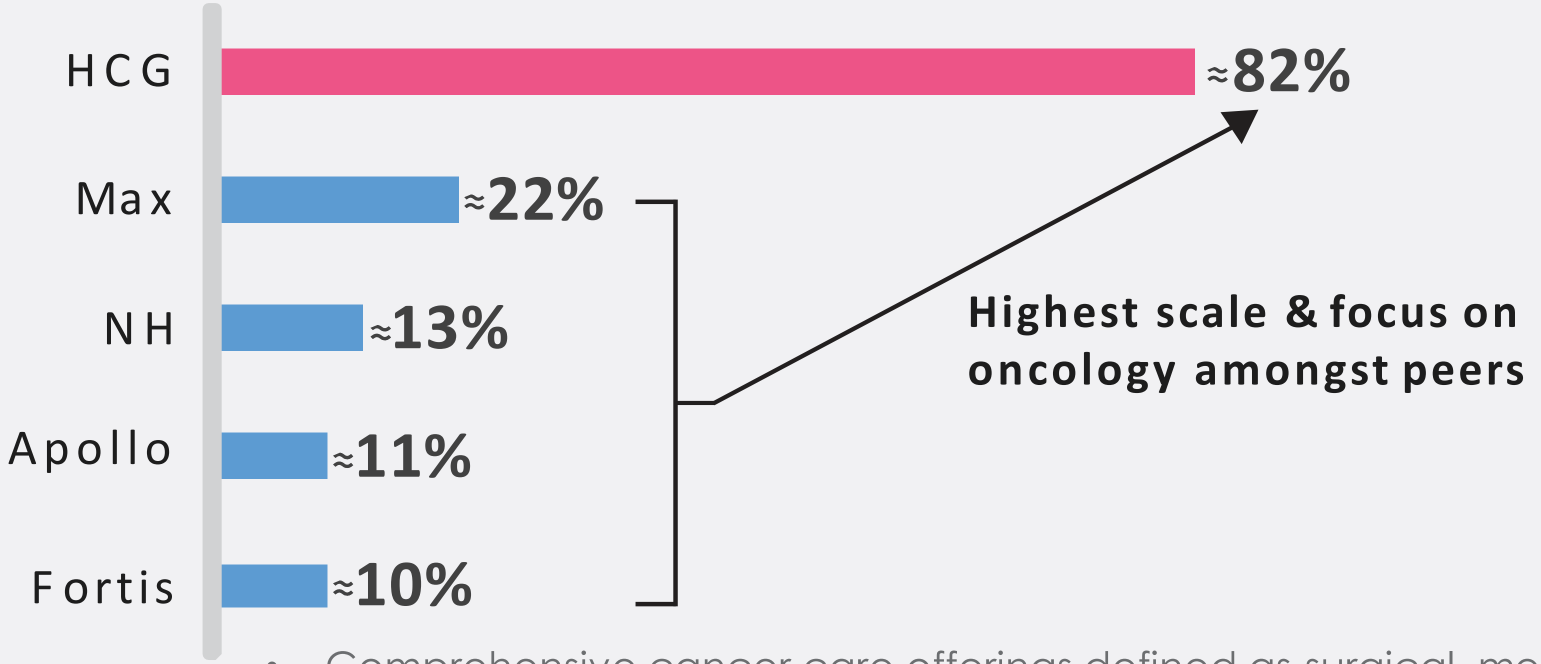
No. of comprehensive cancer centers in India



SCALE OF OPERATIONS & INFRASTRUCTURE

FOCUS OF BUSINESS

Revenue contribution from Oncology



PRESENCE / CATCHMENT WITH COMPREHENSIVE CANCER CARE OFFERINGS

9 STATES

17 CITIES

~639mn POPULATION (states with presence)

- Comprehensive cancer care offerings defined as surgical, medical and radiation oncology services onsite, accompanied by diagnosis / PET CT as well in some cases
- Market position for private oncology markets only (excluding trusts, government hospitals), based on management estimate; competitor data based on publicly available data

SUBASINI LENKA, CANCER WINNER

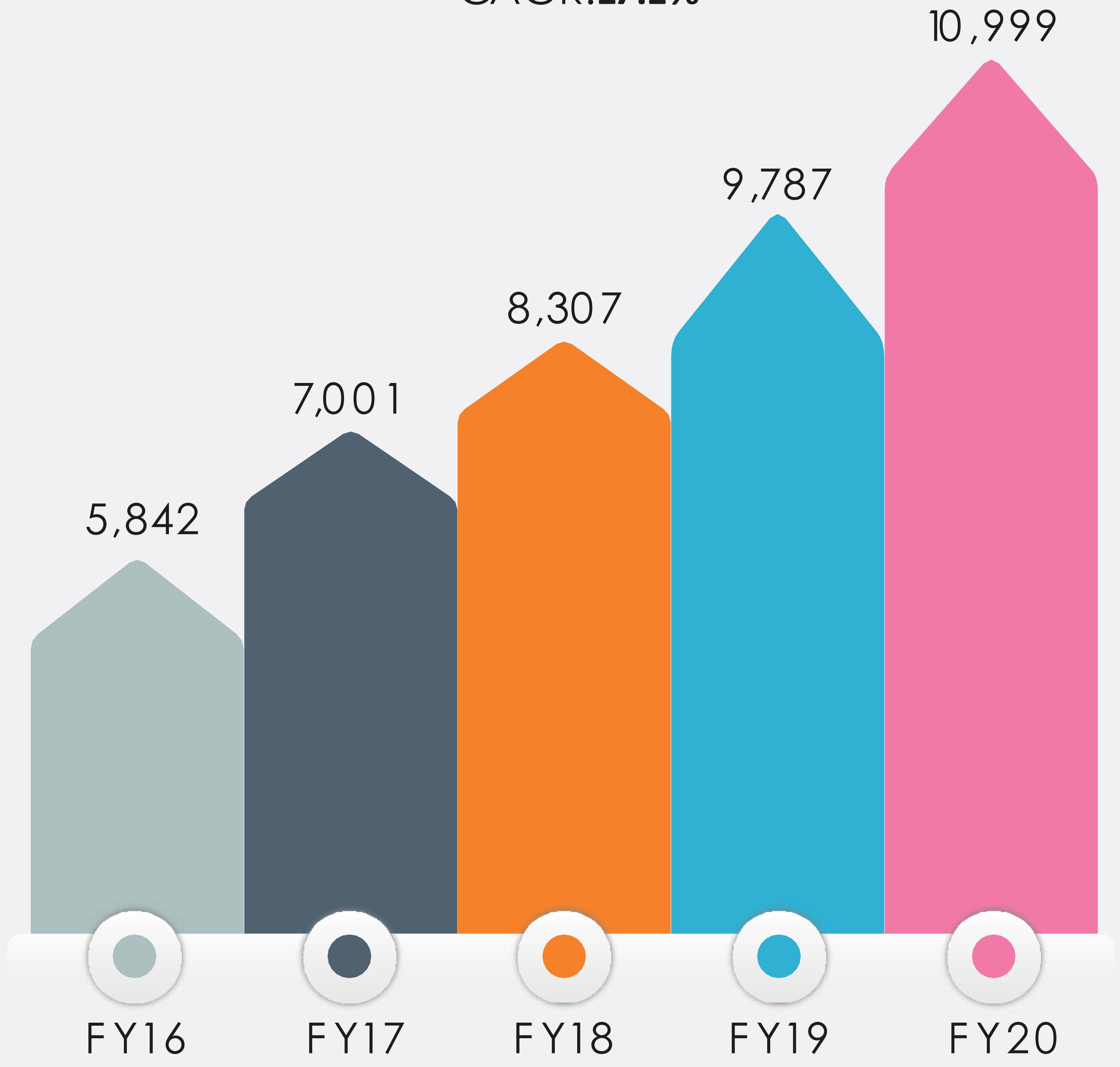
"I am eternally thankful to Dr Panda and other specialists at HCG Panda Cancer Hospital, as the specialists were able to treat my condition the right way, the first time."

SUSTAINABILITY

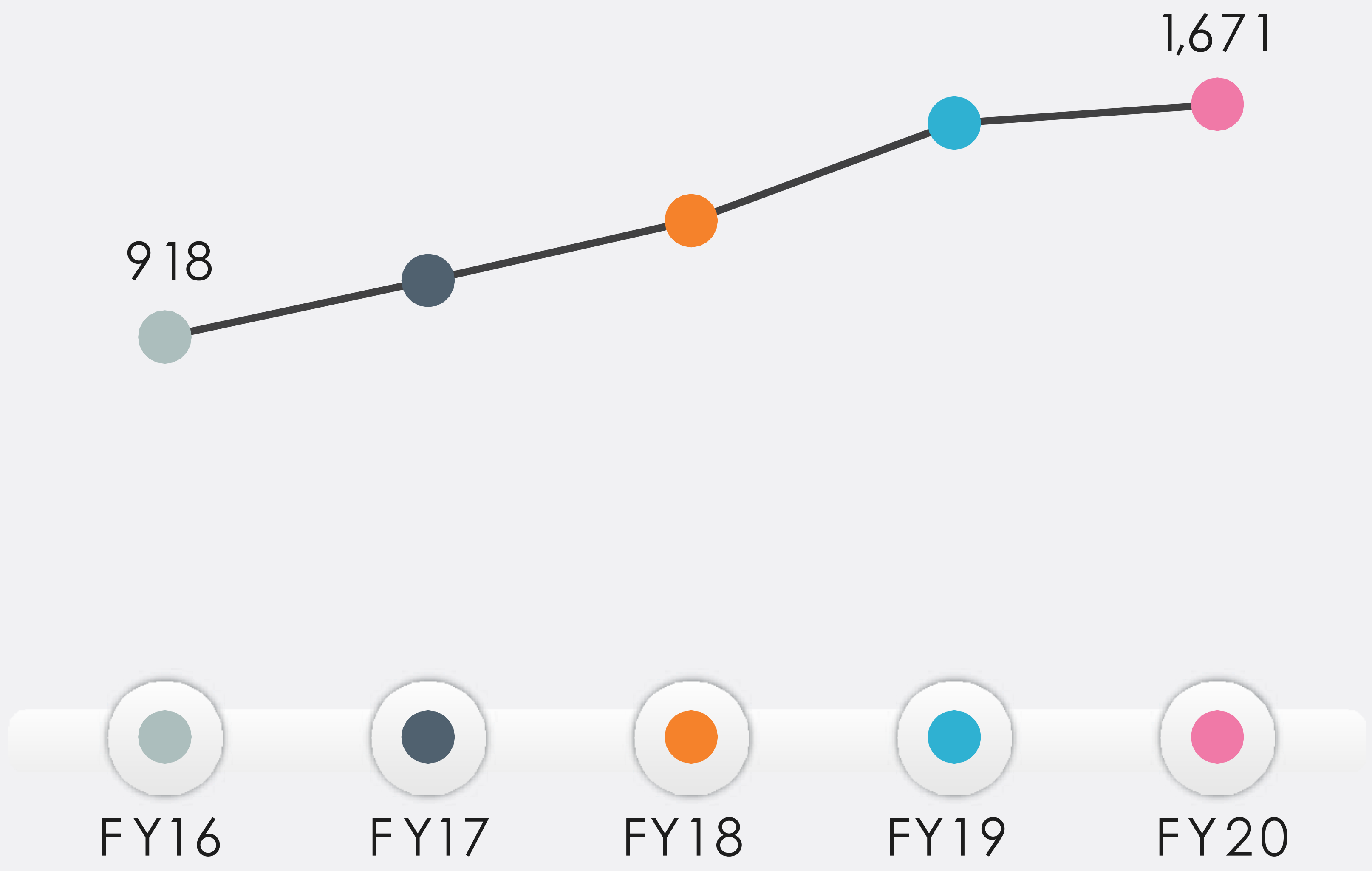
DEMONSTRATED TRACK RECORD

adding life to years

Total Revenue (INR mn)
CAGR:**17.1%**



Existing Oncology Centers
EBITDA (INR mn)
CAGR:**16.2%**



Center-level EBITDA, pre-corporate expenses; pre-IndAS adjustment

STRONG GROWTH & LEADERSHIP STRATEGY

Existing Centers

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

New Centers

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

Trusted Brand

- HCG as the destination for quality cancer in India
- Direct-to-patient promotion strategies, including investments in leveraging network & enhancing patient experience

Asset Light Growth

- Shift from equipment purchase to pay-per-use
- Explore O&M and other structures to penetrate new geographies

IP/ Digital Technology / Data

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

PROMOTERS WITH STRONG PEDIGREE

adding life to years

Dr. BS Ajaikumar
Promoter & Executive Chairman

ONCOLOGY DOMAIN KNOWLEDGE AND EXPERIENCE IN INDIA/USA

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

CVC Capital Partners
Promoter & Member of Board

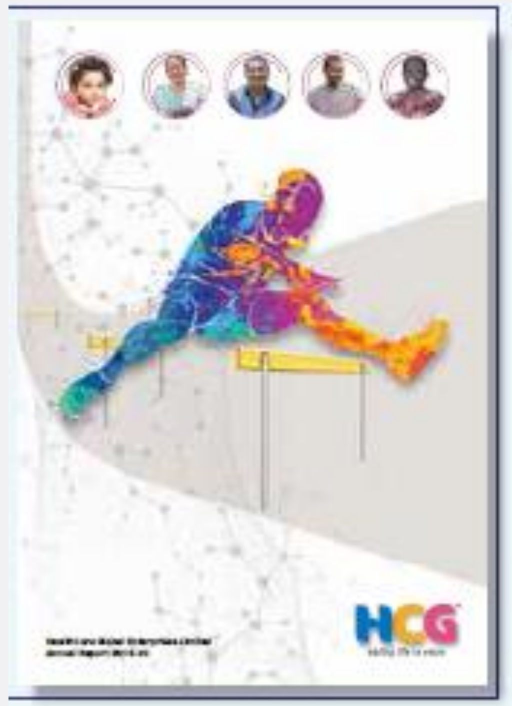
TRACK RECORD OF VALUE CREATION ACROSS INVESTMENTS

- Stakes in more than 50 companies worldwide, employing around 300,000 people and generating annual sales of over US$100bn
- 34+ yrs of proven record of Private Equity investment success
- 300+ investments since 1981 with global offices leading buyout deals
- 180+ investment professionals from over 31 nations
- USD 85bn funds committed generating compelling returns across sector, geography and cycles with a loyal & diversified investor base
- Marquee investments in healthcare services including PT Siloam (Indonesia), Afinity Health (Australia), Metropolitan Hospital (Greece), General Healthcare Group (UK)

RESPONSIBLITY & GOVERNANCE FOCUSED

SETTING ESG BENCHMARKS

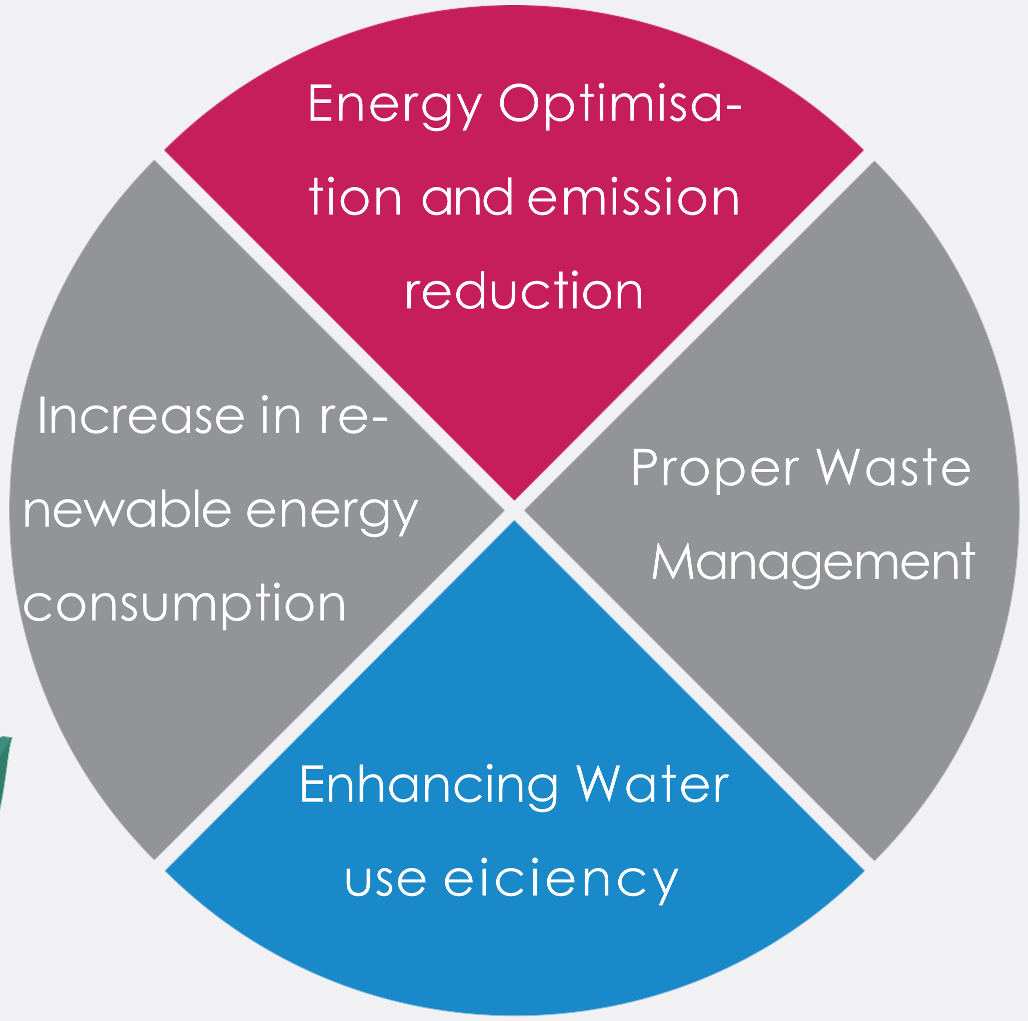
- Establishing an environmental policy
- Assessing the impact of operations on the environment
- Implementing ESG standards, laws and procedures
- Raising awareness and initiating behavioural changes
- Auditing community contributions & sustainability



Pioneer among hospitals to adopt **Integrated Reporting (IR) Framework** in FY19 with disclosures covering performance against **Financial, Manufactured, Social, Intellectual, Natural & Human Capitals** across the organization

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

1593 KVA Capacity of solar rooftop



FINANCIAL HIGHLIGHTS

FINANCIAL HIGHLIGHTS: Q1-FY22

INR million except earnings per share

Period ended Jun'21	Q1-FY22	Q1-FY21	Growth (y-o-y)
Income from Operations	**3,231**	**1,935**	**67.0%**
EBITDA[(1)] EBITDA margin (%)	**547** 16.9%	**221** 11.4%	**147.5%**
Operating EBITDA [(2)] Op. EBITDA margin (%)	**512** 15.9%	**194** 10.0%	**164.5%**
PBT [(3)] PBT margin %	**(89)** -2.8%	**(566)** -29.3%	**NM**
PAT [(4)] PAT margin %	**(96)** -3.0%	**(398)** -20.5%	**NM**
Earnings per share (EPS)	**(0.76)**	**(5.14)**	**NM**

1) Profit before depreciation/amortization, finance costs, exceptional items and taxes
2) EBITDA excluding other Income
3) Profit / (Loss) before tax and after share of profit / (loss) of equity accounted investee
4) Profit / (Loss) for the period after share of profit / (loss) of equity accounted investee, taxes and minority interests

Note: Efective 1April 2019 , the Company has adopted IND AS 116'Leases' standards, applied to lease contracts existing on 1April 2019 and all financials are as per IND AS116.
Operating EBITDA adjustment on account of IND AS 116 was INR 161.3 mn for Q1-FY22 as against INR 156.6 mn for Q1-FY21

Q1’22 Revenue grew by 67 % y-o-y

- HCG[(1)] centers: **+66 %**
- Milann centers: **+99 %**

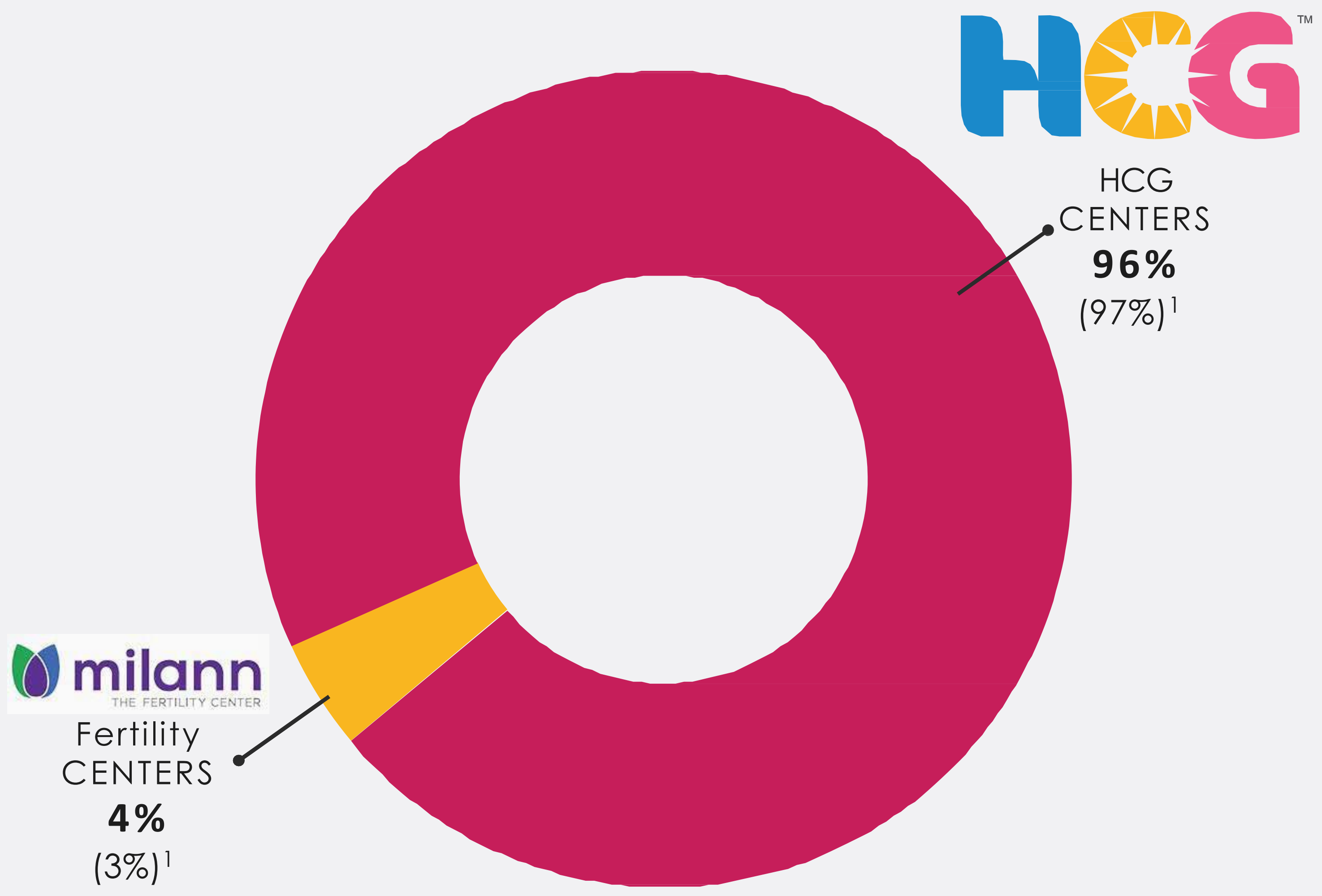
Q1’22 Operating EBITDA

- Existing centers[(2)]: INR 531 Mn (21.2% margin vs 15.8% margin in Q1-FY21)
- New centers[(2)(3)]: Loss of INR (19) Mn (vs. loss of INR (61) Mn in Q1-FY21)

1) 22 comprehensive cancer centers, 3 multispecialty hospitals and 1 multispecialty hospital managed by HCG
2) Corporate cost allocated between existing and new centers in proportion to gross block
3) 8 HCG centers and 3 Milann centers that commenced operation after April 1, 2017

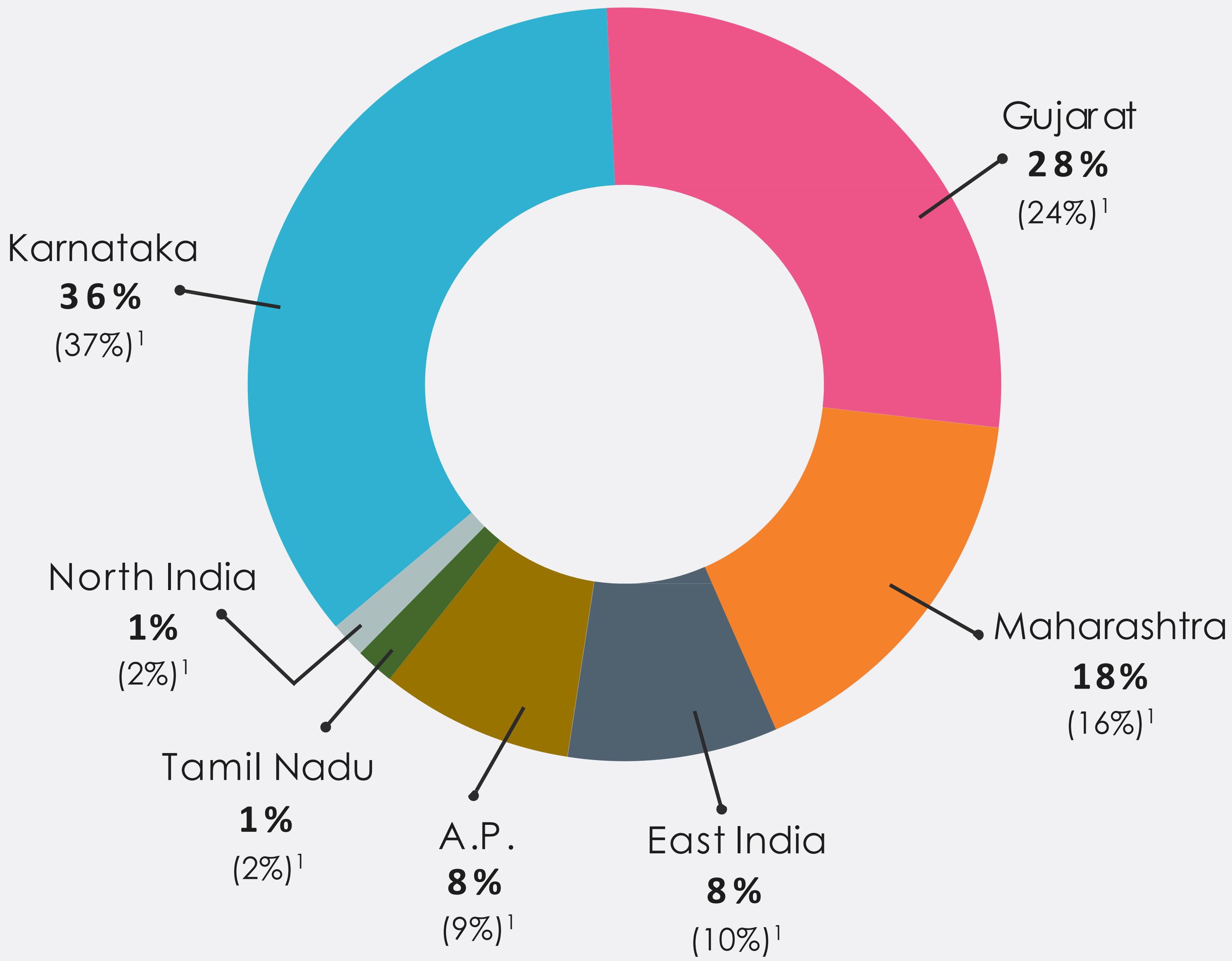
REVENUE MIX: Q1-FY22

Revenue:
INR 3,231 Mn



- 22 comprehensive cancer centers, 3 multispecialty hospitals and 1 multispecialty hospital managed by HCG
- 7 fertility centers operated under "Milann" brand

HCG Centers:
INR 3,110 Mn



[1]Q1-FY21

HCG CENTERS: Q1- FY22 REVENUES

INR million

Period ended Jun'21	Q1-FY22	Q1-FY21	Growth (y-o-y)
Karnataka	1,111	696	59.5%
Gujarat	869	460	88.9%
Maharashtra	547	308	77.5%
East India	252	187	34.7%
Andhra Pradesh	242	160	51.0%
Tamil Nadu	42	33	28.6%
North India	48	29	63.5%
	3,110	1,874	66.0%

- **Strong growth in revenue continues across centers in Q1-FY22**
  - South Mumbai +231.5% y-o-y
  - Nagpur: +129.9% y-o-y
  - Hubli: +87.6% y-o-y
  - Vizag: +71.0% y-o-y
- **Revenue from New Centers** of INR 693 Mn in Q1-FY22 vs 309 Mn in Q1-FY21, a growth of 124.4% (y-o-y)
- **Existing Centers Revenue Growth** of +54.5% in Q1-FY22 (y-o-y)

HCG CENTERS: Q1-FY22 OPERATING METRICS

No. of centers[1]
Q1FY22: 25
Q1FY21: 25

Beds[2]
Q1FY22: 1,684
Q1FY21: 1,754

Avg. Occupancy Rate (AOR)[2]
Q1FY22: 55.8%
Q1FY21: 38.2%
17.6%

ALOS (days)
Q1FY22: 2.52
Q1FY21: 2.15
37 bps

ARPOB (INR / Day)
Q1FY22: 37,644
Q1FY21: 31,270
20.4%

Revenue (INR Mn)
Q1FY22: 3,110
Q1FY21: 1,874
66%

Operating EBITDA margin
Q1FY22: 19.7%
Q1FY21: 15.5%
418 bps

Increase in Avg. Occupancy Rate in Q1-FY22 (y-o-y)

- 55.8% vs 38.2% (Consolidated)
- 60.3% vs 42.6% (Existing centers)

Increase in Existing center ARPOB in Q1-FY22 (y-o-y)

- INR 35,423 vs INR 30,304, 16.9% y-o-y growth

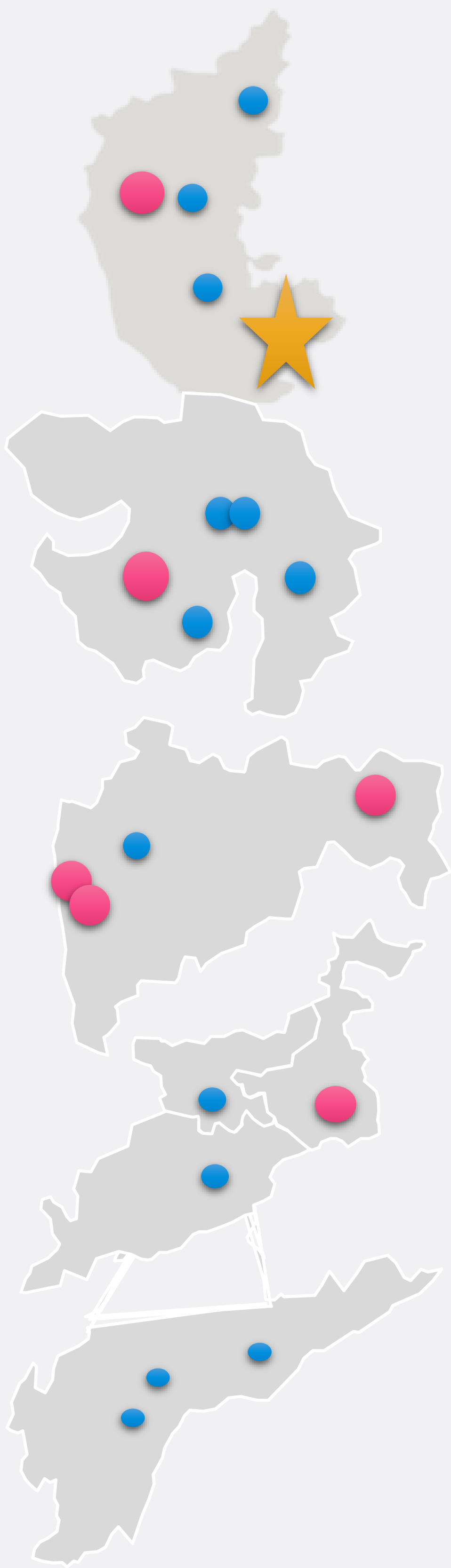
- **Existing centers operating EBITDA margin increased by 418 bps to 19.7% in Q1-FY22 from 15.5% in Q1-FY21**

Notes:

1) *No. of Centers includes Cancer and Multispecialty hospitals operated under HCG brand and managed by HCG*
2) *Number of operational beds as at the last day of the period. Q1'21 is recast as organization has transitioned reporting metrics from capacity beds to operational beds basis*
3) *Occupied Bed Days calculated based on mid-day census*
4) *Average Occupancy Rate ("AOR") calculated as Occupied Bed Days divided by operational bed days in the period*
5) *Average Revenue per Occupied Bed ("ARPOB") calculated as Revenue (gross for the hospital) divided by Occupied Bed Days*
6) *Average Length of Stay ("ALOS") calculated as Occupied Bed Days divided by number of admissions (including day care admissions)*
7) *Operating EBITDA margin before corporate expenses*

HCG CENTERS: Q1 - FY22 REGIONAL HIGHLIGHTS

adding life to years



Centers	Beds	AOR	ARPOB/Day	Revenue (INR Mn)	Operating EBITDA%
Karnataka (y-o-y)	508	64.7% ↑ 35.6%	39.3 K ↑ 18.9%	1,111 ↑ 59.5%	18.8%
Gujarat (y-o-y)	393	60.6% ↑ 84.7%	39.8 K ↑ 1.6%	869 ↑ 88.9%	25.3%
Maharashtra (y-o-y)	319	60.6% ↑ 41.3%	33.6 K ↑ 20.1%	547 ↑ 77.5%	14.7%
East India (y-o-y)	239	45.5% ↑ 15.2%	24.7 K ↑ 13.1%	252 ↑ 34.7%	9.9%
Andhra Pradesh (y-o-y)	167	48.0% ↑ 8.0%	31.6 K ↑ 32.8%	242 ↑ 51.0%	27.1%

- COE performance in Q1-FY22
  - Revenue growth 52.3% y-o-y
  - ARPOB of INR 50k vs 44K (Q1-FY21)
  - 21.1% operating EBITDA margin

- Strong revenue growth in the Q1-FY22 on y-o-y basis:
  - Oncology revenue grew by 59.9%
  - Multispecialty revenue grew by 168.5%
- COVID treatment contributed 22.0% for the region

- Revenue momentum across all centers in the region:
  - 15.2% q-o-q
  - 77.5% y-o-y
- New centers grew by 109.6 % y-o-y & 11.0 % q-o-q

- Existing center revenue grew by 24.4% y-o-y
- Expansion of revenue at new center by 89.2% y-o-y
- Focus on improving corporate and TPA mix

- Strong revenue growth across the region
- Vizag delivered revenue growth of 71.0% y-o-y
- Focus on improving revenue mix through reduction of scheme business

1. Growth numbers are year-on-year basis
2. Change in AOR:Increase/(Decrease) in Occupied Bed Days
3. EBITDA before corporate expenses
4. Beds are Operational Beds
5. ARPOB is excluding COVID Vaccination Revenue

New centers
Existing centers

Note: Efective 1April 2019 , the Company has adopted IND AS 116'Leases' standards, applied to lease contracts existing on 1 April 2019 and all financials are as per IND AS 116.

MILANN: IMPLPEMENTING STRATEGIC INITIATIVES

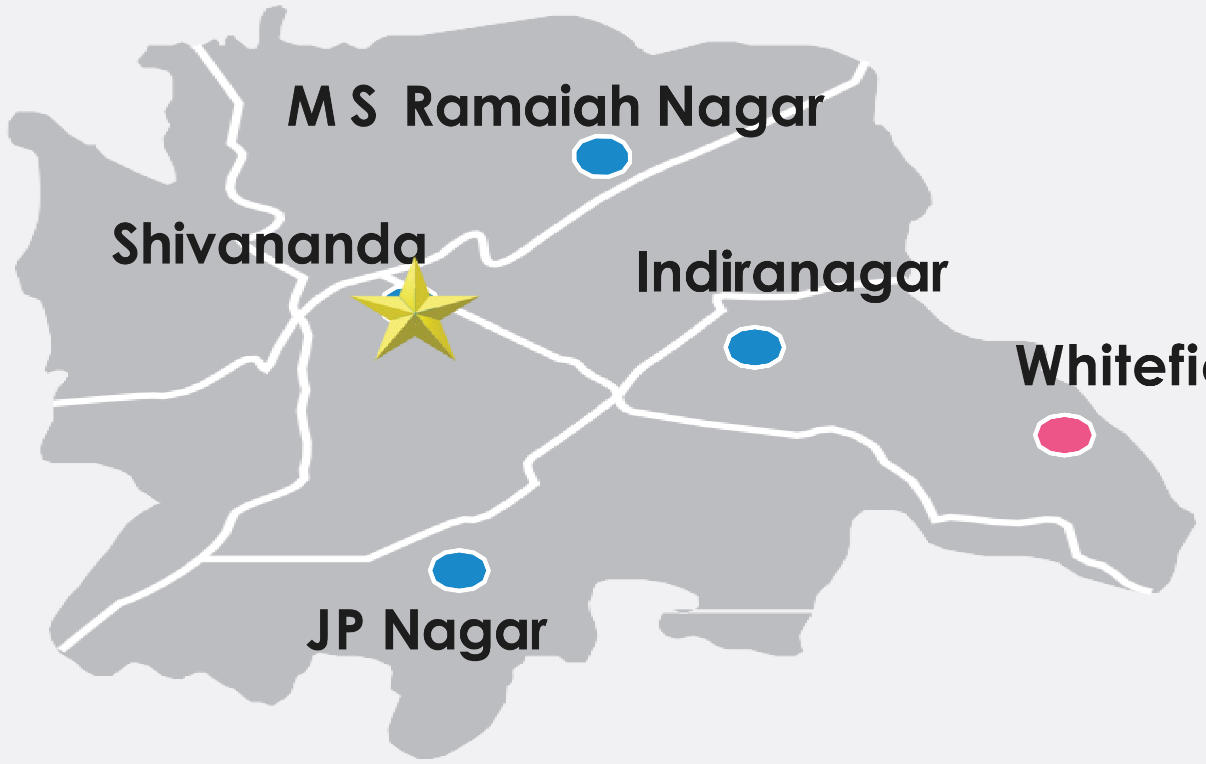
Period ended Jun'21	Q1-FY22	Q1-FY21	Growth (y-o-y)
New Registrations	676	386	75.1%
IVF Cycles	311	144	116.0%
Revenues (INR mn)	121	61	99.2%

Good recovery demonstrated in Q1-FY22 across all metrics

- New centers Revenue grew by 215.2% y-o-y
- Improved digital traction as a result of continued effort on digital campaigns
- Continuous focus on strengthening clinical talent

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

Bengaluru (5 centers)



North India(2 centers)

- Existing centers[1]
- New centers

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

CAPITAL EXPENDITURE & NET DEBT

INR million

CAPITAL EXPENDITURE

	Q1-FY22	FY21
HCG Centers		
Existing Centers	37	97
Expansions	0	114
New Centers	14	140
	51	350
Milann Centers		
Existing Centers	0	4
Expansions	0	0
New Centers	0	0
	0	4
TOTAL CAPEX	51	354

NET DEBT

	30 Jun' 21	31 Mar'21
Net Debt		
Bank Debt [1]	4,229	3,954
Vendor Finance[2]	401	453
Other debt	31	57
Less:Cash & Equivalents[3]	(1,723)	(1,582)
TOTAL NET DEBT	2,937	2,882
Capital Leases: IndAS116[4]	4,980	5,058
Debt in New Centers		
Bank Debt	2,227	2,054
Vendor Finance	78	164
	2,305	2,218
Net Debt (excluding New centers & Leases)	632	664

1) Net of Bank balance held as margin money of INR 244 Mn and investment in fixed deposits of INR 33 Mn as of 30th June-21, margin money of INR 245 Mn and investment in fixed deposits of INR 33 Mn as on 31st Mar-21. The unamortized portion of processing fees amounting to INR 36 Mn as of 30th June-21 & INR 38 Mn as on 31st Mar-21 netted off against Bank Debt
2) Vendor Finance; Includes Forex reinstatement of INR 20 Mn as of 30th June-21 and INR 12 Mn as on 31st Mar-21 on account of exchange rate fluctuation
3) Cash and cash equivalents : Includes investment in mutual funds of INR 16 Mn as on 30th June-21 and INR 15 Mn as at 31st Mar-21
4) Includes pre IndAS 116 Capital Leases of INR 555 Mn as at 30th June-21 and INR 555 Mn as at 31st Mar-21

OTHER DETAILS

BEDS BREAK-UP* (REGION-WISE)

Period ended Jun'21	Historical	Capacity	Operational
Karnataka	615	508	508
Gujarat	508	448	393
Maharashtra	403	468	319
East India	288	277	239
Andhra Pradesh	177	155	155
Tamil Nadu	-	5	5
North India	45	65	65
	2,036	1,926	1,684

Existing centers – HCG KR Road, HCG DR, HCG MSR, HCG Hubli, HCG Gulbarga, HCG MHIO Shimoga, HCC Ahmedabad, HMS Ahmedabad, HCG Bhavnagar, HCG Baroda, HCG Nashik, HCG Chennai, HCG Vijayawada, HCG Ongole, HCG Vizag, HCG Cuttack, HCG Ranchi

New centers – HCG Suchirayu, HCG Rajkot, HCG Borivali, HCG Nagpur, HCG Jaipur, HCG Kolkata, HCG South Mumbai, HCG Africa

** Number of operational beds as at the last day of the period. Organization has transitioned reporting metrics from capacity beds to operational beds basis*

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

THANK YOU