

Max Healthcare Institute Limited

October 03, 2024

| Facilities/Instruments | Amount (₹ crore) | Rating ¹ | Rating Action |
|----------------------------|------------------|---------------------|---------------------------------|
| Long-term bank facilities | 371.01 | CARE AA+; Stable | Upgraded from CARE AA; Positive |
| Short-term bank facilities | 80.00 | CARE A1+ | Reaffirmed |

Details of instruments/facilities in Annexure-1.

Rationale and key rating drivers

CARE Ratings Limited (CARE Ratings) has upgraded the long-term rating assigned to bank facilities of Max Healthcare Institute Limited (MHIL) from 'CARE AA; Positive to CARE AA+; Stable' while reaffirming the short-term rating at 'CARE A1+'. Revision in rating factors in sustained improvement in operational and financial performance of MHIL (flagship entity) and improvement in all its subsidiaries, silos and Partner Healthcare Facilities (PHF's). Improvement in financial risk profile was driven by healthy cash generation at max network level, which was contributed by growth in each entity. On a consolidated basis, network revenue grew by 16% in FY24 (refers to April 01 to March 31) and ~19% in Q1FY25 (refers to April 01 to June 30) driven by higher inpatient volumes, changes in specialty mix towards higher value specialties leading to better average revenue per occupied bed (ARPOB, reported at ₹75,800 in FY24 against ₹67,400 in FY23). MHIL has industry leading occupancy levels, which stood at 74.5% in fiscal 2024 against 76.4% in FY23 driven by improvement in in-patient volumes. Improvement in revenues and consequent benefits of operating leverage, resulted in healthy operating margin which stood at 26.87% for MHC network FY24 against 27.05% in FY23 (MHIL consolidated stood at 28.23% in FY24 against 27.19% in FY23).

In the first quarter of fiscal 2025, consolidated revenue witnessed an improvement of 20% year-on-year driven by improvement in inpatient volumes owing to bed expansion, improvement in ARPOB, sustenance of occupancy levels on y-o-y basis.

The rating upgrade further factored in strong capital structure, healthy debt protection metrics and liquidity of MHIL and its PHF's. Net leverage at Q1FY25 end with net adjusted debt (including CG backed debt and leases) to profit before interest, lease rentals, depreciation, and taxation (PBILDT) stood at 0.53x despite two acquisitions done by MHIL in Lucknow with 550 beds and Nagpur with 200 beds for aggregate value of ₹1,405 crore funded through internal accruals and partially with long term debt of ₹600 crores. CARE Ratings notes that MHIL also announced stake acquisition in Jaypee Healthcare Limited at enterprise value of ₹1,660 crore, which would lead to debt addition of ₹1,000 crore to network level being backed by MHIL's corporate guarantee.

Net leverage is expected to stay below 1.5x going forward despite MHIL has continuous plans to grow organically/inorganically both over medium term. Ramp up from these newly acquired hospitals and newly commissioned beds at Dwarka facility and other beds additions which are underway will contribute to the company's overall improvement in operational efficiencies going forward, considering increased ARPOBs, occupancy rates and higher proportion of superior surgical mix. At a consolidated and network level, MHIL's revenue is expected to grow by 20-25% in FY25 supported by bed additions, sustenance of occupancy levels at overall level and improvement in ARPOB due to change in case mix. Operating profitability is expected to sustain at 27-28% despite lower profitability initially in newly acquired hospitals, although pre-operative expenses towards bed additions at existing hospitals and commencement of the hospital at Dwarka might partly constrain the profitability.

Ratings continue to derive strength from the company's established position in the healthcare sector across key market regions including Delhi-NCR, Mumbai, and Lucknow among others, diversification across specialties, experienced team of doctors, and the significant brand equity of 'Max Healthcare'.

However, rating strengths remained partially constrained by the company's exposure to the regulated healthcare industry, concentration risk as 75% bed capacity of Max network is in metro cities and more specifically in Delhi-NCR. However, the company is taking efforts to de-risk this through establishing presence/acquisitions in other locations such as Lucknow, Nagpur, and Mohali among others. Ratings also remained constrained by the intense competition from other established hospital brands. CARE Ratings also take note of significant expansion plans to double up the capacity over next five years through organic and inorganic route which will be largely funded by its internal accruals. However, the impact of debt-based acquisitions on MHIL's credit profile will remain a key monitorable going forward.

Rating sensitivities: Factors likely to lead to rating actions

Positive factors

- Increased diversification across centres, geographies, or business segments leading to overall growth in topline without impact on its profitability margins and sustenance of net leverage levels.

Negative factors

- Declining PBILTD profitability below 20% on a sustained basis.
- Government regulations adversely impacting the group's operational efficiencies.
- Significant debt-funded capex such that net adjusted debt (including CG backed debt, group exposure and leases) to PBILDT increases above 1.8x on a sustained basis.

¹Complete definition of ratings assigned are available at www.careedge.in and other CARE Ratings Limited's publications.

Analytical approach: Consolidated

CARE Ratings also analyse and factors in the linkages and support with/to other partner healthcare facilities (PHFs) as there is strong operational and financial linkages among all entities/societies operating under the network as MHIL and its subsidiaries have given loans and loans and advances and issued unconditional and irrevocable corporate guarantee to these PHFs and subsidiaries. Analysis also factors in the debt for which CG will be issued by MHIL for Jaypee Healthcare Limited (JHL). List of entities consolidated given in Annexure-6.

Factoring in support to and cash flow fungibility with below PHFs:

| S. No. | Name of entity | Relation with MHIL |
|--------|---|---------------------------------|
| 1. | Gujarmal Modi Hospital & Research Centre | Trust- Master Service Agreement |
| 2. | Devki Devi Foundation | Trust- Master Service Agreement |
| 3. | Balaji Medical & Diagnostics Research Centre | Trust- Master Service Agreement |
| 4. | Vikrant Children's Foundation & Research Centre | Trust- Master Service Agreement |
| 5. | Nirogi Charitable & Medical Research Trust | Trust- Master Service Agreement |

Outlook: Stable

'Stable' Outlook reflects CARE Rating's expectation that Max group will continue to benefit from its brand equity, improving ARPOBs, steady occupancy levels and ramp up from new hospitals which will reflect through the sustained improvement in operational and financial parameters of the group. CARE Ratings also believes that the group will sustain its debt metrics at comfortable level going forward also, while pursuing the organic and inorganic growth.

Detailed description of key rating drivers:

Key strengths

Sound operational efficiencies boosting profitability margins

With MHIL's hospital portfolio being matured in the last few years, the group has been demonstrating sustained improvement in its operational parameters as indicated by growing ARPOBs, sustained healthy occupancy rates, average length of stay (ALOS), and inpatient-outpatient registrations among others. MHIL demonstrated superior execution across its hospitals, Max Lab, and Max Home segments, supported by a growing number of patients and improved realisations. Its presence in premium markets, mainly, Delhi-NCR, Mumbai and now Lucknow and Nagpur, and its superior case mix leads to a higher ARPOB when compared to its industry peers. Occupancy rates are also industry leading and stood steady ~74.5% in FY24 compared to 76.4% in FY23, while ARPOB reported a significant uptick of over 12% in FY24 to ₹75,800 (PY: ₹67,400), which was mainly driven by price revisions, increased traction from international medical tourism, improved share of oncology, high end and increased robotic surgeries and increased OPD footfalls among others.

At a consolidated level, MHIL has been demonstrating healthy revenue growth over past five years continued through FY24 with a strong revenue growth of 19.17% to ₹5,437 crore as compared to ₹4,562.60 crore in FY23.

Max Healthcare network (MHC Network, MHIL including all its subsidiaries, MHFs and PHFs) recorded total operating income (TOI) and earnings before interest, taxation, depreciation, and amortisation (EBIDTA) of ₹6,849 crore and ₹1,840 crore in FY24 as against ₹5,904 crore and ₹1,597 crore in FY23, respectively. Further, TOI at network level in Q1FY24 stood at ₹1,935 crore compared to ₹1629 crore in Q1FY24 registering a growth of 18.78% y-o-y with PBILDT of ₹479 crores.

MHIL and its network of hospitals, is further expected to generate higher ARPOBs and profitability margins considering the substantial market share it has in north India in complex treatments like bone marrow transplant (BTM), and oncology among others ramp up from three new hospitals (Lucknow, Nagpur and Dwarka) and with the management's focus on optimisation of higher ARPOB generating payor mix, surgical mix and cluster approach to maintaining its brand in metro cities.

Strong financial risk profile with healthy capital structure and debt coverage indicators expected to sustain after considering significant capex as well

MHIL has a strong capital structure with the net worth base of ₹5,508 crore against total debt (including CG backed debt and leases) of ₹1,800 crore as on March 31, 2024 (PY: ₹1081 crore). In FY24, the company availed new term loan of ₹600 crore under Starlit Medical Centre Private Limited, which is repayable in 16 structured quarterly instalments starting from June 2025. Further, though debt coverage indicators also remained healthy with the net adjusted debt to PBILDT of 0.53x as on March 31, 2024, slightly moderated from negative 0.24x as on March 31, 2023, mainly owing to debt addition in Starlit for acquisition of Lucknow hospital. Total debt (excluding leases) at network level as on March 31, 2024, stood at ₹1,832 crore (including lease CG backed debt) (PY: ₹1025 crore) against which there is ample liquidity available for ₹1,144 crore at network level. In 2025, MHIL has also announced stake acquisition in Jaypee Healthcare Limited at enterprise value of ₹1,660 crore, which would lead to debt addition of ₹1,000 crore to network level being backed by MHIL's corporate guarantee.

At MHC network, three 'PHFs' which operate under a long-term master service agreement with MHIL. In FY24, MHIL up streamed ₹400 crore (PY: ₹289 crore) from these societies for its services and going forward also, these societies are expected to support MHIL and other societies within MHC network for their capex requirements demonstrating strong cash flow fungibility at network level.

Further, the group has a planned brownfield expansion capex for addition of close to 2,400 beds in next three years through FY27 at MHC network level with a total capital outlay of ₹4,600-4,700 crore (excluding JHL and maintenance capex) spanning over three years, these beds addition will happen largely in the newly acquired Lucknow hospital, under development PHFs namely Vikrant Saket and Nirogi Patparganj and other societies Balabhai Nanavati and Gujarmal Modi Society. MHIL's asset light venture

in Dwarka also started operations in CY 2025 while another hospital is being developed in Mohali on asset light model, which is expected to be completed in next 2-3 years.

However, team draws comfort from adequate capital availability through generation of strong accruals, cash lying at network level plus underleveraged balance sheet to further build the portfolio as the management actively looks out for key inorganic routes including recently acquired JHL and significant debt-funded capex or inorganic growth through more such acquisitions and net debt to PBILDT is expected to remain below 1.5x. Any significant debt-funded acquisitions on MHIL's credit profile will remain a key monitorable going forward.

Established market position driven by strong brand equity in premium market regions like Delhi-NCR and Mumbai

MHIL has a strong brand equity in North India as it operates total 20 hospitals and medical centres (PY: 17) as on June 30, 2024. Of this, 13 facilities (hospitals and medical centres) were in Delhi and NCR and the others in Mohali, Punjab (2), Bathinda, Punjab (1), Dehradun, Uttarakhand (1), Lucknow, UP (1), Nagpur (1) and Mumbai (1). Delhi/NCR contributes over 60% revenue of the company and also due to being largely operational in metro cities, it is able to earn industry leading ARPOBs. Further, MHIL is building up more bed capacity and expanding geographical footprint through recently acquired three entities with significant growth potential in revenue and margins with increasing surgical business.

All the hospitals are National Accreditation Board for Hospitals and Healthcare Providers (NABH) and ISO-accredited and have also received the Joint Commission International (JCI) accreditation for three of its hospitals, which helps MHIL to expand its international business further.

Diversification across specialities and improving channel mix

MHIL derives its revenues from several specialities, including cardiology, oncology, neurology, and orthopaedic among others, thus not depending upon single speciality. Among specialties, oncology, cardiac, neurology, Gynac, Paediatric, ENT, and Ophthal among others have demonstrated healthy growth in the past year. In FY24, MHIL performed 13,150 oncology surgeries, 46,500 cardiac surgeries and 10,450 cardiac surgeries among other complex procedures which are expected to surpass in current fiscal 2025. These surgeries enabled MHIL to achieve higher profitability as these are high cost and high margin procedures. MHIL also has a well-diversified channel mix, which includes cash, third-party administrators (TPAs) and corporates, institutions, referrals, and international business. MHIL derived 18.06% (PY: 17.27%) of its total FY24 revenue from the institutional/public sector undertaking (PSU) segment, which is a low-margin business, while the international segment was 9.14% (PY: 8.54%). The company plans to optimise its payor mix further by reducing the contribution from the PSU segment and focusing more on international business going forward. The group (including three trusts) has ~1,800+ doctors, 6,500+ nurses, and 1,100+ consultant physicians on board, to service its patients, as on March 31, 2024. The group also has capital light adjacencies through Max Home and Max Labs which provides homecare services and non-captive pathology and have NABL certification. These offers 2,000+ tests through a network of over 525+ partner-run collection centres (PY: 430) and 24 company-owned centres (PY: 22) across 41 cities as on March 31, 2024. Max Home contributed revenue of ₹172 crore in FY24.

Key weaknesses

Exposure to regulatory and concentration risks

MHIL operates in a regulated industry that witnessed continuous regulatory intervention in the past couple of years. Regulations such as the capping of stent prices and knee implants and stricter compliance norms have adversely impacted the company's margin in the past. Any such future regulations may have an adverse impact on the group's profitability, and thus, will remain an important monitorable. MHIL believes in the cluster approach and has a significant number of beds in metros, as these metros witness a significant footfall of medical tourist, inherent advantages available in metros such as high per capita income, high insurance penetration and propensity to pay for high-end quaternary care facilities, availability of senior and statured clinical talent, leading to metros becoming regional hubs and higher health awareness. MHIL network has a higher proportion of beds in metro cities as compared to other top players, which has helped the company clock higher ARPOBs than its peers.

The group's concentration in metros like Delhi-NCR and Mumbai is also a significant credit risk, which makes it vulnerable to adverse political, regulatory, or environmental event, which impacts the socio-economic situation of a particular geography. However, recent efforts have been taken by the company to expand the geographically presence in other states as well and in this direction, MHIL has acquired Starlit and Alexis, which are in Lucknow and Nagpur with 550 and 200, beds respectively. MHIL expects to refurbish the present infrastructure of Lucknow hospital and further add 140 beds by end of calendar year 2025. Further, the directive by Supreme court for fixation of standardised prices which came in February 2024 for hospitals is not likely to have sustained adverse impact on operations of MHIL, however remains a key monitorable in case action is taken.

Intense competition from other established players

With rising preference towards brands, higher quality and organised diagnostics and self-awareness among masses with increasing insurance penetration, there is a high competition in the healthcare sector from other established brands like Fortis, Apollo, and Medanta among others. However, comfort is drawn from the sizeable presence of Max as a brand and footprint with established position of its hospitals. Going forward, MHIL's prospects will depend upon its ability to improve its profitability, continued scale-up of operations, ramp-up of new and acquired units and to manage the competitive pressures in the sector by further diversifying into other geographies or expand through asset-light adjacencies such as 'Max Labs', and Muthoot Dwarka among others.

Liquidity: Strong

MHIL's liquidity position stands strong given its healthy gross cash accruals (GCAs) of ₹1,339 crore in FY24 and expected to be over ₹1800 crore over medium term against moderate debt repayment obligations (including lease liabilities) of ₹50 crore in FY24,

₹215 crore in FY25 and ₹419 crore in FY26 (including estimated repayment of JHL debt). Cash accruals generated by PHFs is close to ₹320 crore in FY24 against, which debt repayments are nominal ~₹ three to five crore yearly. Debt repaid at MHIL consol level in Q1FY25 is close to ₹19.78 crores. Liquidity is further aided by free cash and cash equivalents of ₹1,157 crore as on June 30, 2024, in MHIL consol and ₹1,346 crore in MHC network with sanctioned WC limit of ₹345.63 crore against which utilisation is nominal of ₹103.74 crore, thus leaving sufficient buffer for exigencies. Further, cash accruals of MHC network in coming years will be partially applied towards the capex commitments over next three years through FY27 involving total outlay of close to ₹6,000 crore (including PHFs, potential capex on JHL and maintenance capex) for further addition of 2,400 beds over 2-3 years through brownfield expansion.

Environment, social, and governance (ESG) risks: MHIL's ESG profile supports its already strong credit risk profile. The hospital sector has a low impact on the environment owing to its comparatively lesser water consumption and lower emission due to low energy intensive nature of operations of hospitals. Social impact is moderate because of its large workforce across hospitals and value chain partners. MHIL has continuously focused on mitigating its environmental and social risks.

Environmental:

- The company follows sustainable water management practices and follow the Reduce, Reuse, and Recycle (3R) principle and aims to curtail freshwater consumption by 45% by 2025.
- Established membrane bioreactor (MBR) based sewage treatment plants (STPs) at Max Vaishali, Max Shalimar Bagh and Max Mohali. Ultrafiltration (UF) and other advanced tertiary treatment techniques have been implemented within Sewage Treatment Plants (STPs) to render water suitable for non-potable reuse Integrated measures to enhance energy efficiency across our facilities, including the implementation of LED lighting, HVAC temperature control systems, day-night sensors, and the optimal utilisation of natural daylight.

Social:

- The company organises regular screening programmes for cervical, breast, and oral cancers both within and outside its premises to promote early detection and prevention. Outreach programmes are also organised to provide free examinations to those with limited healthcare access.
- Enables high-quality healthcare services to deprived and tribal communities, and to pilgrims in need. It supports to charitable hospitals and contributed towards extension of Swami Vivekanand Charitable hospital at Dharmawala, Dehradun, ensuring the local community has access to necessary healthcare services.
- It is also involved in the 'Nikshay Mitra' scheme of the Government of India and has extended nutritional support to 2,300 individuals undergoing treatment for TB in the public healthcare system. Max Healthcare executed over 6,000 diverse community engagement activities.

Governance:

- A comprehensive set of policies have been implemented to guide employees, stakeholders, and subsidiaries in their conduct. These policies cover a wide range of critical areas, including ethical practices, anti-corruption measures, prevention of insider trading, workplace safety, and more. As on March 31, 2024, the company's board had eight Directors comprising of one Executive Director, two Non-Executive Directors and five Independent Directors including one Independent Woman Director.

Applicable criteria

[Definition of Default](#)
[Liquidity Analysis of Non-financial sector entities](#)
[Rating Outlook and Rating Watch](#)
[Hospital](#)
[Financial Ratios – Non financial Sector](#)
[Short Term Instruments](#)
[Factoring Linkages Parent Sub JV Group](#)
[Consolidation](#)

About the company and industry

Industry classification

| Macroeconomic indicator | Sector | Industry | Basic industry |
|-------------------------|------------|---------------------|----------------|
| Healthcare | Healthcare | Healthcare services | Hospital |

MHIL incorporated in 2001 and is primarily engaged in providing healthcare services. Max hospital network consists of 20 multi-specialty hospitals / medical centres, super-specialty hospitals and primary care clinics as on June 30, 2024, (PY: 17 hospitals) including three partner healthcare facilities (PHFs), Max Saket East (Devki Devi Society), Max Smart Saket (Gujarmal Modi Society) and Max Patparganj (Balaji Society), two hospitals being operated on an O&M basis, viz, BL Kapur (Lahore Hospital Society) and Nanavati and Dwarka Hospital which is an asset light venture. Of this, 13 facilities (hospitals and medical centres) were in Delhi and NCR and the others in Mohali, Punjab (2), Bathinda, Punjab (1), Dehradun, Uttarakhand (1), Lucknow, UP (1), Nagpur (1) and Mumbai (1). MHIL network has approx. 4,300 operational beds capacity as on June 30, 2024 (including Muthoot Dwarka) predominantly operating in Delhi-NCR and Mumbai regions.

| Brief Financials-MHIL Consol (₹ crore) | March 31, 2023 (A) | March 31, 2024 (A) | Q1FY25 (UA) |
|--|--------------------|--------------------|-------------|
| Total operating income | 4,562.60 | 5,437.14 | 1,542.95 |
| PBILDT | 1,240.46 | 1,534.95 | 387.41 |
| PAT | 1,103.51 | 1,057.64 | 236.27 |
| Overall gearing (times) | 0.20 | 0.29 | 0.21 |
| Interest coverage (times) | 14.80 | 21.44 | 16.22 |

A: Audited UA: Unaudited; Note: these are latest available financial results

| Brief Financials-MHC Network (₹ crore) * | March 31, 2023 (UA) | March 31, 2024 (UA) | Q1FY25 (UA) |
|--|---------------------|---------------------|-------------|
| Total operating income | 5,904 | 6,849 | 1,935 |
| PBILDT | 1,597 | 1,840 | 479 |
| PAT | 1,588 | 1,278 | 295 |

*Including three PHFs (Devki Devi Foundation, Gujarmal Modi Hospital & Research Centre and Balaji Medical & Diagnostics Research Centre)

UA: Unaudited; Note: these are latest available financial results

Status of non-cooperation with previous CRA: Not applicable

Any other information: Not applicable

Rating history for last three years: Annexure-2

Detailed explanation of covenants of rated instrument / facility: Annexure-3

Complexity level of instruments rated: Annexure-4

Lender details: Annexure-5

Annexure-1: Details of instruments/facilities

| Name of the Instrument | ISIN | Date of Issuance (DD-MM-YYYY) | Coupon Rate (%) | Maturity Date (DD-MM-YYYY) | Size of the Issue (₹ crore) | Rating Assigned and Rating Outlook |
|--|------|-------------------------------|-----------------|----------------------------|-----------------------------|------------------------------------|
| Fund-based - LT-Term Loan | | - | - | 30/11/2031 | 241.01 | CARE AA+; Stable |
| Fund-based - LT-Working Capital Limits | | - | - | - | 130.00 | CARE AA+; Stable |
| Non-fund-based - ST-BG/LC | | - | - | - | 80.00 | CARE A1+ |

Annexure-2: Rating history for last three years

| Sr. No. | Name of the Instrument/Bank Facilities | Current Ratings | | | Rating History | | | |
|---------|--|-----------------|------------------------------|------------------|---|---|--|---|
| | | Type | Amount Outstanding (₹ crore) | Rating | Date(s) and Rating(s) assigned in 2024-2025 | Date(s) and Rating(s) assigned in 2023-2024 | Date(s) and Rating(s) assigned in 2022-2023 | Date(s) and Rating(s) assigned in 2021-2022 |
| 1 | Fund-based - LT-Term Loan | LT | 241.01 | CARE AA+; Stable | - | 1)CARE AA; Positive (09-Oct-23) | 1)CARE AA; Stable (22-Nov-22) 2)CARE AA; Stable (05-Sep-22) | 1)CARE AA-; Stable (07-Jul-21) |

| | | | | | | | | |
|---|--|----|--------|------------------|---|---------------------------------|---|--------------------------------|
| | | | | | | | 3)CARE AA; Stable (23-Aug-22) | |
| 2 | Fund-based - LT-Working Capital Limits | LT | 130.00 | CARE AA+; Stable | - | 1)CARE AA; Positive (09-Oct-23) | 1)CARE AA; Stable (22-Nov-22) 2)CARE AA; Stable (05-Sep-22) 3)CARE AA; Stable (23-Aug-22) | 1)CARE AA-; Stable (07-Jul-21) |
| 3 | Non-fund-based - ST-BG/LC | ST | 80.00 | CARE A1+ | - | 1)CARE A1+ (09-Oct-23) | 1)CARE A1+ (22-Nov-22) 2)CARE A1+ (05-Sep-22) 3)CARE A1+ (23-Aug-22) | 1)CARE A1+ (07-Jul-21) |

LT: Long term; ST: Short term; LT/ST: Long term/Short term

Annexure-3: Detailed explanation of covenants of rated instruments/facilities- Not applicable

Annexure-4: Complexity level of instruments rated

| Sr. No. | Name of the Instrument | Complexity Level |
|---------|--|------------------|
| 1 | Fund-based - LT-Term Loan | Simple |
| 2 | Fund-based - LT-Working Capital Limits | Simple |
| 3 | Non-fund-based - ST-BG/LC | Simple |

Annexure-5: Lender details

To view lender-wise details of bank facilities please [click here](#)

Annexure-6: List of entities consolidated

| Sr No | Name of the entity | Extent of consolidation | Rationale for consolidation |
|-------|---|-------------------------|-----------------------------|
| 1. | Hometrail Buildtech Private Limited | Full | Subsidiary of MHIL |
| 2. | Crosslay Remedies Limited | Full | Subsidiary of MHIL |
| 3. | Alps Hospital Limited | Full | Subsidiary of MHIL |
| 4. | Max Hospitals and Allied Services Limited | Full | Subsidiary of MHIL |
| 5. | Max Lab Limited | Full | Subsidiary of MHIL |
| 6. | Eqova Healthcare Private Limited | Full | Subsidiary of MHIL |

| | | | |
|-----|---|---------------|---|
| 7. | Max Healthcare FZ - LLC, Dubai | Full | Subsidiary of MHIL |
| 8. | ET Planners Private Limited | Full | Step down subsidiary of MHIL |
| 9. | MHC Global Healthcare (Nigeria) Limited | Full | Subsidiary of MHIL |
| 10. | Alexis Multi-Speciality Hospital Pvt Ltd | Full | Subsidiary of MHIL |
| 11. | Starlit Medical Centre Private Limited | Full | Step down subsidiary of MHIL |
| 12. | Dr. B.L. Kapur Memorial Hospital (Lahore Hospital Society) | Full | Trust- Operation and management agreement |
| 13. | Dr. Balabhai Nanavati | Full | Trust- Operation and management agreement |
| 14. | Max Super Speciality Hospital, Dwarka | Proportionate | Trust- Operation and management agreement |

Note on complexity levels of rated instruments: CARE Ratings has classified instruments rated by it based on complexity. Investors/market intermediaries/regulators or others are welcome to write to care@careedge.in for clarifications.

Contact us

| | |
|--|--|
| Media Contact Mradul Mishra Director CARE Ratings Limited Phone: +91-22-6754 3596 E-mail: mradul.mishra@careedge.in | Analytical Contacts Sabyasachi Majumdar Senior Director CARE Ratings Limited Phone: 91-120-4452006 E-mail: sabyasachi.majumdar@careedge.in |
| Relationship Contact Saikat Roy Senior Director CARE Ratings Limited Phone: +91-22-6754 3404 E-mail: saiikat.roy@careedge.in | Ravleen Sethi Director CARE Ratings Limited Phone: 91-120-4452016 E-mail: ravleen.sethi@careedge.in |
| | Akhil Kumar Associate Director CARE Ratings Limited Phone: 91-120-4451986 E-mail: akhil.kumar@careedge.in |

About us:

Established in 1993, CARE Ratings is one of the leading credit rating agencies in India. Registered under the Securities and Exchange Board of India, it has been acknowledged as an External Credit Assessment Institution by the RBI. With an equitable position in the Indian capital market, CARE Ratings provides a wide array of credit rating services that help corporates raise capital and enable investors to make informed decisions. With an established track record of rating companies over almost three decades, CARE Ratings follows a robust and transparent rating process that leverages its domain and analytical expertise, backed by the methodologies congruent with the international best practices. CARE Ratings has played a pivotal role in developing bank debt and capital market instruments, including commercial papers, corporate bonds and debentures, and structured credit.

Disclaimer:

The ratings issued by CARE Ratings are opinions on the likelihood of timely payment of the obligations under the rated instrument and are not recommendations to sanction, renew, disburse, or recall the concerned bank facilities or to buy, sell, or hold any security. These ratings do not convey suitability or price for the investor. The agency does not constitute an audit on the rated entity. CARE Ratings has based its ratings/outlook based on information obtained from reliable and credible sources. CARE Ratings does not, however, guarantee the accuracy, adequacy, or completeness of any information and is not responsible for any errors or omissions and the results obtained from the use of such information. Most entities whose bank facilities/instruments are rated by CARE Ratings have paid a credit rating fee, based on the amount and type of bank facilities/instruments. CARE Ratings or its subsidiaries/associates may also be involved with other commercial transactions with the entity. In case of partnership/proprietary concerns, the rating/outlook assigned by CARE Ratings is, inter-alia, based on the capital deployed by the partners/proprietors and the current financial strength of the firm. The ratings/outlook may change in case of withdrawal of capital, or the unsecured loans brought in by the partners/proprietors in addition to the financial performance and other relevant factors. CARE Ratings is not responsible for any errors and states that it has no financial liability whatsoever to the users of the ratings of CARE Ratings. The ratings of CARE Ratings do not factor in any rating-related trigger clauses as per the terms of the facilities/instruments, which may involve acceleration of payments in case of rating downgrades. However, if any such clauses are introduced and triggered, the ratings may see volatility and sharp downgrades.

**For detailed Rationale Report and subscription information,
please visit www.careedge.in**