

Annual Report FY 2022-2023



PERSONOLOGY

Leveraging Technology for Personalised Healthcare

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Personology very simply means clinical technology that has been personalized for every individual.

Personology for the patient is predicated by clinical excellence and outcomes that match or better leading hospitals around the world.

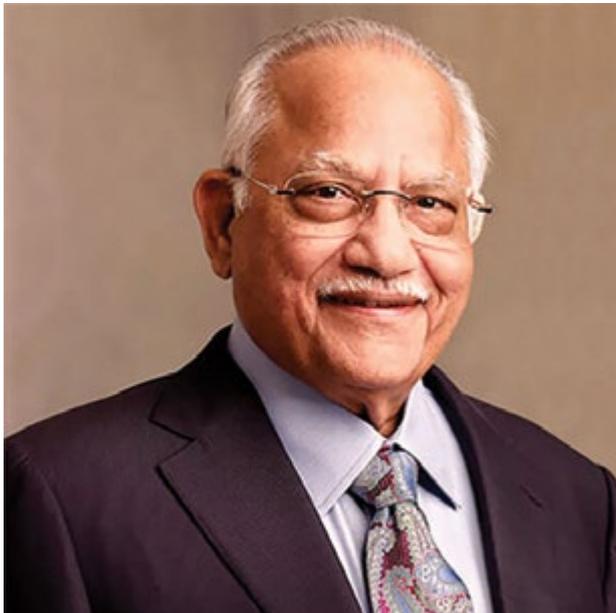
Personology for the individual is marked by bespoke evaluation, the pursuit of wellness, preventive care, and personalized medicine.

Personology for the community uses digital tools and platforms to improve health care outcomes, whether it is to provide personalized patient care in person or in expanding access to healthcare through mobile apps.

Personology is punctuated by our digital ecosystem. The predominant characteristic of a digital ecosystem is that it is customer centric and facilitates seamless consumer journeys. A digital ecosystem is a network of interconnected digital technologies, platforms, and services that interact with each other to create value for the business and its consumers.

We consciously increase our *Personology* footprint through new hospitals and clinics, latest technology and enhancing our digital ecosystem. We believe that we are bringing the future in healthcare to you, today.

MESSAGE



Dear Members,

I am happy to present the Annual Report in this, the 35th year of our inception. 1988-2023: Three and a half decades since our steadfast commitment to our mission – to provide healthcare of international standards to every individual.

It was an incredible journey, filled with struggles and challenges – from raising finances to obtaining regulatory approvals, from building a world-class hospital and equipping it with the best medical equipment, to bringing on board the finest clinical talent. Our efforts culminated on 18 September 1983, when **India's first corporate hospital**, Apollo Hospitals in Madras, came into being.

By remaining steadily focused on our purpose, Apollo Hospitals Group is the **largest integrated**

healthcare eco-system in this part of the world, with 70 hospitals, 5541 pharmacies, 530 clinics, 1750 diagnostic centres and day surgery and birthing centres around the country. We have made world-class medical care accessible and affordable to all, with patients now coming to us from 150 countries.

It is most gratifying that as the first corporate healthcare provider, our purpose and structure led to the **genesis of India's private health sector**, which caters to more than seventy percent of the country's medical needs. The quality of healthcare being delivered in the country has been lifted, and this has made the country proud.

The true impact of the work that has gone into building India's health sector was evident during the biggest health crisis of our lifetimes, the **COVID-19 pandemic**. I acknowledge the contribution of every healthcare worker in the country who went above and beyond the call of duty in detecting and treating COVID, and administering more than two billion vaccines in the world's largest COVID vaccination program.

Throughout its journey, Apollo Hospitals Group has been at the forefront of adopting **new and innovative technology**, for the benefit of our patients. Right from the first hospital, we ensured that the best technology was made available to our doctors, to support their efforts to deliver the highest quality of care. India's first MRI, first CT, first PET-CT, were all installed by Apollo Hospitals. The launch of the **Apollo Proton Cancer Centre** is

just one more example of the investments we have made in bringing world-class care options to India, and indeed this part of the world. We are now raising the bar even higher, with the upcoming introduction of **Zap-X radiosurgery technology** in India, for the treatment of Head and Neck cancers.

We have been early adopters of tele-medicine technology and deliver these services across **Primary Care, Specialist Consults, Ophthalmology, Tele-Radiology, Tele-ECG, and E-ICU**. All these services are delivered in an integrated way, and have bridged the gap between rural and urban India. We are now taking this model further, by making it a platform for collaboration with nursing homes around the country. This model, **Apollo Connect**, ensures that all patients get the highest quality of care and advice, and doctors and nurses have access to the best learning and skilling approaches. Command Stations have been set-up at our flagship hospitals across the country, with the capacity to handle thousands of calls every day. In addition, the **Apollo Emergency Ambulance Network (1066)** is available with trained personnel, seamlessly connected with our Command Stations, so that treatment can commence at the doorstep itself.

Even while growing our footprint and offerings, we recognise that healthcare is increasingly becoming more personal, unique and curated. While even our individual signatures may change with time, a constant and unique aspect about each of us, is our fingerprint, serving as our unmistakable identifier, just like our DNA. Apollo understands the significance of each **individual's distinct health profile**. We believe that clinical assessments, guidance, and treatment protocols must be tailored and personalized for every person. This is where '**Personology**' comes in.

Personology means being ProHealth. **Apollo ProHealth**, our personalized health check program, embodies a fusion of cutting-edge medical technology, Artificial Intelligence (AI), and world-

class clinical expertise. It has been purpose-designed to identify health risks early, particularly **Non-Communicable Diseases (NCDs)**, such as cardiac ailments, diabetes, stroke, COPD, obesity, hypertension, asthma etc and to guide individuals towards wellness, through appropriate lifestyle modifications. ProHealth harnesses machine learning algorithms, and analyses vast data to predict risks, identify patterns, and tailor plans to meet each person's unique needs. The ProHealth assessment can be done once every few years, while the identified risk factors are continuously monitored and managed to avert diseases.

Personology is also about making high-quality care accessible with **ease and convenience** for our patients. With our retail formats including primary care clinics and diagnostics, we have moved care into neighbourhoods, and have made care accessible and affordable.

Ultimately, Personalised health is about putting the power of choice and well-being in the hands of the individual. Through our integrated digital platform, **Apollo 24|7**, we have enabled access to the entire network of services offered by Apollo, through the mobile device. This innovative platform combines Apollo's rich legacy of clinical excellence and research with the latest technology, ensuring a superior healthcare experience for all. It offers home delivery of genuine medicines within 2 hours in over **19,000 pincodes**, virtual consultations with the best of Apollo specialists and super-specialists and guaranteed consults within 15 minutes for emergencies, and home collection of diagnostics samples with a strong phlebotomy network. Above all, the platform hosts a strong EMR which serves as a digital health vault for the individual. With over **25 million registered users** and a 360-degree offering, Apollo 24|7 is a **unique eco-system of care**.

Looking ahead, the future of healthcare lies in **Automation, Digitisation, Robotics, 3D Printing**

and in deep science, **genomics and molecular biology**. Apollo Hospitals will continue to invest in all these frontiers, to further the cause of healthy living.

The strides made by Apollo Hospitals, and by Indian healthcare, have been globally recognized. The sector is now known for medical excellence and best in class clinical outcomes, along with distinct cost advantages, and compassionate care synonymous with India. These aspects are rapidly making our nation the **preferred choice for Medical Value Travel (MVT)**. The Government of India has appreciated Apollo's vision for making India a leading player in the global healthcare industry, and I am confident that in the next few years India will be the medical destination of choice, even for persons from developed economies. It fills my heart with pride as now, our nation's motto of **'Heal in India'** resonates with our mission and extends our caring touch to the world.

Throughout our journey, we have firmly believed in giving back to the communities we serve, and through various initiatives like **Total Health, SHINE, SACHi, SAHI, and Billion Hearts Beating**, we are determined to make a positive impact. Total Health, our flagship program, was launched a decade ago as a pilot population health project. Today, it stands tall, as a Learning Case Study at the prestigious Harvard School of Public Health. In particular, its focus on preventive healthcare and dedicated management of non-communicable diseases (NCDs) has yielded outstanding results and has saved many precious lives. In this milestone year, the **Apollo Foundation** has chosen the theme **'People, Planet, and Partnerships,'** which serves as a testament to our profound dedication to social responsibility.

Over the years, India and Apollo Hospitals have demonstrated tremendous resilience in facing a multitude of challenges. In keeping with the same spirit, as leaders, we are also gearing up to be able to meet challenges in the future, especially through our agile approach to learning and evolution. We will stay true to the trust of millions of patients who have come to Apollo with great hope in their hearts.

I am pleased to announce that the Board has approved a dividend of ₹3 per share.

As we embrace the future, our commitment to providing a truly exceptional care experience remains unswerving. I want to extend my heartfelt thanks to each and every one of you for placing your trust in us. It is an incredible honour to be your partner on this journey towards improved health and well-being.

To the esteemed members of the Board, I express my deepest gratitude for their unwavering trust and steadfast support throughout our journey. To our esteemed shareholders, thank you for the tremendous belief you have shown in our vision, which empowers us to reach new heights in healthcare delivery.

I am immensely grateful to my Apollo family, whose unconditional support fills us with the confidence to explore new frontiers in healthcare services. Together, we will continue making a positive impact on people's lives, and I am truly grateful for the warmth and unity that defines our Apollo family.

My warm personal regards to all of you,

Dr. Prathap C. Reddy
Founder, Apollo Hospitals Group

CORPORATE INFORMATION

Chairman	Mr. Jasmine Shah
Vice Chairman	Dr. Prathap C. Reddy
Managing Director	Mr. Shivakumar Pattabhiraman
Directors	Dr. Arun Rai Mr. Deepak Vaidya Ms. Madhumita Ganguli Prof. (Dr.) Mahesh Verma Dr. Menaka Guruswamy Mr. Salil Singhal Dr. Sangita Reddy Mr. Satnam Arora Mr. S. Regunathan Ms. Suneeta Reddy Mr. Vikram Bhat Mr. Vinayak Chatterjee Ms. Vineeta Rai
AVP - Corporate Affairs & Legal (Company Secretary & Compliance Officer)	Mr. Priya Ranjan
Chief Financial Officer	Mr. C. P. Tyagi
Registered Office & Hospital Complex	Sarita Vihar Delhi-Mathura Road, New Delhi – 110 076
Hospital at Noida	Apollo Hospitals, E-2, Sector-26, Noida - 201 301
Auditors	S. N. Dhawan & CO LLP Chartered Accountants, New Delhi
Bankers	Punjab National Bank

NOTICE TO THE SHAREHOLDERS

Notice is hereby given that the thirty fifth Annual General Meeting (35th AGM) of Members of Indraprastha Medical Corporation Limited will be held on Thursday, 21st September, 2023, at 10.15 a.m. through Video Conferencing (“VC”) / Other Audio Visual Means (“OAVM”) to transact the following business:

ORDINARY BUSINESS:

Item No. 1 – Adoption of financial statements

To receive, consider and adopt the audited financial statements of the Company for the financial year ended 31st March, 2023, together with the Report of the Board of Directors and Auditors thereon and, in this regard, pass the following resolution as an **Ordinary Resolution**: “RESOLVED THAT the Audited Financial Statements of the Company for the financial year ended 31st March, 2023, together with the Report of the Board of Directors and Auditors thereon, laid before this meeting, be and are hereby considered and adopted.”

Item No. 2 - Declaration of Dividend

To declare a dividend on Equity Shares for the financial year ended 31st March 2023 and, in this regard, pass the following resolution as an **Ordinary Resolution**: “RESOLVED THAT dividend at the rate of Rs. 3.00 per equity share (30%) of face value of Rs. 10/- each fully paid-up of the Company be and is hereby declared for the financial year ended 31st March, 2023, and the same be paid as recommended by the Board of Directors of the Company, out of the profits of the Company for the financial year ended 31st March, 2023.”

Item No. 3 - Re-Appointment of Retiring Director

To appoint a director in place of Ms. Suneeta Reddy (DIN 00001873), who retires by rotation and being eligible has offered herself for re-appointment and in this regard, pass the following resolution as an **Ordinary Resolution**: “RESOLVED THAT pursuant to the provisions of Section 152 and other applicable provisions, if any, of the Companies Act, 2013, Ms. Suneeta Reddy (DIN 00001873), who retires by rotation at this meeting and being eligible offers herself for re-appointment, be and is hereby re-appointed as a director of the Company, liable to retire by rotation.”

Item No. 4 - Re-Appointment of Retiring Director

To appoint a director in place of Dr. Sangita Reddy (DIN 00006285), who retires by rotation and being eligible

has offered herself for re-appointment and in this regard, pass the following resolution as an **Ordinary Resolution**: “RESOLVED THAT pursuant to the provisions of Section 152 and other applicable provisions, if any, of the Companies Act, 2013, Dr. Sangita Reddy (DIN 00006285), who retires by rotation at this meeting and being eligible offers herself for re-appointment, be and is hereby re-appointed as a director of the Company, liable to retire by rotation.”

SPECIAL BUSINESS:

Item No. 5 – Ratification of Remuneration of the Cost Auditor for the financial year ending 31st March, 2024

To consider and if thought fit, to pass the following resolution as an **Ordinary Resolution**:

“RESOLVED THAT pursuant to the provisions of Section 148(3) and other applicable provisions, if any, of the Companies Act, 2013, read with the Companies (Audit and Auditors) Rules, 2014 (including any statutory modification(s) or re-enactment thereof, for the time being in force), the remuneration payable to M/s. Devarajan Swaminathan and Co., Cost Accountants (Firm Registration No. 100669), the Cost Auditor appointed by the Board of Directors on the recommendation of the Audit Committee, to conduct the audit of the cost records of the Company for the year ending 31st March, 2024, at a remuneration of Rs. 6.50 lakhs plus taxes as applicable and reimbursement of out-of-pocket expenses, be and is hereby ratified and confirmed.

RESOLVED FURTHER THAT the Board of Directors of the Company be and are hereby authorised to do all acts and take all such steps as may be necessary, proper or expedient to give effect to the aforesaid resolution.”

**By order of the Board of Directors
for Indraprastha Medical Corporation Limited**

Priya Ranjan
AVP - Corporate Affairs & Legal
(Company Secretary & Compliance Officer)

Registered Office:

Sarita Vihar, Delhi-Mathura Road,
New Delhi – 110 076, India
CIN: L24232DL1988PLC030958
Date: 4th August, 2023

NOTES:

1. The Ministry of Corporate Affairs (MCA) vide Circular No.14/2020 dated April 8, 2020, Circular No.17/2020 dated April 13, 2020, Circular No.20/2020 dated May 5, 2020, Circular No. 2/2022 dated May 5, 2022, read with Securities and Exchange Board of India (SEBI) Circulars dated May 12, 2020, January 15, 2021, May 13, 2022 (the said Circulars) had permitted sending of the Notice of AGM along with Annual Report through electronic mode to those Members whose e-mail addresses were registered with the Company / Depositories as well as conducting the Annual General Meeting (AGM) through Video Conferencing (VC) or Other Audio Visual Means (OAVM).

MCA by Circular No. 10/2022 dated 28th December, 2022 and SEBI vide its Circular No. SEBI/HO/CFD/PoD-2/P/CIR/2023/4 dated January 5, 2023 has extended the above exemptions till 30th September, 2023 and accordingly in compliance with applicable provisions of the Companies Act, 2013 (the Act) and the said Circulars:

(a) Notice of the AGM along with Annual Report for the Financial Year 2022-23 is being sent through electronic mode to those Members whose e-mail addresses are registered with the Company / Depositories; and

(b) 35th AGM of the Members will be held through VC / OAVM.

The deemed venue for the AGM shall be the Registered Office of the Company.

Members may note that the Notice along with the Annual Report for the Financial Year 2022-23 has been uploaded on the website of the Company at <https://delhi.apollohospitals.com/>. The Notice and the Annual Report can also be accessed from the websites of the Stock Exchanges, i.e. BSE Limited at www.bseindia.com and National Stock Exchange of India Limited at www.nseindia.com and on the website of National Securities Depository Ltd. (NSDL) (agency for providing the Remote e-Voting facility) i.e. www.evoting.nsdl.com.

2. Facility of joining the AGM through VC / OAVM shall open 30 minutes before the time scheduled for the AGM and will be available for Members on first come first served basis.
3. The attendance of the Members attending the AGM through VC/OAVM will be counted for the purpose of reckoning the quorum under Section 103 of the Act.
4. Pursuant to the provisions of Section 108 of the Act read with Rule 20 of the Companies (Management and Administration) Rules, 2014 as amended from time to time and Regulation 44 of SEBI Listing Regulations, and the MCA Circulars, the Company is providing facility of remote e-voting to its Members in respect of the business to be transacted at the AGM. For this purpose, the Company has entered into an agreement with NSDL for facilitating voting through electronic means, as the authorized agency. The facility of casting votes by a member using remote e-voting system as well as venue voting on the date of the AGM will be provided by NSDL.
5. The Explanatory Statement, pursuant to Section 102 of the Companies Act, 2013, setting out material facts concerning the business with respect to Item No. 5 forms part of this Notice. Additional information, pursuant to Regulation 36(3) of the Securities and Exchange Board of India (Listing Obligations and Disclosure Requirements) Regulations, 2015, ('SEBI Listing Regulations') and Secretarial Standard - 2 on General Meetings/issued by the Institute of Company Secretaries of India, in respect of Item No. 3 and 4, Director retiring by rotation seeking re-appointment at this Annual General Meeting is furnished as an Annexure to the Notice.
6. Pursuant to Section 105 of the Companies Act, 2013, a member entitled to attend and vote at the AGM is entitled to appoint a proxy to attend and vote on his/her behalf and the proxy need not be a Member of the Company. Since this AGM is being held through VC / OAVM, physical attendance of Members has been dispensed with. Accordingly, the facility for appointment of proxies by the Members will not be available for the AGM and hence the Proxy Form and Attendance Slip are not annexed to this Notice.
7. Institutional / Corporate Shareholders (i.e. other than individuals / HUF, NRI, etc.) are required to send a scanned copy (PDF/JPG Format) of its Board or governing body Resolution/Authorization etc., authorizing its representative to attend the AGM through VC / OAVM on its behalf and to vote through remote e-voting. The said Resolution/Authorization shall be sent to the Scrutinizer by email through its registered email address to bskashtwal@gmail.com with a copy marked to evoting@nsdl.co.in.
8. The Company has notified closure of the Register of Members and the Share Transfer Books from Saturday, 16th September 2023 to Thursday, 21st September, 2023 (both days inclusive) for determining the Members eligible to receive dividend, if declared by the Members.
9. Dividend on equity shares, if declared by the Members, will be paid on or after 25th September, 2023. In respect of shares held in dematerialised form, the dividend will be paid to Members whose names are furnished by NSDL and Central Depository Services (India) Limited as beneficial owners for the purpose. In respect of shares held in physical form, the dividend will be paid to Members whose names appear on the Company's Register of Members as on 21st September, 2023.
10. Pursuant to the Finance Act, 2020, dividend income is taxable in the hands of Members and the Company is required to deduct tax at source at the prescribed rates from the dividend paid to Members. For the prescribed rates for various categories, Members are also requested to refer to the Finance Act, 2020, as amended. Members are also requested to update their Permanent Account Number (PAN) with their respective Depository Participant(s) (DPs) (in case of shares held in a dematerialised form) and with Company's Registrars

and Transfer Agents, M/s Link Intime India Pvt. Ltd. (Link Intime) (in case of shares held in physical form).

11. To avail the benefit of non-deduction of tax at source / avail beneficial rates, Members are requested to submit the requisite declarations / documents, as applicable, on or before 7th September, 2023 at imclshares@apollohospitals.com.
12. In order to provide protection against fraudulent encashment of dividend warrants / demand drafts for Members holding shares in dematerialised form, bank account details provided by the Depository Participants (DPs) will be used by the Company. Members who wish to change such bank accounts may advise their DPs about such change with complete details of bank account, including IFSC Code. Members residing at the regions where NECS / NEFT / Direct Credit / RTGS / Swift Facility is available are advised to avail of the option to collect dividend by way of these electronic modes.
13. Members holding shares in dematerialised form will have to send the NECS Mandate Form to the concerned DPs directly. Members holding shares in physical form are requested to send their NECS Mandate Form duly filled in, under the signature of the Sole / First joint holder, to Link Intime. For Members who have not updated their bank account details, dividend warrants / demand drafts will be sent to their registered addresses.
14. SEBI vide its Circular No. SEBI/HO/MIRSD/MIRSD_RTAMB/P/CIR/2022/8 dated January 25, 2022, has mandated the Listed Companies to issue securities in dematerialized form only while processing service requests viz. Issue of duplicate securities certificate; claim from unclaimed suspense account; renewal/exchange of securities certificate; endorsement; sub-division/splitting of securities certificate; consolidation of securities certificates/folios; transmission and transposition. In view of the same and to eliminate all risks associated with physical shares and avail various benefits of dematerialisation, members are advised to dematerialise the shares held by them in physical form. Members can contact the Company or Link Intime, for assistance in this regard.
15. To support the 'Green Initiative', Members who have not yet registered their email addresses are requested to register the same with their DPs in case the shares are held by them in electronic form and with Link Intime in case the shares are held by them in physical form.
16. Members seeking any information with regard to the financials or any matter to be placed at the AGM, are requested to write to the Company on or before 15th September, 2023, through email on imclshares@apollohospitals.com. The same will be replied by the Company suitably.
17. The Ministry of Corporate Affairs had notified provisions relating to unpaid / unclaimed dividend under Sections 124 and 125 of the Act and Investor Education and Protection Fund (Accounting, Audit, Transfer and

Refund) Rules, 2016 (IEPF Rules). As per these Rules, dividends which are not encashed / claimed by the shareholder for a period of seven consecutive years shall be transferred to the Investor Education and Protection Fund (IEPF) Authority. The IEPF Rules also mandate the companies to transfer such shares of Members of whom dividends remain unpaid / unclaimed for a period of 7 (seven) consecutive years to the demat account of IEPF Authority. Hence, the Company urges all the Members to encash / claim their respective dividend during the prescribed period. The details of the unpaid / unclaimed amounts lying with the Company as on 23rd September, 2022 (date of last AGM) are available under "Investor Relations" section on the website of the Company and on Ministry of Corporate Affairs' website.

The summary of the dates on which the unpaid dividend amount shall be due for transfer to Investor Education and Protection Fund are given in the table below:

Financial Year Ended	Date of Declaration of Dividend	Due Date for transfer to the IEP Fund
31/03/2016	30/08/2016	03/10/2023
31/03/2017	26/09/2017	30/10/2024
31/03/2018	24/09/2018	28/10/2025
31/03/2019	20/09/2019	24/10/2026
31/03/2022	23/09/2022	29/10/2027

It may be noted that no dividend has been declared for the financial years ended 31/03/2020 and 31/03/2021.

18. (a) Adhering to the various requirements set out in the Investor Education and Protection Fund Authority (Accounting, Audit, Transfer and Refund) Rules, 2016, as amended, the Company has, during financial year 2022-23, transferred to the IEPF Authority all shares in respect of which dividend had remained unpaid or unclaimed for seven consecutive years or more. Details of shares transferred to the IEPF Authority are available on the website of the Company and the same can be accessed through the link: <https://www.apollohospitals.com/delhi/investor-relations/unpaid-dividend>. The said details have also been uploaded on the website of the IEPF Authority and the same can be accessed through the link: www.iepf.gov.in.
- (b) Members may note that shares as well as unclaimed dividends transferred to IEPF Authority can be claimed back from them. Concerned members/investors are advised to visit the weblink: <https://www.iepf.gov.in/IEPF/refund.html> or contact Link Intime for lodging claim for refund of shares and / or dividend from the IEPF Authority.
19. Members are requested to intimate changes, if any, pertaining to their name, postal address, email address, telephone/mobile numbers, Permanent Account Number (PAN), nominations, power of

attorney, bank details such as, name of the bank and branch details, bank account number, MICR code, IFSC code, etc.

- a) For shares held in electronic form: to their Depository Participants (DPs)
- b) For shares held in physical form: to the Company/ Registrar and Transfer Agents (RTA) in prescribed Form ISR-1 and other forms pursuant to SEBI Circular No. SEBI/ HO/MIRSD/MIRSD-PoD-1/P/ CIR/2023/37 dated 16th March, 2023. In the absence of any of the required documents in a folio, on or after 1st October, 2023, the folio shall be frozen by the RTA. The securities in the frozen folios shall be eligible to receive payments (including dividend) and lodge grievances only after furnishing the complete documents. If the securities continue to remain frozen as on 31st December, 2025, the Registrar/the Company shall refer such securities to the administering authority under the Benami Transactions (Prohibitions) Act, 1988, and/or the Prevention of Money Laundering Act, 2002.

In compliance with SEBI guidelines, the Company had sent a communication intimating about the submission of above details to all the Members holding shares in physical form.

20. Non-Resident Indian members are requested to inform RTA / respective DPs, immediately of:
 - a) Change in their residential status on return to India for permanent settlement.
 - b) Particulars of their bank account maintained in India with complete name, branch, account type, account number and address of the bank with pin code number, if not furnished earlier.
21. Dispute Resolution Mechanism at Stock Exchanges, SEBI, vide its circular no. SEBI/HO/MIRSD/MIRSD_RTAMB/P/CIR/2022/76 dated 30th May, 2022, provided an option for arbitration as a Dispute Resolution Mechanism for investors. As per this circular, investors can opt for arbitration with Stock Exchanges in case of any dispute against the Company or its Registrar and Transfer Agent on delay or default in processing any investor services related request.
22. Regulation 40 of the Listing Regulations, as amended, mandates that transfer, transmission and transposition of securities of listed companies held in physical form shall be effected only in demat mode. Further, SEBI, vide its Circular dated 25th January, 2022, has clarified that listed companies, with immediate effect, shall issue the securities only in demat mode while processing investor service requests pertaining to issuance of duplicate shares, exchange of shares, endorsement, sub-division/ consolidation of share certificates, etc. In view of this and also to eliminate all risks associated with physical shares and for ease of portfolio management, the Members holding shares in physical form are

requested to consider converting their holdings to demat mode.

23. Route Map is not annexed in this Notice since the AGM will be held through VC / OAVM.
24. Mr. Baldev Singh Kashtwal, Practicing Company Secretary (Membership No. FCS 3616 & Certificate of Practice No. 3169) has been appointed as the Scrutinizer to scrutinize the e-voting process in a fair and transparent manner.
25. Voting through electronic means:
 - I. In compliance with the provisions of Section 108 of the Act read with Rule 20 of the Companies (Management and Administration) Rules, 2014, as substituted by the Companies (Management and Administration) Amendment Rules, 2015, ('Amended Rules 2015') and Regulation 44 of the Listing Regulations and Secretarial Standard on General Meetings (SS-2) issued by the Institute of Company Secretaries of India, and the Circulars issued by the Ministry of Corporate Affairs, the Company is pleased to provide to its members the facility to exercise their right to vote on resolutions proposed to be considered at the thirty-fifth AGM by electronic means and the business may be transacted through e-Voting Services. The facility of casting the votes using an electronic voting system from a place other than the venue of the AGM ("remote e-voting") will be provided by National Securities Depository Limited (NSDL).
 - II. The remote e-voting period commences on Monday, 18th September, 2023 (9:00 a.m. IST) and ends on Wednesday, 20th September, 2023, (5:00 p.m. IST). During this period, Members holding shares either in physical form or in dematerialized form, as on 15th September, 2023, i.e. cut-off date, may cast their vote electronically. The e-voting module shall be disabled by NSDL for voting thereafter. Those Members, who will be present at the AGM through VC / OAVM facility and have not cast their vote on the Resolutions through remote e-voting and are otherwise not barred from doing so, shall be eligible to vote through e-voting system during the AGM.
 - III. The Members who have cast their vote by remote e-voting prior to the AGM may also attend/ participate in the AGM through VC / OAVM but shall not be entitled to cast their vote again.
 - IV. The voting rights of Members shall be in proportion to their shares in the paid-up equity share capital of the Company as on the cut-off date.
 - V. Any person, who acquires shares of the Company and becomes a Member of the Company after sending of the Notice and holding shares as of the cut-off date, may obtain the login ID and password by sending a request at evoting@nsdl.co.in. However, if he/she is already registered

with NSDL for remote e-voting then he/she can use his/her existing User ID and password for casting the vote.

- VI. The details of the process and manner for remote e-voting and joining the AGM are explained herein below:

INSTRUCTIONS FOR MEMBERS FOR REMOTE E-VOTING AND JOINING ANNUAL GENERAL MEETING:

The remote e-voting period begins on Monday, 18th September, 2023 (9:00 a.m. IST) and ends on Wednesday, 20th September, 2023 at 5.00 P.M. The remote e-voting module shall be disabled by NSDL for voting thereafter. The Members, whose names appear in the Register of Members / Beneficial Owners as on the record date (cut-off date) i.e. 15th September, 2023, may cast their vote electronically. The voting right of shareholders shall be in proportion to their share in the paid-up equity share capital of the Company as on the cut-off date, being 15th September, 2023.

The instructions for Members for remote E-voting are as given below: -

How do I vote electronically using NSDL e-Voting system?

The way to vote electronically on NSDL e-Voting system consists of “Two Steps” which are mentioned below:

Step 1: Access to NSDL e-Voting system

A) Login method for e-Voting and joining virtual meeting for Individual shareholders holding securities in demat mode

In terms of SEBI circular dated December 9, 2020, on e-Voting facility provided by Listed Companies, Individual shareholders holding securities in demat mode are allowed to vote through their demat account maintained with Depositories and Depository Participants. Shareholders are advised to update their mobile number and email Id in their demat accounts in order to access e-Voting facility.

Login method for Individual shareholders holding securities in demat mode is given below:

Type of shareholders	Login Method
Individual Shareholders holding securities in demat mode with NSDL.	1. Existing IDeAS user can visit the e-Services website of NSDL Viz. https://eservices.nsdl.com either on a Personal Computer or on a mobile. On the e-Services home page click on the “Beneficial Owner” icon under “Login” which is available under ‘IDeAS’ section, this will prompt you to enter your existing User ID and Password.

Type of shareholders	Login Method
	After successful authentication, you will be able to see e-Voting services under Value added services. Click on “Access to e-Voting” under e-Voting services and you will be able to see e-Voting page. Click on company name or e-Voting service provider i.e. NSDL and you will be re-directed to e-Voting website of NSDL for casting your vote during the remote e-Voting period or joining virtual meeting & voting during the meeting.
	2. If you are not registered for IDeAS e-Services, option to register is available at https://eservices.nsdl.com . Select “Register Online for IDeAS Portal” or click at https://eservices.nsdl.com/SecureWeb/IdEasDirectReg.jsp
	3. Visit the e-Voting website of NSDL. Open web browser by typing the following URL: https://www.evoting.nsdl.com/ either on a Personal Computer or on a mobile. Once the home page of e-Voting system is launched, click on the icon “Login” which is available under ‘Shareholder/Member’ section. A new screen will open. You will have to enter your User ID (i.e. your sixteen digit demat account number hold with NSDL), Password/OTP and a Verification Code as shown on the screen. After successful authentication, you will be redirected to NSDL Depository site wherein you can see e-Voting page. Click on company name or e-Voting service provider i.e. NSDL and you will be redirected to e-Voting website of NSDL for casting your vote during the remote e-Voting period or joining virtual meeting & voting during the meeting.
	4. Shareholders/Members can also download NSDL Mobile App “NSDL Speede” facility by scanning the QR code mentioned below for seamless voting experience.

NSDL Mobile App is available on



Type of shareholders	Login Method
Individual Shareholders holding securities in demat mode with CDSL	<p>1. Users who have opted for CDSL Easi / Easiest facility, can login through their existing user id and password. Option will be made available to reach e-Voting page without any further authentication. The users to login Easi /Easiest are requested to visit CDSL website www.cdslindia.com and click on login icon & New System Myeasi Tab and then use your existing my easi username & password.</p> <p>2. After successful login the Easi / Easiest user will be able to see the e-Voting option for eligible companies where the evoting is in progress as per the information provided by company. On clicking the evoting option, the user will be able to see e-Voting page of the e-Voting service provider for casting your vote during the remote e-Voting period or joining virtual meeting & voting during the meeting. Additionally, there is also links provided to access the system of all e-Voting Service Providers, so that the user can visit the e-Voting service providers' website directly.</p> <p>3. If the user is not registered for Easi/ Easiest, option to register is available at CDSL website www.cdslindia.com and click on login & New System Myeasi Tab and then click on registration option.</p> <p>4. Alternatively, the user can directly access e-Voting page by providing Demat Account Number and PAN No. from a e-Voting link available on www.cdslindia.com home page. The system will authenticate the user by sending OTP on registered Mobile & Email as recorded in the Demat Account. After successful authentication, user will be able to see the e-Voting option where the evoting is in progress and also able to directly access the system of all e-Voting Service Providers.</p>
Individual Shareholders (holding securities in demat mode) login through their depository participants	You can also login using the login credentials of your demat account through your Depository Participant registered with NSDL/CDSL for e-Voting facility. Upon logging in, you will be able to see e-Voting option. Click on e-Voting option, you will be redirected to NSDL/CDSL Depository site after successful authentication, wherein you can see e-Voting feature.

Type of shareholders	Login Method
	Click on company name or e-Voting service provider i.e. NSDL and you will be redirected to e-Voting website of NSDL for casting your vote during the remote e-Voting period or joining virtual meeting & voting during the meeting.

Important note: Members who are unable to retrieve User ID/ Password are advised to use Forget User ID and Forget Password option available at abovementioned website.

Helpdesk for Individual Shareholders holding securities in demat mode for any technical issues related to login through Depository i.e. NSDL and CDSL.

Login type	Helpdesk details
Individual Shareholders holding securities in demat mode with NSDL	Members facing any technical issue in login can contact NSDL helpdesk by sending a request at evoting@nsdl.co.in or call at 022 - 4886 7000 and 022 - 2499 7000
Individual Shareholders holding securities in demat mode with CDSL	Members facing any technical issue in login can contact CDSL helpdesk by sending a request at helpdesk.evoting@cdslindia.com or contact at toll free no. 1800 22 55 33

B) Login Method for e-Voting and joining virtual meeting for shareholders other than Individual shareholders holding securities in demat mode and shareholders holding securities in physical mode.

How to Log-in to NSDL e-Voting website?

1. Visit the e-Voting website of NSDL. Open web browser by typing the following URL: <https://www.evoting.nsdl.com/> either on a Personal Computer or on a mobile.
2. Once the home page of e-Voting system is launched, click on the icon "Login" which is available under 'Shareholder/Member' section.
3. A new screen will open. You will have to enter your User ID, your Password/OTP and a Verification Code as shown on the screen.

Alternatively, if you are registered for NSDL eservices i.e. IDEAS, you can log-in at <https://eservices.nsdl.com/> with your existing IDEAS login. Once you log-in to NSDL eservices after using your log-in credentials, click on e-Voting and you can proceed to Step 2 i.e. Cast your vote electronically.

4. Your User ID details are given below:

Manner of holding shares i.e. Demat (NSDL or CDSL) or Physical	Your User ID is:
a) For Members who hold shares in demat account with NSDL.	8 Character DP ID followed by 8 Digit Client ID For example if your DP ID is IN300*** and Client ID is 12***** then your user ID is IN300***12*****.
b) For Members who hold shares in demat account with CDSL.	16 Digit Beneficiary ID For example if your Beneficiary ID is 12***** then your user ID is 12*****.
c) For Members holding shares in Physical Form.	EVEN Number followed by Folio Number registered with the company For example if folio number is 001*** and EVEN is 101456 then user ID is 101456001***.

5. Password details for shareholders other than Individual shareholders are given below:

- If you are already registered for e-Voting, then you can use your existing password to login and cast your vote.
- If you are using NSDL e-Voting system for the first time, you will need to retrieve the 'initial password' which was communicated to you. Once you retrieve your 'initial password', you need to enter the 'initial password' and the system will force you to change your password.
- How to retrieve your 'initial password'?
 - If your email ID is registered in your demat account or with the company, your 'initial password' is communicated to you on your email ID. Trace the email sent to you from NSDL from your mailbox. Open the email and open the attachment i.e. a .pdf file. Open the .pdf file. The password to open the .pdf file is your 8 digit client ID for NSDL account, last 8 digits of client ID for CDSL account or folio number for shares held in physical form. The .pdf file contains your 'User ID' and your 'initial password'.
 - If your email ID is not registered, please follow steps mentioned below in process for those shareholders whose email ids are not registered.

6. If you are unable to retrieve or have not received the "Initial password" or have forgotten your password:

- Click on "Forgot User Details/Password?" (If you are holding shares in your demat account with NSDL or CDSL) option available on www.evoting.nsdl.com.
- Physical User Reset Password? (If you are holding shares in physical mode) option available on www.evoting.nsdl.com.

c) If you are still unable to get the password by aforesaid two options, you can send a request at evoting@nsdl.co.in mentioning your demat account number/folio number, your PAN, your name and your registered address etc.

d) Members can also use the OTP (One Time Password) based login for casting the votes on the e-Voting system of NSDL.

- After entering your password, tick on Agree to "Terms and Conditions" by selecting on the check box.
- Now, you will have to click on "Login" button.
- After you click on the "Login" button, Home page of e-Voting will open.

Step 2: Cast your vote electronically and join General Meeting on NSDL e-Voting system.

How to cast your vote electronically and join General Meeting on NSDL e-Voting system?

- After successful login at Step 1, you will be able to see all the companies "EVEN" in which you are holding shares and whose voting cycle and General Meeting is in active status.
- Select "EVEN" of company for which you wish to cast your vote during the remote e-Voting period and casting your vote during the General Meeting. For joining virtual meeting, you need to click on "VC/OAVM" link placed under "Join Meeting".
- Now you are ready for e-Voting as the Voting page opens.
- Cast your vote by selecting appropriate options i.e. assent or dissent, verify/modify the number of shares for which you wish to cast your vote and click on "Submit" and also "Confirm" when prompted.
- Upon confirmation, the message "Vote cast successfully" will be displayed.
- You can also take the printout of the votes cast by you by clicking on the print option on the confirmation page.
- Once you confirm your vote on the resolution, you will not be allowed to modify your vote.

General Guidelines for shareholders

- Institutional shareholders (i.e. other than individuals, HUF, NRI etc.) are required to send scanned copy (PDF/JPG Format) of the relevant Board Resolution/ Authority letter etc. with attested specimen signature of the duly authorized signatory(ies) who are authorized to vote, to the Scrutinizer by e-mail to bskashtwal@gmail.com with a copy marked to evoting@nsdl.co.in. Institutional shareholders (i.e. other than individuals, HUF, NRI etc.) can also upload their Board Resolution / Power of Attorney / Authority Letter etc. by clicking on "Upload Board Resolution / Authority Letter" displayed under "e-Voting" tab in their login.
- It is strongly recommended not to share your password with any other person and take utmost

care to keep your password confidential. Login to the e-voting website will be disabled upon five unsuccessful attempts to key in the correct password. In such an event, you will need to go through the "Forgot User Details/Password?" or "Physical User Reset Password?" option available on www.evoting.nsdl.com to reset the password.

3. In case of any queries, you may refer the Frequently Asked Questions (FAQs) for Shareholders and e-voting user manual for Shareholders available at the download section of www.evoting.nsdl.com or call on.: 022 - 4886 7000 and 022 - 2499 7000 or send a request to Ms. Soni Singh, Assistant Manager at evoting@nsdl.co.in

Process for those shareholders whose email ids are not registered with the depositories for procuring user id and password and registration of email ids for e-voting for the resolutions set out in this notice:

1. In case, shares are held in physical mode please provide Folio No., Name of shareholder, scanned copy of the share certificate (front and back), PAN (self-attested scanned copy of PAN card), AADHAR (self-attested scanned copy of Aadhar Card) by email to imclshares@apollohospitals.com. In case, shares are held in demat mode, please provide DPID-CLID (16 digit DPID + CLID or 16 digit beneficiary ID), Name, client master or copy of Consolidated Account statement, PAN (self-attested scanned copy of PAN card), AADHAR (self-attested scanned copy of Aadhar Card) to imclshares@apollohospitals.com. If you are an Individual shareholder holding securities in demat mode, you are requested to refer to the login method explained at step 1(A) i.e. Login method for e-Voting and joining virtual meeting for Individual shareholders holding securities in demat mode.
2. Alternatively, shareholder/members may send a request to evoting@nsdl.co.in for procuring user id and password for e-voting by providing above mentioned documents.
3. In terms of SEBI circular dated December 9, 2020, on e-Voting facility provided by Listed Companies, Individual shareholders holding securities in demat mode are allowed to vote through their demat account maintained with Depositories and Depository Participants. Shareholders are required to update their mobile number and email ID correctly in their demat account in order to access e-Voting facility.

THE INSTRUCTIONS FOR MEMBERS FOR e-VOTING ON THE DAY OF THE AGM ARE AS UNDER:

1. The procedure for e-Voting on the day of the AGM is same as the instructions mentioned above for remote e-voting.
2. Only those Members/ shareholders, who will be present in the AGM through VC/OAVM facility and have not casted their vote on the Resolutions through

remote e-Voting and are otherwise not barred from doing so, shall be eligible to vote through e-Voting system in the AGM.

3. Members who have voted through Remote e-Voting will be eligible to attend the AGM. However, they will not be eligible to vote at the AGM.
4. The details of the person who may be contacted for any grievances connected with the facility for e-Voting on the day of the AGM shall be the same person mentioned for Remote e-voting.

INSTRUCTIONS FOR MEMBERS FOR ATTENDING THE AGM THROUGH VC/ OAVM ARE AS UNDER:

1. Member will be provided with a facility to attend the AGM through VC/OAVM through the NSDL e-Voting system. Members may access by following the steps mentioned above for Access to NSDL e-Voting system. After successful login, you can see link of "VC/OAVM link" placed under "Join meeting" menu against company name. You are requested to click on VC/OAVM link placed under Join General Meeting menu. The link for VC/OAVM will be available in Shareholder/Member login where the EVEN of Company will be displayed. Please note that the members who do not have the User ID and Password for e-Voting or have forgotten the User ID and Password may retrieve the same by following the remote e-Voting instructions mentioned in the notice to avoid last minute rush.
2. Members are encouraged to join the Meeting through Laptops for better experience.
3. Further Members will be required to allow Camera and use Internet with a good speed to avoid any disturbance during the meeting.
4. Please note that Participants Connecting from Mobile Devices or Tablets or through Laptop connecting via Mobile Hotspot may experience Audio/Video loss due to Fluctuation in their respective network. It is therefore recommended to use Stable Wi-Fi or LAN Connection to mitigate any kind of aforesaid glitches.
5. Shareholders who would like to express their views / ask questions during the meeting may register themselves as a speaker by sending their request mentioning their name, demat account number / folio number, email id, mobile number at imclshares@apollohospitals.com from 16th September, 2023 (9.00 a.m.) to 19th September, 2023 (5.00 p.m.). Those Members who have registered themselves as a speaker will only be allowed to express their views/ask questions during the AGM. The Company reserves the right to restrict the number of speakers depending on the availability of time for the AGM.

Other Instructions

1. The Scrutinizer shall, immediately after the conclusion of voting at the AGM, unblock the votes cast through remote e-voting (votes cast during the AGM and votes cast through remote e-voting) in the presence of at least two witnesses not in the employment of

the Company and shall make, not later than two working days from the conclusion of the AGM, a consolidated scrutinizer's report of the total votes cast in favour or against, if any, to the Chairman or a person authorized by him in writing, who shall countersign the same and declare the result of the voting forthwith.

2. The results declared along with the consolidated scrutinizer's report shall be placed on the website of the Company <https://delhi.apollohospitals.com> and on the website of NSDL. The results shall simultaneously be communicated to the Stock Exchanges, where the shares of the Company are listed.
3. Subject to receipt of requisite number of votes, the resolutions shall be deemed to be passed on the date of the Meeting i.e., 21st September 2023.

EXPLANATORY STATEMENT

The Explanatory Statement pursuant to Section 102 of the Companies Act, 2013 ('Act'), given hereunder sets out all material facts relating to the special business mentioned at Item No. 5 of the accompanying Notice dated 4th August, 2023.

Item No. 5

The Board, on the recommendation of Audit Committee, has re-appointed M/s Devarajan Swaminathan and Co., Cost Accountants (Firm Registration No. 100669), as the Cost Auditor to conduct the audit of the cost records of the Company for the year ending 31st March, 2024, at a remuneration of Rs. 6.50 lakhs plus taxes as applicable and reimbursement of out-of-pocket expenses.

In accordance with the provisions of Section 148 of the Act, read with the Companies (Audit and Auditors) Rules, 2014, the remuneration payable to the Cost Auditors has to be ratified by the members of the company.

Accordingly, consent of the members is sought for passing an ordinary resolution as set out at Item No. 5 of the Notice for ratification of the remuneration payable to the cost auditors for the year ending 31st March, 2024.

None of the Directors and Key Managerial Personnel of the Company and their relatives are, in any way, concerned or interested, financially or otherwise, in the resolution set out at Item No. 5.

The Board of Directors of the Company recommends the resolution at Item No. 5 of the Notice, in relation to the ratification of remuneration to Cost Auditors, for approval of the members.

**By order of the Board of Directors
for Indraprastha Medical Corporation Limited**

Priya Ranjan
AVP - Corporate Affairs & Legal
(Company Secretary & Compliance Officer)

Registered Office:

Sarita Vihar, Delhi-Mathura Road,
New Delhi – 110 076, India
CIN: L24232DL1988PLC030958

Date: 4th August, 2023

PROFILE OF DIRECTORS SEEKING APPOINTMENT / RE-APPOINTMENT

The particulars of the Directors who are proposed to be appointed / re-appointed, are as given below:

i. Name : Ms. Suneeta Reddy

Age : 64 years

DIN : 00001873

Designation / Category of Directorship: Non-Independent, Non-Executive Director

Relationship with other Directors: Daughter of Dr. Prathap C Reddy and Sister of Dr. Sangita Reddy

Qualifications: Bachelor of Arts in Economics, Public Relations and Marketing, Diploma in Financial Management; and completed the Owner / President Management Program at Harvard Business School, Boston (USA).

Experience: Ms. Suneeta Reddy has over 36 years experience in Healthcare Industry.

Expertise in specific functional areas: Strategy, Hospital Operations, Corporate Services viz., Finance & Accounts, Procurement, HR, Legal, MIS, Internal Audit, ERM.

Terms and conditions of Appointment / Re-appointment: Non-Executive Director, liable to retire by rotation.

Date of first appointment on the Board: 31st August, 2005.

Directorship of other board as on 31st March, 2023 and the listed entities from which the person has resigned in the past three years:

Public Limited Companies

1. Apollo Hospitals Enterprise Ltd.
2. Apollo Sindoori Hotels Ltd.
3. Apollo Multispecialty Hospitals Ltd.
4. Apollo Medics international Life Sciences Ltd.
5. Apollo Hospitals North Ltd.
6. Lifetime Wellness Rx International Ltd.
7. Apeejay Surrendra Park Hotels Ltd. (resigned w.e.f. 23.12.2022)

Private Companies

1. Garuda Energy Private Ltd.
2. Helios Holdings Private Ltd.
3. Faber Sindoori Management Services Private Ltd.
4. Viswambhara Nutriville Private Ltd. (resigned w.e.f. 30.07.2021)
5. Apollo Medicals Private Ltd. (resigned w.e.f. 09.11.2020)

Membership / Chairmanship of Committees of other Boards as on 31st March, 2023:

Corporate Social Responsibility Committee:

- ▶ Apollo Hospitals Enterprise Ltd., Member
- ▶ Faber Sindoori Management Services Private Ltd., Member

Stakeholders Relationship Committee:

- ▶ Apollo Hospitals Enterprise Ltd., Member

Risk Management Committee:

- ▶ Apollo Hospitals Enterprise Ltd., Chairperson

Nomination and Remuneration Committee:

- ▶ Apollo Medics international Life Sciences Ltd., Member

Investment Committee:

- ▶ Apollo Hospitals Enterprise Ltd., Member

Details of remuneration last drawn:

Sitting Fees	Rs. 6,75,000/-
Commission	Rs. 7,00,000/-
Total	Rs. 13,75,000/-

Shareholding in the Company including shareholding as a beneficial owner: 1,38,293 Equity shares

Number of Meetings of the Board attended during the FY 2022-23: 4

i. Name : Dr. Sangita Reddy

Age : 61 years

DIN : 00006285

Designation / Category of Directorship: Non-Independent, Non-Executive Director

Relationship with other Directors: Daughter of Dr. Prathap C Reddy and Sister of Ms. Suneeta Reddy

Qualifications: Bachelor of Science degree from Womens Christian College, Chennai; post-graduation courses in Hospital Administration from Rutgers University, Harvard University and the National University of Singapore.

Dr Sangita Reddy has been conferred with an Honorary Doctorate by Macquarie University Australia, in recognition of her untiring efforts and resolute commitment to bringing transformative changes in healthcare, development of Health IT and championing manifold initiatives both in India and abroad.

Experience: Dr. Sangita Reddy has over 32 years experience in Healthcare Industry.

Expertise in specific functional areas: Hospitals Operations, Clinics, CRM, Education, Mobile Health, Clinical Information System, HIS, digital technology and Artificial Intelligence.

Terms and conditions of Appointment / Re-appointment: Non-Executive Director, liable to retire by rotation.

Date of first appointment on the Board: 24th August, 2020.

Directorship of other board as on 31st March, 2023 and the listed entities from which the person has resigned in the past three years:

Public Limited Companies

1. Apollo Hospitals Enterprise Ltd.
2. Apollo Health and Lifestyle Ltd.
3. Family Health Plan Insurance (TPA) Ltd. (resigned w.e.f. 09.08.2020)
4. PCR Investments Ltd.
5. Apollo Med Skills Ltd. (resigned w.e.f.12.09.2022)
6. HealthNet Global Ltd.
7. Apollo Home Healthcare Ltd.
8. Apollo Sugar Clinics Ltd.
9. Apollo HealthCo Ltd.

Private Companies

1. Apollo Gleneagles PET-CT (P) Ltd.
2. Kar Auto Private Ltd.
3. Searchlight Health Private Ltd.
4. Elixir Communities Private Ltd.
5. Apollo TeleHealth Services (P) Ltd.
6. AMG Healthcare Destination Pvt Ltd.
7. Medvarsity Technologies Private Ltd.
8. Health Axis Private Limited
9. Infinite Care Private Limited

Membership / Chairmanship of Committees of other Boards as on 31st March, 2023:

Corporate Social Responsibility Committee:

- ▶ Apollo Hospitals Enterprise Ltd., Member
- ▶ Apollo Health and Lifestyle Ltd., Member

Audit Committee:

- ▶ AMG Healthcare Destination Pvt. Ltd., Member
- ▶ Apollo Health and Lifestyle Ltd., Member

Risk Management Committee:

- ▶ Apollo Health and Lifestyle Ltd., Member

Nomination and Remuneration Committee:

- ▶ Apollo HealthCo Ltd., Member

Investment Committee:

- ▶ Apollo Health and Lifestyle Ltd., Chairperson

Details of remuneration last drawn:

Sitting Fees	Rs. 5,75,000/-
Commission	Rs. 7,00,000/-
Total	Rs. 12,75,000/-

Shareholding in the Company including shareholding as a beneficial owner: 8,600 Equity shares

Number of Meetings of the Board attended during the FY 2022-23: 4

DIRECTORS' REPORT

Dear Members,

Your Directors are pleased to present the thirty-fifth Annual Report and the audited financial statements for the financial year ended 31st March 2023.

FINANCIAL RESULTS

(Rs. in crore except per share data)

Particulars	FY 2022-23	FY 2021-22
Income from Operations	1098.67	888.16
Profit before tax	117.18	79.07
Provisions for Tax	31.03	20.45
Profit for the year	86.15	58.62
Earnings per share	9.40	6.39

RESULTS OF OPERATIONS

During the year under review, the Company recorded income from operations Rs. 1098.67 crore against Rs. 888.16 crore in the corresponding period last fiscal - an increase of 24%.

The Profit Before Tax for financial year ended 31st March, 2023, stood at Rs. 117.18 crore as compared to profit of Rs. 79.07 crore for the corresponding period of the previous year. The Profit After Tax for year ended 31st March, 2023, stood at Rs. 86.15 crore as compared to a profit of Rs. 58.62 crore for the corresponding period of the previous year.

TRANSFER TO RESERVES

The Company does not propose to transfer any amount to the General Reserve out of the amount available for appropriation in the current year.

DIVIDEND

The Board of Directors have recommended a dividend of Rs. 3.00 per equity share (30% on face value of Rs. 10 per share) on the paid-up equity share capital of the company for the financial year ended 31st March, 2023, amounting to Rs. 27.50 crores, which if approved, at the forthcoming Annual General Meeting on 21st September, 2023, will be paid to those shareholders whose names appear in the Register of Members as at the closing

hours of business on 21st September 2023. In respect of shares held in electronic form, the dividend will be paid on the basis of beneficial ownership furnished by the depositories viz., NSDL and CDSL for this purpose.

In view of the changes made under the Income-tax Act, 1961, by the Finance Act, 2020, dividends paid or distributed by the Company shall be taxable in the hands of the shareholders. Your Company shall, accordingly, make the payment of the dividend after deduction of tax at source.

DIVIDEND DISTRIBUTION POLICY

The Board approved and adopted a dividend distribution policy which is posted on the Company's website at <https://delhi.apollohospitals.com/pdf/Dividend-Distribution-Policy.pdf>

THE STATE OF COMPANY AFFAIRS

The financial year 2022-23 was a year of reset for both, the clinical services, and the infrastructure. The hospital introduced a slew of differentiated clinical programmes including Structural Heart Diseases, minimally invasive and Robotic Cardiac Surgeries, Leadless pacemakers, Cardio-diagnostics like Cardiac MRI and niche Gastroenterological procedures like Third space endoscopy.

Several complex procedures were performed by our team of clinicians, bringing respite to many chronically ill patients and their families. A 75-year-old post CABG patient successfully underwent TAVR, while a Pakistani teenager with a 90-degree bend in the neck, was successfully treated. Multiple cases of Total Hip replacements and many cases of complicated congenital heart diseases were carried out successfully by our team of doctors.

During the year under review, the following rare procedures were performed at the hospital: -

- A 71-year-old-male, diagnosed as a case of localized adenocarcinoma prostate, underwent a successful nerve sparing robotic radical prostatectomy with amniotic nerve wrap with bilateral pelvic lymph node dissection.
- A 61-year-old female patient successfully underwent a transcatheter mitral valve replacement (TMVR).

- A 64-year-old male from Fiji underwent Robotic assisted total arterial triple vessel coronary artery bypass surgery.
- A 28-year-old young man from Oman was treated successfully for a deformity in his left knee using 3-D printing technology.
- A 21-year-old male underwent a successful Robot assisted Trans-Oral surgery to remove a large parapharyngeal space tumour (tumour in the deep tissues of the neck, nerves, lymph nodes, and parts of the salivary gland).
- A total hip arthroplasty was successfully performed on a 50-year-old. The patient was suffering with an extremely rare condition of 'Primary Synovial chondromatosis of the Hip'.

Several new equipment were added to the hospital's arsenal. The most significant investment being the ZAP-X Gyroscopic Radiosurgery system. To accommodate the increasing number of clinical services and to better patient experience, the hospital undertook a series of transformative infrastructural revamp projects including cohorting all operating theatres, creating a cohorted endoscopy suite, new dialysis suite, new international patient lounge and new Oncology OPD.

A biomethanation plant is being set-up with a capacity of 1 Ton to enable in-house treatment of Food, Kitchen, and Biomass waste and convert the waste into Biogas and Organic Manure.

Awards and Accolades

The Hospital received a number of awards and accolades during the year. Some of them are as under: -

Award	Category / Project Awarded
Association of Healthcare Providers (India)	Patient Friendly Hospital
Consortium of Accredited Healthcare Organizations (CAHO)	Certificate of Achievement for best practices on medication safety
D L Shah Award	Call-a-cab
The Week	Best private multispecialty hospital in Delhi
Quality Council of India	For best practices' implementation in Quality: 'An Eye on Insulin' For Innovation in Service Technology- 'Unleashing the power of Technology with Nurses'

On a Public Interest Litigation (PIL) regarding free treatment in the hospital, the Hon'ble Delhi High Court vide its order dated 22nd September, 2009, has held that free treatment provided by the hospital shall be inclusive of medicines and consumables.

The Company has filed a Special Leave Petition (SLP) before the Hon'ble Supreme Court of India challenging the order of the Hon'ble Delhi High Court. The Hon'ble Supreme Court has admitted the SLP and has passed an interim order on 30th November, 2009, pursuant to which, the Company has been providing free treatment to the patients referred by the Government of NCT of Delhi and has been charging only for medicines & medical consumables. The financial impact in the matter can be quantified only after the final decision by the Hon'ble Supreme Court of India.

The Directorate of Health Services, Government of NCT of Delhi, has appointed a Nodal Medical Officer to be permanently stationed in the Hospital to support, guide and monitor the treatment of patients referred by the Government.

The Company has moved an Interlocutory Application before the Hon'ble Supreme Court seeking direction that the conditions relating to provision of free treatment facilities for patients belonging to indigent category to the extent of 10% IPD and 25% OPD be made applicable to the Company as have been made applicable in case of other hospitals. Additionally, the Company has also made representations before the Government of NCT of Delhi to allow the Company to extend free treatment including medicines and consumables up to 10% IPD and 25% OPD as applicable to other hospitals.

During the year, a total of 37207 patients (33490 Out Patients and 3717 In Patients) were treated under the free category.

MATERIAL CHANGES AFFECTING THE FINANCIAL POSITION OF THE COMPANY

No material change and commitment affecting the financial position of the Company, has occurred between the financial year ended on 31st March, 2023, and the date of the report. There has been no change in the nature of business of the Company.

SUBSIDIARIES, JOINT VENTURES AND ASSOCIATE COMPANIES

The Company has no subsidiaries or associate companies. Also, it does not have any joint venture operation with any other entity.

CORPORATE GOVERNANCE

The Company is committed to maintain the highest standards of corporate governance and adhere to the corporate governance requirements set out by SEBI. The report on corporate governance as required under the Listing Regulations, forms an integral part of this report. The requisite certificate from Mr. Baldev Singh Kashtwal, Practicing Company Secretary, confirming the

compliance with the conditions of corporate governance is attached to the report on Corporate Governance.

MANAGEMENT DISCUSSION AND ANALYSIS REPORT

Management Discussion and Analysis Report for the year under review, as stipulated under Regulation 34 of the Listing Regulations, forms an integral part of this report.

BUSINESS RESPONSIBILITY & SUSTAINABILITY REPORT

In terms of the provisions of the Listing Regulations, the Business Responsibility & Sustainability Report is not applicable to the Company.

SEXUAL HARASSMENT

The Company has adopted a policy on prevention, prohibition and redressal of sexual harassment at the workplace in line with the provisions of the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013, and the rules framed thereunder. The Company has an Internal Complaints Committee for providing a redressal mechanism pertaining to sexual harassment of women employees at the work place. During the year, nine complaints were received under the policy and all of them were disposed off.

VIGIL MECHANISM / WHISTLE BLOWER POLICY

The Company has established a vigil mechanism for Directors and Employees to report their genuine concerns, the details of which are given in the Corporate Governance Report. The Whistle Blower Policy may be accessed on the Company's website on the <https://delhi.apollohospitals.com/wp-content/uploads/2021/08/Whistle-Blower-Policy.pdf>

During the year, no matter or incident has been received under the Whistle Blower Policy of the Company.

PARTICULARS OF LOANS GIVEN, INVESTMENTS MADE, GUARANTEES GIVEN AND SECURITIES PROVIDED

During the year, the Company has not given any loan or made an investment, nor given any guarantee in terms of Section 186 of the Companies Act, 2013.

DEPOSITS

During the year, the Company has not accepted any deposit as contemplated under Chapter V of the Companies Act, 2013.

DIRECTORS AND KEY MANAGERIAL PERSONNEL

Board Composition and Independent Directors

As on 31st March 2023, the Board consisted of the Non-Executive Chairman, one Executive Director, six Non-Executive Directors and nine Independent Directors.

Independent directors are appointed, based on the recommendation of the Nomination and Remuneration Committee, for a term of five years and are not liable to retire by rotation. In the opinion of the Board, the Independent Directors fulfil the conditions specified in the Listing Regulations and are independent of the management.

All Independent Directors have given their declarations that they meet the criteria of independence as laid down under Section 149(6) of the Companies Act, 2013, and Regulation 16(b) of the SEBI Listing Regulations.

In the opinion of the Board, the Independent Directors possess the requisite expertise and experience and are persons of high integrity and repute. They fulfill the conditions specified in the Act and the Listing Regulations and they are independent of the management.

Retirement by Rotation

Pursuant to Section 152 of the Companies Act 2013, Ms. Suneeta Reddy and Dr. Sangita Reddy, Directors, retire by rotation at the ensuing Annual General Meeting and being eligible, have offered themselves for re-appointment. Based on the outcome of the performance evaluation process, the Board recommends their reappointment. The notice convening the AGM, to be held on 21st September, 2023, sets out the relevant details.

Change in Board Composition

Mr. Udit Prakash Rai - Non-Executive - Non-Independent Director, has resigned, as a Director of the Company, w.e.f. 4th August, 2023, due to his personal reasons.

Key Managerial Personnel

Pursuant to the provisions of Section 203 of the Companies Act, 2013, the Key Managerial Personnel of the Company are Mr. Shivakumar Pattabhiraman - Managing Director, Mr. C.P. Tyagi - Chief Financial Officer and Mr. Priya Ranjan - Associate Vice President - Corporate Affairs & Legal.

BOARD EVALUATION

Pursuant to the provisions of the Companies Act, 2013, and in terms of Regulation 17(10) of the SEBI Listing Regulations, the Board has carried out an annual performance evaluation of its own performance, the Directors individually as well as the working of the Committees. The manner in which the evaluation has been carried out has been enumerated in the Corporate Governance Report.

NOMINATION AND REMUNERATION POLICY

The Board has, on the recommendation of the Nomination and Remuneration Committee, approved a policy for selection and appointment of Directors, Senior Management team and their remuneration. Note on the Nomination and Remuneration Policy is mentioned in the Corporate Governance Report.

MEETINGS OF THE BOARD

The Board met four times during the financial year, the details of which are given in the Corporate Governance Report. The intervening gap between the Meetings was within the period prescribed under the Companies Act, 2013, read with the Listing Regulations.

RISK MANAGEMENT

The Board of Directors had constituted a Risk Management Committee to identify elements of risk in different areas of operations and to develop a policy for actions associated to mitigate the risks. The Committee on a timely basis informed the members of the Board about risk assessment and minimization procedures. In the opinion of the Committee, there was no risk that may threaten the existence of the Company. The details of the Risk Management Committee are included in the Corporate Governance Report.

INTERNAL FINANCIAL CONTROLS AND THEIR ADEQUACY

The Company has an Internal Control System, commensurate with the size, scale and complexity of its operations.

To maintain its objectivity and independence, the Internal Audit function reports to the Audit Committee. The details of the internal control system and its terms of reference are set out in the Management Discussion and Analysis Report forming part of the Board's Report.

The Board of Directors has laid down internal financial controls to be followed by the Company and the policies and procedures to be adopted by the Company for ensuring the orderly and efficient conduct of its business,

including adherence to the Company's policies, the safeguarding of its assets, prevention and detection of frauds and errors, the accuracy and completeness of the accounting records, and the timely preparation of reliable financial information. The Audit Committee evaluates the internal financial control systems periodically.

SIGNIFICANT AND MATERIAL ORDERS PASSED BY THE REGULATORS OR COURTS

There are no significant material orders passed by the Regulators / Courts which would impact the going concern status of the Company and its future operations.

DIRECTORS' RESPONSIBILITY STATEMENT

Pursuant to Section 134(5) of the Companies Act, 2013, the Board of Directors to the best of their knowledge hereby state and confirm:

- a. that in the preparation of the annual financial statements for the year ended 31st March, 2023, the applicable accounting standards have been followed along with proper explanations relating to material departures, if any;
- b. that such accounting policies have been selected and applied consistently, and judgement and estimates have been made that are reasonable and prudent so as to give a true and fair view of the state of affairs of the Company as at 31st March, 2023, and of the profit of the Company for the year ended on that date;
- c. that proper and sufficient care has been taken for the maintenance of adequate accounting records in accordance with the provisions of the Companies Act, 2013, for safeguarding the assets of the Company and for preventing and detecting fraud and other irregularities;
- d. that the annual financial statements have been prepared on a going concern basis;
- e. that proper internal financial controls were in place and that the financial controls were adequate and were operating effectively;
- f. that systems to ensure compliance with the provisions of all applicable laws were in place and were adequate and operating effectively.

CONTRACTS AND ARRANGEMENTS WITH RELATED PARTIES

All contracts / arrangements / transactions entered by the Company during the financial year with related parties were in the ordinary course of business and on an arm's length basis. During the year, the Company has not entered into any contract / arrangement / transaction with related parties which could be considered material in

accordance with the policy of the Company on materiality of related party transactions.

The policy on materiality of related party transactions as approved by the Board may be accessed on the Company's website at <https://delhi.apollohospitals.com/pdf/Policy-on-Materiality-of-Related-Party-Transactions-and-Dealing-with-Related-Party-Transactions.pdf>

Your Directors draw the attention of the members to Notes to the financial statements which sets out related party disclosures. None of the Directors have any pecuniary relationships or transactions vis-a-vis the Company save and except to the extent as set out in the related party disclosures.

PARTICULARS OF EMPLOYEES AND REMUNERATION DISCLOSURES

In terms of the provisions of Section 197(12) of the Act read with Rules 5(2) and 5(3) of the Companies (Appointment and Remuneration of Managerial Personnel) Rules, 2014, as amended, a statement showing the names and other particulars of the employees drawing remuneration in excess of the limits set out in the said rules are provided in the Annual Report, which forms part of this Report.

Disclosures relating to remuneration and other details as required under Section 197(12) of the Act read with Rule 5(1) of the Companies (Appointment and Remuneration of Managerial Personnel) Rules, 2014 are also provided in the Annual Report, which forms part of this Report.

However, having regard to the provisions of Section 136(1) read with the relevant provisions of the Companies Act, 2013, the Annual Report excluding the aforesaid information is being sent to the members of the Company. The said information is available for inspection at the Registered Office of the Company during working hours. Any member interested in obtaining such information may write to the Company Secretary and the same will be furnished free of cost.

SHARE CAPITAL

The paid-up Equity Share Capital as on 31st March, 2023, was Rs. 91.67 crore.

During the year under review, the Company has not issued shares with differential voting rights nor granted stock options nor sweat equity. As of 31st March, 2023, the details of shareholding in the Company held by the Directors are set out in the Corporate Governance Report forming part of the Board's Report.

CREDIT RATINGS

During the year ended 31st March, 2023, ICRA has given long-term credit ratings of [ICRA]AA (pronounced ICRA

Double A) and short-term rating of A1+ (pronounced ICRA A one plus) for Rs. 55.00 crore bank facilities and short-term rating of A1+ (pronounced ICRA A one plus) for enhanced bank facilities of Rs. 7.50 crore.

Also, the ICRA has given short term credit ratings of [ICRA]A1+ (pronounced ICRA A One Plus) for Commercial Paper to the Company.

INDUSTRIAL RELATIONS

The Industrial Relations continued to be cordial during the year under review.

CORPORATE SOCIAL RESPONSIBILITY INITIATIVES

As part of its initiatives under Corporate Social Responsibility (CSR), the Company has undertaken projects in the areas of Rural Development, Healthcare, Education & Skill Development and Research in Healthcare.

These projects are in accordance with Schedule VII of the Companies Act, 2013. The Report on CSR activities for the financial year 2022-23 is annexed herewith marked as Annexure - 1 to this Report.

STATUTORY AUDITORS

The Members at the Annual General Meeting held on 23rd September, 2022, had approved the re-appointment of Statutory Auditors of your Company namely, S.N. Dhawan & CO LLP, Chartered Accountants, for the second and final term of five consecutive years, to hold office from the conclusion of the 34th Annual General Meeting till the conclusion of the 39th Annual General Meeting to be held in the year 2027.

The Report given by Statutory Auditors on the financial statement of the Company for the financial year 2022-23 is part of the Annual Report. The Notes on the financial statements referred to in the Auditor's Report are self-explanatory and do not call for any further comments.

The Auditors' Report on the financial statements of the Company for the financial year ended 31st March, 2023, is unmodified i.e. it does not contain any qualification, reservation or adverse remark.

COST AUDITORS

Pursuant to Section 148 of the Companies Act, 2013 read with the Companies (Cost Records and Audit) Amendment Rules, 2014, the Directors on the recommendation of the Audit Committee, appointed M/s Devarajan Swaminathan and Co., Cost Accountants (FRN 100669) to audit the cost accounts of the Company for the financial year 2023-24 on a remuneration of Rs. 6.50 lakhs.

As required under the Companies Act, 2013, the remuneration payable to the Cost Auditor is required to be placed before the members in a general meeting for their ratification. Accordingly, a resolution seeking member's ratification for the remuneration payable to M/s Devarajan Swaminathan and Co., Cost Accountants (FRN 100669) is included at Item No. 5 of the Notice convening the Annual General Meeting.

The Company has maintained cost records in accordance with the provisions of the Companies Act, 2013, read with the Companies (Cost Records and Audit) Amendment Rules, 2014, in respect of healthcare services.

SECRETARIAL AUDITORS

The Board had appointed M/s RSM & Co., a firm of Company Secretaries in Practice, to conduct Secretarial Audit for the financial year ended 31st March, 2023. The Secretarial Audit Report for the financial year ended 31st March, 2023, is annexed herewith marked as Annexure - 2, to this Report.

During the period under review, the Company has complied with the provisions of the Act, Rules, Regulations, Guidelines, Standards etc. and the same is covered under the Secretarial Audit Report, save and except that the Govt. of NCT of Delhi - one of the promoters of the Company, have not dematerialized their shareholding in the Company. Requests have been made by the Company to the Govt. of NCT of Delhi to get their shareholding dematerialized.

REPORTING OF FRAUDS BY AUDITORS

During the year under review, neither the statutory auditors nor the secretarial auditor has reported to the Audit Committee, under Section 143 (12) of the Companies Act, 2013, any instances of fraud committed against the Company by its officers or employees.

OTHER DISCLOSURES

- a. During the year, the Company had complied with the applicable, Secretarial Standards relating to "Meetings of the Board of Directors" and "General Meetings" during the year.
- b. There are no proceedings initiated/pending against your Company under the Insolvency and Bankruptcy

Code, 2016, which materially impact the business of the Company.

- c. There were no instances where your Company required the valuation for one time settlement or while taking loans from the Banks or Financial Institutions.

PARTICULARS REGARDING CONSERVATION OF ENERGY, TECHNOLOGY ABSORPTION AND FOREIGN EXCHANGE EARNINGS AND OUTGO.

Information as required to be disclosed on conservation of energy, technology absorption and foreign exchange earnings and outgo stipulated under Section 134(3)(m) of the Companies Act, 2013 read with Rule 8 of the Companies (Accounts) Rules, 2014, is annexed herewith marked as Annexure - 3 to this Report.

ANNUAL RETURN

In accordance with the provisions of Section 92(3) read with section 134(3)(a) of the Companies Act, 2013, and Rules framed thereunder, an annual return in the prescribed format for the financial year 2022-23 is available on the website of the Company at <https://delhi.apollohospitals.com/investor-relations/>

ACKNOWLEDGEMENT

Your Directors wish to place on record their sincere appreciation of the contribution made by the consultant doctors and the employees at all levels, towards the continued growth and prosperity of your Company.

Your Directors also wish to place on record their appreciation of business constituents, bankers and other financial institutions, the Government of NCT of Delhi and shareholders of the Company for their continued support.

For and on behalf of the Board

Jasmine Shah
Chairman
(DIN 08621290)

Place: New Delhi
Date : 4th August, 2023

ANNEXURE-1: ANNUAL REPORT ON CORPORATE SOCIAL RESPONSIBILITY (CSR) ACTIVITIES

1.	Brief outline on CSR Policy of the Company	<p>The Company's CSR Policy focuses on activities under the following broad segments :</p> <ol style="list-style-type: none"> 1. Rural Development 2. Healthcare 3. Education and Skill Development 4. Promote Research in Healthcare <p>During the year, CSR activities were carried out to create a meaningful and lasting impact on the communities by helping them transcend barriers of socio-economic development.</p> <p>The Company also extended comprehensive integrated healthcare services to the community and is committed to developing the skills of the youth through high quality education and research in healthcare services.</p>																																			
2.	Composition of the CSR Committee																																				
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">Sl. No.</th> <th style="width: 25%;">Name of Director</th> <th style="width: 30%;">Designation / Nature of Directorship</th> <th style="width: 15%;">Number of meetings of CSR Committee held during the year</th> <th style="width: 25%;">Number of meetings of CSR Committee attended during the year</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Prof. (Dr.) Mahesh Verma</td> <td>Chairperson (Non-Executive Director)</td> <td style="text-align: center;">2</td> <td style="text-align: center;">2</td> </tr> <tr> <td>2</td> <td>Mr. S. Regunathan</td> <td>Member (Independent Director)</td> <td style="text-align: center;">2</td> <td style="text-align: center;">2</td> </tr> <tr> <td>3</td> <td>Mr. Vikram Bhat</td> <td>Member (Non-Executive Director)</td> <td style="text-align: center;">2</td> <td style="text-align: center;">2</td> </tr> <tr> <td>4</td> <td>Dr. Sangita Reddy</td> <td>Member (Non-Executive Director)</td> <td style="text-align: center;">2</td> <td style="text-align: center;">2</td> </tr> <tr> <td>5</td> <td>Mr. Vinayak Chatterjee</td> <td>Member (Independent Director)</td> <td style="text-align: center;">2</td> <td style="text-align: center;">1</td> </tr> <tr> <td>6</td> <td>Dr. Menaka Guruswamy</td> <td>Member (Independent Director)</td> <td style="text-align: center;">2</td> <td style="text-align: center;">2</td> </tr> </tbody> </table>	Sl. No.	Name of Director	Designation / Nature of Directorship	Number of meetings of CSR Committee held during the year	Number of meetings of CSR Committee attended during the year	1	Prof. (Dr.) Mahesh Verma	Chairperson (Non-Executive Director)	2	2	2	Mr. S. Regunathan	Member (Independent Director)	2	2	3	Mr. Vikram Bhat	Member (Non-Executive Director)	2	2	4	Dr. Sangita Reddy	Member (Non-Executive Director)	2	2	5	Mr. Vinayak Chatterjee	Member (Independent Director)	2	1	6	Dr. Menaka Guruswamy	Member (Independent Director)	2	2	
Sl. No.	Name of Director	Designation / Nature of Directorship	Number of meetings of CSR Committee held during the year	Number of meetings of CSR Committee attended during the year																																	
1	Prof. (Dr.) Mahesh Verma	Chairperson (Non-Executive Director)	2	2																																	
2	Mr. S. Regunathan	Member (Independent Director)	2	2																																	
3	Mr. Vikram Bhat	Member (Non-Executive Director)	2	2																																	
4	Dr. Sangita Reddy	Member (Non-Executive Director)	2	2																																	
5	Mr. Vinayak Chatterjee	Member (Independent Director)	2	1																																	
6	Dr. Menaka Guruswamy	Member (Independent Director)	2	2																																	
3	Provide the web-link where the composition of CSR Committee, CSR Policy and CSR Projects approved by the Board are disclosed on the website of the Company	<p>(a) Composition of CSR Committee https://www.apollohospitals.com/delhi/downloads/composition-of-various-committees-of-board-of-directors-2022.pdf</p> <p>(b) CSR Policy http://www.apollohospdelhi.com/downloads/corporate-social-responsibility-policy.pdf</p> <p>(c) CSR Projects approved by the Board https://www.apollohospitals.com/delhi//csr-initiatives</p>																																			
4	Provide the details of Impact assessment of CSR Projects carried out in pursuance of sub-Rule (3) of rule 8 of the Companies (Corporate Social Responsibility Policy) Rules 2014, if Applicable (attach the report)	Not Applicable																																			
5	Details of the amount available for set off in pursuance of sub-rule (3) of rule 7 of the Companies (Corporate Social Responsibility Policy) Rules 2014 and amount required for set off for the financial year, if any	Nil																																			
6	Average net profit of the Company as per Section 135 (5) of the Companies Act, 2013	Rs. 4175.94 lakhs																																			
7	(a) Two percent of average net profits of the Company as per section 135 (5) of the Companies Act, 2013	Rs. 83.52 lakhs																																			
	(b) Surplus arising out of the CSR projects or programmes or activities of the previous financial years	Nil																																			
	(c) Amount required to be set off for the financial year, if any	Nil																																			
	(d) Total CSR Obligation for the financial year (7a + 7b)	Rs. 83.52 lakhs																																			

8	(a) CSR amount spent or unspent for the Financial year:									
	Total Amount Spent for the Financial Year. (in Rs. lakhs)			Amount Unspent (in Rs.)						
				Total Amount transferred to Unspent CSR Account as per section 135(6).			Amount transferred to any fund specified under Schedule VII as per second proviso to section 135(5).			
	85.37			Nil			Nil			
	(b) Details of CSR amount spent against ongoing projects for the financial year						Nil			
	(c) Details of CSR amount spent against other than ongoing projects for the financial year –									
Sl. No.	Name of the Project	Item from the list of activities in schedule VII to the act	Local area (Yes/No)	Location of the project		Amount spent for the project (in Rs. lakhs)	Mode of Implementation – Direct (Yes/No)	Mode of Implementation - Through Implementing Agency		
				State	District			Name	CSR Registration number	
1	Innovation Tinkering Labs: Creation of Satellite Tinkering Labs	VII(ii)	Yes	NCT of Delhi	South Delhi	30.00	No	Mantra Social Services	CSR00000796	
2	Health Initiatives for School Children: Sustainability support and grant to schools for differently abled children with special needs in Greater Kailash	VII(i)	Yes	NCT of Delhi	South Delhi	22.00	No	Servants of the People Society	CSR00011109	
3	Support for underprivileged children with neurological conditions: Supporting NGO Neuroaid & Reasearch Foundation that works with the underprivileged for the rehabilitation of neurological conditions	VII(i)	Yes	NCT of Delhi	South West Delhi	15.00	No	Neuroaid & Research Foundation	CSR00015148	
4	Preventive Healthcare Initiative: Supporting setting-up & running a free OPD clinic in Bhogal Jangpura, New Delhi	VII(i)	Yes	NCT of Delhi	South Delhi	10.00	No	Billion Hearts Beating	CSR00004760	
5	Preventive Healthcare Initiative: Adopting Shakur Basti underprivileged community for health camps and check-ups	VII(i)	Yes	NCT of Delhi	North West Delhi	1.99	No	Third Planet Foundation	CSR00000016	
6	Har Ghar Triranga Campaign: Participating in "Har Ghar Tiranga Campaign" of the Government of India through distribution of the national flag to staff members, patients and visitors	VII(ii)	Yes	NCT of Delhi	South East Delhi	2.13	Yes	Self	NA	
	Total					81.12				
	(d) Amount spent in Administrative Overheads					Rs. 4.25 lakhs				
	(e) Amount spent on Impact Assessment, if applicable					Not Applicable				
	(f) Total amount spent for the Financial Year (8b+8c+8d+8e)					Rs. 85.37 lakhs				
	(g) Excess amount for set off, if any					Nil				
9.	(a) Details of Unspent CSR amount for the preceding three financial years					Nil				
	(b) Details of CSR amount spent in the financial year for ongoing projects of the preceding financial year(s)					Nil				
10.	In case of creation or acquisition of capital asset, furnish the details relating to the asset so created or acquired through CSR spent in the financial year					Nil				
11.	Specify the reason(s), if the company has failed to spend two per cent of the average net profit as per section 135(5).					Not Applicable				

Prof. (Dr.) Mahesh Verma
Chairman - CSR Committee
Place: New Delhi
Date: 3rd August, 2023

Shivakumar Pattabhiraman
Managing Director
Place: New Delhi
Date: 3rd August, 2023

ANNEXURE-2: FORM NO. MR-3

SECRETARIAL AUDIT REPORT

FOR THE FINANCIAL YEAR ENDED ON 31ST MARCH, 2023

[Pursuant to section 204(1) of the Companies Act, 2013 read with Rule No. 9 of the Companies (Appointment and Remuneration of Managerial Personnel) Rules, 2014

To

The Members
Indraprastha Medical Corporation Limited
CIN : L24232DL1988PLC030958
Sarita Vihar, Delhi - Mathura Road,
New Delhi -110076

We have conducted the Secretarial Audit of the compliance of applicable statutory provisions and the adherence to good corporate practices by Indraprastha Medical Corporation Limited (hereinafter called "the Company"). The secretarial audit was conducted in a manner that provided us a reasonable basis for evaluating the corporate conducts / statutory compliances and expressing our opinion thereon.

Based on our verification of the Company's books, papers, minute books, forms and returns filed and other records maintained and also the information provided by the company, its officers, agents and authorised representatives during the conduct of secretarial audit, we hereby report that in our opinion, the Company has, during the audit period covering the financial year ended on 31st March, 2023 complied with the statutory provisions listed hereunder and also that the company has proper Board-Processes and Compliance-Mechanism in place to the extent, in the manner and subject to the reporting made hereinafter.

We have examined the books, papers, minute books, forms and returns filed and other records maintained by the Company for the financial year ended on 31st March, 2023 according to the provisions of:

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| <ul style="list-style-type: none"> (i) The Companies Act, 2013 ("the Act") and rules made thereunder; (ii) The Securities Contracts (Regulation) Act, 1956 ('SCRA') and the rules made thereunder; (iii) The Depositories Act, 1996 and the Regulations and bye-laws framed thereunder; (iv) The Foreign Exchange Management Act, 1999 and the Rules and Regulations made thereunder to the extent of Foreign Direct Investment, Overseas Direct Investment, and External Commercial Borrowings; (v) The following Regulations and Guidelines prescribed under the Securities and Exchange Board of India Act, 1992 ('SEBI Act'): <ul style="list-style-type: none"> (a) Securities and Exchange Board of India (Listing Obligations and Disclosures Requirements) Regulations, 2015; | <ul style="list-style-type: none"> (b) Securities and Exchange Board of India (Issue of Capital and Disclosures Requirements) Regulations, 2018; (c) Securities and Exchange Board of India (Substantial Acquisition of Shares and Takeovers) Regulations, 2011; (d) Securities and Exchange Board of India (Buy Back of Securities) Regulations, 2018 (Not applicable during the Audit Period); (e) Securities and Exchange Board of India (Share Based Employee Benefits and Sweat Equity) Regulations, 2021 (Not applicable during the Audit Period); (f) Securities and Exchange Board of India (Issue and Listing of Non-Convertible Securities) Regulations, 2021; (Not applicable during the Audit Period); (g) Securities and Exchange Board of India (Prohibition of Insider Trading) Regulations, 2015; (h) Securities and Exchange Board of India (Delisting of Equity Shares) Regulations, 2021 ('Delisting Regulations') (Not applicable during the Audit Period); (i) Securities and Exchange Board of India (Registrar to an Issue and Share Transfer Agents) Regulations, 1993 regarding Companies Act and dealing with client to the extent of securities issued (Not applicable during the Audit Period); (j) Securities and Exchange Board of India (Settlement of Administrative and Civil Proceedings) Regulations, 2018 (Not applicable during the Audit Period); (k) The Securities and Exchange Board of India (Depositories and Participants) Regulations, 2018 (to the extent applicable); (l) The Securities and Exchange Board of India (Investor Protection and Education Fund) Regulations, 2009; and (vi) Food Safety and Standards Act, 2006; (vii) Prevention of Food Adulteration Act, 1954. (viii) Employees Provident Fund and Miscellaneous Provisions Act, 1952; (ix) Employees State Insurance Act, 1948; |
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| <ul style="list-style-type: none"> (x) Industrial Dispute Act, 1947; (xi) Minimum Wages Act, 1948; (xii) Payment of Bonus Act, 1965; (xiii) Payment of Gratuity Act, 1972; (xiv) Payment of Wages Act, 1936; (xv) Apprentices Act, 1961; (xvi) Employment Exchange (Compulsory Notification of Vacancies) Act, 1959; (xvii) Maternity Benefit Act, 1961; (xviii) Employees Compensation Act, 1923; (xix) Contract Labour (Regulation & Abolition) Act, 1970; (xx) Sexual Harassment of Women at Work Place (Prevention, Prohibition and Redressal) Act, 2013; (xxi) Delhi Shops and Establishments Act, 1954; (xxii) Environment Protection Act, 1986 and other Environmental Laws; (xxiii) Air (Prevention and Control of Pollution) Act, 1981 and Rules; (xxiv) Water (Prevention and Control of Pollution) Act, 1974 and Rules; (xxv) Noise Pollution (Regulation and Control) Rules, 2000; (xxvi) Delhi Nursing Council Act, 1997; (xxvii) Indian Nursing Council Act, 1947; (xxviii) Delhi Nursing Home Registration Act, 1953; (xxix) Indian Medical Council Act, 1956; (xxx) Delhi Medical Council Act, 1997; (xxxi) Medical Termination of Pregnancy Act, 1971 and Rules; (xxxii) Narcotics Drugs & Psychotropic Substances Act, 1985; (xxxiii) Drugs and Cosmetics Act, 1940; (xxxiv) Blood Bank Regulation under Drugs and Cosmetics Rules, 1999; (xxxv) Pre-natal Diagnostic Techniques Act, 1994 and Rules; (xxxvi) Transplantation of Human Organ Act, 1994 and Rules; (xxxvii) Drugs & Magic Remedies (Objectionable Advertisement) Act, 1954; (xxxviii) Bio-Medical Waste Management Handling Rules, 1998; | <ul style="list-style-type: none"> (xxxix) Indian Boilers' Act, 1923 and Rules; (xl) Petroleum Act, 1934 and Rules; (xli) Hazardous Waste (Management & Handling) Rules, 1989; (xlii) Delhi Fire Prevention and Fire Safety Act, 1986; (xliii) Delhi Fire services Act, 2007; (xliv) Delhi Lift Rules, 1942; (xlv) Prohibition of Smoking in Public Places Rules, 2008; (xlvi) Delhi Registration of Birth and Deaths Act, 1969 <p>We have also examined the compliance with the applicable clauses of the following:</p> <ul style="list-style-type: none"> (i) Secretarial Standards with respect to Meetings of Board of Directors (SS-1) and General Meetings (SS-2) issued by The Institute of Company Secretaries of India; (ii) The Uniform Listing Agreements entered into by the Company with BSE Ltd. and the National Stock Exchange of India Limited. <p>During the period under review the Company has complied with the provisions of the Act, Rules, Regulations, Guidelines, Standards etc. mentioned above except the following:</p> <p><i>The Govt. of NCT of Delhi is one of the promoters of the Company and is holding 23834200 Equity Shares of Rs. 10/- each fully paid-up in the Company. However, these shares are yet to be dematerialised as required under Regulation 31(2) of the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015.</i></p> <p>We further report that the compliance by the Company of applicable financial laws, such as direct and indirect tax laws, has not been reviewed in this audit since the same have been subject to review by the statutory auditors.</p> <p>We further report that:</p> <ul style="list-style-type: none"> • The Board of Directors of the Company is duly constituted with proper balance of Executive Directors, Non-Executive Directors, Independent Directors and Woman Directors. The Changes in the composition of the Board of Directors that took place during the period under review were carried out in compliance with the provisions of the Act; • Adequate notice is given to all Directors to schedule the Board Meetings, agenda and detailed notes on agenda were sent at least seven days in advance, and a system exists for seeking and obtaining further information and clarification on the agenda items before the meeting and for meaningful participation at the meeting; and • As per the minutes, the decision at the Board meetings were taken unanimously. |
|--|---|

We further report that there are adequate systems and processes in the Company commensurate with its size and operations to monitor and ensure compliance with applicable laws, rules, regulations and guidelines.

We further report that during the audit period, there were no instances of:

- (i) Public / Rights / Preferential Issue of Shares / Debenture / Sweat Equity;
- (ii) Redemption / Buy-back of Securities;
- (iii) Major decisions taken by the members in pursuant to section 180 of the Companies Act, 2013;
- (iv) Merger / Amalgamation / Reconstruction etc.;

(v) Foreign Technical Collaborations.

CS BALDEV SINGH KASHTWAL
PARTNER
RSM & CO.

COMPANY SECRETARIES

Membership Number: FCS NO. 3616

Certificate of Practice NO.: 3169

ICSI – UDIN: F003616E000355330

Peer Review Certificate No.: 978/2020

ICSI-Unique Identification No.: P1997DE017000

Place : Delhi

Date : May 23, 2023

Note: This report is to be read with our letter of even date which is annexed as an "Annexure-A" and forms an integral part of this report.

Annexure-A

To

The Members
Indraprastha Medical Corporation Limited
CIN : L24232DL1988PLC030958
Sarita Vihar, Delhi – Mathura Road,
New Delhi – 110 076

Re: Secretarial Audit Report for the Financial Year
ended 31st March, 2023 of even date is to be read
along with this letter

We report that:

- a) Maintenance of secretarial records is the responsibility of the management of the Company. Our responsibility is to express an opinion on these secretarial records based on our audit.
- b) We have followed the audit practices and processes as were appropriate to obtain reasonable assurance about the correctness of the contents of the secretarial records. The verification of the scanned copies of the records was done on test basis to ensure that correct facts are reflected in secretarial records. We believe that the processes and practices, we followed provide a reasonable basis for our opinion.
- c) We have not verified the correctness and appropriateness of the financial statements of the Company.

d) We have obtained the management representation about the compliance of laws, rules and regulations, wherever required.

e) The compliance of the provisions of the corporate and other applicable laws, rules, regulations, standards is the responsibility of the management. Our examination was limited to the verification of procedures on a random test basis.

f) The Secretarial Audit Report is neither an assurance as to the future viability of the company nor of the efficacy or effectiveness with which the management has conducted the affairs of the Company.

CS BALDEV SINGH KASHTWAL
PARTNER
RSM & CO.

COMPANY SECRETARIES

Membership Number: FCS No. 3616,

Certificate of Practice No.: 3169

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Place : Delhi

Date : May 23, 2023

ANNEXURE – 3:

ENERGY CONSERVATION, TECHNOLOGY ABSORPTION AND FOREIGN EXCHANGE EARNINGS AND OUTGO

Conservation of Energy

Significant measures are being taken to reduce the energy consumption by using energy-efficient equipment, although the operations of the Company are not energy-intensive.

Your Company constantly evaluates and invests in new technology to make its infrastructure more energy efficient.

As a part of energy conservation during FY 2022-23, the Company has implemented the following measures:

Asset Upgradation for energy conservation

- Replacement of new chiller 450 TR with new premium efficiency chiller with variable frequency drive.
- Replacement of 4 new cooling towers with new upgraded technology with respect to efficiency / low approach with variable frequency drive.
- Installation of independent steamers for CSSD, TSS, BMW, Kitchen & Labs-to remove dependency on main Boilers.
- Installation of 6 air to air New Heat Pump systems
- Replacement of steam operated system in Kitchen with PNG operated.
- Commissioning of new Building Management System for HVAC high side (chillers & pumps)
- Automations & installations of new VFD AHU with Energy efficient plug Fans
- Biomethanation plant has been installed having capacity of 1000 KG / Day for treating food waste and converting it to Biomethane for utilization in Kitchen for cooking purpose.

Health Safety & Environment Protection

Apollo is pro-actively committed in specifying the requirements for the organization to be able to claim that the Company has an effecting Environment Management System. The Company has a preventive and practical approach when it comes to managing the environmental impact caused by its operations. The management supports and sustain a culture of awareness and sensitivity towards conserving and preserving the environment. It also shows commitment and leadership by holding themselves accountable for health safety and environment protection. The Company has sustained culture of environment protection by associating

ourselves with environment management system and being certified for EMS (ISO-14001: 2015 standards) from over two decades.

Protection and preservation of the environment is not only restricted to legal compliance but is a matter of priority for the Company.

Optimal utilization of natural resources

The primary source of water in the hospital is from local municipality. Water quality is tested to ensure that it is potable. Few of the key initiatives taken to conserve and re-use water, include the following:

- STP & UF-the Company has one MLD of Sewage treatment Plant for treatment and recycling of sewage water. In addition to STP, it also has 500 KLD Ultrafiltration plant which further filters water and that water is being used in hospital flushing.
- The Company has recently installed and commissioned 150 KLD effluent treatment plant to treat and recycle laundry generated effluent water. This plant plays a great role to ensure that the contaminated and polluted water gets treated before being released back to environment.

Water saving

- Water Saving Aerators has been installed in patient room toilets.
- Sensor taps have been installed in public washrooms.
- The Company has 5 Rainwater harvesting pits which helps in Increasing the ground water level by channelling the excess rain/storm water into harvesting pits across the premises with effective utilization with proper filtration.

Waste Management

- Hospital has robust culture for disposal of Bio medical waste generated within the premises and its a key focus area of our environmental objectives and strategy in order to ensure that the society remains protected.
- Proper segregation, handling and safe disposal of e-waste, battery waste, solid waste and hazardous waste to authorised waste recyclers.
- Training employees on segregation and handling of waste.

Technology Absorption

The Company has always been at the forefront of medical innovation and new technology absorption. The hospital has replaced many existing equipment at the end-of-life with upgraded equipment and added several new technologies to ensure the best outcomes for our patients.

New Technology Addition

Gyroscopic Radiosurgery System (ZAP)

The Company has installed Gyroscopic Radiosurgery System (ZAP) for neurosurgery. Gyroscopic Radiosurgery for the Brain is a computer-controlled non-invasive radiosurgery treatment specifically for treating cancers of the Brain, Head and Neck regions. This radiosurgery system works on linear accelerator (LINAC) technology but has been optimised to have several advantages over other conventional LINAC-based multipurpose radiotherapy systems. Most importantly, it has a self-shielding technology which eliminates the need of establishing a radiation bunker / gantry for the equipment.

In addition to this, the following new technologies have been added in the Hospital:

- A 3D Electrophysiology System (EPS)
- Spyglass for Gastroenterology
- Lithotripsy generator for Gastroenterology
- TCD machine for Neurosciences
- C-Mac with Video laryngoscope for OT

Foreign Exchange Earnings and Outgo

The Company is engaged in the healthcare business and is not carrying on any export activities. Your company has been empanelled with eminent international insurance companies and has been appointed healthcare facilitator in various countries to cater to international patients.

Total Foreign Exchange Earnings and Outgo

During the year under review, foreign exchange earnings and outgo were as under:

Earnings : Rs. 190.47 crores

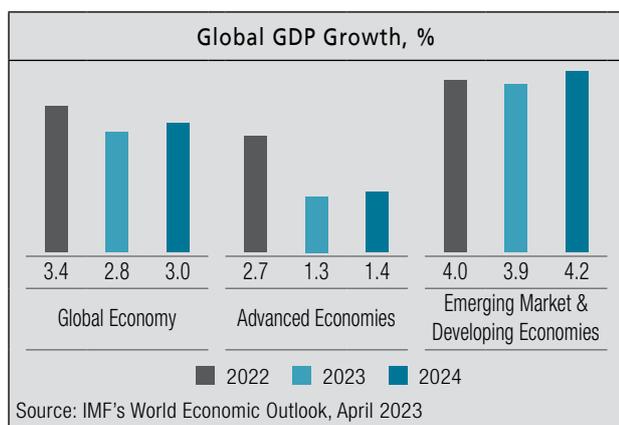
Outgo : Rs. 35.95 crores

ECONOMIC OVERVIEW & OUTLOOK

Global economy

The aftereffects of the pandemic and the war between Russia and Ukraine, impacted the global supply chain leading to a sharp uptick in inflationary pressures across the globe. In response, Central Banks of various countries increased interest rates to combat inflation. This has resulted in escalated operational and capital costs. There were also challenges from sharp volatility in foreign currency rates, sovereign debt crises and rising costs of food and fuel worldwide. All of this has combined to create certain headwinds for global growth.

The International Monetary Fund (IMF) forecasts that the global economic growth will be lower from an estimated 3.4% in 2022 to 2.8% in 2023, with a slight recovery to 3.0% in 2024. However, the IMF believes the slowdown will not be as severe as previously predicted, due to recovery in demand in the Emerging markets and Developing Economies. The easing of energy costs and the re-opening of China would facilitate faster economic growth in 2024.



Indian economy

India has surpassed the UK to become the world's fifth-largest economy, thanks to a strong economic growth registered during the first quarter of fiscal 2022-23. Despite facing repeated shocks from the COVID-19 pandemic, India's real GDP in Q1 2022-23 was about 4% higher than its corresponding level in 2019-20, indicating a promising start to the country's recovery post the pandemic. The contact-intensive services sector is expected to be the key driver of growth in 2022-23, fueled by pent-up demand and widespread vaccination coverage. Furthermore, rising employment, increasing private consumption, and positive consumer sentiment will likely support the country's GDP growth.

An uptick in the last quarter lifted GDP growth in fiscal 2023. India's gross domestic product (GDP) growth rose sharply to 6.1% on-year in the fourth quarter of fiscal 2023 compared with 4.5% in the third.

Fourth-quarter growth was primarily driven by investment and net exports, with the latter less of a drag given rising exports and slowing imports. Fixed investment turned in the strongest growth on the demand side while private consumption growth was more subdued on-quarter. Manufacturing and agriculture growth improved on-quarter on the supply side even as services growth remained strong, albeit slowing a tad relative to the previous quarter.

While the growth momentum was strong in fiscal 2023, the current fiscal is expected to bear the lagged impact of rate hikes done by central banks over the past 15 months. External demand is likely to be a bigger hindrance to growth with western advanced economies staring at a sharp slowdown in the coming quarters, whipping up a headwind for exports. While domestic demand will also weaken, hit by rising lending rates, softening inflation and government capex will offer support. Monsoon and El Nino risks remain a swing factor.

Overall, India's real GDP growth is expected to slow to 5.9% in fiscal 2024 from 7% in the previous fiscal.

Among demand-side segments, the strongest growth was in exports of goods and services (11.9% in fourth quarter versus 11.1% previous quarter). While slowing global trade impacted goods exports, services exports remained strong.

While growth was robust in fiscal 2023, a slowdown is inevitable this fiscal, driven by rising borrowing costs. While central banks aggressively raised policy rates over the past 15 months, their transmission to broader lending rates is taking place with a lag. Rates are expected to peak in the current fiscal, impacting both global and domestic demand.

External demand will weaken more with major advanced economies facing the highest interest rates in over a decade. S&P Global expects United States GDP growth to slow to 0.7% in 2023 from 2.1% in 2022; Eurozone is expected to decline to 0.3% from 3.5%. These economies account for 33% of India's goods exports.

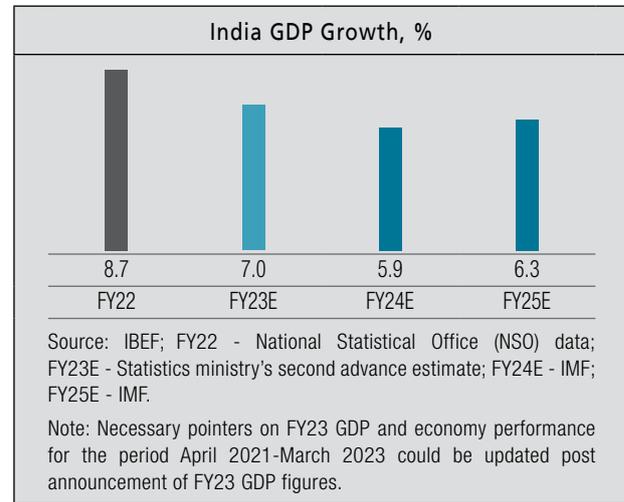
Hence, lower exports is expected to dampen India's growth trajectory this fiscal.

While the rise in domestic interest rates is relatively lower than in advanced economies, bank lending rates have reached the pre-pandemic five-year average. This is expected to moderate domestic demand, especially in interest-sensitive segments such as automobiles and housing. The Indian Government's capital spending is expected to receive a boost from various factors, such as tax buoyancy, a streamlined tax system, tariff structure rationalization, and digitization of tax filing. Increased capital spending on infrastructure and asset-building projects is expected to drive growth multipliers in the medium term. Additionally, agriculture is gaining momentum with the revival of monsoon and Kharif sowing. The contact-based services sector has also shown promise in boosting growth, with several high-frequency indicators performing well in the period from April to September 2022.

India's robust democracy and strong partnerships are expected to position the country as one of the top three economic powers in the world within the next 10-15 years. As the world's fastest-growing major economy, India's success in overcoming the challenges of the pandemic and driving growth in various sectors bodes well for its future economic prospects.

According to the 2nd Advance Estimates, India is expected to achieve a GDP growth rate of 7% in FY23. The International Monetary Fund (IMF), in its latest World Economic Outlook report, has lowered its forecast for India's FY24 gross domestic product growth to 5.9%

from 6.1%. Despite this, the IMF has acknowledged that India will remain the world's fastest-growing economy.



INDUSTRY STRUCTURE & DEVELOPMENTS

Good health is the foundation on which a person's happiness and well-being rest. When a nation's population is healthy, it automatically means that the people make an important contribution to the economic progress of the country, as they live longer and are more productive. Studies have revealed the significant interlinkages between the economic performance of a country and the health of its population, making investment in health not just desirable, but a priority for societies. It is important that every citizen has access to basic healthcare facilities, an important factor that will influence a better quality of life for the populace. A comparison of the basic health indicators between developed and developing countries clearly show that developed nations lead the way in healthcare provision and utilization in terms of all resources i.e., money, infrastructure, people, education, and products. Developing nations, which have not been able to invest similarly in healthcare infrastructure, are characterized by lower human development.

The primary challenge for developing countries like India, is the improvement of healthcare access across sectors, in terms of both reach and affordability, and the pursuit of universal healthcare to ensure that healthcare needs of the vulnerable and under-privileged sections of the society are addressed. Additionally, coping with modern diseases, public health engineering, disease surveillance and rising healthcare costs present significant challenges for the healthcare industry.

The COVID-19 outbreak resulted in significant disturbances, highlighting the economic significance of good health

and the urgency of allocating resources to prevent future epidemics, while simultaneously emphasizing the need for managing such emergencies without causing excessive economic upheaval. It is important to undertake essential measures to ensure sustainable and fair access to high-quality healthcare for everyone. For this to be successful, it is imperative that all stakeholders, including healthcare providers, Governments, investors, and consumers, come together to understand, analyze, and implement the required changes across the ecosystem.

Globally, the healthcare industry is transforming rapidly. Several new health technologies such as wearable tech, telemedicine, genomics, virtual reality (VR), robotics and artificial intelligence (AI) although still nascent, are expected to change the very landscape of this industry. To meet the demands of the future, most of these technologies should be capable of achieving adequate scale.

It is safe to expect that the future of health will focus on wellbeing and prevention rather than treatment. Innovations are already transcending barriers in the way diagnosis and treatments are being provided. Technology will also help to democratize healthcare by lowering costs and breaking geographic hurdles. The increasing pace of technological innovation in healthcare will soon offer a plethora of opportunities for healthcare service providers across the globe.

GENERAL OVERVIEW ON INDIA'S HEALTHCARE SERVICE LANDSCAPE

The primary challenge facing the country today is the need to enhance healthcare accessibility and affordability, while also addressing the healthcare requirements of marginalized and disadvantaged populations. The healthcare industry also faces significant challenges in terms of managing disease, public health engineering, disease surveillance, and costs. The COVID-19 pandemic which caused major disruptions brought to the forefront the significance of health both in terms of human potential and the economy. This crisis has underscored the need to invest more resources into high-quality healthcare, prevent future epidemics, and manage such emergencies with minimal economic disruption.

The healthcare sector in India has emerged as a significant contributor to the country's economic growth and prosperity, generating significant employment and revenue. Today, various demographic changes such as increased demand for modern healthcare facilities, heightened awareness of diseases, growing health consciousness, rising per capita income, changing lifestyles, and shifts in disease patterns have all contributed significantly to the growth of India's healthcare services industry.

It is also important to note that the healthcare industry in India has transformed from an informal sector to a more formalized one over the years, and there has been a trend towards corporatization. The system has expanded considerably and has achieved significant progress in the treatment and cure of various diseases, thanks to advancements in medical technology.

The presence of world-class hospitals and skilled medical professionals has strengthened India's position as a preferred destination for medical tourism. The reduced cost of lifesaving drugs and medical devices, the evolved pharmaceutical industry, world-class specialty hospitals in Tier 1 and Tier 2 cities coupled with a large pool of well-trained medical professionals, are other factors that have contributed immensely to the growth of the sector.

The public healthcare infrastructure in India has been unable to expand sufficiently to meet the needs of the vast population, and accessing remote regions of the country has been a persistent challenge. Furthermore, many of these facilities suffer from inadequate staffing, limited access to basic infrastructure and equipment, and a need for improved quality standards and protocols. As a result of these unaddressed issues, the private sector has emerged as the dominant force in India's healthcare landscape, leveraging its strong fundamentals to seize opportunities that the public sector has been unable to fulfill.

Initially, the private healthcare sector in India comprised of only a few standalone centers primarily located in metropolitan cities, which were recognized for providing top-quality healthcare services across the country. However, due to the positive response from patients and inadequate healthcare infrastructure in many parts of the country, similar centers were established in all major urban areas. The private sector quickly expanded to offer tertiary and quaternary care, introduced state-of-the-art medical equipment and procedures, and embraced new service delivery formats. These hospitals subsequently transformed into Centers of Excellence, and their remarkable success in delivering world-class clinical outcomes began attracting patients from around the world. This successful model was subsequently replicated by other key industry players, who invested significantly in infrastructure, technology, and human resources.

The healthcare sector in India offers both promising prospects and challenges. The substantial disparity between the essential and the present healthcare infrastructure has stimulated a considerable influx of investments into assets like hospitals and other facilities. Currently, healthcare in India offers a distinctive opening for corporations to innovate, differentiate, and earn profits. As a result, it has become a favoured sector for financial and strategic investments.

Government Initiatives are supporting the growth of the Healthcare industry

Governments worldwide strive to offer their citizens high-quality healthcare. To achieve this goal, they undertake various proactive measures such as raising awareness about health-related concerns, establishing robust healthcare infrastructure, and encouraging the uptake of health insurance. These activities are aimed at improving the well-being of the population and are carried out by the government authorities.

Over the years, the Indian Government has been taking necessary initiatives to ensure delivery of quality healthcare services to all at affordable costs. In fact, the Country's healthcare sector is strongly supported by the Indian Government which has been undertaking commendable work to develop India as a global healthcare hub. The multitude of initiatives to drive the growth of the healthcare sector in the country has been yielding positive results. These initiatives have gone a long way in not only improving overall healthcare access for the general population but have also enhanced the quality of healthcare in the country.

The Government has undertaken various initiatives like Ayushman Bharat and National Digital Health Mission to increase the coverage of and access to healthcare services. Moreover, the Government's emphasis on digitization is anticipated to have multiple benefits, including enabling patients to share their health records with healthcare providers for effective treatment and monitoring. It will also provide easy access to reliable information on the qualifications and fees of services provided by different healthcare facilities, service providers, and diagnostic labs.

Policies and Schemes

Ayushman Bharat

Ayushman Bharat scheme was launched to ensure universal health coverage and provide financial risk protection, assuring quality and affordable essential health services to all individuals. As of April 5, 2022; 117,771 Ayushman Bharat-Health and Wellness Centres (AB-HWCs) are operational in India. The Government is also planning to establish 150,000 Ayushman Bharat Health and Wellness Centres by December 2022.

National Resource Centre for EHR Standards (NRCeS)

Ministry of Health & Family Welfare (MoHFW) established a Centre of Excellence named as National Resource Centre for EHR Standards (NRCeS) at C-DAC, Pune to accelerate and promote adoption of Electronic Health Record (EHR) standards in India

Mission Indradhanush

Aims to improve coverage of immunisation in the country and reach every child under two years of age and all the pregnant women who have not been part of the routine immunisation programme. In March 2021, various states and UTs started implementation of the 'Intensified Mission Indradhanush 3.0'.

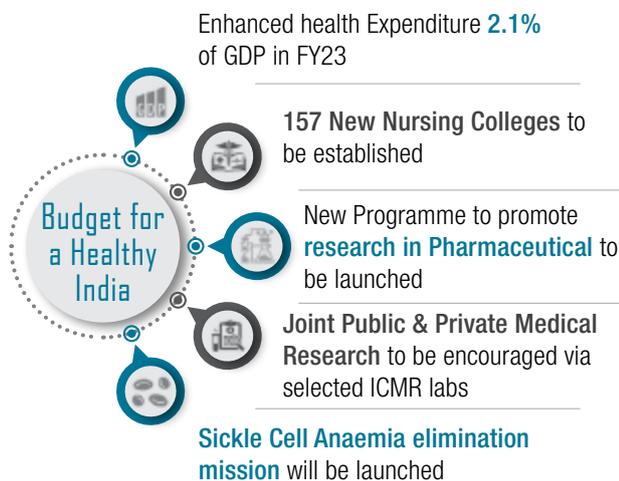
Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)

Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA), a programme launched in 2016 to ensure comprehensive and quality antenatal check-ups to pregnant women across India, has crossed the 10 million mark.

Pradhan Mantri Swasthya Suraksha Yojana (PMSSY)

Aims at correcting regional imbalances in the availability of affordable / reliable tertiary healthcare services and also to augment facilities for quality medical education in the country. In the Union Budget 2022-23, Pradhan Mantri Swasthya Suraksha Yojana (PMSSY) was allocated ₹100 billion (US\$ 1.31 billion)

Union Budget 2023-24 - Boost to the Healthcare Sector



The Union Budget 2023-24 has brought about an important change in the healthcare sector. As per the finance minister's announcement, the budget includes provisions for setting up 157 new nursing colleges in co-location with existing medical colleges. This step highlights the Government's emphasis on improving the healthcare system by ensuring an adequate number of frontline medical professionals in hospitals. Moreover, the expansion of nursing colleges will address the shortage of nurses required per bed, which is pivotal to India's aspirations of being a preferred healthcare destination. Additionally, healthcare providers are now concentrating on developing healthcare infrastructure in Tier 2 and Tier 3 cities.

In addition, the finance minister has declared the Government's objective of eradicating sickle cell anemia by 2047. The initiative, once launched, will facilitate universal screening of 70 million individuals between the ages of 0 and 40 in affected tribal regions.

The augmented funding for the healthcare sector will facilitate the Indian Council of Medical Research (ICMR) in upgrading its facilities. This upgrade will provide an opportunity for the faculty members of both public and private medical colleges to conduct research within these facilities and allow private sector research and development teams to access them as well. The involvement of diverse teams will foster greater cooperation in research and innovation in healthcare. This demonstrates the budget's forward-thinking emphasis on medical research, collaborative research, and research and development, which are essential to improve healthcare delivery.

The healthcare sector's technological advancements were also taken into account in the budget with a focus

on Pharma Innovation. The finance minister announced a new program to promote research and innovation in the pharmaceutical industry. Additionally, the Government intends to encourage industry players to invest in research and development in established priority areas, such as innovative technologies in healthcare.

The Indian Healthcare Sector has seen considerable growth through strategic budget allocations and collaborative efforts. The Union Budget 2023-24 emphasizes the Government's concentration on two essential aspects of enhanced healthcare: augmenting the number of skilled medical professionals and investing in research and development. Moreover, the substantial increase in budgetary allocations shows a strong dedication towards building a more effective healthcare system.

Source: News Articles, Union Budget 2023-24

Market Size of Indian Healthcare industry

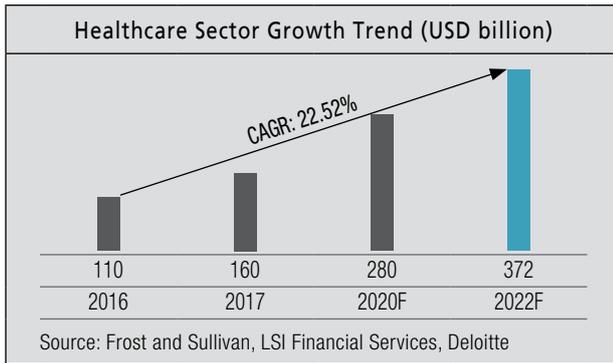
Currently, the Indian healthcare sector is witnessing remarkable growth, primarily attributed to the improved coverage, services, and augmented expenditure by both the public and private domains. In 2016, the Indian healthcare industry was valued at USD 110 billion, and projected to expand at a CAGR of 22.52%, reaching a size of over USD 372 billion by 2022. This substantial growth potential indicates a vast scope for increasing the accessibility of healthcare services across India, thus presenting abundant opportunities for the healthcare industry's development.

According to the e-Health Market Opportunity Report 2021, the e-health market in India is predicted to generate revenue of \$10.6 billion by 2025. The COVID-19 pandemic has opened a host of opportunities for India and the world to accelerate technological advancements in the healthcare industry. With the Government's strong emphasis, India has made significant progress in this field. Considering the country's immense population and diversity, the sector offers enormous potential and opportunities for growth in the coming years.

Also, the Indian healthcare industry is one of the most knowledgeable and professional industries in the world. The sector is one of the most efficient and cost-effective healthcare delivery systems driven by experienced doctors, specialists and Nurses and well-equipped diagnostics. There is immense scope for enhancing healthcare services penetration in India and ample opportunity for the development of the healthcare industry as a whole.

Conducive policies for encouraging FDI, tax benefits, and favorable Government policies coupled with promising growth prospects are helping the industry attract private equity, venture capital and foreign players. Today, Indian companies are entering into alliances with domestic and

foreign companies to drive growth and gain new markets. Going ahead, strong fundamental factors such as rising income levels, ageing population, growing health awareness and changing attitude towards preventive healthcare are expected to boost healthcare services demand.



In 2021, the Indian healthcare industry emerged as the fourth-largest employer, providing employment to around 4.7 million individuals. The Asian Research and Training Institute for Skill Transfer (ARTIST) announced plans to create around one million skilled healthcare providers by 2022.

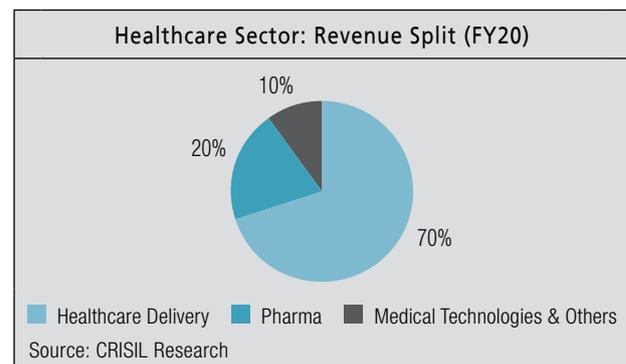
The Healthcare Service Delivery Landscape in India

The Healthcare sector in India broadly includes Hospitals, Pharmaceutical Companies & Standalone Pharmacies, Diagnostic Services, Medical Equipment and Supplies, Medical Insurance, Telemedicine Companies, Medical Tourism and Retail Healthcare. The healthcare market functions through the following segments:

- Hospitals**
 - Government hospitals** – It includes healthcare centres, district hospitals and general hospitals
 - Private hospitals** – It includes nursing homes and mid-tier and top-tier private hospitals
- Pharmaceutical Companies & Standalone Pharmacies**
 - It includes manufacturing, extraction, processing, purification and packaging of chemical materials for use as medications for humans or animals. Standalone pharmacies include both organized and unorganized standalone pharmacies in India.
- Medical Equipment & Supplies**
 - It comprises businesses and laboratories that offer analytical or diagnostic services, including body fluid analysis.

- Diagnostics**
 - It includes establishment's primarily manufacturing medical equipment and supplies, e.g. surgical, dental, orthopedic, ophthalmologic, laboratory instruments, etc.
- Medical Insurance**
 - It includes health insurance and medical reimbursement facility, covering an individual's hospitalization expenses incurred due to sickness.
- Telemedicine Industries**
 - Telemedicine has enormous potential in meeting the challenges of healthcare delivery to rural and remote areas besides several other applications in education, training and management in health sector
- Medical Tourism**
 - Indian medical tourism is enhancing the prospects of the Indian healthcare market substantially, benefiting its healthcare services players and in increasing the inflow of foreign exchange into India.
- Retail in Healthcare**
 - Retail healthcare enables opportunities of clinical service in a marketplace other than regular hospital. The Retail Healthcare business primarily include Primary Care Clinics, specialized birthing centers, single specialty clinics, primary health centers and diagnostic chains, apart from Dental, Daycare and Home Healthcare formats.

As per Frost and Sullivan research, the healthcare delivery market, consisting of hospitals and diagnostics centers accounted for a major share of the healthcare pie at 70%, followed by domestic pharmaceuticals at 20% and medical devices market at 10% as of the financial year 2020.



The Healthcare sector is divided into three major categories: primary, secondary and tertiary.

	Primary Care	Secondary Care	Tertiary Care
Services	▶ Provides all services as required for the first point of contact	▶ Provides all services as required, including organized medical research	▶ Provides all services as required, including provision for experimental therapeutic modalities and organized research in chosen specialties
Multi-disciplinary	▶ Yes	▶ Yes	▶ Single- or multi-specialty
Type of service	▶ Only medical services and excludes surgical services	▶ Overall medical and surgical services	▶ Complex surgical services with sophisticated equipment
Type of patient	▶ Only outpatient	▶ Inpatient and outpatient	▶ Primarily inpatient
No. of beds	▶ 0 beds	▶ 50-200 beds	▶ >200 beds
Dependent on	▶ Secondary and tertiary care hospitals for further diagnosis and support	▶ Tertiary care hospital for diagnostic and therapeutic support on referral and for patient transfer	▶ Tertiary care/secondary hospital for referrals for its workload
Investment	▶ Low investment required	▶ Medium	▶ High

Healthcare delivery may also be classified as primary, secondary and tertiary, on the basis of the complexity of ailment being treated. For instance, a hospital treating heart diseases may be classified as a primary facility if it addresses conditions such as high cholesterol, as a secondary facility if it treats patients suffering strokes, or as a tertiary facility if its deals with cardiac arrest or heart transplants.

Ailment / condition	Primary Care	Secondary Care	Tertiary Care
Acute infections	▶ Fever	▶ Typhoid/ jaundice	▶ Hepatitis B,C
Accidents/ injuries	▶ Dressing	▶ Fracture	▶ Knee / joint replacements / brain haemorrhage

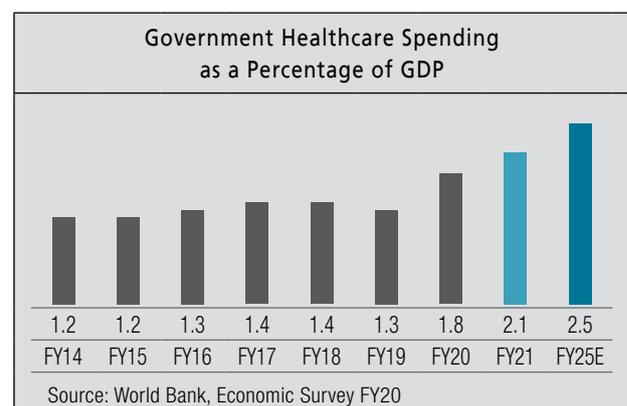
Ailment / condition	Primary Care	Secondary Care	Tertiary Care
Heart diseases	▶ High cholesterol	▶ Strokes	▶ Cardiac arrest/ heart attacks/ heart transplantation / heart defects like hole in heart
Maternity	▶ Diagnosis/ check-ups	▶ Normal delivery / caesarean	▶ Normal delivery / caesarean / post-delivery complications such as brain fever
Cancer	▶ Lump diagnosis/ check-ups	▶ Tumor – medical, surgical, and radiation therapy	▶ Medical, surgical and radiation therapy

Source: CRISIL Research

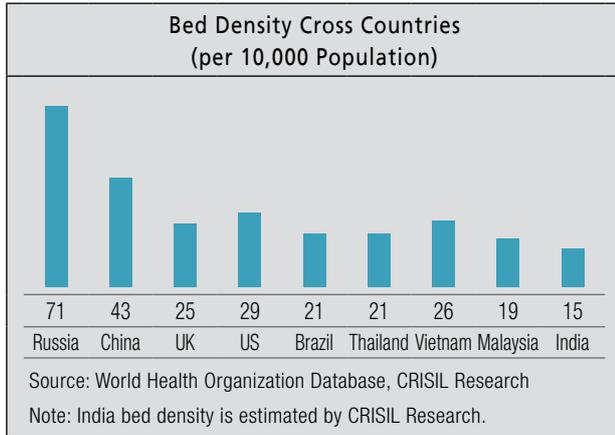
PER CAPITA HEALTHCARE EXPENDITURE HAS RISEN AT A FAST PACE

The country's per capita healthcare expenditure has been increasing due to several factors including higher income, improved access to high-quality healthcare facilities, and increased awareness of personal health and hygiene. Additionally, the wider availability of health insurance has played a crucial role in boosting healthcare spending and this trend is expected to continue and become more pronounced in the next decade.

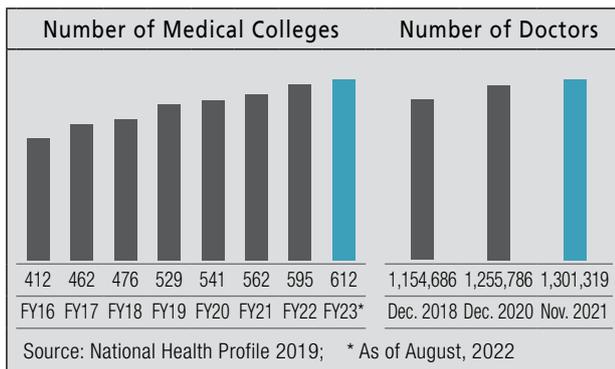
According to the 2022 Economic Survey, India's public healthcare expenditure increased from 1.3% of GDP in 2019-20 to 1.8% in 2020-21 and further to 2.1% in 2021-22. The Government of India has set a target to increase public health spending to 2.5% of the country's GDP by 2025.



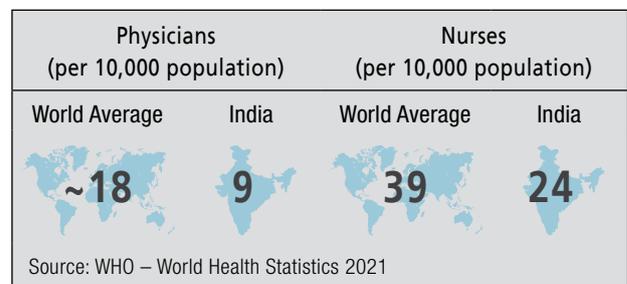
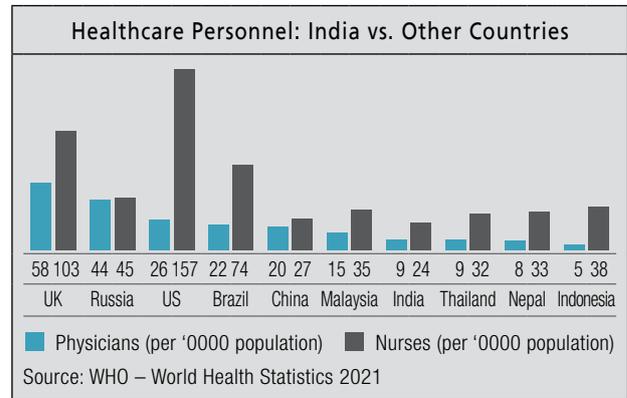
The adequacy of a country's healthcare infrastructure and personnel is a barometer of its quality of healthcare. The country accounts for nearly a fifth of the world's population, but has an overall bed density of merely 15, per 10,000 people, with the situation being far worse in rural than urban areas. India's bed density not only falls far behind the global median of 29 beds, per 10,000 people, it also lags that of other developing countries such as Brazil (21 beds), Malaysia (19 beds), and Vietnam (26 beds).



In recent decades, India has made significant progress in expanding its medical education infrastructure. As of March 2022, the number of medical colleges in the country has grown from 412 in FY16 to 595. Additionally, the number of allopathic doctors with recognized medical qualifications under the I.M.C Act and registered with State Medical Councils or the National Medical Council has risen from 0.83 million in 2010 to 1.3 million as of November 2021.



In January 2021, the PM Cares Fund allocated ₹2,016 million (US\$ 27.55 million) for the construction of 162 additional dedicated pressure swing adsorption medical oxygen generation plants inside the country's public health facilities. The Union Cabinet also approved the extension of the National Ayush Mission, which is responsible for the advancement of traditional medicines in India, as a centrally sponsored scheme until 2026 in July 2021.



Even though the country is witnessing rapid expansion in the healthcare sector, the shortage in the medical workforce remains a big challenge. As per World Health Statistics primary data 2021, with a density of 9 physicians and 24 nursing personnel per 10,000 population, India trails the global median of 18 physicians and 39 nursing personnel, falling behind developing countries such as Brazil (23 physicians, 74 nurses) and Malaysia (15 physicians, 35 nurses).

These statistics indicate the alarming gap in healthcare infrastructure in the country and the tremendous growth potential the sector offers.

Region wise doctor and nurse density

Region	States covered for doctors and nurses data	Avg. doctors per 10,000	Avg. registered nurses per 10,000
East India	Bihar, Jharkhand, Odisha, West Bengal, Sikkim, Arunachal Pradesh, Assam, Tripura, Mizoram, Nagaland, Manipur, Meghalaya	4.4	9.2
North India	Punjab, Uttarakhand, Uttar Pradesh, Haryana	5.3	10.4
Central India	Chhattisgarh, Madhya Pradesh	4.5	17.2

Region	States covered for doctors and nurses data	Avg. doctors per 10,000	Avg. registered nurses per 10,000
West India	Maharashtra, Gujarat, Rajasthan	11.2	26.3
South India	Andhra Pradesh, Karnataka, Tamil Nadu, Kerala, Telangana	16.8	51.4

Note: 17 states under the non-special category given by the Reserve Bank of India (except Goa) along with our key states of study have been considered above. Amongst our key states, doctor numbers for Manipur and Meghalaya are not available, while nurse numbers for Nagaland are not available.

Source: National Health Profile 2020, CRISIL Research

Healthcare industry is witnessing varied emerging trends

There is a scarcity of healthcare professionals, particularly in semi-urban, rural, and remote regions, leading to restricted availability of medical services to a significant portion of the population. With the widespread use of smartphones and the increasing penetration of the internet in India, Telemedicine and e-Health are being considered as viable remedies to overcome this issue. Tele-consultations through telemedicine have the potential to save lives and helps prevent travel and expenditure. Additionally, tele-radiology is a developing field, and numerous international hospitals are actively participating in it.

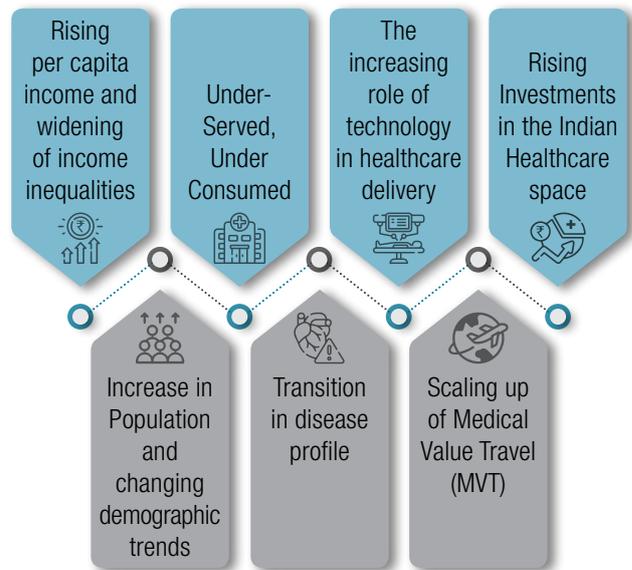
Various evolving technological developments like Artificial Intelligence, Internet of Things, wearables and other mobile technologies have the potential to improve outcomes for people suffering from multiple co-morbid conditions. This is due to the possibility of remote monitoring of health status and delivery of virtual care services through smartphones and artificial data solutions.

Before the COVID-19 outbreak, the health-tech sector was mainly concentrated on creating wearable devices, diagnostic tools, and medication delivery systems, along with aiding the early detection of genetic ailments. Additionally, remote therapy was used to address lifestyle-associated concerns such as stress and anxiety, and post-treatment pain relief. Nevertheless, following the pandemic, new prospects are anticipated to surface in the health-tech industry. The fundamental method of medicine is projected to undergo a significant transformation in the coming years. With India facing a scarcity of proficient medical professionals, AI and an AI equipped Doctor could prove to be a feasible long-term solution, especially for rural and remote regions.

Source: News Articles, NITI Aayog report

Key Characteristics of the Healthcare Industry

A combination of economic and demographic factors is expected to drive healthcare demand in India. This industry in India is broadly characterized by the following:



Rising per capita income and widening of income inequalities:

India has witnessed tremendous economic growth over the last 3 decades. The country has been able to register robust GDP growth and has been consistently featured amongst the fastest growing economies. With the country already witnessing a steady economic growth, the per capita income of its population as well as the economic stability of the expanding middle class Indian, is on the rise. This changing scenario has led to an accompanying demand for quality healthcare, and growing purchasing power for millions of upwardly mobile Indians.

	FY12	FY13	FY14	FY15	FY16
Per-capita net national income (₹)	63,462	65,538	68,572	72,805	77,659
On-year growth (%)	2.1	3.3	4.6	6.2	6.7

	FY17	FY18	FY19	FY20	FY21AE
Per-capita net national income (₹)	82,931	87,828	92,241	94,556	85,929
On-year growth (%)	6.8	5.9	5.0	2.5	(9.1)

AE: Advance estimates

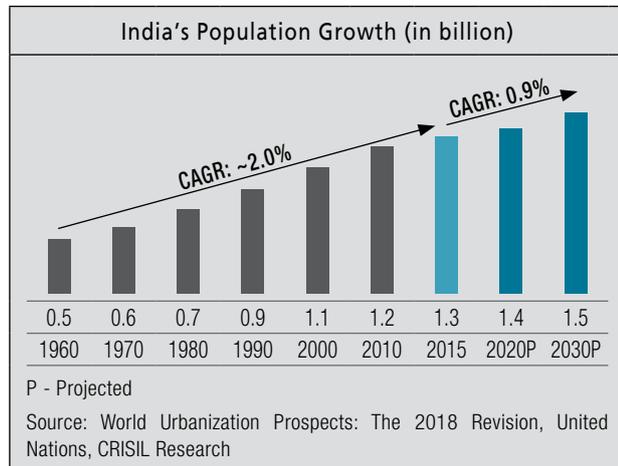
Source: Second advanced estimates of Annual National Income, 2020-21, CSO, MoSPI, CRISIL Research

Due to increasing purchasing power, consumers are demanding and willing to pay for superior healthcare services. However, even as India continues to develop, the country is witnessing a widening of income inequalities. Low per capita income, minimal expenditure on healthcare, and a lower number of doctors coupled with muted insurance

penetration in rural areas, account for wide disparity in healthcare offerings between urban and rural areas. Also, the inequality is becoming increasingly apparent even within the same city. People from the different socio-economic groups fall into unique baskets typified by varying healthcare needs. Each of these presents a market in terms of the addressable value proposition.

Changing demographic trends:

The medical industry will see a rise in opportunities for healthcare services in India as a large population of the country becomes a significant target market today. According to the National Health Profile 2021, the proportion of the population between the ages of 15 and 59 in the working population is expected to rise from 60.7 percent in 2011 to 65.1 percent in 2036, indicating that this is a productive demographic group with distinct advantages. This is likely to boost India into the ranks of the world's most developed economies in the coming decade. This demographic segment demands, and is prepared to spend for modern, high-quality healthcare services for both treatments and preventive care.



While India's population appears to be young, the percentage of senior citizens has been growing at an increasing rate in recent years and the trend is likely to continue. The rise in this segment's population, coupled with higher life expectancy, is yet another point in favour of high-quality healthcare. As a result, socio-demographic aspects in the country are expected to boost the growth for healthcare services in the future.

Under -Served, Under-Consumed

While there has been commendable progress in the last couple of decades by both Private and Public healthcare service providers, the challenge for the healthcare sector in India remains that a large segment of the population remains under-served due to certain geographies which lack credible, quality infrastructure. This scenario is

the culmination of decades of under-investment in the healthcare sector. Furthermore, the domestic healthcare delivery infrastructure is highly concentrated in the state capitals or Tier-1 cities largely driven by private sector.

Despite the fact that making healthcare affordable and accessible to all citizens of the country is one of the Government's key focus areas, the country continues to lag far behind the global curve in providing good quality healthcare access across its population.

Transition in disease profile:

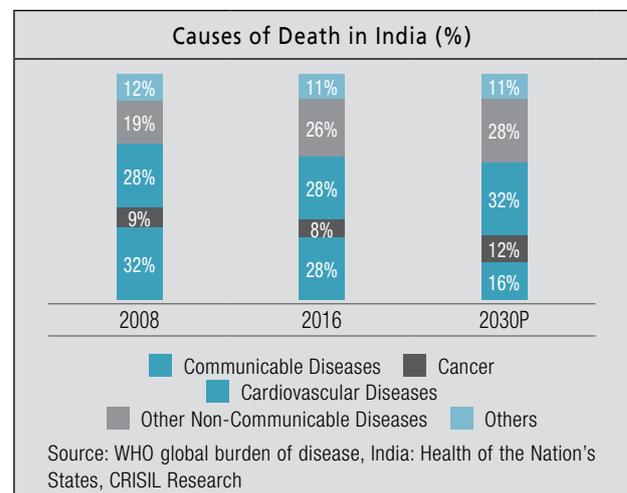
India has witnessed an extensive change in the overall disease profile of its population. The share of deaths for communicable, maternal, neonatal, and nutritional diseases decreased to 27.5% in 2016 from 53.6% in 1990 and that of non-communicable diseases increased to 61.8% in 2016 from 37.9% in 1990. This shift in the disease profile has led to an additional need for healthcare services in the country. Non-communicable diseases tend to be of long duration, increasing the need for sustained healthcare services.

Transition in disease profile

	1990	2016
Share of communicable, maternal, neonatal and nutritional diseases	53.60%	27.50%
Share of non-communicable diseases	37.90%	61.80%
Share of injuries	8.50%	10.70%

Source: Health of the Nation's States 2017: India Council of Medical Research

Due to increased urbanization, the incidence of lifestyle diseases is anticipated to increase faster than any other segment. Within the lifestyle space, cancer is one of the fastest growing ailments. The prevalence of cancer in India is projected to increase from an estimated 3.9 million cases in 2015 to 7.1 million cases by 2020, according to an Ernst & Young report.



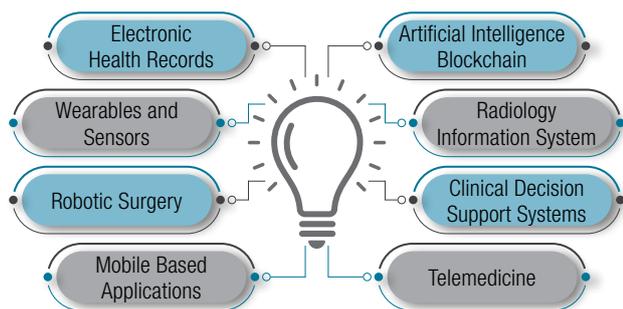
According to CRISIL Research, Non-Communicable diseases (NCDs) have a tendency to increase as income levels rise. By 2030, the World Health Organization (WHO) anticipates a rise in NCDs. CRISIL predicts a surge in demand for healthcare services associated with lifestyle-related diseases such as heart disease, cancer, and diabetes. Orthopedics is an emerging market in India that has the potential for growth. Currently, it constitutes a small percentage compared to NCDs. The orthopedics market can be segmented into four categories: knee, hip, trauma, and spine. Knee replacement has the largest market share, followed by trauma and spine. In comparison to the global trend, hip replacement is still a small market in India compared to knee replacement.

The increasing role of technology in healthcare delivery:

Over the last decade, the health and medical industries have undergone significant transformations. This has been made possible by medical advancements and technological progress. The medical field makes unique discoveries about treatments, data collection, symptom, and disease / cure research, which offers many more clinical options to patients.

Many hospitals in India have identified making investments in technology as a pathway to delivering better clinical outcomes. The timely adoption of advanced technologies has enabled the availability of and supported advancements in robotic surgeries, radiation surgery or radio therapies with cyber knife options, intensity modulated radiation therapy, image guided radiation therapy, transplant support systems, and advanced neuro and spinal options.

Emerging Technologies in Healthcare Delivery



New health technologies such as wearable tech, telemedicine, genomics, virtual reality (VR), robotics and Conversational artificial intelligence (AI) continue to transform the landscape of the Indian healthcare system. India, like many other markets, is on the verge of a “digital health” revolution, with a large number of healthcare companies beginning to adopt digital technologies

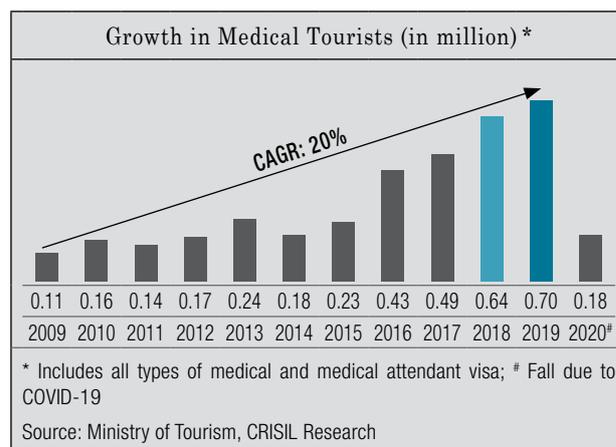
spanning patient engagement, physician engagement, field force effectiveness, R&D efficiency, and supply chain management.

The healthcare industry is facing a severe shortage of doctors, nurses, and other healthcare workers on a global scale. To overcome this shortage, several reforms have been proposed by countries across the world. Technology is evolving and taking over almost every organization on this planet, and the healthcare industry is no exception.

Scaling up of Medical Value Travel (MVT)

The Indian healthcare industry has grown exponentially by addressing the medical value travel opportunity. India has emerged as one of the most preferred destinations for patients across the globe in seeking medical assistance. This can be attributed to its diverse culture and astounding monuments that have attracted patients from across the globe. These patients come to India for their treatments and explore these tourist spots across the nation. Healthcare costs in India are extremely competitive compared to those in developed countries and other Asian countries. This is especially for expensive and high acuity surgeries like cardiac bypass, solid organ transplants, joint replacements, dental services, cosmetic surgery and bariatric surgery. The cost of travel and accommodation is also low as compared to developed nations. India also attracts medical tourists from other developing nations due to the lack of advanced medical facilities in many of these countries.

Of the total foreign tourist arrivals in India, the proportion of medical tourists grew from 0.11 million tourists in 2009 to 0.7 million tourists in 2019.



According to the Medical Tourism Index 2020-21, India ranks 10th out of the Top 46 countries in the world. Despite the severe impact of the COVID-19 pandemic on the tourism and hospitality industries, the medical tourism sector is estimated to be worth US\$ 5-6 billion by 2020.

Cost advantage - India compares favorably with regional peers



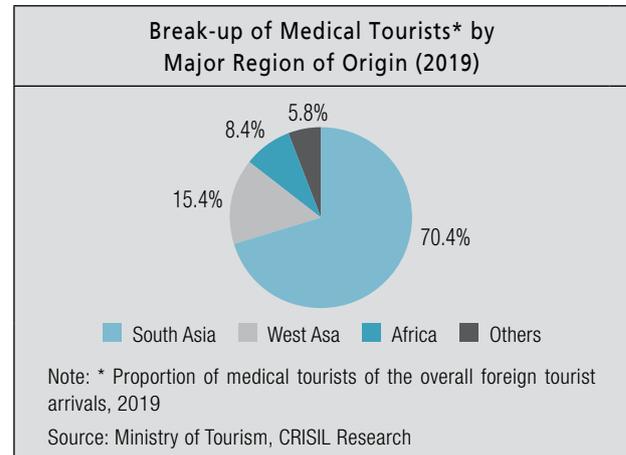
Affordable and quality treatment makes India a favoured destination

Ailments (USD)	USA	Korea	Singapore	Thailand	India
Hip Replacement	50,000	14,120	12,000	7,879	7,000
Knee Replacement	50,000	19,800	13,000	12,297	6,200
Heart Bypass	1,44,000	28,900	18,500	15,121	5,200
Angioplasty	57,000	15,200	13,000	3,788	3,300
Heart valve replacement	1,70,000	43,500	12,500	21,212	5,500
Dental Implant	2,800	4,200	1,500	3,636	1,000

Source: CRISIL Research

Over the years, The Indian Government has played a pivotal role in paving the way for these international patients to enter the country and avail their desired medical treatments. It has implemented a number of policies, including the introduction of an e-Medical visa, multiple entry visas, and longer stays as needed for treatment. Furthermore, the Indian Government has been actively requiring wellness centers and Medical Value Travel (MVT) facilitators to be accredited. These initiatives have contributed significantly to building India's image as a preferred destination for medical tourists.

Indian medical tourism originating countries



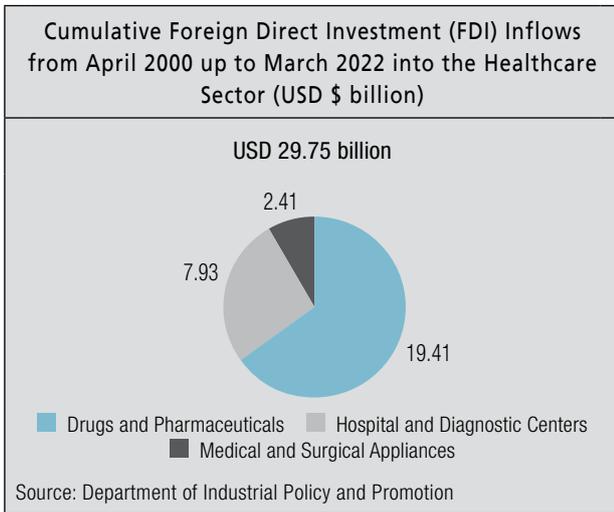
Rising Investments in the Indian Healthcare space

The Indian healthcare sector is among the fastest growing sectors with high contribution not only in terms of revenue, but also employment. It includes hospitals, medical equipment and devices, health insurance, telemedicine, clinical trials and medical tourism. Infusion of long-term capital in the healthcare space goes a long way in strengthening the healthcare infrastructure of the country. Demand growth, cost advantages and policy support are some of the factors that have been playing a very important role in attracting FDI in the healthcare sector.

When it came to prioritizing resources, healthcare in India was always given a lower importance, but with the outbreak of the COVID-19 pandemic, all stakeholders realized the importance of prioritizing healthcare, as the pandemic highlighted the country's lack of preparedness, resources, and infrastructure to fight and overcome the pandemic.

According to the Department of Industrial Policy and Promotion (DIPP), between April 2000-June 2022, FDI inflow for the drugs and pharmaceuticals sector stood at US\$ 19.90 billion. In the same period, there was an inflow of US\$ 8.09 billion and US\$ 2.71 billion for the hospitals and diagnostic centers sector and the medical and surgical equipment industry, respectively.

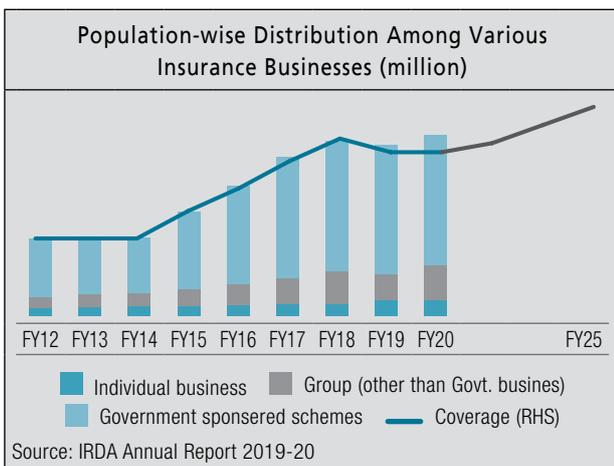
The Indian healthcare industry has attracted the interest of leading global private equity firms and venture capitalists over the last few years. The strong support of PE funding has fueled the growth of multi-specialty and single-specialty hospitals in India. Many multinational corporations have attempted to expand their presence by forming partnerships and making investments.



The Government of India's decision to allow 100% FDI in the hospitals sector led to a significant increase in investments from overseas funds. These trends indicate rising investor confidence in the Indian healthcare space and deepen the perception of India as an attractive healthcare investment destination.

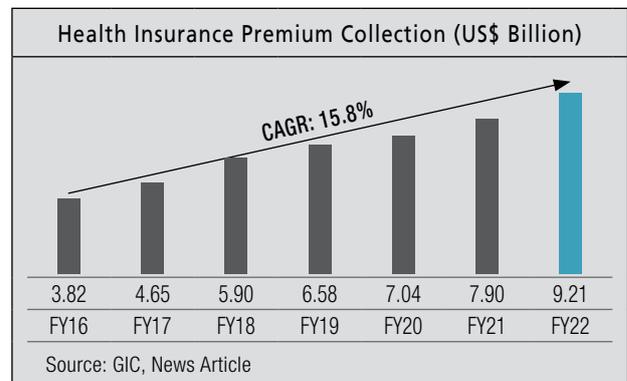
GROWING HEALTH INSURANCE MARKET TO PROPEL DEMAND

Health insurance stimulates demand for healthcare services because the insured pays a premium for the policy and is reimbursed by the insurer if he or she requires treatment due to illness, sickness, or disease. To a large extent, insurance covers an individual's health expenses and lessens his or her burden of healthcare costs, thereby improving his or her appetite to seek high-quality care. Consequently, as the health insurance market expands, so will the demand for healthcare services.



Health insurance coverage has increased from 17% in fiscal 2012 to ~36% in fiscal 2020. As per the Insurance Regulatory and Development Authority (IRDA), nearly 499 million people have health insurance coverage in India (as of fiscal 2020), as against 288 million (in fiscal 2015), but despite this robust growth, the penetration in fiscal 2020 stood at only 36%.

As is evident, the share of Government-provided insurance is greater than that due to insurance policies availed of by individuals not covered under any schemes. Government or Government-sponsored schemes, such as the Central Government Health Scheme (CGHS), Employee State Insurance Scheme (ESIS), Rashtriya Swasthya Bima Yojana (RSBY), Rajiv Arogyasri (Andhra Pradesh Government), and Kalaingar (Tamil Nadu government) account for ~75% of health insurance coverage provided. The remaining is through commercial insurance providers, both Government and private players.



In FY22, premiums underwritten by health insurance companies grew to ₹735.82 billion (US\$ 9.21 billion). The health segment has a 33.33% share in the total gross written premiums earned in the country. The number of policies issued to women in FY21 stood at 9.3 million with one out of every three life insurance policies in FY21 sold to a woman.

Health insurance coverage is an important determinant of access to healthcare. Today, health insurance has become an important financial management tool for Indians who want to take care of their health. Also, favourable Government initiatives like Ayushman Bharat are expected to drive the growth of health insurance market during the forecast period. The prevalence of chronic diseases continues to rise on a day-to-day basis. This increase, coupled with increasing public awareness of the benefits of health insurance, has become a key growth driver for the Indian health insurance market.

RETAIL HEALTHCARE

The concept of 'Retail' in healthcare refers to providing opportunities for clinical consultations closer to home, beyond the confines of a hospital. The fundamental principle of 'Retail Healthcare' is to cater to the healthcare needs of consumers at their doorstep. Currently, patients seek convenience when selecting a healthcare provider, and they increasingly prioritize proximity over distance, preferring shorter wait times, same-day scheduling, and extended hours (including weekends). Consequently, Retail Health is becoming an avenue for delivering quality, convenient healthcare services to numerous consumers and serves as a model for healthcare systems to consider when catering to new and existing patient groups.

Changes in consumer preferences and increased use of technology have successfully influenced the shift to retail healthcare. Retail healthcare starts with preventive care and progresses to the treatment of low-complexity cases. The primary goal of retail healthcare is to provide a variety of high-quality services at reasonable prices in convenient settings. Healthcare providers are designing locally relevant spaces that are tailored to specific needs in order to meet consumers' demand for convenience and flexibility. These areas are primarily concerned with vaccinations, patient education, information sharing, specimen collection and reporting, wound dressing and aftercare, injections, and teleconsultations. One of the recent healthcare trends around the world, and in India too, is the emergence of Day-care hospitals. Day-care hospitals are more than an outpatient clinic and less than a full-fledged hospital. Day care hospitals provide comfort and convenience to the patient and family. They also provide access to the expertise and experience of the panel of doctors that a traditional hospital has, but minus the hospitalization.

The Retail Healthcare business includes Primary Care Clinics, Specialized Birthing Centers, Single Specialty Clinics, Primary Health Centers and Diagnostic Chains, apart from Dental, Daycare and Home Healthcare formats. Single specialty healthcare centers operating under the Retail Healthcare delivery format have already experienced growing popularity over the past few years in India. The segment now includes multiple treatment categories in areas such as fertility, maternity, ophthalmology, dental health, dialysis, and diabetic care.

Over the last decade, retail healthcare has undergone significant development worldwide. All sectors encompassed by the Retail Healthcare framework represent a substantial opportunity in the healthcare industry, with considerable unexplored prospects that could enhance Indian healthcare providers' outreach into local communities and neighborhoods.

Strengths

Strong Brand Positioning:

Indraprastha Apollo Hospitals (the Hospital) has pioneered and preserved a strong leadership position in the Indian healthcare industry. The Hospital is strongly recognized as one of India's leading integrated healthcare provider. This position reflects the company's unwavering focus on consumer needs and safety. It is steadfast in preserving its position as a leader by embracing innovative cutting-edge technology and clinical protocols. Over the years, the Company's reputation has grown exponentially, and it continues to attract a large number of patients, highly skilled clinicians, and staff.

Professional management team and Proficient clinical talent:

The Hospital's compelling brand image and highly professional working environment continues to attract and retain top clinical and professional talent from India and across the globe. The doctors and medical staff are not only highly qualified, but also have comprehensive experience in their respective fields. The Hospitals' efficient clinical and non-clinical staff is well trained to assist in providing its patients the best clinical outcomes possible. The senior management team has created a strong eco-system that enables and motivates staff to provide superior care.

The doctors have an enviable track record of success when it comes to performing critical surgeries or medical procedures. Their domain expertise is highly regarded and recognized by patients all over the world. Because of their expertise in the field of medicine, many specialists continue to receive numerous accolades and awards at various healthcare forums.

Integrated Medical Offerings:

The Hospital has made significant steps to ensure access to quality care which is not strictly limited to a hospital setting, but which is also available outside of it or in a post hospitalization scenario. Currently, the Hospitals' broad spectrum of service offerings successfully encompasses the entire value chain of healthcare service offerings. The Hospital has been able to provide differentiated services through different entities, which together constitute a fully integrated healthcare ecosystem. It is important to note that each of these healthcare offerings has its own identity and asserts its own special expertise.

Extensive Technological expertise:

Since its inception, the Hospital has placed strong emphasis on continuous improvement and the adoption of newer technology. The Company has always been on the cutting edge of allocating funds to adopt the best-in-class medical technology available. The Hospital has been able to therefore provide patients with the best treatment options possible.

Furthermore, with the view of providing its patients easy access to the hospitals' services, the Company has developed an integrated online platform called 'Ask Apollo,' which allows patients to book doctor appointments and schedule online consultations for basic medical needs. The hospitals recently launched Apollo 24/7, an advanced app that offers virtual doctor consultations, integrated medical records and prescriptions, and the ability to fill prescriptions through Apollo Pharmacy.

Weaknesses

High burden of Regulatory requirements:

The establishment of a hospital necessitates a plethora of licenses and approvals, which frequently act as a barrier for private players seeking to expand their operations. Aside from licensing and approvals, the government is currently regulating prices of drugs and consumables. It must be understood that the value of output delivered by the sector is not simply the sum of input values. The sum total of services has intrinsic value that must be considered.

From a regulatory standpoint, there are numerous requirements that can be burdensome when compared to global norms such as single window clearance. A better understanding between regulatory authorities and healthcare providers is required. It is critical to recognize that private healthcare service providers cannot be compared to other businesses. Healthcare service providers must be viewed in light of the significant contribution they make to the overall well-being of the community.

Capital Intensive Industry:

Healthcare remains an industry that necessitates constant capital infusion. The fundamental requirements for running a medical facility, such as land, construction costs for specialised interiors, medical equipment, and manpower, are scarce and costly to obtain. The industry's high capital requirements make it difficult to enter or expand operations. Furthermore, the upkeep and improvement of medical treatment technologies necessitates a significant

ongoing expenditure. After a company has managed the initial capital expenditure required to open a facility, the task of balancing day-to-day expenses with competitive healthcare prices becomes difficult. As a result, the basic cost of establishing and operating a hospital is quite high, raising break-even points and stretching viability.

Dissimilar Markets:

With a diverse and growing population, India's need for quality healthcare services is critical. Even in markets that are relatively close, the requirements differ. Each micro-market has its own set of circumstances, including differences in demographics, disease profiles, customer attitudes, seasonal variations, price sensitivity, and so on. Hospitals in two different cities in the same state, and even within the same city, operate under different operating conditions with varying parameters. This necessitates greater customization and monitoring.

In the face of these complexities, significant management oversight is required to maintain clinical standards, balanced case mix, ensure adequate volumes, and upgrade technology on a regular basis.

Opportunities

Increased Digitization of Healthcare Solutions:

Digital technology continues to play a critical role in enabling the masses in India gain access to healthcare. Continuous digitization and the introduction of newer technologies such as telehealth have already broken-down barriers and have established patient-centric healthcare systems. Patients have started to book appointments and choose basic medical needs from the comfort of their own homes which has been driven by this advancement in technology. Doctors can access patient records at their fingertips and provide consultations with ease thanks to digital technologies and telemedicine. In recent decades, technological advancements have opened up new avenues for lowering distribution costs and increasing healthcare penetration. Such solutions will be most successful in extending connectivity to rural and remote areas and providing first-rate care, thereby eliminating the need for patients to travel long distances to urban health centers.

Changing Consumer preferences and delivery formats:

The general perception is that a certain segment of patients find the general hospital's setting to be intimidating and they respond better in a more relaxed atmosphere. For non-critical ailments, patients today prefer visiting single

specialty centers and other healthcare delivery formats. To meet this demand, healthcare providers have started to offer a variety of options such as short-stay centers, single-specialty centers, neighborhood clinics, and home services. These alternative healthcare delivery formats are economically viable and appealing because they require relatively lesser capital investment, tend to achieve a faster breakeven, and provide a better return profile. When compared to larger multi-specialty hospitals, some of these new formats have demonstrated greater specialization and the ability to create significant value.

Preventive Health and Wellness:

There has been a significant increase in health awareness among the people of this country. People are becoming more aware of the importance of healthy living and are making significant efforts to adopt a healthy lifestyle. They understand the significance of detecting a disease at an early stage and preventing it from progressing to a critical stage. This increased awareness has resulted in a promising opportunity in the areas of preventive health and wellness, which includes preventive health checks, diet and nutrition, exercise, and well-being.

Medical Value Travel:

Medical Value Travel (MVT) is a multibillion-dollar industry that is estimated to grow further driven by the numerous benefits it provides to patients. India's position as a preferred medical tourism destination has been bolstered as it has world-class hospitals, equipped with cutting-edge technology, skilled medical professionals, and relatively lower treatment costs. Indian hospitals can provide superior services at a lower cost. The assurance of quality healthcare facilities and cost-effectiveness are the two main factors that have drawn millions of patients from all over the world to India for medical treatment. The Government's proactive measures, such as approving the issuance of e-medical visas, have also contributed to the growth of Medical Value Travel in the country.

Favourable Demographic Profile:

While India continues to have a favourable demographic quotient due to its relatively young population, it also has a large number of elderly citizens in absolute terms. As a result, Indian healthcare providers have an opportunity to meet the healthcare expectations of the young while also meeting the increasing healthcare needs of the elderly. Along with this, the country is seeing a significant increase in disposable income among a variety of groups, including a growing middle class that can afford to pay for quality

healthcare. These changing demographics present service providers with an exciting opportunity.

Threats

High cost of resources:

Healthcare service providers are required to deliver better return ratios to their shareholders who have invested substantial capital in the company. The key element to enable these return ratios is efficient cost control and finding ways to improve realisations. Input costs in healthcare, on the other hand, have risen significantly and are expected to rise further in the future as a result of increased competition.

Land, qualified medical personnel, and equipment are resources that are finite in nature and are constantly in high demand. Furthermore, healthcare providers must continuously improve and adopt newer technologies which raises the overall healthcare cost. Furthermore, the government's push for price reductions through regulation runs the risk of putting hospital finances at risk. The constraint of incurring higher costs results in long gestation periods and low returns on investment.

Highly Competitive Industry:

The level of competition among both unorganised and organised players continues to remain high. Many entrepreneurs and business houses have entered the healthcare business as a result of the growing demand for healthcare services. Private and foreign investors are increasingly interested in this sector. They plan to invest and venture into the various segments of the healthcare industry that are available. Most of these newer players are offering services at lower prices than those of established players, increasing the level of competition. In some metros, there are even pockets of overcapacity, and rising competition may force competitors to adopt unfair practices in order to survive, stifling the growth and profitability of other players. Every market participant, whether in the organised or unorganised sector, aspires to be the market leader.

Scarcity of Skilled Manpower:

In India, there is a severe shortage of skilled healthcare personnel. On these measures, India lags behind other countries, including other developing nations like Brazil, with only 8 physicians and 21 nurses per 10,000 people. The shortage of doctors, nurses, and paramedics will result in prohibitive costs and derail the delivery of healthcare

services unless immediate steps are taken to increase the number of doctors, nurses, and paramedics.

Changing Government regulations:

The Indian government has taken a number of positive initiatives in recent years, including the National Health Protection Scheme (NHPS) and the Pradhan Mantri Jan Arogya Yojana (PMJAY), which have benefited the Indian healthcare sector. However, because hospitals are exempt from GST, hospitals were unable to use input GST credit on output services, which had a negative impact on health care service delivery costs and operating margins.

A current challenge for Indian healthcare service providers is the possibility of future regulatory interventions by government agencies

COMPANY OVERVIEW

Excellence in Operations

The Hospital offers international standard medical care, delivering several multi specialties under one roof. The hospital offers world class treatment at an affordable cost, focusing on specific areas where it can optimize efforts and values. Transplants, cardiology, oncology, neurology and orthopedic with higher revenue prospects are some of the key specialties.

Apart from these specialties, the hospital has been able to deliver outstanding clinical outcomes in some critical cases and emergencies.

Clinical Excellence

Clinical Excellence is the cornerstone upon which the hospitals' healthcare operations are built. Over the years, the hospital has consistently strived to deliver the highest standards of clinical outcomes in a variety of specialties and compares itself to leading institutions with the best clinical performance in the world in their respective specialties, while establishing internal standards to match or exceed this performance.

The hospital's persistent focus on Clinical Excellence has allowed it to continuously assess the quality of care provided to its patients and objectively measure the consistency and success of its healthcare delivery services. It has contributed significantly to the group's illustrious track record, allowing it to achieve high success rates even in the most difficult surgeries, such as transplants, cardiac care, and oncology.

Training and Continuing Medical Education

The hospitals encourages all of its medical professionals and other employees to participate in ongoing medical education and skill development. In order to improve patient care, the Company ensures that professionals and staff are up to date on the latest medical techniques and procedures. Knowledge sharing and the expansion of medical knowledge and literature repositories have been made possible thanks to collaborations with some of the most prestigious institutes.

Accreditations

The hospital has received accreditations from the Joint Commission International, USA, for meeting international healthcare quality standards for patient care and management. JCI is the world's premier accreditation body for patient safety and provision of quality healthcare.

Strategic Focus Areas

The Company continues to focus on growth while aiming at improving operating efficiency and clinical outcomes simultaneously. The aim is to achieve this through:

Enhancing emphasis on Centers of Excellence

The hospital places utmost emphasis on the nurturing and enabling growth of its Centers of Excellence (COEs) which focus on specialties such as Cardiac Sciences, Neurosciences, Orthopedics, Oncology, Transplants, Emergency, Critical Care, and Preventive Health. Each of these COEs will be comprehensively built under the supervision of dedicated Service Line Managers through Clinical Differentiation, Protocols, Outcomes and Benchmarks, Market Share, Talent, Academics, and Research. Putting a premium on COEs will result in a better case mix and, as a result, a higher margin profile. As occupancy levels improve to optimal levels, such case mix changes and improvements will ensure that top-line growth and revenue quality are fully protected.

Enhancing capital efficiency and optimization of asset utilization in mature facilities

The Company places utmost focus on stabilizing and compressing time-to-maturity at new facilities. To ensure a superior specialisation mix, specialist consultants have been recruited at Apollo Hospitals' COEs, and to maintain its competitive advantage and increase capital efficiency, the Company continues to develop leaner operations management strategies. A comprehensive asset turnover strategy is being implemented.

Preventive Health

The Company has always emphasised wellness and recognised the importance of comprehensive preventive health programmes in keeping citizens healthy. The organisation was the first in the country to implement the Master Health Check Program and to advocate for tax breaks for health-care costs. As the country continues to be plagued by Non-communicable Diseases (NCDs), the majority of which are preventable or easily detectable, controlled, or cured through early-stage screening, this critical programme is a cornerstone of the organization's strategy for the next decade.

Medical Value Travel

Medical Value Travel is gaining strategic importance due to its ability to generate employment, encourage cultural exchanges, improve the country's positioning by projecting 'soft power', and earn foreign exchange. Patients across the globe seek better quality and affordable health care options, availability of the latest medical technologies and accreditations, facilitation around hospitality services and minimal waiting time. India has been able to successfully emerge as one of the most affordable and best providers of healthcare among all medical tourism destinations. The country has been ranked in the top three destinations in Asia along with Thailand and Singapore and the hospital continues to have a phenomenal track record of providing better clinical outcomes at a fraction of the international costs.

Infection Control and Environment

The Infection Prevention and Control Program, forms an integral part of our organization since many years now. Reducing the preventable part of health care associated infections (HCAI) is central to our program. Through implementation of 'bundles' and targeted infection prevention Campaigns, our healthcare indices currently stand at 0.74, 1.01 and 0.89 per 1000 device days for central-line associated bloodstream infections (CLABSI), ventilator associated pneumonia (VAP) and catheter associated urinary tract infections (CAUTI) respectively and are comparable internationally to the best centers.

Continuous efforts are aimed towards increasing awareness on hand - hygiene - the most important hygiene aspect. Like the previous years, various activities were carried out on World Hand Hygiene Day on 5 May 2022. Dedicated hand-hygiene stations with educational games and innovative tools highlighted the importance of

hand-hygiene.

Augmentation of our Antimicrobial Stewardship Program continues to be a major focus and aims at judicious use of antimicrobials. Besides strict vigilance of highly restricted antimicrobials which are not allowed to be issued without clearance from Infection Control, antimicrobials without high impact scientific evidence are not allowed to form a part of our hospital formulary. Periodic review of antimicrobial guidelines is carried out. Syndromic molecular array panels as well as tests aimed at detection of resistance genes being carried out in Department of Microbiology, aid in rapid identification of infections, initiating appropriate antimicrobials in a timely manner and de-escalating when indicated. To increase antimicrobial awareness, a National Webinar themed 'OTT* Sepsis (*Other than That) was conducted under the aegis of Hospital Infection Society - India Delhi NCR Chapter on 29 October 2022 to emphasize on rational use of antimicrobials only for certain indications.

Repeated training activities and competency checks encompassing hand - hygiene, safe PPE use, respiratory hygiene and mask etiquette along with annual mock drills contribute towards a safe environment for the patients and staff alike and keep us vigilant towards preparedness for any future pandemics.

The evolution of our Infection Control Program continues to strive for infection prevention in healthcare facilities and focus upon the safety of healthcare workers, patients, attendants and the community at large.

Awards and Accolades

The Hospital received a number of awards and accolades during the year. Some of them are as under: -

Award	Category / Project Awarded
Association of Healthcare Providers (India)	Patient Friendly Hospital
Consortium of Accredited Healthcare Organizations (CAHO)	Certificate of Achievement for best practices on medication safety
D L Shah Award	Call-a-cab
The Week	Best private multispecialty hospital in Delhi
Quality Council of India	For best practices' implementation in Quality: 'An Eye on Insulin' For Innovation in Service Technology- 'Unleashing the power of Technology with Nurses'

Risks and Concerns

Given the increase in operations, our organization is exposed to a wider range of risks and uncertainties. These internal and external factors may affect the attainment of the organization's objectives - whether strategic, operational or financial. Indraprastha Apollo Hospitals operates in a business environment that is characterized by increasing competition and market unpredictability. It is exposed to a number of risks in the ordinary course of business. This is inevitable, as there can be no entrepreneurial activity without the acceptance of risks and associated profit opportunities.

At Indraprastha Apollo Hospitals, we identify business sustainability risks and opportunities on an ongoing basis and integrate these into our existing risk management framework. We have adopted certain processes which continuously enhance risk awareness and promote a culture of risk management.

The Board of Directors has constituted a Risk Management Committee of Directors to ensure that internal financial controls are in place. The Risk Management Committee identifies, assesses, prioritizes, manages, monitors and communicates suitable measures to manage such risks. The status of major risks faced by the Company and measures taken to address and minimize such risks are being reported on a quarterly basis to the Board of Directors.

The risks that may adversely impact the functioning of the Company include, but are not limited to: -

- Competitive intensity and new entrants to the market
- Pace of obsolescence of technology and treatment methods utilized by us
- Inflationary pressures and other factors affecting demand
- Increasing costs of wages, materials, transport and storage
- Labor shortages and attrition of key staff including medical professionals
- Increased statutory compliances and regulatory pressures including changes in tax laws
- Complaints before the Consumer Courts filed by patients or their relatives against the hospital and the Consultant Doctors for medical negligence.
- On a Public Interest Litigation (PIL) regarding free

treatment in the hospital, the Hon'ble Delhi High Court vide its order dated 22nd September, 2009, has held that free treatment provided by the hospital shall be inclusive of medicines and consumables. The company has filed a Special Leave Petition before the Hon'ble Supreme Court challenging the order of the Hon'ble Delhi High Court. The Hon'ble Supreme Court of India has admitted the Special Leave Petition and has passed an interim order on 30th November, 2009. In pursuance of the interim order, the Company has been providing free treatment to the patients referred by the Govt. of NCT of Delhi and has been charging only for medicines & medical consumables. The financial impact in the matter can be quantified only upon the final decision by the Hon'ble Supreme Court of India.

- Increasing pricing pressure from insurance companies, e.g., requests for discounts on rack rates, medication etc., will have an adverse impact on margins and revenues.

Internal Control Systems and their Adequacy

Indraprastha Apollo Hospital is committed to maintaining high standards of internal controls throughout its operations. An adequate and synchronized internal control framework deploys a well-designed robust system which allows optimal use and protection of assets, facilitates accurate and timely compilation of financial statements and management reports. Additionally, it also ensures compliance with statutory laws, regulations and company policies.

While no system can provide absolute assurance against material loss or financial misstatement, the robust internal control systems which are reviewed periodically provide reasonable assurance that all company assets are safeguarded and protected. The Internal control system is designed to manage rather than to completely eliminate the risk of failure to achieve business objectives. The system is designed to ensure that all transactions are evaluated, authorized, recorded and reported accurately. The framework strictly adheres to various procedures, laws, rules and statutes. In addition to this, extensive budgetary control reviews form the mechanism for timely review of actual performance with forecasts.

Such internal control procedures are further augmented by an extensive programme of internal, external audits and periodic review by the management.

At Indraprastha Apollo Hospital, the management is responsible for assessing business risks in all aspects of its operations and for implementing effective and efficient

processes and controls whilst ensuring compliance with internal and external rules and regulations. While reviewing our internal controls, sufficient regard is given to the risks to which the business is exposed, the likelihood of such risks occurring, and the costs of protecting against them.

FINANCIALS

Discussion on Financial Performance and Results of Operations

During the year under review, the Company recorded income from operations Rs. 1098.67 crore against Rs. 888.16 crore in the corresponding period last fiscal.

The following table shows the key drivers of our revenues for the periods presented:

Year Ended March 31, 2023

Particulars	31.03.2023	31.03.2022	Increase (Decrease)	% Increase (Decrease)
Discharges	61,826	50,334	11,492	23%
Revenues per patient (₹)	1,77,704	1,76,452	1,252	1%
Average length of stay (days)	3.08	3.55		
Out-patients	5,15,877	3,77,858	1,38,019	37%
Revenue per bed day (₹)	57,775	49,761	8,014	16%

Expenses

Salaries and Benefits

Company's salaries and benefits expense of Rs. 213.92 crore during FY2022 increased by 15% to Rs. 246.70 crore in FY2023.

Year Ended March 31, 2023

Particulars	31.03.2023	% of Revenue	31.03.2022	% of Revenue	Increase (De-crease)	% Increase (De-crease)
Salaries, wages and benefits	246.70	22%	213.92	24%	32.78	15%
No. of employees	2947		2662			

Professional Fees paid to doctors

During the year, professional fees paid to doctors has been increased from Rs. 209.52 crore during FY2022 to Rs. 280.55 crore during FY2023.

Administrative Expenses

The following table summarizes our operating and administrative expenses for the periods presented

Year Ended March 31, 2023

Particulars	31.03.2023	% of Revenue	31.03.2022	% of Revenue	Increase (De-crease)	% Increase (De-crease)
Repairs and maintenance	23.21	2%	18.23	2%	4.98	27%
Rents and leases	2.19	0%	1.86	0%	0.33	18%
Outsourcing expenses	47.47	4%	44.20	5%	3.27	7%
Marketing and advertising	88.98	8%	53.35	6%	35.63	67%
Legal and professional fees	6.89	1%	4.54	1%	2.35	52%
Rates & taxes	6.09	1%	4.24	0%	1.85	44%
Provision for doubtful debts & Bad debts written off	3.04	0%	3.05	0%	-0.01	0%
Power & Fuel	22.74	2%	20.56	2%	2.18	11%
Other administrative expenses	26.50	2%	26.67	3%	-0.17	-1%
Total	227.11	20%	176.70	20%	50.41	29%

Provision for Income Taxes

The provision for taxes during the year ended March 31, 2023 is Rs. 31.03 crore compared to Rs. 20.45 crore in the previous year ended March 31, 2022.

Key Financial Ratios

Particulars	Numerator	Denominator	FY 2022-23	FY 2021-22
Current Ratio (in times)	Total Current Assets	Total Current Liabilities	1.72	1.68
Debt-Equity Ratio (in times)	Total Debt	Shareholders Equity	NA	NA

Particulars	Numerator	Denominator	FY 2022-23	FY 2021-22
Debt Service Coverage Ratio (in times)	Earnings available for debt service	Debt Service	NA	NA
Return on Equity Ratio (in %)	Net profit after taxes	Average Total Equity	22%	18%
Inventory turnover ratio	Cost of goods sold or sales	Average inventory	21.00	18.55
Trade Receivables Turnover Ratio (in times)	Net credit sales	Average Trade Receivables	10.43	8.73
Trade Payables Turnover Ratio (in times)	Net credit purchases	Average Trade Payables	8.02	6.64
Net Capital Turnover Ratio (in times)*	Revenue from operations	Average working capital	40.56	29.53
Net Profit Ratio (in %)	Profit for the year	Revenue from operations	7%	6%
Return on Capital Employed (in %)**	Profit before tax and finance cost	Capital Employed = Net worth + deferred tax liabilities	29%	23%
Return on Investment (in %)	Income generated from invested funds	Average invested funds in treasury investments	NA	NA

Reason for change in ratios more than 25%

* Increased due to growth in revenue owing to increased footfall of patients during the year.

** Increase due to growth in revenue and steady improvement in margins.

Human Resources

Values defines a company. Indraprastha Apollo has always been a family, working together, crossing hurdles together, and notching up victories together. The Company's core values hold and unite the people for a common purpose. They exemplify what is fundamentally the Apollo culture which is what makes Apollo one of the leading healthcare providers in the world.

"The people that work in Apollo Hospitals form the very nucleus of the Group and their actions contribute to the Group's journey of touching a billion lives"

Indraprastha Apollo Hospital which has always given utmost importance to excellence and innovation in the field of healthcare continues to place its focus on its most valued resource, its employees. The institution has always understood the importance of having a highly skilled

workforce, which is proficiently trained to provide the highest standard of care.

In addition to the high level of skills, commitment and professionalism of its people, Indraprastha Apollo Hospital strongly believes that proper management of human resources is extremely critical in providing high quality healthcare. The Company has, therefore, built an effective Human Resources department which supports the business in achieving sustainable and responsible growth. Indraprastha Apollo Hospitals has always strived hard in developing its workforce and building the right capabilities in the organization. It continues to focus on progressive employee relations policies, creating an inclusive work culture and building a strong talent pipeline. The Human Resources function contributes to the success of Indraprastha Apollo Hospital and its employees through leadership, service and excellence in human resource management. The Human Resources department at Indraprastha Apollo Hospitals has been playing an important role in creating a conducive work environment for its employees and supports them throughout their employment life cycle.

The total number of employees in the Company as on 31st March, 2023 was 2947 as against 2662 employees in the previous year. The Company has also engaged contractors for various support services in the Hospital and they have deployed 1038 workers as against 994 workers in the previous year. Besides the above, there are Consultant Doctors who work on a 'Fee for Service' basis.

Together, these diverse employees bring their experience, culture and commitment to the work they do every day to improve the health of patients. Cultural integration of the workforce has always been a key focus area and the organization's learning initiatives are designed around assimilation and development of individual and team competencies to create a patient centric culture. Every employee of the Indraprastha Apollo Hospitals family embraces the Apollo Hospitals Group's "Tender Loving Care" philosophy in dealing with patients and is committed to the Group Vision - "To Touch a Billion Lives."

Apollo Culture

"Excellence, Expertise and Empathy are the three words that define our culture."

Investment in continuous learning is an integral component of the HR system which empowers employees to be well-prepared for providing superior patient care. Programs related to Talent Attraction, Talent Development and Talent Management continue to be institutionalized for delivering outstanding patient experience. Training has been

extensively used as a potent tool to engage and energize talent. Commitment and competence of employees are key drivers of overall organizational performance and thus every endeavor is made to strengthen organizational culture and retain the best talent.

Rewards and Recognition

Rewards and Recognition is an integral part of the Organization's culture which believes that a satisfied individual contributes more. Consistent efforts are taken by the Company to recognize and reward its employees for their contributions.

Cautionary Statement

Some of the statements in this Management Discussion and Analysis that describe the Company's objectives, projections, estimates, expectations and predictions may contain certain 'forward looking statements' which are

within the meaning of applicable laws and regulations. These statements and forecasts involve risks and uncertainty because they relate to events and depend upon circumstances that may occur in the future. There are a variety of factors that may cause real events or trends to vary significantly from those reflected or implied by these forward-looking statements and predictions. Important developments that could impact Company's performance include increased material costs, technology developments, significant changes in the political and economic environment, tax laws and labor relations.

For and on behalf of the Board

Jasmine Shah
Chairman
(DIN 08621290)

Place: New Delhi
Date : 4th August, 2023

REPORT ON CORPORATE GOVERNANCE

1. COMPANY'S PHILOSOPHY ON CODE OF GOVERNANCE

The basic objective of corporate governance policies adopted by the Company is to attain the highest levels of transparency, accountability and integrity. This objective extends not merely to meeting statutory requirements but goes beyond by putting into place procedures and systems which are in accordance with global best practices of governance. The Company believes that good Corporate Governance enhances the trust and confidence of all stakeholders. Good corporate behavior helps to enhance and maintain public trust in companies and the stock markets.

The Company reviews its corporate governance practices to ensure that they reflect the latest developments in the corporate arena, positioning itself to conform to the best corporate governance practices. Your Company is committed to pursuing excellence in all its activities and in maximization of shareholders' wealth.

The Company's corporate governance policies and practices focus on the following principles:

1. To recognize the respective roles and responsibilities of the Board and management.
2. To achieve the highest degree of transparency by maintaining a high degree of disclosure levels.
3. To ensure and maintain high ethical standards in its functioning.
4. To accord the highest importance to investor relations.
5. To ensure a sound system of risk management and internal controls.
6. To ensure that employees of the Company subscribe to the corporate values and apply them in their conduct.
7. To ensure that the decision making process is fair and transparent.
8. To ensure that the Company follows globally recognized corporate governance practices.

Governance Structure

Company's Governance structure broadly comprises of the Board of Directors ("the Board") and the Committees

of the Board at the apex level and the Management structure at the operational level. This layered structure brings about a harmonious blend in governance as the Board sets the overall corporate objectives and gives direction to and empowers the Management to achieve these corporate objectives within a given framework, thereby bringing about an enabling environment for value creation through sustainable profitable growth.

The Board plays a pivotal role in ensuring that the Company runs on sound and ethical business practices and that its resources are utilized for creating sustainable growth and societal wealth. The Board operates within the framework of a well-defined responsibility matrix which enables it to discharge its fiduciary duties of safeguarding the interests of the Company, ensuring fairness in the decision making process and integrity and transparency in the Company's dealing with its Members and other stakeholders.

With a view to have a more focused attention on various facets of business and for better accountability, the Board has constituted the following committees viz. Audit Committee, Stakeholders' Relationship Committee, Nomination and Remuneration Committee, Risk Management Committee and Corporate Social Responsibility Committee. Each of these Committees have been mandated to operate within a given framework.

A management structure for running the business of the Company as a whole is in place with appropriate delegation of powers and responsibilities.

2. BOARD OF DIRECTORS

The Board has a healthy blend of executive and non-executive directors, and consequently ensures the desired level of independence in functioning and decision-making. Moreover, all the non-executive directors are eminent professionals, and bring the wealth of their professional expertise and experience to the management of the Company.

(a) Composition of Board of Directors

As on 31st March 2023, the Board of Directors consisted of seventeen members comprising of one Executive Director and sixteen Non-Executive Directors including nine Independent Directors.

The Chairman, Vice-Chairman, Managing Director and Independent Directors of the Company are not liable to retire by rotation. All other Directors are liable to retire by rotation.

(b) Number of Directorship(s), Committee Membership(s) / Chairmanship(s) of Directors

The number of Directorship(s), Committee Membership(s) / Chairmanship(s) of all Directors is within respective limits prescribed under the Act and Listing Regulations.

None of the Independent Directors of the Company serve as an Independent Director in more than seven listed companies as prescribed under Regulation 17 of the Listing Regulations.

Necessary disclosures have been made by the Directors.

(c) Declaration of Independence

Based on the disclosures received from all the Independent Directors and also in the opinion of the Board, the Independent Directors fulfill the conditions specified in the Companies Act, 2013, and SEBI Listing Regulations and are independent of the Management.

No Independent Director has resigned during the year.

(d) Board Meetings

Four Board meetings were held during the financial year ended 31st March, 2023, on 20th May, 2022, 8th August, 2022, 4th November, 2022, and 8th February, 2023. The

intervening gap between the meetings was within the period prescribed under the Companies Act, 2013 read with the Listing Regulations.

The Companies Act, 2013, read with the relevant rules made thereunder, now facilitates the participation of a Director in Board / Committee Meetings through video conferencing or other audio visual mode. Accordingly, the option to participate in the Meeting through video conferencing was made available for the Directors.

(e) Names and categories of the Directors on the Board, their attendance at Board Meetings held during the year under review and at the last Annual General Meeting ("AGM"), name of other listed entities in which the Director is a director and the number of Directorships and Committee Chairmanships / Memberships held by them in other public limited companies including listed companies

The names and categories of the Directors on the Board, their attendance at Board Meetings held during the year under review and at the last Annual General Meeting ("AGM"), name of other listed entities in which the Director is a director and the number of Directorships and Committee Chairmanships / Memberships held by them in other public limited companies including listed companies, as on 31st March, 2023, are given herein below.

Name of the Director and Category

Name of the Director and Category	Number of Board Meetings attended	Attendance at the last AGM	Number of Directorships in other public Companies (A)		Number of Committee positions held in other public companies (B)		Directorship in other listed entity (Category of Directorship)
			Chairperson	Member	Chairperson	Member	
Mr. Jasmine Shah (Chairman/Non-Executive/ Promoter) DIN: 08621290	4	Yes	Nil	Nil	Nil	Nil	Nil
Dr. Prathap C Reddy (Vice Chairman/Non-Executive/ Promoter) DIN: 00003654	4	Yes	5	Nil	Nil	Nil	Apollo Hospitals Enterprises Limited – Executive Chairman
Dr. Mahesh Verma (Non-Executive/Promoter) DIN: 08997324	4	Yes	Nil	Nil	Nil	Nil	Nil
Ms. Sangita Reddy (Non-Executive /Promoter) DIN: 00006285	4	Yes	Nil	8	0	1	Apollo Hospitals Enterprises Limited – Whole Time Director
Ms. Suneeta Reddy (Non-Executive/Promoter) DIN: 00001873	4	Yes	Nil	6	0	1	Apollo Sindoori Hotels Limited – Non-Executive Director Apollo Hospitals Enterprises Limited – Managing Director

Name of the Director and Category (Continued)

Name of the Director and Category	Number of Board Meetings attended	Attend-ance at the last AGM	Number of Directorships in other public Companies (A)		Number of Committee positions held in other public companies (B)		Directorship in other listed entity (Category of Directorship)
			Chairperson	Member	Chairperson	Member	
Mr. Udit Prakash Rai (1) Non-Executive/Promoter DIN: 07573658	3	Yes	Nil	Nil	Nil	Nil	Nil
Mr. Vikram Bhat Non-Executive/Promoter DIN: 09076418	4	Yes	Nil	Nil	Nil	Nil	Nil
Dr. Arun Rai (Independent) DIN: 07159822	3	Yes	Nil	Nil	Nil	Nil	Nil
Mr. Deepak Vaidya (Independent) DIN: 00337276	4	Yes	Nil	4	1	4	Spandana Sphoorty Financial Limited – Independent Director
Dr. Menaka Guruswamy (Independent) DIN: 08742679	3	No	Nil	Nil	Nil	Nil	Nil
Ms. Madhumita Ganguli (Independent) DIN: 00676830	2	No	Nil	3	Nil	2	CL Educate Limited – Independent Director Campus Activewear Limited – Independent Director
Mr. Salil Singhal (Independent) DIN: 00006629	3	No	1	4	Nil	1	Somany Ceramics Limited – Director
Mr. Satnam Arora (Independent) DIN: 00010667	4	Yes	0	3	Nil	2	Kohinoor Foods Limite – Joint Managing Director
Mr. S Regunathan (Independent) DIN: 00286505	4	Yes	Nil	Nil	Nil	Nil	Nil
Ms. Vineeta Rai (Independent) DIN: 07013113	4	Yes	Nil	2	Nil	Nil	Solara Active Pharma Science Limited – Independent Director
Mr. Vinayak Chatterjee (Independent) DIN: 00008933	4	Yes	Nil	4	Nil	2	Apollo Hospitals Enterprise Limited – Independent Director LTI Mindtree Limited – Independent Director KEC International limited – Director
Mr. Shivakumar Pattabhiraman (Managing Director/Executive) DIN: 08570283	4	Yes	Nil	Nil	Nil	Nil	Nil

Notes:

(A) Directorship in public companies registered under the Companies Act, 2013, (earlier Companies Act, 1956), excluding companies under Section 8 of the Companies Act, 2013, (earlier Section 25 of the Companies Act, 1956).

(B) Only covers Membership / Chairmanship of Audit Committee and Stakeholders Relationship Committee of public limited companies.

(1) Resigned as a Director of the Company w.e.f 4th August, 2023.

As on 31st March, 2023, none of the Directors on the Board hold the office of Director in more than 10 Public Limited Companies, or Membership of Committees of the Board in more than 10 Committees and Chairmanship of more than 5 Committees, across all companies. None of the Independent Directors of the Company serve as an Independent Director in more than seven listed companies and where any Independent Director is serving as whole time director in any listed company, such director does not serve as an Independent Director in more than three listed companies.

(f) Availability of Information to Board Members

The Board periodically reviews the items required to be placed before it and in particular reviews and approves quarterly/half yearly unaudited financial statements and the audited annual financial statements, corporate strategies, business plans, annual budgets, projects and capital expenditure. It monitors overall operating performance and reviews such other items which require the Board's attention. It directs and guides the activities of the Management towards the set goals and seeks accountability. It also sets standards of corporate behaviour, ensures transparency in corporate dealings and compliance with laws and regulations.

The agenda for the Board meetings cover items as prescribed under Part A of Schedule-II of Sub-Regulation-7 of Regulation-17 of the Listing Regulations to the extent these are relevant and applicable. All agenda items are supported by relevant information, documents and presentations to enable the Board to take informed decisions.

The information made available to the Board includes the following:

1. Annual operating plans, budgets and any updates.
2. Capital budgets and any updates.
3. Quarterly results of the Company.
4. Minutes of meetings of the Audit Committee and other Committees of the Board.
5. Information or recruitment and remuneration of senior officers just below the Board, including appointment and removal of the Chief Financial Officer and the Company Secretary.
6. Show cause, demand, prosecution notices and penalty notices, which are materially important.
7. Fatal or serious accidents, dangerous occurrences any material effluent or pollution problems.
8. Any material default in financial obligations to and by the Company or substantial non-payment for goods sold by the Company.
9. Any issue which involves possible public or product liability, claims of substantial nature including

judgments or orders which, may have passed strictures on the code of conduct of the Company or taken an adverse view regarding another enterprise that can have negative implications on the Company.

10. Transactions that involve substantial payments towards goodwill, brand equity or intellectual property.
11. Significant labour problems and their resolutions. Any significant development on the Human Resources/ Industrial Relations front like signing of wage agreements, implementation of Voluntary Retirement Scheme ("VRS"), etc.
12. Sale of material investments, subsidiaries, assets, etc. which are not in the normal course of business.
13. Quarterly details of foreign exchange exposures and the steps taken by management to limit the risks of adverse exchange rate movement, if material.
14. Non-compliance of any regulatory, statutory or listing requirements and shareholder services such as non-payment of dividend, delay in share transfers etc.

(g) Independent Directors' Meeting

During the year under review, the Independent Directors met on 3rd August, 2022 inter alia, to discuss the following matters:

- Evaluation of the performance of Independent Directors and the Board as a whole;
- Evaluation of the performance of the Chairman of the Company, taking into account the views of the Executive and Non-Executive Directors; and
- Evaluation of the quality, content and timelines of flow of information between the Management and the Board that is necessary for the Board to effectively and reasonably perform its duties.

(h) The Board periodically reviews the compliance reports of all laws applicable to the Company.

(i) Number of shares held by Non-Executive Directors

The number of shares held by Non-Executive Directors, in the share capital of the Company as on 31st March, 2023, is as under: -

Name of the Non-Executive Director	Number of shares held
Dr. Prathap C Reddy	237187
Ms. Suneeta Reddy	138293
Dr. Sangita Reddy	8600
Ms. Vineeta Rai	1

Note: None of the Directors was holding shares as on 31st March, 2023, in the share capital of the Company, except above named Directors.

The Company has not issued any convertible instruments.

(j) Relationships between Directors

Relationships between Directors inter-se is as given below:

Name of the Director	Relationship with other Directors
Dr. Prathap C Reddy	Father of Ms. Suneeta Reddy and Dr. Sangita Reddy
Ms. Suneeta Reddy	Daughter of Dr. Prathap C Reddy and sister of Dr. Sangita Reddy
Dr. Sangita Reddy	Daughter of Dr. Prathap C Reddy and sister of Ms. Suneeta Reddy

None of the Directors are related to each other except as detailed above.

(k) Familiarisation programmes for Board Members

The Board Members are eminent personalities having wide experience in the fields of business, finance, education, industry, commerce and administration. Their presence on the Board has been valuable and fruitful in taking business decisions and effectively overseeing the management team.

The Board Members are provided with necessary documents/brochures, reports and internal policies to enable them to familiarize with the Company's procedures and practices.

Periodic presentations are made at the Board and Committee Meetings, on business apart from performance updates of the Company, on topics like Environmental

& Social topics, global business environment, business strategy and risks involved.

Updates on relevant statutory changes encompassing important laws are regularly circulated to the Independent Directors.

The familiarisation programme along with details of the same imparted to the Independent Directors are available on the website of the Company <https://delhi.apollohospitals.com/pdf/Familiarization-Program-for-Independent-Directors-2022.pdf>

(l) Skills /expertise/competency of the Board of Directors

The Board of Directors of the Company comprises highly qualified members who possess required skills, expertise and competence that allow them to make effective contributions to the Board and its Committees.

The following skills / expertise/ competencies have been identified for the effective functioning of the Company and are currently available with the Board of Directors:-

1. Leadership
2. Operational experience
3. Strategic Planning
4. Industry Experience
5. Financial Management
6. Regulatory / Legal and Risk Management
7. Corporate Governance
8. Diversity

While all the Board members possess the skills identified, their area of core expertise is given below:

Name of the Director	Nature of Skills/Expertise						
	Corporate Leadership	Healthcare Experience	Financial Acumen	Diversity	Governance	Technology	Risk Management
Mr. Jasmine Shah	✓	✓		✓	✓	✓	✓
Dr. Prathap C Reddy	✓	✓	✓		✓	✓	
Ms. Suneeta Reddy	✓	✓	✓		✓		✓
Dr. Sangita Reddy	✓	✓	✓		✓	✓	
Mr. Shivakumar Pattabhiraman	✓	✓	✓		✓		✓
Mr. Satnam Arora	✓			✓	✓		
Mr. S. Regunathan	✓	✓	✓	✓	✓	✓	✓
Mr. Deepak Vaidya	✓	✓	✓	✓	✓	✓	✓
Dr. Arun Rai	✓			✓	✓	✓	
Mr Vinayak Chatterjee	✓		✓	✓	✓	✓	✓
Ms. Menaka Guruswamy	✓			✓	✓		
Ms. Vineeta Rai	✓	✓		✓	✓		
Mr. Salil Singhal	✓			✓	✓		✓
Prof. (Dr.) Mahesh Verma	✓	✓	✓	✓	✓	✓	✓
Ms. Madhumita Ganguli	✓			✓	✓		✓
Mr. Vikram Bhat	✓		✓		✓	✓	✓
Mr. Udit Prakash Rai	✓	✓			✓	✓	✓

(m) Code of Conduct for Board Members and Senior Management Personnel

The Company has adopted a Code of Conduct for the Board Members and Senior Management Personnel of the Company. This Code helps the Company to maintain the Standard of Business Ethics and ensure compliance with the legal requirements, specifically under Regulation 17(3) of the Listing Regulations. The Code is aimed at preventing any wrongdoing and promoting ethical conduct of the Board and employees.

Mr. Priya Ranjan, AVP - Corporate Affairs & Legal has been appointed as the Compliance Officer and is responsible to ensure adherence to the Code by all concerned. A copy of the code of conduct has been posted on the Company's official website <https://www.apollohospitals.com/delhi/pdf/Code-of-Conduct-for-Board-Members-Key-Managerial-Personnel-and-Senior-Management.pdf>

The Code lays down the standard of conduct which is expected to be followed by the Directors and the designated employees in their business dealings and in particular on matters relating to integrity in the work place, in business practices and in dealing with stakeholders. All the Board Members and the Senior Management personnel have confirmed compliance with the Code, for the financial year ended 31st March, 2023.

The declaration regarding compliance with the code of conduct is appended to this report.

(n) Code of Conduct for Prevention of Insider Trading

The Company has adopted a Code of Conduct for Prevention of Insider Trading by Designated Persons' ("the Code") in accordance with the SEBI (Prohibition of Insider Trading) Regulations, 2015 (The PIT Regulations). Mr. Priya Ranjan, AVP - Corporate Affairs & Legal serves as the Compliance Officer. All the Directors and Senior Management Personnel and such other designated employees of the Company who are expected to have access to unpublished price sensitive information relating to the Company are covered under the said code. The Directors, their relatives, senior management personnel, designated employees etc., are restricted from purchasing, selling and dealing in the shares while being in possession of unpublished price sensitive information about the Company during certain prohibited periods. All Board Directors and the designated employees have confirmed compliance with the Code.

The Company has also formulated Code of Practices and Procedures for Fair Disclosure of Unpublished Price Sensitive Information in compliance with the PIT Regulations. This Code is displayed on the official website <https://www.apollohospitals.com/delhi/pdf/SEBI-Insider-Trading-Policy.pdf>

3. AUDIT COMMITTEE

(a) Terms of reference

The terms of reference of the Audit Committee covers the areas as contemplated in Section 177 of the Act and Regulation 18 of the Listing Regulations, which inter-alia shall include:

1. Oversight of the company's financial reporting process and the disclosure of its financial information to ensure that the financial statement is correct, sufficient and credible.
2. Recommend appointment, remuneration and terms of appointment of auditors, including cost auditors, of the Company.
3. Approval of payment to statutory auditors, including cost auditors, for any other services rendered by them.
4. Review with the management, the annual financial statements and auditor's report thereon before submission to the Board for its approval, with particular reference to:
 - (a) matters required to be included in the Directors' responsibility statement to be included in the Board's report in terms of clause (c) of sub-section (3) of Section 134 of the Companies Act, 2013;
 - (b) changes, if any, in accounting policies and practices and reasons for the same;
 - (c) major accounting entries involving estimates based on the exercise of judgement by management;
 - (d) significant adjustments made in the financial statements arising out of audit findings;
 - (e) compliance with listing and other legal requirements relating to financial statements;
 - (f) disclosure of any related party transactions;
 - (g) modified opinion(s) in the draft audit report.
5. Review with the management, the quarterly financial statements before submission to the Board for approval.
6. Review with the management, the statement of uses / application of funds raised through an issue (public issue, rights issue, preferential issue, etc.), the statement of funds utilised for the purposes other than those stated in the offer document / prospectus / notice and the report submitted by the monitoring agency monitoring the utilisation of proceeds of a public or rights issue, and making appropriate recommendations to the Board to take up steps in this matter.
7. Review and monitor the auditor's independence and performance, and effectiveness of the audit process.

8. Approval or any subsequent modification of transactions with related parties of the Company.
9. Scrutiny of inter-corporate loans and investments.
10. Valuation of undertakings or assets of the Company, wherever it is necessary.
11. Evaluation of internal financial controls and risk management systems.
12. a) Review with the management, performance of statutory and internal auditors.
b) Review with the management adequacy of the internal control systems.
13. Review the adequacy of internal audit function, if any, including the structure of internal audit department, staffing and seniority of the official heading the department, reporting structure, coverage and frequency of internal audit.
14. Discuss with internal auditors of any significant findings and follow up there-on.
15. Review the findings of any internal investigations by the internal auditors into matters where there is suspected fraud or irregularity or a failure of internal control systems of a material nature and report the matter to the Board.
16. Discuss with statutory auditors before the audit commences, about the nature and scope of audit as well as hold post audit discussion to ascertain any area of concern.
17. Look into the reasons for substantial defaults, in the payment to the depositors, debenture holders, shareholders (in case of non-payment of declared dividend) and creditors.
18. Review the functioning of the Whistle Blower mechanism / oversee the vigil mechanism.
19. Approval of appointment of Chief Financial Officer after assessing qualifications, experience and background etc. of the candidate.
20. Mandatorily review the following:
 - a) Management Discussion and Analysis of financial condition and results of operations
 - b) Statement of significant related party transactions (as defined by the Audit Committee), submitted by management
 - c) Management letters / letters of internal control weaknesses issued by the statutory auditors
 - d) Internal audit reports relating to internal control weaknesses
 - e) Appointment, removal and terms of remuneration of the chief internal auditor
 - f) Statement of deviations:
 - (i) quarterly statement of deviation(s) including report of monitoring agency, if applicable,

submitted to stock exchange(s) in terms of Regulation 32(1) of the Listing Regulations.

- (ii) annual statement of funds utilised for purpose other than those stated in the offer document /prospectus in terms of Regulation 32(7) of the Listing Regulations.

21. Note report of compliance officer as per SEBI (Prohibition of Insider Trading) Regulations, 2015.
22. Carry out any other function as is mandated by the Board from time to time and / or enforced by any statutory notification, amendment or modification as may be applicable.

(b) Composition, name of members and Chairperson

As on 31st March, 2023, the Audit Committee consisted of six Non-Executive Directors (including four Independent Directors) namely Mr. S. Regunathan, Ms. Suneeta Reddy, Mr. Satnam Arora, Mr. Deepak Vaidya, Ms. Vineeta Rai and Mr. Udit Prakash Rai.

Mr. Priya Ranjan, AVP - Corporate Affairs & Legal is the Secretary to the Audit Committee.

Mr. Udit Prakash Rai has resigned as a Director of the Company w.e.f 4th August 2023, hence he ceased to be a member of the Audit Committee. Mr. Vikram Bhat has been appointed as a member of the Audit Committee in place of Mr. Udit Prakash Rai w.e.f 4th August, 2023.

(c) Meetings of Audit Committee

The Audit Committee met four (4) times during the year on 20th May, 2022, 8th August, 2022, 3rd November, 2022, and 8th February, 2023. The intervening gap between the meetings was within the period prescribed under the Companies Act, 2013 read with the Listing Regulations. The names of Members, Chairman and their attendance at the Audit Committee Meetings, as on 31st March, 2023, is as given below:

Members	Category	Meetings Held	Meetings Attended
Mr. S. Regunathan (Chairman)	Independent - Non-Executive	4	4
Ms. Suneeta Reddy	Non-Executive	4	4
Mr. Satnam Arora	Independent - Non-Executive	4	4
Mr. Deepak Vaidya	Independent - Non-Executive	4	4
Ms. Vineeta Rai	Non-Executive	4	4
Mr. Udit Prakash Rai	Independent - Non-Executive	4	4

The Managing Director, Associate Vice President cum Company Secretary, Chief Financial Officer and representatives of Statutory Auditors & Internal Auditors, were also present at the Audit Committee meetings.

Mr. S. Regunathan – Chairman of the Audit Committee was present at the last AGM of the Company.

4. NOMINATION AND REMUNERATION COMMITTEE

(a) Terms of reference

The terms of reference to the Nomination and Remuneration Committee covers the areas as contemplated in Section 178 of the Act and Regulation 19 of the Listing Regulations, which inter alia shall include:-

1. formulate the criteria for determining qualifications, positive attributes and independence of a director and recommend to the Board of Directors a policy relating to, the remuneration of the directors, key managerial personnel and other employees;
2. formulate the criteria for evaluation of performance of independent directors and the Board of Directors;
3. devise a policy on diversity of Board of Directors;
4. identify persons who are qualified to become directors and who may be appointed in senior management in accordance with the criteria laid down, and recommend to the Board of Directors their appointment and removal.
5. consider extension or continue the term of appointment of the Independent Directors, on the basis of the report of performance evaluation of Independent Directors.
6. recommend to the Board, all remuneration, in whatever form, payable to senior management.

(b) Composition, name of members and Chairperson

As on 31st March, 2023, the Nomination and Remuneration Committee consisted of six Non-Executive Directors (including four Independent Directors) namely Mr. S. Regunathan, Dr. Sangita Reddy, Mr. Vinayak Chatterjee, Ms. Vineeta Rai, Mr. Vikram Bhat and Dr. Arun Rai. Mr. S. Regunathan (Independent Director) is the Chairman of the Nomination and Remuneration Committee.

(c) Meetings of Nomination and Remuneration Committee

The Nomination and Remuneration Committee met four (4) times during the year on 25th June, 2022, 2nd August, 2022, 8th February, 2023 and 2nd March, 2023. The names of Members, Chairman and their attendance at the Nomination and Remuneration Committee Meeting, as on 31st March, 2023, is as given below:

Members	Category	Meetings Held	Meetings Attended
Mr. S. Regunathan (Chairman)	Independent - Non-Executive	4	4
Dr. Sangita Reddy	Non-Executive	4	3
Mr. Vinayak Chatterjee	Independent - Non-Executive	4	3
Ms. Vineeta Rai	Independent - Non-Executive	4	4

Members	Category	Meetings Held	Meetings Attended
Mr. Vikram Bhat	Non-Executive	4	4
Dr. Arun Rai	Independent - Non-Executive	4	4

Mr. S. Regunathan - Chairman of the Nomination and Remuneration Committee was present at the last AGM of the Company to address the queries of the shareholders.

5. RISK MANAGEMENT COMMITTEE

(a) Composition, name of members and Chairperson

As on 31st March, 2023, the Risk Management Committee consisted of three Non-Executive Directors (including one Independent Director) namely Prof. (Dr.) Mahesh Verma, Ms. Suneeta Reddy and Mr. Salil Singhal.

(b) Meetings of Risk Management Committee

The Risk Management Committee met two (2) times during the year on 16th September, 2022 and 31st October, 2022. The names of Members, Chairman and their attendance at the Risk Management Committee Meeting, as on 31st March, 2023, is as given below:

Members	Category	Meetings Held	Meetings Attended
Prof. (Dr.) Mahesh Verma (Chairman)	Non-Executive	2	2
Ms. Suneeta Reddy	Non-Executive	2	2
Mr. Salil Singhal	Independent - Non-Executive	2	1

Prof. (Dr.) Mahesh Verma is the Chairman of the Risk Management Committee.

6. PERFORMANCE EVALUATION OF THE BOARD AND THE DIRECTORS

Pursuant to the provisions of the Companies Act, 2013 and Regulation 17 of the Listing Regulations, Annual Performance Evaluation was conducted for all Board Members as well as the with reference to working of the Board and its Committees.

This evaluation was led by the Chairman of the Nomination and Remuneration Committee with specific focus on the performance and effective functioning of the Board. The Board evaluation framework has been designed in compliance with the requirements under the Companies Act, 2013 and the Listing Regulations, and in consonance with the Guidance Note on Board Evaluation issued by SEBI. The Board evaluation was conducted through a detailed questionnaire having qualitative parameters and feedback based on ratings.

Evaluation of the Board was based on criteria such as composition and role of the Board, Board communication and relationships, functioning of Board Committees,

review of performance and compensation to Executive Directors, succession planning, strategic planning, etc.

Evaluation of Directors was based on criteria such as participation and contribution in Board and Committee meetings, representation of shareholder interests and enhancing shareholder value, experience and expertise to provide feedback and guidance to top management on business strategy, governance and risk, understanding of the organization's strategy, risk and environment, etc.

The performance evaluation of the Chairman was carried out by the Independent Directors. The performance evaluation of the Independent Directors was carried out by the entire Board. The Directors expressed their satisfaction with the overall evaluation process.

7. STAKEHOLDERS' RELATIONSHIP COMMITTEE

The Company has a Stakeholders Relationship Committee to consider and resolve the grievances of security holders of the Company. As on 31st March, 2023, the Stakeholders Relationship Committee consisted of five Directors (including three Independent Directors) namely Mr. S. Regunathan, Mr. Vikram Bhat, Mr. Shivakumar Pattabhiraman, Mr. Satnam Arora and Dr. Menaka Guruswamy. The names of Members, Chairman and their attendance at the Stakeholders Relationships Committee Meeting, as on 31st March, 2023, is as given below:

Members	Category	Meetings Held	Meetings Attended
Mr. Vikram Bhat (Chairman)	Non-Executive	1	1
Mr. S Regunathan	Independent - Non-Executive	1	1
Mr. Satnam Arora	Independent - Non-Executive	1	1
Dr. Menaka Guruswamy	Independent - Non-Executive	1	1
Mr. Shivakumar Pattabhiraman	Managing Director - Executive	1	-

Mr. Vikram Bhat is the Chairman of the Stakeholders Relationship Committee.

The Stakeholders Relationship Committee met once during the year on 22nd March, 2023.

Other details:-

- Name of the Non-Executive Director heading the Committee:** Mr. Vikram Bhat
- Name and Designation of the Compliance Officer:** Mr. Priya Ranjan - AVP - Corporate Affairs & Legal
- Number of Shareholders Complaints:**

The Company has received 58 (fifty eight) complaints during the year and no complaint was pending at the beginning of the year.

- Numbers not resolved to the satisfaction of shareholders:**

All the complaints have been resolved to the satisfaction of the complainants during the year.

- Number of pending complaints as on 31st March, 2023:** None

8. REMUNERATION OF DIRECTORS

- The remuneration policy of the Company is to remain competitive in the industry and to attract and retain quality talent and appropriately reward for their contributions.

The Policy of the Company on Directors' appointment and remuneration, including the criteria for determining qualifications, positive attributes, independence of a Director and other matters, as required under sub-section (3) of Section 178 of the Companies Act, 2013, is available on the website of the Company, at <https://www.apollohospitals.com/delhi/pdf/Remuneration-and-Board-Diversity-Policy.pdf>

The details of Remuneration paid to Directors for the year ended 31st March, 2023, is as given below:-

- The Non-Executive Directors are paid by way of sitting fee Rs. 75,000/- for attending each meeting of the Board of Directors or Committees thereof. In addition to the sitting fees being paid by the Company for attending each meeting of the Board of Directors or Committees thereof, the Board has approved the payment of commission of Rs. 7,00,000/- to each of the Non-Executive Director including Independent Directors in respect of the financial year 2022-23. The aggregate commission payable to all Non-Executive Directors is well within the limit of 1% of net profits of the Company calculated in accordance with the provisions of the Companies Act, 2013.

The details of sitting fees and commission payable to Non-Executive Directors during the year ended 31st March, 2023, are as under:-

Name of the Director	Amount (Rs.)		
	Remuneration paid /payable for the year ended 31 st March, 2023		
	Remuneration		
	Sitting Fee Paid	Commission Payable	Total
Mr. Jasmine Shah	2,75,000	7,00,000	9,75,000
Dr. Prathap C Reddy	2,75,000	7,00,000	9,75,000
Ms. Suneeta Reddy	6,75,000	7,00,000	13,75,000
Dr. Sangita Reddy	5,75,000	7,00,000	12,75,000
Ms. Vineeta Rai	8,25,000	7,00,000	15,25,000
Mr. S. Regunathan	11,00,000	7,00,000	18,00,000

Name of the Director	Remuneration paid /payable for the year ended 31 st March, 2023		
	Remuneration		
	Sitting Fee Paid	Commission Payable	Total
Mr. Satnam Arora	6,00,000	7,00,000	13,00,000
Mr. Deepak Vaidya	5,75,000	7,00,000	12,75,000
Dr. Arun Rai	5,75,000	7,00,000	12,75,000
Mr. Vinayak Chatterjee	6,00,000	7,00,000	13,00,000
Ms. Madhumita Ganguli	2,00,000	7,00,000	9,00,000
Dr. Meneka Guruswamy	4,00,000	7,00,000	11,00,000
Mr. Salil Singhal	3,25,000	7,00,000	10,25,000
Mr. Udit Prakash Rai	4,50,000	7,00,000	11,50,000
Mr. Vikram Bhat	8,00,000	7,00,000	15,00,000
Prof. (Dr.) Mahesh Verma	5,50,000	7,00,000	12,50,000

(ii) The details of Remuneration paid to Executive Director is as given below:-

Name of the Director	Remuneration paid for the year ended 31 st March, 2023		
	Remuneration		
	Salary	Perquisite	Total
Mr. Shivakumar Pattabhiraman	2,34,58,548	8,21,198	2,42,79,746

The services of the Managing Director can be terminated by either party by a 90 (ninety) day notice of termination to the other Party or salary in lieu thereof unless the parties mutually agree otherwise.

9. GENERAL BODY MEETINGS

a) The last three Annual General Meetings were held as given below:-

Financial Year	Location	Date	Time
2021-22	Meeting held through Video Conferencing ("VC")/Other Audio Visual Mode ("OVAM")	23 rd September, 2022	10:15 A.M.
2020-21	Meeting held through Video Conferencing ("VC")/Other Audio Visual Mode ("OVAM")	24 th September, 2021	10:15 A.M.
2019-20	Meeting held through Video Conferencing ("VC")/Other Audio Visual Mode ("OVAM")	29 th September, 2020	10:30 A.M.

b) **Special Resolutions passed in the previous 3 AGMs:**

- 1) Special Resolution was passed at the AGM held on 24th September, 2021, for the re-appointment of Mr. Shivakumar Pattabhiraman as Managing Director of the Company pursuant to the provision of section 196,197,203 read with schedule V and all other applicable provisions of the Companies Act, 2013 read with Companies (Appointment and Remuneration of Managerial Personnel) Rules, 2014.
- 2) Special Resolution was passed at the AGM held on 29th September, 2020, for re-appointment of Dr. Arun Rai as an Independent Director in accordance with the provisions of Section 149, 152, read with other applicable provisions of the Companies Act, 2013, the Companies (Appointment and Qualification of Directors) Rules, 2014 and Regulation 17 of SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015.
- 3) Special Resolution was passed at the AGM held on 29th September, 2020, for adoption of new Articles of Association pursuant to the provisions of Section 14 and all other applicable provisions of the Companies Act, 2013 read with Companies (Incorporation) Rules, 2014.

c) **Special resolution passed last year through postal ballot:**

Details of special resolution passed through postal ballot, the persons who conducted the postal ballot exercise, details of the voting pattern and procedure of postal ballot

No special resolution was passed through postal ballot last year.

d) **Special resolution proposed to be conducted through postal ballot:**

None of the businesses proposed to be transacted at the ensuing AGM requires passing of a special resolution through postal ballot.

10. MEANS OF COMMUNICATION

- a) **Quarterly Results:** Quarterly Results of the Company are published in Financial Express -All Editions and Jansatta (Hindi) - Delhi Edition and are displayed on the Company's website delhi.apollohospitals.com
- b) **Official News Releases:** The Company's website also displays official news releases.
- c) **Presentations made to Institutional Investors or to the Analysts:** No presentation was made to institutional investors or to the analysts by the Company.

II. GENERAL SHAREHOLDER INFORMATION

- a. **Annual General Meeting:** Thursday, 21st September, 2023, at 10.15 a.m. through Video Conferencing (“VC”) / Other Audio Visual Means (“OAVM”).
- b. **Financial Year:** 1st April to 31st March
- c. **Date of Book Closure:** From Saturday, 16th September, 2023 to Thursday, 21st September, 2023 (both days inclusive) for the purpose of the AGM and declaration of dividend.
- d. **Dividend Payment Date:** On or after 25th September, 2023.

e. **Listing on Stock Exchanges:**

- (i) BSE Limited (BSE),
Phiroze Jeejeebhoy Towers, Dalal Street,
Fort, Mumbai - 400 001
- (ii) National Stock Exchange of India Limited (NSE),
“Exchange Plaza”, C-1, Block G,
Bandra-Kurla Complex, Bandra (East),
Mumbai 400 051.

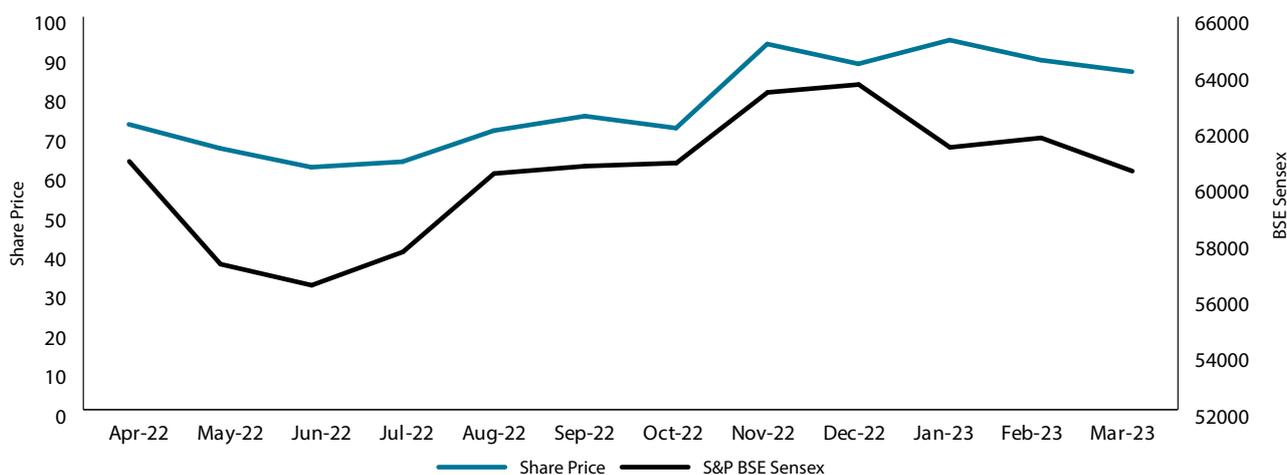
Annual Listing Fee for the year 2023-24 has been paid by the Company to BSE & NSE.

- f. **Stock Code:** BSE - 532150, NSE - INDRAMEDCO, Demat ISIN - INE681B01017

- g. **Market Price Data:** Monthly High & Low during each month of the financial year 2022-23 at National Stock Exchange (NSE) and BSE Ltd. (BSE) is as given below:-

Month	National Stock Exchange			BSE Ltd.		
	Highest (Rs.)	Lowest (Rs.)	Volume (Nos.)	Highest (Rs.)	Lowest (Rs.)	Volume (Nos.)
April, 2022	72.50	58.65	39,22,398	72.60	58.95	3,97,602
May, 2022	66.35	55.05	19,71,439	66.50	55.35	2,16,311
June, 2022	61.70	52.10	14,69,416	61.70	52.00	1,67,737
July, 2022	62.95	54.60	21,84,257	63.10	54.20	1,43,718
Aug., 2022	70.95	58.80	43,77,349	71.00	59.15	4,70,820
Sep., 2022	74.60	62.05	35,95,137	74.70	62.25	4,80,689
Oct., 2022	71.70	60.45	29,79,452	71.65	60.30	2,52,154
Nov., 2022	93.30	69.45	1,59,89,233	93.05	69.00	16,53,628
Dec., 2022	86.95	77.00	23,05,246	88.00	76.00	3,61,429
Jan., 2023	94.30	80.70	32,13,565	94.05	81.65	4,59,931
Feb., 2023	87.95	77.05	12,95,406	88.95	77.00	1,89,893
March, 2023	84.85	76.10	7,24,891	86.00	76.08	1,17,417

h. **Performance of the share price of the Company in comparison to BSE Sensex**



- i. **Trading of shares of the Company:** During the year under review, trading in shares of the Company was not suspended.
- j. **Registrar and Transfer Agent:** M/s. Link Intime India Pvt. Ltd. continue to be the Registrar and Transfer Agent of the Company and their address is as given below:-
M/s. Link Intime India Pvt. Ltd.
Noble Heights, 1st Floor,
NH-2, C-1 Block, LSC,
Near Savitri Market, Janakpuri,
New Delhi - 110058
E-mail: delhi@linkintime.co.in
Phone: 011-49411000
- k. **Share Transfer System:** The Company's shares are traded in the Stock Exchanges compulsorily in demat mode. Transfer of equity shares in electronic form are effected through the depositories with no involvement of the Company. SEBI has mandated that securities of listed companies can be transferred only in dematerialised form w.e.f. 1st April, 2019. Accordingly, the Company / its RTA has stopped accepting any fresh lodgement of transfer of shares in physical form. Members holding shares in physical form are advised to avail the facility of dematerialisation.

l. Distribution of shareholding as on 31st March, 2023:

Shareholding of shares	Shareholders		Total Shares	
	Number	% to total	Number	% to total
Upto 500	52743	87.1699	5348175	5.8340
501 - 1000	3751	6.1994	3179003	3.4678
1001 - 2000	1798	2.9716	2799550	3.0538
2001 - 3000	691	1.1420	1775246	1.9365
3001 - 4000	320	0.5289	1164314	1.2701
4001 - 5000	301	0.4975	1435947	1.5664
5001 - 10000	462	0.7636	3485401	3.8020
10001 & above	440	0.7272	72485364	79.0695
Total	60506	100.0000	91673000	100.0000

Shareholding Category as on 31st March, 2023

Category	No. of Shares held	% to total
Promoter and Promoter Group	46751700	50.9997
Public :		
Financial Institutions / Banks / Insurance Companies	3400	0.0037
Mutual Fund	366	0.0004
Individuals	27183403	29.6526
IEPF	764305	0.8337

Category	No. of Shares held	% to total
Trusts	13217	0.0144
Hindu Undivided Family	1695800	1.8498
Non Resident Indians (Non Repat)	914312	0.9974
Non Resident Indians	1267811	1.3830
Body Corporate - Ltd Liability Partnership	60555	0.0661
Foreign Portfolio Investors (Corporate) - I	251336	0.2742
Clearing Members	11072	0.0121
Bodies Corporate	12755723	13.9144
Grand Total	91673000	100.0000

- m. **Dematerialisation of shares:** About 71% of the Company's paid-up equity share capital has been dematerialised up to 31st March, 2023.

The details of demat of shares as on 31st March, 2023, is as given below:-

	No. of Shareholders	No. of Shares	% of capital
NSDL	20696	53600462	58.4690
CDSL	26698	11933869	13.0178

Requests for dematerialisation of shares are processed and confirmation is given to the respective depositories i.e. National Securities Depository Limited (NSDL) and Central Depository Services India Limited (CDSL) within 15 days.

Shares of the Company are regularly traded at NSE & BSE.

Reconciliation of Share Capital Audit Report

As stipulated by the Securities and Exchange Board of India, a qualified Practising Company Secretary carries out an Audit to reconcile the total admitted capital with the National Securities Depository Limited (NSDL) and Central Depository Services (India) Limited (CDSL) with the total listed and paid up capital. This audit is carried out every quarter and the report thereon is submitted to the Stock Exchanges and is also placed before the Board of Directors. The audit, interalia, confirms that the total listed and paid up capital of the Company is in agreement with the aggregate of the total number of shares in dematerialized form held with NSDL and CDSL and total number of shares in physical form.

- n. **Outstanding GDRs/ADRs/Warrants or any Convertible instruments, conversion date and likely impact on equity:** The Company has not issued any GDRs/ADRs/Warrants or any other convertible instruments.

o. **Foreign Exchange Risk and hedging activities:** The Company has no foreign exchange exposure except to the extent of Letter of Credit established with overseas supplier in the routine course of business.

p. **Hospitals Location:**

Indraprastha Apollo Hospitals,
Sarita Vihar, Delhi-Mathura Road,
New Delhi – 110076.

&

Apollo Hospitals,
E-2, Sector – 26,
Noida – 201 301

q. **Address for Correspondence:**

M/s. Indraprastha Medical Corporation Limited
Sarita Vihar, Delhi-Mathura Road,
New Delhi – 110076
E-mail Address for Investors:-
imclshares@apollohospitals.com
Phone : +91 11 29872126

r. **Credit Ratings**

During the year ended 31st March, 2023, ICRA has given long-term credit ratings of [ICRA]AA (pronounced ICRA Double A) and short-term rating of A1+ (pronounced ICRA A one plus) for Rs. 55.00 crore bank facilities and short-term rating of A1+ (pronounced ICRA A one plus) for enhanced bank facilities of Rs. 7.50 crore.

Also, the ICRA has given short term credit ratings at [ICRA]A1+ (pronounced ICRA A One Plus) for Commercial Paper to the Company.

12. OTHER DISCLOSURES

a. Disclosure on materially significant related party transactions that may have potential conflict with the interests of the company at large

During the year ended 31st March, 2023, the Company had not entered into any material transaction with any of its related parties. Accordingly, the disclosure of related party transactions as required under Section 134(3) (h) of the Companies Act, 2013, in Form AOC 2 is not applicable.

None of the transactions with any of related parties were in conflict with the interests of the Company. Attention of the members is drawn to the disclosure of transactions with related parties set out in Note No. M of Financial Statements, forming part of the Annual Report.

The Company's related party transactions are with the enterprises over which Directors are able to exercise significant influence.

All related party transactions are entered on arms-length basis and have prior approval of the Audit Committee.

b. Details of non-compliance by the Company, penalties, strictures imposed on the Company by Stock Exchange or SEBI, or any statutory authority, on any matter related to capital markets, during the last three years

During the last three years, neither was there any incidence of non-compliance by the Company nor any penalty, stricture has been imposed on the Company by Stock Exchange or SEBI, or any statutory authority, on any matter related to capital markets.

c. Whistle Blower Policy / Vigil Mechanism

The Company requires that all directors and employees adhere to high ethical standards in business conduct and comply with laws and regulations, the Company's code of conduct and ethics policies and practices and procedures. Ethical behaviour in the areas of business conduct is of utmost priority to the Company.

The Company has established a vigilance mechanism namely 'Whistle Blower Policy' for directors and employees to report concerns about unethical behaviour, actual or suspected fraud or violation of the company's code of conduct or ethics policy. The purpose of the Whistle Blower Policy of the Company is to provide adequate safeguards against victimization of Directors and employees who avail of the vigil mechanism provision and to provide direct access to the chairperson of the Audit Committee, in exceptional cases.

During the year ended 31st March, 2023, no matter has been received under Whistle Blower Policy of the Company and no personnel has been denied access to the Chairman of the Audit Committee of the Company.

d. Compliance with mandatory requirements of SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015.

The Company has complied with all the mandatory requirements specified in Regulations 17 to 27 and clauses (b) to (i) of sub - regulation (2) of Regulation 46 of the Listing Regulations.

e. Web link where policy for determining 'material' subsidiaries is disclosed:

The Company does not have a subsidiary, and as such the provision is not applicable.

f. Web link where policy on dealing with related party transactions:

<https://delhi.apollohospitals.com/pdf/Policy-on-Materiality-of-Related-Party-Transactions-and-Dealing-with-Related-Party-Transactions.pdf>

g. Disclosure of commodity price risks and commodity hedging activities:

The Company has no commodity price risks and commodity hedging activities.

h. Details of utilisation of funds raised through preferential allotment or qualified institutions placement as specified under regulation 32(7A):

Not Applicable

i. Certificate of Non-Disqualification of Directors by Practicing Company Secretary:

Mr. Baldev Singh Kashtwal - Practicing Company Secretary (Membership No. 3616 and Certificate of Practice No. 3169) has issued a certificate under the Listing Regulations, confirming that none of the Directors on the Board of the Company has been debarred or disqualified from being appointed or continuing as directors of companies by the Securities and Exchange Board of India, Ministry of Corporate Affairs or any such statutory authority. The certificate is enclosed with this section.

j. Acceptance of recommendations made by the Committees

During the financial year 2022-23, the Board has accepted all the recommendations of its Committees.

k. Total Fees paid to Statutory Auditors:

The details of total fees paid by the Company to the statutory auditors is as given below:-

(Rs. in crores)

Particulars	As at 31 st March, 2023	As at 31 st March, 2022
As Statutory Auditor	0.25	0.20
For taxation matters	0.02	0.01
Reimbursement of Expenses	0.01	0.01
For Other Matters	0.00	0.04
Total	0.28	0.26

l. Disclosures under the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013:

Number of complaints filed during the financial year 2022-23	9
Number of complaints disposed of during the financial year 2022-23	9
Number of complaints pending as on end of the financial year	0

13. CEO/CFO CERTIFICATION

The Managing Director and the Chief Financial Officer have issued a certificate pursuant to Regulation 17 of the

Listing Regulations certifying that the financial statements do not contain any untrue statement and these statements represent a true and fair view of the Company's affairs. The said certificate from Mr. Shivakumar Pattabhiraman, Managing Director and Mr. C. P. Tyagi, Chief Financial Officer was placed before the Board of Directors at its meeting held on 23rd May, 2023 and is annexed hereto.

14. COMPLIANCE CERTIFICATE ON CORPORATE GOVERNANCE

The certificate issued by Mr. Baldev Singh Kashtwal – Practising Company Secretary (Membership No. 3616 and Certificate of Practice No. 3169), on compliance of Corporate Governance norms is annexed to this Report.

15. DISCRETIONARY REQUIREMENTS

A. The Board

No office for the Chairman is maintained at the Company's expense. There was no reimbursement of expenses to the Chairman in discharge of his duties.

B. Shareholders Rights

As the Company's quarterly results are published in an English newspaper having circulation all over India and in a Hindi newspaper having circulation in the Delhi region and is uploaded on Company's website delhi.apollohospitals.com, the half-yearly declaration of financial performance is not sent separately to each household of the shareholders of the Company.

C. Modified Opinion in audit report

The Company has a history of un-qualified financial statements. Auditors have raised no qualification on the financial statements.

D. Separate posts of Chairperson and the Managing Director or the Chief Executive Officer:

The Company has separate persons holding the position of Chairperson and Managing Director. Further, the Chairperson of the Company is Non-Executive Director and not related to the Managing Director of the Company.

E. Reporting of Internal Auditors

The Report of the Internal Auditors are placed before the Audit Committee on quarterly basis.

For and on behalf of the Board

Jasmine Shah
(DIN 08621290)
Chairman

Place: New Delhi
Date : 4th August, 2023

CERTIFICATE

To,

**The Members of Indraprastha Medical Corporation Ltd.
New Delhi**

I have examined the compliance of conditions of Corporate Governance by M/s Indraprastha Medical Corporation Ltd. ("the company"), for the year ended on 31st March, 2023, as stipulated in Part C, D and E of Schedule V of the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 ("Listing Regulations").

The compliance of regulations of corporate governance is the responsibility of the management. My examination was limited to procedures and implementation thereof, adopted by the company for ensuring the compliance of the regulations of the Corporate Governance. It is neither an audit nor an expression of opinion on the financial statements of the company.

In my opinion and to the best of my information and according to the explanations given to me, I certify that the company has complied with the regulations of Corporate Governance as stipulated in the above-mentioned Listing Regulations.

I further state that such compliance is neither an assurance as to the future viability of the company nor the efficiency or effectiveness with which the management has conducted the affairs of the company.

**Place : New Delhi
Date : August 4, 2023**

**CS BALDEV SINGH KASHTWAL
PRACTISING COMPANY SECRETARY
C. P. No. 3169
ICSI - UDIN : F003616E000738988
ICSI - Peer Review Certificate No. : 1205/2021
ICSI - Unique Identification No. : I1999DE144000**

CERTIFICATE OF NON-DISQUALIFICATION OF DIRECTORS

**(Pursuant to Regulation 34(3) and Schedule V Para C clause (10)(i) of the
SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015)**

I have examined the relevant registers, records, forms, returns and disclosures received from the Directors of Indraprastha Medical Corporation Limited bearing Corporate Identification Number L24232DL1988PLCO30958 and having registered office at Sarita Vihar, Delhi Mathura Road, New Delhi - 110076, (hereinafter referred to as 'the Company'), produced before me by the Company for the purpose of issuing this Certificate, in accordance with Regulation 34(3) read with Schedule V Para-C Sub clause 10(i) of the Securities Exchange Board of India (Listing Obligations and Disclosure Requirements) Regulations, 2015.

In my opinion and to the best of my information and according to the verifications (including Directors Identification Number (DIN) status at the portal www.mca.gov.in) as considered necessary and explanations furnished to me by the Company & its officers, I hereby certify that none of the Directors on the Board of the Company for the financial year ending on 31st March, 2023 have been debarred or disqualified from being appointed or continuing as Director of companies by the Securities and Exchange Board of India, Ministry of Corporate Affairs or any such other Statutory Authority.

Ensuring the eligibility of for the appointment / continuity of every Director on the Board is the responsibility of the management of the Company. My responsibility is to express an opinion based on my verification. This certificate is neither an assurance as to the future viability of the Company nor of the efficiency or effectiveness with which the management has conducted the affairs of the Company.

**Place : Delhi
Date : August 4, 2023**

**CS BALDEV SINGH KASHTWAL
PRACTISING COMPANY SECRETARY
Membership No.: 3616
C. P. No. : 3169
ICSI-UDIN : F003616E000738999
ICSI - Peer Review Certificate No. : 1205/2021
ICSI- Unique Identification NO. : I1999DE144000**

CERTIFICATE

Declaration Regarding Compliance by Board Members and Senior Management Personnel with the Company's Code of Conduct

To,

The Members of Indraprastha Medical Corporation Limited,

This is to confirm that the Board of Directors had adopted a Code of Conduct for Board Members, Key Managerial Personnel and Senior Management of the Company. The Code of Conduct is available on the website of the Company.

I hereby declare that all Board Members, Key Managerial Personnel and Senior Management have affirmed compliance with the provisions of the Company's Code of Conduct, for the financial year ended 31st March, 2023.

Date : July 24, 2023
Place : New Delhi

Shivakumar Pattabhiraman
Managing Director
DIN - 08570283

CEO-CFO CERTIFICATE

Date: May 10, 2023

The Board of Directors
Indraprastha Medical Corporation Limited
Delhi-Mathura Road,
Sarita Vihar, New Delhi-110016

Sub: Compliance certificate under Regulation 17(8) of SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 for the financial year ended 31st March 2023

Dear Sir(s),

- A. We have reviewed financial statements and the cash flow statement for the year 2022-23 and that to the best of our knowledge and belief:
 - (1) these statements do not contain any materially untrue statement or omit any material fact or contain statements that might be misleading;
 - (2) these statements together present a true and fair view of the Company's affairs and are in compliance with existing accounting standards, applicable laws and regulations.
- B. There are, to the best of our knowledge and belief, no transactions entered into by the Company during the year which are fraudulent, illegal or violative of the Company's Code of Conduct.
- C. We accept responsibility for establishing and maintaining internal controls for financial reporting and that we have evaluated the effectiveness of internal control systems of the Company pertaining to financial reporting, and we have disclosed to the auditors and the Audit Committee, that there are no deficiencies in the design or operation of such internal controls.
- D. There are no:
 - (1) significant changes in internal control over financial reporting during the year;
 - (2) significant changes in accounting policies during the year and
 - (3) instances of significant fraud.

Shivakumar Pattabhiraman
Managing Director

C.P. Tyagi
Chief Financial Officer

INDEPENDENT AUDITOR'S REPORT

To the Members of
Indraprastha Medical Corporation Limited

REPORT ON THE AUDIT OF THE FINANCIAL STATEMENTS

OPINION

We have audited the financial statements of Indraprastha Medical Corporation Limited ("the Company"), which comprise the balance sheet as at 31 March, 2023, and the statement of Profit and Loss (including other comprehensive income), statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies and other explanatory information.

In our opinion and to the best of our information and according to the explanations given to us, the aforesaid financial statements give the information required by the Companies Act, 2013 ("the Act") in the manner so required and give a true and fair view in conformity with the Indian Accounting Standards prescribed under Section 133 of the Act read with the Companies (Indian Accounting Standards) Rules, 2015, as amended and other accounting principles generally accepted in India, of the state of affairs of the Company as at 31 March, 2023, and its profit and total comprehensive income, changes in equity and its cash flows for the year ended on that date.

BASIS FOR OPINION

We conducted our audit in accordance with the Standards on Auditing (SAs) specified under section 143(10) of the Companies Act, 2013 ("the Act"). Our responsibilities under those Standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Company in accordance with the Code of Ethics issued by the Institute of Chartered Accountants of India ("the ICAI") together with the ethical requirements that are relevant to our audit of the financial statements

under the provisions of the Act and the Rules thereunder, and we have fulfilled our other ethical responsibilities in accordance with these requirements and the ICAI's Code of Ethics. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

KEY AUDIT MATTERS

Key audit matters are those matters that, in our professional judgment, were of most significance in our audit of the financial statements of the current year. These matters were addressed in the context of our audit of the financial statements as a whole, and in forming our opinion thereon, and we do not provide a separate opinion on these matters. We have determined the matters described below to be the key audit matters to be communicated in our report.

LITIGATION MATTERS

Description of Key Audit Matter

As discussed in Note 29.B (i) and (iii), Note 29.C, 29.D to the financial statements, the Company have contingent liabilities arising from many litigative matters including the following significant matter which is the key matter and may have significant impact on the operations of the Company:

- Free treatment of underprivileged patients as per the terms of lease deed with Delhi Government: On a Public Interest Litigation (PIL) regarding free treatment in the hospital the Hon'ble Delhi High Court vide its order dated 22 September, 2009 has held that free treatment provided by the hospital as per the terms of lease deed with Government of National Capital Territory of Delhi shall be inclusive of medicines and consumables. In response to the said order the company filed a Special Leave Petition in the Hon'ble Supreme Court for appropriate directions. The Hon'ble Supreme Court of India has admitted the Special Leave Petition and passed an interim order on 30 November 2009. In pursuance of the interim order, the Hospital has been providing free treatment to the patients referred by the Govt. of NCT of Delhi. The hospital is charging for medicines

& medical consumables from patients referred by the Govt. of NCT of Delhi for free treatment in the Hospital in accordance with the directions of the Hon'ble Supreme Court of India. As the matter is sub-judice, the financial impact in the matter can be quantified only upon a decision by the Hon'ble Supreme Court of India.

The management needs to exercise significant judgement and take into account related laws and regulations in assessing the effects of the litigation, in order to determine the corresponding liabilities. However, the actual outcomes of the litigation may differ from the estimates. There are risks with respect to the recognition of provision or disclosure of contingent liabilities with respect to the litigation. Therefore, we gave significant attention to the audit of these litigations.

HOW OUR AUDIT ADDRESSED THE KEY AUDIT MATTER

- We inquired with the Company's management and legal department regarding the procedures followed to collate and monitor lawsuits filed and pending as at the date of the financial statements.
- Reviewed legal consultation fees to check the completeness of the litigation notified by the Company.
- Inquired about the details and progress of cases and the methods/judgements applied by the management in estimating liabilities from litigation.
- Reviewed relevant conditions and provisions of agreements with counterparties (if any);
- Reviewed correspondences between the Company and the legal consultants involved in the litigation, including the appeal's verdicts, appeals, petition and relevant supporting documentation used by management and prepared by external experts.
- Obtained independent status confirmation from the legal consultants whose services were used by the Company and their opinion on matter considering the current status.
- Reviewed the disclosures done by the Company in financial statements.

INFORMATION OTHER THAN THE FINANCIAL STATEMENTS AND AUDITOR'S REPORT THEREON

The Company's Board of Directors is responsible for the other information. The other information comprises the information included in the Annual report, but does not include the financial statements and our auditor's report thereon. The Annual report is expected to be made available to us after the date of this auditor's report.

Our opinion on the financial statements does not cover the other information and we will not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information identified above when it become available and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated.

When we read the annual report, if we conclude that there is a material misstatement therein, we are required to communicate the matter to those charged with governance and shall comply with the relevant applicable requirement of SA 720 (Revised), 'The Auditor's Responsibilities Relating to Other Information'.

RESPONSIBILITIES OF MANAGEMENT AND THOSE CHARGED WITH GOVERNANCE FOR THE FINANCIAL STATEMENTS

The Company's Board of Directors is responsible for the matters stated in section 134(5) of the Act with respect to the preparation of these financial statements that give a true and fair view of the financial position, financial performance, total comprehensive income, changes in equity and cash flows of the Company in accordance with the accounting principles generally accepted in India, including the accounting Standards specified under section 133 of the Act. This responsibility also includes maintenance of adequate accounting records in accordance with the provisions of the Act for safeguarding of the assets of the Company and for preventing and detecting frauds and other irregularities; selection and application of appropriate accounting policies; making judgments and estimates that are reasonable and prudent; and design, implementation and maintenance of adequate internal financial controls, that were operating effectively for ensuring the accuracy and completeness of the accounting records, relevant to the preparation and presentation of the financial statement that give a true and fair view and are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Company or to cease operations, or has no realistic alternative but to do so.

Those Board of Directors are also responsible for overseeing the company's financial reporting process.

AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE FINANCIAL STATEMENTS

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with SAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with SAs, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances. Under section 143(3)(i) of the Act, we are also responsible for expressing our opinion on whether the company has adequate internal financial controls system with reference to financial statements in place and the operating effectiveness of such controls.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Company to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements

represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

We also provide those charged with governance with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards.

From the matters communicated with those charged with governance, we determine those matters that were of most significance in the audit of the financial statements of the current period and are therefore the key audit matters. We describe these matters in our auditor's report unless law or regulation precludes public disclosure about the matter or when, in extremely rare circumstances, we determine that a matter should not be communicated in our report because the adverse consequences of doing so would reasonably be expected to outweigh the public interest benefits of such communication.

REPORT ON OTHER LEGAL AND REGULATORY REQUIREMENTS

1. As required by the Companies (Auditor's Report) Order, 2020 ("the Order"), issued by the Central Government of India in terms of sub-section (11) of section 143 of the Act, we give in the "Annexure-A" a statement on the matters specified in paragraphs 3 and 4 of the Order, to the extent applicable.
2. As required by Section 143(3) of the Act, we report to the extent applicable that:
 - a) We have sought and obtained all the information and explanations which to the best of our knowledge and belief were necessary for the purposes of our audit.
 - b) In our opinion, proper books of account as required by law have been kept by the Company so far as it appears from our examination of those books.
 - c) The Balance Sheet, the Statement of Profit and Loss including Other Comprehensive Income, Statement of Changes in Equity and the Statement of Cash Flow dealt with by this Report are in agreement with the books of accounts.
 - d) In our opinion, the aforesaid financial statements comply with the Indian Accounting Standards specified under Section 133 of the Act.
 - e) On the basis of the written representations received from the directors as on 31 March, 2023 taken on record by the Board of Directors, none

of the directors is disqualified as on 31 March, 2023 from being appointed as a director in terms of Section 164 (2) of the Act.

- f) With respect to the adequacy of the internal financial controls with reference to the financial statements over financial reporting of the Company and the operating effectiveness of such controls, refer to our separate Report in "Annexure B".
- g) With respect to the other matters to be included in the Auditor's Report in accordance with the requirements of section 197(16) of the Act, as amended: In our opinion and to the best of our information and according to the explanations given to us, the remuneration paid by the Company to its directors during the year is in accordance with the provisions of section 197 of the Act.
- h) With respect to the other matters to be included in the Auditor's Report in accordance with Rule 11 of the Companies (Audit and Auditors) Rules, 2014, in our opinion and to the best of our information and according to the explanations given to us:
 - i. The Company has disclosed the impact of pending litigations on its financial position in its financial statements - Refer Note 29.B (i) and (iii), Note 29.C and 29.D to the financial statements.
 - ii. The Company did not have any long-term contracts including derivative contracts for which there were any material foreseeable losses.
 - iii. There has been no delay in transferring amounts, required to be transferred, to the Investor Education and Protection Fund by the Company.
 - iv. a. The Management has represented that, to the best of its knowledge and belief, no funds have been advanced or loaned or invested (either from borrowed funds or share premium or any other sources or kind of funds) by the Company to or in any other person(s) or entity(ies), including foreign entities ("Intermediaries"), with the understanding, whether recorded in writing or otherwise, that the Intermediary shall, directly or indirectly lend or invest in other persons or entities identified in any manner whatsoever by or on behalf of the Company ("Ultimate Beneficiaries") or provide any guarantee, security or the like on behalf of the Ultimate Beneficiaries.
 - b. The Management has represented, that, to the best of its knowledge and belief, no funds have been received by the Company from any person or entity, including foreign entity ("Funding Parties"), with the understanding, whether recorded in writing or otherwise, that the Company shall, whether, directly or indirectly, lend or invest in other persons or entities identified in any manner whatsoever by or on behalf of the Funding Party ("Ultimate Beneficiaries") or provide any guarantee, security or the like on behalf of the Ultimate Beneficiaries;
 - c. Based on the audit procedures that have been considered reasonable and appropriate in the circumstances, nothing has come to our notice that has caused us to believe that the representations under sub-clause (i) and (ii) of Rule 11(e), as provided under (a) and (b) above, contain any material misstatement.
 - v. As stated in note 13 to the financial statements, the Board of Directors of the Company has proposed final dividend for the year which is subject to the approval of the members at the ensuing Annual General Meeting. The dividend declared is in accordance with Section 123 of the Act to the extent it applies to declaration of dividend.
 - vi. As proviso to Rule 3(1) of the Companies (Accounts) Rules, 2014, as amended is applicable for the Company only w.e.f. 1 April 2023, therefore, reporting under Rule 11(g) of the Companies (Audit and Auditors) Rules, 2014, as amended, is not applicable.

For S.N. Dhawan & CO LLP
Chartered Accountants
Firm Registration No.: 000050N/N500045

Rajeev K Saxena
Partner
Membership No.: 077974
UDIN: 23077974BGXFFD8142

Place: New Delhi
Date: May 23, 2023

Annexure A to the Independent Auditor's Report of even date to the members of Indraprastha Medical Corporation Limited, on the financial statements for the year ended 31 March, 2023

(Referred to in paragraph I under 'Report on Other Legal and Regulatory Requirements' section of the Independent Auditor's Report of even date to the members of Indraprastha Medical Corporation Limited on the financial statements as of and for the year ended 31 March, 2023)

- (i) (a) A. The Company has maintained proper records showing full particulars, including quantitative details and situation of Property, Plant and Equipment.
- B. The Company has maintained proper records showing full particulars of intangible assets.
- (b) The Property, Plant and Equipment have been physically verified by the management during the year and according to the information and explanation given to us, no material discrepancies were noticed on such verification between book records and the physical inventories. In our opinion, the frequency of verification of the Property, Plant and Equipment is reasonable having regard to the size of the Company and the nature of its assets.
- (c) According to the information and explanations given to us and the records examined by us and based on the examination of the audit evidence provided to us, we report that, the title of all the immovable properties (which are included under the head 'Property, Plant and Equipment) are held in the name of the Company.
- (d) The Company has not revalued any of its property, plant and equipment (including Right of Use assets) and intangible assets during the year, being under cost model. Accordingly, the provisions of clause 3(i) (d) of the Order are not applicable.
- (e) There are no proceedings which have been initiated or are pending against the Company for holding benami property under the Benami Transactions (Prohibition) Act, 1988 (45 of 1988) (as amended in 2016) and Rules made thereunder.
- (ii) (a) The management has conducted physical verification of inventory at reasonable intervals during the year. According to the information and explanations given to us and based on the audit procedures performed by us, we are of the opinion that the coverage and procedure of such verification by the management is appropriate and no material discrepancies of 10% or more in the aggregate for each class of inventory were noticed on physical verification as compared to the book records.
- (b) According to the information and explanations given to us, during the year, the Company has been sanctioned working capital limits in excess of Rs.5 Crores, in aggregate, from banks on the basis of security of current assets. In our opinion and according to the information and explanations given to us, the quarterly returns or statements filed by the Company with such banks are in agreement with the unaudited books of account of the Company for the respective quarters.
- (iii) According to the information and explanations given to us, the Company has not made any investments in, provided any guarantee or security, and granted any loans or advances in the nature of loans, secured or unsecured, to companies, firms, Limited Liability Partnerships or any other parties during the year, and hence reporting under clause (iii) (a) to (f) of the Order are not applicable.
- (iv) According to the information and explanations given to us, the Company has not entered into any transaction covered under Sections 185 and 186 of the Act.
- (v) According to the information and explanations given to us, the Company has neither accepted any deposits nor the amounts which are deemed to be deposits during the year and further the Company had no unclaimed deposits at the beginning of the year within the meaning of Sections 73 to 76 of the Act and the Companies (Acceptance of Deposits) Rules, 2014 (as amended). Accordingly, the provisions of clause 3(v) of the Order are not applicable.
- (vi) The maintenance of cost records has been specified by the Central Government under section 148(1) of the Companies Act, 2013 in respect of Company's services. We have broadly reviewed the books of account maintained by the Company pursuant to the Companies (Cost Records and Audit) Rules, 2014, as amended, prescribed by the Central Government for the maintenance of cost records under sub-section (1) of Section 148 of the Act in respect of Company's services and are of the opinion that, prima facie, the prescribed accounts and records have been made and maintained. However, we have not made a detailed examination of the cost records with a view to determine whether they are accurate or complete.
- (vii) (a) In our opinion and according to the information and explanations given to us, the Company is regular in depositing undisputed statutory dues including provident fund, employees' state insurance, income-tax, goods and services tax, duty of customs, value added tax, cess and other material statutory dues, to the appropriate authorities. Further, no undisputed amounts payable in respect thereof were outstanding at the year-end for a period of

more than six months from the date they become payable.

- (b) According to the information and explanations given to us, there are no statutory dues referred to in sub-clause (a) that have not been deposited with the appropriate authorities on account of any dispute except for the following cases;

Name of the statute	Nature of dues	Amount in crores (₹)	Amount paid under Protest in crores (₹)	Period to which the amount relates	Forum where dispute is pending
Service tax under Finance Act, 1994	Service tax dues	2.76	0.77	2006-07 to 2010-11	CESTAT (Delhi)

- (viii) According to the information and explanations given to us, there are no such transactions which were not recorded in the books of account earlier and have been surrendered or disclosed as income during the year in the tax assessments under the Income Tax Act, 1961 (43 of 1961). Accordingly, the provisions of clause 3(viii) of the Order are not applicable.
- (ix) a) In our opinion and according to the information and explanations given to us, the Company has not defaulted in repayment of loans or other borrowings or in the payment of interest thereon to any lender.
- b) According to the information and explanations given to us, we report that the Company has not been declared willful defaulter by any bank or financial institution or government or any government authority.
- c) According to the information and explanations given to us, the Company did not have any term loans outstanding during the year. Accordingly, the provisions of clause 3(ix)(c) of the Order are not applicable.
- d) According to the information and explanations given to us and on an overall examination of the financial statements of the Company, we report that no funds raised on short-term basis have been used for long-term purposes by the Company.
- e) According to the information and explanations given to us, the Company does not have subsidiaries, associates, or joint ventures. Accordingly, the provisions of clause 3(ix) (e) and (f) of the Order are not applicable.
- (x) (a) According to the information and explanations given to us, the Company did not raise moneys by way of initial public offer or further public offer (including debt instruments) during the year. Accordingly, the provisions of clause 3(x)(a) of the Order are not applicable.
- (b) During the year, the Company has not made any preferential allotment or private placement of shares or convertible debentures (fully, partially, or optionally). Accordingly, provisions of clause 3(x)(b) of the order are not applicable.
- (xi) (a) To the best of our knowledge and according to the information and explanations given to us, no fraud by the Company or on the Company has been noticed or reported during the period covered by our audit.
- (b) No report under sub-section (12) of Section 143 of the Act has been filed in Form ADT-4 as prescribed under Rule 13 of Companies (Audit and Auditors) Rules, 2014 (as amended) with the Central Government, during the year and upto the date of this report.
- (c) As represented to us by the management, there are no whistle blower complaints received by the Company during the year.
- (xii) According to the information and explanations given to us, the Company is not a Nidhi Company. Accordingly, the provisions of clause 3(xii)(a)-(c) of the Order are not applicable.
- (xiii) In our opinion and according to the information and explanations given to us, all transactions with the related parties are in compliance with Sections 177 and 188 of Act, where applicable, and the requisite details have been disclosed in the financial statements etc., as required by the applicable accounting standards.
- (xiv) (a) In our opinion and according to the information and explanations given to us, the Company has an internal audit system commensurate with the size and nature of its business.
- (b) We have considered the internal audit reports of the Company issued till date, for the period under audit.
- (xv) In our opinion and according to the information and explanations given to us, the Company has not entered into any non-cash transactions with the directors or persons connected with them covered under Section 192 of the Act.
- (xvi) (a) The Company is not required to be registered under Section 45-IA of the Reserve Bank of India Act, 1934. Accordingly, provisions of clause 3(xvi)(a) of the Order are not applicable.
- (b) The Company has not conducted any non-banking financial or housing finance activities during the year.

-
- (c) The Company is not a Core Investment Company ("CIC") as defined in the regulations made by the Reserve Bank of India. Accordingly, provisions of clause 3(xvi)(c) of the Order are not applicable.
- (d) Based on the information and explanations provided by the management, the Group does not have any CICs, which are part of the Group.
- (xvii) The Company has not incurred cash losses in the financial year and in the immediately preceding financial year.
- (xviii) There has been no resignation of the statutory auditors during the year.
- (xix) According to the information and explanations given to us and on the basis of the financial ratios, ageing and expected dates of realization of financial assets and payment of financial liabilities, other information accompanying the financial statements, our knowledge of the Board of Directors and management plans and based on our examination of the evidence supporting the assumptions, nothing has come to our attention, which causes us to believe that any material uncertainty exists as on the date of the audit report that Company is not capable of meeting its liabilities existing at the date of balance sheet as and when they fall due within a period of one year from the balance sheet date. We, however, state that this is not an assurance as to the future viability of the Company. We further state that our reporting is based on the facts up to the date of the audit report and we neither give any guarantee nor any assurance that all liabilities falling due within a period of one year from the balance sheet date, will get discharged by the Company as and when they fall due.
- (xx) The Company has fully spent the required amount towards Corporate Social Responsibility (CSR) and there is no unspent CSR amount for the year requiring a transfer to a Fund specified in Schedule VII to the Companies Act or special account in compliance with the provision of sub-section (6) of section 135 of the said Act.
- (xxi) The reporting under clause 3(xxi) of the Order is not applicable in respect of audit of Standalone Financial Statements. Accordingly, no comment in respect of the said clause has been included in this report.

For S.N. Dhawan & CO LLP
Chartered Accountants
Firm Registration No.: 000050N/N500045

Rajeev K Saxena
Partner
Membership No.: 077974
UDIN: 23077974BGXFFD8142

Place: New Delhi
Date: May 23, 2023

Annexure B to the Independent Auditor's Report of even date to the members of Indraprastha Medical Corporation Limited, on the financial statements for the year ended 31 March, 2023

Independent Auditor's report on the Internal Financial Controls under Clause (i) of Sub-section 3 of Section 143 of the Companies Act, 2013 ("the Act")

1. We have audited the internal financial controls with reference to financial statements of Indraprastha Medical Corporation Limited ("the Company") as of 31 March, 2023 in conjunction with our audit of the financial statements of the Company for the year ended on that date.

MANAGEMENT'S RESPONSIBILITY FOR INTERNAL FINANCIAL CONTROLS

2. The Company's Management is responsible for establishing and maintaining internal financial controls based on the internal financial control with reference to financial statements criteria established by the Company considering the essential components of internal control stated in the Guidance Note on Audit of Internal Financial Controls over Financial Reporting issued by the Institute of Chartered Accountants of India. These responsibilities include the design, implementation and maintenance of adequate internal financial controls that were operating effectively for ensuring the orderly and efficient conduct of the company's business, including adherence to company's policies, the safeguarding of its assets, the prevention and detection of frauds and errors, the accuracy and completeness of the accounting records, and the timely preparation of reliable financial information, as required under the Act.

AUDITORS' RESPONSIBILITY

3. Our responsibility is to express an opinion on the Company's internal financial controls with reference to financial statements based on our audit. We conducted our audit in accordance with the Guidance Note on Audit of Internal Financial Controls Over Financial Reporting (the "Guidance Note") and the Standards on Auditing, issued by the Institute of Chartered Accountants of India ("the ICAI") and deemed to be prescribed under section 143(10) of the Act, to the extent applicable to an audit of internal financial controls, both applicable to an audit of Internal Financial Controls and, both issued by the ICAI. Those Standards and the Guidance Note require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether adequate internal financial controls with reference to financial statements were

established and maintained and if such controls operated effectively in all material respects.

4. Our audit involves performing procedures to obtain audit evidence about the adequacy of the internal financial controls systems with reference to financial statements and their operating effectiveness. Our audit of internal financial controls with reference to financial statements included obtaining an understanding of internal financial controls with reference to financial statements, assessing the risk that a material weakness exists, and testing and evaluating the design and operating effectiveness of internal control based on the assessed risk. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error.
5. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion on the Company's internal financial controls system with reference to financial statements.

MEANING OF INTERNAL FINANCIAL CONTROLS WITH REFERENCE TO FINANCIAL STATEMENTS

6. A Company's internal financial controls with reference to financial statements is a process designed to provide reasonable assurance regarding the reliability of financial reporting and the preparation of financial statements for external purposes in accordance with generally accepted accounting principles. A company's internal financial controls with reference to financial statements includes those policies and procedures that (1) pertain to the maintenance of records that, in reasonable detail, accurately and fairly reflect the transactions and dispositions of the assets of the company; (2) provide reasonable assurance that transactions are recorded as necessary to permit preparation of financial statements in accordance with generally accepted accounting principles, and that receipts and expenditures of the company are being made only in accordance with authorisations of management and directors of the company; and (3) provide reasonable assurance regarding prevention or timely detection of unauthorised acquisition, use, or disposition of the company's assets that could have a material effect on the financial statements.

INHERENT LIMITATIONS OF INTERNAL FINANCIAL CONTROLS WITH REFERENCE TO FINANCIAL STATEMENTS

7. Because of the inherent limitations of internal financial controls with reference to financial statements, including the possibility of collusion or improper management override of controls, material misstatements due to error or fraud may occur and not be detected. Also, projections of any evaluation of internal financial controls with reference to financial statements to future periods are subject to the risk that internal financial controls with reference to financial statements may become inadequate because of changes in conditions, or that the degree of compliance with the policies or procedures may deteriorate.

OPINION

8. In our opinion, the Company has, in all material respects, adequate internal financial controls with reference to financial statements and such internal financial controls

with reference to financial statements were operating effectively as at 31 March, 2023, based on the internal financial controls with reference to financial statements criteria established by the Company considering the essential components of internal control stated in the Guidance Note on Audit of Internal Financial Controls over Financial Reporting issued by the Institute of Chartered Accountants of India.

For S.N. Dhawan & CO LLP
Chartered Accountants
Firm Registration No.: 000050N/N500045

Rajeev K Saxena
Partner
Membership No.: 077974
UDIN: 23077974BGXFFD8142

Place: New Delhi
Date: May 23, 2023

BALANCE SHEET AS AT 31ST MARCH, 2023

	Particulars	Note No.	As at 31 st March 2023 (Rs. in crore)	As at 31 st March 2022 (Rs. in crore)
I.	ASSETS			
1	Non-current assets			
	(a) Property, Plant and Equipment	1	272.26	270.88
	(b) Right-of-use asset	2	1.83	4.27
	(c) Capital work-in-progress	29.I.(iv)	2.53	-
	(d) Intangible Assets	3	0.96	1.71
	(e) Financial Assets	4	47.42	24.84
	(f) Other non-current Assets	5	7.06	2.58
	Total of Non-current assets		332.06	304.28
2	Current assets			
	(a) Inventories	6	8.45	9.99
	(b) Financial Assets			
	(i) Trade receivables	7	68.24	43.35
	(ii) Cash and cash equivalents	8	52.26	41.74
	(iii) Bank Balances other than (ii) above	9	76.49	26.71
	(iv) Other Financial Assets	10	6.78	5.16
	(c) Current Tax Assets (Net)		-	16.87
	(d) Other current assets	11	10.86	13.61
	Total of Current assets		223.08	157.43
	TOTAL OF ASSETS		555.14	461.71
II.	EQUITY AND LIABILITIES			
1	Equity			
	(a) Equity Share capital	12	91.67	91.67
	(b) Other Equity	13	287.78	233.77
	Total of Equity		379.45	325.44
	Liabilities			
2	Non-current liabilities			
	(a) Financial Liabilities	14		
	(i) Security Deposits		1.66	1.79
	(ii) Lease Liabilities		-	2.48
	(b) Provisions	15	24.42	15.31
	(c) Deferred tax liabilities (Net)	16	19.98	23.19
	Total of Non-current liabilities		46.06	42.77
3	Current liabilities			
	(a) Financial Liabilities			
	(i) Trade payables	17		
	- Total outstanding dues of micro and small enterprises		0.53	1.43
	- Total outstanding dues of creditors other than micro and small enterprises		97.65	75.32
	(ii) Lease Liabilities	18	2.48	2.83
	(iii) Other Financial Liabilities	19	0.76	0.73
	(b) Other current liabilities	20	14.30	12.32
	(c) Provisions	21	9.49	0.87
	(d) Current Tax Liabilities (Net)		4.42	-
	Total of Current liabilities		129.63	93.50
	TOTAL OF EQUITY AND LIABILITIES		555.14	461.71
III.	Summary of significant accounting policies	28		
	The accompanying notes are integral part of the financial statements			

As per our separate report of even date attached

For S.N. Dhawan & CO LLP
Chartered Accountants
Firm Reg. No. 000050N/N500045

Rajeev K Saxena
Partner
M. No. 077974
Place : New Delhi
Date : 23rd May, 2023

Suneeta Reddy
Director
(DIN 00001873)
Place : Chennai
Date : 23rd May, 2023

C P Tyagi
Chief Financial Officer
Place : New Delhi
Date : 23rd May, 2023

Shivakumar Pattabhiraman
Managing Director
(DIN 08570283)
Place : New Delhi
Date : 23rd May, 2023

Priya Ranjan
Associate Vice President Cum
Company Secretary
Place : New Delhi
Date : 23rd May, 2023

STATEMENT OF PROFIT AND LOSS FOR THE YEAR ENDED 31ST MARCH, 2023

	Particulars	Note No.	For the year ended 31 st March 2023 (Rs. in crore)	For the year ended 31 st March 2022 (Rs. in crore)
I.	Revenue from Operations	22	1,098.67	888.16
II.	Other Income	23	10.03	3.12
III.	Total Income (I+II)		1,108.70	891.28
IV.	EXPENSES			
	Stores & Spares consumed		193.61	173.72
	Employee benefits expense	24	246.70	213.92
	Finance costs	25	4.28	3.41
	Depreciation and amortization expense		39.27	34.94
	Other expenses	26	507.66	386.22
	Total expenses (IV)		991.52	812.21
V.	Profit before exceptional items and tax (III-IV)		117.18	79.07
VI.	Exceptional Items		-	-
VII.	Profit before tax (V-VI)		117.18	79.07
VIII.	Tax expense:			
	(1) Current tax		31.14	17.53
	(2) Deferred tax		(0.11)	2.92
IX.	Profit for the year (VII-VIII)		86.15	58.62
X.	Other Comprehensive Income			
	(i) Items that will not be reclassified subsequently to profit or loss			
	Re-measurement gains (losses) on defined benefit plans		(12.32)	(7.92)
	Income Tax effect (Deferred Tax)		3.10	1.99
			(9.22)	(5.93)
XI.	Total Comprehensive Income for the year (Comprising Profit and Other Comprehensive Income for the year)		76.93	52.69
XII.	Earnings per equity share			
	(1) Basic	29.N	9.40	6.39
	(2) Diluted	29.N	9.40	6.39
XIII.	Summary of significant accounting policies	28		
	The accompanying notes are integral part of the financial statements			

As per our separate report of even date attached

For S.N. Dhawan & CO LLP
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Date : 23rd May, 2023

STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 31ST MARCH, 2023

EQUITY SHARE CAPITAL

(Rs. in crore)

Particulars	Balance as at 1 st April, 2022	Changes in Equity Share Capital due to prior period errors	Restated balance at the beginning of the current reporting period	Changes in equity share capital during the current year	Balance as at 31 st March, 2023
Equity Shares of Rs. 10/- each Fully paid up	91.67	-	-	-	91.67

Particulars	Balance as at 1 st April, 2021	Changes in Equity Share Capital due to prior period errors	Restated balance at the beginning of the current reporting period	Changes in equity share capital during the current year	Balance as at 31 st March, 2022
Equity Shares of Rs. 10/- each Fully paid up	91.67	-	-	-	91.67

OTHER EQUITY

(Rs. in crore)

Particulars	Reserves & Surplus				Items of Other Comprehensive Income	Total
	Capital Reserve	Securities Premium	General Reserve	Retained Earnings		
Balance as at 1 st April, 2022	-	-	42.75	195.83	(4.81)	233.77
Total Comprehensive Income for the year	-	-	-	86.15	(9.22)	76.93
Dividend	-	-	-	(22.92)	-	(22.92)
Balance as at 31 st March, 2023	-	-	42.75	259.06	(14.03)	287.78
Balance as at 1 st April, 2021	-	-	42.75	137.21	1.12	181.08
Total Comprehensive Income for the year	-	-	-	58.62	(5.93)	52.69
Balance as at 31 st March, 2022	-	-	42.75	195.83	(4.81)	233.77

As per our separate report of even date attached

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Company Secretary
Place : New Delhi
Date : 23rd May, 2023

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 31ST MARCH, 2023

Particulars	Year ended 31 st March 2023 (Rs. in crore)	Year ended 31 st March 2022 (Rs. in crore)
A. CASH FLOW FROM OPERATING ACTIVITIES		
Profit before tax	117.18	79.07
Add:		
Depreciation and amortization expense	39.27	34.94
Interest expense	0.46	0.61
Loss on disposal of Assets	0.87	5.77
Deduct:		
Interest received	10.03	3.12
Operating Profit before Working Capital changes	147.75	117.27
Adjustments for:		
Trade & Other Receivables	(23.49)	25.95
Trade payables	28.61	(28.15)
Inventories	1.54	(1.25)
Cash Generated from Operations	154.41	113.82
Deduct:		
Interest paid	0.09	0.01
Income tax paid	9.85	19.51
Net Cash generated from Operating Activities	144.47	94.30
B. CASH FLOW FROM INVESTING ACTIVITIES		
Purchase of Property, Plant & Equipment and Intangible Assets (Net of sale)	(44.58)	(29.48)
Movement in Other Bank Balances	(72.27)	(47.11)
Interest received	8.94	2.48
Net Cash used in Investing Activities	(107.91)	(74.11)
C. CASH FLOW FROM FINANCING ACTIVITIES		
Lease Payments	(2.83)	(2.51)
Interest paid	(0.37)	(0.60)
Dividend paid	(22.84)	(0.26)
Net Cash used in Financing Activities	(26.04)	(3.37)
Net increase / (decrease) in Cash and Cash equivalents	10.52	16.82
Opening Cash and Cash equivalents	41.74	24.92
Closing Cash and Cash equivalents	52.26	41.74
Components Cash and Cash equivalents		
Cash balance on hand	0.37	0.34
Balance with Banks	51.89	41.40

As per our separate report of even date attached

For S.N. Dhawan & CO LLP
Chartered Accountants
Firm Reg. No. 000050N/N500045

Rajeev K Saxena
Partner
M. No. 077974
Place : New Delhi
Date : 23rd May, 2023

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Date : 23rd May, 2023

Priya Ranjan
Associate Vice President Cum
Company Secretary
Place : New Delhi
Date : 23rd May, 2023

NOTES TO FINANCIAL STATEMENT

(Rs. in crore)

Particulars	Building	Furniture & Fittings	Plant & Machinery	Office Equipment	Medical Equipment	Surgical Instruments	Vehicles	Total
Cost as at 1 st April, 2022	189.75	18.38	13.21	28.60	188.07	6.41	5.67	450.09
Additions	3.93	1.13	2.46	7.32	17.79	4.58	0.50	37.71
Deletions / Adjusted	(0.79)	(0.04)	(0.08)	(0.94)	(4.75)	(2.65)	(0.19)	(9.44)
Cost as at 31 st March, 2023	192.89	19.47	15.59	34.98	201.11	8.34	5.98	478.36
Accumulated Depreciation upto 31 st March, 2022	(54.36)	(12.17)	(2.29)	(23.35)	(80.63)	(3.23)	(3.18)	(179.21)
Depreciation for the year	(6.77)	(1.85)	(1.03)	(4.23)	(18.37)	(2.46)	(0.69)	(35.40)
Written Back / Adjusted	0.79	0.04	0.08	0.89	3.89	2.65	0.17	8.51
Accumulated Depreciation up to 31 st March, 2023	(60.34)	(13.98)	(3.24)	(26.69)	(95.11)	(3.04)	(3.70)	(206.10)
Net carrying amount as at 31 st March, 2023	132.55	5.49	12.35	8.29	106.00	5.30	2.28	272.26

(Rs. in crore)

Particulars	Building	Furniture & Fittings	Plant & Machinery	Office Equipment	Medical Equipment	Surgical Instruments	Vehicles	Total
Cost as at 1 st April, 2021	187.33	18.10	8.11	27.88	182.72	6.05	5.06	435.25
Additions	2.42	0.78	5.46	1.70	19.42	2.15	0.61	32.54
Deletions / Adjusted	-	(0.50)	(0.36)	(0.98)	(14.07)	(1.79)	-	(17.70)
Cost as at 31 st March, 2022	189.75	18.38	13.21	28.60	188.07	6.41	5.67	450.09
Accumulated Depreciation upto 31 st March, 2021	(47.08)	(11.06)	(1.77)	(21.78)	(74.74)	(2.97)	(2.61)	(162.01)
Depreciation for the year	(7.28)	(1.58)	(0.74)	(2.42)	(16.19)	(2.05)	(0.57)	(30.83)
Written Back / Adjusted	-	0.47	0.22	0.85	10.30	1.79	-	13.63
Accumulated Depreciation up to 31 st March, 2022	(54.36)	(12.17)	(2.29)	(23.35)	(80.63)	(3.23)	(3.18)	(179.21)
Net carrying amount as at 31 st March, 2022	135.39	6.21	10.92	5.25	107.44	3.18	2.49	270.88

NOTES TO FINANCIAL STATEMENT

Particulars	As at 31 st March 2023 (Rs. in crore)	As at 31 st March 2022 (Rs. in crore)
2 Right-of-use Assets		
<u>Building</u>		
Cost as at beginning of the year	11.59	11.59
Reclassified on account of adoption of Ind AS 116	-	-
Additions	-	-
Disposals	-	-
Cost at end of the year	11.59	11.59
Accumulated Depreciation at beginning of the year	(7.32)	(4.88)
Depreciation for the year	(2.44)	(2.44)
Disposals	-	-
Accumulated Depreciation at end of the year	(9.76)	(7.32)
Net carrying amount as at end of the year	1.83	4.27
The aggregate depreciation expense on right-of-use assets is included under depreciation and amortization expense in the statement of Profit and Loss.		
3 Intangible Assets		
<u>Software Licenses</u>		
Cost as at beginning of the year	7.17	8.46
Additions	0.68	-
Disposals	-	(1.29)
Cost at end of the year	7.85	7.17
Accumulated Amortization at beginning of the year	(5.46)	(5.08)
Amortization for the year	(1.43)	(1.67)
Disposals	-	1.29
Accumulated Amortization at end of the year	(6.89)	(5.46)
Net carrying amount as at end of the year	0.96	1.71
4 Financial Assets		
<u>Financial Assets at amortised cost</u>		
Fixed deposits kept as Margin Money with Bank	0.05	0.01
Fixed Deposit	45.51	23.01
Security Deposit	1.86	1.82
	47.42	24.84
5 Other Non-Current Assets		
(Considered good)		
Capital Advances	4.68	0.96
Deposit with Statutory Authorities	1.62	1.62
Prepaid Expenses	0.76	-
	7.06	2.58
6 Inventories		
Stores & spares	7.61	9.38
Crockery & utensil	0.37	0.32
Linen	0.47	0.29
	8.45	9.99

Refer note 28.N under significant accounting policies for mode of valuation.

NOTES TO FINANCIAL STATEMENT

Particulars	As at 31 st March 2023 (Rs. in crore)	As at 31 st March 2022 (Rs. in crore)
7 Trade Receivables		
Unsecured		
- Considered Good	68.24	43.35
- Considered Doubtful	8.53	7.93
Less: Allowances for doubtful receivables	(8.53)	(7.93)
	68.24	43.35
Includes amount due from related parties (refer note 29M) For ageing schedule refer Note 29.I.(ii)		
8 Cash and Cash Equivalent		
Cash balance on hand	0.37	0.34
Balances with Banks		
- in current accounts	0.66	0.96
- in deposit accounts	51.23	40.44
	52.26	41.74
The Company has an overdraft limit of Rs. 25 crore from ICICI bank and cash credit limit of Rs. 7.50 crore from Punjab National Bank at an interest rate of 9.13% and 9.15% respectively at the year end, which is secured by pari passu charge on the current assets of the company. There is no outstanding payable at the end of the year on account of above overdraft and cash credit limit.		
9 Bank Balances other than Cash and Cash equivalent		
Fixed Deposit - Margin Money with Bank	0.47	0.45
Fixed Deposit others (restricted)	0.67	0.67
Fixed Deposit Others	73.95	24.27
Earmarked Balances - Unpaid dividend Accounts	1.40	1.32
	76.49	26.71
10 Other financial assets		
Financial Assets at amortised cost		
Lease Rent Receivable	0.40	0.38
Patient Treatment in Progress (Net of Advances - Not due)	6.38	4.78
	6.78	5.16
11 Other Current Assets		
(Unsecured ,considered good)		
Advance for expenses	0.78	0.47
Export Incentives	-	4.20
Prepaid Expenses	10.08	8.94
	10.86	13.61
12 Equity Share Capital		
Authorised		
10,00,00,000 Equity Shares of Rs.10/- each	100.00	100.00
(Previous year 10,00,00,000 Equity Shares of Rs.10/- each)		
	100.00	100.00
Issued, Subscribed and Paid up		
(9,16,73,000 equity shares of Rs. 10/- each fully paid up)	91.67	91.67
(Previous year 9,16,73,000 equity shares of Rs. 10/- each fully paid up)		
	91.67	91.67

NOTES TO FINANCIAL STATEMENT

(i) Details of Shareholders holding more than 5% shares in the company.

Name of Shareholder	As at 31 st March, 2023		As at 31 st March, 2022	
	No. of Shares held	% of Holding	No. of Shares held	% of Holding
Government of National Capital Territory of Delhi (Including nominees)	2,38,34,200	26.00%	2,38,34,200	26.00%
Apollo Hospitals Enterprise Limited (Including nominees)	2,10,55,077	22.97%	2,10,55,077	22.97%
Housing Development Finance Corporation Limited	61,46,897	6.71%	61,46,897	6.71%

(ii) Disclosure of shareholding of Promoters

Name of Shareholder	As at 31 st March, 2023		As at 31 st March, 2022	
	No. of Shares held	% of Holding	No. of Shares held	% of Holding
Government of National Capital Territory of Delhi (Including nominees)	2,38,34,200	26.00%	2,38,34,200	26.00%
Apollo Hospitals Enterprise Limited (Including nominees)	2,10,55,077	22.97%	2,10,55,077	22.97%
Wedgewood Holdings Limited	14,75,000	1.61%	14,75,000	1.61%
PCR Investments Limited	3,87,423	0.42%	3,87,423	0.42%

(iii) The company has not issued any shares for consideration other than cash, bonus shares and no shares have been bought back during the period of five years immediately preceding the reporting date.

(iv) There are no shares reserved for issue under options and contracts / commitments for the sale of shares / disinvestment.

(v) Terms / Rights attached to Equity Shares.

The company has only one class of Equity Shares having par value of Rs. 10/- per share. Each holder of Equity Shares is entitled to one vote per share. The company declares and pays dividend in Indian Rupees. The dividend proposed by the Board of Directors is subject to approval of the shareholders in ensuing General Meeting.

In the event of liquidation of the company Equity shareholders will be entitled to receive the remaining assets of the company, after distribution of all preferential amounts.

(vi) There is no holding / ultimate holding company of the company.

Particulars	As at 31 st March 2023 (Rs. in crore)	As at 31 st March 2022 (Rs. in crore)
13 Other Equity		
a. General Reserve		
Opening balance	42.75	42.75
Add : Transferred from Statement of Profit and Loss	-	-
	42.75	42.75
b. Surplus in Statement of Profit and Loss		
Opening balance	195.83	137.21
Add : Surplus for the year	86.15	58.62
Less: Dividend	22.92	-
	259.06	195.83

NOTES TO FINANCIAL STATEMENT

Particulars	As at 31 st March 2023 (Rs. in crore)	As at 31 st March 2022 (Rs. in crore)
c. Other Comprehensive Income		
Opening balance	(4.81)	1.12
Add : Re-measurements of Defined Employee Benefits plans (Net of tax)	(9.22)	(5.93)
	(14.03)	(4.81)
Total	287.78	233.77
The Board of Directors have recommended a dividend @ 30% (Rs. 3.00/- per share) for the financial year 2022-23. For previous year @25% (Rs. 2.50/- per share)		
14 Financial liabilities		
Financial liabilities at amortised cost		
Security Deposits	1.66	1.79
Lease Liabilities	-	2.48
	1.66	4.27
15 Non - Current Provisions		
Employees benefits:		
Provision for Leave	24.42	15.31
	24.42	15.31
16 Deferred Tax Liabilities (Net)		
Deferred tax liability (net) as on date is as follows:		
On account of depreciation	26.29	28.04
Less: Deferred tax assets arising on account of		
Allowance for doubtful receivables	2.15	2.00
Provision for Employee benefits and others	4.16	2.85
Net deferred tax liability	19.98	23.19
17 Trade Payables		
Due to Micro & Small Enterprises	0.53	1.43
Due to Others:		
For Expenses	39.31	37.66
For others	58.34	37.66
	98.18	76.75
Includes amount payable to related parties (refer note 29M) For ageing schedule refer Note 29.I.(iii)		
18 Lease Liabilities		
Lease Liabilities	2.48	2.83
	2.48	2.83
19 Other Financial liabilities		
Financial liabilities at amortised cost		
Sundry Creditors for capital items	0.76	0.73
	0.76	0.73

NOTES TO FINANCIAL STATEMENT

Particulars	As at 31 st March 2023 (Rs. in crore)	As at 31 st March 2022 (Rs. in crore)
20 Other Current liabilities		
Advance from patients	6.94	6.87
Unclaimed Dividend	1.40	1.32
Statutory Liabilities	4.69	2.96
Others	1.27	1.17
	14.30	12.32
21 Current Provisions		
Employees benefits:		
Provision for Leave	1.42	0.87
Provision for Gratuity (Refer note 29.F)	8.07	-
	9.49	0.87

Particulars	For the year ended 31 st March 2023 (Rs. in crore)	For the year ended 31 st March 2022 (Rs. in crore)
22 Revenue from operation		
Sale of services	1,064.95	862.14
Other operating revenue		
License fee & commission	28.75	21.24
Chamber rent received from doctors	2.51	2.30
Miscellaneous income	2.46	2.48
	1,098.67	888.16
23 Other Income		
Interest Income	10.03	3.12
	10.03	3.12
24 Employee benefits expense		
Salaries, wages and bonus	227.06	199.94
Contribution to provident & other funds	9.44	9.55
Staff welfare	10.20	4.43
	246.70	213.92
25 Finance costs		
Interest Cost on borrowings	0.09	0.01
Interest Cost on Lease Liabilities	0.37	0.60
Others	3.82	2.80
	4.28	3.41

NOTES TO FINANCIAL STATEMENT

Particulars	For the year ended 31 st March 2023 (Rs. in crore)	For the year ended 31 st March 2022 (Rs. in crore)
26 Other expenses		
Professional charges to doctors	280.55	209.52
Outside lab investigations	1.93	1.32
Leasehold ground rent	-	-
Power and Fuel	22.74	20.56
Rent	2.19	1.86
Travelling and Conveyance	6.87	5.11
Insurance	2.00	1.57
Payment to Directors (refer note 29.M)	2.36	1.68
Communication	0.52	0.53
Printing and stationery	4.78	3.89
Advertisement, Publicity & Marketing	88.98	53.35
Legal and professional charges	6.89	4.54
Security charges	5.75	5.61
Payment to auditors (refer note 29.R)	0.28	0.22
Rates, taxes and licenses	6.09	4.24
Corporate social responsibility expenses (refer note 29.P)	0.85	0.66
Loss on disposal of Assets	0.87	5.77
Outsourcing Expenses	47.47	44.20
Repairs and maintenance		
- Building	6.01	5.39
- Plant & Machinery	13.94	10.77
- Others	3.26	2.07
Miscellaneous expenses	0.29	0.31
Provision for Doubtful Debts	3.04	3.05
	507.66	386.22

27. GENERAL INFORMATION

Indraprastha Medical Corporation Limited ('the Company') is a Public Company incorporated in India. The address of its registered office and principal place of business is at Sarita Vihar, Mathura Road, New Delhi, India. The main business of the company is to enhance the quality of life of patients by providing comprehensive, high-quality hospital services on a cost-effective basis. The company has its primary listings on BSE Limited and National Stock Exchange of India Limited.

28. SIGNIFICANT ACCOUNTING POLICIES

A. BASIS OF PREPARATION OF FINANCIAL STATEMENTS

These financial statements are prepared in accordance with Indian Accounting Standards (Ind AS) under the historical cost convention on the accrual basis (except certain Financial Instruments which are measured at fair value and Building, Plant & Medical Equipment, which are recognised at deemed cost on the basis of fair values), the provisions of the Companies Act, 2013 ('Act') (to the extent notified) and guidelines issued by the Securities and Exchange Board of India

NOTES TO FINANCIAL STATEMENT

(SEBI). The Ind AS are prescribed under Section 133 of the Act read with Rule 3 of the Companies (Indian Accounting Standards) Rules, 2015 and Companies (Indian Accounting Standards) Amendment Rules, 2016.

B. STATEMENT OF COMPLIANCE

The financial statements have been prepared in accordance with Ind ASs notified under the Companies (Indian Accounting Standards) Rules, 2015 as amended.

C. CAPITAL MANAGEMENT

The capital includes issued equity capital and other equity reserves attributable to the equity holders of the company. The primary objective of the company's capital management is to maintain optimum capital structure to reduce cost of capital and to maximize the shareholder value.

The company manages its capital structure and makes adjustments in light of changes in economic conditions and the requirements of the financial covenants which otherwise would permit the banks to immediately call loans and borrowings. In order to maintain or adjust the capital structure, the company may adjust the dividend payment to shareholders, return capital to shareholders or issue new shares.

D. USE OF ESTIMATES AND JUDGEMENTS

The preparation of the financial statements in conformity with Ind AS requires management to make estimates, judgments and assumptions. These estimates, judgments and assumptions affect the application of accounting policies and the reported amounts of assets and liabilities, the disclosures of contingent assets and liabilities at the date of the financial statements and reported amounts of revenues and expenses during the period. Application of accounting policies that require critical accounting estimates involving complex and subjective judgments and the use of assumptions in these financial statements have been disclosed. Accounting estimates could change from period to period. Actual results could differ from those estimates. Appropriate changes in estimates are made as management becomes aware of changes in circumstances surrounding the estimates. Changes in estimates are reflected in the financial statements in the period in which changes are made and, if material, their effects are disclosed in the notes to the financial statements.

E. REVENUE RECOGNITION

Healthcare Services

Revenue primarily comprises fees charged for inpatient and outpatient hospital services. Services include charges for accommodation, theatre, medical professional services, equipment, radiology and laboratory. Revenue is recorded and recognised during the period in which the hospital service is provided, based upon the estimated amounts due from patients and/or medical funding entities in respect of services rendered. Unbilled revenue is recorded for the service where the patients are not discharged and invoice is not raised for the service.

Interest income

Interest income from a financial asset is recognised when it is probable that the economic benefits will flow to the Company and the amount of income can be measured reliably. Interest income is accrued on a time basis, by reference to the principal outstanding and at the effective interest rate applicable, which is the rate that exactly discounts estimated future cash receipts through the expected life of the financial asset to that asset's net carrying amount on initial recognition.

Export Incentive

Under the "Service Export from India Scheme" introduced by Government of India, an exporter of service is entitled to export benefits on foreign currency earned. The revenue in respect of export benefits is recognized on the basis of the foreign exchange earned at the rate at which the said entitlement accrues to the extent there is reasonable assurance as to the amount of consideration that would be derived and as to its ultimate collection.

Rental income

The Company's policy for recognition of revenue from operating leases is described in note F below.

NOTES TO FINANCIAL STATEMENT

F. LEASES

The Company as lessor

Rental income from operating leases is recognised on a straight-line basis over the term of the relevant lease. Where the rentals are structured solely to increase in line with expected general inflation to compensate for the Company's expected inflationary cost increases, such increases are recognised in the period in which such benefits accrue.

The Company as lessee

The Company recognises right-of-use asset representing its right to use the underlying asset for the lease term at the lease commencement date. The cost of the right-of-use asset measured at inception shall comprise of the amount of the initial measurement of the lease liability adjusted for any lease payments made at or before the commencement date or after the end of lease period. The right-of-use assets is subsequently measured at cost less any accumulated depreciation, accumulated impairment losses, if any and adjusted for any remeasurement of the lease liability. The right-of-use assets is depreciated using the straight-line method from the commencement date over the shorter of lease term or useful life of right-of-use asset. The estimated useful lives of right-of use assets are determined on the same basis as those of property, plant and equipment. Right-of-use assets are tested for impairment whenever there is any indication that their carrying amounts may not be recoverable. Impairment loss, if any, is recognised in the statement of profit and loss.

The Company measures the lease liability at the present value of the lease payments that are not paid at the commencement date of the lease. The lease payments are discounted using the interest rate implicit in the lease, if that rate can be readily determined. If that rate cannot be readily determined, the Company uses incremental borrowing rate. For leases with reasonably similar characteristics, the Company, on a lease by lease basis, may adopt either the incremental borrowing rate specific to the lease or the incremental borrowing rate for the portfolio as a whole. The lease payments shall include fixed payments, variable lease payments, residual value guarantees, exercise price of a purchase option where the Company is reasonably certain to exercise that option and payments of penalties for terminating the lease, if the lease term reflects the lessee exercising an option to terminate the lease. The lease liability is subsequently remeasured by increasing the carrying amount to reflect interest on the lease liability, reducing the carrying amount to reflect the lease payments made and remeasuring the carrying amount to reflect any reassessment or lease modifications or to reflect revised in-substance fixed lease payments. The company recognises the amount of the re-measurement of lease liability due to modification as an adjustment to the right-of-use asset and statement of profit and loss depending upon the nature of modification. Where the carrying amount of the right-of-use asset is reduced to zero and there is a further reduction in the measurement of the lease liability, the Company recognises any remaining amount of the re-measurement in statement of profit and loss.

The Company has elected not to apply the requirements of Ind AS 116 Leases to short-term leases of all assets that have a lease term of 12 months. The lease payments associated with these leases are recognized as an expense on a straight-line basis over the lease term.

G. BORROWINGS AND BORROWING COSTS

Borrowings are recognised initially at fair value, net of transaction costs incurred. Borrowings are subsequently stated at amortised cost. Any difference between the proceeds (net of transaction costs) and the redemption value is recognised in the income statement over the period of the borrowings using the effective interest rate method. Borrowings are classified as current liabilities unless the Company has an unconditional right to defer settlement of the liability for at least 12 months after the reporting date.

Borrowing costs directly attributable to the acquisition, construction or production of qualifying assets, which are assets that necessarily take a substantial period of time to get ready for their intended use or sale, are added to the cost of those assets, until such time as the assets are substantially ready for their intended use or sale.

Interest income earned on the temporary investment of specific borrowings pending their expenditure on qualifying assets is deducted from the borrowing costs eligible for capitalisation.

All other borrowing costs are recognised in statement of profit and loss in the period in which they are incurred.

H. CASH FLOW STATEMENT

The Cash and cash equivalent in the balance sheet comprise cash at banks and on hand and short-term deposits with a maturity period of three months or less from the balance sheet date, which are subject to an insignificant risk of changes in value.

NOTES TO FINANCIAL STATEMENT

The cash flow statement is prepared in accordance with the Indian Accounting Standard (Ind AS) - 7 "Statement of Cash flows" using the indirect method for operating activities.

I. EMPLOYEE BENEFITS

Retirement benefit costs and termination benefits

Payments to defined contribution retirement benefit plans are recognised as an expense when employees have rendered service entitling them to the contributions.

For defined benefit retirement plans, the cost of providing benefits is determined using the projected unit credit method, with actuarial valuations being carried out at the end of each reporting period. Remeasurement, comprising actuarial gains and losses, the effect of the changes to the asset ceiling (if applicable) and the return on plan assets (excluding net interest), is reflected immediately in the balance sheet with a charge or credit recognised in other comprehensive income in the period in which they occur. Remeasurement recognised in other comprehensive income is reflected immediately in retained earnings and is not reclassified to profit or loss. Past service cost and net interest cost is recognised in statement of profit and loss.

Short-term employee benefits

Short Term Employee Benefits are recognized as an expense on an undiscounted basis in the Statement of Profit and Loss of the year in which the related service is rendered.

Long-term employee benefits

The liability for leave encashment and other compensated absences is recognized on the basis of actuarial valuation made at the end of each reporting period.

J. TAXATION

Income tax expense represents the sum of the current tax and deferred tax.

Current tax

The tax currently payable is based on taxable profit for the year. Taxable profit differs from 'profit before tax' as reported in the statement of profit and loss because of items of income or expense that are taxable or deductible in other years and items that are never taxable or deductible. The Company's current tax is calculated using tax rates that have been enacted or substantively enacted by the end of the reporting period.

Deferred tax

Deferred tax is recognised on temporary differences between the carrying amounts of assets and liabilities in the financial statements and the corresponding tax bases used in the computation of taxable profit. Deferred tax liabilities are generally recognised for all taxable temporary differences. Deferred tax assets are generally recognised for all deductible temporary differences to the extent that it is probable that taxable profits will be available against which those deductible temporary differences can be utilised. Such deferred tax assets and liabilities are not recognised if the temporary difference arises from the initial recognition of assets and liabilities in a transaction that affects neither the taxable profit nor the accounting profit.

The carrying amount of deferred tax assets is reviewed at the end of each reporting period and reduced to the extent that it is no longer probable that sufficient taxable profits will be available to allow all or part of the asset to be recovered.

Deferred tax liabilities and assets are measured at the tax rates that are expected to apply in the period in which the liability is settled or the asset realised, based on tax rates (and tax laws) that have been enacted or substantively enacted by the end of the reporting period.

The measurement of deferred tax liabilities and assets reflects the tax consequences that would follow from the manner in which the Company expects, at the end of the reporting period, to recover or settle the carrying amount of its assets and liabilities.

NOTES TO FINANCIAL STATEMENT

K. PROPERTY, PLANT AND EQUIPMENT

Property, plant and equipment are stated at cost, less accumulated depreciation and impairment loss, if any.

Depreciation is provided for property, plant and equipment so as to write off the cost over their estimated useful lives based on evaluation. The estimated useful lives and residual value are reviewed at the end of each reporting period, with the effect of any changes in estimate accounted for on a prospective basis. Based on technical evaluation, the management believes that its estimates of useful lives as given below best represent the period over which management expects to use these assets.

If significant parts of an item of property, plant & equipment have different useful life, then they are accounted for as separate items (major components) of property, plant & equipment.

The estimated useful lives are as mentioned below:

Type of Asset	Method	Useful Lives
Buildings (Leasehold)	Straight Line	Over the period of Lease or Estimated useful life, whichever is lower
Furniture & Fittings	Straight Line	10 Years
Plant and Medical Equipment	Straight Line	10 - 15 Years
Office Equipment	Straight Line	3 - 6 Years
Surgical Instruments	Straight Line	3 Years
Vehicles	Straight Line	8 Years

An item of property, plant and equipment is derecognised upon disposal or when no future economic benefits are expected to arise from the continued use of the asset. Any gain or loss arising on the disposal or retirement of an item of property, plant and equipment is determined as the difference between the sales proceeds and the carrying amount of the asset and is recognised in statement of profit and loss.

Depreciation is not recorded on capital work-in-progress until construction and installation are complete and the asset is ready for its intended use.

For transition to Ind AS, the company had elected to adopt fair value of Building, Plant and Medical Equipment recognised as of April 1, 2015 as the deemed cost as of the transition date. The resulting adjustments had been directly recognised in retained earnings.

L. INTANGIBLE ASSETS

Intangible assets purchased are measured at cost as of the date of acquisition, as applicable, less accumulated amortisation and accumulated impairment, if any.

Intangible assets consist of software licenses which are amortised over license period which equates the useful life of 3 years on a straight line basis.

For transition to Ind AS, the Company has elected to continue with the carrying value of all of its intangible assets recognised as of April 1, 2015 (transition date) measured as per the previous GAAP and use that carrying value as its deemed cost as of the transition date.

M. IMPAIRMENT OF ASSETS

Non-financial assets

Intangible assets and property, plant and equipment

Intangible assets and property, plant and equipment are evaluated for recoverability whenever events or changes in circumstances indicate that their carrying amounts may not be recoverable. For the purpose of impairment testing, the recoverable amount (i.e. the higher of the fair value less cost to sell and the value-in-use) is determined on an individual asset basis unless the asset does not generate cash flows that are largely independent of those from other assets. In such cases, the recoverable amount is determined for the CGU to which the asset belongs.

If such assets are considered to be impaired, the impairment to be recognized in the statement of profit and loss is measured by the amount by which the carrying value of the assets exceeds the estimated recoverable amount of the

NOTES TO FINANCIAL STATEMENT

asset. An impairment loss is reversed in the statement of profit and loss if there has been a change in the estimates used to determine the recoverable amount. The carrying amount of the asset is increased to its revised recoverable amount, provided that this amount does not exceed the carrying amount that would have been determined (net of any accumulated amortization or depreciation) had no impairment loss been recognized for the asset in prior years.

Financial assets

The company recognizes loss allowances using the expected credit loss (ECL) model for the financial assets which are not fair valued through profit or loss.

Loss allowance for trade receivables with no significant financing component is measured at an amount equal to lifetime ECL. For all other financial assets, expected credit losses are measured at an amount equal to the 12-month ECL, unless there has been a significant increase in credit risk from initial recognition in which case those are measured at lifetime ECL.

N. INVENTORIES

- i) Inventories are valued at cost. Crockery and utensils are valued at cost and are subject to 1/5 write off. In the absence of any further estimated costs of completion and estimated costs necessary to make the sale, the Net realisable value is not applicable.
- ii) The cost in respect of the items constituting the inventories has been computed on FIFO basis.

O. EARNINGS PER SHARE

Basic earnings per share are computed by dividing profit or loss attributable to equity shareholders of the Company by the weighted average number of equity shares outstanding during the year. The Company did not have any potentially dilutive securities in any of the years presented.

P. FOREIGN CURRENCY

The functional currency of the company is Indian rupee. These financial statements are presented in Indian rupees.

The foreign currency transactions are recorded, on initial recognition in the functional currency, by applying to the foreign currency amount the spot exchange rate between the functional currency and the foreign currency at the date of the transaction.

The foreign currency monetary items are translated using the closing rate at the end of each reporting period. Non-monetary items that are measured in terms of historical cost in a foreign currency are translated using the exchange rate at the date of the transaction. Exchange differences arising on the settlement of monetary items or on translating monetary items at rates different from those at which they were translated on initial recognition during the period or in previous financial statements are recognised in statement of profit and loss in the period in which they arise.

Q. PROVISIONS, CONTINGENT LIABILITIES AND CONTINGENT ASSETS

A provision is recognised when the Company has a present obligation as a result of past event and it is probable that an outflow of resources will be required to settle the obligation, in respect of which a reliable estimate can be made. If the effect of the time value of money is material, provisions are discounted using a current pre-tax rate that reflects, when appropriate, the risks specific to the liability. When discounting is used, the increase in the provision due to the passage of time is recognised as a finance cost.

Contingent liability is disclosed in the case of a present obligation arising from a past event when it is not probable that an outflow of resources embodying economic benefits will be required to settle the obligation or a possible obligation, unless the probability of outflow in settlement is remote.

R. FINANCIAL INSTRUMENTS

A financial instrument is any contract that gives rise to a financial asset of one entity and a financial liability or equity instrument of another entity.

NOTES TO FINANCIAL STATEMENT

Initial Recognition and measurement

On initial recognition, all the financial assets and liabilities are recognized at their fair value plus or minus, in the case of a financial asset or financial liability not at fair value through profit or loss, transaction costs that are directly attributable to the acquisition or issue of the financial asset or financial liability.

Subsequent measurement

(i) Financial assets carried at amortised cost

A financial asset is subsequently measured at amortised cost if it is held within a business model whose objective is to hold the asset in order to collect contractual cash flows and the contractual terms of the financial asset give rise on specified dates to cash flows that are solely payments of principal and interest on the principal amount outstanding.

(ii) Financial assets at fair value through other comprehensive income (FVTOCI)

A financial asset is subsequently measured at fair value through other comprehensive income if it is held within a business model whose objective is achieved by both collecting contractual cash flows and selling financial assets and the contractual terms of the financial asset give rise on specified dates to cash flows that are solely payments of principal and interest on the principal amount outstanding.

(iii) Financial assets at fair value through profit or loss (FVTPL)

A financial asset which is not classified in any of the above categories is subsequently measured at fair value through profit or loss.

(iv) Financial liabilities

The financial liabilities are subsequently carried at amortized cost using the effective interest method. For trade and other payables maturing within one year from the balance sheet date, the carrying amounts approximate fair value due to the short-term maturity of these instruments.

Fair value measurement of financial instruments

The fair value of financial instruments is determined using the valuation techniques that are appropriate in the circumstances and for which sufficient data are available to measure fair value, maximising the use of relevant observable inputs and minimising the use of unobservable inputs.

Based on the three level fair value hierarchy, the methods used to determine the fair value of financial assets and liabilities include quoted market price, discounted cash flow analysis and valuation certified by the external valuer.

In case of financial instruments where the carrying amount approximates fair value due to the short maturity of those instruments, carrying amount is considered as fair value.

Derecognition of financial instrument

A financial asset is derecognized when the contractual rights to the cash flows from the financial asset expire or it transfers the financial asset and the transfer qualifies for derecognition under Ind AS 109. A financial liability is derecognized when the obligation specified in the contract is discharged or cancelled or expired.

Equity instruments

Equity shares issued by the company are classified as equity. Incremental costs directly attributable to the issuance of new ordinary shares and share options are recognized as a deduction from equity, net of any tax effects.

S. RECENT ACCOUNTING PRONOUNCEMENTS

Ministry of Corporate Affairs ("MCA") notifies new standards or amendments to the existing standards under Companies (Indian Accounting Standards) Rules as issued from time to time. On 31 March 2023, MCA amended the Companies (Indian Accounting Standards) Amendment Rules, 2023, as below:

Ind AS 1 – Presentation of Financial Statements – This amendment requires the entities to disclose their material accounting policies rather than their significant accounting policies. The effective date for adoption of this amendment

NOTES TO FINANCIAL STATEMENT

is annual periods beginning on or after 1st April, 2023. The Company has evaluated the amendment and the impact of the amendment is insignificant in the financial statements.

Ind AS 8 – Accounting Policies, Changes in Accounting Estimates and Errors – This amendment has introduced a definition of ‘accounting estimates’ and included amendments to Ind AS 8 to help entities distinguish changes in accounting policies from changes in accounting estimates. The effective date for adoption of this amendment is annual periods beginning on or after 1st April 2023. The Company has evaluated the amendment and there is no impact on its financial statements.

Ind AS 12 – Income Taxes – This amendment has narrowed the scope of the initial recognition exemption so that it does not apply to transactions that give rise to equal and offsetting temporary differences. The effective date for adoption of this amendment is annual periods beginning on or after 1st April 2023. The Company has evaluated the amendment and there is no impact on its financial statement.

29. NOTES ON ACCOUNTS

A. Estimated amount of contracts remaining to be executed on capital account and not provided for is Rs. 23.40 crore (Previous year Rs. 3.54 crore).

B. CONTINGENT LIABILITY

- i) Claims against the company not acknowledged as debt Rs. 61.78 crore (Previous Year Rs. 66.83 crore) and interest thereon, if any. This represents suits filed against the company and the consultant doctor. Based on the facts and circumstances, possibility of any of the claims resulting in a major financial loss to the company is remote. Notwithstanding above, the company is adequately insured to mitigate the possibility of any loss.
- ii) Bank guarantees outstanding on account of stores / spares and medical equipment amounting to Rs. 0.33 crore (Previous year Rs. 1.07 crore)

	(Rs. in crore)	
In respect of :	31.03.2023	31.03.2022
a) Service Tax (Net of amount paid under protest of Rs. 0.77 crore)	1.99	1.99
b) Others	1.00	1.00

C. On a Public Interest Litigation (PIL) regarding free treatment in the hospital the Hon’ble Delhi High Court vide its order dated 22nd September, 2009 has held that free treatment provided by the hospital as per the terms of lease deed with Government of National Capital Territory of Delhi shall be inclusive of medicines and consumables. In response to the said order the company filed a Special Leave Petition in the Hon’ble Supreme Court for appropriate directions. The Hon’ble Supreme Court of India has admitted the Special Leave Petition and passed an interim order on 30th Nov, 2009. In pursuance of the interim order, the Hospital has been providing free treatment to the patients referred by the Govt. of NCT of Delhi. The hospital is charging for medicines & medical consumables from patients referred by the Govt. of NCT of Delhi for free treatment in the Hospital in accordance with the directions of the Hon’ble Supreme Court of India. As the matter is sub-judice, the financial impact in the matter can be quantified only upon a decision by the Hon’ble Supreme Court of India.

D. The Govt. of NCT of Delhi had issued an order dated 25th Jun, 2018, which inter-alia provides that in case of more than 200 bedded hospitals, salary given to private nurses should be at par with the salary of the nurses in the State Government hospitals. The order issued by Govt. of NCT Delhi is based on the recommendations of the Expert Committee of Ministry of Health and Family Welfare, Govt. of India, which was constituted in compliance of the Hon’ble Supreme Court judgment dated 29th Jan, 2016 in WP (C) 527/2011 in the matter of Trained Nurses Association of India Vs. Union of India & Ors.

The Association of Healthcare Providers of India (AHPI) of which the Company is a member had filed a writ petition in the High Court of Delhi challenging the order issued by DGHS. The Hon’ble High Court of Delhi upheld the order dated 25th June, 2018, issued by DGHS.

AHPI had filed an LPA (Letter Patent Appeal) before the division bench of the Hon’ble High Court. The division bench has admitted the LPA and the matter was sub-judice. Meanwhile, The Directorate General of Health Services (DGHS) of Govt. of NCT Delhi has withdrawn the order dated 25th June, 2018.

NOTES TO FINANCIAL STATEMENT

- E. i) Under the terms of the agreement between the Government of NCT of Delhi and the company, the Hospital building has been constructed on the land leased out to the company by the Government of NCT of Delhi. The Government of NCT of Delhi has met the expenditure to the extent of Rs. 15.48 crore out of IMCL Building fund account (funds earmarked for the project) together with the interest thereon for construction of building while the balance amount of the cost of the building was borne by the Company. The cost of the building and net carrying amount in the books of account as on 31st March 2023 is Rs. 192.89 crore and Rs. 132.55 crore respectively. The ownership of the building between Government of NCT of Delhi and the company will be decided at a future date keeping in view of the lease agreement.
- ii) Other expenses include Rs. 12/- (previous year Rs. 12/-) towards leasehold ground rent as per the terms of agreement between Govt. of NCT of Delhi and the company.

F. EMPLOYEE BENEFITS

Defined benefit plan

Gratuity (Funded)

The Company provides to the eligible employees, defined benefit plans in the form of gratuity. The gratuity plan provides for a lump sum payment to vested employees at retirement, death while in employment or on termination of employment of an amount equivalent to 15 days' salary payable for each completed year of service. Vesting occurs upon completion of five continuous years of service.

The following table sets out the details of the defined benefit retirement plans and the amounts recognised in the financial statements:

		(Rs. in crore)	
		2022-23	2021-22
i)	Change in Present Benefit Obligation		
	Present value of obligation as at the beginning of the year	32.62	22.15
	Interest Cost	2.34	1.51
	Service Cost	4.33	2.80
	Benefits Paid	(2.27)	(1.91)
	Total Actuarial (Gain)/Loss on Obligation	10.96	8.07
	Present value of obligation as at the End of the year	47.98	32.62
ii)	Change in plan assets		
	Fair value of plan assets at the beginning of the year	32.69	14.47
	Expected return on plan assets	2.35	0.98
	Actuarial gain / (loss) on plan assets	(1.36)	0.15
	Employer contribution	8.50	19.00
	Benefits paid	(2.27)	(1.91)
	Fair value of plan assets at the end of the year	39.91	32.69
iii)	Balance Sheet and related analyses		
	Present Value of the obligation at year end	47.98	32.62
	Fair value of plan assets	39.91	32.69
	Net Liability/provision in Balance Sheet	(8.07)	0.07
iv)	The amounts recognized in the income statement		
	Service Cost	4.33	2.80
	Net Interest Cost	2.34	1.51
	Expected return on plan assets	(2.35)	(0.98)

NOTES TO FINANCIAL STATEMENT

(Rs. in crore)

	2022-23	2021-22
Expense recognized in the Income Statement	4.32	3.33
v) Other Comprehensive Income (OCI)		
Net cumulative unrecognized actuarial gain/(loss) opening	-	-
Actuarial gain / (loss) for the year on PBO	(10.96)	(8.07)
Actuarial gain /(loss) for the year on Asset	(1.36)	0.15
Unrecognized actuarial gain/(loss) at the end of the year	(12.32)	(7.92)
vi) Actuarial (Gain)/Loss on Obligation		
Actuarial (Gain)/Loss on arising from Change in Demographic Assumption	-	-
Actuarial (Gain)/Loss on arising from Change in Financial Assumption	6.83	(1.10)
Actuarial (Gain)/Loss on arising from Experience Adjustment	4.13	9.17
vii) Major categories of plan assets (as percentage of total plan assets)		
Government of India Securities	-	-
State Government securities	-	-
High Quality Corporate Bonds	-	-
Equity Shares of listed companies	-	-
Property	-	-
Special Deposit Scheme	-	-
Funds Managed by Insurer	100%	100%
Bank Balance	-	-
	100%	100%
viii) Net periodic gratuity cost, included in employee cost consists of the following components:		
Current Service Cost	4.33	2.80
Interest Cost / (Income) on Defined Benefit Obligation	(0.01)	0.52
	4.32	3.32
ix) Sensitivity Analysis of the defined benefit obligation		
a) Impact of the change in discount rate		
Present Value of Obligation at the end of the period	47.98	32.62
Impact due to increase of 0.50 %	(2.08)	(1.37)
Impact due to decrease of 0.50 %	2.25	1.48
b) Impact of the change in salary increase		
Present Value of Obligation at the end of the period	47.98	32.62
Impact due to increase of 0.50 %	2.24	1.49
Impact due to decrease of 0.50 %	(2.09)	(1.40)
x) Maturity Profile of Defined Benefit Obligation		
0 to 1 year	2.89	2.07
1 to 2 year	3.91	1.34
2 to 3 year	2.21	2.68
3 to 4 year	3.43	1.58

NOTES TO FINANCIAL STATEMENT

		(Rs. in crore)	
		2022-23	2021-22
	4 to 5 year	3.12	2.67
	5 to 6 year	3.18	2.09
	6 Year onwards	29.24	20.19
xi)	The assumptions used in accounting for the defined benefit plan are set out below:		
	Discount Rate	7.36%	7.18%
	Future Salary Increase	7.50%	5.50%
	Retirement Age	58 years	58 years
	Method used	Projected unit Credit Method	Projected unit Credit Method
xi)	The Company expects to contribute Rs. 5.90 crore to gratuity during the financial year 2023-24.		
	Defined contribution plans		
	The company's contribution to provident fund, pension fund and ESI scheme recognised as expense for the year are as under:		
	– Contribution to Provident fund	2.96	3.66
	– Contribution to Pension fund	1.72	2.13
	– Contribution to ESI	0.10	0.13

G. FINANCIAL RISK MANAGEMENT

The principal financial assets of the Company include loans, trade and other receivables, and cash and bank balances that derive directly from its operations. The principal financial liabilities of the company include loans and borrowings, trade and other payables and the main purpose of these financial liabilities is to finance the day to day operations of the company.

The Company is exposed to market risk, credit risk and liquidity risk. The Company's senior management oversees the management of these risks and advises on financial risks and the appropriate financial risk governance framework for the Company. The risks which the company is exposed to and policies and framework adopted by the company to manage these risks are explained as under:

Market Risk

Market risk is the risk that the fair value of future cash flows of a financial instrument will fluctuate because of changes in market prices. Company is exposed to interest rate risk as its Market risk.

Interest Rate Risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates. The Company's exposure to the risk of changes in market interest rates relates primarily to the Company's debt obligations with floating interest rates.

As the Company has no significant interest-bearing assets, the income and operating cash flows are substantially independent of changes in market interest rates. The Company's exposure to the risk of changes in market interest rates relates primarily to the Company's debt obligations with floating interest rates, which are included in interest bearing loans and borrowings in these financial statements. The company's fixed rate borrowings are carried at amortised cost. They are therefore not subject to interest rate risk, since neither the carrying amount nor the future cash flows will fluctuate because of a change in market interest rates.

NOTES TO FINANCIAL STATEMENT

Liquidity Risk

The financial liabilities of the company include loans and borrowings, trade and other payables. The company's principal sources of liquidity are cash and cash equivalents and the cash flow that is generated from operations.

The below is the detail of contractual maturities of the financial liabilities of the company at the end of each reporting period:
(Rs. in crore)

Particulars	As at 31 st March 2023	As at 31 st March 2022
Trade Payables:		
0-1 years	98.18	76.75
More than 1 years	-	-
Other Financial liabilities:		
0-1 years	3.24	3.56
More than 1 years	1.66	4.27

Credit Risk

Credit risk refers to the risk of default on its obligation by the counterparty resulting in a financial loss. The exposure to the credit risk at the reporting date is primarily from trade receivables which are typically unsecured. Majority of the company's transactions are earned in cash or cash equivalents. The trade receivables comprise mainly of receivables from Insurance Companies, Corporate customers and Government Undertakings. The Insurance Companies are required to maintain minimum reserve levels and the Corporate Customers are enterprises with high credit ratings. Accordingly, the company's exposure to credit risk in relation to trade receivables is low.

The company assesses the creditworthiness of the customers internally to whom services are rendered on credit terms in the normal course of business. The credit limit of each customer is defined in accordance with this assessment. Outstanding customer receivables are regularly monitored.

The company recognizes loss allowances using the expected credit loss (ECL) model for the financial assets which are not fair valued through profit or loss. Loss allowance for trade receivables with no significant financing component is measured at an amount equal to lifetime ECL. For all other financial assets, expected credit losses are measured at an amount equal to the 12-month ECL, unless there has been a significant increase in credit risk from initial recognition in which case those are measured at lifetime ECL.

H. ESTIMATION OF UNCERTAINTY RELATING TO THE GLOBAL HEALTH PANDEMIC FROM COVID-19

The Company has considered the possible effects that may result from the pandemic relating to COVID-19. The Extent to which the Covid-19 pandemic will impact the company's performance going forward will depend on future developments, which are highly uncertain, including, among other things, any new information concerning the severity of the Covid-19 pandemic and any action taken to contain its spread or mitigate its impact whether Government mandated or elected by the hospital.

The impact of Global health pandemic may be different from that estimated as at the date of approval of this financial result and the company will continue to closely monitor any material changes to the further economic conditions.

In assessing the recoverability of receivables including unbilled receivable as on balance sheet date, the company has considered internal and external information up to the date of approval of the financial results.

The company has performed the analysis based on current indicators of future business conditions and the Company expects to recover the carrying amount of the assets of the company.

NOTES TO FINANCIAL STATEMENT

I. Additional Regulatory Information

(i) Ratios

Particulars	Numerator	Denominator	FY 2022-23	FY 2021-22	Variance
Current Ratio (in times)	Total Current Assets	Total Current Liabilities	1.72	1.68	2%
Debt-Equity Ratio (in times)	Total Debt	Shareholders Equity	NA	NA	NA
Debt Service Coverage Ratio (in times)	Earnings available for debt service	Debt Service	NA	NA	NA
Return on Equity Ratio (in %)	Net profit after taxes	Average Total Equity	22%	18%	24%
Inventory turnover ratio	Cost of goods sold or sales	Average inventory	21.00	18.55	13%
Trade Receivables Turnover Ratio (in times)	Net credit sales	Average Trade Receivables	10.43	8.73	19%
Trade Payables Turnover Ratio (in times)	Net credit purchases	Average Trade Payables	8.02	6.64	21%
Net Capital Turnover Ratio (in times)*	Revenue from operations	Average working capital	40.56	29.53	37%
Net Profit Ratio (in %)	Profit for the year	Revenue from operations	7%	6%	18%
Return on Capital Employed (in %)**	Profit before tax and finance cost	Capital Employed = Net worth + deferred tax liabilities	29%	23%	26%
Return on Investment (in %)	Income generated from invested funds	Average invested funds in treasury investments	NA	NA	NA

Reason for change in ratios more than 25%

* Increased due to growth in revenue owing to increased footfall of patients during the year.

** Increase due to growth in revenue and steady improvement in margins.

(ii) Ageing for Trade Receivables

Current outstanding as at 31st March, 2023 is as follows

(Rs. in crore)

Particulars	Not Due	Outstanding for following periods from due date of payment					Total
		Less than 6 months	6 months - 1 year	1 - 2 Years	2 - 3 years	More than 3 years	
Undisputed Trade Receivables – Considered Good	38.33	14.88	3.66	3.60	0.98	15.32	76.77
Undisputed Trade Receivables – which have significant increase in credit risk	-	-	-	-	-	-	-
Undisputed Trade Receivables – credit impaired	-	-	-	-	-	-	-
Disputed Trade Receivables – Considered Good	-	-	-	-	-	-	-
Disputed Trade Receivables – which have significant increase in credit risk	-	-	-	-	-	-	-
Disputed Trade Receivables – credit impaired	-	-	-	-	-	-	-
Total	38.33	14.88	3.66	3.60	0.98	15.32	76.77
Less: Allowances for doubtful trade receivables							8.53
							68.24

NOTES TO FINANCIAL STATEMENT

Current outstanding as at 31st March, 2022 is as follows

(Rs. in crore)

Particulars	Not Due	Outstanding for following periods from due date of payment					Total
		Less than 6 months	6 months - 1 year	1 - 2 Years	2 - 3 years	More than 3 years	
Undisputed Trade Receivables – Considered Good	25.58	5.94	3.10	1.19	0.36	15.11	51.28
Undisputed Trade Receivables – which have significant increase in credit risk	-	-	-	-	-	-	-
Undisputed Trade Receivables – credit impaired	-	-	-	-	-	-	-
Disputed Trade Receivables – Considered Good	-	-	-	-	-	-	-
Disputed Trade Receivables – which have significant increase in credit risk	-	-	-	-	-	-	-
Disputed Trade Receivables – credit impaired	-	-	-	-	-	-	-
Total	25.58	5.94	3.10	1.19	0.36	15.11	51.28
Less: Allowances for doubtful trade receivables							7.93
							43.35

(iii) Ageing for Trade Payables

Current outstanding as at 31st March, 2023 is as follows

(Rs. in crore)

Particulars	Not Due	Outstanding for following periods from due date of payment				Total
		Less than 1 year	1 - 2 Years	2 - 3 years	More than 3 years	
MSME	0.53	-	-	-	-	0.53
Others	45.94	1.71	0.34	-	-	47.99
Disputed MSME	-	-	-	-	-	-
Disputed Others	-	-	-	-	-	-
Total	46.47	1.71	0.34	-	-	48.52
Accrued expenses						49.66
						98.18

Current outstanding as at 31st March, 2022 is as follows

(Rs. in crore)

Particulars	Not Due	Outstanding for following periods from due date of payment				Total
		Less than 1 year	1 - 2 Years	2 - 3 years	More than 3 years	
MSME	1.43	-	-	-	-	1.43
Others	38.98	1.36	1.31	-	-	41.65
Disputed MSME	-	-	-	-	-	-
Disputed Others	-	-	-	-	-	-
Total	40.41	1.36	1.31	-	-	43.08
Accrued expenses						33.67
						76.75

NOTES TO FINANCIAL STATEMENT

(iv) Capital work-in-Progress

(Rs. in crore)

Particulars	Amount of CWIP for a period of				Total
	Less than 1 year	1 - 2 Years	2 - 3 years	More than 3 years	
Projects in progress	-	-	-	-	-
as on 31 st March, 2023	2.53	-	-	-	2.53
Projects in progress	-	-	-	-	-
as on 31 st March, 2022	-	-	-	-	-

J. The Code on Social Security, 2020 has been enacted, which could impact the contributions by the company towards Provident Fund and Gratuity. The effective date from which the changes are applicable is yet to be notified. Impact if any, of the change will be assessed and accounted in period of notification of relevant provisions.

K. FINANCIAL INSTRUMENTS BY CATEGORY

The carrying value and fair value of financial instruments by categories as of 31st March, 2023

(Rs. in crore)

Particulars	FVTPL	FVTOCI	Amortised Cost	Carrying Cost
Assets:				
Fixed deposits being Margin Money with Bank	-	-	0.05	0.05
Other Fixed Deposit	-	-	45.51	45.51
Security Deposit	-	-	1.86	1.86
Trade Receivables	-	-	68.24	68.24
Cash & Cash Equivalent	-	-	52.26	52.26
Bank Balances other than Cash & Cash equivalent	-	-	75.09	75.09
Lease Rent Receivable	-	-	0.40	0.40
Patient Treatment in Progress (Net of Advances)	-	-	6.38	6.38
Liabilities:				
Security Deposits	-	-	1.66	1.66
Trade Payables	-	-	98.18	98.18
Sundry Creditors for capital items	-	-	0.76	0.76
Lease Liabilities	-	-	2.48	2.48

The carrying value and fair value of financial instruments by categories as of 31st March, 2022

(Rs. in crore)

Particulars	FVTPL	FVTOCI	Amortised Cost	Carrying Cost
Assets:				
Fixed deposits being Margin Money with Bank	-	-	0.01	0.01
Other Fixed Deposit	-	-	23.01	23.01
Security Deposit	-	-	1.82	1.82
Trade Receivables	-	-	43.35	43.35
Cash & Cash Equivalent	-	-	41.74	41.74
Bank Balances other than Cash & Cash equivalent	-	-	25.39	25.39

The carrying value and fair value of financial instruments by categories as of 31st March, 2022

(Rs. in crore)

Particulars	FVTPL	FVTOCI	Amortised Cost	Carrying Cost
Lease Rent Receivable	-	-	0.38	0.38
Patient Treatment in Progress (Net of Advances)	-	-	4.78	4.78
Liabilities:				
Security Deposits	-	-	1.79	1.79
Non - Current Lease Liabilities	-	-	2.48	2.48
Trade Payables	-	-	76.75	76.75
Sundry Creditors for capital items	-	-	0.73	0.73
Lease Liabilities	-	-	2.83	2.83

FVTPL - Fair value through profit and loss, FVTOCI - Fair value through other comprehensive income.

L. The Ministry of Micro, Small and Medium Enterprises has issued an office memorandum dated 26th August 2008 which recommends that the Micro and Small Enterprises should mention in their correspondence with its customers the Entrepreneurs Memorandum Number as allocated after filing of the Memorandum. Accordingly, the disclosure in respect of the amounts payable to such enterprises as at 31st March, 2023 has been made in the financial statements based on information received and available with the Company. Further in view of the management, the impact of interest, if any, that may be payable in accordance with the provisions of the Micro, Small and Medium Enterprises Development Act, 2006 ('The MSMED Act') is not expected to be material. The Company has not received any claim for interest from any supplier during the year.

(Rs. in crore)

Particulars	As at 31 st March, 2023	As at 31 st March, 2022
(i) The amounts remaining unpaid to micro and small suppliers as at the end of the year		
- Principal	0.53	1.43
- Interest	-	-
(ii) The amount of interest paid by the buyer as per the MSMED Act	-	-
(iii) The amount of payments made to micro and small suppliers beyond the appointed day during the accounting year	-	-
(iv) The amount of interest due and payable for the period of delay in making payment (which have been paid but beyond the appointed day during the year) but without adding the interest specified under the MSMED Act	-	-
(v) The amount of interest accrued and remaining unpaid at the end of each accounting year	-	-
(vi) The amount of further interest remaining due and payable even in the succeeding years, until such date when the interest dues as above are actually paid to the small enterprise for the purpose of disallowance as a deductible expenditure under the MSMED Act	-	-

Dues to Micro and Small Enterprises have been determined to the extent such parties have been identified on the basis of information collected by the Management.

M. Related party disclosures

(Rs. in crore)

Name	Relationship	Nature of Transactions	31 st March, 2023	31 st March, 2022
Apollo Hospitals Enterprise Limited	Enterprise in respect of which the company is an associate	Pharmacy Consumables	13.56	12.54
		License Fees	1.44	1.33
		Commission on Pharmacy Sales	23.90	17.30
		Sale of Property, Plant & Equipment	-	1.26
		Reimbursement of Expenses	0.67	0.67
		Trade Payable	4.86	0.65

(Rs. in crore)

Name	Relationship	Nature of Transactions	31 st March, 2023	31 st March, 2022
Faber Sindoori Management Services (P) Limited		Purchase of services	8.64	7.73
		Trade Payable	0.10	-
Life Time Wellness Rx International Ltd		Purchase of services	-	0.20
		Trade Payable	-	-
Apollo Sindoori Hotels Limited	Enterprise over which Directors are able to exercise significant influence	Purchase of services	10.13	-
		Trade Payable	0.29	-
Apollo Healthco Limited		Purchase of services	0.62	-
		Trade Payable	0.56	-
Apollo Health and Lifestyle Limited		Sale of Services	0.63	0.80
		Trade Receivable	0.02	0.08
Family Health Plan Limited		Sale of Services	18.92	19.86
		Trade Receivable	3.14	2.27
Key Management Personnel[§]				
Shivakumar Pattabhiraman	Managing Director	Remuneration Paid	2.43	2.57
C P Tyagi	Chief Financial Officer	Remuneration Paid	1.23	1.09
Priya Ranjan	Associate Vice President cum Company Secretary	Remuneration Paid	0.82	0.73
Non Executive Directors (excluding GST)		Sitting fees	0.88	0.78
		Commission	1.12	0.64

[§] Key Management Personnel are covered under the Company's gratuity and leave encashment scheme along with the other employee benefits of the Company. The gratuity/ leave encashment liability is determined for all employees based on an independent actuarial valuation. The specific amount of gratuity/ leave encashment for Key Management Personnel cannot be ascertained separately and accordingly the same has not been included in respective employees.

N. The Basic earning per share (EPS) disclosed in the Statement of Profit and Loss has been calculated by dividing the net profit for the year ended 31st March, 2023 attributable to equity shareholders by the weighted average number of equity shares outstanding during the said financial year. The net profit attributable to equity share holders is Rs. 86.15 crore (Previous Year Rs. 58.62 crore) and the weighted average number of equity share is 9,16,73,000 (Previous Year 9,16,73,000) for this purpose.

D. In accordance with Ind AS - 36 on Impairment of Assets, the company has assessed whether any indications with regard to impairment of any assets exists as on the Balance Sheet date. Based on such assessment, it has been ascertained that there are no such indications and thereby no formal estimate of the recoverable amount has been made.

P. As per Section 135 of the Companies Act, 2013, a company, meeting the applicability threshold, needs to spend at least 2% of its average net profit for the immediately preceding three financial years on corporate social responsibility (CSR) activities. The areas for CSR activities are promoting education, healthcare and COVID-19 relief. The Company has fully spent the required amount towards Corporate Social Responsibility (CSR) and there are no unspent CSR amount for the year requiring a transfer to a Fund specified in Schedule VII to the Companies Act or special account in compliance with the provision of sub-section (6) of section 135 of the said Act.

(Rs. in crore)

Particulars	As at 31 st March, 2023	As at 31 st March, 2022
Amount required to be spent by the company during the year	0.84	0.66
Amount of expenditure incurred	0.85	0.66
Shortfall at the end of the year	-	-
Total of previous years shortfall	-	-

Q. The company is engaged in the healthcare business, which in context of Ind AS 108 issued by the Institute of Chartered Accountants of India is considered the only business segment.

R. PAYMENT TO AUDITORS:

(Rs. in crore)

Particulars	As at 31 st March, 2023	As at 31 st March, 2022
For Statutory Audit	0.25	0.20
For Tax Audit	0.02	0.01
For Other Assurance Matters	-	0.04
Reimbursement of Expenses	0.01	0.01
Total	0.28	0.26

S. INCOME TAXES:

(a) Reconciliation of Deferred tax liabilities (net):

(Rs. in crore)

Particulars	As at 31 st March, 2023	As at 31 st March, 2022
Balance at the beginning of the year	23.19	22.26
Deferred tax (income)/expenses during the year recognized in Statement of Profit and loss	(0.11)	2.92
Deferred tax (income)/expenses during the year recognized in Other Comprehensive income	(3.10)	(1.99)
Balance at the end of the year	19.98	23.19

(b) A reconciliation of the income tax provision to the amount computed by applying the statutory income tax rate to the profit before taxes is summarized as below:

(Rs. in crore)

Particulars	For the year ended 31 st March, 2023	For the year ended 31 st March, 2022
Accounting profit before tax	104.86	71.15
Applicable tax rates	25.17%	25.17%
Computed expected tax expense	26.39	17.91
Effect of Non-deductible expenses	1.54	0.55
Tax expense	27.93	18.46

T. Previous year figures have been regrouped / rearranged wherever necessary.

As per our separate report of even date attached

For S.N. Dhawan & CO LLP
Chartered Accountants
Firm Reg. No. 000050N/N500045

Rajeev K Saxena
Partner
M. No. 077974
Place : New Delhi
Date : 23rd May, 2023

Suneeta Reddy
Director
(DIN 00001873)
Place : Chennai
Date : 23rd May, 2023

C P Tyagi
Chief Financial Officer
Place : New Delhi
Date : 23rd May, 2023

Shivakumar Pattabhiraman
Managing Director
(DIN 08570283)
Place : New Delhi
Date : 23rd May, 2023

Priya Ranjan
Associate Vice President Cum
Company Secretary
Place : New Delhi
Date : 23rd May, 2023



Indraprastha Medical Corporation Limited

[CIN: L24232DL1988PLC030958]

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