

Cleopatra Hospitals Group Investor Presentation 1Q21

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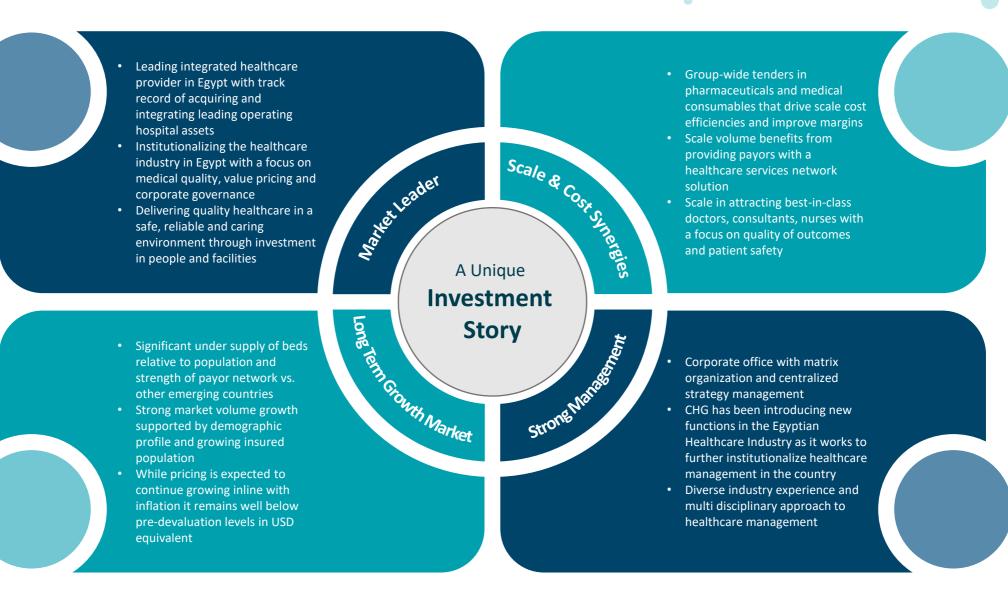
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A Unique Investment Story





A Diversified Healthcare Services Group

- **Cleopatra Hospitals Group is Egypt's first and largest private hospital group** by number of hospital beds and operating hospitals and consists of six operational hospitals and two polyclinics in addition to a leading IVF Centre all in Cairo. The Group's network includes:
 - Cleopatra Hospital (100.0% ownership)
- Cairo Specialized Hospital (56.5% ownership) ii.
- Nile Badrawy Hospital (99.9% ownership) iii.
- Al Shorouk Hospital (100.0% ownership) iv.
- Queens Hospital (100.0% ownership) ν.
- Al Katib Hospital (100.0% ownership) vi.
- Cleopatra Hospitals Group Clinics (100.0% ownership) vii.
- viii. Bedaya IVF Centre (60% ownership)
- Since inception, the Group has revolutionized the Egyptian healthcare industry ٠ by bringing high quality, integrated healthcare solutions to a growing number of patients across a constantly expanding geographical footprint.
- Around 75% of revenue generated from insured & contract patients





Around 75% of CHG's revenue is generated from hospital-focused services

*Percentages calculation does not take into account other revenue streas

Outpatient

Pharmacv

9%

Radiology

9%

13%

ER

Cardiac

Catheterization

Laboratory

Services

Outpatient

Clinics

Surgeries

11%

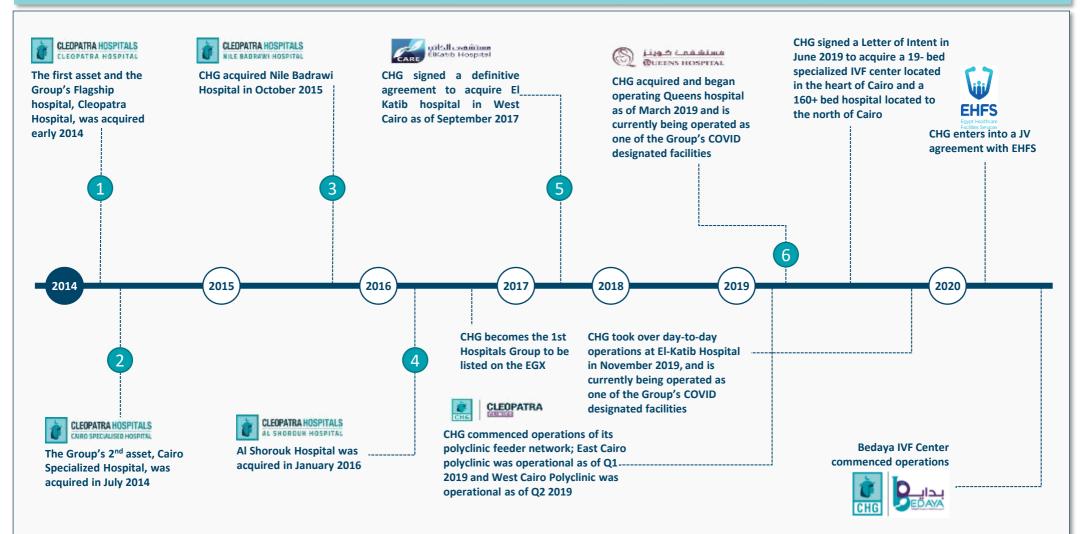
Inpatients

20%

CHG's Journey History & Timeline



The Evolution of CHG from a Single Asset into one of the Largest Hospital Platform in the Region



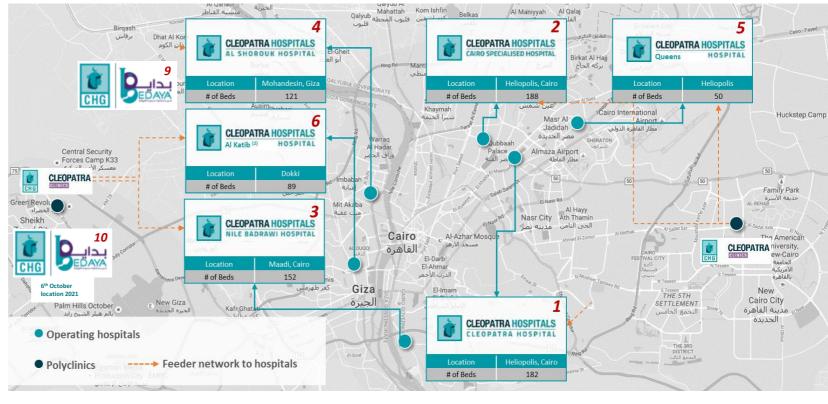


Broad Network Coverage in Greater Cairo

Leveraging a growing footprint, CHG continues to penetrate new segments of the population and provide high quality care to currently underserved areas of Greater Cairo

Cleopatra Hospitals Group, is the largest private hospital group in Egypt by number of beds and operating hospitals with a broad network coverage across Greater Cairo

Providing high quality and affordable care to c. 1 Mn patients a year



12 thousand Inpatients in 1Q2021

Surgeries Performed in 1Q2021

thousand

472 thousand

Diagnostic Tests** Performed in 1Q2021

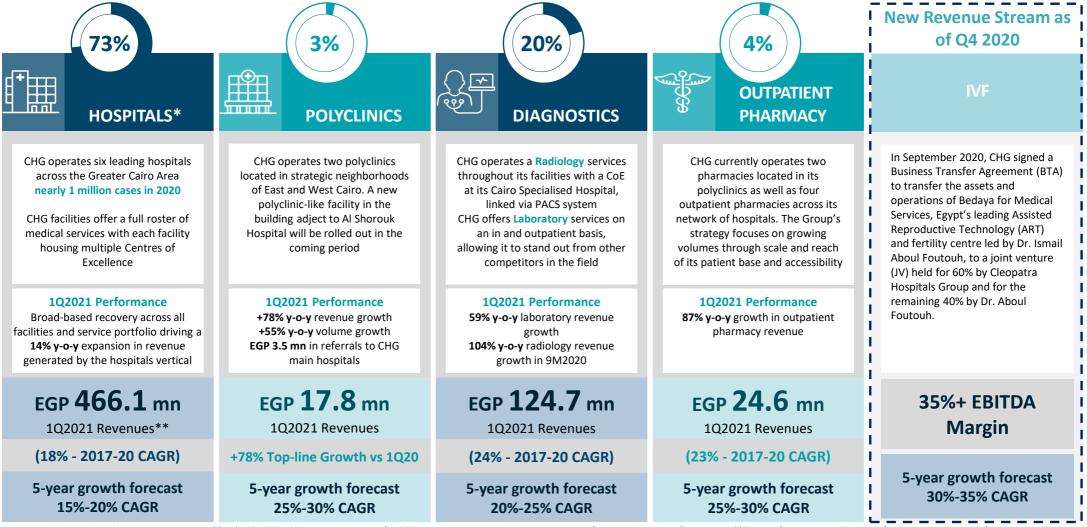
*Cases served includes number of in-patients, outpatient visits and ER visits. ** Diagnostic Tests include Laboratory and Radiology tests conducted



Diversified Service Offering and Revenue Stream

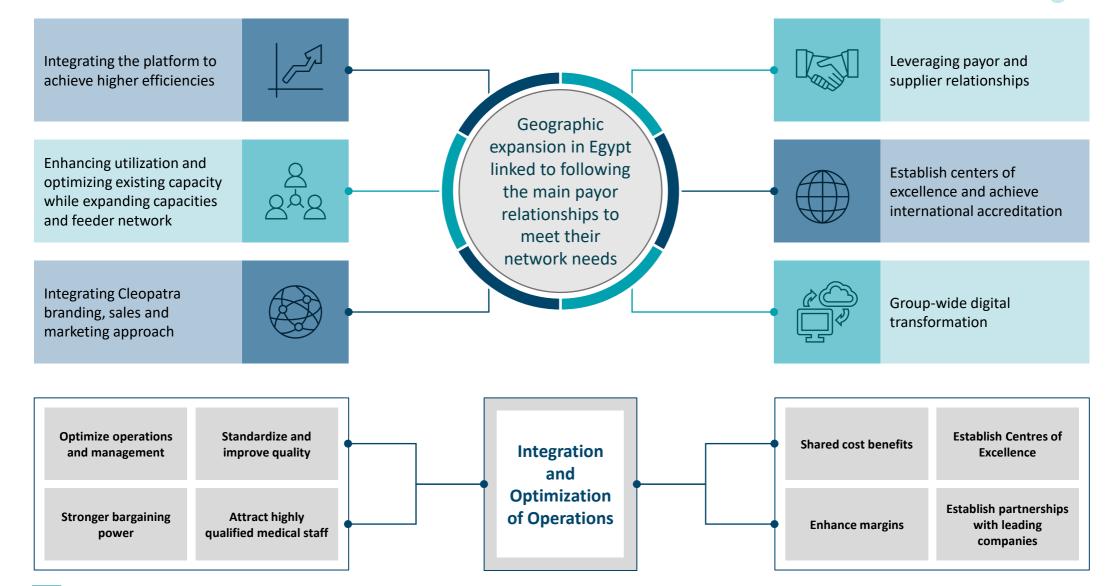
CHG delivered strong top- and bottom-line growth with record-high margins in 1Q2021 supported by strong growth across all verticals





Note: contributions based on 1Q2021 revenues, ** Calculated by subtracting revenues of polyclinics, diagnostics and pharmacy services from total revenues for 1Q2021, ***5 Year forecast growth rates refers to revenue growth for the vertical

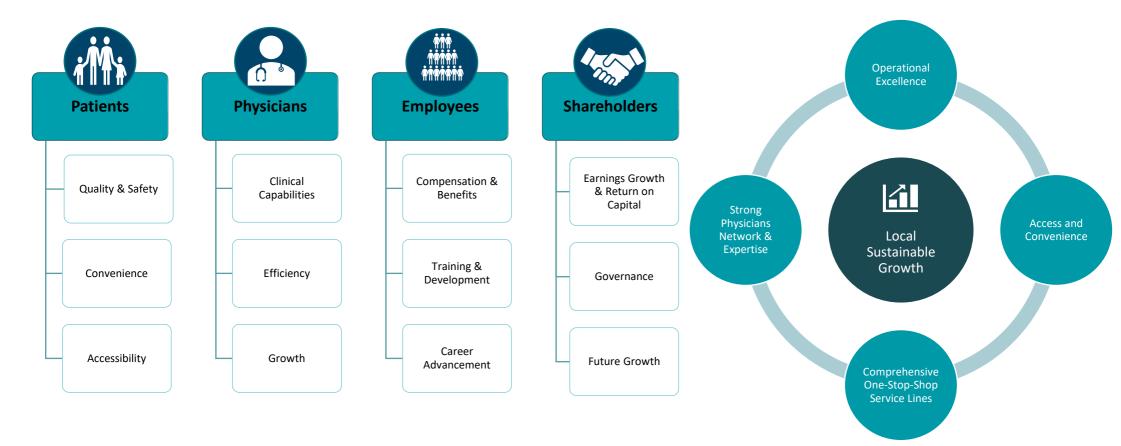
Clearly Defined Core Growth Strategy





Healthcare Provider of Choice

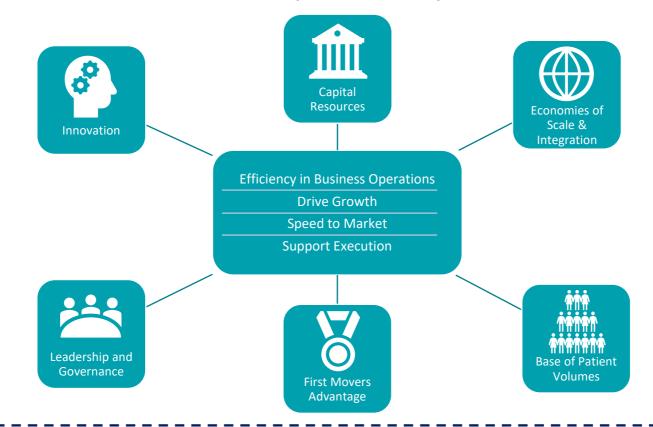
Creating a one-stop-shop that is seamlessly integrated across all our assets comes as a result of the Group's persistence in keeping our patients at the center of everything we do, while at the same time ensuring to drive value to all CHG's key stakeholders. With that focal point on mind at all times, the Group manages to maintain local sustainable growth with every day of operations.





Sources of Differentiation

Having been the amongst the first private healthcare providers to recognize the attractiveness of the Egyptian healthcare industry, the Group has played a central role in institutionalizing the sector and promoting its growth and development over the years



CHG was the first to introduce a 360-degree integrated management framework to oversee its operations, allowing the Group to consistently improve the quality of its services and patient experience while driving efficiency enhancements throughout its constantly expanding facility network



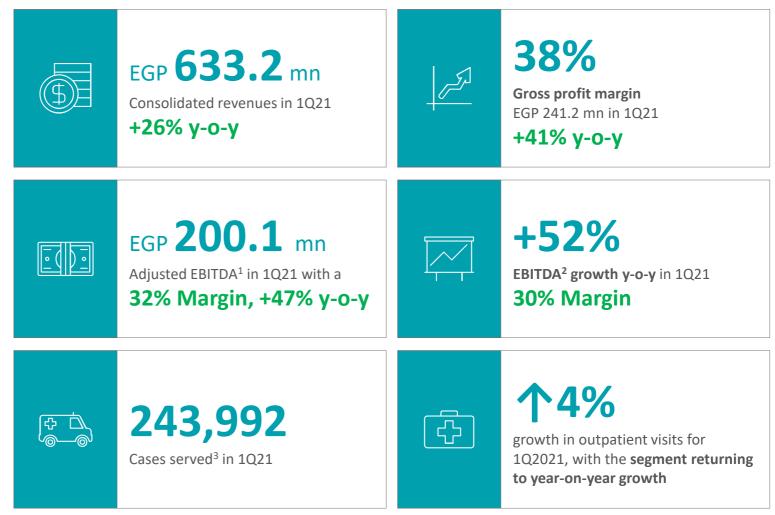
CHG 1Q2021 Financial Highlights

Cleopatra Hospitals Group kicked off the new year on the same positive trajectory it had concluded 2020 on, **delivering another quarter of solid financial and operational results across its entire facility network and service portfolio, while continuing to make significant progress on our multi-pronged operational and growth strategy.**

The Group recorded an impressive 26% year-on-year increase in revenues supported by growing patient volumes and improving utilization rates across all our facilities.

In line with expectations, **patient volumes are nearing a full recovery from the COVID-19-related slowdown** in the second quarter of 2020 and some segments have already returned to year-on-year growth in 1Q2021.

CHG continued to record strong and improving margins on the back of solid top-line growth coupled with the continued success of our Group-wide cost control and optimisation efforts.



¹Adjusted EBITDA: Earnings before Interest, Tax, Depreciation and Amortization adjusted for provisions, impairments, LTIP, acquisitions expenses, pre-operating expenses and excluding contributions from other income.

² EBITDA does not adjust for impairments booked during the period. ³ Cases served includes number of in-patients, outpatient visits and ER visits.

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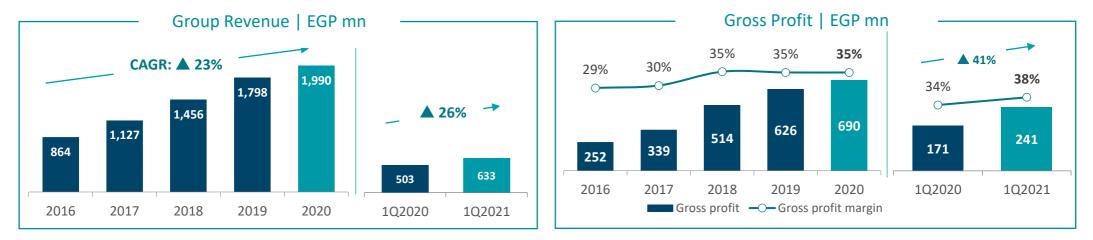
Q1 2021 in Review

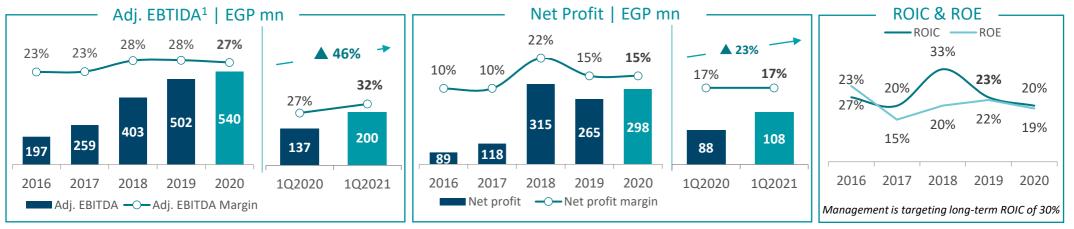
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Financial Performance in 1Q2021

Top-line growth was supported by expanding patient volumes, improving utilization, and an increasingly optimised service mix. Revenue growth for the quarter was bolstered by strong cross-asset referrals in line with the Group's feeder network strategy. Record-high margins supported by the Group's long-term efficiency enhancement strategy and management's wide ranging cost reduction and optimisation efforts introduced over the last year. Net profit expanded an impressive 23% versus the first quarter of last year as strong top-line growth filtered down to the Group's bottom-line



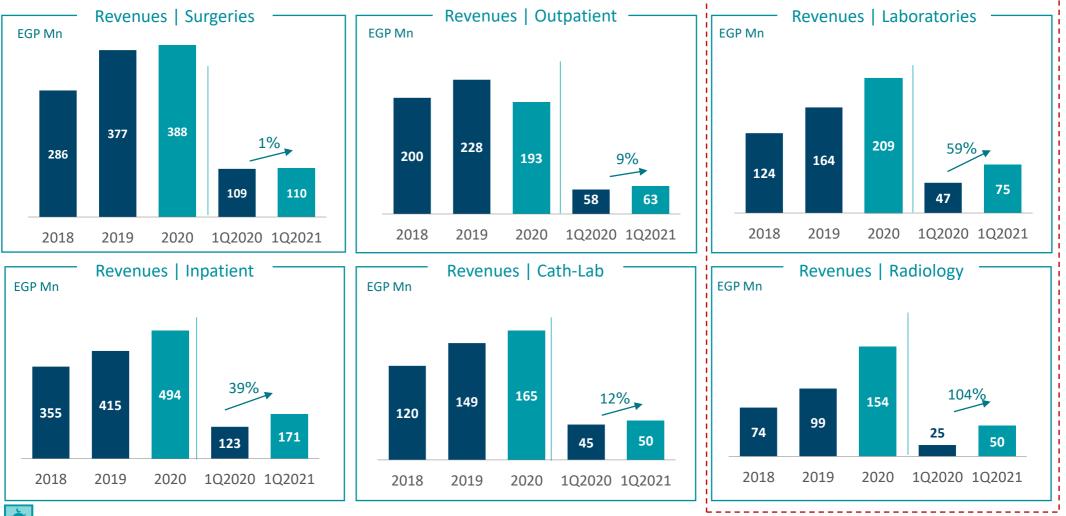


1 Adjusted EBITDA: Earnings before Interest, Tax, Depreciation and Amortization adjusted for provisions, impairments, LTIP, acquisitions expenses, pre-operating expenses and excluding contributions from other income.

CHG

Key Revenue Drivers (i)

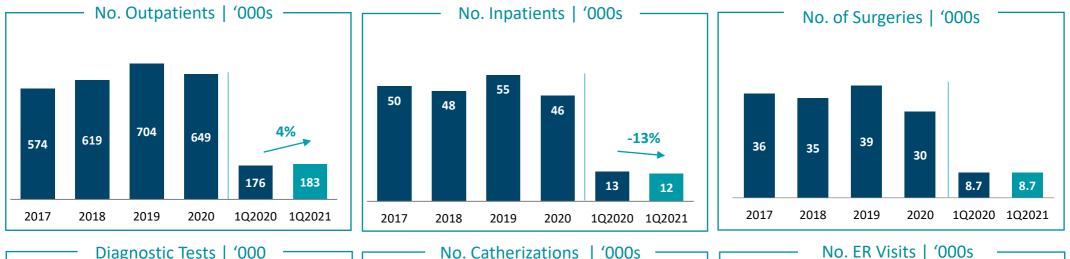
The year-on-year top-line growth was broad-based with solid volumes and growing revenues across CHG's Covid-19-dedicated and regular facilities. Moreover, in line with CHG's diversification strategy, all of the Group's verticals continued to deliver robust results in 1Q2021. More specifically, the Group continued to witness growing volumes and revenues at its polyclinics, as well as growing contributions from its recent expansions and new specialties.





Key Revenue Drivers (ii)

In line with management's expectations, patient volumes are nearing a full recovery from the COVID-19-related slowdown in the second guarter of 2020, with some segments returning to year-on-year growth in 1Q2021. It is important to note that while our COVID-19-dedicated facilities are continuing to record strong demand, the Group recorded solid patient volumes across all our facilities, signaling that **demand for high-quality** healthcare remains intact and that a return to our pre-crisis volume growth trajectory is imminent.



4.5

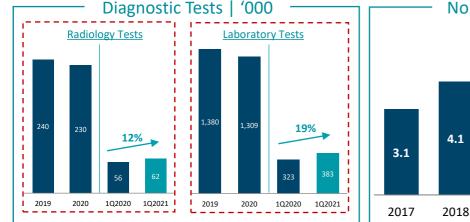
2019

4.0

2020

-5%

1.2



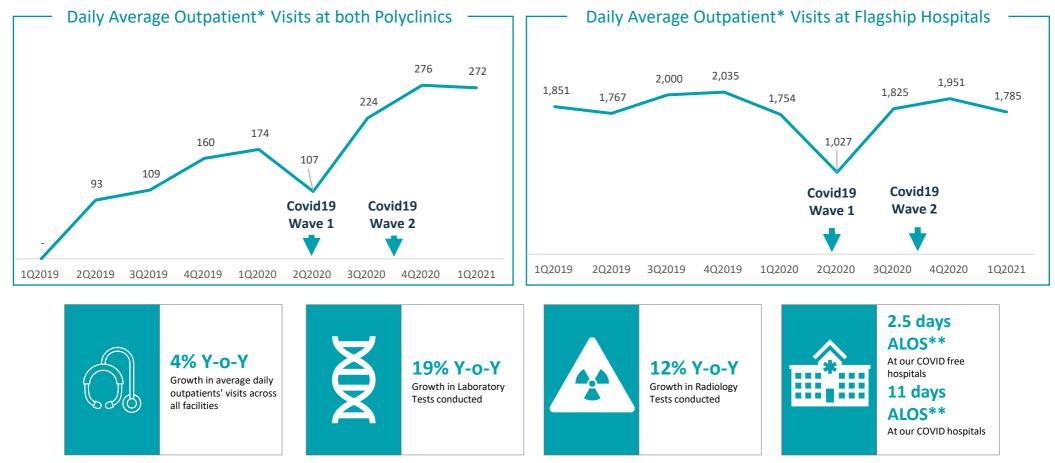


Note: Cases served includes number of in-patients, outpatient visits and ER visits.



Patient Volumes Recovery

The Group's polyclinics services continued to witness steady growth throughout the quarter across both facilities. Strong volume growth at the two polyclinics is also helping to drive up referrals to the Group's main hospitals, which amounted to EGP 5Mn in Q1 2021, as well as plays an active role in helping patient volumes recover by capturing the missed market opportunities as a result of the COVID-19 related slowdown. This is also in line with the Group's one-stop-shop strategy which aims to retain patients for the entire treatment cycle from the initial diagnosis and treatment, all the way through to providing pharmacy and long-term home care services.

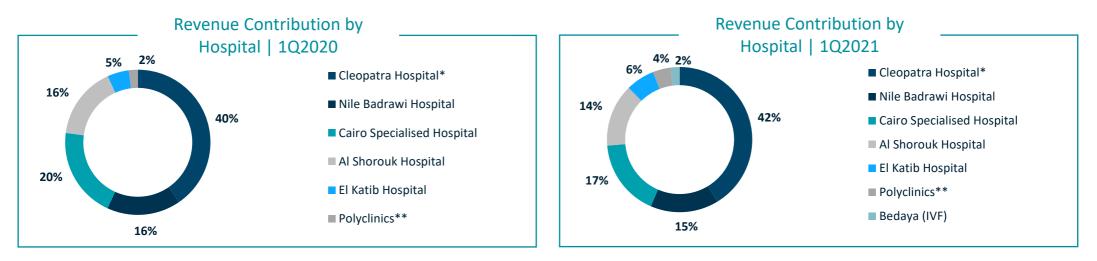


*Outpatients included are only paid visits and excludes follow-ups ** ALOS are averages across the group's facilities

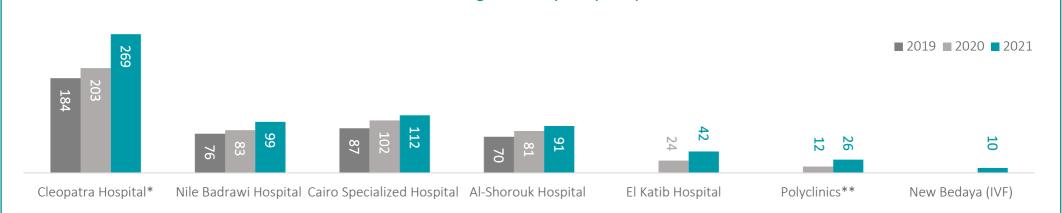


Group Revenue Contribution in 1Q2021

CHG has witnessed a growing contribution coming from its newly added hospitals and clinics as well as new services and segments. In particular, **the Group's polyclinics continue to outperform expectations recording steady growth in volumes and revenues**. Moreover, the Group's newly acquired hospitals, El Katib and Queens, continue to record high utilization rates supported by the strategic decision to convert them into COVID-19 treatment centers.

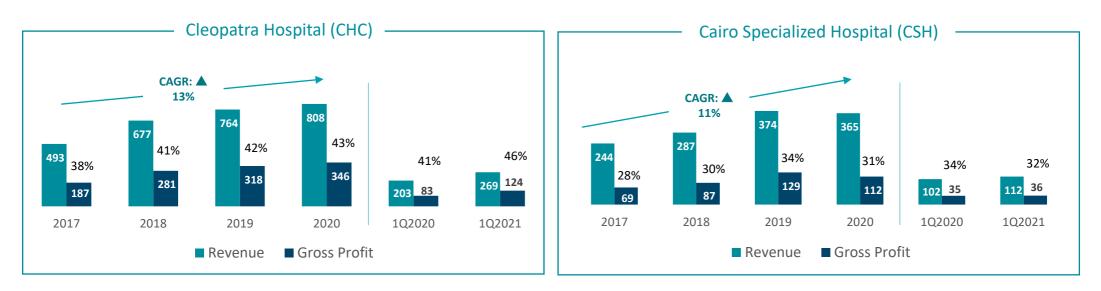


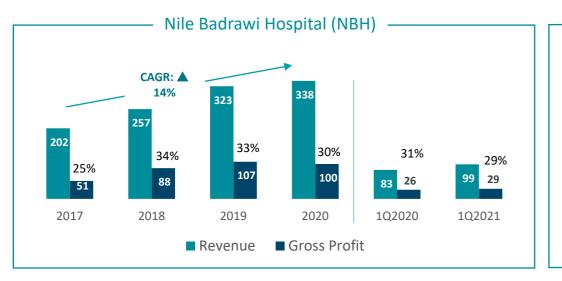
1Q Revenue Progression by Hospital | EGP mn

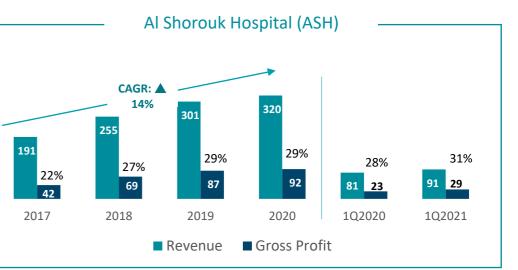


^{*}Cleopatra Hospital includes contributions from Queens Hospital of EGP 1.5 million in 2020 and EGP 48.6 million in 2021. **Polyclinics revenues include revenues from the Group's East and West Cairo Polyclinics as well as CHG Pharma.

Financial Performance by Hospital



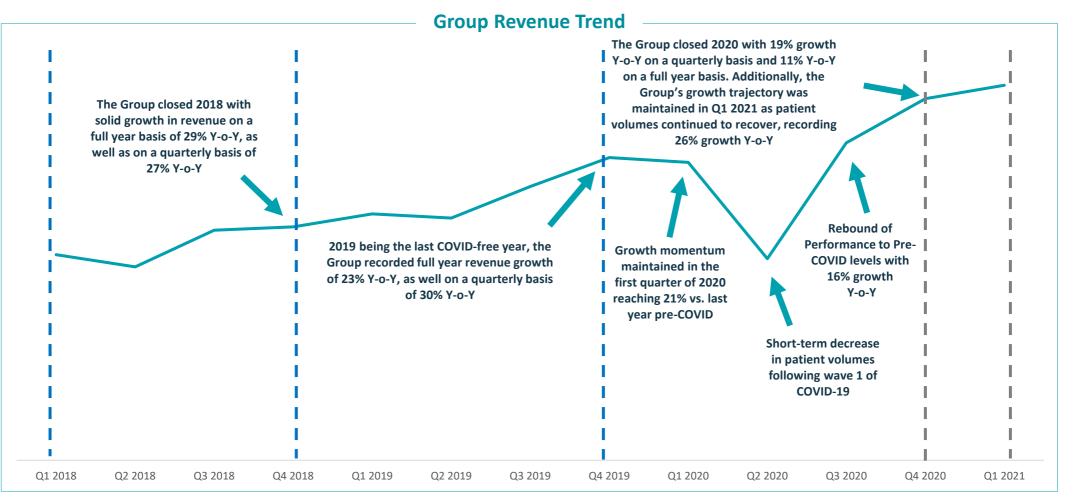




Group Revenue Trend



The Group's assets managed to maintain their growth trajectory of Q4 2020, on the back of patients' recovery, throughout 1Q2021 whereby volumes and revenues resume their historical growth trends, further breaking previous all-time highs.





2020 in Review

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2020 in Review



Securing Inventory

Purchasing and securing of PPE, Medication and Consumables in anticipation

Business Contingency

Crisis Management planning phase – medical operations and back-office – insurance rejecting claims – suppliers panic – lockdowns

Patient Pathway

Medical Council & Quality protocols handling patient pathways – suspected cases – referral to MOH.

Investor Assurance

engaging investors with updates and assurance against risks/fears

Al Katib Conversion

Converting El Katib Hospital into a Covid hospital – hiring – training – pay structure medical protocols- moral support New Revenue Streams Launching Home Visits & Telehealth – marketing campaigns

Cost Avoidance

Reconsidering capital expenditure plans – variable costs management – efficiency applications

Employee Safety

Health & Safety precautions – fear of infection – treatment planning and reporting

Queens Conversion

10 day conversion into Covid treatment hospital – quick fixes – capex – consumables and medication – hiring – training

Support & Manage

Supporting and managing teams/reviewing performance – responding to changes – following up initiatives – moral support

Negative PR

Covid Pricing pressures from MOH and Media – earnings release – approval of MOH pricing – lobbying

Rebound Marketing

focusing on recovering volumes and confidence of patients and consultants – sales team activities – MD focus

December

Business Continuity

Performance management – opportunistic rebound – subaccount management – margin efficiencies

EHFS outsourcing

Operational changes and management.

Bedaya Acquisition

Integrating and consolidating Bedyaa operations with operational challenges

Strategic Focus

2021 strategic and business planning exercises – project genesis



2020 in Review (Cont'd)



2020

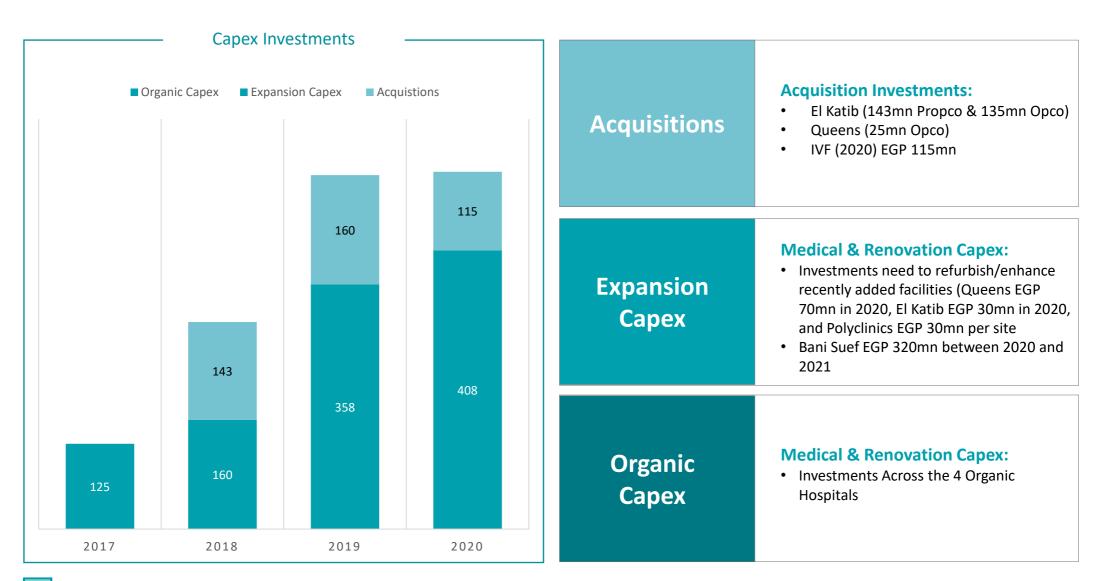
JAN – FEB	MAR	APR	MAY	JUN	SEP	OCT – DEC
Strong results in	COVID-19 crisis	CHG rolls out	El Katib and	Volumes begin to	Group acquires	Record-breaking
January and	begins mid-March;	extensive mitigation	Queens Hospitals	recover following	Bedaya IVF centre	fourth quarter sees
February as CHG	Government imposed	strategy ; response	are converted	easing of restrictions	and forms the	the Group report
built on strong	restrictions weigh	protocols to tackle	into COVID-19	and supported by the	Egyptian Healthcare	revenues in excess of
momentum from	down on patient	health and business	treatment	Group's dedicated	Facilities Services	EGP 600 mn for the
2019	volumes	continuity risks	facilities	strategy	(EHFS) company	first time

2020 Expansion Highlights			Since the IPO*				
IVF	Facility Management	24 beds + 2 executive floors	30%	Revenue CAGR (2015-20)	30%	Gross Profit CAGR (2015-20)	
The Group acquires majority stake in Bedaya and ventures into fast- growing ART segment	CHG forms EHFS and enters the underpenetrated facility management segment	Capacity expansion at existing hospitals	27%	EBITDA CAGR (2015-20)	20%	ROIC (2020)	



Capex Profile



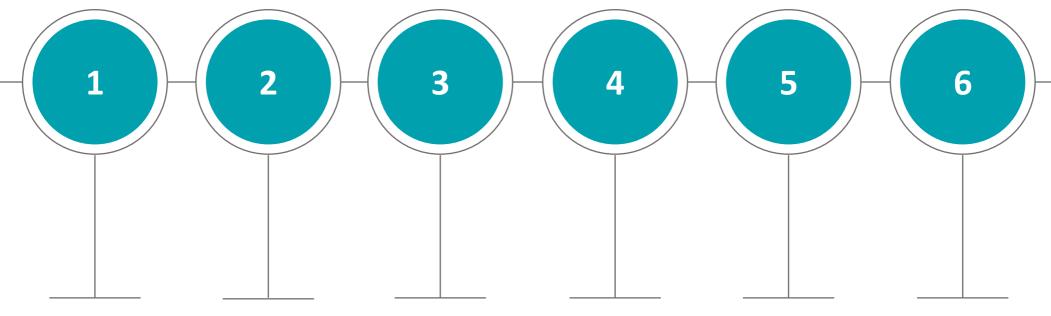




Expansion Strategy & Updates

Expansion strategy





Creating Feeder Networks & Expanding Services Offering Building Additional Capacities in Existing Facilities

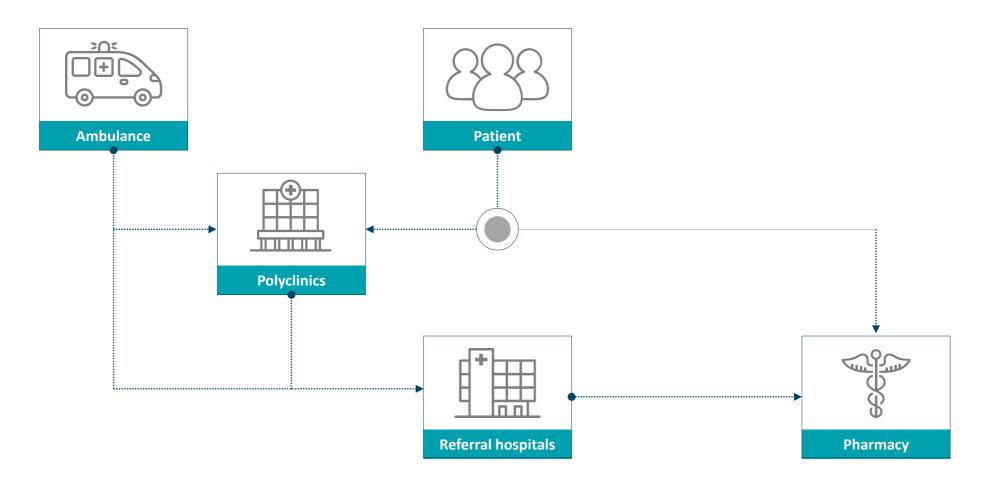
Strategic Acquisitions of Operating Facilities Brownfield / Greenfield Expansions Expanding Reach Beyond Greater Cairo Creating Strategic Entities to Serve Group's Scale of Operations



Core Theme – Focus on Patient Pathway Capture to Maximize Share of Wallet from Existing Payors



Increase number of registered patients through increasing the outpatient network, while a focus on patient pathway capture results in increased network revenue from the core payors.

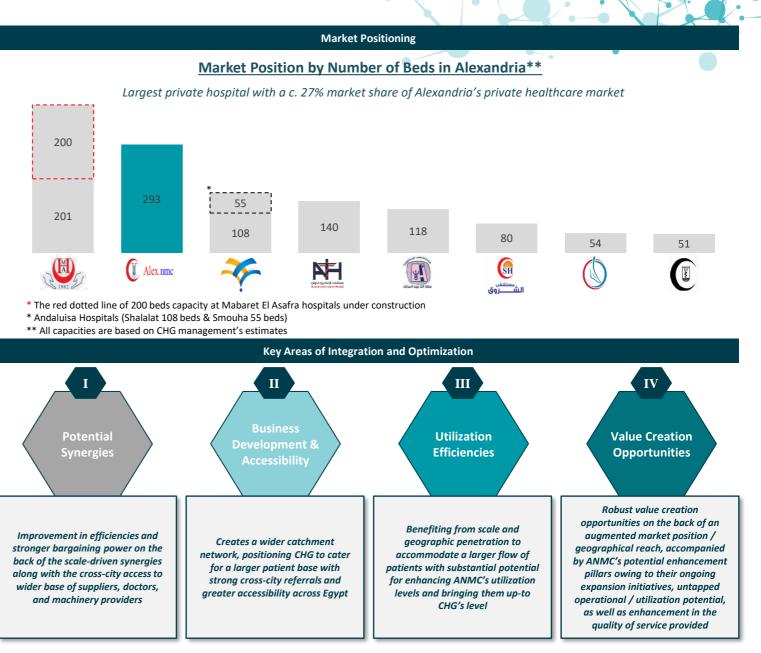




ANMC's Potential Strategic Acquisition

Transaction Rationale

- Alexandria is the second largest city in Cairo with fewer high-quality assets (albeit with SGH building a large facility) and Andalusia dominating the A&B segment, as well as Mabaraet El Asafra, which recently had Tana Capital acquire a minority stake. There is room to grow the CHC credit segment within ANMC and improve utilization
- The hospital has undergone a recent renovation and expansion growing number of beds from 193 to 293 beds and has introduced new centers of excellence requiring minimal capex going forward
- CHG's management are confident of the ability to manage and integrate a wellknown hospital to them and have been in discussions with ANMC management about the transaction and the business since 2015
- There are significant scale and procurement synergies that could be realized at the ANMC level improving margins and bringing them up to the level of CHG





Expansion Projects in Brownfield Hospitals in and around Greater Cairo

عامعة النهضة **،** يبنى سويف



Expanding Reach Beyond Greater Cairo

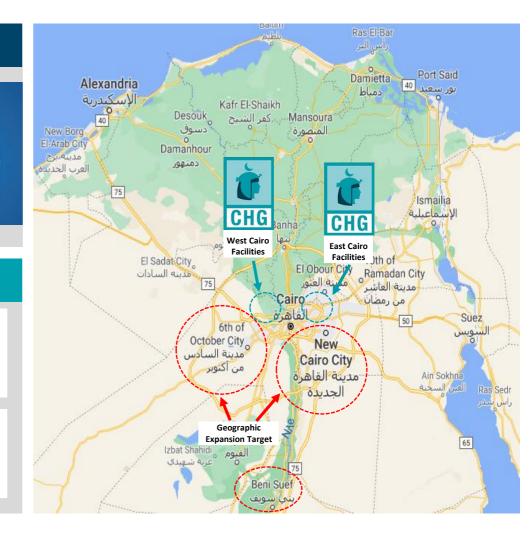
Due to recent regulatory changes in the requirements for hospital ownership for Al Nahda Medical University, CHG is negotiating a management agreement instead of the previously guided ownership model, where the Group would manage the 200-bed hospital in Bani Suef.

The agreement will witness CHG's foray into new hospital management business line which the Group is looking to grow.

Brownfield Pipeline

With a strategic aim to have further geographic presence in areas such as New Cairo and 6th of October new suburban cities, where most acquisition targets available are brownfields and the regions are underserved, the Group is currently assessing and shortlisting potential Brownfield acquisitions in these two regions

Potential target facilities aim to accommodate 300-400 beds, at prime locations with sufficient space, suitable for an iconic CHG flagship facility. The goal is to be able to match the facility with premium global standards that are yet to be introduced to the Egyptian Healthcare Services market

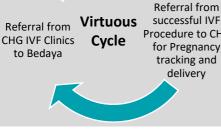




Strategic Acquisition of Operating Facilities: IVF Segment – Bedaya

CHG signed a Business Transfer Agreement (BTA) to transfer the assets and operations of Bedaya for Medical Services, Egypt's leading Assisted Reproductive Technology (ART) and fertility centre led by Dr. Ismail Aboul Foutouh, to a joint venture (JV) held for 60% by Cleopatra Hospitals Group and for the remaining 40% by Dr. Aboul Foutouh.









- The IVF market in Egypt, valued at USD 238.9 million, captures 16% share in the Middle East IVF market.
- The market is project to grow on account of a decline in the fertility rate among women coupled with Egypt Government's 2030 vision to increase women participation in workforce.
- According to the three forecasted scenario analysis, the forecasted market is expected to be in the range of USD 257.7 million to USD 442.4 million.





Yearly revenue: EGP 100 mn

EBITDA margin: 35%

Facility volume growth via expansion site and CHG satellite clinics

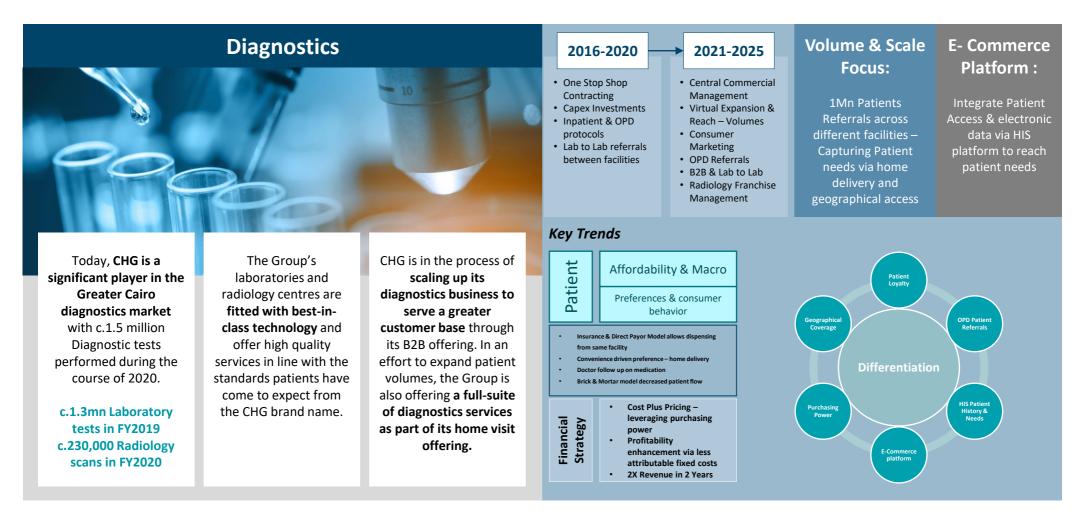
Revenue is expected to **double over 2** years



Expanding Services Offering: Diagnostics



In line with CHG's strategy to further diversify its revenue streams and service offering, the Group has been expanding its diagnostics and pharmacy capabilities, with both segments representing areas of future expansion for the Group.

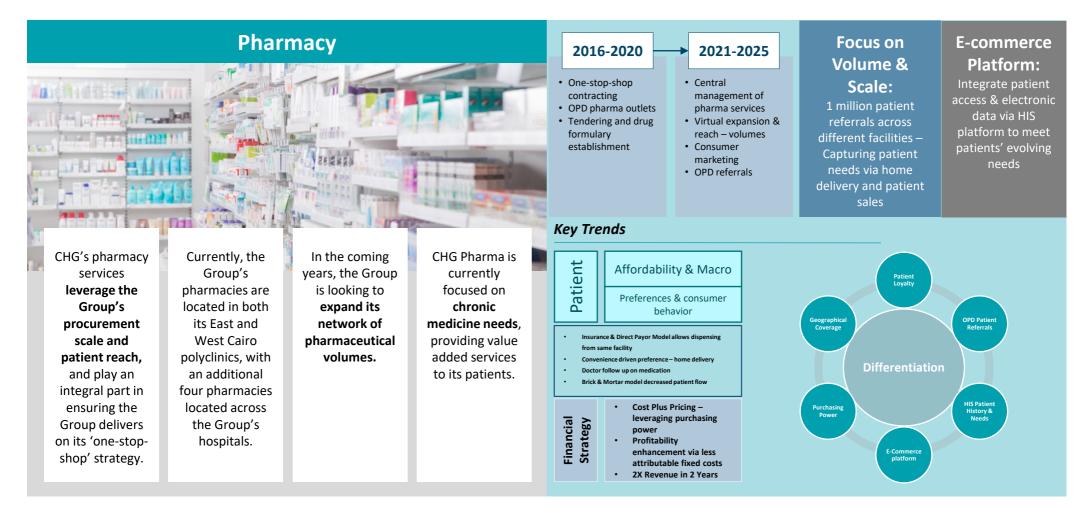




Expanding Services Offering: Pharmacy



In line with CHG's strategy to further diversify its revenue streams and service offering, the Group has been expanding its diagnostics and pharmacy capabilities, with both segments representing areas of future expansion for the Group.





Expanding Services Offering: Home Visits



In an effort to make healthcare accessible to as many Egyptians as possible, CHG has launched its home visits service. The service is a particularly important new addition to the Group's roster as it allows patients unwilling or unable to visit facilities in person to continue enjoying access to high quality healthcare in the midst of the COVID-19 crisis.

Home Visits

- The home visit initiative was launched to curb lower outpatient volumes and help patients unable or unwilling to visit healthcare facilities in person in light of the ongoing COVID-19 outbreak.
- "We Will Come to You" campaigns were launched to promote the initiative
- The services under the new offering include:
 - Home visit service (available 24/7)
 - 24/7 Radiology examinations by portable equipment (X-ray, Ultrasound, Echo, ECG)
 - At home physiotherapy mobile clinic
 - Laboratory samples collection at home with results delivery within 24 hours (within 2 hours for emergency cases)
 - Medical care for the elderly
 - 24/7 pharmacy delivery
- Home visit deals completed with following insurance companies: Met life, Axa, Bupa, Mednet, Med Right, Next Care, Globerned, as well as petroleum companies
- Exclusive deal with Palm Hills to act as its healthcare provider for all its compounds
- Additionally, the Group also performs **COVID-19 at home follow up protocols,** as less severe cases were typically self treated at home





Expanding Services Offering: Telehealth



In early 2020, CHG partnered with Elbalto, Egypt's first telemedicine mobile app, to offer patients consultation and followups through video calls.

CHG Telehealth – Video Call App

The new telemedicine services are accessible from the CHG App (available at both the iOS and Android stores).

The new service allows patients access to CHG's world-class roster of doctors and consultants without having to visit a facility in person.

This has **helped relieve pressure from the Group's outpatient facilities** during the outbreak of COVID-19 and has given patients unwilling or unable to visit medical facilities access to medical consultations from the comfort of their homes.

The launch of the Group's telemedicine services comes as part of CHG efforts to help the Egyptian government and people during the ongoing healthcare emergency. This was complemented by the launch of a series of webinars aimed at raising awareness on the virus and outlining the infection control and hygiene protocols developed by the Group.





Expanding Services Offering: Facility Management



The Group also formed a joint venture (JV) with Egypt's EFS Facilities Services (EFS) to create the Egyptian Healthcare Facilities Services (EHFS) company, the country's largest healthcare-dedicated facility management business.

The Egyptian Healthcare Facilities Services (EHFS) company

The Group also formed a joint venture (JV) with Egypt's EFS Facilities Services (EFS) to create the Egyptian Healthcare Facilities Services (EHFS) company, the country's largest healthcare-dedicated facility management business, with CHG retaining a 49% non-operating stake in the JV.

The new JV will also see the Group penetrate into a new, fast-growing segment of the healthcare industry with significant room for further growth in the future as it takes advantage of the recent growth experienced by the Egyptian healthcare industry with new hospitals and clinics constantly being launched. CHG has already started the process of outsourcing its non-core services including security, cleaning, and facilities maintenance, in turn driving significant improvements CHG's efficiency.

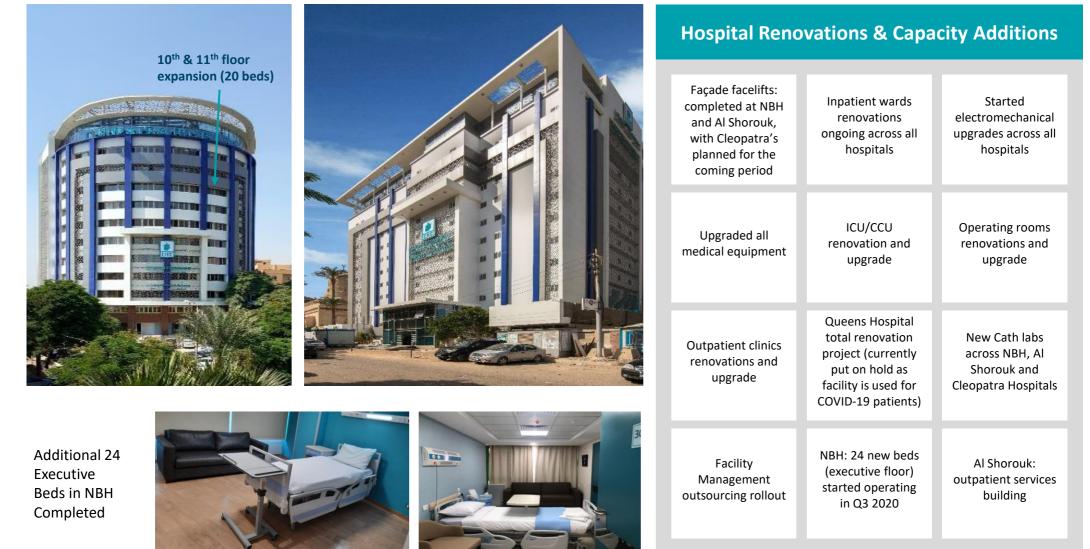
Egypt's EFS Facilities Services employs over 2,000 employees and manages over 10 million square meters of facilities for its clients. Currently, the company's client roster includes several of Egypt's leading real estate companies such as Palm Hills Developments, Emaar Properties, and Inertia.





Building Additional Capacities in Existing Facilities









Nile Badrawy Hospital

The Group has completed the renovations of Nile Badrawi Hospital's tenth and eleventh floors which now feature 24 modern and fully equipped patient suites.







Al Shorouk Hospital

The Group has successfully launched Al Sherouk Hospital's new outpatient clinics, that are located adjacently to the hospital's premises.







Cleopatra Hospital

The Group has completed the renovations of Cleopatra Hospital's outpatient clinics, meeting the Group's premium standards







Cairo Specialized Hospital

The Group has completed the renovations of Cairo Specialized Hospital's Emergency Room, setting a new standard of excellence.





Recent Business Updates

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New Business Models

Queens Hospital conversion to an Oncology CoE

Vision

CHG aims to create the first integrated private Oncology Center of Excellence (CoE) in East Cairo. The center will provide the full spectrum of oncology specializations and services including radiotherapy and PET CT in East Cairo, expanding the Group's service offering and elevating the quality of care and overall patient experience across the Group .

Rationale

Currently in Egypt, there is a **pronounced undersupply of private oncology services**, in East Cairo specifically radiotherapy services are only offered at government/military hospitals with the remaining suit of services such as Onco-surgeries and Chemotherapy offered in a fragmented manner across hospitals and private clinics. Through the establishment of the Cleopatra Cancer Center, CHG will have the first mover advantage to capture the growing undersupply and establish itself as the leading authority in the private oncology space. **The center would be the first state-of-the-art private "One-Stop-Shop" for the treatment of cancer patients in Egypt.**

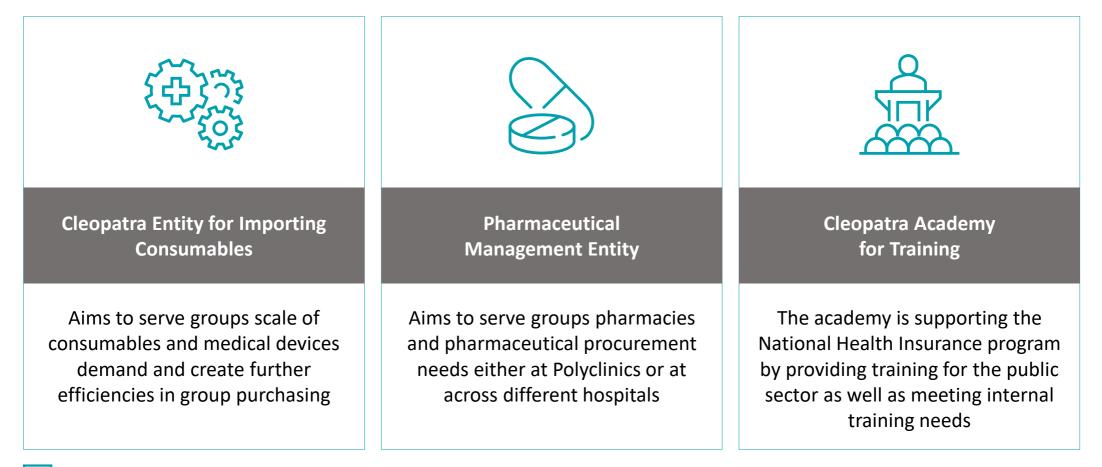


Concept / Look and Feel



Strategic Initiatives and Entities Created by CHG to Enhance Efficiencies in Operation

As part of the Group's strategy to leverage synergies and expand its service offerings, CHG is now in the process of creating business operation entities:





CHG Medical Council



During the third quarter of 2019, the Group officially launched its new Medical Council. The new body will be under the direct supervision and guidance of the Board's quality committee and will be composed of renowned specialized consultants from across the Group's hospitals.





COVID-19 Response Protocols (I/IV)



CHG response protocol was developed to ensure the health and safety of its patients and staff while guaranteeing the quality and effectiveness of its medical care despite the ongoing difficulties.

Health and Safety			Business Continuity		
From the very beginning, the Group's number one priority has been guaranteeing the safety and wellbeing of its staff, both medical and non-medical, and of its patients and their families. Across all eight of the Group's medical facilities and offices, health and safety protocols have been tightened, with additional measures including:		In parallel, the Group has enhanced its Hospital Incident Command System to CHG's ability to adapt to the evolving COVID-19 situation from an operational p As of today, measures include:			
Daily deep cleaning and sterilization of all medical and non-medical facilities.	Provision of necessary Personal Protective Equipment (PPE) for all staff and patients.	Strict internal hygiene and sanitization protocols for all medical staff, patients, and visitors.	The draw up of an emergency staffing plan to ensure the Group can meet round-the-clock staffing needs.	Back-office contingency planning to ensure business continuity.	
Infrared temperature screening at all group hospital entrances.	Switch to facial recognition and away from fingerprint identification across all CHG facilities.	New patient engagement and visitor management protocols to minimize the risk of exposure.	Engagement programme with the Group's consultants to address any needs or concerns that may arise.	Supply chain and inventory management protocols to ensure the availability of all necessary medical supplies and avoid disturbances to operations.	
New ER and outpatient clinic protocols to ensure prompt detection, isolation, and referral of all potential COVID-19-positive patients.			Transformation of El Katib and Queens Hos isolate potential positive and confirmed C facilities to continue	OVID-19 patients and allow the remaining	



COVID-19 Response Protocols (II/IV)



Back office & Operations		Medical Council Responsibilities			
gile	Ensuring the safety of	Training	Patient Pathway		
	our staff and patients	Disinfection & PPE	Space Optimization		
Key Pillars "To Adopt and _v Decision-Making Mentality	Cash preservation & cost efficiency	Potential COVID-19-Positive Patient Identification and Referral Protocol Lab Department Protocol: Radiology Department Protocol:			
Key Pillars Decision-M		A set of unified tests as per guidelines is done per patient for each patient according to ER Protocol	CT Scan done for every patient and reviewed by group of consultants before recommending next steps		
BCP	Revenue stabilization	Chest Department Protocol: Group of consultants across the group review and recommend next referral point/step across the group around the clock	ICU Department Protocol: ICU protocol to ensure right treatment and diagnostics		



COVID-19 Response Protocols (III/IV)



As demand for private COVID-19 treatment centres increased so did the number of suspected cases approaching CHG hospitals.

In response to this rise, CHG devised a clear strategy to treat and isolate suspected COVID-19-positive patients providing them with high-quality care.

The most significant step was the conversion of two of CHG's hospitals into COVID-19 isolation facilities, allowing the remaining facilities to continue offering the full suite of services and procedures regularly offered by the Group.

Medical Council									
STEP	1	STEP	2	STEP		3	STEF	P	4
STEPISTEPIPatients flowing into the ER's of our four core hospitals CHC, CSH, NBH, ASHPatients are triaged and suspected COVID-19 patients undergo a full assessment including lab tests, chest CT's, and a swab is taken and sent to MOH for PCR COVID-19 testing				If results are positive and patient is asymptomatic, they are provided with the appropriate guidelines in line with MOHP protocols. If the patient requires hospitalization, they areC C the the the the d		they CHG one c facilit trans	Once the MOHP is informed hey will either instructed HG to treat the patient at one of the Group's COVID-19 acilities or arrange for the ransfer of the patient to a ledicated government-run acility		
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	•		)+Ď	۵		*	_	Queens (East Hospit Referrals)	al
<u>b       d</u> c		H, NBH, ASH	<u>)                                    </u>			*	_	<b>El Katik</b> (West Hospit Referrals)	



### **COVID-19 Response Protocols** (IV/IV)

In light of the COVID-19 pandemic and in an effort to better serve its patients and aid the Ministry of Health and Population in its fight against the virus, Cleopatra Hospital Group has transformed both Queens Hospital (which was currently undergoing a full renovation) and El Katib into dedicated isolation hospital to treat COVID-19-positive patients. Given the recent resurgence in COVID-19 cases across the country, the two hospitals will continue to operate COVID-19-treatment units. In parallel, management is devising a plan to add new services to both facilities.

	Queens Hospital			El Katib Hospital	
COVID-19 CAPACITY	X-RAY	24/7	COVID-19 CAPACITY	X-RAY	24/7
	יידעונוטין קוונוטין				
<b>36 Beds</b> IP Room + ICUs 100% Occupancy	CT Scan and Lab	Equipped with Ambulances	<b>41 Beds</b> IP Room + ICUs 100% Occupancy	CT Scan and Lab	Equipped with Ambulances
The Group's Crisis Management Team has utilized the Group's resources to deliver an accelerated plan to complete a quick three- week renovation to start receiving patients	The hospital renovation was completed on the 25th of May and the first patient was admitted on the 28th of May	In parallel, the Group worked to launch its Clinisys operating system, which was rolled out in record time	At the time the decision was made, El Katib was operating at minimal occupancy so preparing the hospitals to receive patients took less than a week	patients came at very limit hospital was already well-ed	receive COVID-19-suspected ed CAPEX expenditure as the juipped and ideally positioned lation and treatment facility
Re	cord Time 3 Week Renovat	ion		Fully Trained Medical Tean	n Constantine to the second seco



# Digital Transformation and HIS/ERP Rollout Update



The Group sees digitalisation as a key driver of future growth. Over the last few years, CHG has embarked on a digital transformation strategy, which sees the Group looking to introduce the latest digital solutions available on the market to enhance all aspects of its day-to-day operations both on the medical and non-medical fronts.

HIS/Enterprise Resource Planning System (Clinisys)			Other Digitalis	ation Initiatives	
Core benefits seen from successful implementation of HIS:			In parallel, the Group has enhan	ced its digital capabilities through:	
Improvement of the healthcare services quality	Inventory Consumpt Manageme	tion	Daily financial and operating reports	The launch of the new CHG App (book appointments, follow up on diagnostic results, telemedicine, etc.)	CHG Call Centre – a new unified call center allowing for inbound and outbound calls to and from patients
Referral Tracking	Big Data Manageme		Real-time record of the results of clinical and administrative work	Enhanced data storage and security capabilities to ensure operations run effectively across the entire CHG network and patient data is stored securely	السكر بيعلي عليك ! هنجيلك أو فلاين سميته
Development and e implementation of clin control functio	ffective ical quality ons	linisys now operates in Cleopatra Hospital, Cairo Specialised Hospital, Queens Hospitals, Al Shorouk and Nile Badrawi Hospitals as well as the Group's East and West Cairo polyclinics		CHG Innovation Hub – focused on helping and funding healthcare- focused startups	Video call app Video call app



## Governance & Shareholder Information

### **Governance (I)**



The Group's Board of Directors provides the necessary oversight and combination of expertise to thoroughly oversee the Group's corporate governance framework, a cornerstone of the Group's long-term success and value creation.

Non-Executive Board Members	Executive Board Member	Independent Board Members	
Ahmed Badreldin Chairman		Nabil Kamhawy Former Head of Ernst & Young Egypt	∍d
Dr. Sherif El Kholy Director	Dr. Ahmed Ezzeldin Executive Member & Group CEO	Dr. Manal Hussein Abdel Razek Director Director	uty
Mohamed Roushdy Director		Tarek Kabil         Former         Minister of         Trade and         Industry	

#### **Board Committees**

Audit committee – recommends the financial statements to the Board, and matters such as internal and external audits, financial and non-financial risk Remuneration committee – determines and recommends to the Board matters regarding the framework for senior management remuneration Clinical quality and safety committee – monitors nonfinancial risks, including clinical performance, health and safety and facilities



### **Governance (II)**



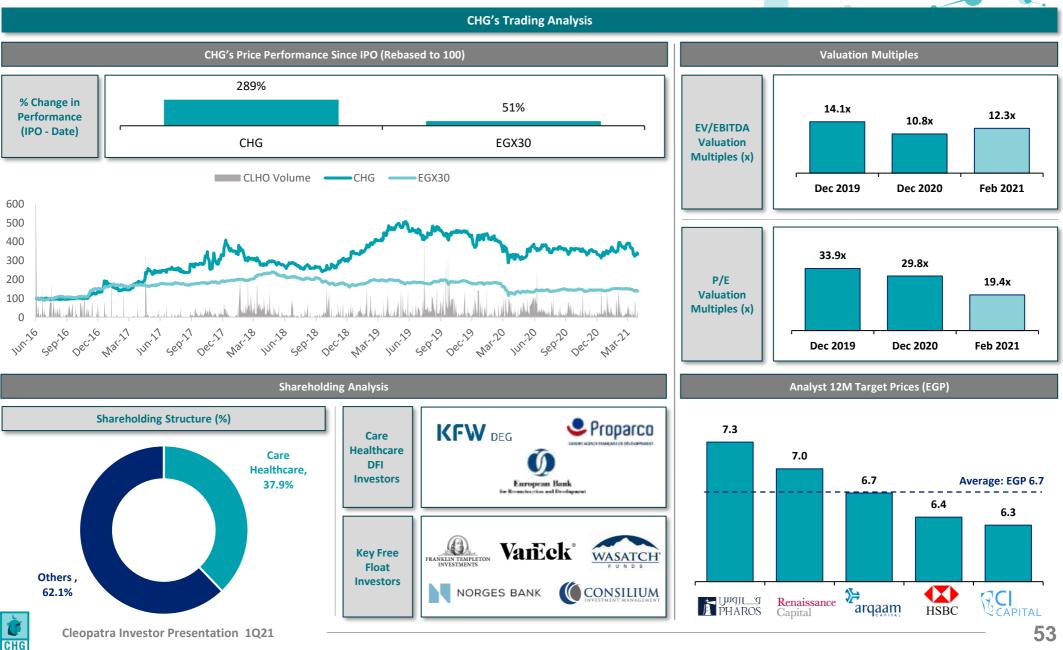
outcomes

#### **OPERATIONS**

#### ABC No Referral Fees **Medical Council** • CHG has a zero-tolerance approach to bribery and • CHG does not pay any referral fees or kickbacks to • CHG recently launched a group-wide medical council corruption with a clear anti-bribery and anti-corruption physicians and instead has recently developed a Doctor with multiple responsibilities – including (1) ensuring Sales team to revolutionize the sector in Egypt policy for all stakeholders to abide by that medical personnel are providing the best medical CHG follows all applicable local laws and more stringent The sales team focuses on improving the hospital care and outcomes for their patients (2) keeping CHG at international frameworks to ensure that there are no service to the physician and maintains close the forefront of medical research and technology across all relevant services facilitation or bribery payments made communication - improving loyalty and engagement **Audit Committee Remuneration Committee Quality & Medical Ethics Committee** • The Audit Committee oversees the Group's financial The remuneration committee has established a formal • The Quality and Medical Ethics Committee reviews the guality of care provided to the patient as well as controls with emphasis on: (1) integrity of internal and transparent process for fixing and reviewing the medical KPIs for the Group in line with international controls and financial reporting; (2) performance of the remuneration for the senior executives of the Company internal auditors and the function (3) review of audited The remuneration committee also reviews KPIs and standards • financials and external auditor performance (4) achievement of the Group's targets • The committee reports to the board compliance with compliance with legal and regulatory requirements the Group's Quality manuals and realization of medical

#### **BOARD COMMITTEES**

### **CLHO Trading Analysis**



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## Appendix

### Additional Information and Financial Disclosures

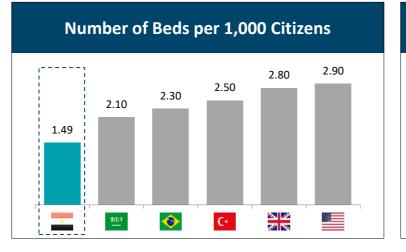


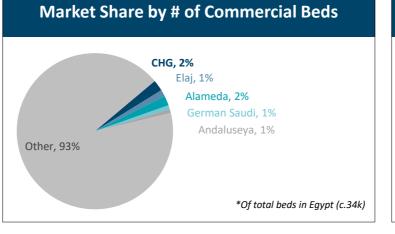
### A Unique Investment Story (I/III)



#### Market Leader in a Growing Market with Strong Long-term Prospects

- Highly fragmented market with a small number of institutionalized and strong brand players
- Significant under supply of beds relative to population and strength of payor network versus other emerging countries
- Strong and growing demand supported by demographic profile and growing insured population
- **Pricing expected to grow** inline with inflation but remains well below predevaluation levels in USD terms
- CHG is a leading integrated healthcare provider in Egypt with track record of acquiring and integrating key operating hospitals around the Greater Cairo area
- Since inception, CHG has been institutionalizing the healthcare industry in Egypt with a strong focus on medical service quality, value pricing and corporate governance





#### Egypt's Number of Beds Breakdown



#### Hospital Groups in Cairo – Bed Count



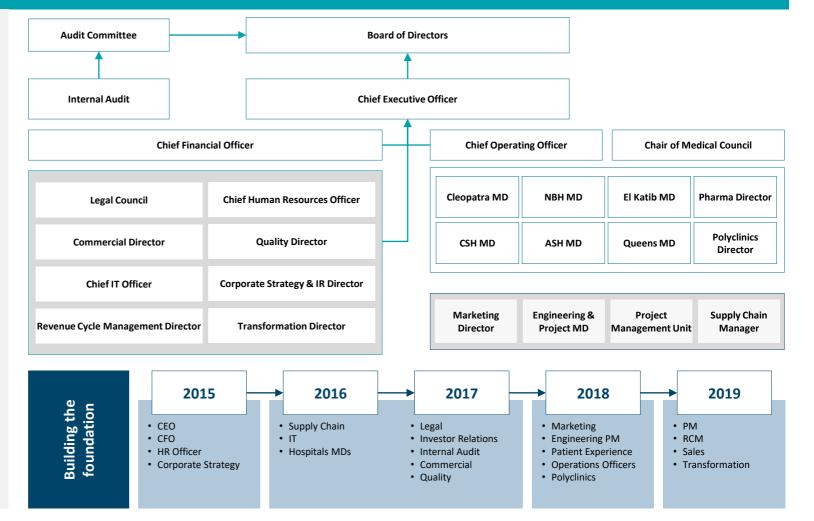
#### **T** Chg

### A Unique Investment Story (II/III)



#### Strong Management with Structured Organizational Chart to Oversee All Aspects of the Business

- CHG has created a central management team that focuses on setting the overall strategy of the Group
- Centralized back-office functions
- A key initiative which has seen CHG stand out from other private hospital groups in the country has been its institutionalized approach of healthcare management with new concepts to the healthcare market in Egypt
- CHG continues to attract the most qualified and experienced talent across both its medical and non-medical departments
- CHG's management brings a diverse skill set back by decades of experience in healthcare management
- The Group's corporate office has a clear organizational matrix which allows for a smooth and efficient decision-making process
- When necessary, CHG introduces new business functions to oversee various aspects of the business





### A Unique Investment Story (III/III)



#### Scale and Cost Synergies

- Group-wide tenders in pharmaceuticals and medical consumables that drive scale cost efficiencies and improve margins
- Scale volume benefits from providing payors with a **network of healthcare services solutions**
- The size of the Group's operations facilitates the recruitment of experienced and highly-skilled doctors, consultants, and nurses with a focus on quality of outcomes and patient safety
- Sales and commercial strategy with focus on referrals and surgeries
- CHG's Medical Council designs and implements medical policies in line with global best-practices
- Human resources and staff evaluation based on a series of **benchmark KPIs** to evaluate staff performance and intervene when necessary



- Comprehensive medical services allowing cross asset referrals
- Enhancing utilization across all revenue streams
- Case mix strategy
- COE development
- Capacity utilization



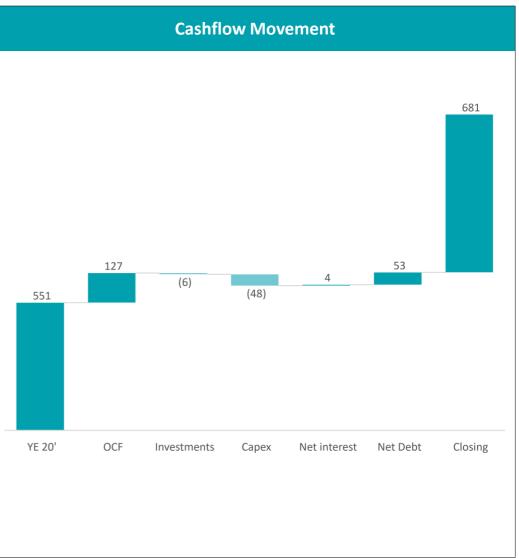
- Cost Synergies
- Inventory Management
- HIS system
- Group wide tenders
- Capex purchasing
- Medication tendering Pharma
- Material Planning



### **Balance Sheet and Leverage**



Balance Sheet Summary						
		EGP 000				
Balance Sheet Summary	Dec-20	Mar-21				
Cash	551	678				
Inventory	66	66				
Debtors & other Debt balance	514	528				
Current Assets	1,131	1,271				
Intangible Assets	428	427				
Non-Current Assets	1,225	1,404				
Total Assets	2,783	3,102				
Overdraft & Short-Term Loan	5	84				
Creditors & other Credit balance	500	512				
Current Liabilities	506	597				
Non-Current Liabilities	104	278				
Total Liabilities	609	874				
Net Assets	2,174	2,228				
Total Equity	2,174	2,228				
Leverages Ratios	Dec-20	Mar-21				
Total Liabilities / Total Assets	0.22 X	0.28 X				
Net bank debt / equity	-0.25	-0.27				



### **Cash Conversion Cycle**









### **Consolidated Income Statement**

All figures in EGP mn	1Q2021	1Q2020	% change
Revenues	633.2	502.9	26%
Cost of sales	(392.0)	(331.7)	18%
Gross profit	241.2	171.2	41%
Gross Profit Margin	38%	34%	4 pts
General & administrative expenses	(93.6)	(70.0)	34%
Cost of acquisition activities	(5.3)	0.0	-
Provisions	(9.6)	(3.9)	148%
Other income	6.2	1.8	254%
EBIT	138.9	99.1	40%
EBIT Margin	22%	20%	2 pts
Interest income	12.6	18.3	-31%
Interest expense	(6.0)	(0.6)	-
Profit before tax	145.5	116.7	25%
PBT Margin	23%	23%	-
Income tax	(37.4)	(29.7)	26%
Deferred tax	(0.1)	0.9	-
Net profit after tax	107.9	88.0	23%
Net Profit Margin	17%	17%	-
Distributed as follows:			
Shareholders of the company	101.3	82.1	23%
Minority rights	6.6	5.9	13%
Profit for the period	107.9	88.0	23%



### **Consolidated Balance Sheet**



All figures in EGP mn	31 December 2020	31 March 2021
Non-current assets		
Fixed assets	1,205.2	1,220.8
Intangible assets	427.6	427.1
Right of use	18.8	176.2
Payment under investment		5.7
Investment in associates	1.1	1.4
Total non-current assets	1,652.7	1,831.2
Current assets		
Inventory	66.3	65.9
Accounts receivables	418.8	441.0
Other receivables and debit balances	94.6	86.2
Due from related parties	0.4	0.4
Treasury bills	220.6	332.8
Cash	330.0	344.8
Total current assets	1,130.5	1,271.2
Total assets	2,783.3	3,102.3
Facility		
Equity	900.0	800.0
Share capital	800.0	800.0
Reserves	281.3	281.3
Retained earnings	984.9	1,041.3
Equity attributable to the parent company	2,066.2	2,122.7
Non-controlling interest	107.7	105.4
Total equity	2,173.9	2,228.0
Non-current liabilities		
Long-term investments creditors	17.9	21.4
Long-term debt – non-current portion		-
Non-current portion of lease liability	8.0	178.3
Deferred tax liability	77.9	78.0
Total non-current liabilities	103.8	277.8
Current liabilities		
Provisions	21.6	22.7
Creditors and other credit balances	442.0	447.6
Due to related parties	0.6	0.1
Current Portion of Borrowings	-	53.0
Current portion of lease liability	5.3	31.5
Long term incentive plan	- ·	1.1
Current income tax	36.1	40.6
Total current liabilities	505.5	596.6
Total liabilities	609.3	874.3
Total liabilities & shareholders' equity	2,783.3	3,102.3
	,	-,



### **Consolidated Cashflow Statement**

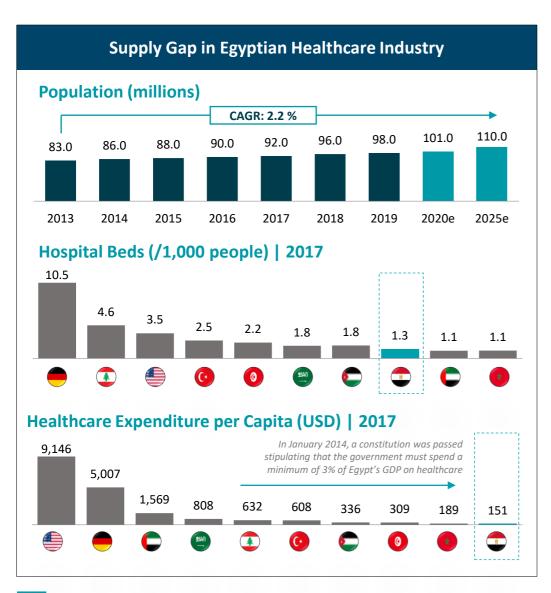


All figures in EGP mn	31 March 2020	31 March 2021
Cash flow from operating activities:		
Profit before tax	116.7	145.5
Adjustments for:		
Depreciation	20.7	27.0
Amortization of intangible assets	•	4.0
Allowance for impairment of current assets	13.0	27.3
Provision	0.6	1.0
Capital gain/loss	(0.2)	(0.0)
Credit/debit interest	(17.9)	(6.6)
Changes in current tax liability	(5.5)	(32.9)
Gain/loss in investments in subsidiaries	•	(0.3)
Employee incentive	•	1.1
Operating profits before changes in assets and liabilities	127.4	166.1
Changes in working capital:		
Changes in inventories	(15.7)	0.7
Change in trade receivables, debtors, and other debit balances	(38.0)	(30.9)
Changes in due from related parties	1.8	(0.5)
Change in trade and other payables	(49.9)	6.8
Paid from employee incentive plan	· ·	-
Change in lease		(14.7)
Net cash flows generated from operating activities	25.5	127.4
Cash flow from investment activities:		
Proceeds from sale of fixed assets	0.3	0.0
Payments for purchase of fixed assets	(7.5)	(19.8)
PUC purchased	(36.1)	(22.8)
Advanced payments for purchase of fixed assets	(44.0)	(5.7)
Payments for acquisition of a subsidiary, net cash acquired	-	-
Payments under investment	(57.2)	(5.7)
Credit interest collected	18.2	11.0
Treasury bills	(99.0)	-
Paid under subsidiaries capital increase	-	-
Paid for investment associates		-
Net cash flow from investment activities	(225.2)	(43.1)
Cash flow from financing activities:		
Proceeds from minority share in subsidiary capital increase		-
Dividends paid	-	(0.0)
Repayment of borrowings		-
Cash proceed from overdraft	•	95.5
Cash paid to overdraft	•	(42.5)
Interest paid	(0.4)	(7.1)
Net cash flow from financing activities	(0.4)	45.9
Net change in cash & cash equivalents during the period	(200.0)	130.3
Cash and cash equivalents at the beginning of the period	791.3	550.5
Cash and cash equivalent in acquired subsidiaries at beginning of period	-	-
Cash & cash equivalents at the end of the period	591.2	680.8
		000.0





### Underserved and Under-penetrated Market with Steady Demand Growth



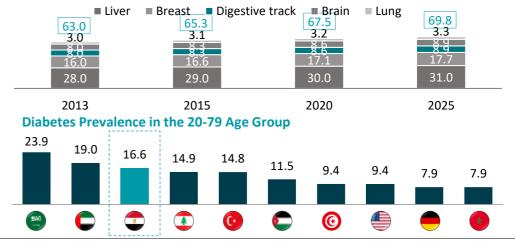
#### Healthcare Expenditure in Egypt

#### Public vs. Private Healthcare Expenditure | EGP bn



#### Lifestyle Disease Profile in Egypt

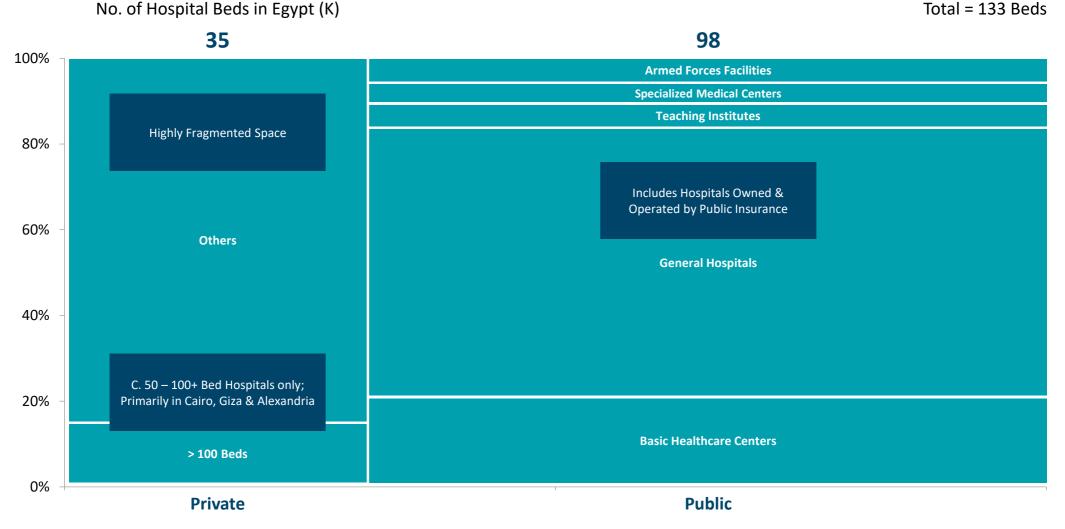
#### Cancer Prevalence in Egypt | 000 cases





### Egypt Total Hospital Beds (1/111)





Source: CAPMAS, Egypt Ministry of Health, consultants



### Egypt Total Hospital Beds (II/III)

	Basic Healthcare Centers	are General Hospitals Specialized Medical Teaching Institutes Armed Forces (Public Insurance) Centers / Medical Colleges Facilities		Private Hospitals (Non-Government)		
				KASR ALAINY	٢	
Level of Care	<ul> <li>First level of public healthcare</li> <li>Access to basic preventive &amp; diagnostic treatment for common diseases &amp; risk factors</li> </ul>	<ul> <li>Support basic healthcare centers as well as some advanced care / treatment centers</li> <li>Accessible to members of the insurance scheme</li> </ul>	<ul> <li>One of the highest level of public healthcare</li> <li>Provide advanced. Specialized care across key diseases &amp; intervention</li> </ul>	<ul> <li>Provide medical education, specialization across levels &amp; fields</li> <li>Facilitate training &amp; research</li> <li>High-end multi specialty facilities for the armed forces</li> <li>Available for access by paying premium rate</li> </ul>		<ul> <li>Provide diagnosis, treatment advice, specialist inpatient services, and advanced care</li> <li>Better equipped than public hospitals</li> </ul>
Number of Units	153	420	42	19	20	1,484
Number of Beds	C. 18,000	C. 50,000	C. 1,500	C. 5,000	5000+	> 34,000
Level of Technical Facilities	Basic	Low	Mid to High	Medium	Extremely High	Mid to High (Depending on Location)
Presence / Location	Across Egypt – national network	Located in all key cities / tows for each governorates	Concentrated in metro & tier 1 cities	Concentrated in metro & tier 1 cities		
Client Type	All	All Egyptians with HIO / COO cover	All – primarily referrals for specialized care	All	Armed forces (free) private by paying	Mid to higher income segment
Price	Negligible	Low	Low to Mid	Low	High	Mid to High

Source: CAPMAS, Egypt Ministry of Health, consultants

Focus of Next Slide



### Egypt Total Hospital Beds (III/III)

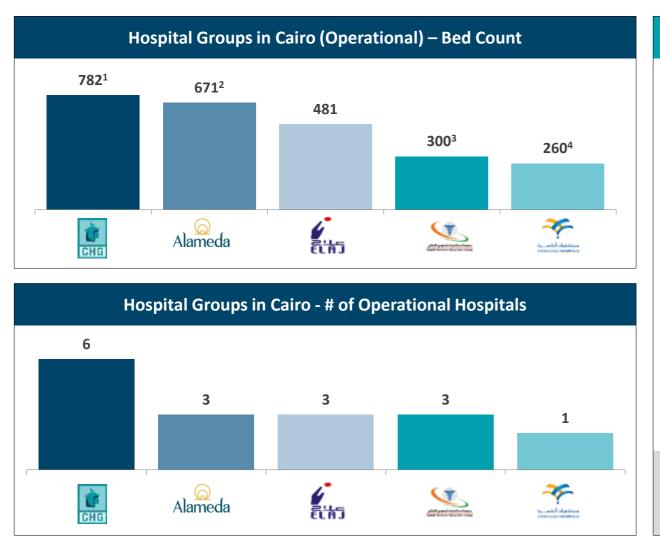


	Large Hospitals (100+ Beds)	Medium Hospitals (50 – 100 Beds)	Small Hospitals (<50 Beds)
Level of Care	<ul> <li>Large multi super-specialty care centers with ability to do high-complexity cases</li> <li>Coverage across care continuum (potentially emerging tertiary care across key specialties)</li> <li>Potentially include CoEs with focus on 1 – 2 key specialties</li> <li>Comprehensive OP, pharmacy, diagnostic (imaging &amp; pathology), trauma / ER, etc.</li> </ul>	<ul> <li>Multi-specialty centers focused on mid to basic complexity work - focused up to secondary level care</li> <li>Serve as a feeder network to large hospitals for more complex cases</li> <li>Basic OP, pharmacy, trauma / ER, etc.</li> </ul>	<ul> <li>Basic centers with beds (average size of 15 – 20 beds) with focus on triage &amp; observations</li> <li>Basic intervention work (e.g. suturing, bone-setting, and IV administration) conducted at such facilities</li> <li>Only basic support amenities available (e.g. portable X-ray, suction machine, and a basic / minor surgery suite)</li> </ul>
Number of Unites	40 – 50	50 – 100	C. 1,300
Number of Beds	C. 5,000	C. 2,000 – 3,000	> 27,000
Level of Technical Facilities	<b>Mid to High</b> (Depending on level of care)	<b>Mid – Low</b> (As required for basic secondary care)	Low
Presence / Location	All located in Cairo, Giza or Alexandria	Majority concentrated in metro & tier 1 cities	Across Egypt
Client Type	High to mid income individuals / families with high payor coverage	High to mid income individuals / families with low probability of any form of payor coverage	Mid to low income individuals & families with limited to no cover
Price	High	Mid to High	Mid to Low
Source: CAPMAS, Egypt Ministry of Health, consultants	Focus of Next Slide		

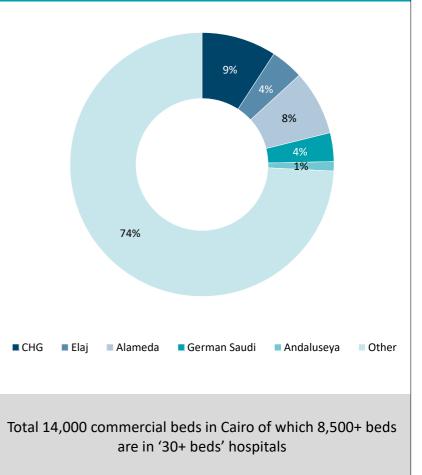


### **Greater Cairo Hospital Groups by Commercial Bed Count**





#### Market Share in Cairo by # of Commercial Beds

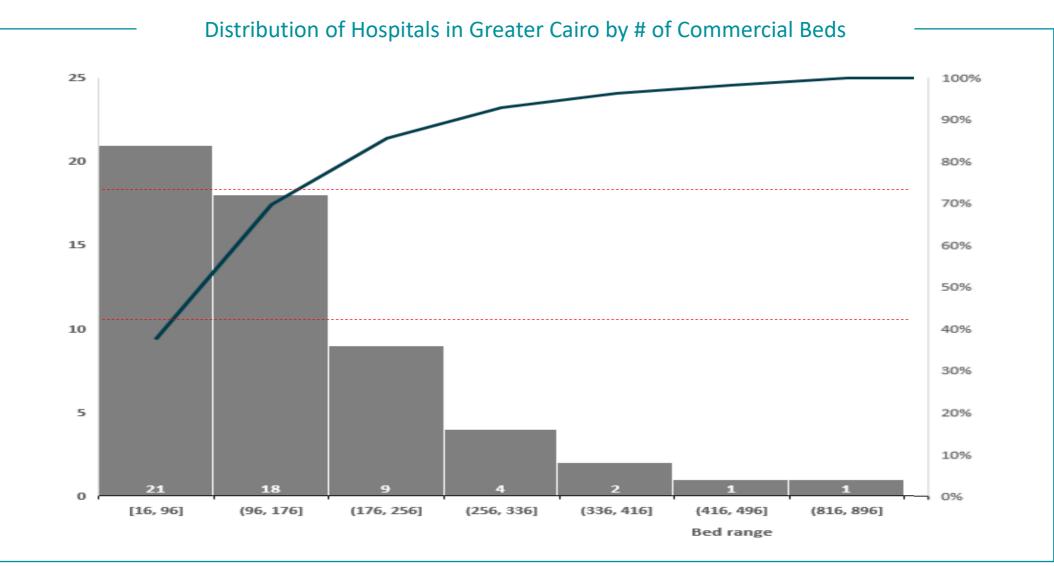


Building new capacity to reach c1,000 beds2. Building new capacity to reach c900 beds3. Building new capacity to reach c600 bedsSource: CAPMAS, Egypt Ministry of Health, consultants3. Building new capacity to reach c600 beds

4. Building new capacity to reach c500 beds

### **Greater Cairo Distribution of Hospitals by Commercial Beds**

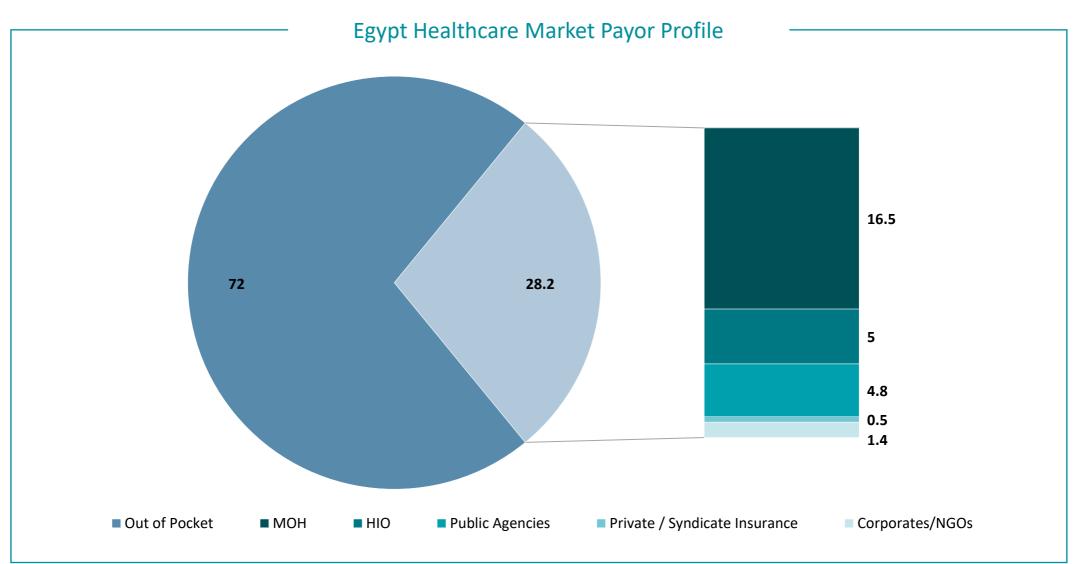




CHG

### Egypt Healthcare Market Payor Profile







### Thank you

#### **INVESTOR RELATIONS CONTACTS**

Telephone: +2 02 23103771 E-mail: <u>ir@cleopatrahospitals..com</u> <u>investors.cleopatrahospitals.com</u>



Cleopatra Investor Presentation 1Q21

#### SHAREHOLDER INFORMATION

EGX: CLHO.CA Listed: June 2016 Shares Outstanding: 1.6 billion

