



“Dr. Agarwal's Health Care Limited  
Q4 & FY'25 Earnings Conference Call”

May 29, 2025



**MANAGEMENT: DR. ADIL AGARWAL –CHIEF EXECUTIVE OFFICER –  
DR. AGARWAL’S HEALTH CARE LIMITED  
DR. ASHAR AGARWAL – CHIEF BUSINESS OFFICER –  
DR. AGARWAL’S HEALTH CARE LIMITED  
MR. RAHUL AGARWAL – CHIEF OPERATING OFFICER  
– DR. AGARWAL’S HEALTH CARE LIMITED  
MR. YASHWANTH VENKAT – CHIEF FINANCIAL  
OFFICER – DR. AGARWAL’S HEALTH CARE LIMITED  
MS. AASHNA DHARIA – HEAD INVESTOR RELATIONS –  
DR. AGARWAL’S HEALTH CARE LIMITED**

**Moderator:**

Ladies and gentlemen, good day and welcome to the Q4 and FY'25 Earning Conference Call hosted by Dr. Agarwal's Health Care Limited. As a reminder, all lines will be on listen-only mode and there will be an opportunity for you to ask questions at the end of today's presentation. Should you need assistance during the conference call, please signal an operator by pressing star and zero on your touch-tone phone. Please note that this conference is being recorded.

I now hand the conference over to Ms. Aashna Dharia, Head Investor Relations from Dr. Agarwal's Health Care. Thank you and over to you, ma'am.

**Aashna Dharia:**

Thank you, Rhea. A very good afternoon, ladies and gentlemen. Welcome to Dr. Agarwal's Healthcare's Q4 FY '25 and FY '25 earnings call. From the management side, we have Dr. Adil Agarwal, CEO, Mr. Ashar Agarwal, Chief Business Officer, Mr. Rahul Agarwal, Chief Operating Officer, and Mr. Yashwanth Venkat, CFO. We have released the financial results, press release, and investor presentation, all of which are available on our website and the exchanges as well. Before we continue, we want to remind everyone that this call is being recorded, and the transcript will be made available on our website afterwards.

Additionally, please be aware that today's discussion may include certain forward-looking statements which should be considered in light of the risks of business spaces. Please refer to the detailed statement on Page 2 of the investor presentation. It is now my pleasure to hand over the call to Dr. Adil, our Chief Executive Officer, who will share his opening remarks and insights. Dr. Adil, over to you.

**Adil Agarwal:**

Thank you, Aashna. Good afternoon to all of you and a warm welcome to our fourth quarter FY '25 and the annual FY '25 earnings call for Dr. Agarwal's Health Care Limited. Let me begin by providing you all an update of our full year financial '25 performance and our Q4 FY '25 performance.

We are pleased to report a strong financial performance for the full year FY '25. Our total income recorded a growth of 27.6% year-on-year to INR1,757 crores and revenue from operations grew by 28.4% year-on-year to INR1,711 crores. Our EBITDA increased by 23.6% to INR502 crores, translating into an EBITDA margin of 28.6% for the year. Our profit after tax stood at INR110 crores, reflecting a 16% year-on-year growth with a PAT margin of 6.3%.

Revenue growth has been largely driven by addition of new facilities as well as growth in our existing facilities. This growth came through an increase in premiumization of surgeries, increase in our surgical volumes, and improved surgical conversions due to our business development and marketing initiatives. Driven by strong operational execution and improvement in our material mix, our gross profit for FY '25 grew 27.2% to INR1,368 crores, resulting in a gross margin of 77.9%.

Manpower costs for the year totaled INR574 crores, up by 28.4% compared to last year. This was driven by strategic hiring and increase in our workforce due to addition of new facilities. The EBITDA margin for the year was slightly impacted by increase in other expenses,

predominantly on account of increase in our marketing costs relating to our brand ambassador and one-time expenses.

Now, moving on to the fourth quarter FY '25, we delivered a strong financial performance in the fourth quarter, with total income growing by 28.9% to INR476 crores and revenue from operations grew by 31.9% to INR460 crores. EBITDA for the fourth quarter stood at INR145 crores, reflecting a growth of 13.9%, translating into an EBITDA margin of 30.8% for the quarter. PAT came in at INR43 crores, up 3% year-on-year, reflecting a PAT margin of 8.9% for the fourth quarter.

Our gross margins for the quarter were flat at 78.3% despite shift towards high-end surgeries. Our manpower costs for the quarter were INR51 crores, 33.6% increase over the fourth quarter of the previous year. This was driven again by strategic hiring and increase in our workforce due to addition of a large number of facilities in the fourth quarter.

The decline in our EBITDA margins was primarily driven by increase in certain expenses such as our IPO expenses, marketing expenses related to our brand ambassador, and a decline in other income to the tune of INR8.4 crores.

Now, moving on to our footprint, we have built a network of over 236 facilities which includes 28 hubs and 208 spokes across India and Africa, serving approximately 24.3 lakh patients and performing over 2.8 lakh surgeries during the 12 months ended March 2025. In India, we operate through a network of 218 facilities spread across 14 states and four union territories covering 129 cities. Our presence is highly diversified with 32% of our facilities located in Tier 1 cities, 60% in other cities, and 8% of our centers are located internationally in the continent of Africa.

Now, during FY 2025, we added 59 facilities in this last 12 months, which comprised of 32 primary facilities, 25 secondary facilities, and 2 large tertiary facilities. In the fourth quarter of FY '25 alone, we added 17 new facilities comprising of eight primary and nine secondary centers. Additionally, as on date, we have successfully already launched 10 new green facilities to date, comprising four primary, five secondary, and one tertiary center. We would also like to highlight a key milestone in our growth journey in northern India.

We have now forayed into Delhi NCR, the heart of the country, with the launch of our first greenfield facility there. We have onboarded Dr. Jeewan Titiyal, who is one of the most renowned ophthalmologists in the country and was previously the head of the renowned AIIMS Institute. He's also a Padma Shri awardee and will be driving growth in our Delhi facility.

Looking ahead, in FY '26, we are targeting a launch of 55 to 60 facilities, with 25 to 30 of them being surgical facilities, and the balance will be clinics. 70% of this expansion will be in our core geographies of Tamil Nadu, Andhra Pradesh, Telangana, Karnataka, and Maharashtra.

Now, moving on to clinical excellence, there has been a significant focus around the firm to ensure we strive for clinical excellence while we continue to scale. This is reflected in the

increase in contribution coming in from high-end cataract surgeries, which has moved up from 19.2% in FY '24 to 22.5% in FY '25. Further, we seek to use specialized equipment and techniques to strengthen our diagnosis capabilities, as well as our surgical outcomes.

We have already installed femto-cataract machines, which is the laser cataract machine in cities like Mumbai and Chennai, and have recently added these high-end machines to Bangalore and Hyderabad as well. We have also seen an uptick in the refractive surgery segment, where we witnessed a 44% overall growth in the number of surgeries, and we have done 15,989 refractive surgeries in the year FY '25.

As part of our refractive services expansion, we have also added new examiner laser machines in Chennai, Mumbai, and Bangalore. We also plan to add SMILE technology in a few of our key centers, which will further enhance our refractive capabilities. Now, I would like to hand it over to our group CFO, Mr. Yashwanth Venkat, who will take a deep dive into our financial performance.

**Yashwanth Venkat:**

Thank you, Dr. Adil. I'll start by providing an overview of the operational metrics. In Q4 FY '25, we performed 68,724 surgeries, resulting in a 17.4% year-on-year growth. Cataract surgeries have been the major contributor, accounting for approximately 71%, followed by refractive surgeries at around 6.5%.

In Q4 FY '25, volume of cataract and refractive surgeries have grown by approximately 13% year-on-year, while other surgeries have experienced a higher growth rate of 36.3%. The payer mix was distributed at 70% via cash, 25% through insurance and TPA, and 5% from government schemes.

Now, in FY '25, the surgical revenues form the main pillar of our service offering, contributing to over 65% to group revenue. Diagnosis, consultations, and non-surgical treatments account for 14%, while the sale of optical products and pharmacy contributes 21% to total revenues.

In FY '25, we performed 282,326 surgeries, reflecting a 28% YoY growth. Again, here, as reiterated earlier, cataract surgeries have been the major contributor, accounting for approximately 73%, followed by refractive surgeries at around 6%. In FY '25, volume of cataract and refractive surgeries grew by approximately about 27%, while other surgeries experienced a higher growth rate of 42%. The payer mix for FY '25 has remained consistent, with around 64% of payments coming through cash, 26% through insurance and TPA, and 10% from government schemes.

Moving on to a few points on financial performance, the revenue from operations at India for Q4 FY '25 stood at INR413 crores, reflecting a growth of 34.2% year-on-year. Revenue from mature facilities rose by about 28.9%, totaling INR332 crores in Q4 FY '25. Just a small recap, mature facilities are those facilities which have been owned or operated by the company for more than 3 years. The gross profit margin remained stable in Q4 FY '25, despite movement to higher-end surgeries.

There has been greater focus on India, with its contribution to the overall group revenue increasing from 87.2% in FY '24 to 89.9% in FY '25. Revenue from operations in India for FY '25 totaled INR1538 crores, marking a growth of 32.3% year-on-year. As of March 2025, we operate about 103 mature facilities across India and Africa. Revenue from mature facilities increased by 18.5%, reaching a total of INR1206 crores in FY '25.

Our CFOs to EBITDA were at healthy levels at 77%, which excludes IPO reimbursements, which we have subsequently received in this quarter. I also want to touch base on key one-off costs which occurred in FY '25. There was a one-time spend for banker fees and legal fees towards a strategic acquisition, totaling to about INR6.2 crores.

IPO costs to the tune of about INR1.5 crores. Brand ambassador and rated production costs to the tune of approximately INR5.5 crores. Increase in ESOP expenses was to the tune of about INR2 crores for the year, totaling about close to INR8 crores for the year.

Now, just to summarize, we are pleased to report strong financial results for FY '25, driven by solid year-on-year growth across key metrics. Looking ahead, we remain confident in our growth trajectory for FY '26, supported by robust demand fundamentals, continued network expansion, and operational efficiencies. We expect to clock 20% plus revenue growth in FY '26, driven by strengthening presence in existing micro-markets, foray into new micro-markets, and increased adoption of high-end surgeries.

We expect our EBITDA margin to remain stable as ongoing greenfield investments continue to impact profitability. We also expect the profit after tax numbers to rise by 35% plus.

**Adil Agarwal:**

Thank you, everyone. We will open it up to questions now.

**Moderator:**

Thank you very much. We will now begin the question and answers session. First question is from the line of Tushar Manudhane from Motilal Oswal Financial Services. Please go ahead.

**Tushar Manudhane:**

Thanks for the opportunity. Sir, just comparing FY '25 and '24's payor mix, so to say, the cash component seems to have increased sort of meaningfully compared to insurance and TPA. Any broad color you would like to share on this aspect?

**Adil Agarwal:**

Yes. So I'm just going to invite our Chief Operating Officer, Rahul Agarwal, to give you a break up of the payables.

**Rahul Agarwal:**

Okay. Hi, this is Rahul. Well, from our overall perspective, there's not been a significant change. The year before, we were around 27%, this year at 26% from our overall perspective. If you look at our private insurances and the government, first let me go to the government. Government last year was 11.7% which this year has come down to 10%.

On the other insurance and TPA, overall from 27.3%, it's down to 26%. So broad, at the overall level, we are continuing. Our private insurances continue to be very strong. That's where a large part of our growth is to happen. On the government side, we continue to remain slightly cautious. Some of the payments get delayed. We want to be cautious on those sides in

some of the states where some payments get delayed. Otherwise, broadly across India, our insurances remain consistent.

**Tushar Manudhane:** In fact, cash component has would have shown maximum growth almost from as a percentage of sales as well from 60.7 to 63.8 or even in absolute terms from INR808 crore to INR1092 crore. So is it more to do with getting into the Tier two cities? That is what is driving the cash component. Is that the appropriate way to think about this?

**Rahul Agarwal:** No, not really. I think the way to look at this is, in some cases, our products don't get insurance. So the product business, when that goes, that is not under insurance. Consultancy fees is not under insurance. Some of these aspects, when they go, you will not see insurances. Some part of the investigation also does not come under insurance. It's actually the surgical business. Also, yes, refractive allowance is not under insurance.

So these parts, when they're growing, some of the new technologies, like when we talk about femto cataracts, these are growing very fast. That is also not under insurance. So you'll see a lot of these portions of the business growing very fast. And that's a percentage of the business which doesn't get covered at that either. Otherwise, as I mentioned earlier, the government business, where we are slightly cautious, that also contributes to the private business growing faster.

**Tushar Manudhane:** Understood. So secondly, there's a number of facilities which sort of you tend to add in FY '26 on an organic basis and subsequent amount of investment for that, if you could share.

**Adil Agarwal:** So in FY '25, we added 59 new centers. Our plan is to add about 55 new centers in FY '26. Now, in FY '25, we spent a total capex of about 220 crores towards new greenfields and eye clinics as well, right. The plan is to spend approximately INR310 crores, and most of this will be around setting up new centers across the country.

**Tushar Manudhane:** So INR310 crores?

**Adil Agarwal:** And 70% of these new centers will come up in the southern states of India, along with Maharashtra.

**Yashwanth Venkat:** The capex number mentioned by Dr. Adil, I'll just give you a slightly detailed breakup about INR180 crores to INR200 crores will be towards new greenfield capex. Renovation and relocation will be about close to INR50 crores. Then we are also investing in new technology and growth capex for the existing that will be to the tune of about INR40 crores to INR45 crores. Then maintenance capex for existing facilities, which were close to about INR11 crores last year, that number will move to close to about INR16 crores this year. So, a broad breakup of about INR310 crores.

**Tushar Manudhane:** Understood. Thanks. And just one last, if I may. So this brand ambassador related cost, how much of that came in the fourth quarter of FY '25? And subsequently in FY '26, shall this be considered as the one-off for FY '25 and then the amount is going to be relatively lesser in FY '26 or this is something which will sort of have a recurring cost going forward?

- Yashwanth Venkat:** Okay, I'll just break this cost up into two parts, Tushar. One is for the brand ambassador. Second is for the production cost for the two ads. The brand ambassador cost is close to about INR8 crores, plus GST, plus the production cost will be to the tune of about INR5.5 crores. This brand ambassador cost is for a period of close to about 2 years. A portion of that has been taken in FY '25, about 50% has already been taken in FY '25. We will not have any recurring production cost. So you can consider this production cost as a one-time hit to the P&L, Tushar.
- Tushar Manudhane:** And out of that, how much was for fourth quarter in specific?
- Yashwanth Venkat:** Fourth quarter towards the brand ambassador, it was close to about INR1.2 crores. I'll come back to you on the exact production cost.
- Tushar Manudhane:** All right, thank you.
- Adil Agarwal:** Thank you.
- Moderator:** Thank you. Next question is from the line of Binay Singh from Morgan Stanley. Please go ahead.
- Adil Agarwal:** Hi, Binay.
- Binay Singh:** Hi, team. Congrats on a good set of numbers. Just a follow-up from the earlier question. Could you also give us what is the capex that your subsidiary is doing between this number of capex that you gave? How much is at the subsidiary level, the Dr. Agarwal Eye Hospital?
- Yashwanth Venkat:** So basically, this capex, whatever we have mentioned, Binay, just includes the newer facilities which will be taking it up for the subsidiary. This excludes the capex requirements for the new flagship facility. Out of this INR310 crores, nearly about close to INR60 crores will be towards the subsidiary AEHL. On top of this, for the new flagship facility, we'll be spending around close to about INR70 crores to INR80 crores.
- Binay Singh:** Okay. So in a way, at the subsidiary level, the capex is INR60 crores plus INR70 crores, INR130 crores at the subsidiary level. Is that right, understanding?
- Yashwanth Venkat:** Out of the INR310, INR60 crores will be for growth capex, plus newer greenfields. The additional INR70 crores will be over and above this INR310 crores, which will be spending for the flagship facility.
- Binay Singh:** Okay. Okay. So at the subsidiary level, in their books, the capex is INR70 crores at the subsidiary level.
- Yashwanth Venkat:** Yes. Yes.
- Binay Singh:** And then secondly, could you also give us a breakdown on minority interest? We've seen a quite sharp jump. And also linked to that, the Thind financials, because we had talked about March quarter being very big for Thind, how? Because it seems like it was exceptionally large for them.

- Adil Agarwal:** Yes. So from a PAT perspective, approximately 76% of the earnings is attributable to the owners, and the remaining 24% is towards the minorities. That's predominantly because the Thind facility that we acquired last year, it's a 51:49 JV, and 49% of that contributes to about INR10.96 crores of PAT. So that is significantly driven the minority earnings. So that's why you're seeing a bit of that skew, which is 76 24.
- Binay Singh:** So Thind had a INR10.9 crore of PAT this quarter, March quarter.
- Adil Agarwal:** Correct. No, we're talking about the whole year, FY .25.
- Binay Singh:** Okay. So INR10.9 crore for the whole year for Thind.
- Adil Agarwal:** Yes.
- Binay Singh:** Okay. And lastly, just on slide 19, where we've given revenue per mature facility, if you just look at the annual trend of that number, it was growing around 15% YoY. Last year, the revenue per mature facility has grown at around 7% YoY. So earlier, it was 22, 15, 7, so if any thoughts on how to look at this number, because we've seen sort of 15 coming down to 7.
- Adil Agarwal:** Are you talking about the mature facilities growth?
- Binay Singh:** Yes, the revenue per mature facility, because slide 19, the number we've given, which was about INR10.9 crores.
- Adil Agarwal:** About INR11.7 crores, that's what you're referring to, right?
- Binay Singh:** Yes, yes. So this number last year per facility grew by around 7%, you know, from 10.9 to 11.7. Earlier, it was growing almost 15%, 16%. So is there any change we've seen or any thoughts on that number coming down from it?
- Adil Agarwal:** Yes, I got it. I'll just request Yashwanth to answer this.
- Yashwanth Venkat:** Two points, Binay. One is on Thind, whatever INR10.9 crore number, which you mentioned, it is a 49% number. The overall PAT generated from Thind is close to about INR21.5 crores to INR22 crores, one. Second on the point on average revenue per mature facility, we faced some headwinds in a few of our facilities in Africa.
- So, if we have to break down the average revenue per mature facility, at India level, it is close to about 15%. But in Africa, it was flattish. And in fact, a few of the facilities had slight de-growth as well due to currency impact. So that is why the average revenue per mature facility is looking at close to about 8%.
- Binay Singh:** Oh, that's very good. So that's a very good number then at the India level. Sorry, just on minority interest, could you just give me a breakdown like the INR100 crores minority interest, sorry, INR10 crore minority interest that you reported for the quarter? What is the breakdown between Thind, Aditya Jyot and any other just on that number? Just last one. Thanks.



- Yashwanth Venkat:** Yes, I'll come back to you on that. Just one more point on the mature facility, average revenue per mature facility part, Binay. Point to note here is a few of the facilities which we started in FY '21-'22 were primary care facilities. And those facilities also, as you know, the primary care facilities ramp up cannot be compared to the surgical facilities. So those facilities have also been added to the mature facility bucket. So that is also one more reason for the slight dip in the average revenue per mature facility.
- Probably going forward, we'll publish it as average revenue per mature surgical facility, average revenue per mature facility in India. That would be the right way to look at things, Binay. Your question on the breakup, on Q4, the PAT from Thind was to the tune of INR5.28 crores, which is the minority number. On Aditya Jyot I'll just -- I'll come back to you, Binay.
- Binay Singh:** Great, great. Thanks, team. Thanks.
- Moderator:** Thank you. Next question is from the line of Alankar Garude from Kotak Institutional Equities. Please go ahead.
- Alankar Garude:** Hi, everyone. Hi, sir. So firstly, can you broadly divide the 55 centre additions for FY '26 across primary, secondary and tertiary?
- Adil Agarwal:** Sure.
- Yashwanth Venkat:** Hi, Alankar ji. Good afternoon. Out of 55 facilities, about 30 would be surgical facilities. In this 30 surgical facilities, 27 would be secondary facilities. We are looking at opening three tertiary care facilities. The rest 25 would be primary facilities, Alankar.
- Alankar Garude:** Understood, sir. Thank you. So the other one was, if I look at CFO to EBITDA, you're given that in the PPT as well. If you look at the number for FY '24, it's 85% and it's 72% in FY '25. You spoke about the IPO reimbursements. So even if you adjust for that, that number is down to 77% in FY '25 versus 85% in FY '24.
- So first is, what has driven the higher working capital in FY '25? And maybe secondly, are there any other factors which you would like to highlight which have impacted the operating cash flow?
- Yashwanth Venkat:** Sure, Alankar. This year, with us opening more primary care facilities and also opening facilities in Tier 2 and Tier 3 markets, the inventory levels also have gone up slightly. So, if you discount for that, this 77% would have been actually at close to about 80%. So 3% impact we had because of increase in inventory levels, one.
- Second is, in terms of receivables, again receivables also had an impact of close to about 2%. And then in terms of payables, especially the last two quarters, we had continuously increased in paying out our key vendors. So there was an impact of close to about 1%. So if you adjust for all these three points, the number would have stood at close to about 83%, Alankar. In terms of any other challenge as far as cash flow from operations, we do not foresee any other kind of challenge as far as the cash flow from operations go, Alankar.

- Alankar Garude:** Understood. That's helpful. So basically, the number to look at going forward is more in that 80%-85% range. Anyway, the 77% was a bit of, I mean, really impacted by some of the factors you mentioned.
- Yashwanth Venkat:** Yes, 80% would be quite a comfortable number because, again, there will be significant growth as far as the newer facilities are also getting opened in some of the smaller markets. So definitely 80% will be the right number, Alankar.
- Alankar Garude:** Perfect. And a couple of bookkeeping ones. One is, what was the rental payout, cash payout in FY '25? And secondly, what was the share of minority in the console EBITDA? You spoke about PAT. But if you could help on EBITDA as well, it would be helpful.
- Adil Agarwal:** Can you just repeat your first question, Alankar? What was the first question?
- Alankar Garude:** So the first one was on the rental payouts in FY '25.
- Adil Agarwal:** Total rent, total, total what we paid out for rent, is it?
- Yashwanth Venkat:** It is to the tune of INR110 crores, Alankar, as far as the rental payouts go. On minority adjustment on EBITDA, just give us a minute. We will give you the numbers.
- Adil Agarwal:** Yes, Alankar, we'll come back to you on that data for the minority interest upon EBITDA.
- Alankar Garude:** Sure, sure, sir. Great. That's it from my side. Thank you.
- Adil Agarwal:** Thank you, Alankar.
- Moderator:** Thank you. Next question is from the line of Gautam Rajesh from Everflow Partners. Please go ahead.
- Adil Agarwal:** Hi, Gautam.
- Gautam Rajesh:** Hi, sir. Good evening. Thank you for the opportunity. My first question was, what sort of acquisition multiples have we paid historically for acquisitions that we have done in terms of EV EBITDA? And do these continue to be operated in the name of the doctor or the name of Dr. Agarwal? And does the original doctor stay on board or transition out?
- Adil Agarwal:** So our acquisition multiples from an EV EBITDA perspective were anywhere between 8 to 10x. Other than a couple of outliers, where it's either gone above that or less than that, the typical range has been between 8 to 10 times EBITDA.
- Now, typically, what we do in many of these acquisitions is, firstly, what is important is the partner continues to stay on in the business, because the business revolves around the partner. So the doctor partner whom we acquire continues to stay on in the business. In terms of branding, we do something which we call a joint branding. So what we do is, if the doctor has a particular name, like, suppose we have a centre called Soham Eyecare. It is called Soham Eyecare, jointly with Dr. Agarwal Eye Hospital. That's how we do the branding.

Or in another scenario, what we do is, we call the hospital Dr. Agarwal Eye Hospital, and we call out the doctor partner's names. So there are two typical models that we bring out. But over a period of time, what we aspire to do is, we try to convert all the branding into the Dr. Agarwal Eye Hospital brand. And that's eventually something which we tell the partners, over a period of 4 to 5 years, we will convert all your hospitals into Dr. Agarwal Eye Hospital brands.

**Gautam Rajesh:** Understood. My next question was, what portion of the revenue comes from the laser operation, let's say, optical, like corrective surgeries?

**Adil Agarwal:** You're talking about what is the revenue mix between services and products?

**Gautam Rajesh:** Yes, yes. Yes, for laser operations, like, optical correction.

**Adil Agarwal:** So overall, from a distinct, surgeries contribute about 65.3% of revenues. The sales of products and services, which includes optical products and pharmacy products contribute about 20.8%. And about another 14% comes from diagnosis and consultations.

**Yashwanth Venkat:** He had a question on refractive. Lasik, I think, was your question, Gautam, if I'm not wrong, on the refractive contribution is close to about 5.7%.

**Gautam Rajesh:** 5.7% for the year, right?

**Yashwanth Venkat:** Yes, yes.

**Gautam Rajesh:** Yes, and how are some of the older centers doing in terms of, as you mentioned, Africa is fairly flat to negative. But what about the older centers, like older mature centers in terms of...

**Adil Agarwal:** I'll request Mr. Rahul to speak on the older mature centers.

**Rahul Agarwal:** So historically, if you see our older centers have been growing at around 15%-16%. Even for this year, we've grown by almost 14% from a SSSG perspective, which is a like-to-like centers. We've grown by around 14%. It's been slightly lower, but a broad range of 15% is what we try and look at.

**Gautam Rajesh:** Understood. And so I had missed the earlier question on what was your rental payment for FY '25?

**Yashwanth Venkat:** Close to about INR110 crores. This doesn't include any short-term rents, Gautam.

**Gautam Rajesh:** Okay, okay.

**Yashwanth Venkat:** So, all of that is not included. This INR110 crores is the pure pay rent which we are paying across facilities.

**Gautam Rajesh:** Okay, this was how much last year, sir?

**Yashwanth Venkat:** One second. Last year, this number was around INR92.5 crores.

**Gautam Rajesh:** INR92.5 crores. Thank you, sir. All the best.

**Moderator:** Thank you. Next question is from the line of Dishant Jain from Quasar Capital. Please go ahead.

**Dishant Jain:** Yes, thank you for the opportunity, sir. And congratulations on the good numbers. A couple of questions. First, could you tell us what will be the revenue potential of that Cathedral Campus facility that we're going to have?

**Adil Agarwal:** Which? You're talking about the subsidiary?

**Dishant Jain:** Yes, in the subsidiary, correct.

**Adil Agarwal:** How much is the?

**Dishant Jain:** Revenue potential.

**Adil Agarwal:** Revenue potential. Okay, so this year, we have done revenue of close to INR120 crores. We expect that center to grow at about 35% year-on-year once the fully constructed building is up and ready.

**Dishant Jain:** So that building is already on the board?

**Adil Agarwal:** We're talking about that particular facility when it's up and running. We should expect that center to do approximately 30% year-on-year once the center is up and running.

**Dishant Jain:** 30% up and running. Okay. Okay. Sorry, sir, I'm not able to understand. Can you repeat again?

**Adil Agarwal:** So approximately 30%, you'll see an uptick in revenue once the new facility is up and running.

**Dishant Jain:** Oh, okay. And, sir, there is a INR18.5 crores cost that we have paid for some business in the subsidiary company for FY '25.

**Adil Agarwal:** Can you repeat that?

**Dishant Jain:** Hello, am I audible?

**Adil Agarwal:** Yes, yes.

**Dishant Jain:** Yes, so I was asking that we have paid around INR18.5 crores for some business acquisition in the subsidiary company

**Adil Agarwal:** Ah, okay. Okay, got it.

**Yashwanth Venkat:** Wait, let me explain. In the subsidiary, actually, we acquired a premium practice in Chennai by name, the Eydox Eye Hospital. We had paid INR18 crores to the tune for completing that acquisition. That practice is actually led by a very star retina doctor who is currently heading our retina practice at the main facility as well.

- Dishant Jain:** Okay, okay. And, sir, on behalf of our last question, I just missed the volume numbers for Q4. So can you please repeat it again?
- Adil Agarwal:** Oh, what is the question?
- Dishant Jain:** Volume numbers for Q4?
- Yashwanth Venkat:** Yes. In Q4, we performed 6724 surgeries, in which cataract was the main contributor, accounting for about approximately 71%, followed by refractive surgeries at around 6.5%. In Q4, the volume of cataract and refractive surgeries grew by about close to 13%, while the other surgeries experienced a higher growth rate of close to 36%.
- Dishant Jain:** Okay, thank you. Thank you for answering all the questions. Wish you all the best.
- Moderator:** Thank you. Next question is from the line of Harshil Seth from Autotec International Private Limited. Please go ahead.
- Harshal Seth:** Yes, hi. So just wanted to understand, like, what are your plans for the merger of the subsidiary Dr. Agarwal's Eye Hospital? And secondly, also, I would want to understand, like, where, since you don't conduct consults for a subsidiary, so I just wanted to understand, like, where exactly it is more focused? Like, Dr. Agarwal's Health Care, you know, it's across all over India, but then what part of the country is Dr. Agarwal's Eye Hospital?
- Adil Agarwal:** Sure. So I'll take the second part of the question first. Dr. Agarwal's Eye Hospital Limited, which is the oldest subsidiary, which was listed in 1994, that predominantly continues to operate all the facilities based out of Tamil Nadu. Although the other company, Dr. Agarwal's Health Care Limited has a few facilities based out of Tamil Nadu, but all the new expansion in the state of Tamil Nadu over the last one, 1, 1.5 years has been happening only in the listed subsidiary. And any new further expansion, along with the large capex, which we are investing in our flagship facility, all of that will happen only in the listed subsidiary.
- Now, coming to the merger of both the entities, we had already disclosed in the DRHP that we plan to do the merger of the listed sub with the holdco in the outer span of 3 years. That said, we are speaking to the bankers right now to decide on which bank we're going to go with, and we will soon have some news for you around the merger. Our plan is to get that done as soon as possible.
- Harshal Seth:** Okay. So just want to understand, so what you meant was that the hospitals that are run in the state of Tamil Nadu, that all are run under Dr. Agarwal's Eye Health, Eye Hospital.
- Adil Agarwal:** Dr. Agarwal's Eye Hospital.
- Harshal Seth:** Yes, talking about Eye Hospital.
- Adil Agarwal:** Outside of the state of Tamil Nadu, which is Karnataka, Andhra Pradesh, Telangana, Maharashtra, Punjab, all that happens in the holdco which is Dr. Agarwal's Health Care Limited, including Africa.

**Harshal Seth:** Which happens, sorry, actually, your voice is not clear. Like, could you just repeat it once?

**Adil Agarwal:** So, all the expansion outside of the state of Tamil Nadu, any new centers in the holding company, which is Dr. Agarwal's Health Care Limited.

**Harshal Seth:** Okay, okay. Got it, got it.

**Adil Agarwal:** There's a geographical distinction between where we open any new centers.

**Harshal Seth:** Okay, okay. Got it, got it. So any new centers that are being opened outside Tamil Nadu, that comes under the holding company, and the other, which are the new facilities that you might open in Tamil Nadu, that comes under Dr. Agarwal's Eye Hospital. Is it correct?

**Adil Agarwal:** Yes, that's exactly. Yes.

**Harshal Seth:** Okay, okay, thank you. That's it from my side.

**Adil Agarwal:** Thank you.

**Moderator:** Thank you. As there are no further questions, on behalf of Dr. Agarwal's Health Care Limited, that concludes this conference. Thank you for joining us, and you may now disconnect your lines.

**Adil Agarwal:** Thank you very much.