

- **GHG | Overview and strategy**
- GPC Acquisition
- GHG | Results discussion
- Industry and Macroeconomic Overview
- Annexes



A unique investment story supported by compelling theme

GHG's⁽¹⁾ market leading position, a unique business model with significant growth potential and highly experienced management team make it a credible investment opportunity

1

Market Leader

- ✓ Largest market share in Georgia with revenue upside: 26.7% market share by number of beds (2,686), which is expected to grow to c.30.0% as a result of renovation of recently acquired hospital facilities, scheduled for completion in 2016 and 2017 (additional c.500 beds) (2)
- ✓ Largest medical insurer: c.206,000 persons insured and 38.3% market share (3)
- ✓ **Widest Population Coverage:** coverage of over 3/4 of Georgia's 4.5mln population with 46 high quality hospitals and ambulatory clinics ^(4,5)
- ✓ **Institutionalising the industry:** Strong corporate governance; standardised processes; improving safety and quality by implementing JCI benchmarked standards; own personnel training center

Long-term High-growth Opportunities



- ✓ **Very low base:** healthcare services spending per capita only US\$ 217, outpatient encounters only 3.5 per capita annually⁽⁶⁾, GHG revenue per hospital bed only US\$ 32,000⁽⁴⁾
- ✓ **Supported by attractive macro:**⁽⁷⁾ Georgia one of the fastest growing countries in Eastern Europe, open and easy⁽⁸⁾ emerging market to do business, with real GDP growing at a CAGR of 6.7% between 2006-15. Only 5.8% of GDP spent on healthcare services and spending at healthcare services growing at 9% CAGR 2008-2013; government spending nearly doubled between 2011-15⁽⁹⁾
- ✓ **Implying long-term, high-growth expansion** that is driven by:
 - Universal Healthcare Program (UHC) covering Georgia's population driving utilisation of basic healthcare services nationwide, primarily inpatient (inpatient market was GEL 1,075mln in 2014)
- Pick-up in ambulatory growth (outpatient market was only GEL 802mln in 2014) driven by newly introduced prescription policy and improved quality in supply (10)
- Even small investments in medical equipment expected to increase market

2

Business Model with Cost and Synergy Advantage

- ✓ The single largest scale player on Georgia's healthcare market with cost advantage through scale: purchasing, centralisation of administrative functions, training center
 - Next competitor has only 5% market share by beds and less than 3% market share by hospital revenue
- ✓ Better access to professional management and high calibre talent
 - One of the largest employers in the country: c. 9,750 full time employees, including 2,762 physicians⁽⁴⁾
- ✓ Referral system & synergies with insurance:
 - Presence along patient pathway, and referral synergies
 - Insurance activities provide steady revenue stream for our ambulatory clinics and bolster hospital patient referrals

Sources

- (1) Georgia Healthcare Group established in Georgia and in UK
- (2) Market share by number of beds. Source: National Center for Decease Control, data as of December 2014, updated by company to include changes before 31March 2016, Additional development capacity at Deka and Sunstone of c.500 beds
- (3) Market share by gross revenue; Insurance State Supervision Service Agency of Georgia as of 31 December 2015
- (4) GHG internal reporting 1Q16
- (5) Geostat.ge, data as of 1 January 2014. Coverage refers to geographic areas served by GHG facilities

GEORGIA HEALTHCARE GROUP

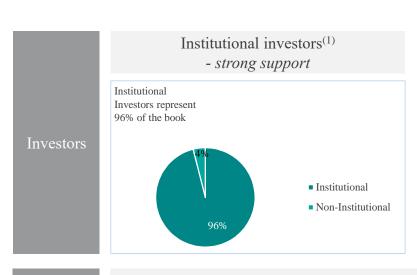
Strong Management with Proven Track Record

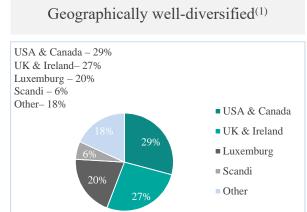
4

- ✓ Strong business management team increased market share by beds from under 1% in 2009 to 26.7% currently, with built-in additional development capacity
- ✓ Achieved our target of c.30% EBITDA margin ahead of time, delivering 29.5% healthcare services EBITDA margin in 1Q16
- ✓ Robust corporate governance: exceptional in Georgia's healthcare sector, as it is the only Premium listed company from healthcare sector (LSE:GHG LN) (11); 65.07% shareholder is BGEO Group PLC listed on the premium segment of the main market of the London Stock Exchange (LSE:BGEO), part of FTSE 250 index. The rest of shares are owned by Institutional Investors
- ✓ In-depth knowledge of the local market
- (6) NCDC statistical yearbook 2014
- (7) Euromonitor, World Bank's 2012 "Ease of Doing Business Report", other public information.
- (8) Ranked #24 (of 189 countries) in World Bank's 2016 "Ease of Doing Business Report", ahead of all its neighboring countries and several EU countries.
- (9) Ministry of Finance, Ministry of Economy
- (10) Frost & Sullivan 2015
- (11) GHG Group PLC successfully completed its IPO of ordinary shares at the Premium Segment of LSE on 12 November, 2015



GHG – shareholder structure and share price

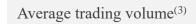


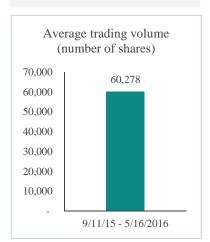




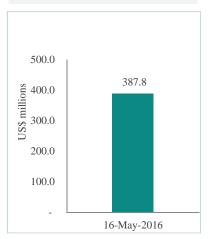








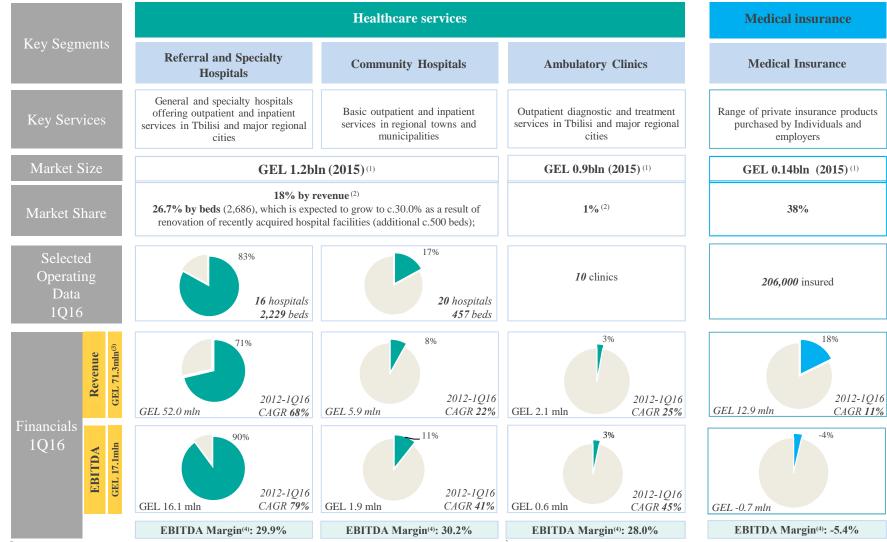
Market Capitalization⁽³⁾



Note: (1)As of 31 March 2016

Segment overview





Sources:

- (1) Frost & Sullivan analysis, 2015;.
- Market share for healthcare services are for 2015 year.

- (3) Revenue net of corrections&rebates and intercompany eliminations
- (4) EBITDA margins are based on gross of intercompany eliminations as well as gross of head office and management costs

Unique "Patient Capture" business model

Well established hospital network allows a seamless patient treatment pathway from local doctors to multi-profile or specialised hospitals whilst the medical insurance business plays a feeder role in originating and directing patients



GHG operates a highly integrated patient capture business model



- referral & specialty hospitals provide <u>secondary and tertiary level</u> healthcare services operating 2,229 beds
- Referral & Specialty
 Hospitals

20 community hospitals provide <u>primary out- and inpatient</u> healthcare services operating 457 beds

Community Hospitals

ambulatory clinics provide <u>primary and secondary outpatient</u> healthcare services

Ambulatory Clinics

3/4 of Georgia's 4.5mln population covered⁽¹⁾

Patients

1.7 mln GEL healthcare services revenue driven by medical insurance division for 1Q16⁽²⁾



Sources

- (1) Geostat.ge, data as of 1 January 2014
- (2) GHG internal reporting.

Clear market leader (1/2)

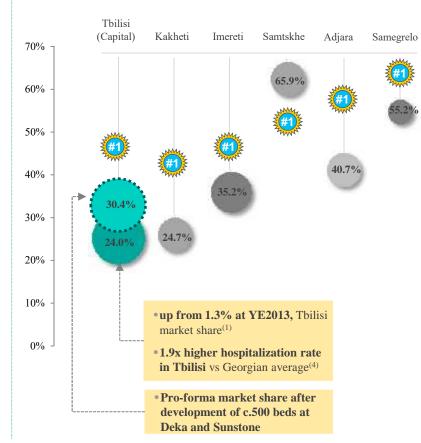
Broad geographic coverage and diversified healthcare services network covering 3/4 of Georgia's population

Extensive Geographic Coverage⁽¹⁾

Network of healthcare facilities 2,686 hospital beds 3/4 of population **46** facilities covered

Geographically Diversified Network

Regional market shares⁽²⁾
Bubble size denotes relative size based on % of population⁽³⁾



Sources:

- (1) GHG internal reporting
- 2) Market share by number of beds. Source: NCDC, data as of 2014. Market shares by beds are as of 31 March 2016

Community Hospitals

Ambulatory Clinics

Regions of Presence

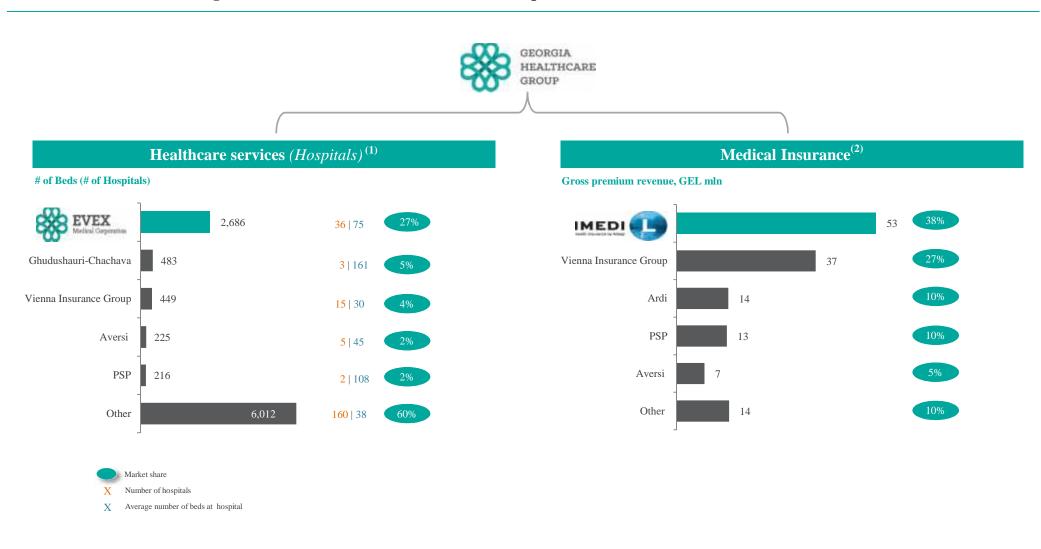
- (3) Geostat.ge, data as of 1 January 2014
- 4) NCDC healthcare statistical yearbook 2013

Referral and Specialty Hospitals



Clear market leader (2/2) in a fragmented competitive landscape

Leader in Georgia with clear and established #1 market positions in healthcare services and medical insurance



Sources

¹⁾ Market share by number of beds. Source: NCDC, data as of December 2014, updated by company to include changes before 31 March 2016

⁽²⁾ Market share by gross revenue; Insurance State Supervision Service Agency of Georgia as of 31 December 2015



Long-term, high-growth prospects Accelerated revenue market share growth

Despite 1/3 market share by beds, there is significant room to catch up to 1/3 market share by revenues

Growth In Hospital Revenue - GHG Owns It

Hospitals

2015 market size: GEL 1.2hln

18% Market share by revenue 33.0% In 2015

Growth opportunities:

- Low utilisation (50-60%)
- Low equipment penetration
- Fragmented supply

First Mover Advantage In Highly-fragmented, **Underpenetrated Ambulatory Segment**

Ambulatory clinics

2015 market size: GEL 0.9bln

Market share by revenue In 2015

Growth opportunities:

- Low outpatient encounters
- Fragmented supply
- New prescription policy

Margin Enhancement and Growth In Line with Nominal GDP Growth

Pharmaceuticals

2015 market size: GEL 1.3bln

Market share by revenue >15%

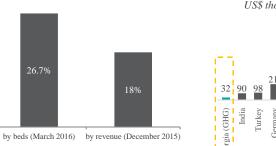
Growth opportunity:

- Growing wholesale revenue
- Enhancing retail margin
- Expending pharmacy footprint

Rooms For Growth

GHG's nation-wide bed capacity in place to accommodate future revenue market share growth (Sunstone to be renovated in 2016-17)





Low revenue per bed

Average revenue per bed, US\$ thousand

2004 2005 2006 2007 2008 2009 2010 2011 2012 2013

Average Length of Stay, Days Bed Occupancy Rate, %

Low bed utilisation

Utilisation & ALOS

10x price gap with developed EM benchmarks

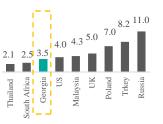
Price gap

Prices

Heart Liver Knee surgery transplant replacement USA 300,000 48,000 8,000 17,500 45,625 86,700 8,000 15,000 75,000 140.000 25.000 Singapore 45.000 6.000 45,000 1,100 Outpatient encounters increased to 3.5 in 2014 up from 2.7 in 2013

Low outpatient encounters

Outpatient encounter per capita, annual



Sources: GHG internal reporting; Frost & Sullivan analysis, 2015; NHA, Ministry of Labor, Health and Social Affairs of Georgia; NCDC 2014; OECD, World Health Organisation and World Bank - 2013 or most recent data



Long-term, high-growth story

Scale up and Institutionalise the Healthcare Services Business

At least double 2015 revenue by 2018

through utilising acquired hospital capacities and aggressively launching ambulatory clinics Enhance revenues by capitalising on scale

Georgia medium term = Turkey 2014

By healthcare spent per capita

Through enhanced service mix, improved quality of care

Significant Levers for Further Growth

Catch up with developed EM benchmarks in long-term

2015-2018

• Utilize existing hospital capabilities

- no need for new hospital acquisitions for targeted
- only c.60.4% bed utilisation⁽¹⁾ in 1Q16, c.500 beds in
- First mover advantage in fragmented outpatient market
- enhancing presence across patient pathway

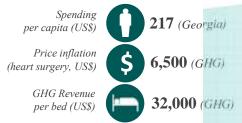
Medium-term Target (5-10 Year Horizon)

- •Gaining 1/3 market share by revenue in hospitals
- Gaining 17% market share by revenue in outpatient

Long-term Target (Beyond 10 Year Horizon)

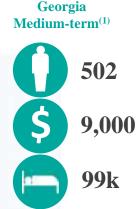
development

Georgia Year 2013-14(1)



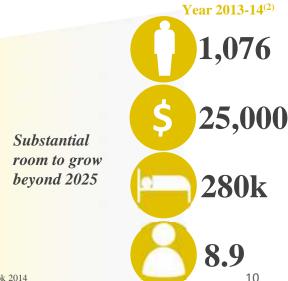
Outpatient 3.5 (Georgia) encounters

Significant expansion of capacity by 2025









 \mathbf{EM}

Milestone

Enabler

- Bed utilisation for referral hospitals; World Bank; GHG internal reporting; Management Estimates; Ministry of Finance of Georgia; Frost & Sullivan 2015, NCDC healthcare statistical yearbook 2014
- WHO: Average of countries: Chile, Costa Rica, Czech Republic, Estonia, Croatia, Hungary, Lithuania, Latvia, Poland, Russian Federation, Slovak Republic; BAML Global Hospital Benchmark, August 2014

GHG's strategy 2015-2018 is simple: at least doubling 2015 revenue by 2018

Hospitals

To achieve 1/3 market share

- no need for new hospital acquisitions to achieve targeted growth renovations of existing facilities (Deka, Sunstone, Samtskhe clinics c.500 beds in total)
- HTMC revenue in 2014 was GEL 38.4mln, in FY15 was GEL 40.8mln
- although 1/3 market share by hospital beds is almost there⁽¹⁾, by revenue it is significantly less

Outpatient services

Rapid launch of ambulatory clinics | first mover advantage in fragmented market

- c.30 ambulatory clinics expected to be launched within 2-3 years, in highly fragmented and under-penetrated outpatient segment
- catching up on outpatient revenues. Outpatient represent c.40% of national spending on healthcare services and only 3% share of GHG revenues with target of achieving 15% of 2018 revenues^(3,5); additional increase expected from increase in utilisation as Georgia has the lowest in the region average number of outpatient encounters per capita (Georgia: 3.5⁽²⁾, CIS: 8.9, EU: 7.7)⁽³⁾
- new prescription policy to have a favourable impact on number of outpatient visits
- enhancing presence along the patient pathway

Adding high margin services

To invest in medical equipment, to close existing service gaps

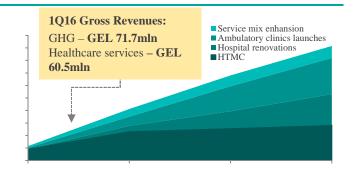
- expand offering in Oncology, Diagnostics, Paediatric, and Transplantology
- capitalise on existing service gaps and overall lower quality of medical care in the country and on the other hand improved access to healthcare services through UHC financing. Need for improvement as evidenced by low incidence levels in these specialities (e.g. malignant neoplasms incidence rate in Georgia: 110.1, EU: 543.7), as well as c.US\$100mln national spending on medical services import.)⁽⁴⁾

Solid growth track record

- 22.9% healthcare services organic growth, CAGR 2012-1Q16
- 14.6% healthcare services organic growth, 1Q16
- Solid margin performance 29.5% healthcare services EBITDA margin, in 1Q16

Sources:

- Market share by number of beds. Source: National Center for Decease Control, data as of December 2014, updated by company to include changes before 31 March 2016
- (2) NCDC healthcare statistical yearbook 2014
- (3) Frost & Sullivan 2015 (Data 2011-2012)
- (4) NCDC healthcare statistical yearbook 2013
- (5) GHG internal reporting





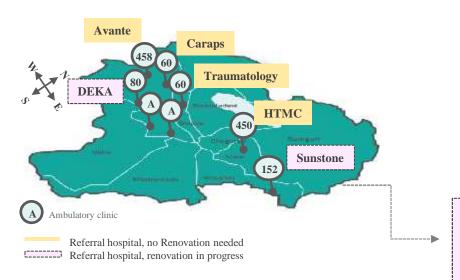
Focused growth strategy Capacity in place for accelerated hospital revenue growth Recent M&As

c.30% potential capacity: 26.7% market share as of 31 March 2016, further development capacity of up to c.500 beds that GHG aims to develop in 2016-17, bringing overall market share to c.30%

Recent acquisitions

Expanded Coverage in Tbilisi

Acquired 1,380 beds, with built-in additional development capacity of c.500 beds that GHG aims to develop in 2016-17(1)



* Avante operates 458 beds in Tbilisi and 120 beds in Batumi for total 578 beds as of the date of this presentation

Integration of Existing Facilities

- Upgrading and modernizing facilities
 - Market share to reach c.30% by number of beds upon the development of Sunstone and Deka to full operating capacity
- Deka: renovation started in January 2016 and currently is in an active renovation phase, on schedule and is expected to be completed and launched in 2017.
- Sunstone: renovation started January 2016, also in an active renovation phase, on schedule and is going to be launched in 2017 as well.
- Standardising clinical protocols across the group
- Rationalising back-office support functions

After renovation finishes in 2017, Deka will be a 310-bed-hospital, and Sunstone will be a 332bed-hospital



Focused growth strategy Rapid launch of ambulatory clinics



- Capitalise on high growth potential of ambulatory services driven by recent healthcare reform (diagnostics, prescriptions)
- Enhance ambulatory pillar as feeder for hospitals
- Enhance higher margin operations

Ambulatory clusters in Tbilisi

Ambulatory clusters are developed in all major districts of Tbilisi and in other major cities in Georgia. Our strategy of launching an additional 10-12 ambulatory clusters with a total of 20 to 30 ambulatory clinics in the next 2-3 year

Currently we operate 10 ambulatory clinics organized in 4 ambulatory clusters, of which 3 ambulatory clusters were opened towards the end of 2015. In total 5 ambulatory clinics were added during 2015. In 2016 we plan to launch additional six new ambulatory clusters. Four clusters, out of these six, are currently under renovation and will be launched in next few months.

for the period ended 31 March 2016 (1):

- GEL 2.1mln revenue from ambulatory clinics
- 28.0% EBITDA margin of ambulatory clinics - 3.5% share in total healthcare revenue

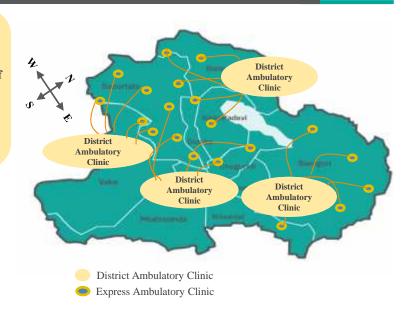
Ambulatory cluster consists of:

District Ambulatory Clinic

3-5 Express Ambulatory Clinics

one District Ambulatory Clinic

Express Ambulatory Clinics



District Ambulatory Clinic specifications:

- **Area:** 1800-2500 sq/m
- Offering: All paediatric and adult outpatient specialist services; clinical, biochemical and serological lab tests; imaging studies (incl. computed tomography, echocardiography, ultrasound, X-ray, endoscopy); functional diagnostics (electrocardiogram, treadmill stress test, Holter, spirometry); ob/gyn and ante-natal services; chemotherapy and day clinic services
- **Working hours:**: 10:00-20:00, 6 days a week

Express Ambulatory Clinic specifications

- **Area**: 120-200 sq/m
- **Offering :** GP and basic specialist services; Ultrasound; blood collection services referred to District Ambulatory Clinics
- **Working hours:**: 09:00-21:00, 7 days a week
- Express ambulatory clinics, scattered on a 15-30 minute walking
 distance from the district ambulatory clinic, provide basic ambulatory
 services and refer patients to the district ambulatory clinic or the
 referral hospitals, where wider ranging and more sophisticated services
 are offered.

Source:

Ambulatory Cluster



Focused growth strategy GHG setting new standard among competition in ambulatory business

Competition



Mitskevich polyclinic, Tbilisi, September 2015



Joen clinic, Tbilisi, September 2015

Doctor's office



9th polyclinic, Tbilisi, September 2015

GHG ambulatory clinics



Express ambulatory clinic, Tbilisi, December 2014

Reception



Express ambulatory clinic, Tbilisi, December 2014

Doctor's office



Express ambulatory clinic, Tbilisi, December 2014

GEORGIA HEALTHCARE GROUP

Focused growth strategy Investing in medical equipment, utilizing existing service gaps (examples of equipment not available or has supply shortage)

MRI – Capex: US\$ 0.65-1.2mln (only 21 in Georgia of which 5 owned by GHG)



Laparoscopic columns
Capex: US\$ 0.07-0.1mln



Arthroscope Capex: US\$ 30-60k



Probes for intraoperative ultrasound
Capex: US\$ 15-35k



Sources: GHG internal reporting

Linear accelerator Capex: US\$ 2.2-3.5mln tonly it units in Georgia



Endoscopy equipment for interventional endoscopy ERCP Capex: US\$ 0.3mln



Endoscope for interventional endoscopy



Vacuum machines Capex: US\$ 2k



Gamma knife Capex: US\$ 3-4mln (None in Georgia)



Microwave tissue ablation system and sulis generator Capex: US\$ 0.6-0.7mln



Choledocoscope Capex: US\$ 25-28k



Flowtron machine Capex: US\$ 4-6k



PET Computer Tomography Capex: US\$ 1.1-1.6mln (only 1 in Georgia, at GHG)



Catheterisation laboratory Capex: US\$ 0.35-0.65mln tonly 13 m Georgia of which 5



Magellan robot Capex: US\$ 0.7-0.8mln



Muscle reinnervation system set Capex: US\$ 0.3-0.4mln



PH metry set Capex: US\$ 1-3k



Additional service gaps:

- No pathology laboratory (samples are sent abroad for testing)
- Very limited pediatric oncology services
- Very limited rehabilitation services
- No suitable IVF center
- No bone marrow transplant
- No molecular laboratory
- No suitable genetic laboratory



Focused growth strategy Investing in medical equipment, utilising existing service gaps

Medical equipment at GHG healthcare facilities

Before





After





Market leader with reputation for high quality care

Leading service quality focused franchise







Scale, reputation, focus on quality and in-house training attracts the best available medical personnel

Plan to **expand training centre** geographically into new regions and seek accreditation from the Georgian Ministry of Education

Established own **nursing training centre** in conjunction with nursing colleges

Global Collaborations with Marquee Institutions













Equipped and Supplied by Leading International Suppliers





























GEORGIA HEALTHCARE GROUP

Robust corporate governance Exceptional in Georgia's healthcare sector

The Board is composed entirely of Non-Executive, independent directors (except for the chairman) and meets quarterly to define the strategy and how to move forward for which management is responsible to execute.

Board of directors - majority independent members

8 non-executive board members

7 independent members

- Irakli Gilauri | Chairman of the board | Experience: currently BGEO CEO; formerly EBRD banker; MS in banking from Cass Business School, London; BBS from University of Limerick, Ireland
- David Morrison | Senior Independent Non-executive Director | Experience: senior partner at Sullivan & Cromwell LLP prior to retirement; currently also BGEO board member
- Neil Janin | Independent Non-executive Director | Experience: formerly was director at McKinsey & Company in Paris and held previous roles as Co-Chairman of the commission of the French Institute of Directors (IFA); Chase Manhattan Bank (now JP Morgan Chase) in New York and Paris; and Procter & Gamble in Toronto; currently also BGEO Chairman
- Allan Hirst | Independent Non-executive Director | Experience: Held various senior roles over his 25 year career at Citibank, including President and Managing Director of Citibank Russia; former BGEO board member for seven years
- Ingeborg Oie | Independent Non-executive Director | Experience: Currently a VP of investor relations at Smith & Nephew plc, formerly senior research analyst covering medical technology and healthcare Services sector at Jefferies; analyst in the medtech research team at Goldman Sachs
- Tim Elsigood | Independent Non-executive Director | Experience: Former Senior VP for Business Development at Capio AB, VP for Medsi Group and CEO of Isida Hospital. Currently Consultant Advisor to Abraaj in Tunisia and Morocco. Extensive international healthcare management experience including time in Greece, Romania, Ukraine and Russia
- Mike Anderson | Independent Non-executive Director | Experience: Formally a Medical Director at Chelsea and Westminster hospital, currently medical director for North West London Reconfiguration Programme and physician at Chelsea and Westminister Hospital
- Jacques Richier | Independent Non-executive Director | Experience: Currently Chairman and CEO of Allianz France and Chairman of Allianz Worldwide Partners; formerly CEO and Chairman at Swiss Life France
- Nikoloz Gamkrelidze | Director, CEO at GHG | Experience: previously BGEO Group CFO, CEO of Aldagi BCI and JSC My Family Clinic; World Bank Health Development Project; Masters degree in International Health Management from Imperial College London, Tanaka Business School

Management

- Nikoloz Gamkrelidze | Director, CEO at GHG
- David Vakhtangishvili | Deputy CEO, Finance; formerly CFO of JSC Bank of Georgia, 9 years experience at Andersen and Ernst & Young
- Giorgi Mindiashvili | Deputy CEO, Commercial; formerly CFO of JSC Insurance Company Aldagi, formerly supervisory board member of JSC My Family Clinic
- George Arveladze | Deputy CEO, Ambulatory and Pharmaceutical Business; (effective 16 March 2016), formerly CEO of Liberty Bank, 6 years experience in banking business
- Nutsa Koguashvili | CEO, Medical insurance; 12 years of experience in insurance, formerly deputy CEO (retail & marketing) at JSC Insurance Company Aldagi
- Irakli Gogia | Deputy CEO, Operations; formerly Deputy CEO at JSC Insurance Company Aldagi, CFO at Liberty Consumer, 4 years of experience at Ernst & Young and Deloitte & Touche
- **Gregory (Gia) Khurtsidze** | Deputy CEO, Clinical (effective 1 February 2016), 2 years experience as Clinical Director of the National Center of Internal Medicine at New Hospital in Tbilisi, worked as a physician and held administrative roles at various leading healthcare institutions in the USA
- Nino Kortua | Head of legal; 14 years experience in insurance field as a lawyer, formerly head of Aldagi Legal Department

Committees

- Audit committee recommending the financial statements to our Board, and matters such as the risk of fraud, external auditors, annual external audit, financial and nonfinancial risk
- Nomination committee review the structure, size and composition (including the skills, knowledge, experience and diversity) of our Board. To oversee appointments to and the succession of the Board.
- Remuneration committee determine and make recommendations to our Board regarding the framework or broad policy for the remuneration
- Clinical quality and safety committee monitoring our non-financial risks, including clinical performance, health and safety and facilities

Note: Senior Executive Compensation Policy applies to top executives and envisages longterm deferred and discretionary awards of securities and no cash bonuses to be paid to such executives

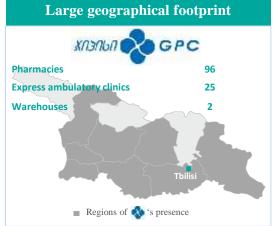
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HEALTHCARE Acquisition of GPC, a major pharmaceuticals retailer and wholesaler

Transaction is expected to be earnings accretive from day one

Established major pharmaceutical player

- GPC is 3rd largest pharmaceuticals retailer and wholesaler in Georgia, with 15% market share by sales, with about 80% of market share concentrated within four major players. Operates since 1995.
- Established urban-retailer with solid footprint. GPC is an urban-retailer, with a
 countrywide distribution network of 96 pharmacies in major cities. 25 of these
 pharmacies also have express ambulatory clinics. GPC operates 2 warehouses
- Large customer base. GPC has approximately 1 million retail customer interactions per month, with c.0.5 million loyalty card members.
- Operates à la CVS model, with para-pharmacies representing 32% of revenues in 2015.
 No other pharmaceutical player on Georgian market has similar diversification of revenues.
- In 2015, GPC had revenues of GEL 191.3 million, of which:
 - GEL 130.8 million was medical products and GEL 60.5 million was para-pharmacy
 - GEL 142.5 million was retail sales and GEL 48.8 million was wholesale
- GPC also owns a 35.0% equity stake at Temka referral hospital ("Temka") a newly renovated multi-profile referral hospital with 150 beds, located in the south-east of Tbilisi and covering a population of 0.3 million. In 2015, Temka reported revenues of GEL 11.0 million, and EBITDA of GEL 2.5 million
- GPC has over 1,600 employees





Other founders (1 individuals)

Leadership

- Mr. George Arveladze, Deputy
 CEO (GHG), in charge of
 ambulatory and pharmaceutical
 businesses. Joined the Group in
 March 2016. He will oversee GPC
 operations. Prior, he served as CEO of
 Liberty Bank, Georgia's 3rd largest
 retail bank with more than 5,300
 employees and over 650 branches
 throughout the country. His extensive
 experience in retail, and an excellent
 operational track record, will be
 invaluable to Georgia Healthcare
 Group.
- Mr. David Kiladze, GPC's CEO, will continue to lead the business. A visionary leader, Mr. Kiladze has led the business since its establishment in 1995. Under his leadership, GPC grew to become 3rd largest player with unique business model in Georgia, mirroring its American counterpart CVS. Mr. Kiladze's service contract was extended for another 3 years.

Transactior overview

GPC

overview

- GHG acquired a 100% equity stake in JSC GPC.
- In exchange for the 100% stake in GPC, total cash consideration to be paid by GHG amounted US\$ 14.0 million. 85.7% of this cash consideration was paid upon the signing of a definitive sale and purchase agreement, and the remaining 14.3% will be paid on the first anniversary of the closing, subject to customary holdback provisions.
- Of the total US\$ 14 million consideration, US\$ 13 million is earmarked for GPC (pharmaceutical business), implying EV/EBITDA of x5.7 (x4.5 after adjustment for unnecessary costs and x3.3 after adjustment for both, unnecessary costs and cost synergies) and US\$ 1 million is earmarked for the hospital, implying x7.9 P/E



A strong strategic fit, expected to be earnings accretive from day one

- Full presence in Georgian healthcare ecosystem
- GHG will be present in the entire Georgian healthcare ecosystem with an aggregate market value of GEL 3.4 billion.
- GHG will tap GEL 1.3 billion Georgian pharmaceuticals market, which represents 38% of total healthcare spending of the country.
- GHG becomes the one of the largest purchaser of pharmaceutical products in Georgia, as a result of combining GPC's purchases with GHG's existing
 hospital purchases and medical insurance claims on pharmaceuticals.
- Eliminating unnecessary costs
- Unnecessary costs can be eliminated, with at least GEL 1.9 million annual running effect on EBITDA, expected within first three months of the acquisition:
- c. GEL 1.0 million saving from on compensation of six non-executive board members / who at the same time are selling shareholders
- c. GEL 0.4 million saving from closing 4 loss making pharmacies
- c. GEL 0.5 million saving from other unnecessary operating cost eliminations

- 3
- Cost synergies
- Cost synergies, with at least GEL 3 million annual running effect on EBITDA, are expected to be accomplished within a year of acquisition as a result of consolidating GHG's and GPC's purchases of pharmaceuticals and medical disposables:
- Manufacturer cost synergy (c. GEL 2.5 million) saving from additional manufacturer discounts, as a result of becoming one of the largest purchasers of pharmaceuticals in Georgia
- Captive cost synergy (c. GEL 0.5 million) decrease in GHG's existing cost on pharmaceuticals and medical disposables (both, healthcare services and medical insurance businesses), by redirecting part of its purchases to GPC and thus eliminating the distributor margin
 - GHG purchases from GPC amounted to only GEL 3.4 million in 2015, of which GEL 1.0 million was purchases for healthcare services business (3.4% of GHG's total healthcare services purchases of pharmaceuticals) and GEL 2.4 million was medical insurance claims on pharmaceuticals (25.8% of GHG's total medical insurance claims on pharmaceuticals)
 - In 2015, GHG spent GEL 38.4 million on pharmaceuticals and medical disposables (GEL 29.1 million from healthcare services business and GEL 9.3 million from medical insurance business) and GPC's cost of pharmaceuticals was GEL 146.7 million.

4

Revenue Synergies / accelerating ambulatory strategy

- c. GEL 9-10 million revenue upside from pharmaceutical sales, as a result of opening GPC's pharmacies at GHG's existing hospitals and flagship ambulatory clinics. Approximately 40 new GPC locations countrywide, which require a total capital expenditure of approximately GEL 1.2 million, and need for additional working capital is GEL 2.8 million.
- Accelerate ambulatory launch strategy, as 25 out of GPC's 96 pharmacies already have express ambulatory clinics, which apart from approximately GEL 2 2.5 million capex savings for GHG during 2016, will become feeders for GHG's existing and future outpatient clusters.
- GPC acquisition further enhances GHG's existing "patient capture" business model through GPC's strong customer loyalty franchise with one million monthly customer interactions and 0.5 million members of its loyalty program, which is expected to drive referrals to GHG's ambulatory clinics and drive cross-selling of our medical insurance products.

Acquisition rationale



GHG – a major player in the Georgian healthcare ecosystem

Georgian healthcare ecosystem – a GEL 3.4bln market

Growth In Hospital Revenue - GHG Owns It

Hospitals

2015 market size: **GEL 1.2bln**¹

18% Market share by revenue 33.0% Long-term target

Growth opportunities:

- Low utilisation (50-60%)
- Low equipment penetration
- Fragmented supply

First Mover Advantage In Highly-fragmented,
Underpenetrated Ambulatory Segment

Ambulatory clinics

2015 market size: GEL 0.9bln¹

1%

Market share by revenue
In 2015

Crowth appartunities:

Growth opportunities:

- Low outpatient encounters
- Fragmented supply
- New prescription policy

Margin enhancement and growth alongside with nominal GDP

Pharmaceuticals

2015 market size: GEL 1.3bln¹

15% Market share by sales >15% Long-term target

Growth opportunities:

- Growing wholesale revenue
- Enhancing retail margin
- Expanding pharmacy footprint

Source: GHG internal reporting;

Note: (1) Frost & Sullivan analysis, 2015



Focused growth strategy for pharmaceutical business

Hospital pharmacy revenue growth and retail margin enhancement

Decrease cost of goods sold/services

- By consolidating GHG's and GPC's purchases of pharmaceuticals and medical disposables
- To decrease GHG's cost of services by redirecting part of its purchases to GPC and thus shortcutting the distributor margin
- To decrease both GPC and GHG cost of goods sold / services by additional volume discounts from manufacturers
- Start hospital-bulk import, to decrease cost of pharmaceuticals for GHG. Increase in sale to other wholesale clients will be an upside

Enhance retail margin

- Grow share of high-margin 1). para-pharmacy sales and 2). generic drug sales
- GPC's current EBITDA margin is 4.0%, which we expect to grow as a result of eliminating unnecessary costs and realizing cost and revenue synergies
- GPC is a mid to higher-end urban retailer, with strong loyal-customer franchise which is expected to drive referrals to GHG's more profitable ambulatory clinics in line to GHG's outpatient growth strategy

Expand pharmacy footprint

- Enhance GPC's footprint by opening pharmacies at GHG's existing over 40 healthcare facilities, hospitals and flagship ambulatory clinics
- Beyond enhancing into GHG's existing facilities, we do not intend to grow retail footprint
- Same store sales growth is expected to be alongside nominal GDP growth

GROUP GROUP

GPC Management

• George Arveladze, Deputy CEO GHG, in charge of the ambulatory and pharmaceutical businesses

Prior to joining GHG, Mr. Arveladze worked as a CEO of Liberty Bank, Georgia's 3rd largest retail bank with more than 5,300 employees and over 650 branches throughout the country, which he led since 2013 delivering c.200% net profit cumulative annual growth in 2 years, an impressive and strong performance. Prior to his appointment as CEO, Mr. Arveladze served as Deputy CEO in charge of Strategic Projects, Treasury and Private Banking (2009-2011 years) and Deputy CEO, Chief Operating Officer (2011-2013 years). Before returning to Georgia in 2009, he worked in structured product sales at BNP Paribas in London. Prior that, he worked at the National Bank of Georgia. Mr. Arveladze holds an MBA from London Business School.

• David Kiladze, CEO at GPC

Founded GPC in 1995 and has led the company as a founding shareholder CEO since then. Prior, Dr. Kiladze worked as a Physician in Paul Sabatier University, Toulouse, France (2002). He completed his M.D and Ph.D. in Paediatrics from Tbilisi State Medical University, also holds MBA from CERMA School of Management.

Mr. Kiladze will continue to lead the business with his service contract being extended for another 3 years.

• Vakhtang Dolidze, CFO at GPC

Joined GPC as a CFO in 2008. Additionally, Mr. Dolidze serves as a Chairman of the Supervisory Board of Microfinance Organization Lazika Capital. Prior, Mr. Dolidze served as Senior Associate at Caucasus Capital Partners, a small private equity firm (2005-2008), and held progressively greater level management positions in Credit, Strategic Planning and Financial Analysis departments at TBC Bank (1998-2003). Mr. Dolidze holds an MBA from Lehigh University and master's degree in public administration from Georgian Institute of Public Administration.

Mr. Dolidze will continue to serve as CFO, with his service contract being extended.



Key financial and operating highlights of GPC

Balance sheet highlights

(Amounts in GEL'000 unless otherwise noted)	31-Dec-15
	GPC
Cash and cash equivalents	9,781
Account receivables	6,480
Inventories	39,600
Property, plant and equipment	7,405
Other assets	2,948
Total assets	66,214
Trade and other payables	37,585
Other liabilities	(45)
Borrowings	22,534
Deferres tax liabilities	576
Total liabilities	60,651
Total equity	5,563
Total liability and equity	66,214

Note: Borrowings include shareholder receivable of GEL 1.7mln, which will be settled from the consideration paid.

Key operating highlights

- 1 million customer interactions per month at GPC pharmacies
- 0.5 million loyalty card members
- 15% market share by sales
- GEL 13.0 is average bill size
- para-pharmacy share in total revenue was 32% in 2015
- Retail sales share in total revenue was 74% in 2015
- Wholesale share in total revenue was 26% in 2015
- Over 6,700 SKUs in pharmaceuticals
- 96 pharmacies, 25 of which operate express ambulatory clinics
- 2 warehouses
- Over 1600 employees

Income Statement highlights

(Amounts in GEL'000 unless otherwise noted)	FY2015
	GPC
Revenues	191,351
Cost of goods sold	(146,669)
Gross profit	44,682
Other income	731
Administrative salary	(17,272)
Rent expenses	(10,805)
General and administrative expenses	(9,276)
Impairment of receivables	(477)
EBITDA	7,582
Interest expense, net	(1,726)
Foreisn exchange loss, net	(2,818)
Admortisation and depreciation	(1,457)
Non-recurring income / expenses	(666)
Share of associate profit	(756)
EBT	159
Income tax expense	(169)
Net profit	(10)

Capital expenditures for next 2-3 years

- GPC is a cash generating business, no additional working capital needs for existing business.
- Financing required for planned expansion into GHG's existing hospitals and flagship ambulatory clinics (to be financed with additional leverage):
 - Working capital 2016: GEL 2.8 million
 - Capex 2016: GEL 1.2 million
- Maintenance capex: 0.4-0.6% of revenue



GPC pharmacies – a la CVS business model



GPC pharmacy exterior



GPC pharmacy interior



GPC loyalty card

- GHG | Overview and strategy
- GPC Acquisition
- **GHG | Results discussion**
- Industry and Macroeconomic Overview
- Annexes



Consolidated income statement 1Q 2016

Income Statement,	Healthcare services					Medical insurance					Total GHG					
GEL thousands; unless otherwise noted	1Q16	1Q15	Chang, Y-o-Y	4Q15	Change, Q-o-Q	1Q16	1Q15	Change, Y-o-Y	Q15	Change, Q-o-Q	1Q16	1Q15	Change, Y-o-Y	4Q15	Change, Q-o-Q	
Revenue, gross	60,451	42,745	41.4%	55,481	9.0%	12,936	12,992	-0.4%	14,532	-11.0%	71,682	53,875	33.1%	68,720	4.3%	
Corrections & rebates	(410)	(957)	-57.2%	(1,086)	-62.2%	-	-	-	-	-	(410)	(957)	-57.2%	(1,086)	-62.2%	
Revenue, net	60,041	41,788	43.7%	54,395	10.4%	12,936	12,992	-0.4%	14,532	-11.0%	71,272	52,918	34.7%	67,634	5.4%	
Cost of services	(32,998)	(24,273)	35.9%	(30,007)	10.0%	(11,953)	(10,837)	10.3%	(12,917)	-7.5%	(43,257)	(33,339)	29.7%	(41,618)	3.9%	
Gross profit	27,043	17,515	54.4%	24,388	10.9%	983	2,155	-54.4%	1,615	-39.1%	28,015	19,579	43.1%	26,016	7.7%	
Total operating expenses	(9,456)	(7,923)	19.3%	(8,857)	6.8%	(1,660)	(1,760)	-5.7%	(1,627)	2.0%	(11,105)	(9,592)	15.8%	(10,480)	6.0%	
Other operating income	241	78	209.0%	1,008	-76.1%	(21)	47	NMF	(5)	320.0%	220	125	76.0%	986	-77.7%	
EBITDA	17,828	9,670	84.4%	16,539	7.8%	(699)	442	NMF	(17)	NMF	17,129	10,112	69.4%	16,522	3.7%	
EBITDA margin	29.5%	22.6%		29.8%		-5.4%	3.4%		-0.1%		23.9%	18.8%		24.0%		
Depreciation and amortisation	(4,261)	(2,186)	94.9%	(4,046)	5.3%	(204)	(136)	50.0%	(249)	-18.0%	(4,465)	(2,322)	92.3%	(4,295)	4.0%	
Net interest (expense) / income	(2,259)	(4,073)	-44.5%	(5,535)	-59.2%	603	(28)	NMF	158	282.4%	(1,656)	(4,101)	-59.6%	(5,377)	-69.2%	
Net (losses) / gains from foreign currencies	(411)	2,907	NMF	(1,586)	-74.1%	151	497	-69.6%	(6)	NMF	(260)	3,404	NMF	(1,592)	-83.7%	
Net non-recurring (expense) / income	1,968	(211)	NMF	484	306.3%	-	-	-	(676)	NMF	1,968	(211)	NMF	(192)	NMF	
Profit before income tax expense	12,865	6,107	110.7%	5,856	119.7%	(149)	775	NMF	(790)	-81.1%	12,716	6,882	84.8%	5,066	151.0%	
Income tax (expense) / benefit	(712)	(491)	45.0%	(206)	245.1%	19	(116)	NMF	192	-90.1%	(693)	(607)	14.2%	(14)	NMF	
Profit for the period	12,153	5,616	116.4%	5,650	115.1%	(130)	659	NMF	(598)	-78.3%	12,023	6,275	91.6%	5,052	138.0%	
Attributable to:																
- shareholders of the Company	10,051	5,073	98.1%	4,421	127.3%	(130)	659	NMF	(598)	-78.3%	9,921	5,732	73.1%	3,823	159.5%	
- non-controlling interests	2,102	543	287.1%	1,229	71.0%	-	-	-	-	-	2,102	543	287.1%	1,229	71.0%	

Note: healthcare services business and medical insurance business financials do not include interbusiness eliminations. Detailed financials, including interbusiness eliminations, are provided in annexes



Balance Sheet	Healthcare services Medical insurance									<u>Total GHG</u>					
GEL thousands; unless otherwise noted	Mar-16	Mar-15	Change, Y-o-Y	Dec-15	Change, Q-o-Q	Mar-16	Mar-15	Change, Y-o-Y	Dec-15	Change, Q-o-Q	Mar-16	Mar-15	Change, Y-o-Y	Dec-15	Change, Q-o-Q
Total assets, of which:	670,861	365,689	83.5%	703,309	-4.6%	75,493	76,669	-1.5%	67,372	12.1%	737,815	435,124	69.6%	758,280	-2.7%
Cash and bank deposits	52,408	13,378	291.7%	139,085	-62.3%	12,996	16,829	-22.8%	18,313	-29.0%	65,404	30,207	116.5%	157,398	-58.4%
Receivables from healthcare services	78,034	51,317	52.1%	71,348	9.4%	-	-	-	-	-	73,750	48,552	51.9%	65,863	12.0%
Insurance premiums receivable	-	-	-	-	-	39,042	37,412	4.4%	20,948	86.4%	39,042	37,205	4.9%	20,663	88.9%
Property and equipment	481,969	265,856	81.3%	439,131	9.8%	5,672	4,886	16.1%	5,587	1.5%	487,641	270,742	80.1%	444,718	9.7%
Goodwill and other intangible assets	19,433	6,190	213.9%	19,708	-1.4%	6,097	3,940	54.7%	6,079	0.3%	25,530	10,130	152.0%	25,787	-1.0%
Other assets	39,017	28,948	34.8%	34,037	14.6%	11,686	13,602	-14.1%	16,445	-28.9%	46,448	38,288	21.3%	43,851	5.9%
Total liabilities, of which:	214,166	207,158	3.4%	247,762	-13.6%	56,192	58,147	-3.4%	47,937	17.2%	261,819	258,071	1.5%	283,299	-7.6%
Borrowings	92,336	151,689	-39.1%	140,439	-34.3%	11,775	15,956	-26.2%	16,497	-28.6%	99,856	163,720	-39.0%	152,762	-34.6%
Accounts payable	36,533	13,942	162.0%	29,160	25.3%	832	-	NMF	1,016	-18.1%	37,365	13,942	168.0%	30,176	23.8%
Insurance contract liabilities	-	-	-	-	-	39,431	38,168	3.3%	22,463	75.5%	36,935	35,471	4.1%	21,351	73.0%
Other liabilities	85,297	41,527	105.4%	78,163	9.1%	4,154	4,023	3.3%	7,961	-47.8%	87,663	44,938	95.1%	79,010	11.0%
Total shareholders' equity	456,695	158,531	188.1%	455,547	0.3%	19,301	18,522	4.2%	19,435	-0.7%	475,996	177,053	168.8%	474,981	0.2%
Attributable to:															
Shareholders of the Company	409,504	135,428	202.4%	399,547	2.5%	19,301	18,522	4.2%	19,435	-0.7%	428,805	153,950	178.5%	418,981	2.3%
Non-controlling interest	47,191	23,103	104.3%	56,000	-15.7%	-	-	-	-	-	47,191	23,103	104.3%	56,000	-15.7%

Sources: GHG Internal Reporting

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Selected ratios and KPIs	1Q16	1Q15	4Q15
GHG			
EPS, GEL	0.08	NMF^1	NMF^1
ROAE	9.4%	15.2%	5.0%
Adjusted ROAE	16.5%	15.2%	7.8%
Operating leverage	27.3%	-11.2%	6.6%
Healthcare services			
EBITDA margin of healthcare services	29.5%	22.6%	29.8%
Bed occupancy rate	60.4%	54.2%	51.9%
Bed occupancy rate, referral hospitals	66.7%	61.4%	59.9%
Bed occupancy rate, community hospitals	26.6%	23.8%	18.4%
Average length of stay (days)	4.9	4.6	4.7
Average length of stay (days), referral hospitals	5.2	4.9	5.0
Average length of stay (days), community hospitals	3.0	2.9	2.7
Medical insurance			
Loss ratio	92.4%	83.4%	88.9%
Expense ratio	14.7%	14.9%	13.8%
Combined ratio	107.1%	98.3%	102.7%
Renewal rate	88.5%	74.2%	92.0%

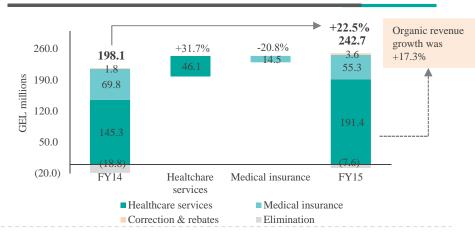
Sources: GHG Internal Reporting

Note: 1) Due to the fact that number of outstanding shares increased significantly following GHG's IPO in November 2015, comparison of 1Q 2016 EPS to previous periods would be distorted.

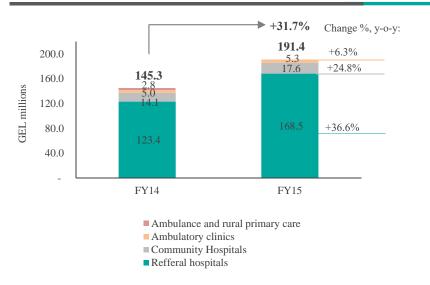


Revenue growth driven primarily by healthcare services, with referral hospitals constituting majority of the growth

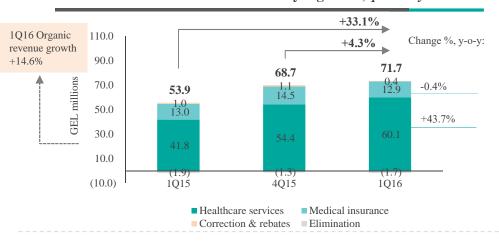
GHG – Gross revenue breakdown by segments, full year 2015



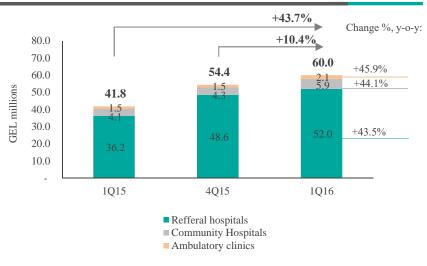
Healthcare services – Net revenue breakdown by service lines, *full year 2015*



GHG – Gross revenue breakdown by segments, quarterly



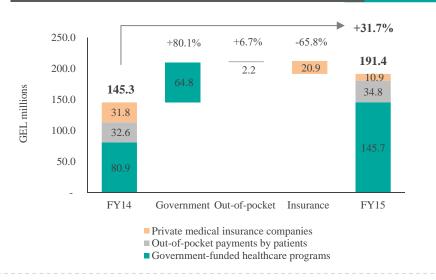
Healthcare services – Net revenue breakdown by service lines, *quarterly*





Healthcare services revenue growth driven by increased government spending on health

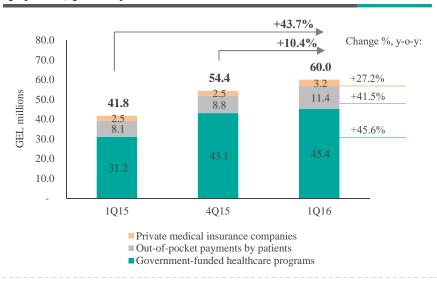
Healthcare services – Net revenue breakdown by source of payment, *full year 2015*



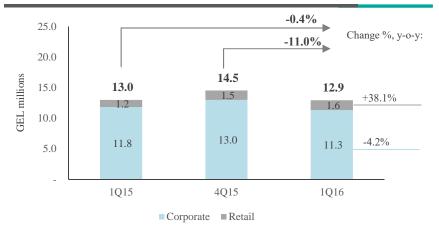
Medical insurance – Net revenue breakdown by products, *full year 2015*



Healthcare services – Net revenue breakdown by source of payment, *quarterly*



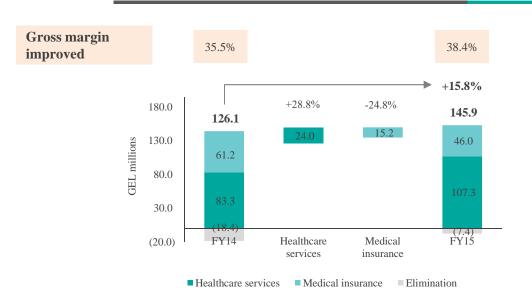
Medical insurance – Net revenue breakdown by products, quarterly



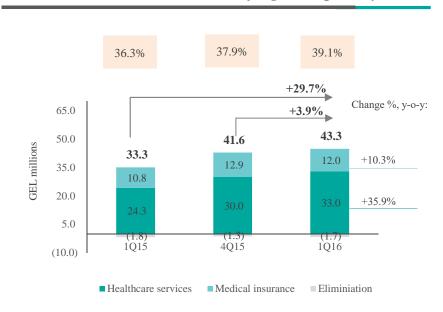


Cost of services growth follows healthcare services expansion, through increased gross margins(1/2)

GHG - Cost of services breakdown by segments, full year



GHG - Cost of services breakdown by segments, quarterly



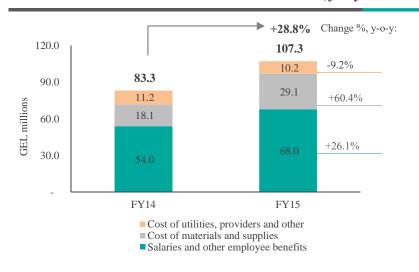
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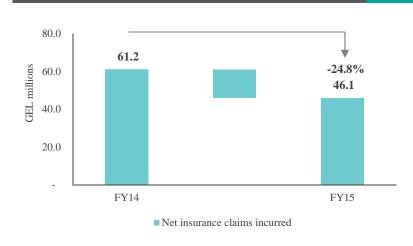
Cost of services growth follows healthcare services expansion

(2/2)

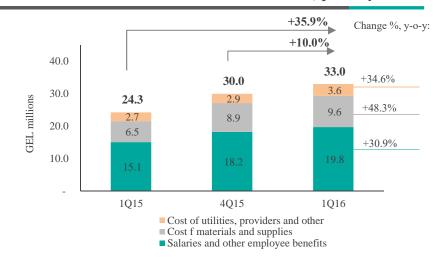
Healthcare services - cost of services breakdown, full year 2015



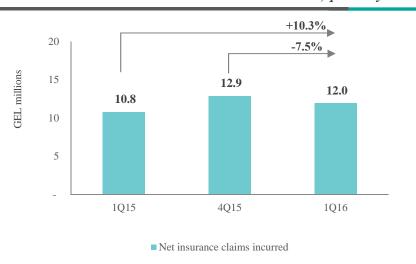
Medical Insurance – Net insurance claims incurred, full year 2015



Healthcare services – cost of services breakdown, quarterly



Medical Insurance - Net insurance claims incurred, quarterly



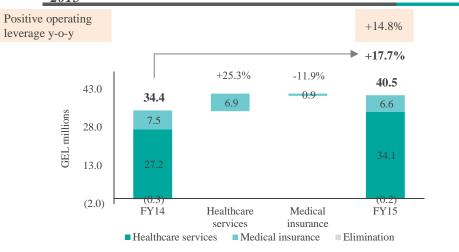
34

Note: GHG Internal Reporting

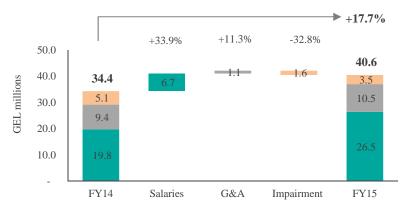


Operating expenses followed the growth of healthcare services revenue through positive operating leverage

GHG – Operating expense breakdown by Segments, *full year* 2015

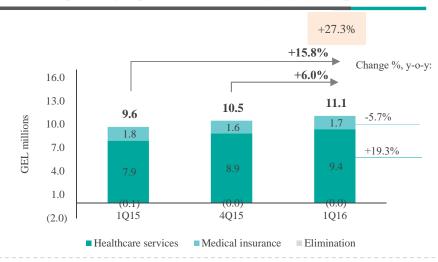


GHG -operating expenses breakdown, full year 2015

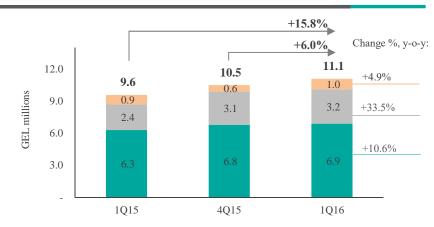


- Impairment of healthcare services, insurance premiums and other receivables
- General and administrative expenses
- Salaries and other employee benefits

GHG - Operating expenses breakdown by segments, quarterly



GHG -operating expenses breakdown, quarterly

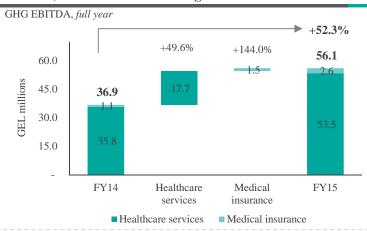


- Impairment of healthcare services, insurance premiums and other receivables
- General and administrative expenses
- Salaries and other employee benefits

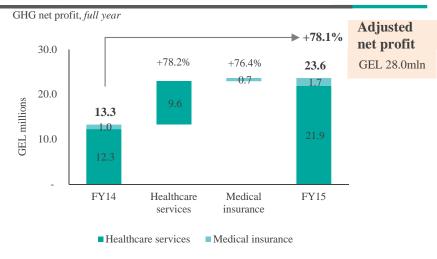
Note: GHG Internal Reporting

EBITDA and **Net profit**

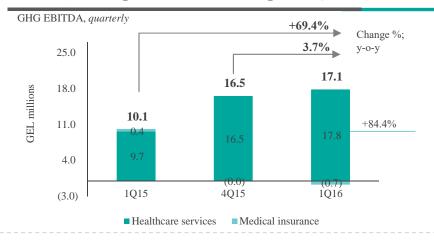
GHG - EBITDA growth primarily driven by healthcare services, 27.4% EBITDA Margin in 2015



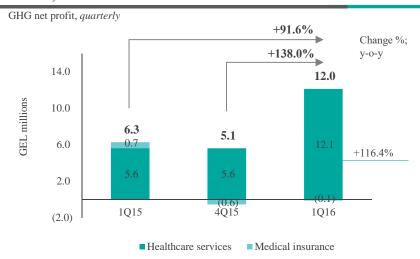
GHG - Net Profit growth primarily driven by healthcare services, 78.2% Y-o-Y



GHG – EBITDA growth driven primarily by healthcare services, reaching 29.5% EBITDA Margin in 1Q 2016



GHG – Net Profit growth primarily driven by healthcare services, 116.4% Y-o-Y



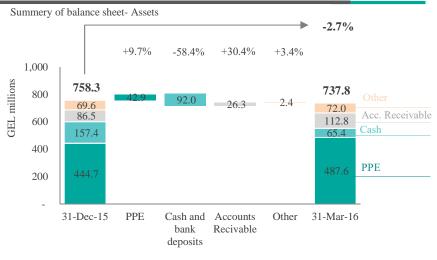
Note: GHG Internal Reporting

⁽¹⁾ We show adjusted net profit, to exclude the effect of the IPO. The adjusted profit includes add back for a non-recurring one-off FX loss as well as an add back of one quarter interest expense released through prepayment of debt at the end of 2015 and in January 2016



Balance sheet

 $GHG-Asset\ growth$ and structure follows healthcare services expansion plan. Reduction of cash position is due to repayment of borrowings

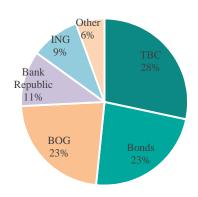


GHG –Asset growth mostly funded through IPO. Repayment of borrowings reduced total debt - improved leverage



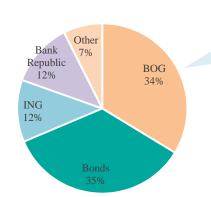
Debt structure GEL 152.8 million

As of 31 Dec 2015



we **pre-paid GEL 104.4 million** borrowings at year end 2015/beginning of 2016 from IPO proceeds, reducing total borrowings to GEL 105.6 million as at 31 January 2016

Debt Structure GEL 99.9 million *As of 31 March 2016*



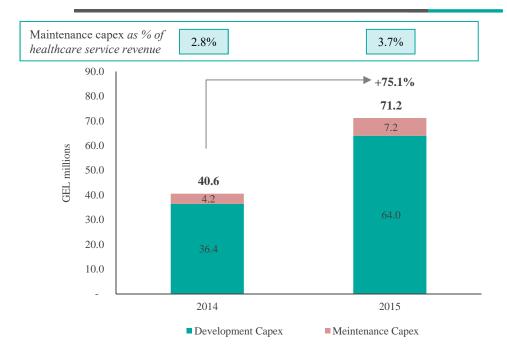
Released c.GEL 25.0mln of operating cash flow each year starting 2016

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Capex – Key driver for our 2016-2018 strategy

Capex 2014-2015



Capex 2016-2018 Strategy

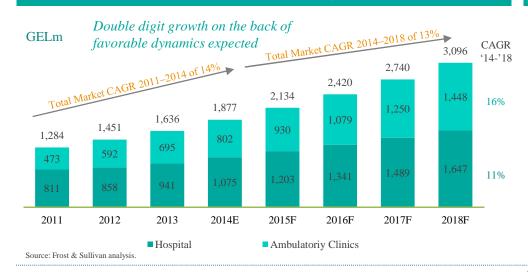
- Our key strategic pillar for Doubling 2015 Revenue in 2018 is the development capex, including 2 hospital renovations, outpatient clinics roll-out and some other new projects to fill service gaps.
- We have fully sourced our development capex financing through 2018 from the IPO proceeds raised in the end of 2015 and organic cash generation.
- 2016-2018 development capex includes:
 - US\$ 26.8 million for renovation and development of recently acquired healthcare facilities (Deka and Sunstone hospitals)
 - US\$ 38.0 million to enlarge the Group's network of ambulatory clinics and to undertake other projects in pursuit of organic growth
- During 1Q16 we spent a total of GEL 16.9 million on capital expenditures, from which:
 - Development Capex was GEL 14.4 million
 - Maintenance Capex was GEL 2.5 million
- These expenditures already include commencement of the flagship projects of DEKA and Sunstone in 1Q16.

- GHG | Overview and strategy
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- Annexes



Long-term, high growth prospects Rapidly Growing Healthcare Services Market

High Growth in Healthcare Services Market Expected to Continue



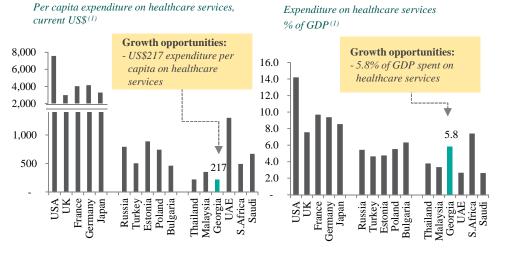
Demand Analysis Number of Hospital Admissions Number of Surgical Operations Outpatient Encounters per Capita 205 3.7 3.8 4.0 3.9 3.5 2.7 2.02.12.02.12.12.3 2008 2009 2010 2011 2012 2013 2004 2014 Demand Analysis Outpatient Encounters per Capita 2.02.12.02.12.12.3 2.02.12.02.12.12.3

Source: NCDC. Source: NCDC.

... Including a Growing Incidence of Lifestyle Diseases

Source: NCDC, Frost & Sullivan analysis.

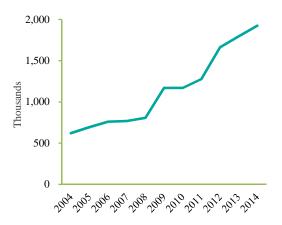
Low Expenditure on Healthcare Services



Note: Healthcare services expenditure for other countries is pro-forma, based on assumption that pharmaceuticals is 17% of total spending

Increasing Overall Disease Incidence...

Number of Registered Patients with 1st Time Diagnosis



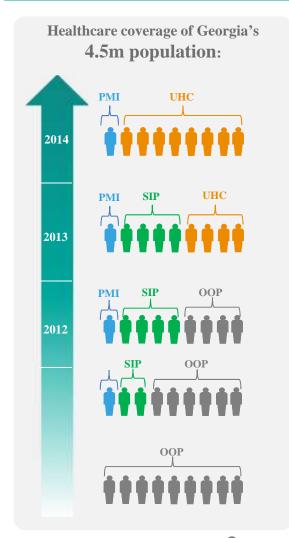
5,000 Januarion 4,000 - 4,000 - 2,000 - 2,000 - 2,000 - 4,000 - 2,000 - 4,000

1.000

Source: Geostat. Source: NCDC.



Expanding medical insurance coverage and creating opportunities for private participation (via top-ups) has been the key impact of the Universal Health Care reform



Key Principles of UHC Programme

Overview

- UHC was introduced in February, 2013 and replaced most of the previously existing state-funded medical insurance plans
- The main goal is to provide basic healthcare coverage to the entire population

Financing and top-up mechanism

- UHC is fully financed by the government
- UHC doesn't reimburse 100% of costs in most cases, leaving substantial room for top-up coverage including in the form of private medical insurance policies

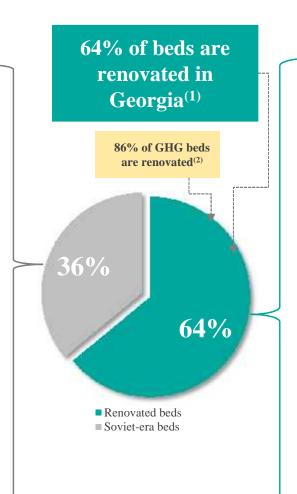
Beneficiaries and **Providers**

- UHC beneficiaries may select any healthcare provider enrolled in the programme
- Actual prices charged to patients by healthcare providers are not regulated by the state
- Any provider, whether private or public, is eligible to participate in the programme



Soviet-era legacy





Renovated







Source.

(1) NCDC, data as of 2014

(2) GHG internal reporting



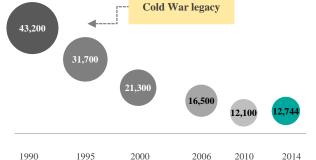
Beds per 1,000 people⁽³⁾

6.0 4.0

Infrastructure renewed, although significant opportunity remains to improve service quality

84% Of Hospital capacity is private

Total Number of Beds (2014): 10,071(1) Public 16% Private 84%



2000

Optimising bed capacity over the years

1995

(Total number of beds)(2)

1990

Capacity-wise Georgia stands alongside US, UK and Turkey



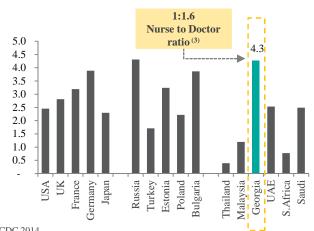
Turkey Estonia Poland

Bulgaria

Note: (*) *Target market bed capacity = Total market bed capacity of 12,744* beds - 2,689 specialty beds at penitentiary, TB and psychiatric clinics

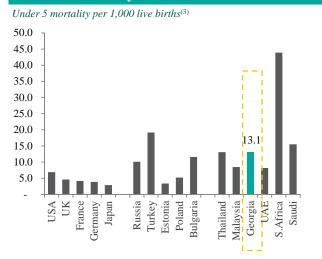
However, physician overcapacity vet to be addressed

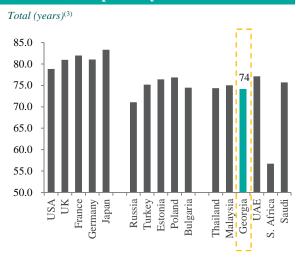




With significant room for optimisation in terms of service quality, as indicated by: **Under 5 Mortality Rate...** ... And Life Expectancy At Birth

2010





Source:

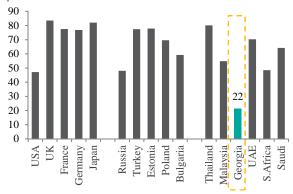
Geostat 2014, NCDC 2014

World Bank | 2012, 2013



Government finances reached c.30% of total healthcare costs in 2015, from c.20% in 2013

General government expenditure on health as a percentage of total expenditure on health in 2013(1)

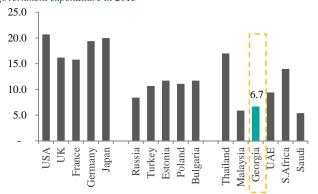


And catching up gradually – State financing of healthcare increasing for the last several years

2015 UHC spending was initially planned at GEL 470mln. In 2nd half of 2015 state has adjusted initial budget of 2015 UHC spending and increased from GEL 470mln

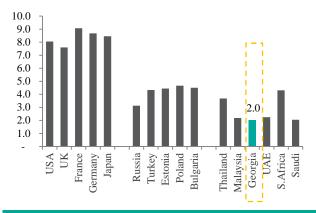
Government spending on healthcare was only 6.7% of state budget in 2013, which grew up to 9.3% in 2015 year.

General government expenditure on health as a percentage of total government expenditure in 2013 (1)



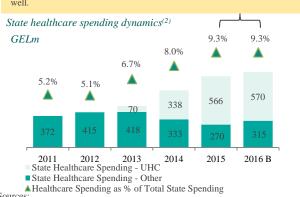
High private spending and growing public sector participation on the back of UHC implementation⁶ Government expenditure on healthcare as a % of GDP increased from c.2% in 2013, up to c.2.7% in 2015 year (4)

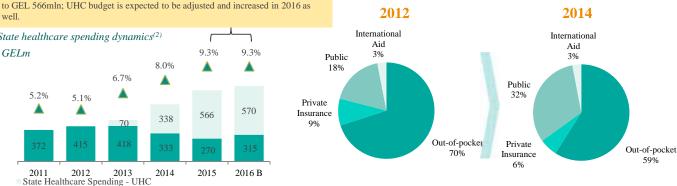
Government expenditure on health as % of GDP in 2013 (1)



With C.20% of government tax revenues spent on capex

Total government budget, breakdown by operating and capital expenditures (2)





- (1) World Health Organisation and World Bank, 2013 data
- (2) Ministry of Finance of Georgia
- (3) Global health expenditure database World Health Organisation, Frost & Sullivan analysis
- (4) GHG Internal reporting





Long-term, high growth prospects Georgia | rapidly developing reform driven economy

- Area: 69,700 km²
- Population (2014): 4.5 million people
- Life expectancy: 74 years
- Official language: Georgian
- Literacy: 100%
- Capital: Tbilisi (Population of 1.1 million people)
- Currency: Lari (GEL)
- Nominal GDP: 2015 GEL 31.7bn (US\$14.0bn)
- Real GDP average 10yr growth: 5.1%
- GDP per capita 2015E (PPP) per IMF: US\$9,629
- Inflation rate (e-o-p) 2015: 4.9%
- External public debt to GDP 2015: 32.6%
- Sovereign ratings:

S&P BB-/B/Stable, affirmed in November 2015
 Moody's Ba3/NP/Positive, affirmed in March 2016
 Fitch BB-/B/Stable, affirmed in October 2015





Ease of Doing Business Best Improvement since 2005

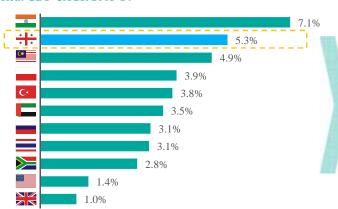




Long-term, high growth prospects Georgia / strong economic performance

Georgian Economy Grew Faster than DM and Most of EM Countries...

Real GDP CAGR 2005-14



...Fueled by Liberal Reforms...

#1 _____\

Georgia is the top improver on the World Bank's Ease of Doing Business report since 2005, rising from 113th in 2005 to 24th in 2016

- Georgia has implemented one of the most radical market and government reforms and programme of economic liberalisation in the former Soviet Union states
- Massive privatisation lead to reduction of the public sector and its influence on the country's economy
- Significant improvement in the business environment resulted in annual net FDI inflow at average rate of 10% of GDP since 2005

...Which Removed Excessive Administrative Burden from Business

- Significant reduction of bureaucracy
- Overall, c.70% of business-related licenses and c.90% of permits were abolished
- One-stop shops for all business-related administrative procedures commenced operations
- Taxation was simplified with the total number of taxes reduced from 21 to 6
- Main import tariffs and fees were substantially abolished

Prudent Fiscal Policy



- Consolidated budget spending capped at 30% of GDP
- Consolidated budget deficit capped at 3% of GDP
- Guideline to keep the budget debt below 60% of GDP
- Any new national tax or increase of upper rates of existing taxes must be approved by referendum, except for temporary measures

Monetary Policy Aims to Maintain Price Stability

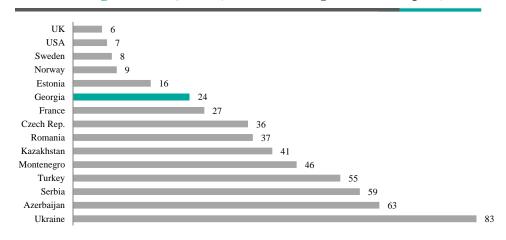
Monetary policy aims to maintain price stability with medium-term inflation target defined at 5% in 2016



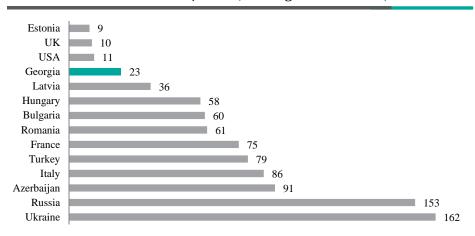


Long-term, high growth prospects HEALTHCARE Georgia | top improver on World Bank's Ease of Doing Business Report

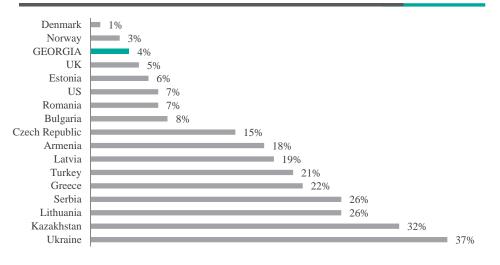
Ease of Doing Business | 2016 (WB-IFC Doing Business Report)



Economic Freedom Index / 2016 (Heritage Foundation)



Global Corruption Barometer | TI 2013



GEORGIA - No 1 Reformer 2005-2012

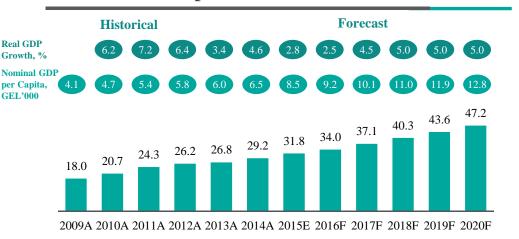
(WB Doing Business Report)



GEL'000

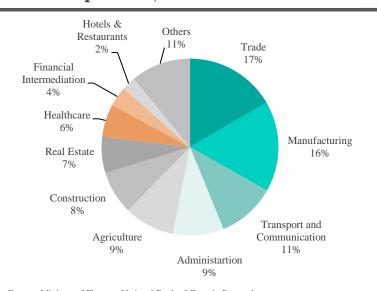
Long-term, high growth prospects Georgia | positive economic outlook

GDP Growth Expected to Continue



Nominal GDP, GELbn

GDP composition, FY 2015



Clear Strategy to Achieve Long Term Growth

Liberal Reforms and **Prudent Policy**

- Liberty Act, which became effective in January 2014 seeks to ensure a credible fiscal and monetary framework:
 - Government expenditure/GDP capped at 30%
- Budget deficit/GDP capped at 3%
- Government debt/GDP capped at 60%

Regional Logistics and **Tourism Hub**

- Reproceeds from foreign tourism stood at US\$1.9bn in 2015 up 8.3% y-o-y, 5.9mln visitors in 2015 (up 6.9% y-o-y),
- Regional energy transit corridor with approx. 1.6% of world's oil production and diversified gas supply passing through the country

Strong FDI

- Strong FDI inflows diversified across different sectors (US\$ 1.35bn in 2015)
- Net remittances of US\$0.91bn in 2015 (down 28.0%)
- FDI averaged 10% of GDP in 2006-2015

Support from International Community

- Georgia and the EU signed an Association Agreement in June 2014 and Georgia's parliament ratified the agreement in July 2014. The deal includes a DCFTA, which is the major vehicle for Georgia's economic integration with the EU
- Biscussions commenced with the USA to drive inward investments and exports
- Strong political support from NATO, EU, US, UN and member of WTO since 2000
- Substantial support from DFIs, the US and EU
- Diversified trade structure across countries and products
- Limited dependence on Russia which accounts for c.10% of exports and c.7% of imports

Cheap **Electricity**

- Only 20% of hydropower capacity utilized; 88 hydropower stations are being built/developed
- Net electricity exporter from 2007-2011 (net importer in 2012 and 2013 due to low precipitation)
- Significantly boosted transmission capacity in recent years



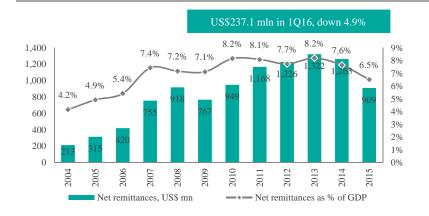
Diversified sources of capital flow

FDI inflows



Sources: Geostat

Net remittances



Source: National Bank of Georgia

Number of tourists



Sources: Georgian National Tourism Agency, National Bank of Georgia

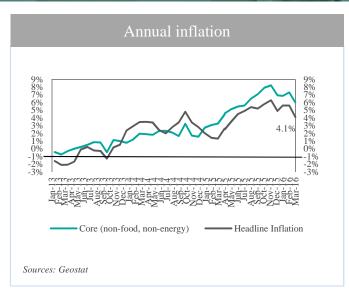
Public donor funding

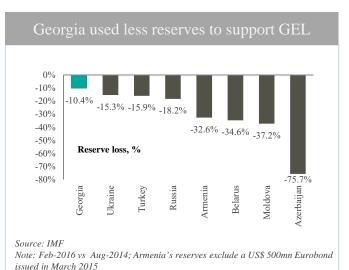


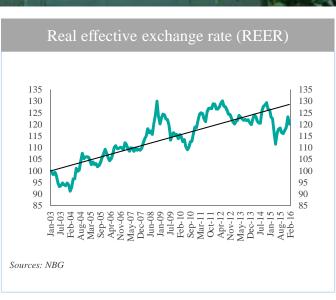
Source: Ministry of Finance of Georgia

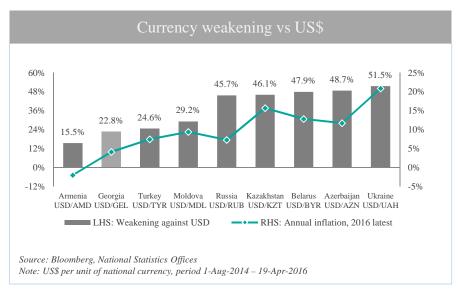


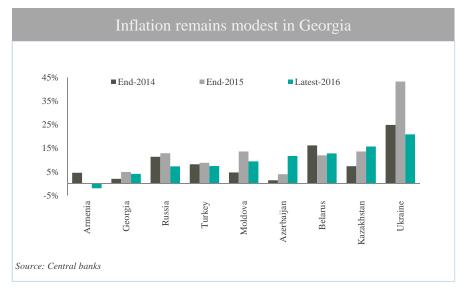
General macro











- GHG | Overview and strategy
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Consensus Target Price is 2.48 GBP





GBP 2.35

*as of 17 December 2015





GBP 2.50

*as of 16 May 2016





GBP 2.25

*as of 21 December 2015





GBP 2.80

*as of 9 May 2016



Segment overview – healthcare services

Healthcare services is the largest provider of healthcare services in Georgia and operates a vertically integrated network of 36 hospitals and 10 ambulatory clinics

Key Highlights

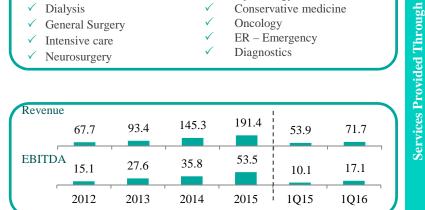
- Provides a comprehensive range of inpatient and outpatient healthcare services
- 26.7% market share by number of beds, 5x the size of the nearest competitor
 - 2,686 beds in total
- 3 2,762 physicians and 2,706 nursing staff⁽¹⁾

Medical **Specialties**

- Cardiology
- Cardiovascular surgery
- Dialysis
- General Surgery
- Intensive care
- Neurosurgery

- Traumatology orthopedics
- Gynecology
- Conservative medicine
- Oncology
- ER Emergency
- Diagnostics

Key Financials (GELm)



Hospital **Development /** M&A Track Record

	Developed / Greenfield	Acqusition
2008-2011	3 ambulatory	11 hospitals
2012	6 hospitals	10 hospitals
2013	4 hospitals + 1 ambulatory	3 hospitals
2014	1 ambulatory	6 hospitals
2015	5 ambulatory	2 hospitals
	-	_

Referral and Specialty Hospitals

Provides secondary or tertiary level outpatient and inpatient diagnostic, surgical and treatment services

of facilities: 16

Community Hospitals

Provides basic outpatient and inpatient diagnostic, surgical and treatment services

of facilities: 20

Ambulatory Clinics

- Provides outpatient diagnostic and treatment services
- High margin business

of facilities: 10

Refers patients for inpatient / outpatient services Refers patients for secondary or tertiary level treatment



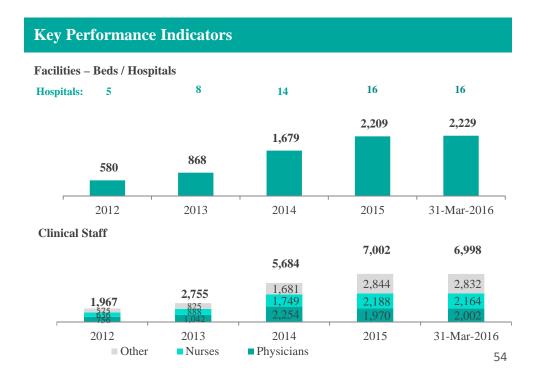
Overview of referral hospitals

Overview

- GHG owns and operates 16 referral and specialty hospitals, with a total of 2,229 beds
 - Contributed ~87.% of healthcare services revenue in 1016
 - 66.7% bed utilisation in 1Q16
 - Average length of stay in 1Q16-5.2
- Hospitals are located in Tbilisi and major regional cities and provide secondary or tertiary level outpatient and inpatient diagnostic, surgical and treatment services
 - Hospitals serve as hubs for patients within a given region
- Services are typically priced at an average 10-15% higher than community hospitals
- 6,998 employees, of which 2,002 physicians and 2,164 nurses (1)
 - On average 437 employees per hospital, of which 125 physicians and 135 nurses

Referral Hospitals Revenue (GELm)





Source: GHG Internal reporting.

Referral hospitals - selected financial and operating data

#	Name of Referral Hospital	Number of operating beds as at 31 March 2016	Utilization % during 1Q16	Net Revenue 1Q16 (Gel mln)	Net Revenue 1Q15 (Gel mln)	Change,
1	KNMC	220	87.2%	8.3	7.3	12.8%
2	Iashvili Paediatric Tertiary	266	73.3%	6.6	5.4	23.7%
3	Children's new ²	110	101.2%	4.7	3.9	20.5%
4	HTMC Hospital ¹	450	71.4%	10.8	n/a	n/a
5	Batumi Regional	134	68.2%	4.1	3.6	12.9%
6	Zugdidi Regional	186	56.4%	3.5	3.3	6.7%
7	Kutaisi	124	77.2%	3.0	2.5	21.5%
8	Caraps Speciality	60	22.2%	2.1	2.5	-15.1%
9	Batumi Paediatric Regional	120	84.8%	2.4	1.9	25.1%
10	Traumatology	60	49.9%	2.0	2.2	-7.1%
11	Sunstone ²	152	26.9%	1.1	1.3	-15.2%
12	Telavi	70	49.4%	1.1	0.8	33.2%
13	Akhaltsikhe	70	31.2%	0.7	0.6	16.8%
14	New Life	82	31.5%	0.5	0.5	2.8%
15	Saint Nikolozi Surgery and Oncology	45	17.8%	0.5	0.4	22.3%
16	Deka ¹	80	n/a	0.5	-	n/a
	Inter-hospital eliminations and other revenue			0.0	(0.0)	
	Total	2,229	66.7%	52.0	36.2	43.5%

Note 1: HTMC and Deka was acquired during second half of 2015

Note 2: Because of high demand, several beds were added temporarily during 1Q16, with the permit of Government, that caused the utilization over 100%.

Sources: GHG Internal Reporting



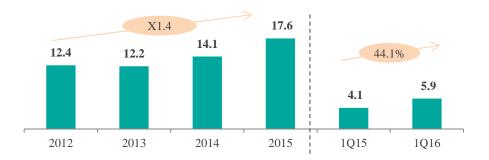
Overview of community hospitals

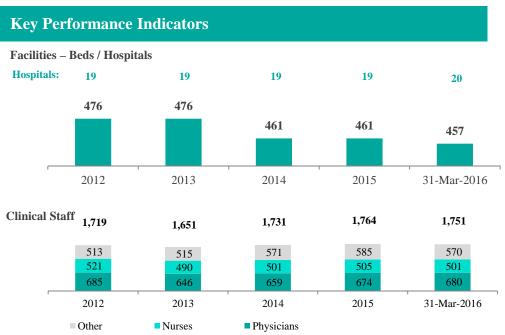
Overview

- **GHG** owns and operates 20 hospitals and 457 beds⁽¹⁾
 - Contributed ~10% of healthcare services revenue in 1Q16
 - 26.6% bed utilisation in 1Q16
 - Average length of stay in 1Q16 3.0
- Located in regional towns and municipalities and offer basic outpatient and inpatient diagnostic, surgical and treatment services to the local population
- Referral hierarchical clinical system allows for patients to benefit from the entire treatment pathway to referral hospitals for secondary or tertiary level treatment
- Services are typically priced at an average 10-15% lower than referral hospitals
- 1,751 employees, of which 680 physicians and 501 nurses
 - On average 92 employees per hospital, of which 36 physicians and 26 nurses

Community Hospitals Revenue (GELm)

GEL millions





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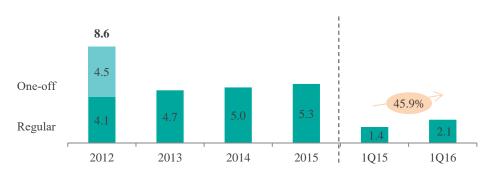
Overview of ambulatory clinics

Overview

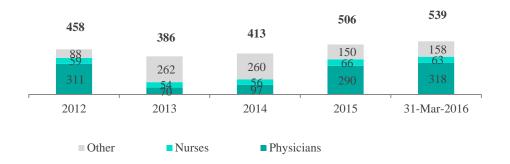
- Opened the first ambulatory clinic in 2006; since then the company has acquired and integrated 5 facilities
- Operates 10 ambulatory clinics that provide outpatient diagnostic and treatment services⁽¹⁾
 - Contributed ~3% of healthcare services revenue in 1Q16
 - Generates the highest margin and management believes this segment will become the largest source of future growth
- Clinics are located in Tbilisi and major regional cities
- Currently developing networks of clinics organised in cluster models, whereby each cluster includes a district ambulatory clinic, located centrally in a particular district of the city, and three to five smaller express ambulatory clinics, located in other areas of the same district
 - Serves as the first feeder into the patient treatment pathway
- Strategy of aggressive rollout with the launch of 20-30 clinics over the next 2-3 years
- § 539 employees, of which 318 are physicians and 63 are nurses
 - On average 54 employees per clinic

Revenue (GELm)

GEL millions



Clinical Staff





Quality standards and accreditation

Quality Standards

- Reputation for high clinical standards
- Recruiting high-calibre and experienced physicians and providing them with ongoing professional development in the latest global best practices
- Developed internal quality requirements: the healthcare services Quality Standards (EQS)
 - Benchmark based on JCI and EU standards and adoption of global best practices
 - Focus on evidence based quality care such as infection control, medication safety, facility safety and quality of medical service
 - Audited on regular basis
 - Implemented across all facilities by end of 2015
- Accreditations received by the Company include:

ISO 9001:2008 - Accredited to GHG's key referral hospitals in Tbilisi, Kutaisi and Batumi

First and only Georgian healthcare company working towards JCI accreditation

Adopted infection control procedures in partnership with outside consultants including JCI Consultancy, CDC Atlanta, Emory University and the WHO



New Training Centre

- New training facility opened in 2014 in Kutaisi
- Partnerships including with Partners for International Development and the Tbilisi State Medical University
- Teaching up-to-date guidelines and protocols as well as clinical complications
- Training courses include emergency medicine, nursing care, obstetrics and gynaecology, IT and ICU
- Can serve over 150 students per day
- Modern infrastructure and practical/simulation skills labs
- In 2015 healthcare services lunched residency programs in 8 medical directions/specialties: Anesthesiology and ICU; Obstetrics and Gynecology; Laboratory Medicine; Pediatrics; Neonatology; Children's Emergency Care (ICU); Children's Neurology; Children's cardio Enterology
- Healthcare services signed MOU with Tvildiani Medical university and established mutual nurse collage. More than 200 nurses will graduate collage per year.
- Healthcare services learning Center (ELC) also developed external nurse courses in 4 regions (Adjaria, Samegrelo, Imereti and Samtskhe-Javakheti) of Georgia, where more than 200 new nurses from external institutions started their trainings
- In 2015 healthcare services financed and organized specialization program abroad for 6 persons to launch the first Oncology center in the western of Georgia
- In 2015 healthcare services also financed Emergency retraining program for 20 doctors from the different regions of Georgia



Overview of medical insurance

Medical insurance overview

- Medical insurance is a significant synergistic contributor to healthcare services outpatient strategy. It helps to easily rollout the network of new ambulatory clinics. Having the largest share in privately insured individuals market in the country, it stipulates the flow of insured patients to newly opened outpatient facilities practically from day one.
- Largest provider of medical insurance in Georgia with a 38% market share
- Customer base comprises:
 - Employers who purchase coverage for their staff
 - Self-pay individuals, principally middle and upper income Georgians
- Managed independently from healthcare services but shares some centralised functions

Key Services Offered

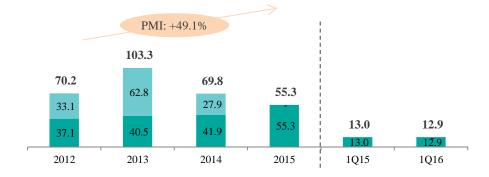
- Broad range of insurance packages to cover the costs of inpatient, outpatient, dental, pregnancy, and oncology treatment and medicine
- Oifferent monthly premiums and coverage limits based on individual requirements
- Shift in focus to selling private medical insurance due to the impact of the introduction of the UHC on state-funded insurance
- Rey part of the vertically integrated business model medical insurance converts insurance claims into revenue for the healthcare services business

Key Performance Indicators

<u>KPI</u>	<u>1Q16</u>
Loss Ratio	92.4%
Expense Ratio	14.7%
Combined Ratio	107.1%
Insurance renewal rate (corporate clients)	88.5%

Net insurance premiums earned

GEL millions



■SIP ■PMI



Healthcare infrastructure reform

GHG healthcare facilities

Before





After





Note: pictures are from GHG healthcare facilities



Healthcare infrastructure reform

GHG healthcare facilities

















GHG | 1Q16 financial results

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Income Statement		Heal	thcare serv	vices			Med	lical insura	nce		E	iminations	<u>s</u>			Total		
GEL thousands; unless otherwise noted	1Q16	1Q15	Change, Y-o-Y	4Q15	Change, Q-o-Q	1Q16	1Q15	Change, Y-o-Y	4Q15	Change, Q-o-Q	1Q16	1Q15	4Q15	1Q16	1Q15	Change, Y-o-Y	4Q15	Change, Q-o-Q
Revenue, gross	60,451	42,745	41.4%	55,481	9.0%	12,936	12,992	-0.4%	14,532	-11.0%	(1,705)	(1,862)	(1,293)	71,682	53,875	33.1%	68,720	4.3%
Corrections & rebates	(410)	(957)	-57.2%	(1,086)	-62.2%	-	-	-	-	-	-	-	-	(410)	(957)	-57.2%	(1,086)	-62.2%
Revenue, net	60,041	41,788	43.7%	54,395	10.4%	12,936	12,992	-0.4%	14,532	-11.0%	(1,705)	(1,862)	(1,293)	71,272	52,918	34.7%	67,634	5.4%
Cost of services	(32,998)	(24,273)	35.9%	(30,007)	10.0%	(11,953)	(10,837)	10.3%	(12,917)	-7.5%	1,694	1,771	1,306	(43,257)	(33,339)	29.7%	(41,618)	3.9%
Cost of salaries and other employee benefits	(19,752)	(15,092)	30.9%	(18,256)	8.2%	-	-	-	-	-	565	675	449	(19,187)	(14,417)	33.1%	(17,807)	7.7%
Cost of materials and supplies	(9,613)	(6,482)	48.3%	(8,871)	8.4%	-	-	-	-	-	275	290	240	(9,338)	(6,192)	50.8%	(8,631)	8.2%
Cost of medical service providers	(428)	(468)	-8.5%	(593)	-27.9%	-	-	-	-	-	12	21	13	(416)	(447)	-6.9%	(580)	-28.3%
Cost of utilities and other	(3,205)	(2,231)	43.7%	(2,287)	40.1%	-	-	-	-	-	92	100	60	(3,113)	(2,131)	46.1%	(2,227)	39.8%
Net insurance claims incurred	-	-	-	-	-	(11,953)	(10,837)	10.3%	(12,917)	-7.5%	750	685	544	(11,203)	(10,152)	10.4%	(12,373)	-9.5%
Gross profit	27,043	17,515	54.4%	24,388	10.9%	983	2,155	-54.4%	1,615	-39.1%	(11)	(91)	13	28,015	19,579	43.1%	26,016	7.7%
Salaries and other employee benefits	(6,115)	(5,314)	15.1%	(6,178)	-1.0%	(819)	(1,036)	-20.9%	(636)	28.8%	11	91	4	(6,923)	(6,259)	10.6%	(6,810)	1.7%
General and administrative expenses	(2,483)	(1,778)	39.7%	(2,219)	11.9%	(719)	(621)	15.8%	(839)	-14.3%	-	-	-	(3,202)	(2,399)	33.5%	(3,058)	4.7%
Impairment of healthcare services, insurance	(858)	(831)	3.2%	(460)	86.5%	(122)	(103)	18.4%	(152)	-19.7%				(980)	(934)	4.9%	(612)	60.1%
premiums and other receivables	(030)	(631)	3.270	(400)	80.370	(122)	(103)	10.470	(132)	-19.770	-	-	-	(980)	(334)	4.770	(012)	00.170
Other operating income	241	78	209.0%	1,008	-76.1%	(21)	47	NMF	(5)	320.0%	-	-	(17)	220	125	76.0%	986	-77.7%
EBITDA	17,828	9,670	84.4%	16,539	7.8%	(699)	442	NMF	(17)	NMF	-	-	-	17,129	10,112	69.4%	16,522	3.7%
EBITDA margin	29.5%	22.6%		29.8%		-5.4%	3.4%		-0.1%		-	-		23.9%	18.8%		24.0%	
Depreciation and amortization	(4,261)	(2,186)	94.9%	(4,046)	5.3%	(204)	(136)	50.0%	(249)	-18.0%	-	-	-	(4,465)	(2,322)	92.3%	(4,295)	4.0%
Net interest (expense) / income	(2,259)	(4,073)	-44.5%	(5,535)	-59.2%	603	(28)	NMF	158	282.4%	-	-	-	(1,656)	(4,101)	-59.6%	(5,377)	-69.2%
Net (losses) / gains from foreign currencies	(411)	2,907	NMF	(1,586)	-74.1%	151	497	-69.6%	(6)	NMF	-	-	-	(260)	3,404	NMF	(1,592)	-83.7%
Net non-recurring (expense) / income	1,968	(211)	NMF	484	306.3%	-	-	-	(676)	NMF	-	-	-	1,968	(211)	NMF	(192)	NMF
Profit before income tax expense	12,865	6,107	110.7%	5,856	119.7%	(149)	775	NMF	(790)	-81.1%	-	-	-	12,716	6,882	84.8%	5,066	151.0%
Income tax (expense) / benefit	(712)	(491)	45.0%	(206)	245.1%	19	(116)	NMF	192	-90.1%	-	-	-	(693)	(607)	14.2%	(14)	NMF
Profit for the period	12,153	5,616	116.4%	5,650	115.1%	(130)	659	NMF	(598)	-78.3%	-	-	-	12,023	6,275	91.6%	5,052	138.0%
Attributable to:																		
- shareholders of the Company	10.051	5.073	98.1%	4.421	127.3%	(130)	659	NMF	(598)	-78.3%	_	_	_	9,921	5,732	73.1%	3,823	159.5%
- non-controlling interests	2,102	543	287.1%	1,229	71.0%	-	-	_	-	_	_	_	_	2,102	543	287.1%	1,229	71.0%
samonning military	2,102	5.5	207.17,0	-,>	, 1.0,0									2,102	0.0	207.17,0	1,227	, 1.0,0

Sources: GHG Internal Reporting



Revenue by business line

(GEL thousands, unless otherwise noted)	<u>1Q16</u>	<u>1Q15</u>	Change, Y-o-Y	<u>4Q15</u>	Change, Q-o-Q
Healthcare service revenue, gross	60,451	42,745	41.4%	55,481	9.0%
Corrections & rebates	(410)	(957)	-57.2%	(1,086)	-62.2%
Healthcare services revenue, net	60,041	41,788	43.7%	54,395	10.4%
Referral and specialty hospitals	52,026	36,244	43.5%	48,565	7.1%
Community hospitals	5,920	4,108	44.1%	4,291	38.0%
Ambulatory clinics	2,095	1,436	45.9%	1,539	36.2%
Net insurance premiums earned	12,936	12,992	-0.4%	14,532	-11.0%
Private medical insurance products sold to retail clients	1,599	1,158	38.1%	1,540	3.8%
Private medical insurance products sold to corporate clients	11,337	11,834	-4.2%	12,992	-12.7%
Eliminations	(1,705)	(1,862)	-8.4%	(1,293)	31.9%
Total revenue, gross	71,682	53,875	33.1%	68,720	4.3%

Revenue by sources of payment

(GEL thousands, unless otherwise noted)	1Q16	1Q15	Change, Y-o-Y	4Q15	Change, Q-o-Q
Healthcare service revenue, gross	60,451	42,745	41.4%	55,481	9.0%
Corrections & rebates	(410)	(957)	-57.2%	(1,086)	-62.2%
Healthcare services revenue, net	60,041	41,788	43.7%	54,395	10.4%
Government-funded healthcare programs	45,377	31,169	45.6%	43,130	5.2%
Out-of-pocket payments by patients	11,426	8,074	41.5%	8,811	29.7%
Private medical insurance companies	3,238	2,545	27.2%	2,454	31.9%
Net insurance premiums earned	12,936	12,992	-0.4%	14,532	-11.0%
Private medical insurance products	12,936	12,992	-0.4%	14,532	-11.0%
Eliminations	(1,705)	(1,862)	-8.4%	(1,293)	31.9%
Total revenue, gross	71,682	53,875	33.1%	68,720	4.3%

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GHG | 1Q16 financial results

Cost of services and Gross profit

(GEL thousands, unless otherwise noted)	1Q16	1Q15	Change, Y-o-Y	4Q15	Change, Q-o-Q
Cost of healthcare services	(32,998)	(24,273)	35.9%	(30,007)	10.0%
Cost of salaries and other employee benefits	(19,752)	(15,092)	30.9%	(18,256)	8.2%
Cost of materials and supplies	(9,613)	(6,482)	48.3%	(8,871)	8.4%
Cost of medical service providers	(428)	(468)	-8.5%	(593)	-27.9%
Cost of utilities and other	(3,205)	(2,231)	43.7%	(2,287)	40.1%
Net insurance claims incurred	(11,953)	(10,837)	10.3%	(12,917)	-7.5%
Eliminations	1,694	1,771	-4.3%	1,306	29.7%
Total cost of services	(43,257)	(33,339)	29.7%	(41,617)	3.9%
Gross profit	28,015	19,579	43.1%	26,016	7.7%
Gross margin	39.1%	36.3%		37.9%	

Operating expense and EBITDA

(GEL thousands, unless otherwise noted)	1Q16	1Q15	Change, Y-o-Y	4Q15	Change, Q-o-Q
Operating expense of healthcare service business	(9,456)	(7,923)	19.3%	(8,857)	6.8%
Salaries and other employee benefits	(6,115)	(5,314)	15.1%	(6,178)	-1.0%
General and administrative expenses	(2,483)	(1,778)	39.7%	(2,219)	11.9%
Impairment of healthcare services receivables	(858)	(831)	3.2%	(460)	86.5%
Operating expense of medical insurance business	(1,660)	(1,760)	-5.7%	(1,627)	2.0%
Eliminations	11	91	-87.9%	4	175.0%
Total operating expense	(11,105)	(9,592)	15.8%	(10,480)	6.0%
Other operating income	220	125	76.0%	986	-77.7%
EBITDA, Of which:	17,129	10,112	69.4%	16,522	3.7%
EBITDA of healthcare services business	17,828	9,670	84.4%	16,539	7.8%
EBITDA margin of healthcare service business	29.5%	22.6%		29.8%	

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Balance sheet

Balance Sheet		Heal	lthcare ser	vices			Med	ical insura	nce		E	limination	<u>is</u>			Total		
GEL thousands; unless otherwise noted			Change,		Change,			Change,		Change,						Change,		Change,
GEE inousanas, uniess oinerwise noiea	Mar-16	Mar-15	Y-o-Y	Dec-15	Q-0-Q	Mar-16	Mar-15	Y-o-Y	Dec-15	Q-o-Q	Mar-16	Mar-15	Dec-15	Mar-16	Mar-15	Y-o-Y	Dec-15	Q-o-Q
Total assets, of which:	670,861	365,689	83.5%	703,309	-4.6%	75,493	76,669	-1.5%	67,372	12.1%	(8,539)	(7,234)	(12,400)	737,815	435,124	69.6%	758,280	-2.7%
Cash and bank deposits	52,408	13,378	291.7%	139,085	-62.3%	12,996	16,829	-22.8%	18,313	-29.0%	-	-	-	65,404	30,207	116.5%	157,398	-58.4%
Receivables from healthcare services	78,034	51,317	52.1%	71,348	9.4%	-	-	-	-	-	(4,284)	(2,765)	(5,485)	73,750	48,552	51.9%	65,863	12.0%
Insurance premiums receivable	-	-	-	-	-	39,042	37,412	4.4%	20,948	86.4%	-	(207)	(285)	39,042	37,205	4.9%	20,663	88.9%
Property and equipment	481,969	265,856	81.3%	439,131	9.8%	5,672	4,886	16.1%	5,587	1.5%	-	-	-	487,641	270,742	80.1%	444,718	9.7%
Goodwill and other intangible assets	19,433	6,190	213.9%	19,708	-1.4%	6,097	3,940	54.7%	6,079	0.3%	-	-	-	25,530	10,130	152.0%	25,787	-1.0%
Other assets	39,017	28,948	34.8%	34,037	14.6%	11,686	13,602	-14.1%	16,445	-28.9%	(4,255)	(4,262)	(6,630)	46,448	38,288	21.3%	43,851	5.9%
Total liabilities, of which:	214,166	207,158	3.4%	247,762	-13.6%	56,192	58,147	-3.4%	47,937	17.2%	(8,539)	(7,234)	(12,400)	261,819	258,071	1.5%	283,299	-7.6%
Borrowings	92,336	151,689	-39.1%	140,439	-34.3%	11,775	15,956	-26.2%	16,497	-28.6%	(4,255)	(3,924)	(4,173)	99,856	163,720	-39.0%	152,762	-34.6%
Accounts payable	36,533	13,942	162.0%	29,160	25.3%	832	-	NMF	1,016	-18.1%	-	-	-	37,365	13,942	168.0%	30,176	23.8%
Insurance contract liabilities	-	-	-	-	-	39,431	38,168	3.3%	22,463	75.5%	(2,496)	(2,697)	(1,112)	36,935	35,471	4.1%	21,351	73.0%
Other liabilities	85,297	41,527	105.4%	78,163	9.1%	4,154	4,023	3.3%	7,961	-47.8%	(1,788)	(613)	(7,115)	87,663	44,938	95.1%	79,010	11.0%
Total shareholders' equity	456,695	158,531	188.1%	455,547	0.3%	19,301	18,522	4.2%	19,435	-0.7%	-	-	-	475,996	177,053	168.8%	474,981	0.2%
Attributable to:																		
Shareholders of the Company	409,504	135,428	202.4%	399,547	2.5%	19,301	18,522	4.2%	19,435	-0.7%	-	-	-	428,805	153,950	178.5%	418,981	2.3%
Non-controlling interest	47,191	23,103	104.3%	56,000	-15.7%	-	-	-	-	-	-	-	-	47,191	23,103	104.3%	56,000	-15.7%

Note: healthcare services business and medical insurance business financials do not include interbusiness eliminations.



Sources: GHG Internal Reporting

Selected ratios and KPIs

Selected ratios and KPIs	1Q16	1Q15	4Q15
GHG			
EPS, GEL	0.08	NMF^1	NMF^1
ROAE	9.4%	15.2%	5.0%
Adjusted ROAE	16.5%	15.2%	7.8%
Operating leverage	27.3%	-11.2%	6.6%
Group rent expenditure	(405)	(336)	(527)
Group capex (maintenance)	(2,537)	(1,887)	(3,767)
Group capex (growth)	(14,357)	(13,596)	(30,489)
Number of employees	9,747	8,177	9,709
Number of physicians	2,762	2,411	2,705
Number of nurses	2,706	2,274	2,738
Nurse to doctor ratio	0.98	0.94	1.01
Total number of shares	131,681,820		
Less: Treasury shares	(3,500,000)		
Shares outstanding	128,181,820	28,334,829	
Of which:	120,101,020	20,55 1,025	
Total free float	42,550,000		
Primary shares issued in IPO	38,681,820		
Secondary shares sold to the market	3,868,180		
Shares held by BGEO GROUP PLC	85,631,820		
Healthcare services			
EBITDA margin of healthcare services	29.5%	22.6%	29.8%
Direct salary rate (direct salary as % of revenue)	32.7%	35.3%	32.9%
Materials rate (direct materials as % of revenue)	15.9%	15.2%	16.0%
Administrative salary rate (administrative salaries as % of revenue)	10.1%	12.4%	11.1%
SG&A rate (SG&A expenses as % of revenue)	4.1%	4.2%	4.0%
Number of hospitals	46	39	45
Number of beds	2,686	2,140	2,670
Average number of referral hospital beds	2,229	1,679	2,209
Bed occupancy rate	60.4%	54.2%	51.9%
Bed occupancy rate, referral hospitals	66.7%	61.4%	59.9%
Bed occupancy rate, community hospitals	26.6%	23.8%	18.4%
Average length of stay (days)	4.9	4.6	4.7
Average length of stay (days), referral hospitals	5.2	4.9	5.0
Average length of stay (days), community hospitals	3.0	2.9	2.7
Medical insurance			
Loss ratio	92.4%	83.4%	88.9%
Expense ratio	14.7%	14.9%	13.8%
Combined ratio	107.1%	98.3%	102.7%
Renewal rate	88.5%	74.2%	92.0%



Tbilisi referral hospital - Sunstone

Before





After







Referral and diagnostics hospital - DEKA

Before





After



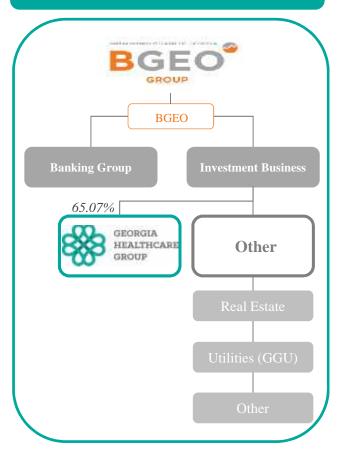




Premium LSE listed parent group, with c.95% institutional shareholder base and strong track record for growth

65.07% Subsidiary of BGEO Group, holding company of Bank of Georgia - the leading bank in Georgia by total assets, total loans and client deposits

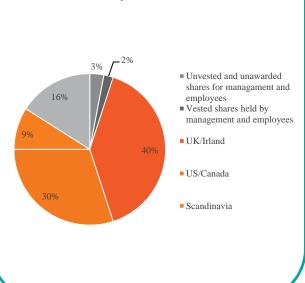
BGEO Group Structure



Diversified 95% Institutional Shareholder Base

Included in FTSE 250 and FTSE All-share Index Funds

As of 31 DEC 2015, BGEO's shareholder structure was as follows:



GHG Governance Is Lift & Drop Of BGEO Governance

Our governance philosophy:

- Our Chairman and CEO positions are separate and will not be filled by a single person
- We want our senior executives focused on our business and not involved in potential conflicts, so they are not allowed to hold equity interests in any Georgian company without express Board approval
- We want a diverse Board both in terms of experience, geographic origin and gender
- Board members should do site visits and attend an offsite meeting with Management at least once a year to better understand the business and influence strategy
- **Remuneration policy** senior officers receive remuneration based on two components:
- Salary, which includes both a modest cash sum and deferred share compensation which vests over a fiveyear period; and
- A discretionary award, payable 100% in deferred share compensation vesting over a two-year period, which is dependent on both Group performance and the executive achieving his KPIs.



GEORGIA HEALTHCARE GROUP

This presentation contains forward-looking statements that are based on current beliefs or expectations, as well as assumptions about future events. These forward-looking statements can be identified by the fact that they do not relate only to historical or current facts. Forward-looking statements often use words such as anticipate, target, expect, estimate, intend, plan, goal, believe, will, may, should, would, could or other words similar meaning. Undue reliance should not be placed on any such statement because, by their very nature, they are subject to known and unknown risks and uncertainties and can be affected by other factors that could cause actual results, and Georgia Healthcare Group PLC and its subsidiaries (the "GHG Group") plans and objectives, to differ materially from those expressed or implied in the forward-looking statements.

There are various factors which could cause actual results to differ materially from those expressed or implied in forward-looking statements. Among the factors that could cause actual results to differ materially from those described in the forward-looking statements are changes in the global, political, economic, legal, business and social environment. The forward-looking statements in this presentation speak only as of the date of this presentation. The GHG Group undertakes no obligation to revise or update any forward-looking statement contained within this presentation, regardless of whether those statements are affected as a result of new information, future events or otherwise.