Key Investment Highlights

1. Acknowledged leader in key medical specialties leading to best-in-class revenue per bed
2. Largest private hospital networks in Indonesia spread across 28 cities throughout the entire archipelago
3. Strong improvement in all aspects of financial results since the consolidation strategy in 2019
4. Sustainable growth strategy and highly qualified management
5. Significant turnaround in ramping up hospital performance
6. Strong focus on corporate governance and sustainability initiatives
A Brief Introduction on Siloam Hospitals Group

40 Hospitals across 28 cities in Indonesia

1st hospital in Indonesia to be certified with Joint-Commission International (JCI)

Vision

Godly Compassion
Reach
Scale
International Quality

Mission

“The trusted destination of choice for holistic world class healthcare, health education, and research”
Siloam Hospitals - Largest Private Hospital Network in Indonesia Covering over 50% of Population

- **Jakarta & Greater Jakarta**
  1. Lippo Village
  2. RSUS
  3. Kebon Jeruk
  4. MRCCC
  5. TB Simatupang
  6. Kelapa Dua
  7. Mampang
  8. ASRI
  9. Cinere

- **West Java**
  1. Hosana Bekasi
  2. Lippo Cikarang
  3. Bogor
  4. Purwakarta
  5. Cirebon
  6. Syubannul Wathoni (Magelang)
  7. Yogyakarta
  8. Semarang
  9. Bekasi Timur & Sentosa

- **Other**
  1. Medan
  2. Banjarmasin
  3. Ambon
  4. Surabaya
  5. Surabaya
  6. Balikpapan
  7. Yogyakarta
  8. BIMC Kuta & Nusa Dua
  9. Cirebon

Data 31 of December 2021

*Operational and financial data for hospital units only

- **Operational Beds**: 3,687
- **GPs, Specialists and Dentists**: 3,437
- **Nurses and Medical Staff**: 8,146
- **60 Siloam Clinics**: (30 stand alone with 6 clinics in Papua)
Acknowledged Leader in Medical Practices

Leader in the Following Specialties
- Urology
- Pulmonology (Respiratory)
- Oncology
- Neurology
- Cardiology

Medical Accomplishments
- Siloam ASRI – conducted the 100th successful kidney transplant surgery
- Siloam Hospitals Sriwijaya – successfully performed 100th births through Blastula IVF clinic
- Siloam Hospitals TB Simatupang – received Gold Status from World Stroke Organization (WSO) in handling stroke patients
- MRCCC – awarded as the most medical webinar conducted with the most specialists for education to oncology treatment in Indonesia by Museum of National Records (MURI)

Best in Class Average Revenue Per Bed

<table>
<thead>
<tr>
<th>Hospital</th>
<th>ARPOB FY2020 (IDR bn)</th>
</tr>
</thead>
<tbody>
<tr>
<td>SILO</td>
<td>3.1</td>
</tr>
<tr>
<td>Hospital A</td>
<td>2.2</td>
</tr>
<tr>
<td>Hospital B</td>
<td>1.7</td>
</tr>
</tbody>
</table>
FY21 Financial Results Summary

- **Revenue** increased 33% to IDR7.6tn in FY21 vs FY20
- **EBITDA** grew 64% to IDR1.96tn in FY21 vs FY20
- **Net Profit** increased 459% to IDR700bn in FY21 vs FY20

- **EBITDA Margin** expanded to 26% from 22% in FY21 vs FY20
- **Net Profit Margin** grew to 9% from 2% in FY21 vs FY20

**Free Cash Flow** at IDR1.5tn in FY21

**Net Cash Position** of IDR1.9n in FY21

*Revenue referred to 'Non-Specialist Revenue' in Statutory Report*
Revenue per Patient Days and Outpatient Visits

Average Revenue per Inpatient Days (in IDR mn)

- FY20: 5.8
- FY21: 7.3 (+26%)

Average Revenue per Outpatient Visits (in IDR mn)

- FY20: 1.3
- FY21: 1.6 (+17%)

Average Revenue per Inpatient Days (in IDR mn)

- 4Q19: 5.1
- 4Q21: 6.9 (+36%)

Average Revenue per Outpatient Visits (in IDR mn)

- 4Q19: 1.0
- 4Q21: 1.4 (+43%)
Key Operational KPI’s are strengthening rapidly. Surgeries in 4Q2021 were 43% higher than in 4Q2020. Siloam has seen a strong and steady increase in surgeries since July 2021.

In December 2021 and January 2022, Siloam had consecutively higher surgeries and exceeded any other months both during and prior to COVID.

Inpatient admissions and Outpatient visits continued to climb with every consecutive month having higher volume than the month prior since July 2021.

As the impact of COVID subsides in 2022, it’s expected that operational KPI’s will continue to strengthen.
The prevalence of COVID in the 4th quarter was significantly reduced.

In the 4th quarter we treated 299 COVID patients compared with 6,925 in the 3rd quarter 2021.

While there has been a spike in COVID cases in the 1st quarter of 2022 the severity of these cases has significantly been lower than during the Delta strain in the middle of 2021.

We expect COVID to move from pandemic to endemic and future strains will likely have a lower impact on society than those in the past.
Continue to Perform COVID Testing for Indonesia

- **Antibody**
  - Rapid Antibody Test
  - Immunology Test

- **Antigen**
  - Rapid Antigen Test
  - Swab RT-PCR

- **Molecular**
  - RT-PCR
  - Molecular Isothermal (ID Now)

Serology Qualitative
Serology Quantitative

>3.4mn Rapid and Serology tests

>942k PCR and Isothermal tests

*Data as of 31 Dec 2021*
The 4th quarter was the first quarter since the beginning of COVID that truly reflects the strength of our business in a post-COVID operating environment.

*MoH: revenue from COVID reimbursement from government
Siloam strengthened and continued to invest in its clinical capabilities especially in the areas of Oncology, Cardiology and Neurology. We want to get to the point where all Indonesians can expect the same medical outcomes as people have in developed nations.
Recovery of Tourism – Siloam Bali Hospitals

In 2019 our Bali hospitals contributed 214 billion in EBITDA. In 2021 these same hospitals contributed only 73 billion in EBITDA. As travelers return in the coming months, we expect to see a rapid acceleration in the EBITDA contribution from our hospitals in Bali. By 2023 we expect this EBITDA gap to be completely closed and for these hospitals to contribute even more than in 2019.
Investing in Regional Areas of Indonesia

In the past we made some bold decisions about opening hospitals outside of Jakarta. We chose to invest in some areas of the country that had desperate shortages of doctors and hospitals and areas which our market peers may have chosen not to invest. As our profits from these hospitals increase, we can invest more in the hospitals capabilities and be able to serve more and more patients.
Hospital in Focus – Siloam Hospitals Kupang

One of the areas we’ve chosen to invest in is Kupang, East Nusa Tenggara. Despite being the capital province of East Nusa Tenggara, Kupang city is one of the lowest demographics zones in Indonesia.

Siloam opened a hospital in Kupang city in 2014. In our first full year of operations in 2015, Siloam Kupang treated 26 thousand patients and had EBITDA of Rp1bn. In 2021 Siloam Kupang treated 91 thousand patients and had EBITDA of Rp29bn.
Siloam Hospitals Digital Initiatives
Siloam has integrated a Hospital Information System which enable us to leverage the advantage of having the largest private hospital network with some of the best expertise in Indonesia. This system manages some of the most crucial functions such as billing management, patient management, back office management and clinical system.

**Patients Management - HOPE System**

HOPE system manage patient information from all of our patient channels (My Siloam, Call Centre, Website) including administration, appointments and billing cycle. It allows for a single patient ID across the Group.

**Patient Management - Electronic Medical Record (EMR)**

With the implementation of EMR, Siloam can have better patient continuity of care by enabling our doctors and caregivers to access digital patient records.

**Back Office Management - Electronic Resources Planning (ERP) and Clinical System**

Through implementation of ERP, Siloam is able to take benefits of technology including operate as a group via the single platform, especially in group purchasing, standard system process and enable efficiency through process improvement and automation.

**Patients Channels**

- MySiloam App
- Siloam Website (www.siloamhospitals.com)
- Call Center – 1 500 911
Siloam continues to develop its mobile application called MySiloam. This application improves the efficiency and helps patients to receive a seamless experience where the online function directly enhances Siloam’s offline services.

MySiloam enables our patients to make an appointment with our doctors, whether it is an offline or online consultation which can be accessed within the application. Regardless of the consultation method, patients and doctors can access central medical records.

Patients can use the MySiloam application as a virtual assistant when they are visiting our hospitals.

This feature streamlines the patients’ journey by enabling touchless check in and virtual queue lines, thus improving patient experience.
Increased Contributions from Digital Patient Acquisition

Digitally acquired patients contributed about **15%** of total patients in January 2022.

Digitally acquired Medical Check-Ups grew **546%** in 2021 compared to 2020.

Digitally acquired patients contributed around 6% of throughput in January 2021 and by January 2022 the contribution went up to 15%. Jakarta city tracks 25% on digitally acquired throughput. These numbers will continue to grow and the likely impact for the business is a continued growth in patient volumes.

Digitally acquired medical check-ups have grown exponentially throughout 2021. Medical check-ups acquired through our online application grew 546% in 2021 compared with 2020. We expect growth in digitally acquired medical check-ups to continue accelerating through 2022.
Siloam’s **Strategy and Initiatives**
Managements have a strong focus on maximizing the value of our existing assets. To ensure that we maximize the value of all our hospitals we must always prioritize the patient experience to ensure that our patients have a best-in-class service. We strive to recruit, develop and retain the best doctors in Indonesia to ensure that our patients are being taken care of by highly skilled medical professionals. We proactively look for partnerships that can add value to our existing business and create new opportunities. We regularly review each of our hospitals with an eye to optimize efficiency/profitability and productivity. In addition to medical staff Siloam has firm human capital policies and procedures to ensure that we recruit and retain high caliber talent to run our business.

Siloam invests heavily in clinical programs which we believe will create the most value for both patients and our stakeholders. We establish centers for excellence at our hospitals which are medical programs where we offer holistic and thorough medical expertise in a medical specialization. As our centres of excellence become recognized as experts in certain medical fields then the number of patients, we begin to receive patients coming from areas outside the hospital’s traditional geographic catchment areas. Siloam leverages new and innovative technologies to improve access and affordability of quality care across its extensive network.

Expanding our hospital network isn’t only done by opening new hospitals but also by seeking to meet patient demand in our existing hospitals. We seek to maximize the utilization of hospital floor area. This can be done by renovating existing hospital units or opening new wards. In addition to maximizing floor space used we seek to maximize the utilization of equipment to ensure that our technology being effectively utilized across our hospital network. Siloam will continue to selectively open new hospitals through strategic developments and acquisition opportunities.

Siloam collaborates with leading technology partners to build world-class ICT capabilities. We use digital health platforms to continue improving patient safety, patient satisfaction and operational excellence. To support our target to become the most technologically advanced hospital in Indonesia, we continue to invest in building our ICT Infrastructure that is resilient, robust, reliable, and secure. Siloam is using extensive digital tools to enhance service delivery, improve patient experience, clinical outcomes and quality. Our goal with all our digital initiatives is to enable better quality care to more patients through digital interventions.
Revenue Growth Initiatives

Procedure Packaging
We are focusing on procedure packaging, so designing packages with a set price. This provides a positive experience for the patient as it helps to avoid bill shock. From operations perspective we ensure that the packages are uniform across our whole network. So the pharmaceuticals and consumables are utilized for the package right across Siloam’s network. This uniformity ensures that costs can be effectively forecast and managed.

Value Based Pricing
Siloam has expanded our gross margins through strategic product design and price management. We reviewed the pricing across our hospital units and we found that despite offering premium services we were at times pricing at rates that were below market. Having reviewed pricing across our network we have been optimizing pricing for all our products and service.

Operational Effectiveness & Sales Team Engagement
Siloam has implemented more process automation of sales peoples KPI monitoring so that sales-people’s activity and performance is monitored in real time. We have also automated sales reporting to significantly reduce the time spent by sales-people on administration so that they have more time to perform their key role which is business development. While relatively simple initiatives which require relatively small CAPEX, these initiatives have quickly had a positive impact on sales peoples’ productivity. We have also refined and automated part of our referral process to reduce leakage due to system errors and to ensure uniformity across all our units with referrals.
Revenue Growth Initiatives (Cont’d)

BPJS Optimisation
We have focused on investing in providing BPJS services which are sustainable for our business. Dedicated task force has been established to optimise the efficiency of BPJS service delivery and improve margins.

Equipment Utilization
Siloam has invested heavily in our medical equipment so we have a program in place to ensure that our equipment can reach its maximum utilization and thus improved return on investment. We established a dedicated team focusing on the 4 main aspects for improving utilization:

i. Raise internal doctor awareness with active monitoring and focus on referral rates
ii. Focus on setting up referral network for physicians and small hospitals through better marketing
iii. Ensure equipment selection and target specialty mix are aligned
iv. Data driven pricing

Capacity Utilization
There is a focused approach to drive utilization across all hospital metrics governing occupancy, equipment utilization, diagnostic capacity, radio therapy and radiology.
Cost Management Initiatives

Material Cost Reduction
We have embarked upon a material cost reduction project. This is a long-term project established in 2019 and we are starting to harvest positive results. This project involved consolidating the number of pharmaceutical and consumer goods providers. We also reduced the number of pharmaceuticals and consumables used at Siloam. At the same time we began centralizing procurement processes to head office. By taking these steps we could commit to provide greater volumes to reduced number of suppliers to optimise buying price. In 2021, this project contributed to a reduction of costs of around Rp94bn.

Demand Planning & Inventory Management
We designed and implemented robust standardized demand planning and inventory management processes, systems and organization. We have set up a data driven tool to create more accurate and reliable demand forecasts based on actual consumption. We are driving change in behaviour of front and back-office staff (at pharmacy stores, lab, purchasing, etc.) via changes in KPIs and performance management. We are making significant improvements for our demand planning and inventory management processes. Our aim is to substantially lower our inventory days for improved capital management and a reduction in wasted consumables due to expiry as well as reducing shrinkage.

OPEX Optimization
We are reviewing our staffing efficiency across our units to ensure that each hospital is using the optimal number of staff. We have reviewed our procurement processes for outsourced processes to reduce our costs. We have implemented a review and process change for utilities usage across all our hospitals with the aim of reducing their costs at each of our units.

CAPEX Management Improvement
Siloam has set up and formalized an investment committee which is in charge of reviewing and approving any CAPEX above 10 billion rupiah. The members of the investment committee conduct a stringent process to ensure that Siloam’s investments are highly productive.

Overall, our ongoing project to reduce supply chain related costs, reducing shrinkage and managing inventory level, is expected to contribute a reduction of more than Rp100bn in costs in 2022.
Continuously Improving Patient’s Experience

Patient Experience Program

Siloam always strives to give consistent healthcare delivery through a patient centered approach that align with Siloam's values: Stewardship, Integrity, Compassion, Respect and Innovation.

Siloam has introduced program named 'Saya SIAP' (I’m Ready) which embraces a patient centered culture:

- Agile (Sigap): provide the best service for anyone, anytime and anywhere
- Informative (Informatif): provide accurate and reliable information
- Appreciation (Appresiasi): show respect to fellow colleagues and patients
- Care (Peduli): showing high level of care to realize a culture of togetherness

Siloam’s dedicated patient experience team rolled out a new digital feedback system and service recovery system in 2021 which provides an efficient feedback mechanism from patients. Our digital marketing and patient feedback mechanisms are growing patient loyalty.

The culture based on our #sayaSIAP (I'm ready) program is the foundation of the expected service behaviour of Siloam Hospitals. We’ve also embedded the culture of GEMS (Going the Extra Mile Service) for all employees to be able to provide maximum level of service quality in their daily duties.

Quality & Safety
- Deliver high quality, safe, consistent, and coordinated patient care

People & Culture
- Empower team members to create an exceptional patient experience through engagement and leadership.

Growth & Development
- Create program growth, achieve physician alignment and expand partnerships and affiliations throughout the geographic area

Integration & Efficiency
- Leverage technology and optimize operational processes to deliver high value service.

Financial Vitality
- Improve the financial performance of Siloam Hospitals’ services while preparing for alternative payment methods.
Corporate Governance Initiatives
Investment Committee: Robust Capital Allocation Controls

- All Investment Plan/Projects above IDR10,000,000,000 (ten billion Rupiah) and all new hospital openings (regardless of amount) must be presented to the Investment Committee for review and subsequent approval by the BOC.

- Each new hospital opening has to go through a five stage review processes as presented in the table on the right.

Roadmap (Gates) For New Hospital Openings

<table>
<thead>
<tr>
<th>SITE SELECTION</th>
<th>PLANNING</th>
<th>CONSTRUCTION</th>
<th>MTC</th>
<th>OPERATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Site identification and priorisation based on ext. research</td>
<td>Legal, permits and licenses (incl. BPJS)</td>
<td>Site design and planning</td>
<td>MTC &amp; Day 1 plan Development &amp; Execution</td>
<td>Measuring, Monitoring, Reporting &amp; Control (c.9-12 months)</td>
</tr>
<tr>
<td>Expanded feasibility study incl. local stakeholder analysis</td>
<td></td>
<td>Detailed budgeting (Capex &amp; Projections)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Initial projection development to inform decisions and design</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Local stakeholder engagement

- Site construction
- Site fit-out & preparation (incl. equipment, purchasing)
- CEO recruitment* (starts c.6 months before opening)
- Doctor recruitment (c.6 months pre-opening)
- Other recruitment (starts c.6 months pre-opening)
- Training (c.3 months pre-opening)
- Marketing plan implementation (c.3 months pre-opening)

Post Implementation Review (PIR)
Investment Committee: Robust Skills and Highly Experienced Members

Members of Investment Committee

Peter John Chambers – Chairman
Peter’s background includes over 25 years of experience in finance, telecommunication and investment oversight. He has occupied senior positions in various companies including Coopers and Lybrand, Axiata and Farallon Capital (as an advisor). His experience include serving a number of Boards which have included PT XL Axiata and Indomines Pty Ltd. He has also chaired their respective Audit, Remuneration and Risk Committees.

Atiff Ibrahim Gill – Member
Atiff is a member of the Operations Team in CVC Asia. Prior joining CVC, he was the CEO of Lacoste China. Prior to that, he has served in multiple companies in Asia in senior executive positions. He holds a BSc degree from London University and is a postgraduate from Oxford University.

Dr. dr. Andry, MM, MHKes – Member
Dr. Andry serves as board member of the Indonesian Hospitals Association (PERSI), Indonesian Mediator Association (AMINDO); and as lecturer in Pelita Harapan University and Esa Unggul University. He was on the Management Team of Mitra Keluarga Hospital Bekasi and was the CEO of Siloam Hospitals Group. He is currently an advisor for Siloam Hospitals Group.
Siloam has revamped its audit committee. The current audit committee is chaired by Peter Chambers, with a strong reputation for administering good corporate governance. The audit committee has also invited Charles Rigoux from Gateway Partners, who brings with him an extensive international investment experience. In addition, the audit committee also invited Ir. Achmad Kurniadi who has served in Indonesia Investment Coordinating Board as Managing Director.
It is our belief that capital allocation decisions should be made in the best interests of all shareholders. Conflict of interest decisions that do not benefit all shareholders fairly, be it real or perceived, need to be avoided.

To achieve this, Siloam has substantially strengthened its related party policy.

All vendors go through a KYC process and related parties need to be registered before transactions with them can be carried out. Further internal processes are then applied depending on amount to ensure the transactions are arm’s length and goes through multiple level of approval and up to the BOC where appropriate.

All Related Party Transactions (RPT) are reported to Siloam’s Audit Committee and reviewed on a quarterly basis.
Siloam CSR and Sustainability Initiatives
Siloam continues to support communities which are in need of help through our CSR programs. Our 2 newly established clinics, one in Papua and one in Jakarta, continue to deliver healthcare to their surrounding communities.

As of now, with Siloam’s full financial and operational support, these clinics are serving around **1,700 disadvantaged patients every month** that would ordinarily be unable to receive suitable medical treatment.
CSR Investment for Education of Children in Need

Healthcare and education are vital tools to develop communities and decrease inequality. Siloam has made a CSR investment to a group of schools in Nusa Tenggara Timur. This investment will ensure that around **1,500 children** in this community will receive a proper school education. We’ve committed to allocate at least 30 billion rupiah on Siloam’s CSR programs in 2021 alone.
Board of Directors

Darjoto Setyawan - President Director
Darjoto brings with him more than 35 years of experience in senior level management. He was the Managing Director of Rajawali Group. Currently, he is the Independent Commissioner of PT Cita Mineral Indonesia Tbk and PT China Life Indonesia as well as an advisor of PT Lippo Karawaci Tbk

Caroline Riady - Vice President Director
Caroline started serving as Executive Director of Siloam Hospitals Kebon Jeruk where she was instrumental in growing the operational and financial performance. She is now currently the CEO of Siloam Hospitals Group

Monica Surjapranata – Director
Monica started her career at Panin Bank and was the CEO of Books & Beyond. She was the CEO of RSUS and now served as Regional Executive Director of Siloam

Daniel Phua – Director
Daniel is a Certified Practicing Accountant (Australia) with over 23 years’ experience in corporate finance, business strategy, process improvement, and corporate governance with international experience in Australia, Singapore and Indonesia

dr. Grace Frelita Indradjaja – Director
Dr. Grace was the Siloam Hospital Karawaci CEO and later appointed at Siloam Hospital Head Office as Chief Medical Officer. She serves as one of the board management in KADIN and PERSI

Atiff Ibrahim Gill – Director
Atiff is a member of the Operations Team in CVC Asia. Prior joining CVC, he was the CEO of Lacoste China. He holds a BSc degree from London University and is a postgraduate from Oxford University

Mona Jonatan – Director
Mona is a certified facilitator title from DI – USA, Clariden, Sean Delany, Stephen Covey, and John Maxwell. She started her career as a Quality Assurance Manager in Far East Trading Company, USA, then became the Operation and HR Manager in various companies in Holland, Vietnam, China and Indonesia

Diverse and robust Board of Directors’, bringing an extensive international experience to Siloam
Key Management Staff to Support Transformation

**Varun Khanna – Chief Commercial Officer**
Varun is currently the Chief Commercial Officer of Siloam Hospitals, and has been leading the business for two years at Siloam. Prior to Siloam, he has been a senior healthcare professional in India. He was the Co-Chair FICCI Health services and Executive Vice President - Fortis Healthcare. Varun has previously served as the Managing Director/ CGM at BD (Becton Dickinson & Co) in India. He also served as the National Executive Board Member of AMCHAM, Chairman – AdvaMed India Working Group and Executive Committee, Co-Chair at FICCI Health Services Committee and Secretary and Treasurer of NATHEALTH. His remarkable feat in the health sector is captured by many notable accolades, including the award for the Best CEO in a Medtech Company 2015, ET Best Healthcare Brand and Aon Best Employers 2016 for BD - India, among others.

**Gabrielle Tironi – Director of Corporate Strategy**
Gabrielle is the Director of Corporate Strategy in Siloam. He is the Portfolio Management Senior Advisor in CVC Capital Partner Asia. He was the Advisor for M&A Strategy & Operations in PwC Italy and Singapore. He brings more than 10 years of international M&A Strategy & Operations Advisory in different cross-border transactions including Europe and Asia.

**Julie McCaughan – Chief Nursing and Quality**
Julie is the Chief Quality and Nursing Officer of Siloam Hospitals Group. Julie has over 30 years of healthcare leadership gained from her working experiences in Australia, China and Indonesia. Julie is instrumental in leading the quality and nursing transformation for the group. Julie has a masters in business and nursing and is an international hospital surveyor which enables her to implement global knowledge of hospital operations and standards throughout Siloam.

**Giselle Ley – Supply Chain Management**
Giselle is the Head Supply Chain and Program Manager for Demand Planning and Inventory Management improvement initiative in Siloam Hospitals. A year prior, she worked as Category Manager / Lead for Packaging and Indirect Materials & Services in manufacturing industry. She brings more than 15 years of experience in not only system work but includes business improvement initiatives in Supply Chain, specifically data and process improvement initiatives in contract maintenance, materials requirements planning, material and service catalogue, low-value procurement and invoice backlog clearing.
Audit Committee: Independent with High Credentials Members

Members of Audit Committee

**Peter John Chambers – Member**

Peter’s background includes over 25 years of experience in finance, telecommunication and investment oversight. He has occupied senior positions in various companies including Coopers and Lybrand, Axiata and Farallon Capital (as an advisor). His experience include serving a number of Boards which have included PT XL Axiata and Indomines Pty Ltd. He has also chaired their respective Audit, Remuneration and Risk Committees.

**Charles Rigoux – Member**

Charles is an investment professional at Gateway Partners, an investment firm focused on growth capital and special situations across markets in Southeast Asia, South Asia, the Middle East and Africa. Prior to joining Gateway, he worked at Standard Chartered Bank in the Financial Sponsors Group in Singapore, involved in the origination and execution of M&A and Leveraged Finance transactions in Southeast Asia.

**Ir. Achmad Kurniadi, MBA – Member**

Ir. Achmad has served in Indonesia Investment Coordinating Board (BKPM) with the last position as Deputy Investment Cooperation. He was the Ambassador of the Republic of Indonesia in South Korea and was the Head of Investment in Trade Office and Indonesian Economy in Taiwan. He obtained a Bachelor’s degree in Agronomy from Padjadjaran University, Bandung in and Master of Business Administration from Yonsei University Graduate School of International Studies, South Korea.
Siloam Hospitals Board of Commissioners

John Riady - President Commissioner
John currently serves as Director of PT Lippo Karawaci Tbk and various senior executive positions at Lippo Group companies commissioner of PT Matahari Putra Prima Tbk and PT Matahari Department Store Tbk. He holds the position of Editor in Berita Satu Media Holdings and Jakarta Globe. He is also a member of Columbia University's International Advisory Board.

Andy N. Purwohardono – Commissioner
Andy is a Senior Managing Director at CVC Capital Partners and heads their Indonesia office. Prior to joining CVC, he was the President Director and the Head of Investment Bank of PT Morgan Stanley Asia Indonesia for four years. Andy holds a BSc in Industrial Engineering from Oregon State University and an MBA from University of Texas, US.

Dr. Liem Suet Wun – Commissioner
Dr. Lim has more than 30 years of experience in healthcare management. His last position was as the CEO of National Healthcare Group and Tan Tock Seng Hospital (TTSH) in Singapore. Dr. Lim has substantively involved with the Nanyang Technological University and Imperial College in London and was awarded the Public Service star by the President of Singapore.

Dr. Kartini Nurmala Panjaitan Syahrir - Independent Commissioner
Dr. Kartini serves as a Senior Advisor for Climate Change Issues to the Republic of Indonesia under Coordinating Minister for Maritime Affairs and Investment. She is also the Indonesian representative to the Advisory Board of ASEAN and was the ambassador of Indonesia for Argentina, Uruguay and Paraguay when she was awarded the most prestigious title by the President of Argentina.

Dr. Rosa C. Ginting – Independent Commissioner
Dr. Rosa currently serves as President Commissioner and Independent Commissioner of Cigna Indonesia since 2015. She was the President Director of PT Asuransi Jiwa Inhealth Indonesia where she led the company to rapid growth. She bring more than 36 years of experience in the life insurance industry.

Peter J. Chambers - Independent Commissioner
Peter’s background includes over 25 years of experience in finance, telecommunication and investment oversight. He has occupied senior positions in various companies including Coopers and Lybrand, Axiata and Farallon Capital (as an advisor). His experience include serving a number of Boards which have included PT XL Axiata and Indomines Pty Ltd. He has also chaired their respective Audit, Remuneration and Risk Committees.

High Calibre Board Members with many years of professional experience in various industries
Successful Renegotiation of Rental Agreement

Siloam has successfully renegotiated the rental agreement for 14 Siloam hospitals (11 with Lippo Karawaci, 3 with other third party) and secured rental of these hospitals for 15 years from 2021. This represents a key milestone to improve certainty on hospital rentals and allows Siloam to secure the rental of these strategic hospitals for another 15 years at a market competitive rate. The rental expense will be measured as a percentage of hospital revenue and adjusted annually as shown in the table below ranging from 6% of revenue in 2021 to 6.5% by 2027 and beyond.

From an independent market study, management concluded that the current rental rate for these properties are below market value. The re-negotiated rental structure, beyond providing certainty, is also economically beneficial to Siloam compared to the alternative of allowing these leases to expire naturally then re-based at the prevailing market rate of the time.

<table>
<thead>
<tr>
<th>Year</th>
<th>Rental as % of Each Hospital’s Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>2021</td>
<td>6.00%</td>
</tr>
<tr>
<td>2022</td>
<td>6.10%</td>
</tr>
<tr>
<td>2023</td>
<td>6.20%</td>
</tr>
<tr>
<td>2024</td>
<td>6.30%</td>
</tr>
<tr>
<td>2025</td>
<td>6.40%</td>
</tr>
<tr>
<td>2026</td>
<td>6.40%</td>
</tr>
<tr>
<td>2027-2035</td>
<td>6.50%</td>
</tr>
</tbody>
</table>
Siloam Hospitals Segments

**Flagship**
- Description: Well established hospitals with high revenue and profitability
- No. of Hospitals: 3

**Mature**
- Description: Profitable with high potential for further capacity growth
- No. of Hospitals: 13

**Distinct**
- Description: Operates in distinct niche markets with high profitability profiles
- No. of Hospitals: 4

**BPJS**
- Description: More than 60% of revenue is derived from BPJS patients
- No. of Hospitals: 3

**Ramping Up**
- Description: Hospitals opened in the last several years
- No. of Hospitals: 17

- Total Hospitals: 40
- Total Cities: 28
Siloam’s Strategic Growth to Take Advantage of the Market Potential

Owned Hospitals
- SH Lippo Cikarang
- SH Balikpapan
- SH Jambi
- BIMC Nusa Dua
- SH Asri
- SH Hosana
- SH Bogor
- SH Mataram
- SH Bangka Belitung
- SH Cirebon
- SH Jember
- RSU Kelapa Dua
- SH Lubuk Linggau
- RSU Syubbanul Wathon
- SH Mampang
- SH Ambon
- SH Banjarmasin

Leased Hospitals
- SH Lippo Village
- SH Surabaya
- SH MRCCC
- SH Palembang
- SH TB Simatupang
- SH Medan
- SH Buton
- SH Yogyakarta
- SH Semarang
- SH Paal Dua
- SH Kebon Jeruk
- SH Cinere
- SH Bali
- SH Kupang
- SH Labuan Bajo
- SH Bekasi Timur
- SH Palangka Raya
- SH Makassar
- BIMC Kuta
- SH Purwakarta
- RSUS/SHLV

Timeline:
- 1996
- 2002
- 2011
- 2012
- 2013
- 2014
- 2016
- 2017
- 2018
- 2019
- 2020
- 2021

Flagship: SH Hosana, SH Bogor, SH Mataram, SH Bangka Belitung, SH Cirebon, SH Jember, RSU Kelapa Dua, SH Lubuk Linggau, RSU Syubbanul Wathon, SH Mampang, SH Ambon, SH Banjarmasin
Mature: SH Asri, SH Sentosa
Distinct: BIMC Nusa Dua
BPJS: SH Hosana, SH Bogor, SH Mataram, SH Bangka Belitung, SH Cirebon, SH Jember, RSU Kelapa Dua, SH Lubuk Linggau, RSU Syubbanul Wathon, SH Mampang, SH Ambon, SH Banjarmasin

* IPO
* Rights Issue
## Siloam Hospitals Operational Results by Segment

<table>
<thead>
<tr>
<th>Segment</th>
<th>Flagship</th>
<th>Mature</th>
<th>Distinct</th>
<th>BPJS</th>
<th>Ramping Up</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Description</strong></td>
<td>Well established hospitals with high revenue and profitability</td>
<td>Profitable with high potential for further capacity growth</td>
<td>Operates in distinct niche markets with high profitability profiles</td>
<td>More than 60% of revenue is derived from BPJS patients</td>
<td>Hospitals opened in the last 2-5 years</td>
</tr>
<tr>
<td><strong>No. of Hospitals</strong></td>
<td>3</td>
<td>13</td>
<td>4</td>
<td>3</td>
<td>17</td>
</tr>
<tr>
<td><strong>IPD Admissions ('000)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4Q21</td>
<td>9 (+51%)</td>
<td>22 (+30%)</td>
<td>1 (+39%)</td>
<td>8 (+1%)</td>
<td>10 (+4%)</td>
</tr>
<tr>
<td>4Q20</td>
<td>6</td>
<td>17</td>
<td>1</td>
<td>8</td>
<td>10</td>
</tr>
<tr>
<td>FY21</td>
<td>29 (+5%)</td>
<td>75 (-1%)</td>
<td>5 (-9%)</td>
<td>27 (-23%)</td>
<td>40 (+11%)</td>
</tr>
<tr>
<td>FY20</td>
<td>27</td>
<td>75</td>
<td>5</td>
<td>35</td>
<td>36</td>
</tr>
<tr>
<td><strong>IPD Days ('000)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4Q21</td>
<td>37 (+44%)</td>
<td>73 (+7%)</td>
<td>4 (+58%)</td>
<td>28 (+2%)</td>
<td>30 (-32%)</td>
</tr>
<tr>
<td>4Q20</td>
<td>26</td>
<td>68</td>
<td>2</td>
<td>28</td>
<td>45</td>
</tr>
<tr>
<td>FY21</td>
<td>128 (+9%)</td>
<td>291 (+2%)</td>
<td>13 (+1%)</td>
<td>108 (-12%)</td>
<td>176 (+24%)</td>
</tr>
<tr>
<td>FY20</td>
<td>118</td>
<td>286</td>
<td>13</td>
<td>122</td>
<td>142</td>
</tr>
<tr>
<td><strong>OPD Visits ('000)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4Q21</td>
<td>134 (+28%)</td>
<td>332 (+45%)</td>
<td>21 (+28%)</td>
<td>95 (-5%)</td>
<td>110 (+5^%)</td>
</tr>
<tr>
<td>4Q20</td>
<td>105</td>
<td>229</td>
<td>16</td>
<td>101</td>
<td>73</td>
</tr>
<tr>
<td>FY21</td>
<td>467 (+8%)</td>
<td>1,136 (+23%)</td>
<td>73 (+0.2%)</td>
<td>356 (-6%)</td>
<td>364 (+29%)</td>
</tr>
<tr>
<td>FY20</td>
<td>432</td>
<td>926</td>
<td>73</td>
<td>379</td>
<td>281</td>
</tr>
</tbody>
</table>

*Note: Hospital units only, excluding clinics and non-hospital units*
# Siloam Hospitals Operational Results by Segment

<table>
<thead>
<tr>
<th>Segment</th>
<th>Flagship</th>
<th>Mature</th>
<th>Distinct</th>
<th>BPJS</th>
<th>Ramping Up</th>
</tr>
</thead>
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<tr>
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</tr>
<tr>
<td><strong>No. of Hospitals</strong></td>
<td>3</td>
<td>13</td>
<td>4</td>
<td>3</td>
<td>17</td>
</tr>
<tr>
<td><strong>Net GOR (IDR bn)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4Q21</td>
<td>851 (+29%)</td>
<td>846 (+6%)</td>
<td>100 (+24%)</td>
<td>129 (-20%)</td>
<td>185 (-49%)</td>
</tr>
<tr>
<td>4Q20</td>
<td>659</td>
<td>800</td>
<td>81</td>
<td>161</td>
<td>365</td>
</tr>
<tr>
<td>FY21</td>
<td>2,990 (25%)</td>
<td>3,609 (+28%)</td>
<td>365 (+8%)</td>
<td>641 (15%)</td>
<td>1,433 (56%)</td>
</tr>
<tr>
<td>FY20</td>
<td>2,394</td>
<td>2,828</td>
<td>339</td>
<td>557</td>
<td>918</td>
</tr>
<tr>
<td><strong>NOR (IDR bn)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4Q21</td>
<td>631 (+24%)</td>
<td>651 (+10%)</td>
<td>73 (+19%)</td>
<td>97 (-24%)</td>
<td>142 (-55%)</td>
</tr>
<tr>
<td>4Q20</td>
<td>509</td>
<td>594</td>
<td>62</td>
<td>128</td>
<td>314</td>
</tr>
<tr>
<td>FY21</td>
<td>2,251 (+22%)</td>
<td>2,872 (+29%)</td>
<td>273 (+7%)</td>
<td>518 (+21%)</td>
<td>1,210 (+60%)</td>
</tr>
<tr>
<td>FY20</td>
<td>1,840</td>
<td>2,221</td>
<td>255</td>
<td>430</td>
<td>756</td>
</tr>
<tr>
<td><strong>EBITDA (IDR bn)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4Q21</td>
<td>305 (+64%)</td>
<td>297 (+15%)</td>
<td>28 (+516%)</td>
<td>-4 (-121%)</td>
<td>-18 (-115%)</td>
</tr>
<tr>
<td>4Q20</td>
<td>186</td>
<td>258</td>
<td>5</td>
<td>19</td>
<td>120</td>
</tr>
<tr>
<td>FY21</td>
<td>810 (+44%)</td>
<td>1,084 (+60%)</td>
<td>65 (+38%)</td>
<td>93 (+102%)</td>
<td>366 (+108%)</td>
</tr>
<tr>
<td>FY20</td>
<td>575</td>
<td>689</td>
<td>49</td>
<td>47</td>
<td>173</td>
</tr>
</tbody>
</table>

Note: EBITDA calculated with the new accounting policy
Operational Results per Quarter

Operational Results per Quarter – Inpatient Admissions

(in 000)

<table>
<thead>
<tr>
<th>Quarter</th>
<th>2Q20</th>
<th>3Q20</th>
<th>4Q20</th>
<th>1Q21</th>
<th>2Q21</th>
<th>3Q21</th>
<th>4Q21</th>
</tr>
</thead>
<tbody>
<tr>
<td>2020</td>
<td>33</td>
<td>38</td>
<td>41</td>
<td>41</td>
<td>46</td>
<td>39</td>
<td>50</td>
</tr>
<tr>
<td>% Change</td>
<td>+16%</td>
<td>+7%</td>
<td>-0.6%</td>
<td>+13%</td>
<td>-14%</td>
<td>+28%</td>
<td></td>
</tr>
</tbody>
</table>

Operational Results per Quarter – Inpatient Days

(in 000)

<table>
<thead>
<tr>
<th>Quarter</th>
<th>2Q20</th>
<th>3Q20</th>
<th>4Q20</th>
<th>1Q21</th>
<th>2Q21</th>
<th>3Q21</th>
<th>4Q21</th>
</tr>
</thead>
<tbody>
<tr>
<td>2020</td>
<td>127</td>
<td>157</td>
<td>169</td>
<td>180</td>
<td>186</td>
<td>177</td>
<td>173</td>
</tr>
<tr>
<td>% Change</td>
<td>+24%</td>
<td>+8%</td>
<td>+7%</td>
<td>+3%</td>
<td>-5%</td>
<td>-1%</td>
<td></td>
</tr>
</tbody>
</table>

Operational Results per Quarter – Occupancy Rate

(in %)

<table>
<thead>
<tr>
<th>Quarter</th>
<th>2Q20</th>
<th>3Q20</th>
<th>4Q20</th>
<th>1Q21</th>
<th>2Q21</th>
<th>3Q21</th>
<th>4Q21</th>
</tr>
</thead>
<tbody>
<tr>
<td>2020</td>
<td>41.6%</td>
<td>47.8%</td>
<td>51.1%</td>
<td>52.8%</td>
<td>55.0%</td>
<td>50.9%</td>
<td>51.0%</td>
</tr>
</tbody>
</table>

Operational Results per Quarter – Outpatient Visits

(in 000)

<table>
<thead>
<tr>
<th>Quarter</th>
<th>2Q20</th>
<th>3Q20</th>
<th>4Q20</th>
<th>1Q21</th>
<th>2Q21</th>
<th>3Q21</th>
<th>4Q21</th>
</tr>
</thead>
<tbody>
<tr>
<td>2021</td>
<td>347</td>
<td>512</td>
<td>524</td>
<td>545</td>
<td>591</td>
<td>569</td>
<td>692</td>
</tr>
<tr>
<td>% Change</td>
<td>+47%</td>
<td>+2%</td>
<td>+4%</td>
<td>+9%</td>
<td>+9%</td>
<td>+22%</td>
<td></td>
</tr>
</tbody>
</table>
Top 3 Shareholders

**PT Lippo Karawaci Tbk (Ownership as of 31 Dec 2021: 55.4%)**

PT Lippo Karawaci Tbk (ticker: LPKR) is the majority shareholder of Siloam and has significantly supported Siloam Hospitals in driving growth and profitability.

**CVC Capital Partners (Ownership as of 31 Dec 2021: 26.18%)**

CVC Capital provides Siloam’s management with relevant expertise and advice to create value for shareholders. CVC has 1 board representative in Siloam’s Board of Commissioners and 1 Board of Director.

**Marubeni Group (Ownership as of 31 Dec 2021: 4.99%)**

Marubeni Group is a well-know large global companies with strong footprints in various industries, including healthcare. In early 2020, Marubeni joined Siloam’s shareholding with approximately 4.99% ownership.
Siloam Hospitals Head Office
Fakultas Kedokteran Unviersitas Pelita Harapan – 32nd Floor
Jl. Boulevard Sudirman No. 15, Lippo Village
Tangerang, Banten 15811, Indonesia

Online
Website : www.siloamhospitals.com/investor-relations
Contact : Joel Ellis (Head of Investor Relations)
joel.ellis@siloamhospitals.com