



July 4, 2026

National Stock Exchange of India Limited
Exchange Plaza, Plot No. C/1, G Block,
Bandra Kurla Complex, Bandra (E),
Mumbai – 400 051.
Symbol: RAINBOW

BSE Limited
Corporate Relationship Department,
Phiroze Jeejeebhoy Towers,
Dalal Street, Mumbai – 400001.
Scrip Code: 543524

Sub: Notice convening the 28th Annual General Meeting (“AGM”) and Integrated Annual Report for the Financial year 2025-26 (“FY 2026”)

Dear Sir/ Madam,

The 28th AGM of the Company will be held on Wednesday, July 29, 2026 at 10:00 A.M. (IST) through Video Conferencing (“**VC**”) / Other Audio-Visual Means (“**OAVM**”).

Pursuant to Regulation 34(1) of SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015, we are submitting herewith the Integrated Annual Report for FY 2026 containing the Notice convening the 28th AGM for the FY 2026 which is being sent through electronic mode to the Members, who have registered their email addresses with the Company / Depositories.

The Integrated Annual Report for FY 2026 containing the Notice is also uploaded on the Company's website <https://www.rainbowhospitals.in/> .

This is for your information and record.

Thanking You,

Yours faithfully,

For **Rainbow Children's Medicare Limited**


Shreya Mitra
Company Secretary and Compliance Officer

Encl.: As above

Rainbow Children's Medicare Limited

Registered Office: 8-2-120/103/1, Survey No. 403, Road No. 2, Banjara Hills, Hyderabad- 500034, Telangana

CIN:L85110TG1998PLC029914

 Corporate Office: 8-2-19/1/A, Dault Arcade, Road No. 11, Banjara Hills, Hyderabad- 500034, Telangana

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 1800 2122

 www.rainbowhospitals.in

It takes a lot to treat the little.



INTEGRATED
ANNUAL
REPORT
2025-26

Navigating this Report

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Strategic Imperatives

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What Differentiates Rainbow



Dr. Ramesh Kancharla
Chairman and Managing Director

While our footprint has expanded significantly, our purpose has remained unchanged – to ensure that every child and every mother has access to the specialized care they deserve.

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Our FY2026 Integrated Report

This is the fifth Integrated Annual Report ("the Report") of Rainbow Children's Medicare Limited ("Rainbow"). It presents a comprehensive and balanced view of our financial performance, operational progress, clinical excellence and societal contribution during the year. Our focus is on creating long-term value for our stakeholders in a responsible and ethical manner by efficiently deploying the various forms of capital we rely on.

The Report is structured around the six capitals – Financial, Manufactured, Human, Intellectual, Social and Relationship, and Natural – to offer a holistic view of how we create, preserve and grow value. It also outlines our operating environment, strategic priorities, progress against key initiatives, stakeholder expectations and governance practices that guide responsible decision-making. Together, these elements reflect how we balance current performance with our long-term commitments.

Reporting Boundary and Scope

The Report covers the period from April 1, 2025, to March 31, 2026, with relevant comparisons to prior years. The information is consistent with internal management reporting and reflects material developments up to the date of Board approval on May 23, 2026. Disclosures relate to the operations of Rainbow and its subsidiaries unless specified otherwise.

Reporting Frameworks

The Report has been prepared in accordance with the Companies Act, 2013 (and the Rules

made thereunder), Indian Accounting Standards, SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 and the Secretarial Standards issued by the Institute of Company Secretaries of India.

The non-financial disclosures draw on the principles of the International Integrated Reporting Council (IIRC). We have also mapped the United Nations Sustainable Development Goals (SDGs) to the key performance indicators associated with our capitals.



Stakeholder Feedback

We actively engage with our stakeholders to continuously strengthen the quality and relevance of our integrated reporting. For questions, clarifications or feedback on this Report, please write to our Company Secretary and Compliance Officer, Ms. Shreya Mitra, at

companysecretary@rainbowhospitals.in



NAVIGATION GUIDE

Core Capitals

- Financial Capital
- Manufactured Capital
- Human Capital
- Intellectual Capital
- Social & Relationship Capital
- Natural Capital

Strategic Imperatives

- S1** Strengthen Tertiary and Quaternary Pediatric Services
- S2** Further Our Comprehensive Services
- S3** Grow Our Presence through Hub-and-Spoke Networks
- S4** Timely Execution of Projects
- S5** Drive Performance Efficiencies
- S6** IT Transformation
- S7** Grow International Business

Stakeholders

- Patients/Customers
- Employees
- Suppliers
- Investors
- Government
- Society

Forward-Looking Statements

This report may include statements projecting Rainbow's future financial standing, operational outcomes, strategic plans, and growth projections, generally marked by forward-looking terminologies such as "believe", "aim", "intend", "likely to", "plan", "anticipate", "continue", "estimate", "expect", "may", "will", among other phrases of similar import. Such forward-looking statements reflect current views and are based on management beliefs, plans, estimates and expectations based on the available information. We caution that the actual results, performances, or accomplishments may significantly vary from those projected in these forward-looking statements. We do not commit to update or revise any forward-looking statements, irrespective of any new information, future events, or other circumstances



Scan the QR code to view this report.

It takes a lot to treat the little.

An Art Mastered
by Rainbow

Children's healthcare demands a different kind of institution. Different clinical understanding. Different infrastructure. Different instincts. It calls for vigilance, sensitivity, multidisciplinary coordination and the ability to respond with precision when every second matters. Most importantly, it requires trust.

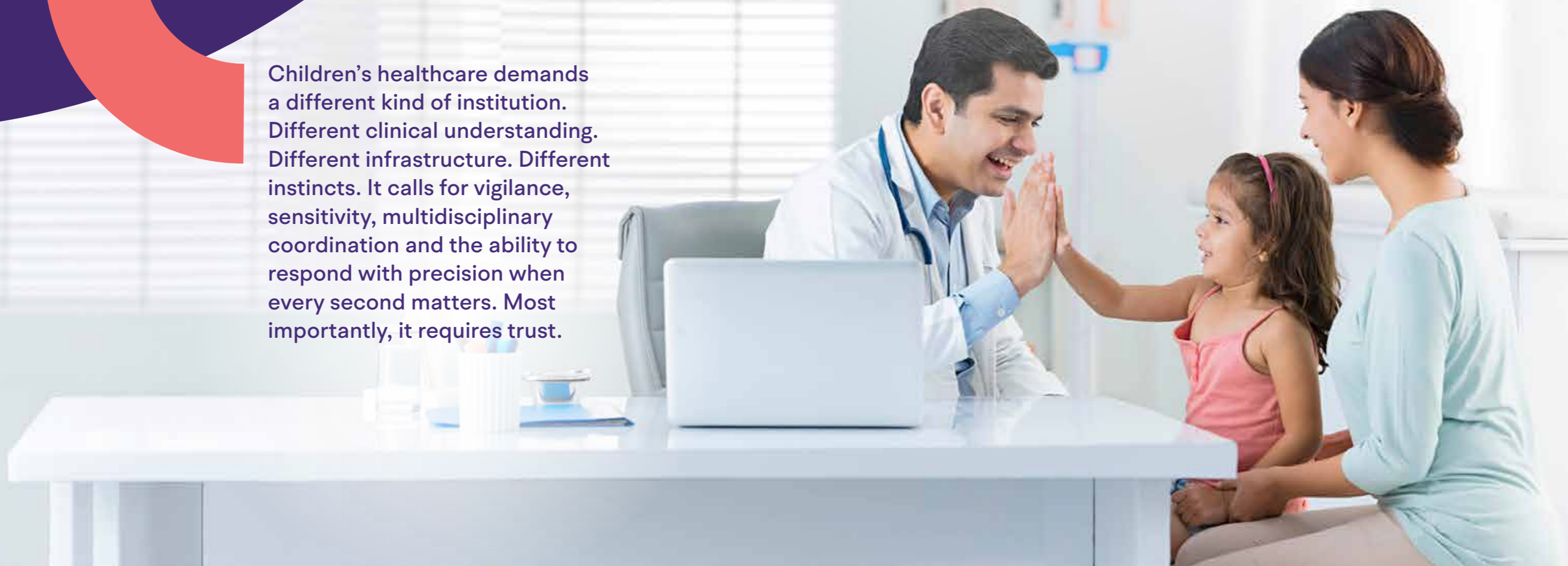
At Rainbow Children's Medicare Limited, this understanding has been shaped over more than 26 years of dedicated focus on women and children's healthcare. What began as a vision to pioneer specialized pediatric care in India has evolved into one of the country's most trusted healthcare networks for mothers, newborns and children.

The theme of this year's Integrated Annual Report, "It Takes a Lot to Treat the Little", reflects the depth of that journey. Behind every successful outcome lies an ecosystem built with intent: specialized clinicians, protocol-driven systems, state-of-the-art technology, advanced neonatal and pediatric intensive care, continuous training, and a culture shaped around the needs of children and families.

Young parents do not choose hospitals based on scale alone. They seek reassurance, empathy and clinical confidence for some of the most vulnerable moments of their lives. Over the years, Rainbow has earned that confidence through consistent outcomes, compassionate care, long-term relationships and a model designed for mothers and children.

Today, as awareness around specialized pediatric and perinatal healthcare grows across India, Rainbow remains grounded in the principles on which it was built. Expansion has strengthened reach, but the focus remains unchanged: delivering consistent, high-quality care through the One Rainbow Clinical Model, clinical depth and disciplined execution.

Because caring for the little ones takes more than infrastructure. It takes years of experience, a deep understanding of children, systems built with purpose and a commitment that continues to evolve.



Reflecting on the Year

This section brings together leadership views on the year gone by, the priorities that shaped our decisions and the direction we are building for the future. It also presents a snapshot of our annual highlights across financial, clinical, operational and ESG performance.

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ANNUAL HIGHLIGHTS

A Year of Care, Scale and Progress

FINANCIAL

₹17,031 Million
Revenue from Operations

↑ 12.4% Y-O-Y

₹5,442 Million
EBITDA

↑ 11.1% Y-O-Y

₹2,815 Million
PAT

↑ 15.3% Y-O-Y

OPERATIONAL

Expanded
into Warangal and Guwahati through strategic acquisitions

Commissioned
the Rajahmundry hospital, strengthening presence in Andhra Pradesh and a dedicated IVF Center at Mahadevapura, Bengaluru

Commenced
Commenced hospital operations at the Electronic City and HRBR hospitals in Bengaluru

440
Beds

104k+
In-patient admissions

↑ 6% Y-O-Y

1,598k+
Out-patient visits

↑ 12% Y-O-Y

CLINICAL

7,324
Pediatric Surgical Procedures
↑ 1% Y-O-Y

10,140
Gynecology Surgeries
↑ 20% Y-O-Y

19k+
Deliveries
↑ 11% Y-O-Y

60%
OPD appointments booked digitally

ESG HIGHLIGHTS

366
Tons of biomedical waste responsibly processed

9.7%
Reduction in energy consumption per bed

4,647
Employees trained across clinical and non-clinical capability programs

Chairman's Message



Dear Shareholders,

Thank you for your continued trust and partnership in helping us build Rainbow Children's Hospital into what it is today. Over the past 26 years, we have remained committed to a singular purpose – to build an institution dedicated to the healthcare needs of women and children. Today, Rainbow is the only publicly-listed children's hospital group in Asia Pacific Region and as the largest women and children's healthcare network under a single group. Every milestone in our journey has been shaped by the trust of the families we serve, the commitment of our people and our relentless pursuit of clinical excellence.

Over the years, Rainbow has grown into an institution that families trust during some of the most important moments of their lives. What began with a simple vision has evolved into the world's largest dedicated pediatrics healthcare networks, with 24 hospitals and nearly 2500 beds across India. Today, our network touches the lives of millions of families every year, built on deep clinical expertise, specialized infrastructure and an enduring commitment to delivering the highest standards of care. While our footprint has expanded significantly, our purpose has remained unchanged – to ensure that every child and every mother has access to the specialized care they deserve.

Over the past year alone, Rainbow recorded nearly 1.6 million outpatient consultations, welcomed around 20,000 new births, and cared for approximately 75,000 pediatrics admissions, including over 7,000 PICU admissions and 7,200 NICU admissions. Across our network, our teams managed more than 105,000 in-patient admissions, reflecting the depth of our expertise and the advanced critical care capabilities that distinguish Rainbow. Beyond the walls of our hospitals, our specialized transport teams facilitated over 1,200 critical patient transfers, connecting critically-ill children and newborns to advanced care when every minute mattered.

While these numbers reflect our scale, they tell only part of our story. Our true achievement lies in the trust we have earned and, more importantly, in the clinical outcomes we consistently deliver for some of the most complex and vulnerable patients entrusted to our care. Rainbow has achieved a 94% success rate in pediatrics liver transplantation and a 98.5% success rate in complex pediatrics cardiac surgeries. Over the past five years, we have successfully cared for more than 1,800 babies weighing less than one kilogram, achieving an 80% long-term survival rate comparable with the world's leading children's hospitals. Our expertise is further reflected in our proven capabilities in managing multi-organ failure, a well-established ECMO program, and highly specialized neonatal and pediatrics retrieval teams. Together, these outcomes reflect the depth of our expertise, multidisciplinary teamwork, evidence-based protocols and the rigorous standards of care that have defined Rainbow for more than two decades. More importantly, they reaffirm our ability to consistently deliver outcomes benchmarked against leading international pediatrics centers, reinforcing Rainbow's position as one of the world's foremost institutions dedicated to specialized women and children's healthcare.

Our aspirations extend far beyond expanding our physical footprint. We are building an institution that will set new benchmarks in specialized women and children's healthcare. Over the past two decades, our Hyderabad flagship center has evolved as the leading referral's center for complex pediatric care in India matching to some of the world's most renowned pediatric hospitals in terms of volumes and clinical outcomes. Our vision for the next five years is to replicate the success of our flagship centers in Bengaluru, Chennai, Gurugram and Guwahati to match the capabilities of Hyderabad. Our hub and spoke network and regional spoke hospitals would complement and bring synergies to fasten the growth of this referral centers. This will ensure wider coverage of the regions across the nation to address pediatrics and perinatal healthcare needs of the country.



Over the years, Rainbow has grown into an institution that families trust during some of the most important moments of their lives. What began with a simple vision has evolved into the world's largest dedicated pediatrics healthcare networks.



Our expansion strategy is designed not merely to increase capacity, but to make specialized healthcare more accessible to women and children across the country. In South India, we will continue to strengthen our leadership across Hyderabad, Bengaluru, Andhra Pradesh and Tamil Nadu. In North India, we are building a meaningful presence across the National Capital Region and its surrounding growth corridors. We also see significant opportunities across Western and Central India, where planned developments will bring the Rainbow model of care to millions of additional families. Alongside our organic expansion, the successful integration and strong performance of our recent acquisitions have reinforced our confidence in pursuing similar opportunities where they complement our clinical model, strengthen our regional presence and create long-term value. As we grow, we will continue to evaluate such opportunities with the same discipline, prudence and focus that have guided Rainbow's journey over the past two decades.

As Rainbow enters its next phase of growth, standardization becomes fundamental to our success. Scaling our network should never mean compromising on the quality of care we deliver. Through One Rainbow, we are building a unified clinical model that brings together standardized care pathways, evidence-based protocols, robust governance and continuous quality improvement across every hospital. Our aspiration is to achieve JCI accreditation across all our hub hospitals and NABH accreditation across the broader network within three years of commencing clinical operations. One Rainbow is more than a framework – it is the foundation that will enable us to preserve the Rainbow standard of care as we continue to grow, ensuring that every hospital delivers the same clinical excellence, the same patient experience and the same quality outcomes, irrespective of geography.

One initiative that remains particularly close to my heart is our specialized neonatal and pediatrics transport program. It is an integral part of the Rainbow model of care and one of the capabilities that truly differentiates us. Every year, our dedicated transport teams safely transfer more than 1,200 critically-ill newborns and children by road and air, connecting them to the right expertise at the right time. Behind every transfer is a story of hope, teamwork and the determination to save a life when every minute matters. As Rainbow expands, this capability will become even more important. We will continue to strengthen our transport network, expanding our reach and making our referral centers more accessible to families across the country. We firmly believe that where a child lives should never determine their chance of survival or limit their access to world-class specialized care.



As Rainbow enters its next phase of growth, standardization becomes fundamental to our success. Scaling our network should never mean compromising on the quality of care we deliver.

Technology will be a defining enabler of our next phase of growth. We are building a connected digital ecosystem that seamlessly brings together clinicians, nurses, paramedical teams and patients, strengthening clinical decision-making, operational efficiency and the overall patient experience. At the heart of this transformation will be the One Rainbow Digital Platform – a single, integrated gateway that will connect every stage of the care journey, from appointments and diagnostics to teleconsultations, pregnancy care, fertility services, vaccination program and long-term pediatrics health management. Supported by AI-enabled tools and an integrated technology architecture, these investments will help create a future-ready healthcare ecosystem that is smarter, more connected and centered around every family we serve.

Equally important is our responsibility to strengthen India's healthcare ecosystem by building the next generation of specialists in women and children's healthcare. Rainbow has evolved into one of the country's leading academic institutions, and over the coming years, we aspire to train nearly 1,000 specialists annually, including pediatricians, obstetricians, fetal medicine specialists, fertility specialists, pediatrics super-specialists and surgeons. Beyond creating a highly skilled talent pool for the country, these program will also strengthen Rainbow's future clinical capabilities by creating a sustainable pipeline of specialists trained in the Rainbow way – our culture of clinical excellence, multidisciplinary collaboration and patient-centered care. Many of these specialists will go on to become part of the Rainbow family, enabling us to scale while preserving the values, expertise and standards of care that define our institution.



Our responsibility extends beyond the hospitals we build. One of the most meaningful ways in which we can strengthen India's healthcare system is by investing in its people. We believe that building a larger healthcare network must go hand-in-hand with building a stronger healthcare workforce. Through our focused CSR initiative, Rainbow Skill, we are creating advanced simulation-based training centers dedicated to strengthening the skills of doctors, nurses and allied healthcare professionals. Our first center is being established in Hyderabad, and we envision taking this model to our other larger networks as well in future. Together with our fellowship and academic program, Rainbow Skill will strengthen clinical capabilities across the broader healthcare ecosystem, extending Rainbow's impact well beyond the boundaries of our own hospitals.

The investments in infrastructure, leadership, clinical capability, technology, research, education and people are together laying the foundation for Rainbow's next phase of growth. Over the next 5 years, we aim to add over 2500 beds, taking our network to approximately 5,000 beds by investing around ₹2,200 crore. As our new hospitals mature and our digital capabilities strengthen patient engagement, I believe Rainbow is well positioned to reinforce its leadership in specialized

healthcare for women and children while creating sustainable long-term value for all our stakeholders.

As I look ahead, I believe Rainbow is entering the most exciting chapter in its journey. We have built a strong institution, a remarkable team and a model that has stood the test of time. The opportunities before us are significant, but so too is our responsibility – to continue setting new benchmarks in pediatrics and maternal healthcare while remaining worthy of the trust that families and shareholders have placed in us.

On behalf of the Board, I thank our doctors, Senior Management teams, nurses, employees, partners and shareholders for their continued support. Together, we will continue building an institution that not only grows in scale but also deepens its contribution to the health and well-being of generations to come.

Yours sincerely,

Dr. Ramesh Kancharla

Founding Chairman

Rainbow Children's Medicare Limited

Chief Executive Officer's Message

Dear Shareholders,

At the outset, I would like to thank the Chairman and the Board of Directors for the trust they have placed in me. It is a privilege to lead Rainbow Children's Medicare Limited, an institution that has built a distinctive position in pediatrics and perinatal care through deep clinical expertise, strong values and a clear commitment to patient-centered care. While every leader brings a different perspective, my approach will continue to be guided by the clinical excellence and values that have shaped Rainbow's success over the years.

Since joining Rainbow in January 2026, I have spent considerable time engaging with our consultants, unit leadership teams and functional heads across the organization. These interactions have provided valuable insight into Rainbow's operating model, culture and strengths. What stands out most is the strength of our consultant-led model, our deep expertise in pediatrics and perinatal care, and the commitment of our teams across the network.

FY2026 was an important year for Rainbow. The Company strengthened its network through new hospitals, acquired facilities and expanded clinical services. With a significant phase of our planned capacity additions now operational, our focus is on driving higher utilization, enhancing operating performance and delivering sustainable growth, while continuing to evaluate expansion opportunities in line with evolving market demand and our long-term strategy.

As our expanded network continues to scale, improving occupancy and asset utilization remains a key strategic focus, particularly across recently commissioned and acquired hospitals. We are also enhancing our sales and marketing capabilities, strengthening doctor engagement and expanding our shared care network to improve market reach, reinforce specialty-led growth and support sustainable patient volumes over the long term.

Patient experience is another important area of focus. For families, healthcare is defined not only by clinical outcomes, but also by the ease, responsiveness and reassurance they experience through the care journey. As Rainbow grows, we are working to make this journey more seamless across touchpoints, from inquiry and appointment to admission, discharge and follow-up. Consistency in service delivery will be central to how we preserve trust while scaling further.

I am also conscious that Rainbow's growth has always been anchored in its people. Our doctors, nurses, clinical teams and support functions bring deep commitment to the institution's purpose. My responsibility is to support them with stronger systems, clearer operating structures and an environment where collaboration, ownership and continuous improvement can thrive.

Looking ahead, I remain confident about Rainbow's long-term opportunity. The demand for specialized, high-quality pediatrics and perinatal healthcare in India continues to be strong and Rainbow is well placed to serve this need with depth, discipline and

care. I am grateful for the opportunity to contribute to this journey and to work alongside teams who bring exceptional commitment to the families we serve every day.

I thank our shareholders for their continued trust and look forward to contributing to Rainbow's next phase of growth.

Warm regards,

Abrarali Dalal

Chief Executive Officer



Understanding our Company

This section gives a clear picture of who we are, what we stand for and how we operate. It highlights our purpose, our footprint, the services we offer and the strengths that define our identity. It also traces our journey so far and recognizes key milestones and achievements that have shaped Rainbow into the organization it is today.

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WHO WE ARE

Mastering the Art of Specialized Care

Established in 1998, Rainbow Children's Medicare Limited (Rainbow) is one of India's leading multi-specialty hospital chains focused on pediatric care, neonatal intensive care, perinatal care and women's health. Over the years, we have strengthened our model through medical expertise, innovation, standardization and a shared culture, enabling high-quality outcomes across the organization.

Our care philosophy is built on clinical depth, specialization and a strong focus on patient experience. With a full-time doctor engagement model and a collaborative approach, we ensure round-the-clock doctor involvement and consistent service across locations.

OUR SERVICE ECOSYSTEM

Pediatric Care (Rainbow Children's Hospital)

- Newborn & Pediatric Intensive Care (NICU / PICU)
- Pediatric Multi-specialty Services (20+ specialities)
- Pediatric Emergency & Trauma Care
- Pediatric Quaternary Care (including organ transplantation)
- Developmental & Behavioral Health Services
- Advanced Diagnostics & Rehabilitation

Women & Perinatal Care (BirthRight by Rainbow)

- Normal and Complex Obstetric Care
- Multidisciplinary Fetal Care
- Perinatal Genetic Services
- Fertility Care
- Gynecology Services
- Postnatal Support Services

Rainbow Fertility

- Comprehensive Fertility Evaluation & Counseling
- Advanced Fertility Diagnostics & Treatment
- Assisted Reproductive Technology (IUI, IVF, ICSI)
- Advanced Embryology & Genetic Services
- Male & Female Fertility Care
- Fertility Preservation (Egg & sperm freezing) & Reproductive Support

VISION

Our aim at Rainbow Children's Hospital is to provide high standards of care for the mother, fetus, newborn and children, so that none of them is deprived of a tertiary care facility.

MISSION

The measure of our success is in the number of smiling faces.

Who We Are

26+ Years of Excellence	23* Hospitals	5 Out-patient clinics	1# IVF clinics	6 States
9 Cities	2,375* Bed Capacity	~1/3 Bed capacity allocated to critical care	1,050+** Doctors	6,397 Employees

*The number excludes the 60 Beds hospital at HRBR, Bengaluru, which commenced operations on May 1, 2026

**Including full-time residents and DNB

*Mahadevpura IVF clinic commenced operations from May 1, 2026

ACCREDITATIONS

Rainbow's commitment to quality and safety is validated through globally recognized accreditation frameworks.

Joint Commission International (JCI)

- India's first pediatric hospital network to have two flagship hubs (Hyderabad and Bengaluru) accredited by JCI with the Gold Seal of Quality. Rainbow Children's Hospitals, Banjara Hills, successfully reaccredited by JCI in May 2026
- BirthRight Fertility, Kondapur, Hyderabad, the country's first standalone fertility center, received re-accreditation from JCI in 2025

National Accreditation Board for Hospitals & Healthcare Providers (NABH)

- 14 hospitals within the network are NABH-accredited, reinforcing standardized clinical excellence and patient safety across centers

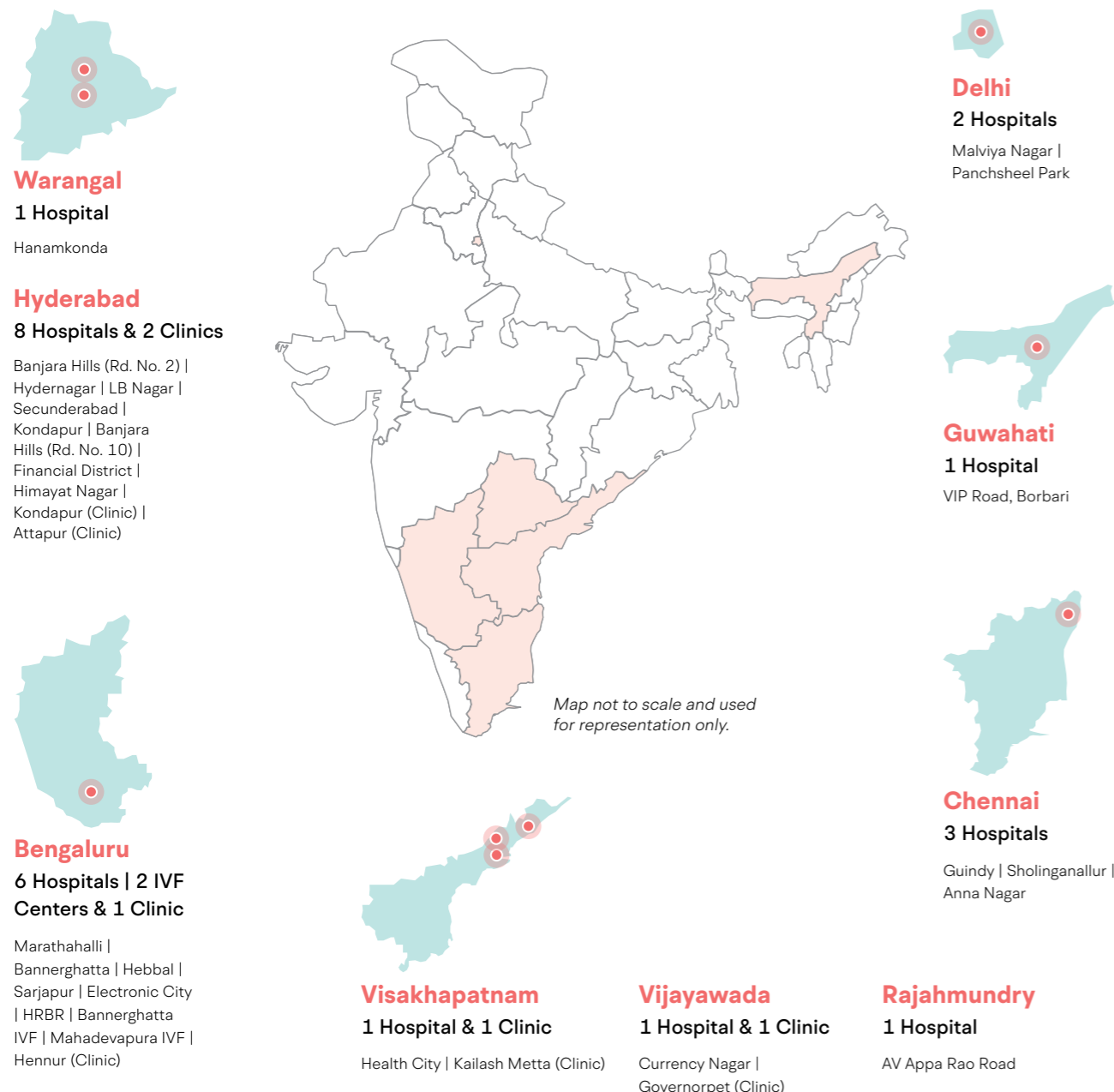


Where We Are Based

WHERE WE ARE BASED

Extending the Art of Care across Regions

Having established a strong foothold across South India, we are now deepening our presence in key growth markets and expanding into new regions. Our entry into the Northeast has further widened our national footprint, while our upcoming hospitals in the National Capital Region (NCR) and Pune will strengthen access to specialized pediatric and perinatal care in North India.



Telangana² 1,040 Total Bed Capacity

Banjara Hills, 1999 #250	Vikramপুর, 2009 #110	Kondapur, 2013 #50	Hydernagar, 2014 #160	LB Nagar, 2016 #100
RCHI ¹ , 2019 #110	Financial District, 2023 #100	Himayat Nagar, 2024 #60	Warangal ² , 2025 #100	

Note: ¹Rainbow Children's Heart institute, Banjara hills, Hyderabad; ²Telangana beds includes acquisition of Prashanthi Hospital, Warangal on July 1, 2025

Bengaluru 532* Total Bed Capacity

Marathahalli, 2015 #200	BG Road, 2016 #102	Hebbal, 2020 #50	Sarjapur, 2024 #90	Electronic City, 2026 #90	HRBR, 2026 #60

Delhi³ 24 Total Bed Capacity

Malviya Nagar ³ , 2017 #130	Rosewalk, 2019 #24

³ Bed Count excludes the 130 beds at Malviya Nagar where Rainbow Hospitals provides Medical services

Northeast 150 Total Bed Capacity

Guwahati, 2025 #150

⁴North East beds include acquisition of Pratiksha Hospital, Guwahati on September 1, 2025

Chennai 270 Total Bed Capacity

Guindy, 2018 #135	Sholinganallur, 2022 #55	Anna Nagar, 2024 #80

Andhra Pradesh 359 Total Bed Capacity

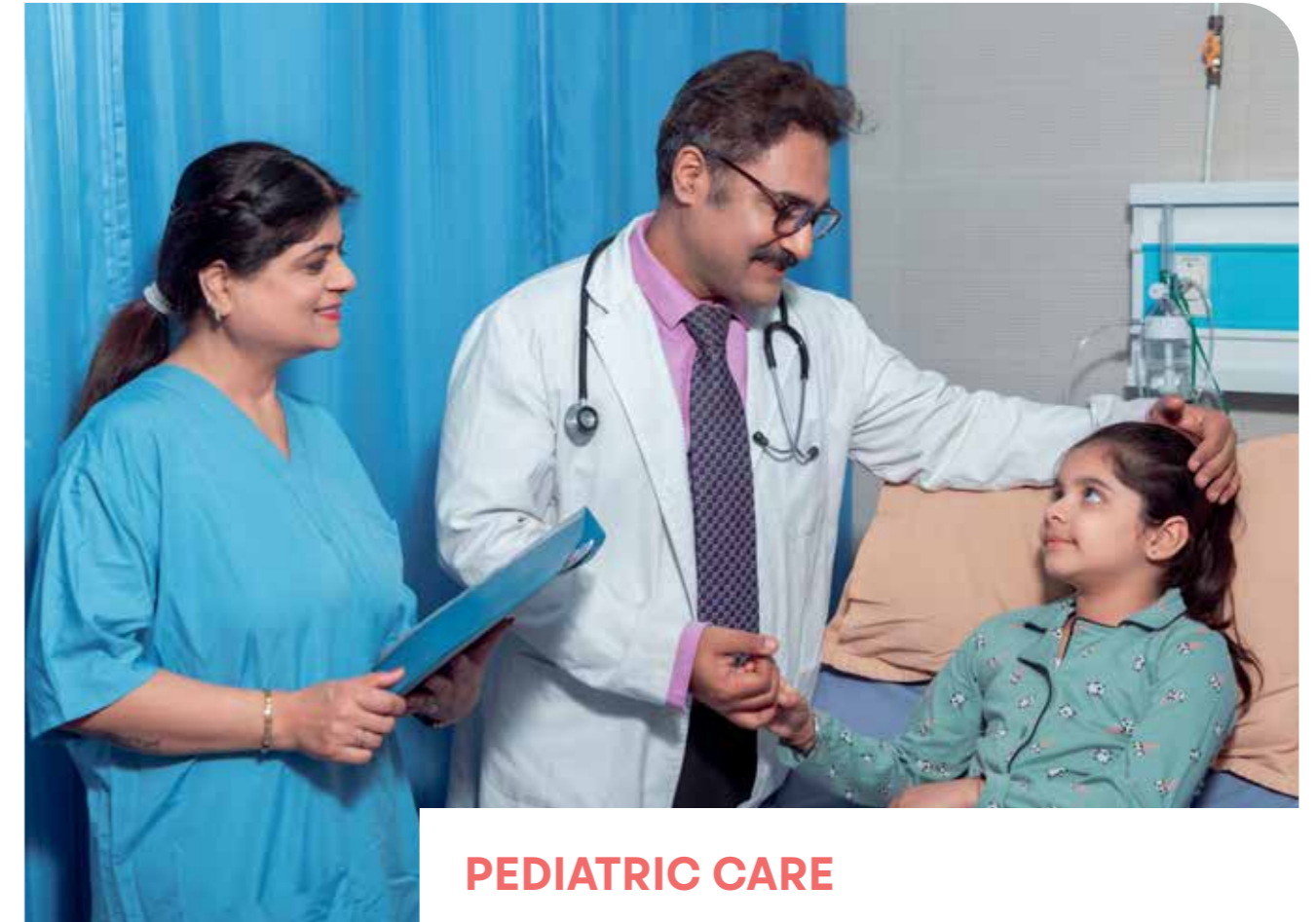
Vijayawada, 2007 #130	Visakhapatnam, 2020 #129	Rajahmundry, 2025 #100

2,375*
Total No. of Beds

*The number excludes the 60 Beds hospital at HRBR, Bengaluru, which commenced operations on May 1, 2026.

WHAT WE OFFER

Mastering Expertise across Every Need



PEDIATRIC CARE

Pediatric Secondary Care

- Pediatric Outpatient Services
- Immunizations
- Developmental Screening
- Treatments for Acute and Seasonal Illness

Pediatric & Neonatal Tertiary Intensive Care

- Care of Preterm Babies, Very and Extremely Low Birth Weight babies
- Sick term babies
- Newborn and Pediatric Emergency Transport
- Neonatal Surgical Services
- Inhaled Nitric Oxide Therapy
- Advanced Ventilation including HFOV
- Pediatric Neurocritical Care Services
- ECMO Service

Pediatric Multi-specialty and Quaternary Care

- Pediatric Surgery, Urology and Minimally Invasive Surgery
- Pediatric Cardiology and Cardiothoracic Surgery
- Pediatric Neurology and Neurosurgery
- Pediatric Hemato-Oncology
- Pediatric Gastroenterology and Liver Diseases
- Pediatric Nephrology
- Pediatric Orthopedics
- Pediatric Pulmonology and Allergy
- Pediatric Organ Transplantation (Liver, Kidney, Bone Marrow)
- CRRT Services



Extensive Tertiary and Quaternary Care Offerings

Department of Pediatric Surgery, Urology and Minimally Invasive Surgery

Core Expertise

- Neonatal Surgery
- Pediatric Urology and Minimally Invasive Surgery
- Hepatobiliary Surgeries
- Correction of Congenital Malformation

Department of Pediatric Cardiology and Cardiac Sciences

Core Expertise

- Congenital Heart Disease
- Arrhythmias
- Childhood Hypertension

Pediatric Neurology and Neurosurgery

Core Expertise

- Epilepsy, Autism and ADHD
- Neuromuscular Disorders
- Developmental Disorders
- Congenital Malformations of Nervous System

Department of Hemato-Oncology

Core Expertise

- Childhood Leukemia
- Brain Tumors
- Solid Tumors
- Diagnosis and Treatment of Various Hematological Disorders
- Bone Marrow Transplant

Department of Pediatric Gastroenterology

Core Expertise

- Acute and Chronic Liver Disease
- Food Intolerances / Allergies
- GERD (Gastroesophageal Reflux Disease)
- Pancreatitis
- Liver Transplant

Department of Pediatric Nephrology

Core Expertise

- Acute and Chronic Renal Failure
- Nephritis and Nephrotic Syndrome
- Urinary Tract Infections
- CRRT
- Plasmapheresis
- Kidney Transplant

Department of Orthopedics

Core Expertise

- Childhood Trauma
- Correction of Congenital Deformities
- Ligament Repairs

Department of Pulmonology and Allergy

Core Expertise

- Asthma
- Acute and Chronic Cough
- Chronic Lung Disease
- Sleep Apnea

Pediatric Transplant Program

Core Expertise

- Bone Marrow Transplant
- Liver Transplant
- Kidney Transplant



Women Care

Fetal Medicine

- Targeted Imaging for Fetal Anomalies (TIFFA Scan)
- Chromosome Screening
- Prenatal Testing and Diagnosis
- Fetal Growth Assessments and Well-Being
- Fetal Therapies like Intra-Uterine Transfusions, Laser Interstitial Ablations, etc.

Obstetrics

Pregnancy and Childbirth

- Prenatal Care including Neonatal Specialty Care, Diagnostics, Advanced Imaging and NICUs

High-Risk Pregnancy Care

- Complex Obstetric Surgeries
- Multi-Disciplinary Care
- Maternal Intensive Care
- Supports Natural yet Painless Birthing

GYNECOLOGY

- Ovarian Cysts and Polycystic Ovarian Syndrome (PCOS)
- General Gynecologic Conditions and Pelvic Pain
- Minimal Access Surgery and Advanced Gynecological Surgery
- Birth Control Needs

Fertility Care

- Intrauterine Insemination (IUI)
- In-Vitro Fertilization (IVF)
- Intracytoplasmic Sperm Injection (ICSI)
- Intracytoplasmic Morphologically Selected Sperm Injection (IMSI)

WHAT DIFFERENTIATES RAINBOW

Where the Art of Care Stands Apart

CARE DESIGNED AROUND CHILDREN

Every Rainbow Hospital is built keeping children in mind. Bright spaces, comforting environments, and child-friendly interactions help reduce anxiety and make care experiences emotionally supportive. It creates an atmosphere where recovery feels natural and reassuring.



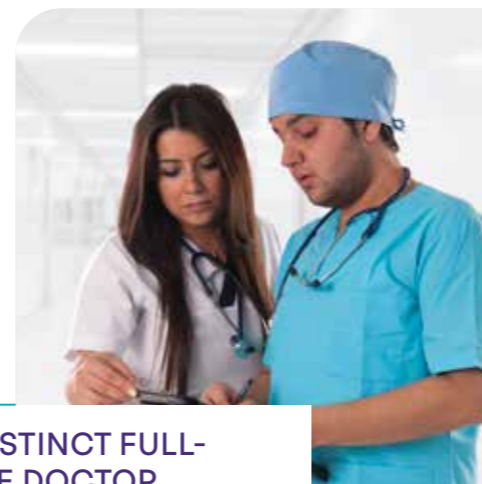
DEEP PEDIATRIC EXPERTISE UNDER ONE ROOF

Our strength lies in comprehensive pediatric specialization. From routine care to complex surgeries, advanced NICU/PICU, and transplant services, we offer multi-disciplinary care supported by evidence-based clinical pathways and experienced specialists working as one team.



INTEGRATED PERINATAL MODEL

Through BirthRight by Rainbow, we provide seamless care for expecting mothers and newborns. Prenatal care, high-risk pregnancy support, fetal medicine, birthing, neonatal intensive care and postpartum guidance come together to create a unified care experience instead of fragmented service points.

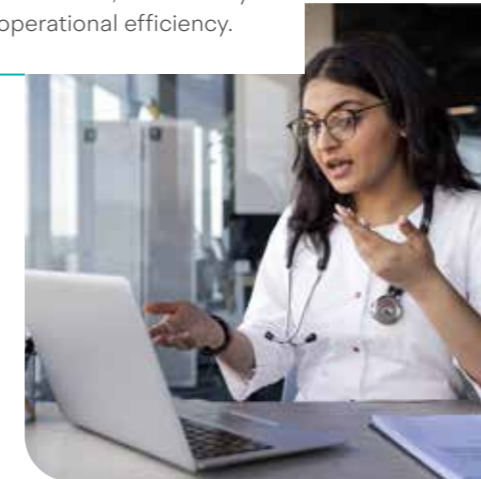


A DISTINCT FULL-TIME DOCTOR ENGAGEMENT MODEL

Our doctors are fully engaged on a dedicated, full-time basis. This ensures continuity of care, real-time clinical decision-making, and availability round-the-clock – especially essential for emergency, neonatal and intensive care. The model also supports clinical collaboration and accountability.

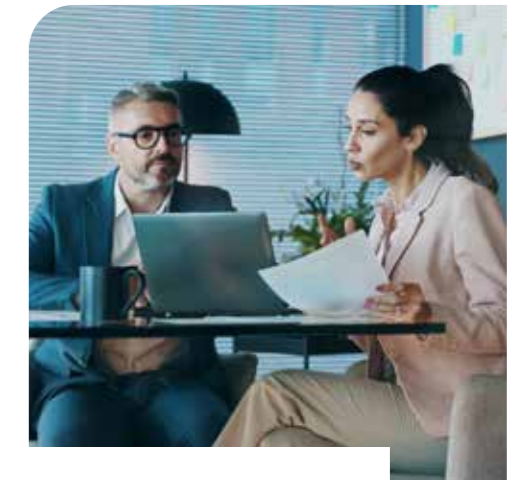
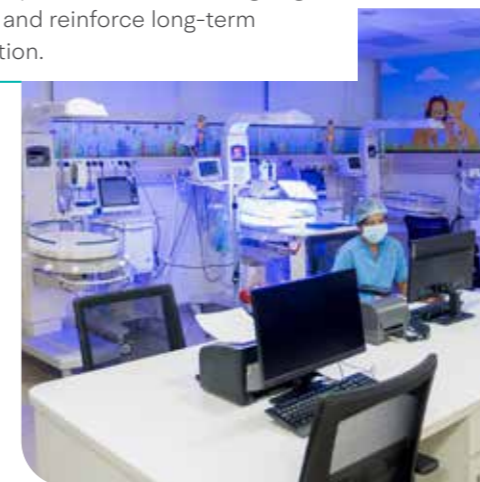
HUB-AND-SPOKE NETWORK ADVANTAGE

Our operating structure enables access and scalability. Hub hospitals anchor advanced care and high-complexity services, while spoke units extend essential maternity and pediatric services closer to communities. This balance supports reach, consistency and operational efficiency.



PROVEN PERFORMANCE AND GROWTH DISCIPLINE

Over the years, we have demonstrated strong performance, healthy unit economics and disciplined execution. With consistent cash flows and a clear capital allocation approach, we remain well-positioned to fund ongoing expansion and reinforce long-term value creation.



LEADERSHIP WITH VISION AND PURPOSE

Our Board and leadership team bring strategic clarity, deep industry insight, and operational expertise. Their guidance shapes our long-term journey, strengthens governance and fuels innovation.



RESPONSIBLE, SUSTAINABLE GROWTH

ESG remains integral to how we operate. From safety and patient rights to community support, governance transparency and resource stewardship, we continue to build an organization that creates long-term value – responsibly and ethically.

OUR JOURNEY

How We Have Evolved

- Hospital addition
- Clinic addition
- Service expansion and excellence
- Other achievements

1999

- Commenced operations with first hospital at Banjara Hills, Hyderabad

2007

- Established hospital at Vijayawada
- Broadened our services to include obstetrics and gynecology

2010

- Started first outpatient clinic at Madhapur, Hyderabad

2015

- Established spoke hospitals at Hydernagar, Hyderabad, and Hub at Marathahalli, Bengaluru
- Rebranded our perinatal services division as 'BirthRight by Rainbow Hospitals'

2017

- Expanded Hub Hospital "Madhukar" at Malviya Nagar, New Delhi

2019

- Started IVF facility at Kondapur, Hyderabad
- Established standalone Cardiac Hospital at Hyderabad (RCHI)
- Acquisition of Rosewalk Healthcare Private Limited, New Delhi

2024

- Received JCI accreditation for Marathahalli, Bengaluru
- Established three spoke hospitals: Himayatnagar, Hyderabad; Sarjapur, Bengaluru; and Anna Nagar, Chennai
- Expanded our capacity by adding a new block at our Hydernagar Hospital, Hyderabad
- Established an outpatient clinic at Hennur, Bengaluru
- Added IVF services at 8 hospitals

2026

- Expanded into Warangal, Telangana through a strategic acquisition
- Entered the Northeast region through the acquisition of a hospital in Guwahati
- Commissioned hospital at Rajahmundry, Andhra Pradesh
- Commenced operations at Electronic City, Bengaluru
- Received NABH re-accreditation for Bannerghatta Road, Bengaluru and first-time NABH accreditation for Sholinganallur, Chennai
- Great Place to Work-certified for the sixth time, with a 90%+ score

PROGRESSION OF OUR MASTERED ART

2006

- Started DNB pediatric training program at Banjara Hills, Hyderabad

2009

- First spoke hospital established at Vikrampuri, Hyderabad

2013

- Established spoke hospital at Kondapur, Hyderabad
- Secured investment from CDC Group, UK

2016

- Established two spoke hospitals: Bannerghatta Road, Bengaluru and LB Nagar, Hyderabad
- Set Guinness World Record for assembling the largest gathering of people born prematurely
- Second tranche of investment by the CDC Group, UK
- Established an outpatient clinic at Governorpet, Vijayawada

2018

- Expanded into Chennai by establishing Hub hospital at Guindy

2023

- Established spoke hospital at Financial District
- Received JCI accreditation for Banjara Hills, Hyderabad

2025

- Received JCI re-accreditation for BirthRight Fertility, Kondapur, Hyderabad
- Received NABH accreditation for Visakhapatnam
- Performed first liver transplant at Guindy, Chennai
- Received liver transplant license at Marathahalli, Bengaluru
- Commissioned Child Development Center to provide comprehensive developmental care
- Started 'Butterfly Essentials' for Women and Children
- Outpatient clinic opened at Attapur, Hyderabad

Awards and Accolades

AWARDS AND ACCOLADES

Recognized for the Art of Care

Accreditations

Rainbow Children's Hospital at Banjara Hills, Hyderabad and Marathahalli, Bengaluru have been accredited with 'The Gold Seal of Approval' by Joint Commission International (JCI), a trusted symbol of quality and patient safety worldwide.

Rainbow Children's Hospital & BirthRight at Sholinganallur, Chennai, and Hebbal, Bengaluru, received accreditation from the National Accreditation Board for Hospitals & Healthcare Providers (NABH), recognized globally as a standard for healthcare excellence.



Guinness World Record Holder for the Largest Gathering of People Born Prematurely- 2016



Southeast Asia's Smallest Baby Born at Rainbow Children's Hospital, Secunderabad & Marathahalli - 2018



Certified for the Sixth Year



Rainbow Children's Hospital, Marathahalli, Bengaluru Accredited by JCI in 2024



BirthRight Fertility by Rainbow Children's Hospitals, Kondapur, Hyderabad Accredited by JCI in 2022



India's first NABH Accredited Corporate Children's Hospital



Ranked India's No.1 in Pediatrics, Obstetrics & Gynecology & No.2 in Infertility - 2023



Awarded Best Children's Hospital in India by CNBC TV 18 and ICICI Lombard - 2010, 2014, 2018



Ranked India's No. 1 standalone pediatrics hospital in The Week-Hansa Research Survey, 2021-2022



Best Hospital for Mother & Childcare, Best Hospital for Obstetrics and Gynecology 2024



Ranked No.1 in National Single Speciality - Pediatrics Times Critical Care Survey 2022, 2023



Ranked No.1 in Obstetrics & Gynecology Hospital in - Times Critical Care Survey - 2021



The Best Multi Speciality Hospital in Fertility and IVF category 2018-2019



Awarded as Leader in Safe Delivery



Best Organization for Women 2026



Pioneer in Women & Children's Hospital 2024



VCCircle - Best Pediatric Hospital (under best Single Speciality Healthcare Company category) 2015, 2016



Rainbow Children's Hospital & BirthRight, Secunderabad & Marathahalli World's Best Specialized Hospitals 2025



Rainbow Children's Heart Institute Hyderabad. World's Best Specialized Hospitals 2025



Pharmacie De Qualite', Certification from the Bureau of De Veritas - Rainbow Children's Hospital, Banjara Hills - 2017



Amazing Workplace for Excellence in People Practices 2025

Creating Stakeholder Value

This section explains how we create value in a fast-evolving healthcare landscape, setting the context in which we operate, the model that drives our business, the priorities that matter most and the risks we prepare for. It also lays out how we engage with stakeholders and align our strategic actions to long-term value creation.

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OPERATING CONTEXT

Assessment of Healthcare Delivery Sector in India

With its advanced clinical services spanning pediatric care, neonatal intensive care, perinatal care and women's health and a strong presence in strategic locations, Rainbow is well positioned to meet the growing healthcare needs of children and mothers across India.

Demographic Drivers

India's urban population continues to expand, fueling demand for maternal and pediatric healthcare. Women's workforce participation has grown to ~27.7% in urban areas and ~45.9% in rural areas by FY2025. Greater financial independence among women is strengthening household healthcare spending and increasing preference for institutional maternal care and specialized pediatric services. Families are seeking hospitals that combine clinical expertise with child- and mother-centric care, particularly in urban and semi-urban regions.

Rising Incomes and Affordability

The proportion of middle- and high-income households has grown from 86% in FY2021 and is projected to reach ~95% by FY2031. Higher disposable income enables broader access to premium healthcare, including pediatric care, maternal-fetal medicine and preventive wellness programs. This growing affordability supports private hospitals and super-specialty services across urban and semi-urban markets.

Pediatric and Neonatal Care

The pediatric healthcare sector is projected to grow strongly. NICU services are expected to expand at a CAGR of 11.5–13.5% from FY2025 to FY2030, reaching ₹85–95 billion. The broader pediatric market is anticipated to grow at a CAGR of 12–14%, reaching ₹3,240–3,540 billion by FY2030. Expansion into tier-2 and tier-3 cities and advanced services are key growth drivers. India currently has about 16 hospital beds per 10,000 population, below the global benchmark of ~33 beds per 10,000. Within this overall capacity, pediatric and neonatal care is particularly underserved, highlighting gaps in facilities for children.

Maternal Healthcare

The maternity healthcare market reached ₹542 billion in FY2025, growing at 8% CAGR from FY2020 to FY2025. Growth was supported by higher institutional delivery rates, increased household spending on childbirth and antenatal care and broader insurance coverage. Families increasingly invest in maternity packages covering advanced diagnostics, specialized consultations and structured postnatal care. The market is projected to grow at 9–10% CAGR, reaching ₹810–860 billion by FY2030, driven by rising maternal age, high-risk pregnancies, preventive care and advanced technologies such as 3D/4D ultrasound and non-invasive prenatal testing.

Pediatric Super-Specialty Care

Pediatric super-specialty care addresses complex conditions that require advanced clinical intervention beyond general pediatric care. These include congenital heart disease, childhood cancers, epilepsy and neurological disorders, respiratory and infectious diseases, developmental conditions such as ADHD and autism, organ failure, speech-related disabilities, neuromuscular conditions, child mental health concerns and congenital anomalies. India continues to face gaps in access due to uneven facility distribution, high treatment costs, specialist shortages and limited infrastructure outside major cities.

Health Insurance Coverage

Health insurance continues to expand access to maternal and pediatric care. Coverage stood at nearly 573 million people in FY2024 and is projected to rise to 45–50% by FY2026. Employer-provided coverage has also increased the proportion of insured patients, creating more predictable hospital demand and reducing reliance on out-of-pocket payments.

Government Initiatives Supporting Care

Government programs underpin growth in maternal and pediatric healthcare. The Pradhan Mantri Jan Arogya Yojana (PM-JAY) provides comprehensive insurance for low- and middle-income families. State initiatives such as Karnataka's Thayi Bhagya and Telangana's Aarogyasri, along with programs including KCR Kit, INAP, SUMAN and JSSK, support maternal and child health, encourage institutional deliveries and promote quality standards across hospital networks.

Some of the issues that we address are:

1. Birth prevalence of congenital heart disease is 9/1000, the estimated number of children born with congenital heart disease in India is more than 200,000 per year.
2. Childhood cancer impacts over 200,000 children annually and is projected to escalate to 21 million diagnoses by 2030.
3. Epilepsy is a chronic brain disorder marked by recurrent seizures. Many children experience a mild form that resolves naturally, while others have persistent cases requiring lifelong medication. In India, prevalence of pediatric epilepsy is about 0.8%.
4. India is one of the 15 highest burdened countries in terms of

total pneumonia episodes and related childhood mortality. In India, acute respiratory infection (ARI) related diseases are estimated to account for 13–16% of all child deaths among pediatric hospital admissions.

5. Autism spectrum disorder (ASD) is a complex neurodevelopmental condition characterized by deficits in social interaction, communication difficulties, and repetitive behaviors that profoundly impact the lives of affected individuals and their families. The estimated prevalence in India is ~1.12 per 100 children aged 2-9 years, i.e., 1 in every 68 children is affected with autism.
6. In India, more than 1.7 million children are born with birth defects every year.

Fertility Healthcare

India's fertility healthcare market is gaining scale, supported by a large reproductive-age population, high infertility prevalence and low ART treatment penetration. According to CRISIL, India had the highest population of married or in-union women aged 20–49 years among select countries in CY2024 and is expected to retain this position through CY2030. India also

recorded the highest number of births among the selected countries in CY2024. The ART healthcare delivery market stood at ₹83 billion in FY2025 and is projected to reach ₹160–174 billion by FY2030, growing at a CAGR of ~14–16%. This creates a meaningful opportunity for integrated women's health platforms offering fertility, maternity and pediatric care.

Technology and Digital Health

Digital solutions are improving reach, efficiency and outcomes. Telemedicine, remote monitoring, mobile applications and home healthcare services allow hospitals to serve non-metro and rural regions. The Ayushman Bharat Digital Mission (ABDM) enables integrated patient records, improving care coordination, operational efficiency and personalized interventions. Wearables and tele-emergency services allow timely monitoring of high-risk pregnancies and neonatal patients.

Medical Tourism Potential

The Indian medical tourism market is estimated at ₹150–160 billion in FY2025 and projected to reach ₹250–300 billion by FY2030, with maternal and child services accounting for 3–5% of this market. India attracts international patients due to high-quality clinical expertise, cost-effective care and advanced maternal and pediatric facilities. Hyderabad, Bengaluru and Chennai serve as major hubs, and Rainbow's strong presence in these cities positions it well to serve international patients seeking complex maternal and pediatric treatments.



BUSINESS MODEL

The Art of Creating Enduring Value

Input

Financial Capital

- Disciplined strategic investments and capital allocation

Manufactured Capital

- 23* Hospitals
- 5 Clinics, 1 IVF Center[#]
- 2,375 Beds*
- Best-in-class infrastructure and advanced medical equipment

Intellectual Capital

- Leading brands –Rainbow Children's Hospital, 'BirthRight by Rainbow', 'BirthRight Fertility By Rainbow Hospital' and 'Butterfly Essentials'
- Clinical excellence
- JCI and NABH accreditations
- Digital capabilities and systems
- International alliances
- 182 (as on March 31, 2026) Trainee doctors pursuing DNB, postgraduate and other fellowship programs in Rainbow network
- KONAR-MF Patent

Human Capital

- 4,724 Permanent employees
- 1,050+ doctors
- Elite consultant pool
- Experienced leadership team
- Regular training and development sessions for our people

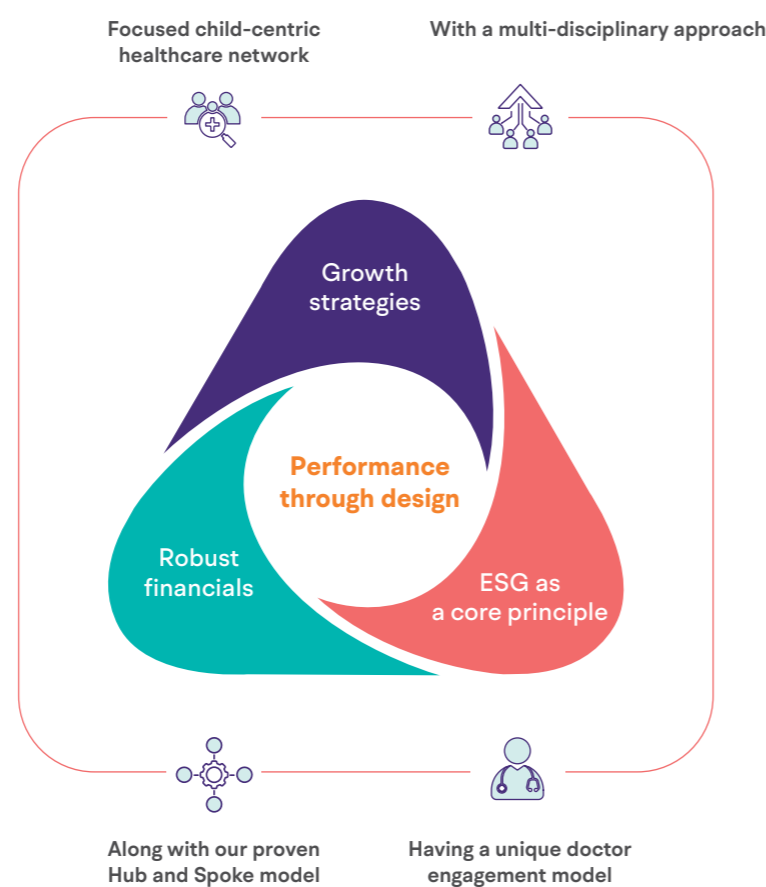
Social & Relationship Capital

- Trusted stakeholder relationships and corporate reputation
- Constructive relationships within the healthcare sector
- Partnerships with non-profit organizations

Natural Capital

- Adopted sustainable practices to take a step forward towards environmental stewardship
- 534,552 kWh Units of solar power generation

Strategic process



Vision

Our aim at Rainbow Children's Hospitals is to provide high standards of care for the mother, fetus, new-born and children so that none of them is deprived of a tertiary care facility.

Mission

The measure of our success is in the number of smiling faces.

Output

Financial Capital

- ₹17,031 million Revenue
- ₹5,442 million EBITDA
- ₹2,815 million PAT

Manufactured Capital

- Services offered
 - Child Care
 - Comprehensive Super-Specialty Pediatric Care
 - Women's Care
 - Fertility Care
 - Diagnostic Services
- 1598k+ Outpatient visits
- 104k+ Inpatient admissions

Intellectual Capital

- 345 Liver, bone marrow and Kidney transplants since inception
- 2000+ cardiac surgeries since inception
- 51 Research papers published in FY2026

Human Capital

- 62% women representation in workforce
- Doctors trained and upskilled
- Nurses and staff trained and upskilled
- Career growth
- Opportunity to relocate

Social & Relationship Capital

- Educational support to schools
- Free medical camps
- Collaborated with YouTube to create informative videos addressing children's and women's health issues
- Various Resident Welfare Associations (RWAs) and corporate tie-ups

Natural Capital

- 8,408 MT Total carbon emission reduction through direct (solar panels) and indirect (open access) methods.
- 76 Mn Liters Total water recycled
- 366 MT Bio-waste disposed safely

Outcome

- Constant and sustained growth in revenue and profitability
- Strong balance sheet and liquidity position

- Increased operational efficiency
- Expansion of facilities

- Management of complex medical cases
- Development of sustainable technologies and processes.
- Building strong brand value and recall

- Increased retention rate; safe, inclusive and open work environment
- Diverse and committed workforce

- Sustained and consistent value creation for stakeholders
- Uplifting the communities in which we operate

- Reduced environmental footprints
- Ensured resource efficiency and waste minimization

SDG Linkage



*The number excludes the 60 Beds hospital at HRBR, Bengaluru, which commenced operations on May 1, 2026
[#]Mahadevpura IVF clinic commenced operations from May 1, 2026

Including full time residents and DNBs

MANAGING STAKEHOLDER RELATIONSHIPS

Strengthening Bonds of Care and Confidence

We actively engage with key stakeholder groups that influence our strategy and long-term success. Our approach prioritizes transparent, meaningful, and consistent communication to understand their expectations and address concerns proactively. This structured engagement framework not only strengthens relationships but also enhances patient experiences and supports overall value creation.



Patients/Customers

Key Expectations

- Quality/efficiency of service
- Cost effectiveness
- Hygiene in environment
- Innovation in services/products
- Timely availability of services
- Patient data privacy (restrict personal data use/shred documents)

Mode of Engagement

- CRM
- Daily/weekly/monthly or continuous monitoring based on feedback system depending on the nature of stakeholder engagement
- Website and social media
- Company's Public Relations Officer
- Customer support desk
- Patient feedback system
- Patient satisfaction survey

How We Measure Success

- Patient feedback, including complaints and constructive suggestions, with regard to price and quality
- Patients' downtime
- Success rate of treatments/procedures
- Repeat patients
- Patient satisfaction score

Capital Linkage



Government

Key Expectations

- Legal compliance
- Regulatory compliance
- Healthcare for all

Mode of Engagement

- Compliance department within the Company
- Compliance with drugs and healthcare norms and regulations
- Annual reports
- Filing of returns
- Report submissions
- Compliance with ESG
- Timely payment of taxes
- Press release

How We Measure Success

- Number of litigations
- Non-compliance penalty, if any

Capital Linkage



Investors

Key Expectations

- Financial performance
- Operational performance
- Corporate governance
- Management strategies and outcomes
- Dividends

Mode of Engagement

- Integrated Annual Report
- Website
- Quarterly and annual presentations and earnings calls
- Annual General Meeting
- Information provided about financial and operational management
- Announcements to stock exchanges
- Investor Relations communications

How We Measure Success

- Investor complaints
- Feedback from Investors
- Response during Analyst calls

Capital Linkage



Employees

Key Expectations

- Physiological safety
- Learning and growth opportunities
- Sense of belongingness

Mode of Engagement

- Robust learning journeys
- Continuous performance development
- Competitive compensation and benefits
- Intranet portal
- Cultural events
- Structured employee surveys
- Periodic town halls to enable bottom-to-top communication
- Culture of service orientation with each other

How We Measure Success

- Retention figures
- Average organization performance score
- Internal talent mobility vs. external hiring for open positions
- Promotion
- GPTW survey scores
- Number of employee grievances

Capital Linkage



Suppliers

Key Expectations

- Number of orders
- Competitive pricing
- Consistency of orders
- Timelines
- Payment methods
- Other terms and conditions of delivery

Mode of Engagement

- Procurement policy
- Purchase committee
- Logistics committee
- Regular meetings between supplier and the management
- Timely payments
- Transparent processes
- Negotiations
- Measuring deliverables

How We Measure Success

- Positive feedback
- Complaints/constructive feedback
- Credit period
- Stock-out percentage
- Timely delivery
- Repeat purchase percentage

Capital Linkage



Society

Key Expectations

- Analysis of healthcare needs of the society
- Identifying the gap between demand and supply
- Prevention of illnesses
- Need for private practitioners and hospitals to work cohesively

Mode of Engagement

- Social media
- CSR
- Community building sessions
- Awareness campaigns
- Health surveys
- Discussions on medical issues
- Press conferences
- Health talks and camps
- Fulfilling health requirements

How We Measure Success

- Positive feedback
- Complaints/constructive feedback
- Number of attendees for public events
- Responses on social media

Capital Linkage



STRATEGIC IMPERATIVES

Mastering the Next Phase of Care

We continue to execute our multi-faceted strategy to deliver superior patient outcomes, extend reach, enhance efficiency and drive sustainable growth. During FY2026, this translated into a sharper focus on strengthening clinical capabilities, adopting digital tools, accelerating hospital ramp-up, enhancing patient engagement and building greater operational consistency across the network.



S1 Strengthen Tertiary and Quaternary Pediatric Services

- We focus on continuously expanding our tertiary and quaternary care offerings through our hub hospitals, which serve as centers of excellence for specialized treatments. This enables us to deliver critical care to the most vulnerable patients.**
- Key Achievements in FY2026**

 - Successfully strengthened pediatric liver transplant programs across Hyderabad, Bengaluru and Chennai, with an overall survival rate of 94% over the past six years
 - Successfully performed the first pediatric liver transplant at the Bengaluru hub hospital, supported by strong multidisciplinary coordination and clinical systems
 - Strengthened advanced pediatric capabilities across gastroenterology, transplant care, bone marrow transplantation, rare disease management and complex interventions
 - Continued to see strong traction across pediatric specialties and quaternary care services, improving case mix across the network

S2 Further Our Comprehensive Services

Strengthening our perinatal care offerings through enhanced training and expansion of services and geographical footprint remains a key strategic priority.

Key Achievements in FY2026

- Added IVF services in 3 hospitals, bringing the total to 15 facilities, with IVF contributing ~4% of overall revenues during the year
- Strengthened IVF capabilities through investments in infrastructure, technology and specialized personnel
- Continued strengthening Rainbow's integrated mother-and-child care positioning across markets through focused patient outreach and engagement initiatives
- Continued scaling Butterfly Essentials across hospitals, strengthening patient convenience and engagement offerings

S3 Grow Our Presence through Hub-and-Spoke Networks

We aim to replicate our successful hub-and-spoke model in high-potential cities, while increasing hub capacity and evaluating both organic and inorganic growth opportunities in new locations.

Key Achievements in FY2026

- Acquired and integrated Prashanthi Hospital, Warangal into the Rainbow network
- Expanded into the Northeast region through the acquisition and integration of Pratiksha Hospital, Guwahati
- Commenced operations at the Rajahmundry hospital, strengthening our presence across coastal Andhra Pradesh
- Operationalized the Electronic City hospital in Bengaluru and progressed the HRBR hospital toward completion
- Entered the final phase of a major capacity expansion cycle, having added nearly 780 beds over the past two years through expansions and acquisitions
- Continued evaluating expansion opportunities in high-potential markets

S4 Timely Execution of Projects

Strategic project planning and efficient resource allocation ensure timely commissioning of new facilities and services. This approach enhances patient outcomes and our reputation for efficiency and reliability.

Key Achievements in FY2026

- Executed new projects broadly in line with Board-approved plans
- Advanced development work across HRBR, Coimbatore, Gurugram and Pune projects
- Strengthened cross-functional coordination, centralized project governance and regular review mechanisms to support timely execution
- Continued refining launch-readiness and pre-launch market development processes for new hospitals
- Strengthened standardized launch playbooks to support faster hospital ramp-up and more consistent execution

S5 Drive Performance Efficiencies

We are committed to enhancing operational efficiency through process optimization, technology integration, talent development and improved capacity utilization.

Key Achievements in FY2026

- Strengthened sales and marketing leadership to improve occupancy and patient acquisition across the network
- Enhanced process standardization, structured planning frameworks, cross-functional coordination and review mechanisms to improve execution discipline
- Advanced targeted digital campaigns, CRM-led patient tracking and call center operations to improve lead quality and conversion
- Strengthened doctor outreach, institutional tie-ups and referral management across key markets
- Refined ramp-up strategies for new hospitals, with stronger launch visibility, targeted demand generation and early referral network building
- Advanced the people and capability pillar through clearer goal-setting frameworks, stronger team collaboration and increased focus on mentoring and leadership development
- Continued focusing on occupancy improvement, service mix enhancement and operational maturity across hospitals

S6 IT Transformation

Leveraging digital tools to improve patient convenience, streamline operations and extend our reach remains a strategic focus.

Key Achievements in FY2026

- Onboarded a new CRM platform to strengthen lead management and patient conversion tracking
- Enhanced patient journey tracking and conversion analytics through data automation initiatives
- Continued progressing toward a more integrated EMR-based ecosystem across the network
- Advanced digital front-door initiatives including upgrades to the website, patient app and doctor interfaces
- Enabled stronger online consultation and digital payment capabilities to improve patient convenience
- Strengthened Business Intelligence and data-driven decision-making capabilities across functions

S7 Grow International Business

With strategically located hospitals across South India and the National Capital Region, we are well positioned to capitalize on the growing medical tourism opportunity and deliver high quality healthcare services to international patients.

Key Achievements in FY2026

- Strengthened referral partnerships and institutional tie-ups across key international markets
- Enhanced digital outreach and direct-to-patient engagement initiatives to improve international patient acquisition
- Evaluated new market opportunities and partnership-led growth initiatives, with a focus on Southeast Asia
- Adapted international business strategies in response to geopolitical developments and visa-related disruptions in select markets
- Improved international patient experience through stronger coordination, streamlined processes and enhanced engagement initiatives

RISK MANAGEMENT AND MITIGATION

The Vigilance Behind Every Little Life

Delivering specialized care for children demands constant vigilance, rapid response and disciplined systems. Our risk management approach strengthens preparedness, safeguards patient trust and supports resilient, high-quality care across the network.

At Rainbow, risk management is embedded into our culture, supporting informed decision-making and long-term value creation. Our framework enables us to identify emerging risks early, assess their potential impact, and respond with agility. This disciplined approach ensures that patient safety, operational resilience, and financial strength remain uncompromised.



Monitoring and managing risk

Our risk processes are anchored in a formal Risk Management Charter approved by the RMC. The approach combines structured assessments with real-time intelligence gathered from across the organization. Key elements include:

- Internal audits, process walkthroughs, and risk-based reviews
- Ongoing monitoring of internal controls and identification of process gaps
- Insights gathered through stakeholder inputs, environmental scanning, and perception surveys
- Continuous evaluation of mitigation effectiveness and timely course-correction



Risk register and functional accountability

Each function maintains a detailed Risk Register that maps operational, clinical, digital, regulatory, and strategic risks. Risks are scored based on likelihood and impact, supported by documentation on root causes, early warning indicators, mitigation timelines, and monitoring mechanisms. New risks are identified by operational leaders, while status updates are periodically presented to the RMC. The Committee receives formal risk updates every six months.



Oversight and governance

Risk oversight begins at the top. The Board of Directors has constituted a dedicated Risk Management Committee (RMC), chaired by an Independent Director, to guide and monitor our risk framework. The RMC reviews key risks, evaluates mitigation progress, and provides structured updates to the Board. This ensures that risks across strategy, operations, quality, finance, digital systems, and compliance are addressed with clarity and accountability.

During FY2026, we continued to strengthen our Enterprise Risk Management framework through periodic risk identification and assessment exercises, heat-map-based prioritization, structured mitigation planning, internal audit inputs and functional leadership reviews. Key areas reviewed included expansion execution, regulatory changes, operational-readiness, talent availability, compliance, patient safety and evolving stakeholder expectations.



Linking risks to strategy

Risk intelligence sits at the core of strategic planning. Our strategic priorities, including strengthening pediatric leadership, enhancing perinatal depth, expanding the network and investing in digital systems, are directly informed by risk assessments. This alignment ensures that strategy not only drives growth but also reinforces resilience and long-term sustainability.

Risk considerations are integrated into discussions on capacity addition, market expansion, new hospital ramp-up and operational priorities. This helps us balance growth with disciplined execution, particularly as we enter new geographies, integrate acquired hospitals and strengthen utilization across our network.



Technology-enabled risk monitoring

Technology continues to strengthen our ability to monitor and mitigate risks across operations. Integrated HIS, HRMS and SAP platforms provide visibility into key operational and patient-related indicators, while digitized medical records support secure and efficient data management. Our IT architecture includes firewalls, perimeter controls, structured access management and cyber insurance coverage to support digital resilience and business continuity.



Risk Group	Focus Areas	Mitigation Measures
Clinical, Patient Safety and Quality Risk	Infection control, emergency-readiness, ICU escalation, medication safety, adverse event reporting and clinical pathway adherence	<ul style="list-style-type: none"> • Infection Control Committee reviews • Mock drills • Early Warning Score (EWS) triggers to identify patients showing signs of clinical deterioration • Prescription audits, high-alert medication audits and monitoring of Look-Alike Sound-Alike (LASA) drugs • Standardized crash carts, which are emergency trolleys stocked with critical medicines and equipment • Incident reporting, Root Cause Analysis (RCA) and Corrective and Preventive Action (CAPA) • Clinical audits and evidence-based care pathways across key specialties

Regulatory, Compliance and Accreditation Risk	NABH/JCI readiness, statutory inspections, biomedical waste, environmental compliance, labor laws and license renewals	<ul style="list-style-type: none"> • Internal and external audits to assess compliance-readiness • Mock assessments aligned with NABH and JCI requirements • Timely closure of audit observations through CAPA • Biomedical waste management through authorized vendor tie-up • Monitoring of air, water and surface quality, where applicable • Regular staff training on compliance, safety protocols and statutory obligations • Tracking of licenses, registrations and statutory approvals for timely renewal
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Operational and Infrastructure Risk	Manpower availability, equipment downtime, supply chain continuity, facility-readiness, HVAC, fire safety, medical gas supply and business continuity	<ul style="list-style-type: none"> • Preventive maintenance and equipment monitoring • Vendor coordination for critical equipment uptime • Manpower planning for critical areas • Regular facility audits and closure of identified gaps • Monitoring and replacement of aging HVAC units in critical areas and patient rooms • Fire safety checks, fire alarm readiness and emergency response preparedness • Monitoring of medical gas supply and other critical infrastructure systems • Incident reporting and operational learnings
--------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Risk Group	Focus Areas	Mitigation Measures
Digital, Cybersecurity and Data Privacy Risk	Cyber threats, data privacy, system downtime, access controls and digital resilience	<ul style="list-style-type: none"> • Vulnerability Assessment and Penetration Testing (VAPT) to identify and address system weaknesses • Security Operations Center (SOC) monitoring to detect and respond to cyber threats • Network Operations Center (NOC) monitoring to ensure uptime and reliability of IT systems • Business Continuity and Disaster Recovery readiness to support critical system availability • Authentication, authorization and encrypted database access across critical systems • Staff training on phishing, ransomware and cyber-safe practices • Cyber insurance and perimeter security controls

Strategic and Growth-Related Risk	Commissioning delays, market entry challenges, capacity ramp-up, competition, talent availability and evolving patient expectations	<ul style="list-style-type: none"> • Centralized project governance with milestone-based reviews • Phased capacity ramp-up and demand-based manpower hiring • Market assessments and location-specific launch strategies • Standardized operating and clinical governance frameworks for new hospitals • Talent acquisition, onboarding and training to support new units • Integration of acquired hospitals into Rainbow's HIS, SAP and HRMS platforms • Stronger sales, marketing and patient outreach to support occupancy growth
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Reviewing Our Performance

This section brings together a comprehensive view of how our six capitals shaped performance during the year. It outlines how we strengthened our infrastructure, invested in people, advanced clinical and digital capabilities, deepened stakeholder relationships, delivered financial growth and continued our commitment to responsible environmental practices. Together, these chapters reflect how Rainbow's everyday actions translate into long-term value for patients, communities and stakeholders.

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Social and Relationship Capital	82
Natural Capital	90



Financial Capital



Financial Capital

Investing with Discipline to Treat the Little

At Rainbow, disciplined financial management enables us to invest in the specialized infrastructure, clinical capabilities, technology and people required to deliver high-quality care. Our approach to financial capital is anchored in sustainable growth, prudent allocation and long-term value creation. FY2026 was an important year in this journey, as we completed a significant phase of capacity addition and moved forward with sharper focus on execution and efficiency.

Performance Review

FY2026 reflected resilient financial performance, supported by steady momentum across the network, consistent growth from mature hospitals and the gradual scale-up of newer facilities. We also exited the year with a strong finish, delivering our highest-ever quarterly revenue and achieving 20%+ year-on-year revenue growth in Q4 FY2026.

For the full year, revenue stood at ₹17,031 million, reflecting 12.4% growth over ₹15,159 million in FY2025. EBITDA increased by 11.1% to ₹5,442 million, while Profit After Tax grew by 15.3% to ₹2,815 million. EBITDA margin remained healthy at 32.0%, while PAT margin improved to 16.5%.

The performance was supported by a wider operating base, steady contribution from mature hospitals and the progressive ramp-up of newer facilities. Revenue quality also benefited from continued traction in specialized services, while disciplined cost management helped sustain healthy margins despite the scale-up phase.

Despite substantial capacity addition, occupancies remained stable, reflecting the strength of the underlying demand environment and the resilience of our operating model. Our key operating metrics, including outpatient footfalls, inpatient discharges and deliveries, continued to witness healthy growth across both mature and newly commissioned hospitals.

International business continued to face geopolitical and visa-related headwinds in select markets, which impacted patient inflows from certain countries. While this remained a constraint during the year, we continued to strengthen partnerships, digital outreach and internal coordination to rebuild this segment over the medium term.

ROCE and ROE stood at 26.07% and 18.07%, respectively, compared with 26.95% and 17.85% in FY2025. The movement should be read in the context of our recent capacity expansion cycle, where capital has been deployed ahead of full revenue maturity. As newly added hospitals scale, occupancy improves and utilization strengthens, we expect returns to progressively benefit from the larger operating platform.

Strategic Growth Drivers

Capacity Addition and Network Expansion

FY2026 was a year of meaningful network expansion. Rainbow added 440 beds during the year, marking the highest annual capacity addition in its history and significantly strengthening the platform for long-term growth across key markets.

Ramp-up of Newer Hospitals

Newer hospitals continued to gain traction across key markets. Our acquired assets and recently commissioned facilities are being aligned with Rainbow's operating model, systems and clinical standards. As these units mature, we expect them to contribute more meaningfully to revenue, utilization and cluster-level performance.

Strengthening of Mature Hospitals

Our mature hospitals remained important contributors to overall profitability. Their established clinical reputation, strong patient trust and deeper service mix continue to support the resilience of the business. As newer hospitals mature, we expect the overall revenue base to become broader and more balanced across clusters.

Clinical Depth and Service Mix

Our financial performance continues to be supported by clinical depth. Pediatric specialties, perinatal care, fertility and quaternary services remain central to our growth strategy. During the year, pediatric liver transplantation was successfully performed across our hub hospitals in Hyderabad, Bengaluru and Chennai.

Digital and Demand-generation Initiatives

We continued to strengthen digital engagement, patient acquisition and conversion. CRM-led patient tracking, improved call center performance, targeted digital campaigns and stronger collaboration between clinical, operations and marketing teams helped improve visibility across the patient journey. During the year, we also strengthened dashboarding, performance tracking and structured review mechanisms to improve accountability across units and drive sharper execution at the hospital level.

Financial Capital

Disciplined Capital Allocation and Strong Balance Sheet

We continued to maintain a robust financial position. As of March 31, 2026, cash, cash equivalents, fixed deposits and mutual fund investments stood at ₹5,942 million. These funds will support ongoing capital expenditure, merger and acquisition plans and future growth requirements. With our current cash position and anticipated internal accruals, we are well-positioned to complete planned capital expenditure using internal resources.

During FY2026, we invested ₹2,170 million in capital expenditure towards expanding and strengthening capabilities across existing and upcoming hospitals, in line with our long-term growth strategy.

The Board has also recommended a final dividend of 35% per equity share of face value ₹10, amounting to ₹3.5 per equity share, subject to shareholder approval.

Focus Areas for FY2027 and Beyond

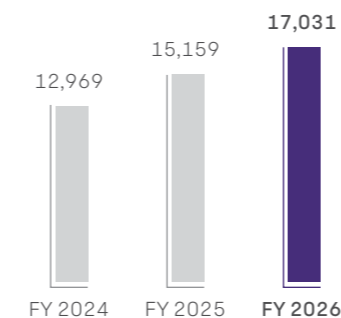
As we move into the next phase, our priorities will center on driving growth, improving occupancies, strengthening service excellence and enhancing consultant engagement across the network. We will also continue to deepen our clinical offerings across hub and regional spoke hospitals, with a sustained focus on outcomes, patient experience and depth of clinical work.

This transition will be supported by a stronger leadership structure, focused sales and marketing efforts, digital engagement and standardized execution frameworks. We will continue to evaluate inorganic opportunities and pursue strategic expansion through new spoke hospitals in existing geographies, while assessing entry into select new markets.

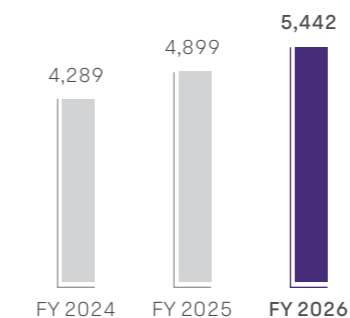
With our balance sheet strength, integrated hub-and-spoke model, expanding clinical capabilities and larger network platform, we are well positioned to pursue sustainable, execution-led growth while continuing to create value for patients, families and shareholders.



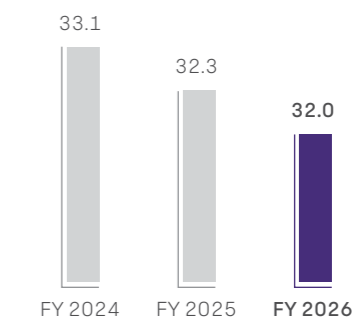
Revenue (Turnover)
(₹ million)



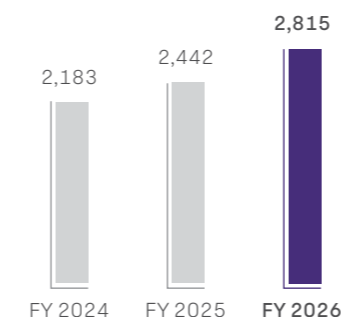
EBITDA
(₹ million)



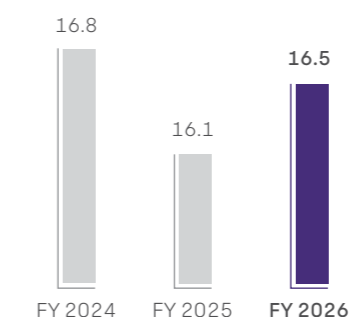
EBITDA Margins
(%)



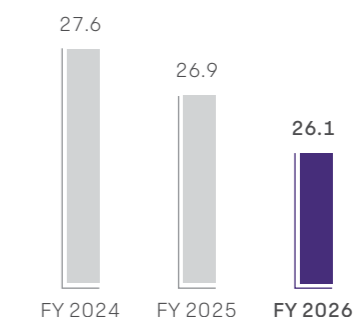
PAT
(₹ million)



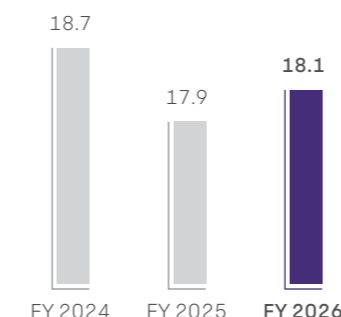
PAT Margins
(%)



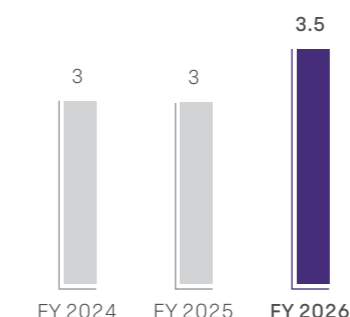
ROCE
(%)



ROE
(%)



Dividend per Share
(₹)





Manufactured Capital

Capacity Expansion

During FY2026, we expanded our hospital network by adding 440 capacity beds through the completion of key ongoing projects and strategic acquisitions. Our presence deepened in existing markets such as Bengaluru and Andhra Pradesh, while acquisitions enabled us to enter newer regional catchments.

Strategic Acquisitions

In Telangana, we added Prashanthi Hospital, Warangal, with 100 capacity beds, strengthening our Tier 2 presence and extending the Hyderabad hub-and-spoke model. In the Northeast, we added Pratiksha Hospital, Guwahati, with 150 capacity beds, marking our entry into a new regional market and broadening access to specialized pediatric and perinatal care.

Andhra Pradesh and Bengaluru Expansions

In Andhra Pradesh, we commissioned our Rajahmundry hospital, with 100 capacity beds, further strengthening our presence in Coastal Andhra Pradesh alongside Visakhapatnam and Vijayawada.

In Bengaluru, Electronic City, with 90 capacity beds, commenced operations, expanding our reach in a high-growth micro-market and strengthening the city's spoke network. Subsequent to March 31, 2026, the HRBR Hospital in Bengaluru, with around 60 beds, commenced operations, further strengthening our presence in the city. During the same period,

we also launched a dedicated IVF center spanning approximately 10,000 sq. ft. at Mahadevapura, further enhancing Bengaluru's integrated mother-and-child care ecosystem. This is one of the most advanced fertility centers with comprehensive reproductive, diagnostic and assisted fertility services under the BirthRight by Rainbow brand. With these additions, Bengaluru now has a network of ~600 beds across six hospitals, one outpatient clinic and two dedicated fertility centers, strengthening our position as the largest pediatric and perinatal care network in the city.

Scaling the Rainbow Care Model

The newly added hospitals have been integrated into Rainbow's operating framework, with clinical, operational and process alignment supporting consistency in care delivery across the network. Early traction has been broadly in line with expectations, reinforcing the scalability of our model across both existing and newer markets.

With the current phase of capacity addition largely complete, our near-term priority is to stabilize new hospitals, improve occupancy, build patient volumes, strengthen the service mix and drive operating leverage across the network.



Manufactured Capital

Built for Specialized Care, Scaled for Wider Access

At Rainbow, the art of treating the little is enabled by specialized hospitals, child-centric environments, advanced medical equipment and safe, reliable infrastructure. We continue to strengthen this foundation to expand access and deliver consistent, high-quality care for children, newborns and women.

FY2026 Network Additions		
Addition	Bed capacity	Strategic relevance
Prashanthi Hospital, Warangal	100 beds	Strengthens Tier 2 presence and extends the Hyderabad hub-and-spoke model
Pratiksha Hospital, Guwahati	150 beds	Marks entry into the Northeast and broadens regional access
Rajahmundry Hospital	100 beds	Strengthens Coastal Andhra Pradesh alongside Visakhapatnam and Vijayawada
Electronic City Hospital, Bengaluru	90 beds	Expands access in a high-growth Bengaluru micro-market
HRBR Hospital, Bengaluru ¹	60 beds	Deepens Bengaluru presence and supports cluster-level growth

¹ HRBR Hospital, Bengaluru commenced operations in May 2026 and has been included as a subsequent development.

Hub-and-Spoke Model

Our hub-and-spoke model is central to how we scale specialized pediatric and perinatal care across diverse geographies. At the core of this model is a hub hospital equipped with super-specialty services, advanced medical technologies, specialized infrastructure and expert clinical teams. These hubs provide comprehensive outpatient and inpatient care, with a focus on tertiary and quaternary services.

Spoke hospitals and clinics extend this model into high-growth catchments. They provide 24/7 emergency care, large outpatient services, obstetrics, pediatric inpatient care and Level 3 NICU services closer to patients' homes. While hub hospitals are centrally located to improve accessibility across a city, spokes are positioned in rapidly developing areas to serve nearby towns, suburbs and surrounding communities.

Benefits of our hub-and-spoke model

ACCESS

Brings specialized pediatric, obstetric and emergency care closer to families across high-growth urban and regional catchments

CLINICAL CONTINUITY

Enables timely referrals from spokes to hubs for complex tertiary and quaternary cases

CAPITAL EFFICIENCY

Allows optimal investment across hubs and spokes, with larger hospitals focused on complex care and spokes focused on broader access

NETWORK EFFECT

Improves regional penetration, strengthens patient transport pathways and supports operational synergies across cities



HYDERABAD



In South India, we have successfully implemented this model across Hyderabad, Bengaluru and Chennai. These hubs function as centers of medical excellence for complex cases and advanced care. Regional spokes in catchments such as Visakhapatnam, Vijayawada and Rajahmundry extend access across Andhra Pradesh, while Warangal supports wider access in Telangana.

CHENNAI



BENGALURU



● Hub ● Spoke ● Upcoming Hospital



Upcoming Hospitals

We continue to progress a calibrated project pipeline across select high-growth markets, aligned with our hub-and-spoke strategy and the long-term demand for specialized pediatric, obstetric and fertility care. These projects will be advanced through disciplined project governance, cross-functional coordination and regular review mechanisms.

Coimbatore Regional Hub Hospital, Tamil Nadu

Our upcoming regional hub hospital in Coimbatore is planned with around 130 beds. The project has entered the execution phase, with construction activities underway. Following a revision in project timelines, the hospital is now expected to commence operations in H2 FY2028.

Spoke Hospital at Seegehalli, Bengaluru

Towards the end of the year, we signed an agreement to lease for an asset-light greenfield spoke hospital with around 80 beds in the rapidly developing Seegehalli micro-market of Bengaluru. Once commissioned, it will be Rainbow's seventh hospital in the city and will further extend our access-led spoke network in a strategic growth market.

Gurugram Hospitals, NCR

We are progressing our planned expansion in Gurugram across Sector 44 and Sector 56. The Sector 44 hub hospital is planned with around 325 beds, while the Sector 56 spoke hospital is planned with around 125 beds. Together, these facilities will extend our specialized care model to NCR, a large and underserved pediatric healthcare market with strong potential to serve both North India and international patients.

Construction progress remains robust across both sites, with the Sector 56 facility expected to be commissioned ahead of the regional hub and currently targeted to commence operations in H2 FY2028.

Pune Regional Hub Hospital, Maharashtra

Our planned greenfield regional hub hospital in Pune, with around 150 beds, has received the requisite government approvals and excavation work has commenced at the site. Pune is an important future market for our pediatric and perinatal model, supported by a strong urban population base, high insurance penetration and growing demand for specialized mother-and-child care.



CHILD DEVELOPMENT CENTER

Our Child Development Center (CDC) at Hyderabad is a dedicated facility designed to provide comprehensive assessment, intervention and rehabilitation services for children with developmental, behavioral and neurodevelopmental needs. The Center brings together specialized infrastructure, advanced assessment tools and therapy spaces to support multidisciplinary care under one roof.

The facility is equipped to deliver a wide spectrum of services, including developmental and behavioral evaluations, speech and language therapy, occupational therapy, physiotherapy, psychological assessments and special education interventions. By integrating multiple specialties within a purpose-built environment, the Center facilitates coordinated care, early intervention and continuous developmental support for children across various age groups.

The Child Development Center strengthens our specialized pediatric care ecosystem by expanding access to developmental healthcare services and reinforcing our commitment to delivering holistic and patient-centric care through dedicated healthcare infrastructure.



Advanced Medical Equipment and Technology

Our investment in medical equipment is guided by the needs of specialized pediatric, neonatal, surgical and diagnostic care. During the year, we procured and upgraded critical equipment assets to improve clinical capability, diagnostic accuracy, procedural precision and care efficiency.

Major equipment additions and upgrades

- CT upgrade from 16-slice to 32-slice**
 Improves image clarity and diagnostic confidence
- Humming Vue ventilator**
 Supports high-frequency oscillation ventilation for pediatric patients
- geaNOX nitric oxide delivery system**
 Supports accurate nitric oxide delivery for therapeutic use
- 4K lap tower with 3D features**
 Enhances 3D visualization during minimally invasive procedures
- Neuro Navigation system**
 Enhances precision in neurosurgical procedures
- Neuro CUSA machine**
 Enables precise fragmentation, irrigation and aspiration of tissues and tumors during neurosurgery
- Digital X-ray and fluoroscopy replacing analog fluoroscopy**
 Enables better image quality and real-time imaging

These investments support advanced care across pediatric surgery, neurosurgery, intensive care, neonatal care and complex diagnostics. By upgrading imaging, ventilation, surgical visualization and precision systems, we are strengthening the infrastructure required to support high-quality outcomes in complex cases.



Equipment Reliability Framework

Equipment reliability is essential to clinical continuity, particularly in critical care settings. We follow structured preventive maintenance, calibration and safety testing protocols across our equipment base. These are supported by in-house engineering teams that conduct daily performance checks, enable faster response and help reduce equipment downtime.

Keeping care infrastructure ready

- Preventive maintenance**
 Conducted every three months for critical care equipment and every six months for non-critical equipment
- In-house engineering**
 Daily performance checks and faster downtime response
- Calibration and safety testing**
 Performed periodically to maintain accuracy, reliability and safety
- Lifecycle planning**
 Performance-based usage, preventive care and replacement or condemnation of underperforming assets
- Response time**
 24-hour TAT for critical care equipment and 72-hour TAT for non-critical equipment

Facility Safety and Compliance

Safety and compliance are critical to hospital infrastructure. We continued to maintain facility quality through policies and practices aligned with NABH and JCI requirements. Internal audits, mock drills, compliance reviews and multidisciplinary committees supported continuous monitoring across quality, infection control, safety and facility operations.

Staff received regular training on safety protocols and emergency preparedness throughout the year. Incident reporting, root cause analysis and corrective and preventive actions helped strengthen accountability and closure of findings. Legal requirements were tracked and reviewed periodically, while facility rounds provided a structured mechanism to identify and resolve infrastructure-related risks.



Key safety and compliance practices

Fire safety

Periodic testing of alarms, hydrants and extinguishers; fire drills across shifts; staff training on evacuation and firefighting equipment; valid fire NOC maintained

Biomedical waste management

Segregation at source through color-coded bins; dedicated storage with restricted access; authorized vendor tie-ups; regular training and audits

Hospital safety audits

Safety rounds for electrical, mechanical and environmental risks; annual third-party audits for fire and electricity; documented closure of audit findings

Accreditation-readiness

NABH and JCI-aligned policies, internal audits, compliance reviews and committee oversight

Infection Control and Hygiene Infrastructure

Given the vulnerability of newborns, children and high-risk patients, infection control is a key element of our manufactured capital. We continued to strengthen infection control infrastructure through surveillance, reporting, training and infrastructure-readiness.

We maintained hand hygiene resources at points of care, enhanced cleaning and disinfection protocols and continued monitoring through checklists and audits. PPE compliance monitoring and regular training supported safer clinical practice. Air quality in isolation

rooms was monitored and healthcare-associated infection indicators were reviewed on an ongoing basis. Specific reviews were also conducted with PICU, NICU and oncology units to discuss infection trends and strengthen preventive practices.

Commitment to Responsible Operations

As our network expands, we remain focused on building healthcare infrastructure that is efficient, reliable and environmentally responsible. We continue to integrate resource-efficient practices into facility planning and operations, including efficient lighting, HVAC systems, water management and compliant waste disposal mechanisms. These efforts help reduce environmental impact while maintaining the quality, safety and reliability expected in specialized pediatric and perinatal care environments.



SPECIALIZED CAPABILITIES



Neonatal Intensive Care Units (NICU) Overview



Extensive NICU Network

Comprehensive NICU Coverage

We operate one of India's largest NICU networks, encompassing 400 beds across multiple locations. Our NICU facilities are strategically positioned to ensure widespread accessibility and timely medical intervention for premature infants and newborns with critical medical needs.

Level 4 NICUs at Hub Hospitals

Our Level 4 NICUs are equipped with state-of-the-art technology and expert medical staff. Located at our hub hospitals, they provide the highest level of intensive care for critically ill newborns.

Level 3 NICUs at Spoke Hospitals

Our Level 3 NICUs are strategically placed in spoke hospitals to offer advanced medical care in regional areas. This ensures comprehensive neonatal care, maintaining high standards of medical expertise and infrastructure.



Commitment to Neonatal Care Excellence

Advanced Medical Care

Our NICUs feature advanced medical equipment and protocols, ensuring optimal care for premature babies and infants with complex medical conditions.

Expert Medical Staff

Dedicated teams of neonatologists, pediatricians and nurses provide round-the-clock care, focusing on the specialized needs of newborns requiring intensive care.

Integration with Hub-and-Spoke Model

NICU facilities are integral components of our hub-and-spoke model, enhancing our ability to deliver specialized care closer to home for families across India.



Enhancing Neonatal Healthcare Standards

Continuous Innovation

We prioritize innovation in neonatal healthcare, leveraging technological advancements and best practices to improve patient outcomes and family support.

Community Outreach

We collaborate with healthcare professionals and community stakeholders to raise awareness and promote preventive care measures for neonatal health.



NICU Capabilities

- Care for extreme low birth weight babies
- Therapeutic hypothermia
- Nitric oxide therapy
- High-Frequency Oscillation Ventilation (HFOV)
- Advanced ventilators
- Developmental clinics for premature babies, offering comprehensive follow-up care
- In-house Retinopathy of Prematurity (ROP) and Brainstem Evoked Response Audiometry (BERA) services
- CRRT and peritoneal dialysis
- Neonatal surgical facilities
- Development supportive care
- Human Milk Bank



Pediatric Intensive Care Units (PICU) Overview



Advanced Critical Care for Children

State-of-the-Art PICU Facilities

We maintain cutting-edge PICUs equipped with the latest technology and advanced medical equipment. Our facilities are designed to deliver specialized care and support to critically ill children requiring intensive medical intervention.

Comprehensive Network

Our network includes 200 PICU beds strategically located across multiple hospital locations. This ensures comprehensive coverage and accessibility for critical pediatric care across different regions.



Key Features of Our PICUs

Advanced Ventilation and Organ Support Systems

Our PICUs use state-of-the-art technologies to provide critical care interventions such as mechanical ventilation, haemodynamic monitoring and renal replacement therapy.

Specialized Medical Staff

Dedicated teams of pediatric intensivists, critical care nurses and support staff ensure round-the-clock monitoring and specialized treatment.

Integrated Healthcare Approach

PICUs are seamlessly integrated within our hospital network, aligning with our hub-and-spoke model to provide specialized care closer to communities.





Commitment to Excellence in Pediatric Care

Continuous Innovation

We embrace technological advancements and clinical best practices to enhance patient outcomes and family-centered care in PICU settings.

Patient-Centric Care

Our approach is focused on individual treatment plans and family support, ensuring compassionate care for both patients and their families during critical times.



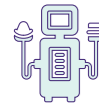
Enhancing Pediatric Healthcare Standards

Training and Education

We invest in ongoing training for medical staff to uphold high standards of care and stay abreast of advancements in pediatric critical care.

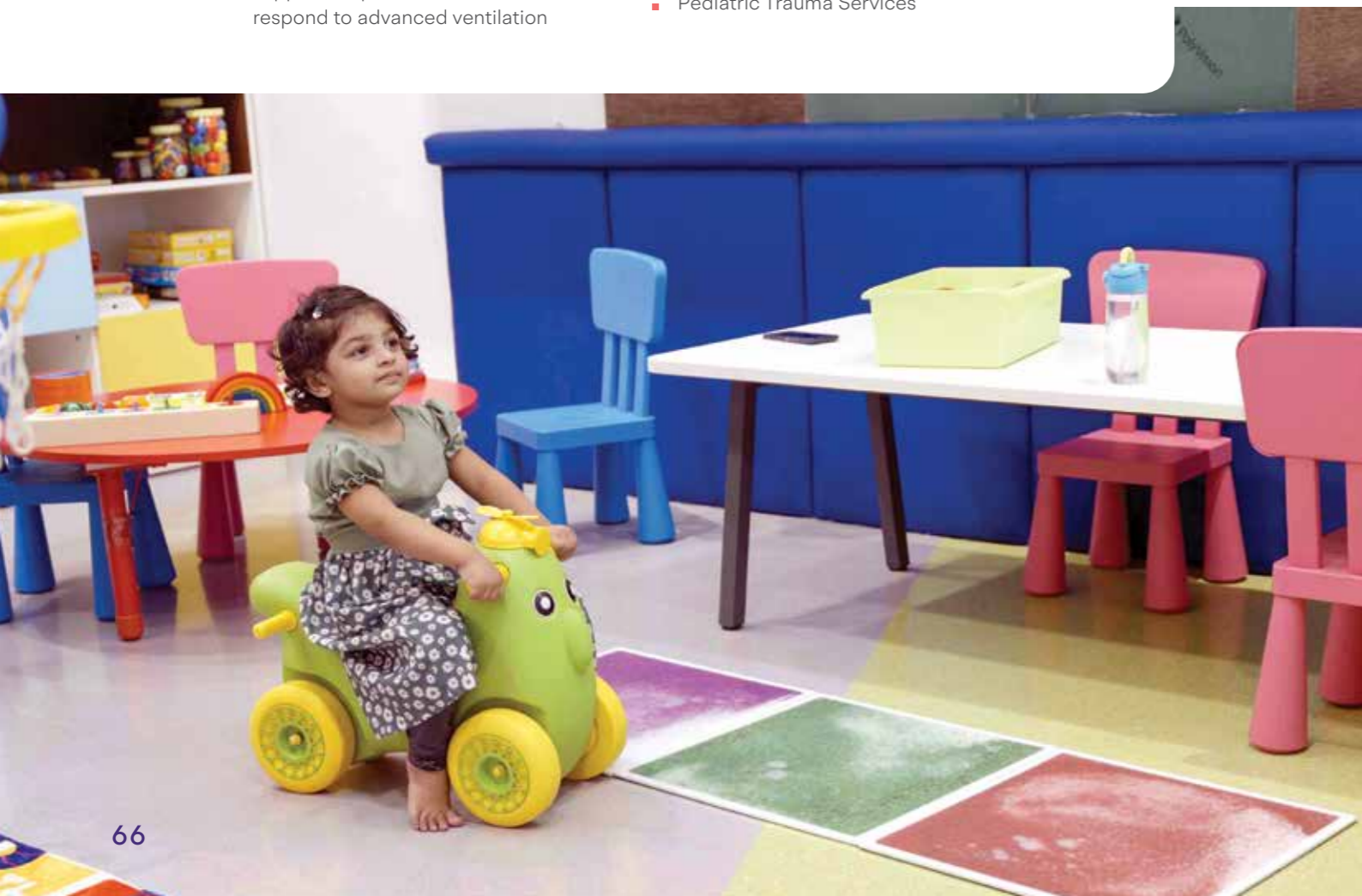
Quality Assurance

We implement rigorous quality assurance measures to maintain safety, efficiency and excellence in PICU operations.

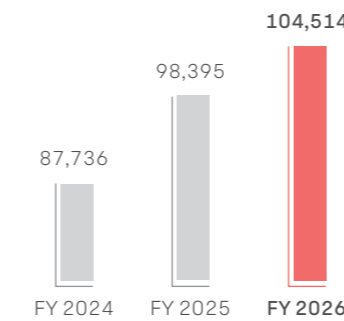


PICU CAPABILITIES

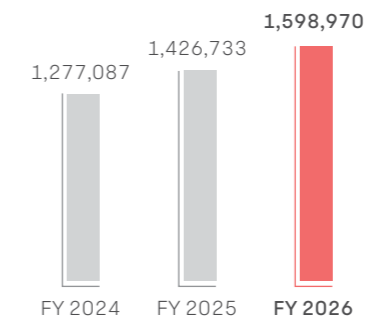
- Latest-generation conventional ventilators from GE Carescape and Maquet
- Advanced ventilation modes, such as high-frequency oscillation and inhaled Nitric oxide therapy
- Extracorporeal Membrane Oxygenation (ECMO) support for patients who do not respond to advanced ventilation
- Organ support systems, including ECMO for heart and lung support, hemodialysis and peritoneal dialysis for kidney support, and Continuous Renal Replacement Therapy (CRRT) and plasmapheresis for multiple organ failure
- Neurocritical Care Services
- Pediatric Burn unit
- Pediatric Trauma Services



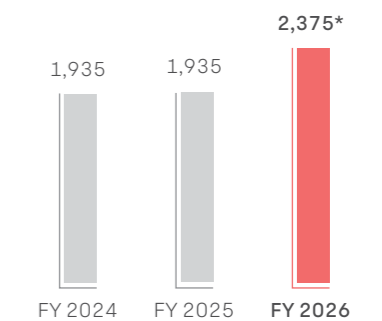
In-patient Admissions (Nos.)



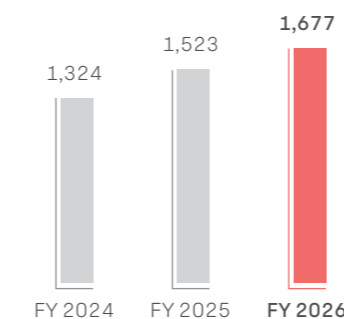
Out-patient Consultations (Nos.)



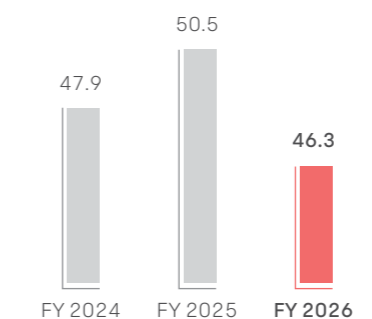
Bed Capacity (Nos.)



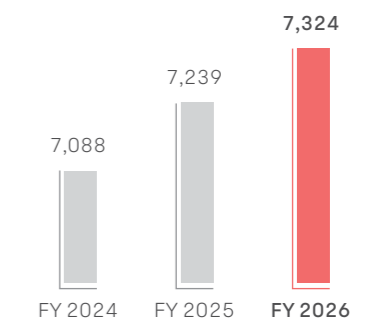
Operational Beds (Nos.)



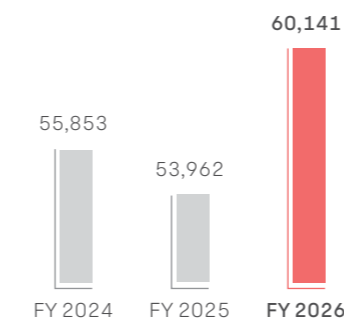
Occupancy Rate (%)



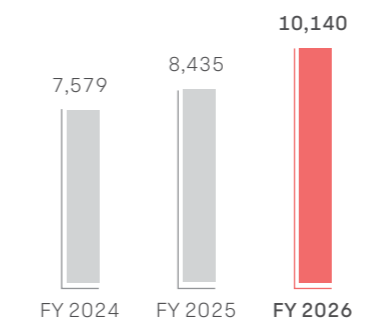
Pediatric Surgeries (Nos.)



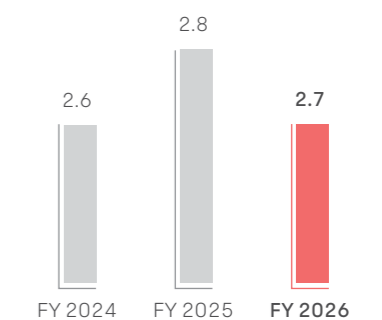
Average Revenue Per Operating Bed (ARPOB) (₹ per day)



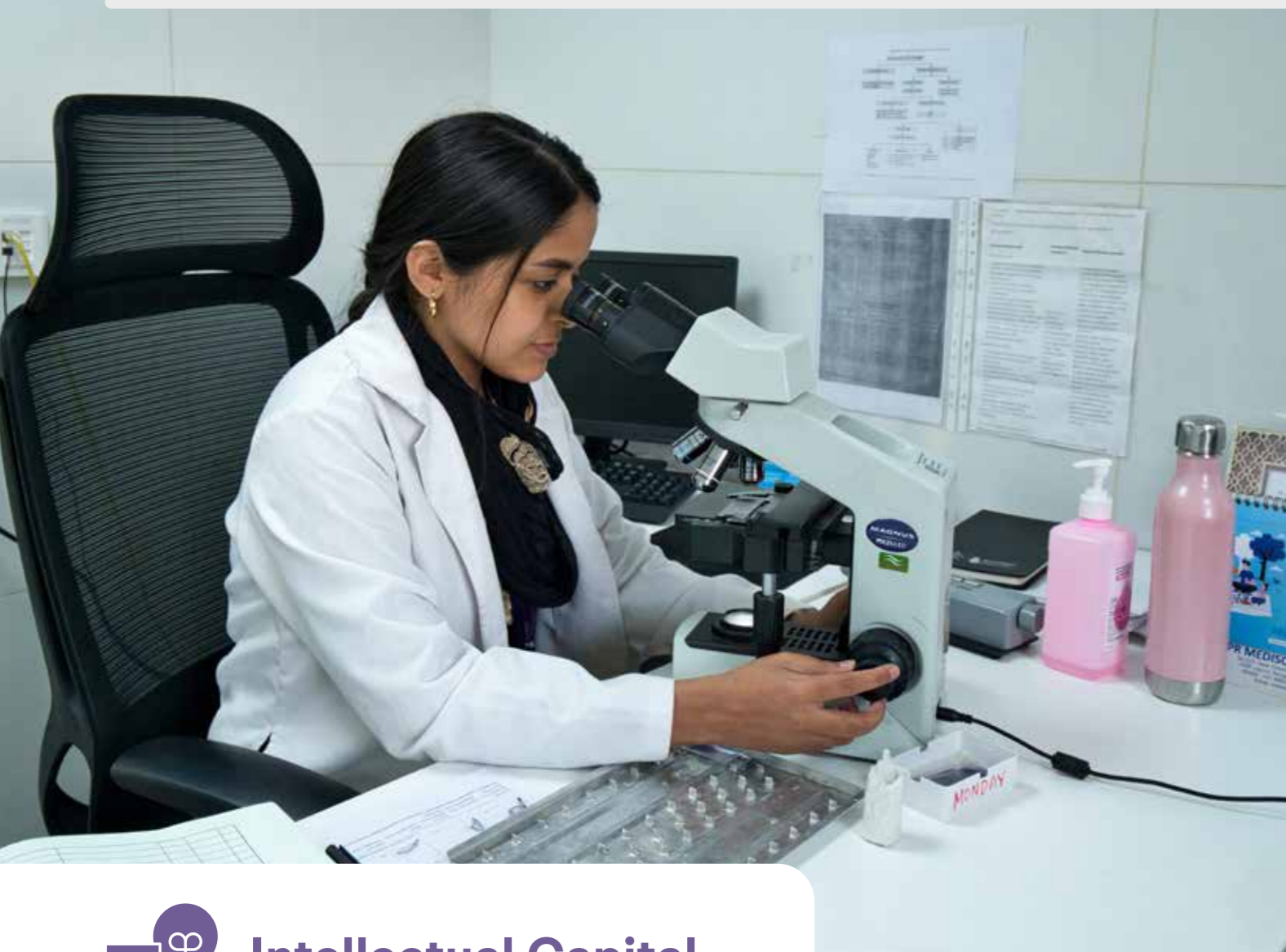
Gynecology Surgeries (Nos.)



Average Length of Stay (Days)



*The number excludes the 60 Beds hospital at HRBR, Bengaluru, which commenced operations on May 1, 2026



Intellectual Capital

One Rainbow Clinical Model

As we expand across geographies, the One Rainbow Clinical Model remains central to how we deliver consistent, high-quality care. The model is built around standardized clinical protocols, structured audits and mentoring mechanisms that align care delivery across our hospitals. This reduces variation in clinical decision-making and ensures that patients receive care guided by the same quality benchmarks, irrespective of location.

During the year, we continued to strengthen protocol-led care across patient flow, admission, discharge, OT scheduling, emergency response, ICU management and supply coordination. Daily trackers, escalation reviews, ER forms audits and surgical safety checklists further improved coordination, strengthened accountability and supported timely interventions across units.

The model also enables faster integration of new centers into the Rainbow ecosystem, allowing us to scale while maintaining clinical discipline. Standardization further supports stronger data capture, outcome tracking and medico-legal documentation.

Complex and High-Acuity Care

Our intellectual capital is reflected most strongly in our ability to manage complex and high-acuity cases across specialties. Over the years, we have deepened our quaternary care capabilities, supported by advanced clinical expertise, multidisciplinary coordination and robust institutional systems.

During the year, we strengthened capabilities across pediatric specialties, neonatal care, transplant programs, ECMO, bone marrow transplant, complex neurosurgical and orthopedic interventions, and care for children with developmental challenges. In neonatal care, our teams continued to manage extremely low birth weight newborns across units, reinforcing Rainbow's expertise in caring for the smallest and most vulnerable babies.

Our transplant programs continue to reflect the maturity of our clinical model. The Pediatric liver transplant program is now established across Hyderabad, Bengaluru and Chennai, reflecting the growing maturity of our clinical capabilities. These programs are supported by integrated teams across specialties, enabling us to manage complex cases with consistency and precision.



Intellectual Capital

The Knowledge That Drives Clinical Excellence

At Rainbow, intellectual capital is the discipline of turning specialized expertise into consistent clinical outcomes. It reflects the way our teams learn, share knowledge, adopt technology and apply evidence across pediatric and perinatal care. As our network grows, this collective intelligence helps us strengthen care quality, build clinical depth and advance a more connected, future-ready healthcare model.

35 Transplants Performed

Hyderabad Cluster

20
liver transplants

3
kidney transplants

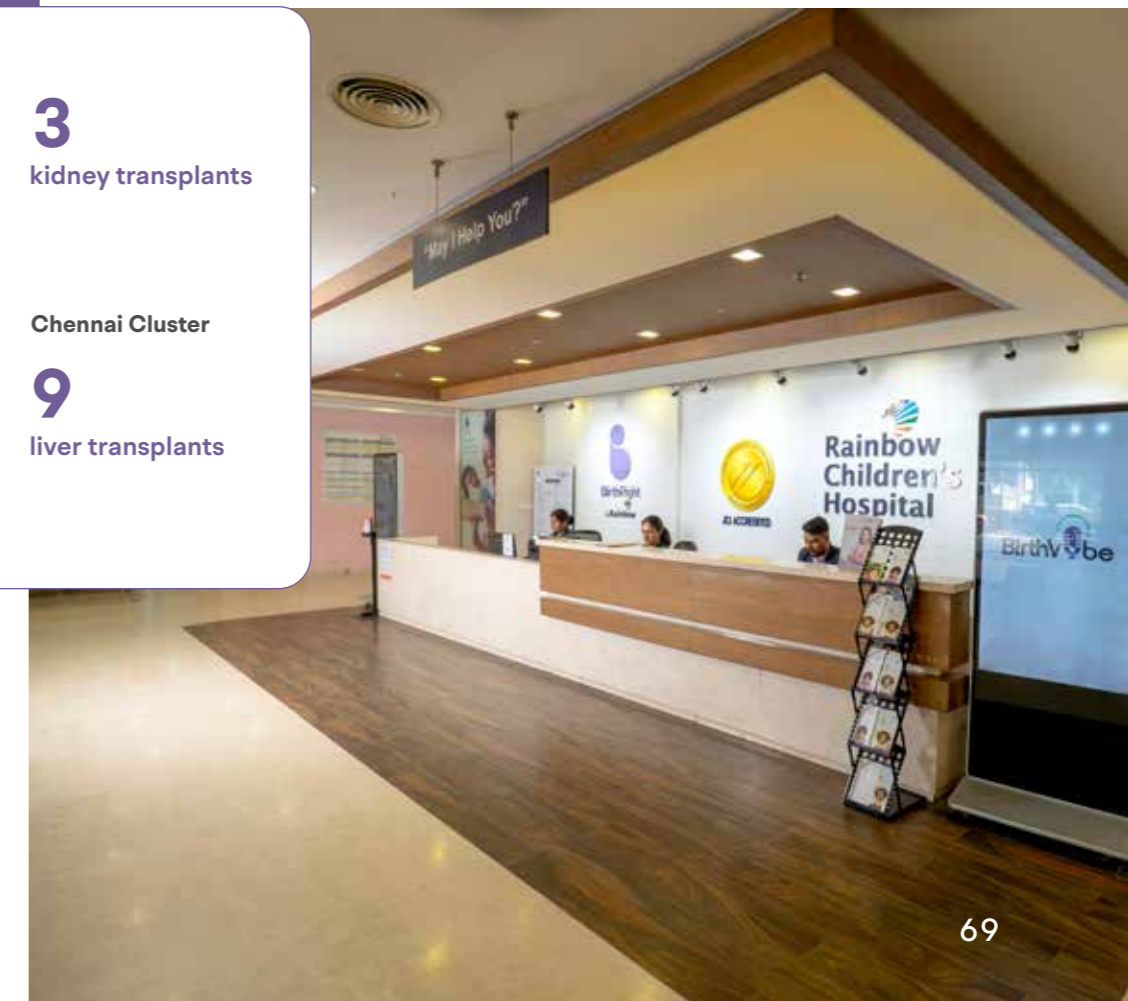
Bengaluru Cluster

3
liver transplants

Chennai Cluster

9
liver transplants

Note: As of March 31, 2026



The following cases highlight the breadth of specialized expertise across our network and demonstrate how multidisciplinary teams work together to manage complex clinical challenges across pediatric, neonatal, perinatal and transplant care.

Bone Marrow Transplant for Sickle Beta Thalassemia

A teenager with Sickle Beta Thalassemia had required more than 30 blood transfusions since infancy and developed serious complications, including avascular necrosis of the hip joint.

Following evaluation, the patient underwent a sibling-donor bone marrow transplant at our Bengaluru hospital. A rare post-transplant immune complication was managed through close monitoring and specialized clinical care.

The patient achieved a favorable recovery, demonstrating the role of bone marrow transplantation in select pediatric hematological disorders.

Individualized IVF Protocol for a Complex Fertility Journey

A couple in their late 30s came to BirthRight by Rainbow after multiple pregnancy losses and unsuccessful IVF attempts elsewhere. The patient was diagnosed with poor ovarian reserve and had been advised to consider donor eggs.

Our fertility team developed a customized IVF protocol aligned to her clinical profile. With continuous medical guidance and support, the couple conceived using the patient's own eggs and were blessed with healthy twins within a year.

The case reflects the role of individualized fertility planning in complex reproductive journeys.

Reconstructive Surgery for Congenital Absence of Sternum

A newborn with a rare anterior chest wall deformity was brought to our Hyderabad Heart Institute within the first week of life. Although the heart structure was normal, the baby had visible abnormal chest movements that required surgical correction.

Our pediatric surgical team performed chest wall reconstruction using muscle flap-based repair to restore structural support. After a brief post-operative complication that improved with care, the baby was discharged stable, breathing comfortably and feeding well.

The case reflects our capability to manage rare neonatal thoracic conditions requiring early surgical intervention.

Multidisciplinary Surgery for a Recurrent Facial Tumor

A child presented with recurrent facial swelling and eye displacement after multiple prior surgeries for a similar condition. Detailed imaging and evaluation suggested a bone-related tumor of the upper jaw.

The case was reviewed by a multidisciplinary team including pediatric surgery, dental surgery, ENT, radiology, anesthesia and ophthalmology. The team proceeded with open surgery to remove the growth completely. The tumor was confirmed to be benign.

The child recovered well after surgery and was discharged in stable condition. The case reflects the importance of coordinated surgical planning in complex craniofacial conditions.



Device-Based Closure for a Rare Cardiac Defect

A young adult was admitted with heart failure and diagnosed with a ruptured sinus of Valsalva, a rare condition where an abnormal opening forms near the aortic root.

The defect was closed through a minimally invasive procedure using the U.S.-patented KONAR-MF Occluder, developed by Dr. Nageswara Rao Koneti, a senior pediatric cardiologist at Rainbow Children's Heart Institute. The patient improved after the intervention and was discharged within days.

The case reflects the role of advanced device-based cardiac care in managing complex structural heart conditions.

Fetal Rescue in a High-Risk Cardiac Pregnancy

An expectant parent with complex congenital heart disease and previous pregnancy losses presented mid-pregnancy with critically low oxygen levels, placing both parent and fetus at significant risk.

After multidisciplinary evaluation, the cardiac and perinatal teams chose a minimally invasive stenting procedure to improve oxygenation while avoiding higher-risk surgical correction during pregnancy. The intervention improved oxygen levels and allowed close monitoring of the pregnancy.

The case reflects our coordinated cardiac and perinatal expertise in managing high-risk pregnancies with complex heart disease.

Managing Neonatal Dengue with Multi-Organ Complications

A late preterm newborn developed fever, rashes, breathing difficulty and poor circulation shortly after birth, following maternal dengue infection. The baby required respiratory support and cardiovascular stabilization.

The clinical course was further complicated by a bacterial brain infection, requiring neurosurgical intervention to drain excess fluid from the brain. With coordinated neonatal, critical care and surgical support, the child recovered gradually.

The case demonstrates the depth of our coordinated neonatal, critical care and neurosurgical intervention.

Early Genetic Diagnosis of Prader-Willi Syndrome

A newborn was referred with persistent poor feeding, reduced activity and low muscle tone. Initial brain imaging did not show any structural abnormality, making the cause difficult to identify.

Given the ongoing symptoms, the team undertook detailed metabolic and genetic evaluation. Rapid whole genome sequencing confirmed Prader-Willi syndrome, a rare genetic disorder that can affect muscle tone, feeding, growth and development.

The baby was started on assisted feeding, physiotherapy and oromotor stimulation, with plans for long-term follow-up. The case highlights the role of early genetic diagnosis in guiding timely intervention for rare neonatal disorders.



Multimodal Care for Relapsed Ewing's Sarcoma

A child with relapsed Ewing's Sarcoma was referred to us after earlier chemotherapy, surgery and radiation. The recurrence had involved the chest wall and mediastinum, making treatment complex due to the proximity of vital organs.

A multidisciplinary team planned intensive salvage chemotherapy, hematopoietic stem cell transplantation and targeted radiation therapy. Despite residual disease before transplant, the child responded well to the combined treatment approach.

Following transplant, radiation and maintenance therapy, the child achieved complete remission and continues to remain disease-free. The case reflects the role of coordinated pediatric oncology, transplant and radiation planning in managing complex relapsed cancers.

Surgical Management of Severe Tracheal Stenosis in a Preterm Newborn

A preterm newborn experienced severe breathing difficulties immediately after birth and remained dependent on respiratory support despite intensive treatment. Further investigations revealed tracheal stenosis, a rare condition involving narrowing of the airway.

The clinical course was complicated by a serious fungal infection, requiring prolonged intensive care. When less invasive measures did not achieve the desired outcome, the multidisciplinary team performed a slide tracheoplasty to reconstruct and widen the airway.

The baby recovered steadily following surgery and was eventually discharged breathing independently. The case highlights the complexity of managing rare neonatal airway disorders requiring advanced surgical intervention.

Living Donor Liver Transplant for Advanced Liver Disease

A child with biliary atresia progressed to end-stage liver disease despite earlier surgery in infancy. Following detailed evaluation, liver transplantation was identified as the only viable long-term treatment option.

The child underwent a living donor liver transplant at our Bengaluru hospital, with the mother donating part of her liver. The transplanted liver began functioning well and the child made a steady recovery.

The case reflects the depth of our pediatric liver transplant capabilities across multidisciplinary evaluation, donor planning and post-transplant care.

Managing a High-Risk Twin Pregnancy

A patient with a history of repeated mid-trimester pregnancy losses conceived twins after a prior laparoscopic cervical cerclage and IVF treatment. Midway through pregnancy, the patient developed signs of imminent pregnancy loss, with one twin at significant risk.

Following urgent multidisciplinary evaluation and detailed counseling, selective fetal reduction was performed to reduce the risk of infection and preterm labor and improve the chance of continuing the pregnancy.

The case reflects the complexity of fetal medicine decision-making in high-risk pregnancies where clinical, ethical and emotional considerations must be carefully balanced.

Bone Marrow Transplant for a Rare Immunological Disorder

An infant presented with severe diarrhea, poor weight gain and recurrent life-threatening infections in the first weeks of life. As the condition progressed, deeper genetic analysis identified a rare RIPK1 gene mutation causing immunodeficiency with autoinflammation.

The baby required intensive support, including intravenous nutrition, antibiotics and blood transfusions. Since medicines alone could not provide a definitive cure, the team proceeded with hematopoietic stem cell transplantation.

The infant recovered after transplant and was discharged in stable condition. The case highlights the role of genetic diagnosis and transplant care in managing rare immune disorders in early infancy.





Clinical Governance and Knowledge Systems

Clinical governance remains a critical part of how we preserve quality as we scale. During the year, we strengthened governance through the establishment of a Medical Review Board and Scientific Research Committee, reinforcing structured review, clinical oversight and evidence-led decision-making.

We also continued to advance audit-led improvement. Clinical audits were conducted across areas such as delayed cord clamping, breastfeeding initiation after birth and antenatal steroid administration. These reviews help identify practice gaps, reinforce evidence-based care and strengthen consistency across centers.

In neonatal care, we developed national evidence-based guidelines for neonatal transport systems, further supporting structured and safe movement of critically ill newborns across care settings.

Continuous Medical Education

Continuous medical education helps our clinicians stay aligned with evolving medical practices, treatment approaches and internal standards of care. During the year, training focused on simulation-based learning, case-driven discussions and digital learning formats relevant to clinical practice. Regular mock drills, ICU and emergency simulations, specialty-wise case discussions and mannequin-based training strengthened preparedness for high-acuity environments.

Knowledge-sharing was reinforced through weekly clinical sessions, surgical meetings, mortality reviews, departmental discussions, RTMs and CMEs. These forums enable clinicians, nursing teams and operational leaders to review complex cases, share learnings and strengthen multidisciplinary decision-making.

Our long-term capability plan focuses on building clinical depth and multidisciplinary expertise across the network. This includes advanced clinical training partnerships with leading medical institutions and professional development frameworks that keep our teams aligned with evolving standards of care. Cross-functional clinical exposure also supports integrated decision-making, particularly in complex pediatric and perinatal cases where multiple specialties work together.

Digital Systems and Data Intelligence

During the year, our digital and IT transformation journey advanced with a focus on improving visibility, documentation and continuity of care. BI dashboards were implemented for all Unit Heads, providing real-time visibility into operational and clinical performance and enabling more responsive decision-making at the unit level.

Key milestones included the integration of PACS, the Patient App and the Doctor App with the HIS application. Together, these systems improve the flow of diagnostics, medical records and clinical workflows, enabling clinicians to view imaging and patient data seamlessly across locations and make faster, more coordinated decisions.

The implementation of EMR for outpatient care across our branches is helping create a more unified patient record across centers. Our digital front-door hospital model was further enhanced through upgrades to the website, patient app and doctor interfaces, along with integrated online consultations and payment capabilities to deliver a more seamless patient experience.

Cybersecurity and Data Governance

Cybersecurity and data governance remain important priorities as our digital infrastructure expands. During the year, we conducted Vulnerability Assessment and Penetration Testing for our external network to evaluate security controls, identify potential vulnerabilities and assess the resilience of our systems against real-world threats. The assessment covered information gathering, vulnerability identification and controlled exploitation within a defined scope, helping us strengthen remediation planning and improve our overall security posture.

Research and Clinical Advancement

As part of our commitment to evidence-based care, we continue to build our academic and research capabilities. During the year, our consultants and students published in 40 national and 11 international journals, with contributions across Pediatric Neurology, Pediatric Critical Care, Neonatology, Hemato-Oncology and Genetics.

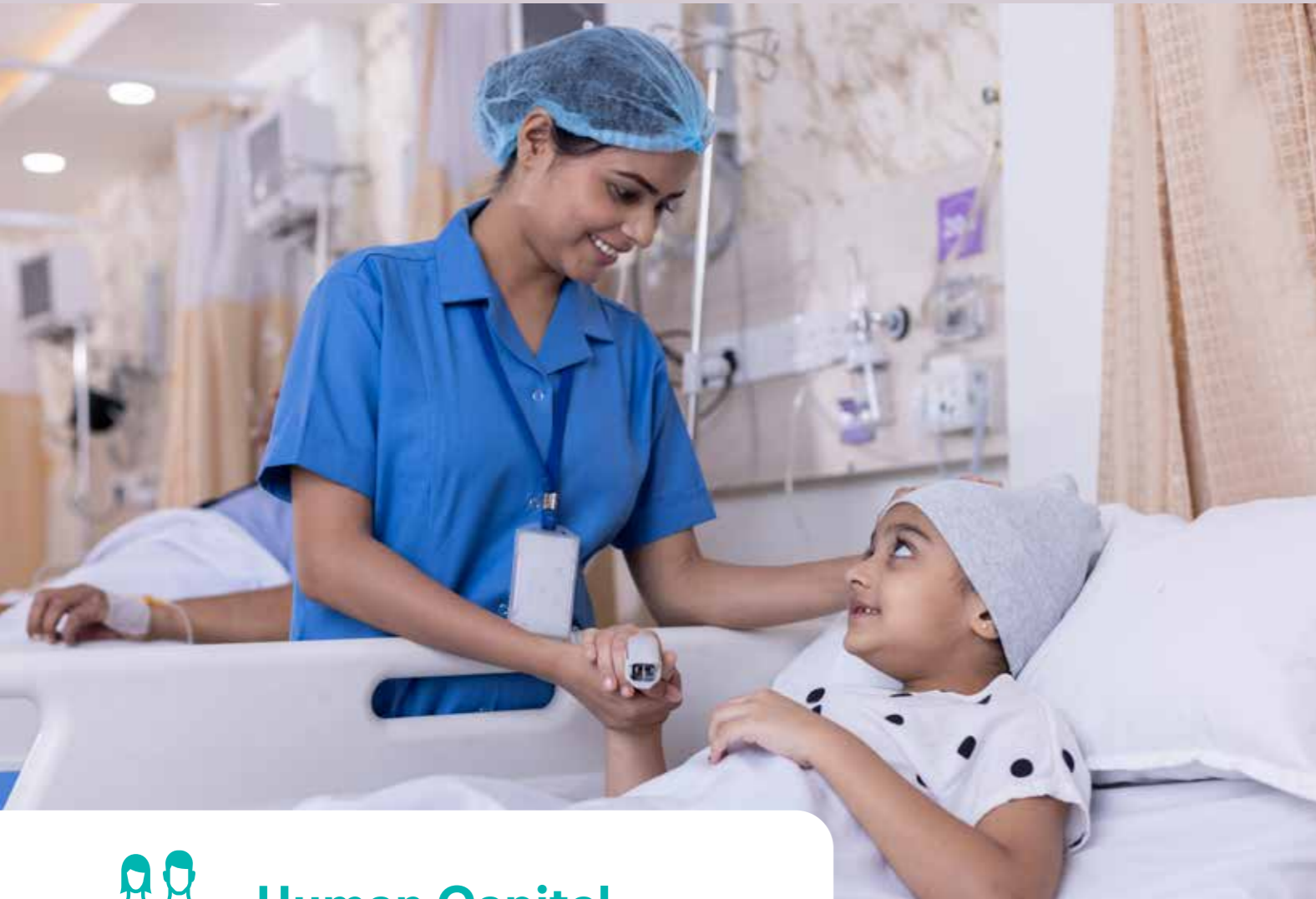
Our teams also contributed to academic engagement through national platforms, including NEOCON 2025 and PEDICRITICON 2025. These efforts reinforce our role as a specialized healthcare provider while contributing to the advancement of pediatric and perinatal care.

Research Publications

40
national journals

11
international journals





Human Capital

The Expertise Behind Every Delicate Decision

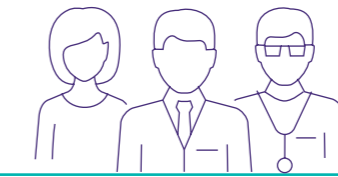
Delivering specialized care for women and children is both an art and a science. It requires clinical precision, emotional intelligence and empathy in moments where every decision matters. At Rainbow, our people bring these qualities together to deliver consistent outcomes with the sensitivity that defines us.

1,062

Doctors

2,458

Nursing



A WORKFORCE
BUILT AROUND
SPECIALIZED
CARE

536

Paramedical

2,341

General

Numbers as of March 31, 2026

Talent Attraction and Retention

Building Pipelines for Scale

FY2026 saw a significant expansion of our talent agenda, shaped by the need to support network expansion, deepen clinical talent pipelines and improve workforce stability in critical roles. Over 1,100 associates were onboarded during the year to enable the acquisition and operationalization of new units across Warangal, Guwahati, Rajahmundry, Electronic City and Hennur.

Leadership capacity was also strengthened during the year, with over 26 positions hired at the Deputy General Manager band and above. These included key roles such as Chief Executive Officer, Vice President – Service Excellence and Chief Strategy and Growth Officer, enhancing leadership depth to support the next phase of growth.

To support this scale, sourcing pipelines were strengthened through job portals, employee referrals, vendor partnerships, social media hiring, walk-in drives and campus outreach. The organization also built forward-looking talent pools for critical roles such as nursing, registrars and sales, reducing dependence

on urgent hiring. A dedicated team continues to map clinical talent across regions, supported by headhunting capabilities to attract senior clinicians and medical specialists.

Improving Hiring Efficiency and Readiness

Hiring efficiency improved meaningfully during the year, supported by streamlined interview processes, faster stakeholder coordination and better tracking through HRMS. Structured screening mechanisms improved candidate quality, while regular engagement and follow-ups helped improve offer-to-joining conversion.

Rainbow also has structured onboarding frameworks across clinical and non-clinical functions. These include organizational orientation, role-specific training, mentoring and performance check-ins. Standardized induction modules ensure consistency across hospitals, while localized components address unit-specific protocols and practices.

Retention was supported through targeted interventions, including compensation benchmarking, role-specific strategies and a retention bonus plan for niche and high-impact roles.

Expansion hiring snapshot



26+ senior leadership hires

Recruitment efficiency snapshot



Doctor Engagement and Medical Workforce

The medical workforce remains central to Rainbow's ability to deliver outstanding outcomes. Our doctor engagement model is built around long-term alignment, academic depth and collaborative practice, ensuring that clinical excellence is continuously strengthened across the network. A key pillar of this model is structured, peer-led learning that enables continuous knowledge exchange and clinical alignment across units.

Clinical Learning Ecosystem



Clinical Meets

Align treatment approaches across specialties and share best practices across units



Morbidity & Mortality (M&M) Meets

Review critical cases to strengthen clinical judgment and drive continuous improvement



Grand Rounds

Enable multidisciplinary evaluation of complex cases and collaborative decision-making



Case-Based Discussions

Translate real-world patient scenarios into practical clinical insights

Alongside these platforms, a focused approach to mapping and engaging clinical talent across regions ensures access to high-quality specialists. This is supported by strong academic engagement and ongoing exposure to evolving medical practices, enabling our clinicians to remain aligned with global standards while delivering care that is consistent, specialized and patient-centric.

Nursing Workforce

Nurses form the backbone of patient care, particularly in neonatal and critical care settings where responsiveness, precision and continuity are essential.

During the year, strengthening the nursing workforce remained a key priority, particularly with the focus

on reducing attrition in critical roles and building a stable, future-ready pipeline. As part of this effort, 200+ nurses were onboarded through campus hiring initiatives across locations, supported by structured onboarding programs that prepare them for high-dependency care environments from the outset.

Capability building is led by a dedicated nursing education team, which conducts regular training programs to strengthen technical competencies. These include structured modules across critical care areas such as neonatal admission, enteral feeding, TPN, IV fluids and tissue viability. Delivered periodically and tracked through the Learning Management System, these interventions ensure consistency in skill levels and care delivery across units.

Learning, Training and Capability Building

Learning at Rainbow is continuous and structured, reflecting the demands of specialized healthcare delivery. Training interventions during the year spanned clinical, compliance and behavioral areas. Mandatory programs included Basic Life Support, infection control, IT safety, disaster management, emergency codes, grievance management and patient-centricity. These ensure preparedness for high-risk environments while maintaining quality and compliance standards.

Learning formats combine classroom sessions, digital modules, simulation-based training and case-based learning, enabling practical application and deeper understanding. The Learning Management System acts as a central platform to track participation and ensure uniform delivery across locations.

Targeted interventions were also introduced to address identified gaps, including advanced clinical skills, people management capabilities among new supervisors and digital literacy across support functions.

Culture, Values and Engagement

Rainbow's culture is anchored in its Behavioral Competency Framework, built around the pillars of Excel, Trust and Care. The framework translates organizational values into clearly-defined behaviors across roles, keeping expectations consistent and aligned with responsibility.

During the year, continued focus was placed on embedding these values into everyday operations through initiatives such as "Manifesting the Rainbow Way on Floor", supported by leadership connects and structured communication across units. Leadership-led townhalls reinforced these principles through real-life examples, while the "Values Champions" initiative created a network of culture ambassadors across hospitals.

Importantly, behavioral expectations are integrated into performance evaluations, ensuring that values such as trust, empathy and accountability are not only encouraged, but actively assessed.

A detailed competency handbook, accessible through HRMS, further supports employees with clear behavioral guidance relevant to their roles.

Employee engagement remained strong during the year, supported by wellness initiatives, festival celebrations and regular employee connect forums.

Pulse Survey FY2026

82% (FY2025 79%)
Engagement score

Defined Care Coverage Standards

1:1

Nurse-to-patient ratio in critical care

Enable continuous monitoring and timely intervention

5:1

Nurse-to-patient ratio in non-critical care

Supports structured supervision and responsive patient care



Behavioral Competency Framework



EXCEL

Accountability | Collaboration | Capability Building | Customer Centricity | Change Agility | Business Acumen



TRUST

Fostering Trust | Personal Leadership



CARE

Inclusion | Compassionate Empathy

Performance Management and Productivity

The performance management framework was revamped during the year to make it more transparent, objective and development-oriented. A balanced scorecard approach was introduced, integrating clinical outcomes, operational KPIs, patient experience metrics and behavioral competencies, ensuring alignment with organizational priorities and values.

Mid-year reviews were institutionalized to enable timely feedback and course correction, while goal setting was

cascaded from organizational priorities to individual roles, strengthening alignment across the organization.

The performance and talent review process also helped identify key capability gaps across clinical, managerial and support roles, informing focused actions.

Productivity improvements were driven through better rostering practices, skill-mix optimization and targeted training interventions. Close collaboration between HR, operations and clinical teams enabled more effective workforce utilization aligned with patient volumes.



Compensation, Benefits and Rewards

Compensation practices continued to evolve to support a high-performance and competitive environment. A 5-point performance rating scale aligned with a pay-for-performance philosophy was introduced to strengthen merit-based differentiation. Nursing compensation was benchmarked against industry standards, with additional incentives for critical care roles.

Employee welfare was strengthened through comprehensive insurance coverage, including group health insurance for employees and dependents, group personal accident cover with optional top-ups and workmen's compensation coverage.

Recognition plays an important role in reinforcing performance and values. A multi-tier reward and recognition framework was implemented, covering monthly, quarterly and annual awards across categories such as collaboration, patient appreciation, innovation, performance and long-term service.

Diversity, Equity and Inclusion

Diversity and inclusion remain integral to Rainbow's people philosophy. Women constitute 62% of the workforce, with strong representation across nursing, allied health and administrative roles.

Inclusive hiring practices are encouraged across roles, with a focus on building diverse candidate pipelines at all levels. Inclusion is also embedded as a core competency within the behavioral framework, reinforcing its importance in everyday work.

Going forward, there is a continued focus on improving gender diversity at senior leadership levels, expanding diversity metrics and embedding inclusion into performance management and succession planning.

62%
Women Representation

HR Technology and Digital Enablement

Digital enablement continues to play a key role in strengthening HR processes and improving employee experience. During the year, the HRMS platform was enhanced to enable better employee self-service, streamline leave and attendance management and provide mobile access for frontline staff. Digital rostering and shift management tools were deployed to optimize scheduling and reduce manual intervention.



Recruitment processes were supported by applicant tracking systems, while performance management was fully digitized to enable goal tracking and real-time visibility. Workforce planning dashboards provided insights into headcount, vacancies and attrition trends, enabling more informed decision-making. The use of BI tools to analyze attrition trends has further strengthened the ability to design targeted retention strategies.

Compliance, Policies and Governance

A strong governance framework underpins our people practices. The Code of Conduct defines expectations around integrity, quality, safety and compliance, and is reinforced through regular training and induction programs. A robust whistleblower mechanism enables reporting of concerns without fear of retaliation, supported by structured grievance redressal systems with defined timelines.

Policies were updated during the year to align with regulatory requirements and employee expectations, including revisions to leave, attendance and travel policies, and updates to POSH committees. Compliance tracking was strengthened through digital interventions, with training modules such as POSH being delivered through LMS, achieving near-complete compliance levels.

Social and Relationship Capital



Social and Relationship Capital

Trust at the Core of Every Relationship

Delivering specialized care requires trust that extends beyond clinical outcomes. It is built through everyday interactions with patients, families, doctors, partners and communities. As our network grows, sustaining this trust across stakeholders remains central to the Rainbow model of care. Our approach brings together patient experience, clinical quality, partnerships and outreach to strengthen relationships across the care ecosystem.

Patients and Families

Patient trust continues to be anchored in clinical expertise, supported by strong nursing care and consistent patient-facing interactions. Our nurses and medical staff receive the highest patient ratings, underscoring the strength of our frontline care delivery.

Feedback during the year indicated high satisfaction with medical outcomes and facilities, while also highlighting areas for improvement such as waiting time, financial counseling, food quality and service.

Operational improvements focused on addressing these gaps through better scheduling, clearer communication and continuous engagement during waiting periods. Waiting time challenges are also being addressed through the rollout of a new Hospital Information System integrated with a Queue Management System, enabling better flow management and visibility.

A newly launched feedback system enables automated NPS calculation across inpatient and outpatient journeys, with category-specific questions to identify experience gaps more precisely. A structured complaints management framework is also being established at the unit level to support timely resolution and sustained improvement.

WhatsApp-based feedback now allows patients to share more candid responses without caregiver influence. In addition, a complaints management tool has been piloted at select hospitals, while patient app enhancements and a WhatsApp bot have helped streamline the digital journey.

Support During High-Risk and Sensitive Cases

In complex and emotionally challenging cases, our multidisciplinary approach plays an important role in reassuring families. Specialists across relevant disciplines discuss the case together, define the treatment plan and update parents through structured counseling. This collaborative model helps families understand the clinical pathway and builds confidence during difficult care journeys.

For families facing emotional distress, social workers provide additional support and guidance. In high-risk maternal, fetal and neonatal cases, teams across fetal medicine, obstetrics, gynecology and neonatology conduct periodic joint discussions to plan care under one roof, giving parents greater clarity and continuity.

Key Experience Improvements

- Multidisciplinary counseling and social worker support in sensitive cases
- Improvements in food quality and service consistency
- Focused interventions to reduce waiting time
- Automated NPS tracking across inpatient and outpatient journeys
- Strengthened financial counseling and standardized tariff templates
- Enhanced digital journey through app improvements and chatbot integration

Doctors and Partnerships

Relationships with doctors and institutional partners play a critical role in strengthening patient trust and improving access to specialized care. During the year, expanded doctor outreach and increased institutional tie-ups helped deepen referral networks across key specialties.

Closer collaboration between clinical, operations and marketing teams enabled better alignment between clinical insights and outreach strategies. This improved patient handling, strengthened follow-ups and created a more seamless journey from referral to care delivery.

Partnerships with nursing homes, clinics, general hospitals, district hospitals and community networks also helped extend access to specialized services. Digital platforms supported academic discussions and case reviews with overseas doctors, bringing wider expertise into complex clinical decision-making.

We are also placing greater focus on international patients by strengthening outreach, response mechanisms and support for families seeking specialized care across borders.

Brand and Public Outreach

Brand strength during the year was shaped by consistent clinical outcomes, positive patient experiences and targeted outreach. Central campaigns supported by digital initiatives, on-ground engagement and better operational follow-ups helped improve visibility, recall and conversion across key regions.

Public perception continues to be driven by Rainbow's leadership in pediatric and maternity care, along with its integrated mother-and-child model. Reliable emergency care, improved patient experience and digital convenience have further reinforced trust and accessibility.

PR initiatives focused on clinical expertise, patient experiences and community outreach helped strengthen credibility and public trust. Rainbow's 26-year legacy and consistent brand visibility further enhanced recall and market positioning.

More structured sales processes, CRM-led lead management and improved call center efficiency also supported stronger referral networks, better conversion and more consistent patient acquisition.



Suppliers and Strategic Partners

A reliable supply ecosystem is essential to delivering uninterrupted care. Relationships with suppliers are managed through a partnership-led approach that balances quality, cost efficiency and supply stability.

During the year, we continued to strengthen long-term rate contracts, preferred vendor arrangements, centralized procurement and vendor performance monitoring. These measures helped improve pricing efficiency while ensuring greater consistency in quality and delivery. Proactive sourcing strategies

and geographic diversification also helped mitigate supply risks and maintain continuity of critical supplies across hospitals.

Strategic tie-ups with manufacturers for essential consumables further strengthened supply reliability. Timely vendor payments, including advance payments in nearly 50% of cases, supported stronger partner confidence. Regular annual business reviews with key vendors also helped improve collaboration, address risks and align expectations.

Supply Chain Approach

MODEL	FOCUS	ENABLERS	PARTNER ENGAGEMENT
Partnership-led, not transactional	Quality Reliability Cost efficiency	Central procurement Vendor monitoring Diversified sourcing	Timely payments Advance payments Annual business reviews

Clinical Quality and Accreditation Partners

Quality at Rainbow is strengthened through close engagement with accreditation bodies and regulatory authorities. NABH and JCI standards are embedded into everyday clinical and administrative practices, helping us maintain consistency as the network grows.

Our quality systems are supported by regular audits, structured assessments and data-led monitoring of key indicators such as infection rates, medication errors,

patient falls and turnaround times. These reviews help identify gaps early, improve documentation, strengthen compliance and reduce variability across departments.

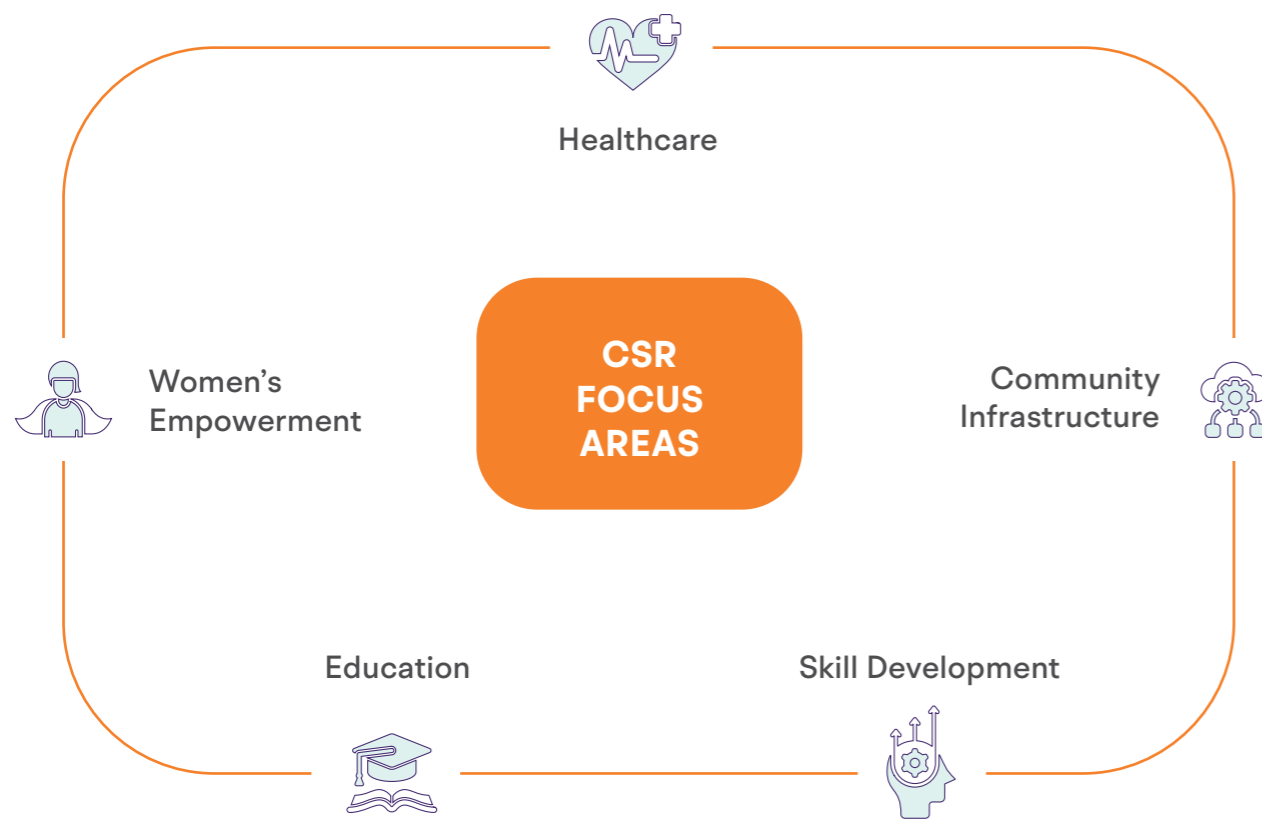
Patient safety remains a shared responsibility across teams. Incident reporting, near-miss tracking, safety huddles and standardized safety bundles support safer care delivery, while training programs, workshops and feedback from accreditation bodies continue to build staff capability, awareness and accountability.

Quality Governance Framework

STANDARDS	SYSTEMS	METRICS:	OUTCOME
NABH JCI Regulatory compliance	Audits Safety huddles Documentation Safety bundles	HAIs Medication errors Patient falls Turnaround times	Improved patient safety, consistency and accountability

Communities

Our Corporate Social Responsibility approach is guided by the belief that better healthcare outcomes begin with stronger communities.



Community Engagement Focus

- Child and Maternal health camps
- Vaccination, nutrition and newborn screening awareness
- School and corporate health awareness programs
- Outreach clinics in peripheral and rural locations
- Antenatal and postnatal education
- Partnerships to expand access to specialized treatments

Extending Healthcare beyond the Hospitals

SDGs impacted



Access to specialized pediatric and perinatal healthcare remains uneven across geographies, making sustained community engagement an important part of our responsibility.

Rainbow continues to extend care beyond hospital settings through maternal and child health camps, antenatal awareness programs and preventive healthcare initiatives. These efforts support early diagnosis, greater awareness around maternal and neonatal care, child nutrition and improved access to specialized services.

Outreach clinics and visits by super-specialists help take specialty care closer to communities, including semi-urban, rural and peripheral locations. Free OPDs, screening camps and public education programs support early identification of health concerns and timely referrals.

These initiatives also provide valuable insights into unmet community needs. During the year, outreach activities highlighted gaps in preventive healthcare awareness, nutrition, anemia screening, emergency preparedness, follow-up continuity and access to specialized care in remote and underserved areas. These learnings will guide more focused community education, structured referral pathways and stronger follow-up mechanisms.

Partnerships also help us widen access to advanced treatments. During the year, our MoU with Coal India Limited strengthened access to bone marrow transplant care for children with Thalassemia and Aplastic Anemia.



Healthcare Skill Development Training Center

SDGs impacted



Our flagship long-term CSR initiative is the proposed Rainbow Healthcare Skill Development Training Center in Hyderabad. Envisioned as a multi-year project, the Center aims to address critical workforce gaps in maternal, child and neonatal healthcare while creating livelihood opportunities for women and youth from underserved communities. The project is expected to commence operations in FY2027.

The Center is planned to offer certification, diploma, fellowship and competency development programs across key healthcare roles, including doctors, nurses, technicians, healthcare administrators and support staff. Special provisions are being considered for women from underserved backgrounds, including partial fee support based on merit and socio-economic criteria.

The initiative will be developed in collaboration with the National Skill Development Corporation (NSDC), Healthcare Sector Skill Council (HSSC) and reputed academic institutions, with a strong emphasis on industry-relevant curricula, practical assessments and employability. Rainbow's hospital network is expected to provide hands-on clinical exposure, helping participants gain real-world experience in healthcare settings.

During the year, we received an allotment letter from the Hyderabad Metropolitan Development Authority (HMDA) for space at the Swarnajayanti Commercial Complex, covering over 5,000 sq. ft. on a three-year lease basis. Our clinical teams and doctors are actively evaluating approaches to further strengthen the long-term viability and impact of the project.

Over time, the initiative is expected to contribute to a stronger healthcare workforce, improved quality of care and sustainable livelihood creation, particularly for women seeking careers in healthcare support services.

Supporting Education and Student Welfare

SDGs impacted



We supported Swarna Bharat Trust through a contribution toward school maintenance and student welfare activities. This reinforces our focus on education, community development and improved learning environments.

Blood Stem Cell Donor Awareness

SDGs impacted



We supported DATRI, India's largest blood stem cell donor registry, to strengthen awareness and registration for patients with leukemia, thalassemia, aplastic anemia and other life-threatening blood disorders. The initiative helps improve the probability of patients finding life-saving donor matches.

During the year, our contribution supported donor awareness, registration and the strengthening of the stem cell donor registry base. Previous support helped add 56 potential donors to the registry.

Supporting Emerging Sporting Talent

SDGs impacted



Through Rainbow Children's Hospital Foundation, we supported Sanjana Sirimalla, a professional tennis player from Telangana. The support helped cover training, travel and tournament participation, enabling her to continue building her competitive career.

During FY2026, Sanjana delivered strong performances across national-level tournaments, including singles and doubles titles, runner-up finishes and semi-final appearances. Sanjana's journey demonstrates how targeted CSR initiatives can unlock individual potential while contributing to the development of sports in India.

Skill Development Model

PURPOSE	FOCUS	LEARNER
Bridge healthcare workforce gaps	Child Maternal Neonatal care	Doctors Nurses Technicians Administrators Women Youth
LEARNING MODEL	PARTNERS	OUTCOME
Classroom Clinical exposure Digital modules	NSDC HSSC Academic institutions	Skilled workforce Livelihoods Women's empowerment Better care delivery

Safe Drinking Water Initiative

SDGs impacted



At Chiramana village in Andhra Pradesh, Rainbow Children's Hospital Foundation supports an RO water plant that provides purified drinking water free of cost. The plant serves around 600 households, benefiting nearly 3,000 people, including about 1,000 children. Residents from neighboring villages also use the facility.

The initiative has improved access to clean and safe drinking water, reduced exposure to water-borne health risks and enhanced health, hygiene and overall quality of life within the community.

IMPACT SNAPSHOT

- ~600 households covered
- ~3,000 people benefited
- ~300 water cans used daily, 20 liters each





Natural Capital



Natural Capital

Enabling Care through Responsible Operations

Delivering specialized care for mothers, newborns and children requires hospitals that operate with precision, reliability and responsibility every day. As we expand our network, we continue strengthening resource-efficient infrastructure and responsible utility management practices. Our focus remains on creating safe, efficient and healthier care environments across facilities.

Advancing Energy Efficiency Across the Network

Our hospitals operate continuously across critical care areas such as NICUs, PICUs, operating theaters and diagnostics, making energy efficiency an important operational priority. During FY2026, we continued strengthening energy performance across facilities through technology upgrades, intelligent monitoring systems and increased adoption of renewable energy sources.

Improving Operational Energy Efficiency

Energy consumption across the network is supported through a mix of grid electricity, rooftop solar systems and renewable power procured through third-party open-access arrangements. Renewable energy contributed nearly one-third of total energy consumption during the year, reflecting our continued focus on cleaner and more sustainable energy sources.

Key initiatives undertaken during the year included:

- Deployment of LED lighting systems across facilities
- VRV-controlled AHU systems for improved HVAC efficiency
- Motion-sensor lighting in applicable systems
- IoT-enabled Building Management Systems (BMS)
- Installation of energy-efficient medical equipment
- Solar rooftop systems and solar water heaters at select facilities
- Use of energy-efficient heat pumps for water heating

Monitoring and Renewable Energy Integration

Energy performance is monitored through quarterly benchmarking, annual trend analysis, monthly diesel generator logs and periodic internal energy audits. Separate tracking mechanisms are maintained for renewable energy generation and grid consumption to improve visibility and optimize energy utilization across units.

Key Highlights FY2026

26.64 million kWh

Total energy consumed

8.76 million kWh

Renewable energy generated and consumed

~33%

Energy sourced through renewable energy, including open access and in-house solar systems

~₹7 Crore

Investments made towards sustainability-linked infrastructure upgrades

153,166 kWh

Energy saved through conservation initiatives

8,221,717 kWh

Green power purchased, reducing 7,317.33 MT of CO₂ emissions

534,552.1 kWh

Solar energy generated

55,450 kWh

Solar water heater capacity

8,408 MT

Carbon emission reduction achieved through direct and indirect renewable energy initiatives

8,544 MT

Reduction in net carbon equivalent through energy savings and renewable energy adoption

80 kWp

Solar power capacity will be installed at Rajahmundry unit

Strengthening Water Stewardship and Recycling

Reliable access to safe water remains essential across clinical operations, patient care, sanitation and support services. With the addition of new hospitals and clinics during the year, overall water consumption increased in line with network expansion. Despite this growth, we continued focusing on conservation, recycling and responsible utilization practices across facilities.

Responsible Water Utilization

Most hospital units operate Sewage Treatment Plants (STPs), enabling treated water reuse for flushing, gardening and cooling tower make-up requirements. Water-saving interventions implemented during the year included leak detection programs, aerators for flow control and the reuse of treated wastewater in non-clinical applications.

Water Quality and Recycling Systems

To maintain water quality standards across units, Water Treatment Plants (WTPs) and RO systems continue to support drinking and clinical usage requirements. In locations experiencing seasonal supply constraints, alternate tanker arrangements are maintained to ensure uninterrupted water availability.



WATER MANAGEMENT HIGHLIGHTS

- 265,965 KL total water consumption
- STP systems operational across most units
- Treated wastewater reused for flushing, gardening and utility purposes
- Water conservation supported through reuse and flow-control mechanisms.



Ensuring Safe and Compliant Waste Management

Effective waste management remains integral to patient safety, infection prevention and environmental compliance across our hospitals. Waste movement is monitored through daily recording systems, monthly consolidation and supervised tracking mechanisms for biomedical, general and recyclable waste streams.

Biomedical Waste Governance

Biomedical waste across all facilities is segregated in accordance with Biomedical Waste Management Rules, 2016, using color-coded systems and designated storage protocols. Trained housekeeping teams manage collection and handling processes, while disposal is carried out through authorized vendors under supervised monitoring mechanisms.

Waste Reduction and Monitoring Practices

Alongside regulatory compliance, we continue implementing waste reduction measures wherever feasible. During the year, initiatives included reducing paper usage through digitization, limiting single-use plastics and strengthening waste segregation practices to minimize cross-contamination risks. Hand dryers have also been introduced in select areas in place of tissue dispensers to reduce general waste generation. Dedicated waste collection and storage areas continue to be maintained across units to support safe handling and disposal practices.

Safe Waste Handling and Compliance Flow



365.68 MT
biomedical waste safely disposed

5.74 MT
plastic waste disposed

Building Climate-Conscious and Patient-Safe Infrastructure

Sustainability considerations remain integrated into infrastructure planning and facility operations. Several hospital units incorporate green-building-oriented practices focused on energy optimization, water efficiency, waste reduction and indoor environmental quality.

Key infrastructure initiatives implemented across facilities include energy-efficient HVAC systems with VRV-controlled AHUs, LED-based lighting systems, solar rooftops, heat pumps, STP-enabled wastewater recycling systems and indoor air-quality management infrastructure such as HEPA filtration systems and air curtain controls. Retrofit Emission Control Devices (RECDs) have also been installed across several units to help reduce diesel generator emissions.



Integrating Sustainable Design Practices

- Use of AAC blocks and low embodied-carbon materials
- Preference for locally sourced and recycled materials where feasible
- Adoption of low-VOC paints and finishes
- Natural daylight integration and passive design considerations
- Use of durable and low-maintenance materials suitable for healthcare environments
- Infrastructure planning focused on operational efficiency and healthier indoor environments

Compliance and Governance

Our hospitals continue to comply with applicable environmental regulations, including:

- Biomedical Waste Management Rules, 2016
- Air (Prevention and Control of Pollution) Act, 1981
- Water (Prevention and Control of Pollution) Act, 1974
- Hazardous Waste Management Rules, 2016
- Environment Protection Act, 1986

Ensuring Value Creation through Good Governance

This section outlines the structures, processes and leadership practices that guide how Rainbow is governed. It brings together our governance philosophy, Board composition, leadership oversight and statutory information, offering readers a clear view of how accountability, transparency and ethical conduct anchor our long-term value creation.

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CORPORATE GOVERNANCE

The Art of Doing What's Right

At Rainbow, strong corporate governance is fundamental to the trust placed in us by patients, families, shareholders, employees, and communities. As a leading provider of pediatric and maternal healthcare services, we are committed to upholding the highest standards of integrity, accountability, transparency, and ethical conduct, ensuring that our growth is sustainable, our decisions are responsible, and our focus on clinical excellence remains unwavering.

Governance Framework

Our governance framework is anchored in integrity, transparency, accountability and patient-centricity. Our Board and its Committees provide strategic oversight across business performance, risk management, succession planning, ESG priorities, internal controls, regulatory compliance and long-term value creation.

During the year, we further enhanced our governance practices in line with evolving regulatory requirements, stakeholder expectations and the growing scale of our operations. Key focus areas included:

- Structured Board oversight on strategy, growth initiatives, risk management, ESG priorities and capital allocation
- Strengthening of internal control and assurance mechanisms with the active engagement of functional leaders across the organization
- Enhancement of data governance and reporting processes to support timely, accurate, and transparent disclosures
- Continuous review and refinement of policies, SOPs and delegation frameworks to drive consistency and accountability
- Further integration of ESG considerations into governance and reporting processes, including alignment with BRSR and GRI reporting frameworks
- Strengthened monitoring, review, and escalation mechanisms across strategic and operational functions

Upholding a Robust Governance Culture

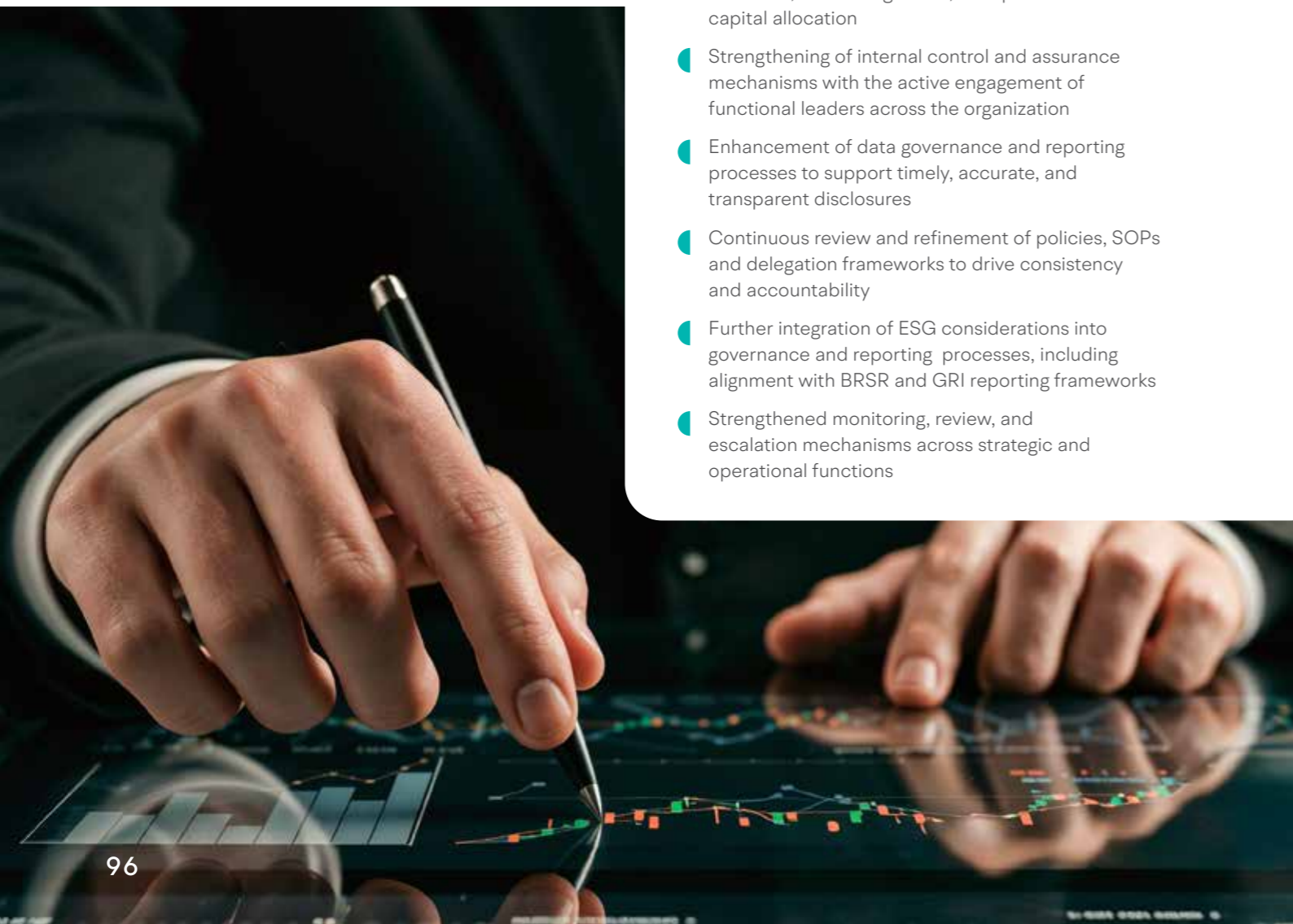
Area	Governance approach
• Transparency	• Timely and transparent disclosures, proactive investor engagement and robust reporting practices
• Accountability	• Clearly-defined responsibilities, structured oversight mechanisms, and performance-driven evaluation frameworks
• Ethical conduct	• Strong Code of Conduct, regular awareness initiatives, and a zero-tolerance approach to unethical behavior.
• Speak-up culture	• Independent and confidential whistleblower mechanism enabling timely reporting and resolution of concerns
• Patient-First Decision-Making	• Commitment to clinical excellence, patient safety, quality of care and responsible growth

Board Composition

Rainbow is guided by a diverse and experienced Board comprising executive, non-executive and independent directors. The Board brings together complementary expertise across healthcare delivery, clinical excellence, finance, investments, corporate governance, risk management, legal oversight and business strategy, enabling balanced and informed decision-making.

Our executive and promoter directors contribute deep domain expertise in pediatric and maternal healthcare, while our independent directors bring broader perspectives across governance, financial oversight, compliance and long-term strategy. The Board also reflects diversity in professional background, experience and gender, enabling well-rounded discussions and informed decision-making.

Competency	Representation
Healthcare Delivery & Hospital Operations	✓
Clinical Practice & Medical Leadership	✓
Finance & Capital Allocation	✓
Corporate Governance & Regulatory Affairs	✓
Risk Management & Internal Controls	✓
Strategy & Business Expansion	✓
Investments & Capital Markets	✓
Human Capital & Leadership	✓



Board Effectiveness and Continuous Learning

We are committed to continuously enhancing Board effectiveness through familiarization programs, structured evaluations and periodic knowledge sessions. Directors are regularly apprised of key regulatory developments, emerging healthcare trends, clinical and patient

safety considerations, business performance, ESG priorities, and other matters relevant to the Company's operating environment.

The annual Board evaluation process encompasses an assessment of the Board, its Committees and individual Directors. The findings are reviewed

by the Board and the Nomination & Remuneration Committee to identify opportunities for continuous improvement and further strengthen the effectiveness of the Company's governance framework.

Committees of the Board

Each Committee focuses on a specific area of governance, enabling deeper oversight and sharper decision-making.



Audit Committee

Oversees financial reporting quality, accounting practices, internal controls and the work of internal, external and cost auditors.



Risk Management Committee

Monitors strategic, operational, clinical, digital and financial risks. Reviews the risk framework, mitigation actions and early-warning mechanisms.



Nomination and Remuneration Committee

Oversees Board and leadership appointments, succession planning and remuneration structures aligned with performance and governance standards.



Stakeholders Relationship Committee

Ensures engagement with shareholders and other stakeholders is timely, transparent and responsive.



CSR & ESG Committee

Guides environmental stewardship, social responsibility and governance initiatives. Reviews ESG performance and CSR program impact.



Treasury Management Committee

Reviews investment strategy, liquidity, debt position, interest rate exposure and capital allocation to support disciplined financial management.



Business Strategy & Investment Committee

Reviews strategic growth opportunities, expansion initiatives, investments, acquisitions, and capital deployment decisions to support sustainable growth and long-term value creation.

Committee Composition by Independent Directors



Governance Processes, Controls and Compliance

We continued to strengthen governance processes, internal controls and compliance frameworks to support organizational scale. Key focus areas included clearer delegation of authority, workflow standardization, improved escalation protocols, enhanced documentation, structured compliance tracking and select automation initiatives to improve reporting accuracy and reduce manual intervention.

We maintain a comprehensive compliance framework covering statutory, regulatory and healthcare-specific requirements. Regulatory updates are monitored regularly, with periodic reporting to management and Board Committees. Given the nature of our business, particular emphasis is placed on clinical quality, patient safety, accreditation standards and adherence to healthcare-specific norms.

Stakeholder Governance and Transparent Communication

We are committed to maintaining transparent, timely, and meaningful communication with our stakeholders through robust disclosure and reporting practices. During the year, we continued to strengthen our governance and reporting framework through timely statutory and regulatory disclosures, quarterly earnings communications, investor presentations, earnings calls, material event disclosures, and enhanced sustainability reporting. These efforts reflect our commitment to providing stakeholders with accurate, relevant, and balanced information to support informed decision-making.

Stakeholder feedback and evolving regulatory expectations continue to shape our governance priorities. We remain focused on strengthening disclosure practices, enhancing reporting quality, improving internal control, and integrating ESG considerations into our reporting and governance processes. Through our Integrated Annual Report and other stakeholder communications, we seek to provide a transparent and holistic view of our strategy, performance, risks, and long-term value creation journey.

Strengthening Leadership Depth

During FY2026, we further strengthened our leadership team to support the Company's growth ambitions, expanding footprint, and evolving operational requirements. Mr. Abrarali Dalal joined as Chief Executive Officer, bringing extensive experience in healthcare leadership, operational excellence, and organizational transformation. Mr. Srinath Metla was appointed as Chief Strategy and Growth Officer to lead strategic initiatives, growth opportunities and expansion priorities.

Alongside these appointments, we continued to reinforce leadership continuity by elevating experienced leaders who have been integral to Rainbow's journey for over two decades. Dr. Preetham Kumar Poddutoor was elevated as Director – New Initiatives, Acquisitions and Medical Supply Chain, while Dr. Pranathi Reddy was elevated as Clinical Director – Obstetrics and Fetal Medicine. These leadership changes reflect our commitment to combining external expertise with deep institutional knowledge, while preserving the clinical excellence, values, and patient-centric culture that have been central to Rainbow's success.

Leadership Accountability and Execution Alignment

Rainbow's governance framework emphasizes clear accountability for the execution of strategic priorities. Key initiatives and objectives approved by the Board are translated into clearly-defined action plans with defined ownership across the leadership team. Progress against these priorities is monitored through regular management reviews and periodic updates to the Board enabling timely decision-making, course correction, and effective execution.

Leadership performance is assessed through a structured performance management framework comprising clearly-defined Key Result Areas (KRAs) and Key Performance Indicators (KPIs), which are reviewed and approved by the Nomination and Remuneration Committee at the beginning of the year and assessed at year-end. This ensures accountability remains linked to strategic and operational priorities.

OUR GOVERNANCE AND LEADERSHIP

Board of Directors



Dr. Ramesh Kancharla
Chairman & Managing Director



Dr. Dinesh Kumar Chirla
Whole-time Director



Dr. Adarsh Kancharla
Non-Executive Director



Mr. Aluri Srinivasa Rao
Independent Director



Dr. Anil Dhawan
Independent Director



Mr. Santanu Mukherjee
Independent Director



Ms. Sundari Raviprasad Pisupati
Independent Director

- Audit Committee
- Risk Management Committee
- Nomination & Remuneration Committee
- Stakeholders Relationship Committee
- CSR & ESG Committee
- Treasury Management Committee
- Business Strategy & Investment Committee

C = Chairperson M = Member

1

Dr. Ramesh Kancharla
Chairman & Managing Director

Dr. Ramesh Kancharla is the Founder, Chairman & Managing Director of Rainbow Children's Medicare Limited and has been associated with the Company since its inception. A renowned pediatrician and pediatric gastroenterologist, he has been instrumental in shaping specialized pediatric and perinatal healthcare in India.

He holds an MBBS from Sri Venkateswara University and an MD (Pediatrics) from Mangalore University. He is a member of the Royal Colleges of Physicians of the United Kingdom and underwent specialist training in Pediatric Gastroenterology, Hepatology and Nutrition at King's College Hospital, London.

With over three decades of experience, Dr. Kancharla founded Rainbow Children's Hospital in 1999 with a vision to create a dedicated healthcare ecosystem for children and mothers. Under his leadership, Rainbow has grown from a single hospital into one of India's leading pediatric and maternal healthcare networks, known for its clinical excellence and patient-centric approach.

His contributions to healthcare and entrepreneurship have been widely recognized through several prestigious honors, including the Lifetime Achievement Award at the Times Health Excellence Awards (2022), Entrepreneur of the Year by Sakshi Media Group (2018), Lifetime Achiever of the Year in Pediatric Gastroenterology & Hepatology by The Times of India (2017), and Healthcare Leader of the Year at the Financial Express Healthcare Awards (2024).

2

Dr. Dinesh Kumar Chirla
Whole-time Director

Dr. Dinesh Kumar Chirla is one of the Promoters of the Company and has been associated with the Board since 2005. He is a distinguished neonatologist and pediatric intensivist with over three decades of experience in neonatal and pediatric healthcare.

He holds an MBBS and MD (Pediatrics) from Marathwada University and a DM (Neonatology) from Bombay University. He is a Fellow of the Royal College of Pediatrics and Child Health (FRCPCH), UK, and has undergone advanced training in neonatology and pediatric intensive care in Australia and the United Kingdom.

As Director of Intensive Care at Rainbow Group, Dr. Chirla has played a pivotal role in developing and expanding advanced neonatal and pediatric intensive care services across the network. He has authored over 75 research publications, contributed to medical textbooks, and has been instrumental in establishing one of India's largest neonatal and pediatric emergency transport networks.

Dr. Chirla has held several leadership positions in professional medical bodies, including the National Neonatology Forum of India and the Indian Academy of Pediatrics. A respected clinician, educator and researcher, he continues to contribute significantly to advancing neonatal and pediatric healthcare in India.

3

Dr. Adarsh Kancharla
Non-Executive Director

Dr. Adarsh Kancharla is one of the promoters of the Company and has been a member of the Board since January 2024. As a clinician and emerging healthcare leader, he brings a unique blend of medical expertise, international clinical exposure, and strategic perspective to the Company's governance and long-term growth journey.

He holds an MBBS and an MD in Pediatrics from Sri Ramachandra Institute of Higher Education and Research, Chennai. Following his postgraduate training, he served as a Registrar in the Pediatric Liver and Gastroenterology unit at Rainbow Children's Hospital, Hyderabad, where he gained hands-on experience in managing complex pediatric cases. To further advance his clinical expertise, he pursued a fellowship at King's College Hospital, London, one of the world's leading centers for pediatric liver disease and transplantation, where he received specialized training in pediatric hepatology and liver transplantation.

A dedicated clinician and academic, he has authored numerous publications in reputed national and international journals. Beyond medicine, he brings strategic leadership to our organization. In a significant academic advancement, Dr. Adarsh has been accepted into Harvard Business School's full-time MBA Program, Class of 2027. This achievement reflects his aspiration to blend clinical acumen with global business leadership.

4

Mr. Aluri Srinivasa Rao
Independent Director

Mr. Aluri Srinivasa Rao has been associated with the Board of the Company since March 2019. He holds a Bachelor of Pharmacy (Honors) from BITS Pilani, an MBA from Osmania University, and a Master of Science in Management from the University of London, London Business School. He has also completed executive leadership programs at Yale School of Management and London Business School.

With over three decades of experience in private equity, investments and business leadership, Mr. Rao has held senior leadership positions with leading financial institutions, including Morgan Stanley Private Equity Asia and ICICI Venture Funds Management. He has extensive expertise in investment management, corporate strategy, business development, financial analysis and value creation across diverse sectors, including life sciences and emerging technologies.

Over the course of his career, he has contributed to the governance and growth of numerous companies and has mentored several technology-driven businesses. His rich experience in investments, strategy and corporate governance brings valuable insights to the Board's deliberations on growth, capital allocation and long-term value creation.

5

Dr. Anil Dhawan
Independent Director

Dr. Anil Dhawan holds Bachelor of Medicine and Bachelor of Surgery (MBBS) from the Himachal Pradesh University, where he was awarded the Shri Devi Chand Memorial Gold Medal and the Dr. Kranti Mohan Sharma Memorial Prize for securing first position in MBBS. He also holds Doctor of Medicine (MD) in Pediatrics from the Post Graduate Institute of Medical Education and Research (PGIMER), Chandigarh, and has passed the examination of the Educational Commission for Foreign Medical Graduates (USMLE) and held the license to practice in the USA. He is the fellow member of the Royal College of Pediatrics and Child Health (FRCPCH).

With over 30 years of experience in the healthcare industry, Dr. Dhawan has had a distinguished career. He worked as a pediatric hepatologist at King's College Hospital, London, UK. Currently, he is associated with King's College Hospital, London, UK as Director Research and Innovation and the Director of Pediatric Liver GI and Nutrition Center and Mowat Labs. He has been on the Board of our Company since August 2018.

6

Mr. Santanu Mukherjee
Independent Director

Mr. Santanu Mukherjee is the former Managing Director of the erstwhile State Bank of Hyderabad, an associate bank of the country's largest lender - State Bank of India. He has four decades of experience in the fields of banking, finance, risk management, etc. in various capacities. From 2013 to mid-2014, he was acting as Chief General Manager of State Bank of Bikaner and Jaipur. He has also worked as a Chief Executive Officer of State Bank of India, Paris from 2004 to 2008. He joined as a probationary officer and carried out important domestic and overseas assignments in the SBI Group.

Mr. Mukherjee holds a Bachelor of Science (Honors) degree from Presidency College under the University of Calcutta and is a Certified Associate of the Indian Institute of Bankers (CAIIB). He is a member of the Board of Governors of the Institute of Management Technology, Hyderabad, and has been serving on the Board of our Company since October 2021.

7

Ms. Sundari Raviprasad Pisupati
Independent Director

Ms. Sundari Raviprasad Pisupati is a dual-qualified lawyer licensed in India and New York, with nearly 32 years of experience in corporate and commercial law. A Gold Medalist from NLSIU, Bengaluru, and an LL.M. graduate from Columbia Law School, she began her career at Sidley Austin, New York, and has since built a globally recognized practice focused on M&A, Private Equity, Venture Capital, and Cross-Border Transactions.

She has advised leading companies and funds across sectors, including IT, financial services, infrastructure, biotechnology, and pharmaceuticals. Ms. Pisupati also plays an active role in corporate policy through the Indo-American Chamber of Commerce and the Federation of Telangana Chambers of Commerce and Industry.

Her accolades include recognition as a Band 1 Lawyer by Chambers & Partners (2023-2025), Leading Individual by Legal 500 Asia-Pacific, and Top 10 Individual Lawyers in India by Forbes (2021). She was also featured in Women's Era and the ALB India Super 50 list.

She has been on the Board of our Company since September 2021.

Key Managerial Personnel



Mr. Abrarali Dalal
Chief Executive Officer

Mr. Abrarali Dalal is the Chief Executive Officer of Rainbow Children's Medicare Limited. With over 25 years of experience in the healthcare sector, he brings extensive expertise in hospital operations, business transformation, growth strategy, and healthcare network management.

Prior to joining Rainbow, he served as the Managing Director and Chief Executive Officer of Sahyadri Hospitals, where he played a key role in driving operational excellence, strengthening clinical programs, and supporting the growth of one of Maharashtra's leading healthcare networks. He has also held leadership positions with Rainbow Children's Hospitals and Fortis Healthcare, contributing to the development and management of large multi-specialty healthcare institutions.

As CEO, Mr. Dalal is responsible for driving Rainbow's strategic growth agenda, operational performance, expansion initiatives, and organizational excellence, while further strengthening the Company's position as a leading provider of pediatric and maternal healthcare services in India.



Mr. Vikas Maheshwari
Chief Financial Officer

Mr. Vikas Maheshwari is a highly accomplished finance professional with over 29+ years of experience in corporate finance, mergers & amalgamations, deal structuring, strategy, and treasury management. He is a member of the Institute of Chartered Accountants of India and holds a Bachelor's degree in Commerce from Lucknow University.

Mr. Maheshwari plays an essential role in driving the financial strategy of our company, leveraging his extensive expertise to optimize financial performance and drive sustainable growth. Mr. Maheshwari collaborates closely with functional heads, senior management and Board of Directors to develop and implement financial strategies that align with the company's objectives, thereby enhancing shareholder value and fostering financial stability. He has been associated with the Company since June 2023.



Ms. Shreya Mitra
Company Secretary and Compliance Officer

Ms. Shreya Mitra is an Associate Member of the Institute of Company Secretaries of India (A54901), a Gold Medalist in Masters of Commerce (Human Resource Management) from The Maharaja Sayajirao University of Baroda. She also holds a Master of Business Laws from the National Law School of India University (NLSIU), Bengaluru, along with certifications in ESG.

With nearly a decade of post-qualification experience, Ms. Mitra has developed expertise in corporate governance, capital markets, regulatory compliance, board advisory, and legal affairs. Prior to joining Rainbow, she played a key role in the successful IPO of Sigachi Industries Limited, leading due diligence, regulatory filings, coordination with SEBI, BSE, NSE and other intermediaries, and post-listing compliance. She has also managed a broad range of corporate secretarial, governance, legal, and compliance matters, including corporate restructuring, arbitration, policy development, and enterprise-wide compliance programs.

Senior Managerial Personnel



Dr. Pranathi Reddy

Clinical Director of Obstetrics and Fetal Medicine

Dr. Pranathi Reddy serves as the Clinical Director of Obstetrics and Fetal Medicine at Rainbow Hospitals. With over 35 years of clinical experience, she has played a key role in strengthening the Group's maternal healthcare services and in Rainbow's growth as a leading publicly listed healthcare institution.

Dr. Pranathi holds MD, DGO, DNB and FRCOG (UK) qualifications and has subspecialty training urogynecology in the UK and the USA. While recognized for her clinical expertise, Dr. Pranathi is particularly known for developing evidence-based clinical protocols, integrated with mentorship and governance frameworks, that enhance patient safety, standardize clinical practice and ensure consistent, high-quality maternal care across the Group. She was invited by UNICEF to participate in the National Consultation on Rising Caesarean Rates.

Beyond her professional responsibilities, she is actively involved in community service as former President of the Rotary Club of Banjara Hills and a founding Trustee of Sparsh Hospice.



Dr. Preetham Kumar Poddutoor

Director - New Initiatives, Acquisitions and Medical Supply Chain

Dr. Preetham Kumar Poddutoor oversees the Company's supply chain, acquisitions and innovation initiatives, in addition to his continuing role as a medical consultant. Associated with Rainbow for over two decades, he has played a pivotal role in the Company's growth and expansion, contributing significantly to its clinical and operational excellence.

Dr. Preetham completed his postgraduate training in Pediatrics from Osmania Medical College, followed by a Fellowship in Neonatology. He also holds an Executive MBA from the Indian School of Business, bringing together extensive clinical expertise with strong business and strategic leadership capabilities.



Dr. Prashanth K

Group Medical Director

Dr. Prashanth oversees the groups Medical Operations, Quality and Safety in patient care, Biomedical, Accreditations, Medicolegal and overall responsible for patient care deliverables across the group.

He is associated with Rainbow Group for the past 12 years and played a significant role in the Group's growth and clinical/operational excellence

Dr. Prashanth is a medical graduate from Gandhi Medical college, followed by Master's in Hospital Administration from Osmania university and specialized in Emergency Medicine from the RCGP-UK.



Mr. Srinath Metla

Chief Strategy & Growth Officer

Mr. Srinath Metla is the Chief Strategy & Growth Officer of Rainbow Children's Medicare Limited. With over 25 years of leadership experience in the healthcare sector, he has built a distinguished track record in business strategy, growth acceleration, market expansion, and healthcare brand development.

He has successfully led the establishment and growth of healthcare institutions across diverse markets, driving business transformation, operational scale, and sustainable value creation. His expertise spans strategic planning, mergers and acquisitions, business development, network expansion, and market positioning.

At Rainbow, Mr. Metla leads the Company's strategic growth agenda, including expansion initiatives, new business opportunities, partnerships, and long-term value creation, supporting the next phase of the Company's growth journey.

Corporate Information

BOARD OF DIRECTORS

Dr. Ramesh Kancharla

Chairman & Managing Director

Dr. Dinesh Kumar Chirla

Whole-time Director

Dr. Adarsh Kancharla

Non-Executive Director

Mr. Aluri Srinivasa Rao

Independent Director

Dr. Anil Dhawan

Independent Director

Mr. Santanu Mukherjee

Independent Director

Ms. Sundari Raviprasad Pisupati

Independent Director

CHIEF EXECUTIVE OFFICER

Mr. Abrarali Dalal

CHIEF FINANCIAL OFFICER

Mr. Vikas Maheshwari

COMPANY SECRETARY & COMPLIANCE OFFICER

Ms. Shreya Mitra

STATUTORY AUDITORS

M/s. S.R. Batliboi & Associates LLP

Chartered Accountants

SECRETARIAL AUDITOR

Mr. K.V.S. Subramanyam

Company Secretary in Practice

INTERNAL AUDITORS

M/s. Deloitte Touche Tohmatsu India LLP

Chartered Accountants

COST AUDITORS

M/s. Lavanya and Associates LLP

Cost Accountants

REGISTERED OFFICE

8-2-120/103/1, Survey No. 403,

Road No. 2, Banjara Hills,

Hyderabad-500034,

Telangana

CORPORATE OFFICE

8-2-19/1/A, Daulet Arcade,

Road No. 11, Banjara Hills,

Hyderabad-500034, Telangana.

Website: www.rainbowhospitals.in

REGISTRAR AND SHARE TRANSFER AGENT

M/s. Kfin Technologies Limited

Plot 31 and 32, Financial District,

Nanakramguda, Serilingampally,

Hyderabad, Rangareddy-500 032, Telangana



Management Discussion and Analysis

ECONOMIC OVERVIEW

Global Economy

The global economy remained stable in 2025 by navigating changing trade policies and different regional outcomes. Technology investments in areas such as artificial intelligence helped balance the effects of tariffs and policy changes. Global inflation reached a steady 4.1% as several countries reported lower figures than expected. This environment provided global operations and research teams with a more predictable cost structure.

The ongoing Russia-Ukraine war continues to disrupt global energy markets and supply chains, creating uncertainty for commodity prices and trade flows. Escalating Middle East conflicts further strain oil supplies and heighten inflationary pressures across economies. These developments challenge manufacturing sectors worldwide while testing international diplomatic responses.

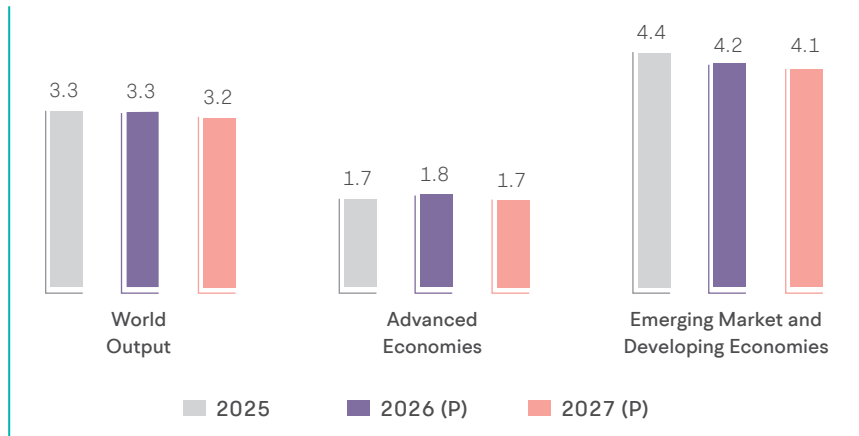
World GDP growth reached 3.3% for the year with varying results across different areas. Advanced economies grew by 1.7% while the United States saw a 2.1% increase from technology spending and financial support. The euro area grew by 1.4% and Japan by 1.1%. Emerging markets performed better with 4.4% growth where India reached 7.3% and China saw 5.0% expansion. These high performing markets remain essential for global reach and patient access.

7.3%

India's GDP growth, making it one of the fastest-growing major economies.

Real GDP Growth

(in %)



P = Projections

Financial conditions were generally helpful despite some market changes, and high-growth technology stocks performed better than the wider market. Global trade volumes stayed consistent because of strong technology exports from Asia.

Trade tensions decreased after a truce between the United States and China lowered tariffs and paused export limits on electronic components and minerals. The United States also removed certain agricultural tariffs which kept overall rates similar to previous levels. While policy concerns were lower than the peaks seen in late 2025, they remained higher than the year before.

Financial conditions were generally helpful despite some market changes, and high-growth technology stocks performed better than the wider market. Global trade volumes stayed consistent because of strong technology exports from Asia. Central banks managed inflation through small policy changes, including rate drops in the United States and the United Kingdom. These actions helped maintain a stable financial environment against trade and political challenges.

Outlook

The mid-term global economic outlook suggests a period of sustained growth with projections of 3.3% for 2026 and 3.2% for 2027. This positive trend is driven by a shift toward technology-led productivity, particularly the use of artificial intelligence in industrial and medical fields.

Advanced economies are expected to expand by 1.8% in 2026. The United States is likely to lead this group with 2.4% growth, supported by fiscal incentives and healthcare tax reliefs from the One Big Beautiful Bill Act. This legislation and the recovery from the late 2025 federal shutdown create a strong framework for healthcare spending and private investment. While the Eurozone faces slower growth at 1.3%, it remains a stable pillar of the global economy. Japan is expected to grow by 0.7% under new fiscal policies.

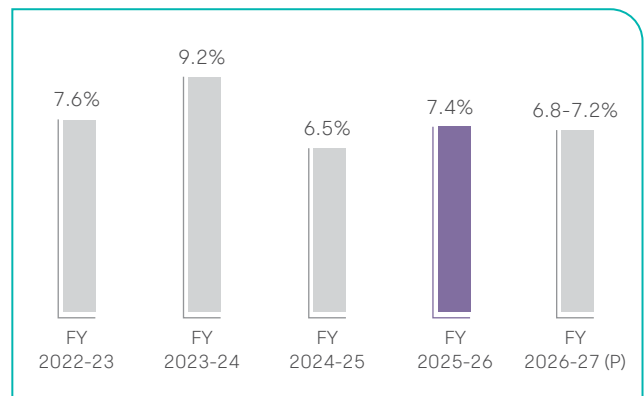
Emerging markets remain a high-growth frontier with momentum staying above 4.0%. China is expected to grow by 4.5% due to domestic stimulus and more predictable trade with the US. India remains a global leader with a 6.4%

growth rate and serves as a critical hub for manufacturing and digital health innovation. Growth in the Middle East at 3.9% and in Sub-Saharan Africa at 4.6% reflects regional stabilization and presents opportunities to reach more patients globally.

The financial environment is expected to improve as inflation drops toward 3.4% by 2027. Lower price pressures and interest rate cuts in the US and UK should make it easier to fund large-scale research and development projects. While global trade growth may slow to 2.6% because of tariff adjustments, the technology and pharmaceutical sectors remain strong to ensure the continued delivery of essential medicines.

Indian Economy

The Indian economy exhibited resilience in FY2025-26 amid global trade uncertainties and market fluctuations. First Advance Estimates indicate real GDP growth of 7.4% alongside Gross Value Added at 7.3%. These figures underscore the strength of a domestic demand-led growth trajectory. Robust agricultural performance bolstered rural earnings. Urban consumption gained momentum from stable jobs and easing inflation.



P = Projections

Inflation touched a record low of 1.7% over the first nine months of FY2025-26. This stability amplified household purchasing power. Expectations remain anchored ahead.

India achieved a landmark by overtaking Japan to rank as the world's fourth-largest economy. Current GDP stands at \$4.18 trillion. Projections position the country to claim third place by 2030 with a \$7.3 trillion economy. This trajectory reaffirms India's status as the fastest-expanding major economy. Domestic demand, durability and structural reforms provide firm backing.

Private consumption continues as the key engine. Lower inflation and rising real wages fuel this momentum. Public capital expenditure reached ₹12.2 lakh crore. Such outlays advanced infrastructure and stimulated sectors like manufacturing, construction, and energy. Initiatives such as Viksit Bharat 2047 advance self-reliance and capacity enhancement despite external headwinds.

Inflation touched a record low of 1.7% over the first nine months of FY2025-26. This stability amplified household purchasing power. Expectations remain anchored ahead. The RBI forecasts 2.0% for the full

year. Prudent fiscal measures and consistent bank credit growth underpin this outlook. The banking system shows fortitude with ample capital buffers and minimal non-performing assets. Foreign exchange reserves surpass \$700 billion. These reserves equip India to navigate international turbulence.

The Union Budget 2026-27 reinforces commitment to balanced growth and fiscal prudence. Emphasis persists on infrastructure and manufacturing investments. This aligns with aspirations for a developed India. Priorities include energy transition, digital progress, and aid for small and medium enterprises. Steps to streamline regulations and expand credit access promise to lift industrial output and lay the groundwork for enduring expansion.

Outlook

The outlook for the Indian economy stays positive and stable. Projections place real GDP growth for FY2026-27 between 6.8% and 7.2%. These estimates highlight India's ability to preserve strong momentum despite worldwide uncertainties.

Government spending on infrastructure will continue to provide solid support. Private sector investments keep rising steadily. Policy measures and capacity building further reinforce the manufacturing base. The services sector holds its reliable growth path. Digital progress and resilient exports lend additional strength.



INDUSTRY OVERVIEW

1. GLOBAL AND INDIAN MACROECONOMIC OVERVIEW

The April 2026 update to IMF's World Economic Outlook (WEO) report employs a scenario-based approach to present the forecast for 2026 and 2027. In this approach, the scenario in which the ongoing conflict in the Middle East has limited duration, intensity, and scope so that the disruptions stemming from it dissipate by mid-2026 is assumed for modeling a 'reference forecast' based on which forecasts are drawn for adverse and severe scenarios in which the conflict becomes more protracted, or the resumption of production and transport activities takes longer because of possible scaring from closing of or damage to energy infrastructure. Hence, the impact on global economy which crucially depends on the conflict's duration, intensity, and scope is projected as shown below:

3.1%

Global GDP to grow in CY26

3.2%

Global GDP to grow in CY27

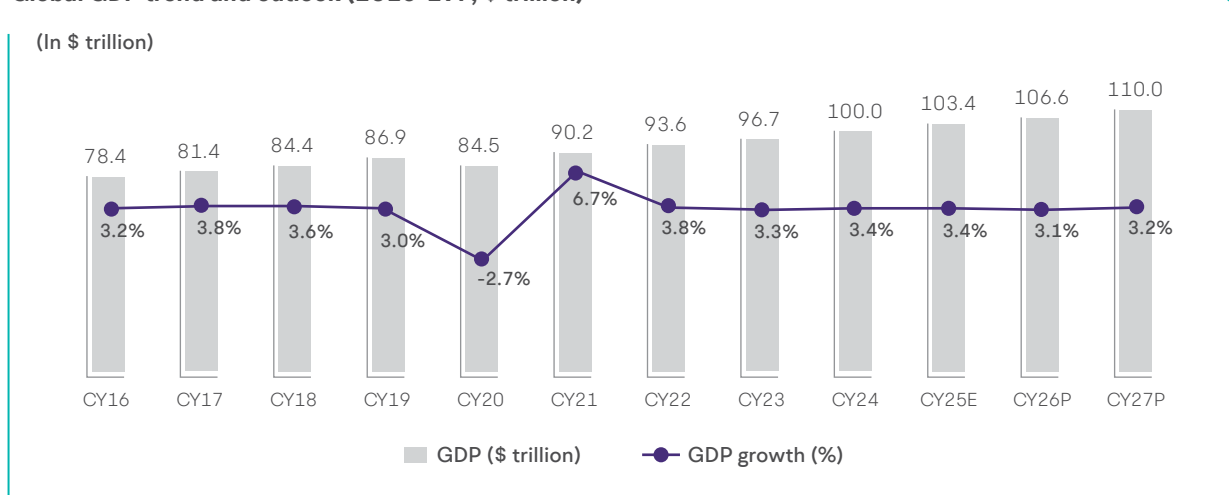
Scenario-based forecast approach taken by IMF

	Reference forecast	Adverse forecast	Severe forecast
Growth projection for global real GDP	3.1% in 2026 3.2% in 2027	2.5% in 2026 3.0% in 2027	2.0% in 2026 2.2% in 2027
Growth projection for global inflation	4.4% in 2026 3.7% in 2027	5.4% in 2026 3.9% in 2027	5.8% in 2026 6.1% in 2027

Source: IMF's World Economic Outlook - April 2026 update, Crisil Intelligence

As per IMF, most of the impact on growth in 2026 comes from higher energy prices, whereas most of the impact on growth in 2027 comes from tightening financial conditions and rise in inflation expectations.

Global GDP trend and outlook (2016-27P, \$ trillion)



Note: E – estimated, P – projection, CY– calendar year

Source: IMF economic database, Crisil Intelligence

Variation in projections for different regions in adverse and severe scenarios

	Projections for adverse scenario	Projections for severe scenario
Inflation	<ul style="list-style-type: none"> For Advanced Economies and China: increase by 50 basis points by 2027 For Emerging Economies: increase by 90 basis points by 2027 	<ul style="list-style-type: none"> For Advanced Economies and China: increase by 100 basis points by 2027 For Emerging Economies: increase by 130 basis points by 2027
Oil prices	<ul style="list-style-type: none"> Rise by 80% starting in Q2 of 2026 Fall to ~20% above baseline in 2027. Return to historical norms in 2028 	<ul style="list-style-type: none"> Rise by 100% starting in Q2 of 2026 Stay at 2026 level in 2027 Return to historical norms in 2028
Gas prices	<ul style="list-style-type: none"> For Europe, Asia: rise by 160% in Q2 of 2026 	<ul style="list-style-type: none"> For Europe, Asia: rise by 200% in Q2 of 2026
Food prices	<ul style="list-style-type: none"> Increase by 2.5% in 2026 	<ul style="list-style-type: none"> Increase by 5% in 2026
Corporate spreads	<ul style="list-style-type: none"> For Advanced Economies and China: increase by 50 basis points in 2026 For Emerging Economies: increase by 100 basis points in 2026 	<ul style="list-style-type: none"> For Advanced Economies and China: increase by 100 basis points in 2026 For Emerging Economies: increase by 200 basis points in 2026

Source: IMF's World Economic Outlook – April 2026 update, Crisil Intelligence

Risks to the outlook remain tilted on the downside on account of escalation of geopolitical tensions, flaring up of trade-related disputes, reevaluation of profit expectations regarding AI potentially leading to decline in investments and an abrupt correction in financial markets, and larger fiscal deficits and increasing public debt which could put pressure on long-term interest rates. On the upside, economic activity could be further lifted by AI-related investment and supported by renewed momentum for structural reforms and by a sustained easing in trade tensions.

In February 2026, the Ministry of Statistics and Programme Implementation (MoSPI) released a new series of national accounts estimates with base year of FY2022-23 as it represents a recent normal year (after COVID). This base revision was undertaken to capture structural changes that have taken place in India's economy and to leverage the availability of comprehensive data on different sectors of the economy.

6.6%

Crisil: India's GDP to grow in FY2027

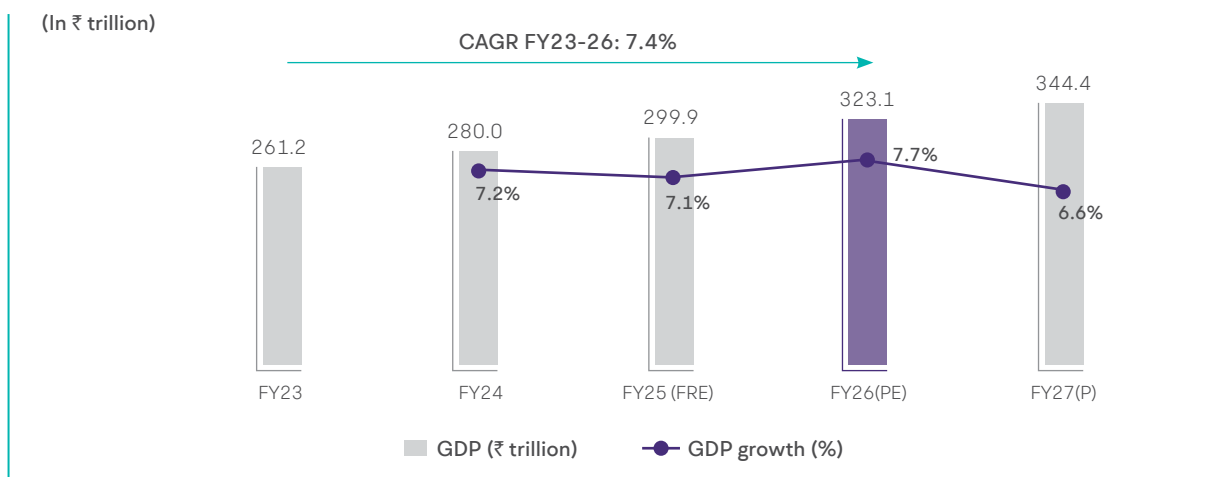
Under the new 2022-23 series, India's real GDP grew from ₹261.2 trillion in FY2023 to ₹323.1 trillion in FY2026, logging a CAGR of 7.4% between FY2023 and FY2026. Further, as per Provisional Estimates, India's real GDP grew at 7.7% in FY2026. Major drivers of this growth have been the secondary and tertiary sectors as they registered growths of 8.8% and 9.3%, respectively. India's economy is tied to West Asia for energy, trade, investment, and remittances. Ongoing conflict and global disruptions have led to increased costs, weaker export demand, and manufacturing challenges due to reliance on imported inputs, compounding domestic issues like sub-par monsoons. Crisil has laid out the following macroeconomic outlook for FY2027.

Crisil's projection for India for FY2027

Macroeconomic variables	Estimated for FY2026	Forecast for FY2027
Real GDP growth (%)	7.6	6.6
CPI inflation (%)	2.0%	5.1%
10-year government security (G-sec) yield (March average, %)	6.7%	7.0%
Current account balance (% of GDP)	-0.8%	-2.2%
Exchange rate (March average, ₹/\$)	92.8	93.5

Source: Crisil Intelligence

India's real GDP at constant prices (base year: 2022-23), FY23-27P



Notes:

FRE – First Revised Estimates, PE: Provisional Estimates, P – Projected

India's FY27 projection is Crisil's forecast

Source: Ministry of Statistics and Programme Implementation (MoSPI), Crisil Intelligence

Private consumption continues to anchor India's economic growth

India's private final consumption expenditure (PFCE) grew by 6.4% between FY2023 and FY2026, wherein growth between FY2025 and FY2026 stood at 7.7%. This growth in consumption is supported by the positive impact of GST rate rationalization, stable employment conditions, rising real purchasing power, steady rural consumption resulting from strong agricultural performance, and gradual rise in urban consumption aided by the rationalization of direct and indirect taxes.

PFCE at constant prices (2022-23 series), FY2023-26

Year	FY23	FY24	FY25(FRE)	FY26(PE)
PFCE (In Billion)	149,228.3	157,852.6	166,998.5	179,938.7
% Share of GDP	57.1%	56.4%	55.7%	55.7%

Note: FRE: First Revised Estimates; PE: Provisional Estimates

Source: MoSPI, Crisil Intelligence

India's GDP is driven by three key forces

01

DEMOGRAPHY

India has the potential to reap demographic dividends: In 2023, India's working-age population stood at 849.9 million commanding a share of 59.1% in its total population. This working-age population is expected to reach its peak when it touches the 967.7 million-mark in 2034 commanding a share of ~69.2% in India's total population.

02

RISING URBANIZATION

India's population is turning increasingly urban: In 2001, India's urban population made up 27.9% of its total population (300.8 million). As per WPP 2024, India's urban population is likely to grow to 567.7 million by 2030, making up 37.2% of India's total population.

03

GROWING PER CAPITA INCOME

India's per capita income, a broad indicator of living standards, grew at a CAGR of 6.6% between FY2023 and FY2026, from ₹159,557 in FY2023 to ₹193,152 in FY2026. Growth was led by better job opportunities, propped up by overall GDP growth.

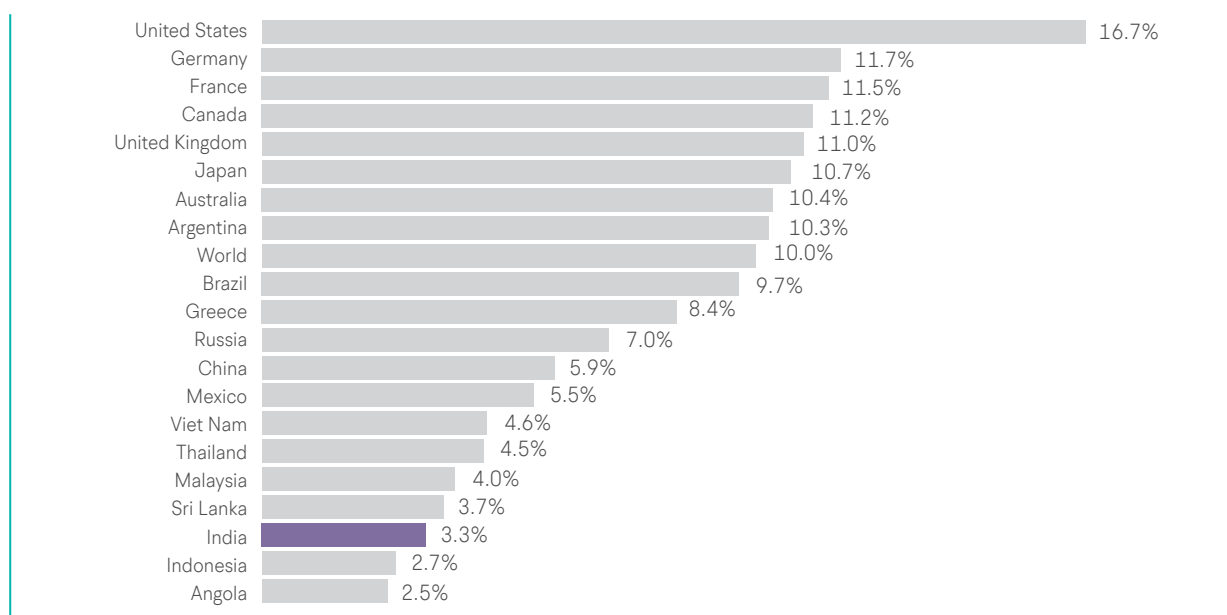
Source: Crisil Intelligence

India's social and healthcare parameters

India's health expenditure as a % of GDP is among the lowest in the world

According to the latest data in the Global Health Expenditure Database compiled by the WHO, in 2023, India's expenditure on healthcare was 3.3% of its GDP. When compared with other countries, India's healthcare expenditure as a share of its GDP emerges as one of the lowest in the world, trailing not only developed countries such as the US and the UK, but also developing countries such as Vietnam and Thailand. Per capita healthcare expenditure in India stood at \$84.7 in 2023, whereas that of the US stood at USD 13,473.2. In percentage terms, India's per capita healthcare expenditure is 11.1% of the per capita healthcare expenditure of China.

Healthcare expenditure as a % of GDP, 2023



Source: Global Health Expenditure Database, World Health Organization (accessed in April 2026); Crisil Intelligence

India is far from thresholds

India lags behind the global average in hospital bed availability. The IPHS recommends a desirable benchmark of 20 beds per 10,000 population, with 10 beds per 10,000 considered the minimum essential standard.

Bed density norms under IPHS 2022

Health facility	Norms stated under the Indian Public Health Standards	
	Bed density per health facility	Population to be served per health facility
Primary health centers	6 indoor/observation beds	20,000 - 30,000
Community health centers	30 beds	80,000 - 1,20,000
Sub-district hospitals	31-100 beds	1,00,000 - 5,00,000
District hospitals	101-500 beds	Up to 30,00,000

Source: MoHFW, Crisil Intelligence

The adequacy of a country's healthcare infrastructure and personnel in terms of its bed density, physician density, and nurse and midwife density is key to assessing the quality of healthcare delivered in the country.

Bed density refers to the number of hospital beds available per 10,000 population in a country, where hospital beds include inpatient beds available in public, private, general, and specialized hospitals and rehabilitation centers. At the global level, there are no widely accepted standards for bed density. However, in India, bed density norms for different health facilities are stated in the Indian Public Health Standards (IPHS 2022).

Increasing medical education capacity in India to support healthcare industry

India's medical education capacity has expanded, with MBBS seats rising from ~51,348 (2014) to ~1,29,025 (2025) and colleges doubling, indicating strong supply-side improvement. India has 819 medical colleges with a total of 1,29,025 MBBS seats, nearly evenly split between government (63,682) and private/trust (65,343) institutions, indicating a balanced public-private contribution to medical education capacity.

The below-mentioned table highlights the distribution of accredited seats across pediatric and women's health-related medical specializations in India. MD Pediatrics accounts for 4,177 seats, representing ~10.8% of the total 38,411 MD seats, indicating a notable share within postgraduate medical education. In women's health, MS Obstetrics & Gynecology comprises 4,667 seats, contributing nearly 23.9% of the total 19,510 MS seats.

The pediatric speciality and super-speciality segment collectively include 4,614 seats across disciplines such as pediatric surgery, neonatology, pediatric gastroenterology, cardiology and oncology. Similarly, women's health and reproductive medicine specializations together account for 4,779 seats, with obstetrics and gynecology constituting the majority share.

The table presents accredited DNB broad/super-speciality/fellowship seats and DNB post diploma seats across multiple medical specialties related to pediatrics, neonatal and Obstetrics and Gynaecology.

DNB broad/super-speciality/fellowship seats

Specialty	No. of Accredited Seat(s)*	DNB post diploma	Specialty	No. of Accredited Seat(s)	DNB post diploma
Fetal Radiology	4	NA	Pediatric Gastroenterology	12	NA
Gynecological Oncology	27	NA	Pediatric Hemato-Oncology	35	NA
Obstetrics and Gynecology	425	373	Pediatric Nephrology	8	NA
Pediatric Anesthesia	22	NA	Pediatric Orthopedics	2	NA
Pediatric Cardiology	41	NA	Pediatric Surgery	8	NA
Pediatric Critical Care	40	NA	Pediatric Surgery (Direct 6 Years Course)	19	NA
Pediatric Emergency Medicine	2	NA	Pediatric Urology	3	NA
Pediatric Endocrinology	4	NA	Pediatrics	509	442
			Neonatology	47	NA
Total	No. of Accredited Seat(s)*		DNB post diploma		
	1,208		815		

Note:

*(Broad/Super/Fellowship)

Source: NBEMS Website, Crisil Intelligence

Estimated Pediatric Speciality and Super Speciality seats

Specialization	Seats
MD – Pediatrics	4,117
M.Ch - Pediatric Surgery	222
DM - Neonatology	114
Neonatology	20
DM - Pediatric Oncology	10
DM - Pediatric Neurology	6
DM - Pediatric Gastroenterology	5
Pediatric Nephrology (DM/M. Ch)	10
Diploma in Pediatrics	2
Diploma in Child Health	31
DM - Pediatric Hepatology	3
M.Ch - Pediatric Orthopedics	10
DM - Pediatric Cardiology	6
Total	4,616

Source: NMC Website (May 2026), Crisil Intelligence

Estimated Women Health and Reproductive Medicine specialization seats

Specialization	Seats
MS - Obstetrics & Gynecology	4,667
M.Ch - Gynecological Oncology	32
Diploma in Obstetrics & Gynecology	52
MD - Obstetrics & Gynecology	28
Total	4,779

Source: NMC Website (May 2026), Crisil Intelligence

DNB post diploma seats

Pediatrics - DCH (NBEMS)	No. of Accredited Seat(s)
Pediatrics - DCH (NBEMS)	522
Obstetrics & Gynecology - DGO (NBEMS)	563
Total	1,085

Source: NBEMS Website, Crisil Intelligence

Healthcare PFCE increased by ~7% in FY25 to ₹8,608.9 billion

The share of health expenditure in PFCE (2022-23 series) in FY24 logged ₹8,052.5 billion crore, which was 5.1% of the total PFCE in FY24. In FY25, the share of health expenditure in total PFCE rose to 5.2%, while the total absolute value stood at ₹8,608.9 billion.

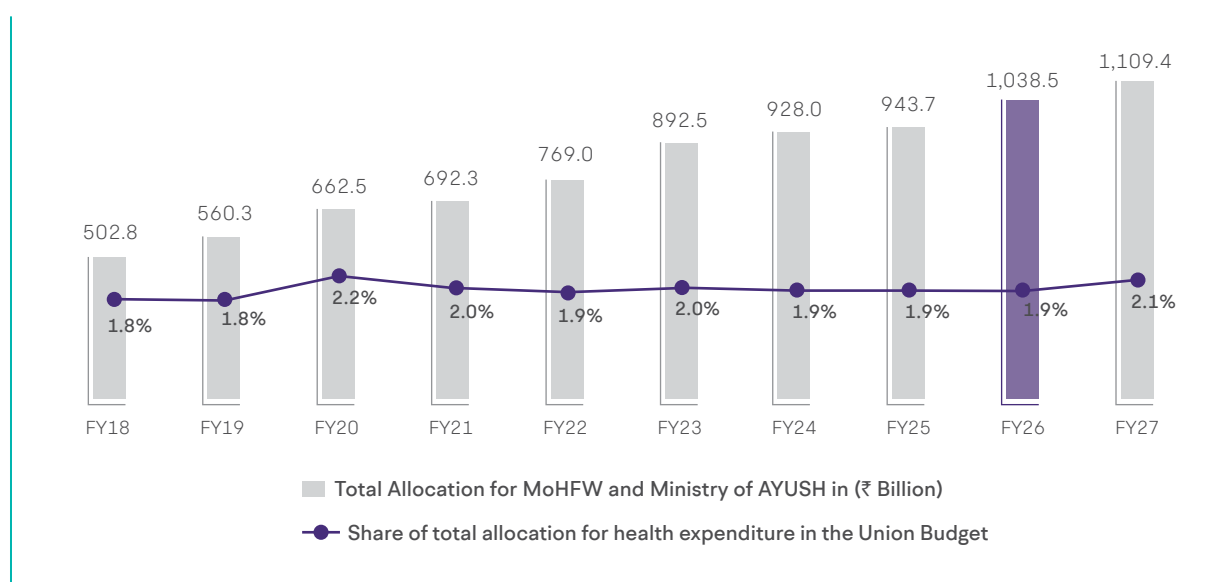
Private expenditure on health and its share in PFCE (2022-23 series)

Year	Expenditure on health in INR billions	Share of health expenditure in PFCE (%)
FY23	8,106.4	5.4%
FY24	8,052.5	5.1%
FY25	8,608.9	5.2%

Source: Ministry of Statistics & Programme Implementation, Crisil Intelligence

Government's health spending grew by CAGR 9.2% in FY18-26

Government's expenditure on healthcare, in terms of budgeted outlays made for both the MoHFW and the Ministry of Ayush, has grown considerably over the last 10 years, registering a CAGR of 9.2% over the period FY18-26. However, government spending on health as a percentage of the government's total spending remains low.

Share health expenditure in the Union Budget, FY18-27

Source: Budget documents, Crisil Intelligence

Key government schemes in healthcare (focused on maternity and childcare)

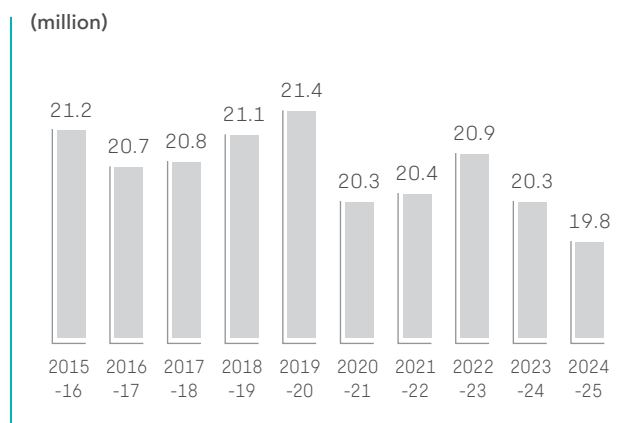
RISK GROUP	MITIGATION MEASURES
India Newborn Action plan	<ul style="list-style-type: none"> The India Newborn Action Plan (INAP) is developed in response to the Global Every Newborn Action Plan (ENAP) and was launched at the World Health Assembly in June 2014 for accelerating the reduction of preventable newborn deaths and stillbirths in the country
Saksham Anganwadi & Poshan 2.0	<ul style="list-style-type: none"> Integrates ICDS, POSHAN Abhiyaan, Scheme for Adolescent Girls into 3 verticals: nutrition support, ECCE (early childhood care & education), and infrastructure upgrade (Saksham Anganwadis).
Mission Shakti	<ul style="list-style-type: none"> Dual verticals: 'Sambal' (safety & security) and 'Samarthya' (empowerment); includes schemes like One Stop Centres (OSC), Women Helpline (181), Beti Bachao Beti Padhao (BBBP). Focus on 24x7 emergency support, declining Sex Ratio at Birth (SRB), and DBT-based benefits (PMMVY) to enhance women's welfare & economic participation.
Mission Vatsalya	<ul style="list-style-type: none"> Umbrella for Integrated Child Protection Scheme (ICPS) ensuring care, protection, rehabilitation of children in difficult circumstances. Emphasizes institutional + non-institutional care, child welfare services, and convergent action for holistic child development.
Janani Shishu Suraksha Karyakaram (JSSK)	<ul style="list-style-type: none"> Launched in 2011, JSSK aims at eliminating out-of-pocket expenses for pregnant women and sick infants by entitling them to free delivery, including cesarean section, free transport, diagnostics, medicines, other consumables, diet and blood in public health institutions
LaQshya	<ul style="list-style-type: none"> Launched in 2017, LaQshya aims to improve the quality of care in labor room and maternity operation theaters to ensure that pregnant women receive respectful and quality care during delivery and immediate post-partum
Reproductive and Child Health (RCH) portal	<ul style="list-style-type: none"> It is a name-based web-enabled tracking of pregnant women and new-born to ensure provision of regular and complete services to them including antenatal care, institutional delivery and post-natal care
Anaemia Mukta Bharat (AMB) strategy	<ul style="list-style-type: none"> As a part of POSHAN Abhiyan aims to strengthen the existing mechanisms and foster newer strategies to tackle anemia which include testing & treatment of anemia in school going adolescents & pregnant women, addressing non-nutritional causes of anemia and a comprehensive communication strategy
Surakshit Matritva Aashwasan (SUMAN)	<ul style="list-style-type: none"> Launched in 2019, SUMAN aims to provide assured, dignified, respectful and quality healthcare at no cost and zero tolerance for denial of services for every woman and new-born visiting the public health facility to end all preventable maternal and new-born deaths
Janani Suraksha Yojana (JSY)	<ul style="list-style-type: none"> Launched in 2005 with the objective of reducing maternal and neonatal mortality, JSY promotes institutional delivery among pregnant women especially with weak socio-economic status i.e. women from Scheduled Castes, Scheduled Tribes and BPL households.
Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)	<ul style="list-style-type: none"> PMSMA (2016): Provides free, assured Antenatal Care (ANC) to pregnant women on the 9th of every month, with a focus on quality check-ups and early risk detection. e-PMSMA focus: Targets high-risk pregnancies (HRP) through tracking, financial incentives, and ASHA support (3 extra visits); 5.9+ crore women examined (as of March 2025).
Village Health, Sanitation and Nutrition Day (VHSND)	<ul style="list-style-type: none"> It is an outreach activity for provision of maternal and childcare including nutrition.

Source: PIB, Crisil Intelligence

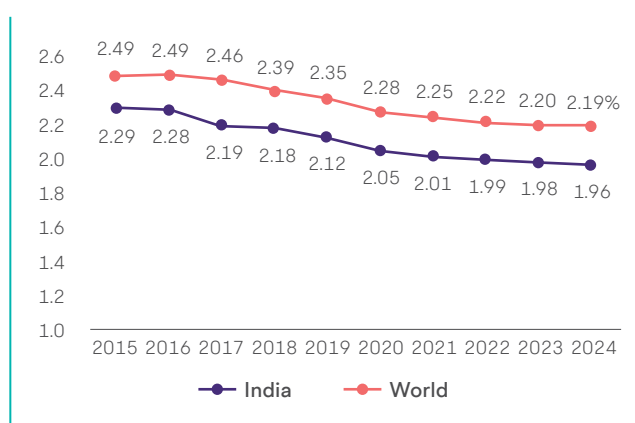
Maternity and childbirth parameters

Stabilizing childbirth volumes, alongside improved maternal and pediatric health parameters, indicates a shift toward quality-focused healthcare delivery

Trend in total number of deliveries in India



Trend in fertility rate



Source: HMIS, World Bank, Crisil Intelligence

Between 2020-2021 and 2024-2025, total number of reported deliveries in India decreased from 20.3 million in FY21 to 19.8 million in FY25, owing to decrease fertility rate, urbanization, greater female education and workforce participation.

This is in line with global trends, between 2021-2024, the global fertility rate declined from 2.24 to 2.19 in 2024. During the same period, India's fertility rate declined from 2.01 to 1.96.

Furthermore, between NFHS-4 and NFHS-5, the share of urban districts in total deliveries decreased slightly from 28.0% to 26.6%, indicating a marginal shift toward rural areas. This transition can be attributed to higher fertility rates in rural areas (2.1 children per woman compared to 1.6 children per woman in urban areas), leading to more deliveries as well as strengthening of rural healthcare infrastructure, including the expansion and upgradation of Primary Health Centers (PHCs), Community Health Centers (CHCs), and district hospitals.

Northern and eastern states have higher fertility rates compared to national average

A regional assessment further highlights significant disparities in fertility patterns across the country. States in the northern and eastern regions, particularly Bihar (2.7), Jharkhand (2.2), Uttar Pradesh (2.2), and Rajasthan (2.1), continue to report Total Fertility Rates (TFRs) at or above the national average. Bihar remains the state with the highest TFR in the country, although it has registered a notable decline from 3.0 in NFHS-5 to 2.7 in NFHS-6. The sustained high fertility levels across these states are indicative of strong underlying demand for maternal, child, and pediatric

healthcare services, thereby presenting substantial growth opportunities for healthcare providers, hospitals, and allied service sectors operating in these geographies. However, the conversion of this latent demand into tangible healthcare consumption will remain contingent on a range of socio-economic and infrastructural enablers, including household income levels, accessibility and availability of quality healthcare, awareness and health literacy, etc.

In contrast, southern states, including Kerala (1.8), Tamil Nadu (1.7), Karnataka (1.8), Andhra Pradesh (1.8), and Telangana (1.9), along with western states such as Maharashtra (1.8) and Goa (1.6), continue to report fertility rates below the replacement level. This trend reflects demographic transition, supported by higher female literacy, greater urbanization, and broader adoption of family planning practices. While volume-driven maternal and pediatric demand may be relatively moderate, these regions are emerging as hubs for sophisticated and specialized healthcare services, including advanced fertility treatments, IVF and reproductive medicine, neonatal intensive care, genetic screening, etc.

Overall, the regional variations in fertility rates point to a complementary, two-tiered healthcare opportunity. The northern and eastern belts, including parts of the north-east, are expected to anchor volume-driven demand for obstetrics, gynecology, neonatal, and pediatric services, contingent on investment in healthcare infrastructure and improved access to quality medical care. Meanwhile, the southern and western states are poised to lead in specialized, technology-intensive, and premium healthcare offerings.

State-wise fertility rate in India

Total fertility rate (children per woman)	NFHS 6	NFHS 5	Total fertility rate (children per woman)	NFHS 6	NFHS 5
Bihar	2.7	3.0	Chandigarh	1.8	1.4
Jharkhand	2.2	2.3	Jammu and Kashmir	1.8	1.4
Meghalaya	2.2	2.9	Odisha	1.7	1.8
Uttar Pradesh	2.2	2.4	Tamil Nadu	1.7	1.8
Lakshadweep	2.2	1.4	Tripura	1.7	1.7
Madhya Pradesh	2.1	2.0	Dadra & Nagar Haveli and Daman & Diu	1.7	1.8
Rajasthan	2.1	2.0			
Harayana	2.0	1.9	Assam	1.6	1.9
Nagaland	2.0	1.7	Goa	1.6	1.3
Chhattisgarh	1.9	1.8	Mizoram	1.6	1.9
Gujarat	1.9	1.9	Punjab	1.6	1.6
Telangana	1.9	1.8	West Bengal	1.6	1.6
Uttarakhand	1.9	1.9	Ladakh	1.6	1.3
Andhra Pradesh	1.8	1.7	NCT of Delhi	1.6	1.6
Himachal Pradesh	1.8	1.7	Puducherry	1.6	1.5
Karnataka	1.8	1.7	Arunachal Pradesh	1.5	1.8
Kerala	1.8	1.8	Sikkim	1.0	1.1
Maharashtra	1.8	1.7	Andaman and Nicobar Islands	0.9	1.3
India			2.0	2.0	

Note:

Legend

South
 East
 North
 West

Source: NHFS, Crisil Intelligence

India demonstrates progress in maternal and child health indicators, yet lags persist when benchmarked against developed economies, necessitating enhanced healthcare infrastructure, super-speciality care expansion, and comprehensive systemic reforms

Mortality Indicators

Mortality and still birth rates in India have shown a steady decline across all key indicators over the past decade. Neonatal mortality fell from 26.0 (2015) to 17.3 (2023), infant mortality from 36 to 23 (2024), and under-5 mortality from 43.7 to 27.7 (2023), reflecting consistent improvement in child health outcomes.

- Maternity Mortality rate:** India's maternal mortality rate fell from 129 (2015) to 80 (2023), showing strong improvement and now performing better than the global average (~197), though still above Malaysia, Singapore and other developed economies. The decline is driven by better institutional care and health programs, with further gains dependent on rural access and care quality.
- Still birth rate:** India's stillbirth rate has declined from 17.3 (2015) to 11.8 (2023), showing steady improvement, as it is better than global average (~14.3) though it remains higher than countries like Malaysia, Singapore and other developed economies. The decline is driven by better maternal care, institutional deliveries, and antenatal monitoring. Going forward, further reduction will depend on improving rural healthcare access and high-risk pregnancy management.
- Neonatal Mortality rate:** India's neonatal mortality rate declined from 20.2 (2020) to 17.3 (2023), now aligning closely with the global average (~17.3), though still higher than Indonesia and significantly above Malaysia, Singapore and other developed economies. The improvement reflects targeted gains in institutional deliveries, SNCU/NICU capacity, and early neonatal care (first 7 days focus), a critical shift since most infant deaths occur in this window. Further progress will hinge on strengthening preterm care, skilled birth attendance, and last-mile rural neonatal interventions.

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- Infant Mortality rate:** India's infant mortality rate declined from 36 (2015) to 23 (2024), showing steady improvement and now performing better than the global average (~28), though still higher than Malaysia, Singapore and other developed economies. The decline is driven by better neonatal care, vaccination, and institutional deliveries.
- Under 5 Mortality rate:** India's under-5 mortality rate declined from 32.4 (2020) to 27.7 (2023), outperforming the global average (~38) but still above Malaysia, Singapore and other developed economies. The improvement is driven by gains in immunization, nutrition, and early childhood care, reflecting broader child health system strengthening. Further reduction will depend on targeting neonatal causes and addressing rural health gaps.
- Adolescent Mortality rate (age 10-14):** India's adolescent mortality rate declined from 2.5 (2020) to 2.2 (2024), remaining below the global average (~3) but higher than Malaysia, Singapore and other developed economies. The gradual decline reflects improvements in basic healthcare access and disease prevention, though progress is slower given lower baseline mortality. Further gains will depend on injury prevention, nutrition, and adolescent-focused health interventions.

Birth Outcome Indicators

- Pre- term prevalence rate:** India Preterm birth rate is estimated to have stabilized at ~13%, reflecting sustained improvement and controlled prevalence levels. Conversely, the United States has experienced a marginal increase from 9.7% to 10.0%, indicating emerging or escalating risk factors. Most other nations, including China, Nigeria, Ethiopia, and the Democratic Republic of Congo, have demonstrated relatively static trends with minimal variation.
- Low birth weight (LBW) babies' prevalence rate:** Prematurity is the most common reason for a baby weighing less than 2.5kg at birth. A baby gains much of its weight in the last weeks of the pregnancy. Weighing less than 2.5 kilos at birth is closely linked to high rates of neonatal mortality and ill health later in life.

Share of new-born having weight less than 2.5kg*

Parameter	NFHS 4	Share of health expenditure in PFCE (%)
Share of new-born having weight less than 2.5kg*	18.2%	18.2%

Source: NFHS 4 and 5, Crisil Intelligence

- Stunting prevalence:** According to World Health Organization data, the prevalence of stunting among children under five has remained stable from 2020 to 2024, staying around 32–33%.
- Overweight prevalence:** Based on model estimates of data from World Health Organization (WHO), % share of Overweight prevalence among children under 5 years of age has increased to 3.7% in 2024 from 2.7% in 2020 due to rising consumption of unhealthy processed foods, reduced physical activity and lifestyle changes.

Quality of Care Indicators

- Share of pregnant women registered for antenatal care (ANC):** There was a notable improvement in antenatal care registration in India, with the percentage of pregnant women registered increasing from 59.0% to 70.0%, between NFHS 4 and NFHS 5, indicating enhanced coverage and awareness of maternal health services.
- Trend in total number of pregnant women registered for antenatal care (ANC)**

Parameters	NFHS 4 (2015-2016)	NFHS 5 (2019-2021)	NHFS 6 (2023-24)
Share of pregnant women registered for antenatal care (ANC)	59.0%	70.0%	76.2%*

* Mothers who had an antenatal check-up in the first trimester (%)

Source: NFHS-5, NFHS-6 Crisil Intelligence

- Share of institutional deliveries:** The share of institutional deliveries in India has increased significantly from 79% (FY16) to 96.4% (December 2025), reflecting strong improvement in access to formal healthcare facilities. The steady rise indicates enhanced maternal healthcare infrastructure, awareness, and government interventions, leading to safer childbirth practices.

Parameters	NFHS 4 (2015-2016)	NFHS 5 (2019-2021)	NFHS 6 (2023-24)	Dec 2025
Share of institutional deliveries	79.0%	88.6%	90.6%	96.4%

Source: NFHS-5, NFHS-6, PIB report posted on 20 Apr 2026, Crisil Intelligence

- Hysterectomy prevalence:** Hysterectomy prevalence in India shows a gradual increase, rising from 3.2% (NFHS-4) to 3.3% (NFHS-5). Furthermore, the private sector's share has also increased from ~67% in NHFS-4 to ~70%+ in NFHS-5, indicating growing dependence on private healthcare. Key drivers include menstrual disorders, uterine prolapse, fibroids, aging, socioeconomic factors, and insurance coverage (PMC).
- Share of women and newborn babies availing postnatal care:** Women's postnatal checks within two days after birth declined from 65% (NFHS-4) to 61% (NFHS-5), with health facility-based checks dropping from 75% to 63% while home-based care doubled from 23% to 46%. Conversely, newborn postnatal checks surged from 27% to 82%, with facility-based coverage increasing dramatically from 29% to 87%. The maternal decline likely reflects healthcare system strain, increase load due to institutional deliveries, economic barriers, and lack of awareness.
- Share of women with symptoms of postpartum complications:** Between NFHS-4 (2015–16) and NFHS-5 (2019–21), the prevalence of massive vaginal bleeding increased from 19.7% to 23.0%, while cases of very high fever rose from 15.2% to 17.8%, signaling an escalating burden of postnatal morbidity. This trend can be attributed to several interconnected factors. Enhanced institutional delivery rates and improved clinical documentation have likely strengthened the identification and reporting of complications.
- Share of c-section deliveries and duration of stay:** India has witnessed a substantial and sustained increase in caesarean section rates, rising from 19% in FY19 to 27% in FY25. This upward trajectory signals a fundamental shift in delivery patterns that carries significant implications for healthcare infrastructure and resource planning.

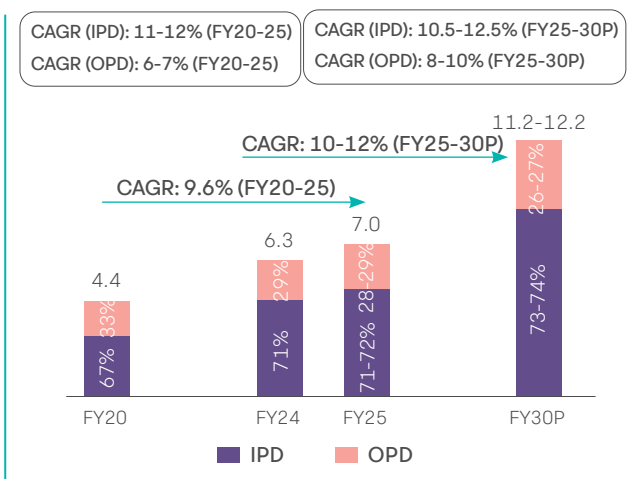
With cesarean deliveries accounting for over one-quarter of all births and continuing to rise, the cumulative demand on surgical facilities, and specialized postnatal care services is expected to increase moving forward.

2. ASSESSMENT OF THE INDIAN HEALTHCARE DELIVERY INDUSTRY

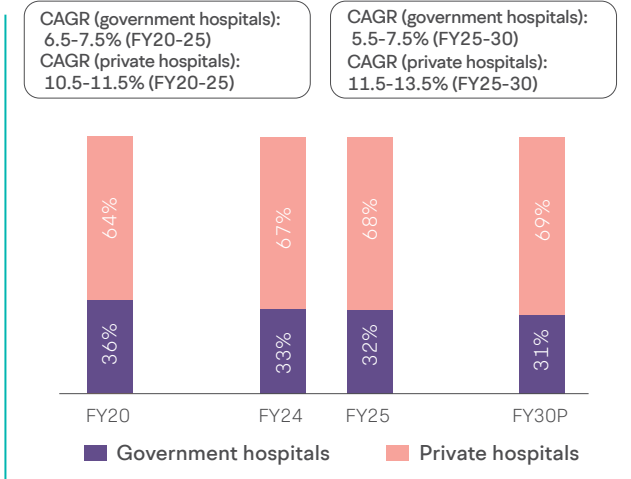
With long-term structural factors supporting growth of the Indian healthcare delivery market, renewed impetus from PMJAY (Pradhan Mantri Jan Arogya Yojana) and government focus shifting towards the healthcare sector, the healthcare delivery market is expected to grow at a CAGR of 10-12% between fiscals 2025 and 2030 to ₹11.2-12.2 trillion. The CAGR for OPD is expected at 8-10% and for IPD at 10.5-12.5%.

The overall healthcare delivery market is fragmented, with large private hospitals making up around 20% in fiscal 2025 as affluent and upper-middle-class patients often choose private players. Additionally, with government facilities overburdened, the PMJAY scheme's demand will mostly be met by private providers, further increasing their share.

Indian healthcare delivery market, FY20-30P (₹ trillion)



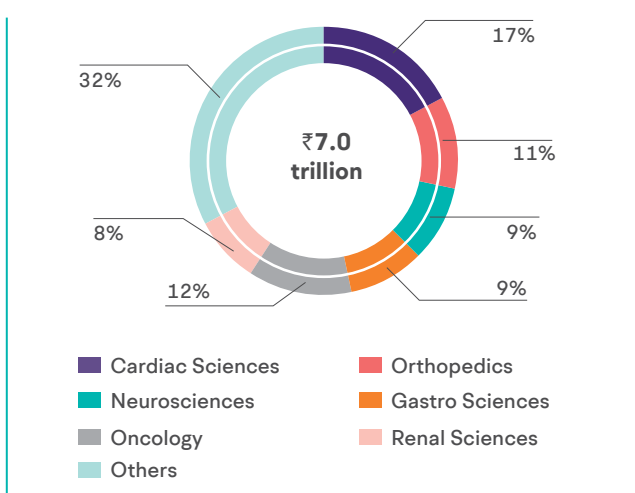
Segmentation of the Indian healthcare delivery market



Note: IPD indicates inpatient department at government and private hospitals, while OPD indicates outpatient department at private hospitals, government hospitals and private clinics. The above segmentation includes both government and private healthcare service delivery organizations

Source: Crisil Intelligence

Pediatric share across specialties ~26%



Note: The segmentation has been derived using a specialty mix of large private players, NSS data, and PMJAY coverage data as reference sample data.

Source: Crisil Intelligence

Cardiac sciences represented the largest single specialty at 17% in fiscal 2025

In fiscal 2025, the Indian healthcare delivery market was estimated at ₹7.0 trillion, with cardiac sciences accounting for the largest single-specialty share at 17%, followed by oncology at 12%. This reflects the rising incidence of heart disease and cancer, driven by lifestyle risks, pollution and increasing life expectancy. Orthopedics (11%), renal sciences (8%), neurosciences (9%) and gastro sciences (9%) collectively contributed more than one-third of the market, supported by higher detection of chronic disease, joint disorders, digestive ailments, wider adoption of advanced diagnostics and specialized procedures, etc.

Notably, pediatric care vertical accounted for ~26% share, underpinned by India's large child population, rising awareness around child health and nutrition, growing incidence of pediatric chronic conditions, etc.

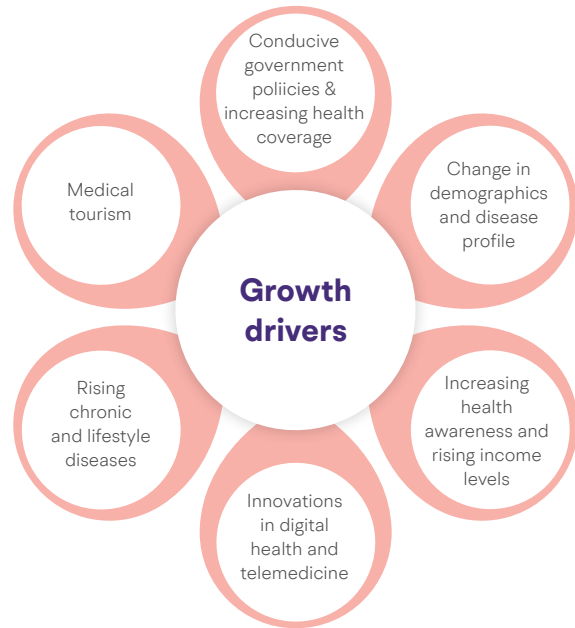
Growth drivers of the healthcare delivery industry

A combination of economic and demographic factors is expected to drive healthcare demand in India.

The healthcare market is characterized by structural trends such as a sustained rise in chronic disease burden, increasing consumer adoption of digital health modalities, expanding clinician capacity constraints, heightened demand for operational efficiency, and the maturation of data infrastructure enabling predictive, personalized care.

The PMJAY scheme and ABDM initiative launched by the government would also support the industry

Source: Crisil Intelligence



Key challenges facing the healthcare delivery industry

Despite the significant potential and opportunities in India's healthcare industry, many challenges remain. Some of these include inadequate health infrastructure and disparities in the quality of services provided based on affordability and healthcare financing.

HEALTHCARE ORGANIZATION LEVEL



Infrastructure & Digital Security Gaps

- Insufficient physical and digital infrastructure
- Rising cyber threats; need for robust cybersecurity (DPDP Act, 2023 compliance)



Affordability & Financing Constraints

- 44% out-of-pocket expenditure
- Cost-standardization and efficiency measures under PM-JAY



Shortage of Specialized Doctors

- Low patient-doctor ratios, especially in rural areas
- Need for targeted workforce planning

REGULATORY/SYSTEM LEVEL



Price Capping of Devices & Treatment

- Government price caps to enhance affordability
- Supreme Court directive for treatment price bands



Outstanding Receivables & Hospital Fiscal Health

- Delayed reimbursements weakening hospital finances
- PM-JAY implementing fixed timelines for claim settlements

Source: Crisil Intelligence



3. ASSESSMENT OF PEDIATRIC CARE INDUSTRY IN INDIA

Overview of pediatric market in India

Pediatric market size expected to grow by CAGR ~12-14% between fiscal 2025 and 2030

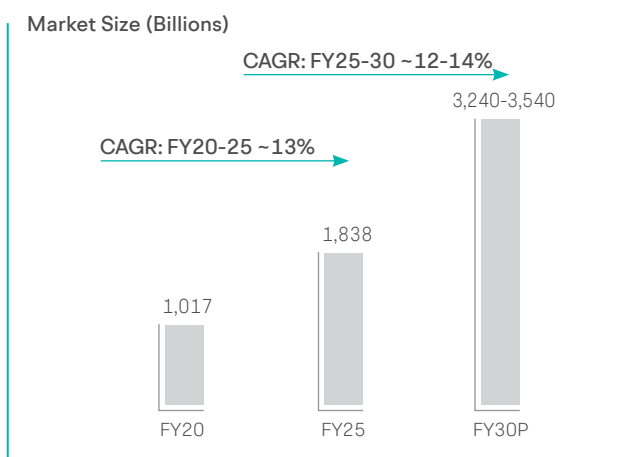
To arrive at the pediatric health care market size, we have assumed patients in the age bracket of 0-18 years. In-patient cases at public and private hospitals, and out-patient cases at public and private hospitals and cases at private clinics have been considered to arrive at the market size.

The Indian pediatric healthcare market has grown at 13% CAGR from FY2020 to FY2025, reaching ₹1,838 billion. This growth has been driven by government initiatives expanding immunization, child nutrition, and preventive care coverage, alongside rising household incomes enabling families to invest in quality healthcare beyond basic care.

Crisil Intelligence projects the Indian Pediatric market to expand at a 12–14% CAGR during FY2025–FY2030, reaching ₹3,240–3,540 billion by FY2030. Growth will be driven by healthcare infrastructure expansion in tier-2 and tier-3 cities, rising availability of specialized services such as pediatric cardiology, nephrology, neurology, and oncology, and the proliferation of pediatric super-specialty hospitals. Increasing prevalence of lifestyle-related conditions in children, including obesity, diabetes, and respiratory disorders, along with technological advancements in neonatal care and minimally invasive surgery, will further support demand and improve outcomes.

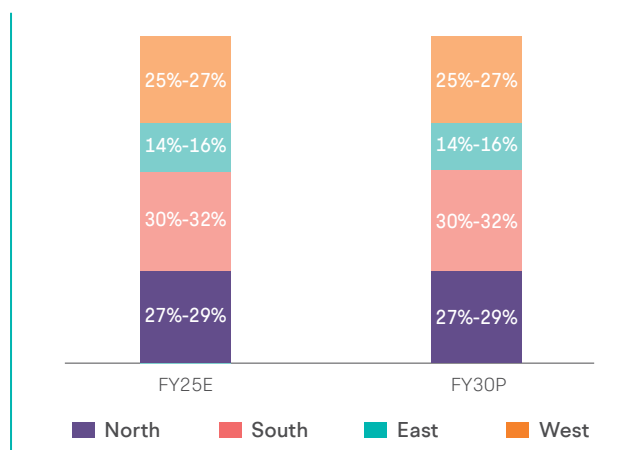
Regionally, the South (30–32%), North (27–29%), and West (25–27%) collectively account for ~82–88% of the market, supported by higher healthcare awareness, strong economic activity, and developed infrastructure, while the East trails at ~14–16% due to limited access to specialized care and socio-economic challenges. This distribution is expected to remain largely unchanged through FY2030.

Market size of pediatric healthcare facilities in India



P: Projected
Source: Crisil Intelligence

Segmentation of pediatric market in India



While respiratory and haematological conditions remain core focus areas, there is a rising incidence of congenital anomalies, rare genetic disorders, and neurological conditions

While respiratory disorders, hematological conditions, and renal diseases continue to dominate, advanced diagnostic technologies and enhanced screening protocols are significantly improving detection of congenital anomalies, rare genetic disorders, and complex neurological conditions, necessitating specialized expertise and comprehensive long-term care pathways.

The market spans multiple high-burden areas: respiratory diseases (pneumonia, asthma, tuberculosis), hematology (inherited disorders, nutritional deficiencies), renal disorders requiring dialysis and transplantation, infectious diseases supported by immunization programs, expanding NICU/PICU critical care, cardiac interventions for congenital

heart diseases, and pediatric oncology with improving survival rates. Endocrinology, dermatology, dentistry, and management of chronic, autoimmune, and rare diseases are also gaining prominence due to lifestyle changes and better diagnostics.

These evolving disease patterns have fueled demand for pediatric super specialties that address critical conditions including congenital heart disease, childhood cancers, neurological disorders, developmental disabilities, and organ failures requiring highly specialized interventions beyond general pediatric care. Growth is driven by greater awareness, improved diagnostics, rising incomes, broader insurance coverage, government support, and new specialty hospitals in urban areas. However, challenges persist including uneven facility distribution, high costs, specialist shortages, limited health-seeking behavior, social stigma, and insufficient infrastructure outside major cities, which continue to restrict access to quality care.

Key pediatric health conditions

HEALTH CONDITIONS	DESCRIPTION	CONCERNED SUPER SPECIALTY/SERVICES
Congenital heart disease	Considering a birth prevalence of congenital heart disease as 9/1000 ¹ , the estimated number of children born with congenital heart disease in India is more than 2,00,000 per year. Of these, about one-fifth are likely to have serious defects, requiring an intervention in the first year of life.	Pediatric Cardiology & cardiothoracic surgery
Oncology	Childhood cancer impacts over 2,00,000 children annually and is projected to escalate to 21 million diagnoses by 2030. According to the National Cancer Registry Programme, in India, childhood cancers (0–14 years) constitute 4.0% ² of all cancer cases. The surge in childhood cancer cases in India mirrors a global trend.	Pediatric hemato-oncology & bone-marrow transplant services
Pediatric neurology and epilepsy	Epilepsy is a chronic brain disorder marked by recurrent seizures. Many children experience a mild form that resolves naturally, while others have persistent cases requiring lifelong medication. In India, prevalence of pediatric epilepsy is about 0.8% ³ .	Pediatric neurology / epileptology
Pediatric pulmonology and infectious diseases	As per NHFS- 5, among children under five years, 2.8% ⁴ suffered from ARI in the two weeks preceding the survey, and 56.1% sought treatment for ARI. India is one of the 15 highest burdened countries in terms of total pneumonia episodes and related childhood mortality. In India, acute respiratory infection (ARI) related diseases are estimated to account for 13–16% of all child deaths among pediatric hospital admissions.	Pediatric pulmonology & pediatric infectious-disease medicine
ADHD	ADHD is the most prevalent mental disorder among children, with its occurrence ranging from 1.6% to 17.9% ⁵ in India, reflecting regional variations. ADHD is a neurodevelopmental disorder marked by inattention, hyperactivity, and impulsivity. It acts as a hurdle in brain development, affecting thinking, emotions, and behavior. The significant impact of ADHD during childhood underscores the need for early intervention and treatment by mental health professionals.	Developmental pediatrics & child-adolescent psychiatry
Autism	Autism spectrum disorder (ASD) is a complex neurodevelopmental condition characterized by deficits in social interaction, communication difficulties, and repetitive behaviors that profoundly impact the lives of affected individuals and their families. The estimated prevalence in India is ~1.12 ⁶ per 100 children aged 2-9 years, i.e., 1 in every 68 children is affected with autism.	Developmental pediatrics, pediatric neurology, behavioral therapy services
Transplants	Solid organ transplants (SOT) are the ideal replacement therapy for end organ failures. In India, 1,522 ⁷ pediatric transplants were conducted from 2013 to 2020, majority being kidney and liver. Despite being LMIC adequately trained professionals make India the third-largest transplanting country and fifth in pediatric transplants.	Pediatric Transplant Surgery (liver, kidney, heart) & Pediatric Intensive Care

HEALTH CONDITIONS	DESCRIPTION	CONCERNED SUPER SPECIALTY/SERVICES
Speech therapy	<p>Solid organ transplants (SOT) are the ideal replacement therapy for end organ failures. In India 1,522 7pediatric transplants were conducted from 2013 to 2020, majority being kidney and liver. Despite being LMIC adequately trained professionals make India the third largest transplanting country and fifth in pediatric transplants.</p> <p>The National Sample Survey Organization report shows that in rural India, 8.9% are children with speech disability in the age group of 0-14 yrs. In the same age group, the urban statistics are 8.3%.⁸ Prevalence studies have typically estimated that from 7 to 12%⁸ of the elementary school-age population have speech defects. The field of audiology and speech language pathology is relatively new in India compared to the western countries.</p>	Audiology and speech language pathology
Neuro/muscles	<p>The burden of neurological disorders in children in India is enormous with overall prevalence rate of 1-3% in children <5 years of age⁹. Unlike that in developed countries, largely preventable conditions such as epilepsy, CNS infections, and neurodevelopmental disorders constitute over 80% of the burden. Simple preventive measures such as mass immunization, health care and sanitation can significantly reduce CNS infections and their associated epilepsy and disability.</p>	Medications, specialized therapies, dietary adjustments, surgical or advanced treatments
Mental health	<p>The National Mental Health Survey 2016 found that teenagers had a 7.3% prevalence of illness, distributed equally across boys and girls. However, it was greater in metropolitan metro areas, and the prevalence of anxiety issues was 3.6%, with depression-related conditions at 0.8%¹⁰.</p>	Psychiatry and counseling
Congenital issues	<p>In India, more than 1.7 million children are born with birth defects every year. 8% of under 5 deaths are due to congenital anomalies¹¹. The term 'birth defect' encompasses a diversity of health conditions including physical malformations such as cleft lip or palate, chromosomal abnormalities such as Down syndrome, functional defects including sensory deficits such as congenital deafness. Birth Defects have been recognized globally as a major contributor to neonatal and infant mortality and disability.</p>	Pediatric surgery

Notes:

1. As per the research article published Dec 2018 2. As per the research article published Feb 2025 3. As per the research article published in Aug 2025 4. As per NHFS-5 5. As per the research article published Jan 2020 6. As per the research article published Apr 2024 7. As per the Korean Journal of transplantation research article published online, November 2022. 8. As per the research article published in September 2020 in International Journal of Community Medicine and Public Health 9. As per the article published online in January 2024 in National Academy of Medical Sciences. 10. As per the research article published May 2024 on National Library of Medicine 11. As per World Health Organization Website

Source: NLM, WHO, Crisil Intelligence

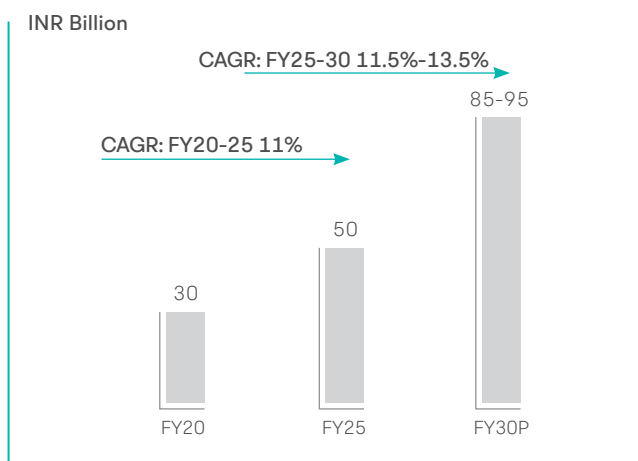
Overview of neo-natal care market in India

A neonatal intensive care unit (NICU), also known as an intensive care nursery (ICN), is an intensive care unit (ICU) specializing in the care of ill or premature new-born infants.

NICU market expected to pose growth of CAGR 11.5%-13.5% between FY2025-30

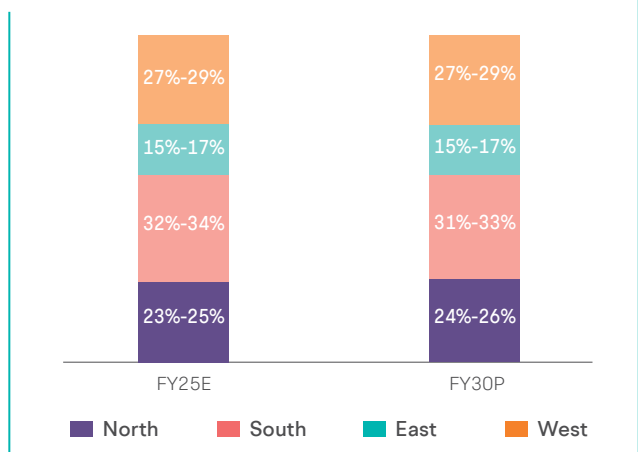
To arrive at NICU market size, we have taken into consideration number of NBSU & level I admissions, number of SNCU at public & private facilities & level II admissions, and level III admissions at public & private facilities.

Market size of NICU market in India



Source: Crisil Intelligence

Segmentation of NICU market in India



The Indian NICU market has expanded at a CAGR of 11% during fiscal 2020-2025 to reach ₹50 billion by FY25, supported through investments in critical care infrastructure, establishment of dedicated neonatal units, and progressive improvements in clinical outcomes. Government initiatives, including the expansion of Special Newborn Care Units (SNCUs) under the National Health Mission, alongside private sector investments in super-specialty hospitals, established a foundation for specialized neonatal care services.

As of FY25, the South region is estimated to lead the Indian neonatal market with a share of 32-34%, followed by the West region at 27-29%. The dominance of these two regions can be attributed to a higher concentration NICUs, advanced maternal and neonatal healthcare infrastructure, greater awareness around neonatal care, and higher per capita incomes. The West region is followed by the North region, which is estimated to account for ~23-25%, with demand underpinned by a large birth cohort and expanding healthcare access. The East region is estimated to hold the reminder share of 15-17%, reflecting gradual improvements in neonatal care facilities.

Moving forward, the North region is projected to increase its share to 24-26% by FY30, potentially driven by improving healthcare infrastructure and capacity additions in the region. The South region, while expected to marginally moderate to 31-33%, is projected to retain its position as the leading regional market, supported by its established healthcare ecosystem.

Overall, the NICU market in India is estimated to grow at a CAGR of 11.5%-13.5% from FY25 to FY30, reaching ₹85-95 billion by FY30. This growth will be fueled by increased demand for high-quality neonatal care, ongoing government and private sector initiatives, adoption of advanced technologies such as ECMO, and improved detection and management of high-risk and congenital cases. Expanding health insurance coverage and enhanced neonatal transport systems further strengthen India's maternal and child health infrastructure.

Neonatal healthcare landscape in selected key cities

Crisil Intelligence estimates that the number of NICU beds available in key cities – Bengaluru, Mumbai (includes Mumbai Metropolitan Region), Delhi NCR, Chennai, and Hyderabad would range around 10,000-11,000 inclusive of private and public facilities. Some of the key pediatric focused hospital chains present in the above cities are as follows:

Key growth drivers for pediatric healthcare services and neo-natal care units

GROWTH DRIVER	DESCRIPTION
DEMAND SIDE	
Rising disease detection & early diagnosis	Increased screening, diagnostics, and high institutional deliveries (~96%+) are enabling early identification of neonatal complications and congenital disorders, significantly boosting demand for pediatric super-specialist interventions (NICU, pediatric surgery).
Growing health awareness	Parents are increasingly opting for specialized pediatric centers over general hospitals, driven by awareness around better survival rates, advanced neonatal care, and superior clinical outcomes.
Rising insurance coverage & affordability	Expansion of government schemes and private insurance is improving affordability of high-cost pediatric treatments (NICU stays, complex surgeries), thereby increasing access and utilization of super-specialist services. Low health-insurance penetration limits access to quality care for lower-income groups, though coverage has grown to ~573 million people in FY24 (41% penetration). Penetration is expected to rise to 40–45% by FY26, which along with PM-JAY should increase hospitalization and drive demand for healthcare delivery services.
Rising Income to make quality pediatric healthcare affordable	The proportion of poor in India declined from ~16% in fiscal 2016 to ~14% in fiscal 2021. Conversely, the proportion of those in the middle- and high-income groups increased from 85% to ~86%. By fiscal 2031, this share is expected to reach ~95%, supported by growth in per capita income
Rise in maternity age	The share of births among women aged 25–29 has increased and is expected to remain the largest contributor, rising from ~27.5% in 2010 to ~33.9% in 2020 and ~36.6% by 2030. Similarly, the 30–34 age group shows a notable increase (from ~10.8% in 2010 to ~21.1% by 2030), while younger age groups (15–24) are witnessing a decline.
Patient-centric care preference	Pediatric super-specialist centers offer focused care, shorter wait times, and superior patient experience, which is critical for time-sensitive and high-risk pediatric cases requiring rapid intervention.
Accessibility & network expansion	Growth of pediatric focused chains and referral networks is improving access in Tier 2/3 cities, ensuring closer proximity and higher patient inflow to pediatric super-specialist centers. The government is expanding access through Ayushman Bharat (PM-JAY) for economically vulnerable patients. With PM-JAY coverage, India is likely to need ~0.64 million additional beds over the next 10 years, especially in tier 2 and 3 cities, supported by measures like viability gap funding.
Demographic & epidemiological factors	India's large birth cohort (~20 million annually) combined with rising lifestyle-related pediatric conditions and continued demand from preterm birth and low weight birth is driving sustained demand for specialized pediatric care.

GROWTH DRIVER DESCRIPTION

SUPPLY SIDE

Faster scalability Pediatric specialty centers offer a faster path to breakeven and greater scalability relative to multi-specialty hospitals. Their lean operating structure, coupled with an asset-light, hub-and-spoke expansion strategy, enables wider reach and improved penetration across Tier 2 and Tier 3 markets.

Higher standardization and advanced technology adoption Pediatric super-specialty enables standardized clinical protocols, faster turnaround time, and better resource utilization, while investment in NICU, ventilators, neonatal imaging, and pediatric surgical technology improves survival rates, drives precision care, and attracts higher patient volumes.

Increased service offering (comprehensive pediatric care) Pediatric super-specialty centers evolve into one-stop solutions covering NICU, PICU, pediatric surgery, diagnostics, and rehabilitation, enabling end-to-end care for complex and high-risk cases, improving outcomes and strengthening clinical expertise.

Expansion of PG seats and specialized workforce Growth in pediatric PG seats (~4,300 out of ~56,000 total) is gradually improving the availability of trained pediatric specialists (neonatologists, intensivists), supporting expansion of super-specialty centers, though demand still exceeds supply.

Source: Crisil Intelligence



4. ASSESSMENT OF OBSTETRICS / MATERNITY CARE INDUSTRY IN INDIA

Obstetrics is a medical specialty dealing with the fields of birth and related issues. Obstetrics involves care provided during pre-conception, pregnancy, childbirth, and immediately after delivery, whereas Gynecology involves care of all other women's health issues.

New-age offering for obstetrics care is gaining prominence in urban areas

Some of the new-age offerings offering for expectant mothers by private/ specialized maternity chains including includes personalized diet and nutrition consultancy, yoga classes, breastfeeding & lactation classes, lactation consultation, baby fetal brain development classes, baby childcare sessions, antenatal classes, physiotherapy, labor and delivery classes, Lamaze, and professional photography moments for mother and child to capture initial moments. The new age offering for expected mother revolves not only around ante-natal care and check-ups but also on experiential care and offerings to make the journey of being a mother comfortable, memorable and luxurious.

Growth is driven by increased institutional deliveries, rising health expenditure on childbirth, India's expanding middle-class population, and comprehensive health insurance coverage. Government initiatives like Janani Suraksha Yojana have broadened market access across socioeconomic segments.

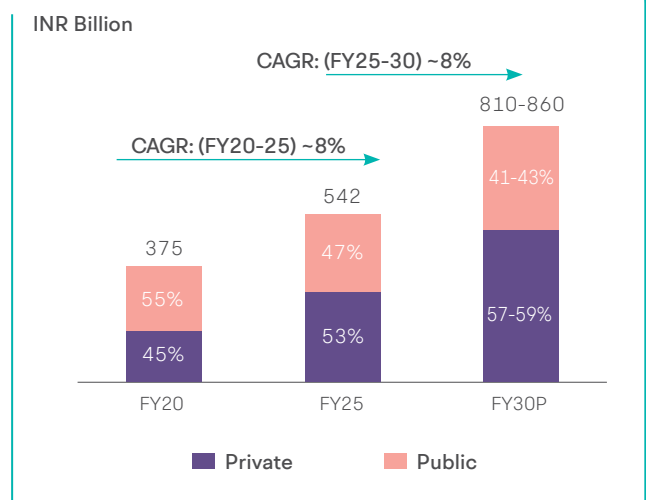
Maternity care market registered 8% CAGR between FY20 to FY25

CRISIL Intelligence estimates India's maternity healthcare market at ₹542 billion in FY2025, having grown at 8% CAGR from FY2020-25. The market is projected to reach ₹810-860 billion by FY2030, expanding at 9-10% CAGR.

Growth is driven by increased institutional deliveries, rising health expenditure on childbirth, India's expanding middle-class population, and comprehensive health insurance coverage. Government initiatives like Janani Suraksha Yojana have broadened market access across socioeconomic segments.

Families are increasingly investing in comprehensive maternity packages beyond basic delivery, including advanced diagnostics, specialized consultations, and structured postnatal programs. Future growth will be propelled by expansion of super-specialty hospitals with dedicated maternal-fetal medicine departments, rising high-risk pregnancies due to increasing maternal age and lifestyle conditions, and technological advancements such as 3D/4D ultrasound and non-invasive prenatal testing. The continuum of care model integrating fertility services, antenatal monitoring, delivery, postnatal care, and pediatric follow-ups is also gaining traction.

Maternity healthcare delivery services in India



Growth drivers for maternity hospitals in India

RISE IN WORKING WOMEN POPULATION

Urban female labor force participation has increased gradually from ~24.7% in 2022 to ~27.7% in 2025, while rural participation remains higher, rising from ~37.5% to ~45.9% over the same period. As more women, become financially independent, awareness and preference for quality maternal care are improving, driving demand for institutional deliveries and private maternity hospitals.

INCREASING PREFERENCE FOR PRIVATE MATERNITY HOSPITALS

The share of maternity healthcare delivery in India has increased from 45% in FY20 to 53% in FY2025, this expanding share of private sector, underscores growing consumer preference for private specialty maternity hospitals, particularly among urban populations seeking enhanced amenities, personalized care, and advanced medical services.

CHANGING CONSUMER BEHAVIOR

Institutional deliveries in India have risen sharply from 88.6% (NFHS-5) to ~90.6% (NFHS-6), indicating near-universal access to facility-based childbirth and shift in consumer behavior towards health oriented practices.

Furthermore, couples are also preferring experiential value-added services, which will positively impact the overall maternity market.

RISE IN PREGNANCY AGE

The average age of women delivering a baby is increasing. 25-29 age group women contributed to 32% of the births in 2010-2015 period up from 28% in 2000-2005 period.

This increase in pregnancy age is expected to increase the demand for maternity healthcare service and number of complications arising from pregnancies may witness a rise.

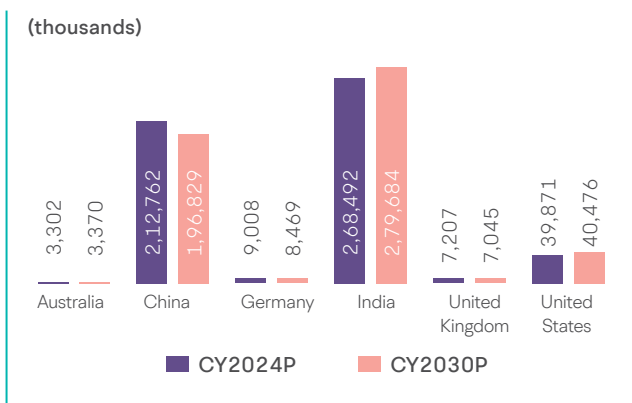
Source: Crisil Intelligence

Overview of Assisted Reproductive Technology (ART)

India leads in having the largest population of married/in-union women in reproductive age with high infertility prevalence and lowest ART treatment penetration

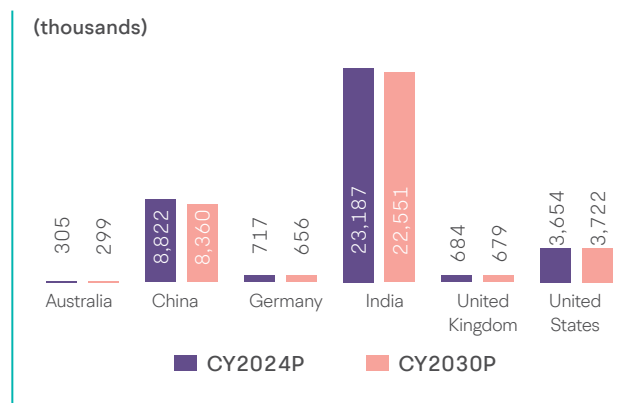
Among the key countries, India had the highest population of married or in-union women in reproductive age (20-49) in CY2024 and is projected to maintain this position, through CY2030. In terms of total births, India had the highest total births in CY2024 at 23,187 thousand, among the selected countries. China is positioned 2nd in the same list of selected countries with total births at 8,822 thousand in CY2024, registering a wide difference compared to India. This same trend is expected to continue up to CY2030. The large married population combined with the infertility prevalence in India indicates a huge potential for growth and expansion of the ART industry.

Number of married or in-union women of reproductive age (20-49 years) for select countries

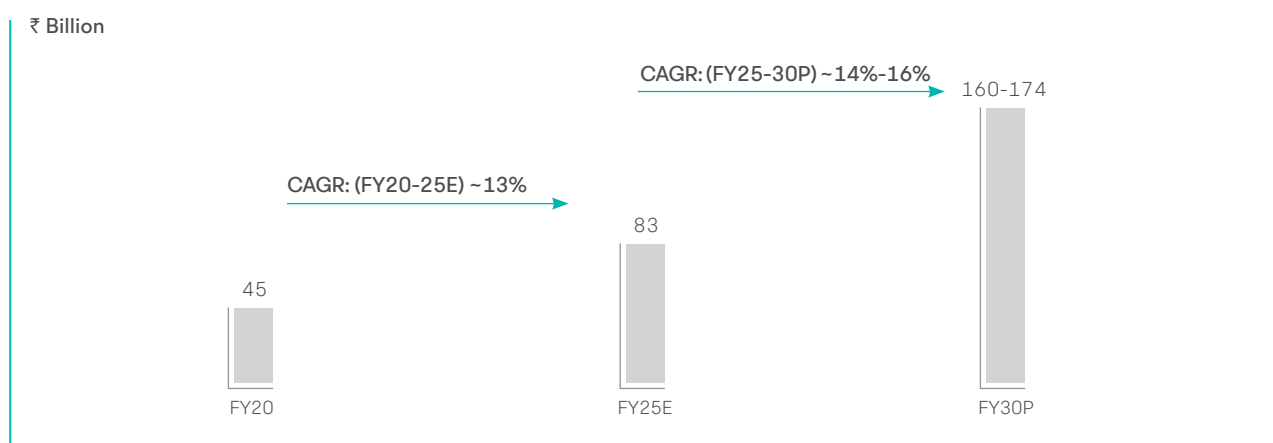


Source: United Nations Department of Economic and Social Affairs, Population Division (2024). Estimates and Projections of Women of Reproductive Age Who Are Married or in a Union 2024, Crisil Intelligence

Number of total births for select countries



Source: UN Department of Economic and Social Affairs, World Population Prospects 2024, Crisil Intelligence

ART healthcare delivery in India

Note: E – Estimated; P – Projected

The markets defined in the above chart considers the expenditure incurred by patients as part of IVF/ART treatment cycles

Source: Crisil Intelligence

The ART healthcare delivery was estimated to be ₹83 billion as of FY2025, registering a CAGR of 13% over FY2020-25. The industry is expected to reach a size of ₹160-174 billion by FY30P, implying a CAGR of nearly 14-16%.

Overview of key growth drivers of Indian ART healthcare delivery industry

Rise in gynecology issues such as PCOS / PCOD, endometriosis

India is witnessing increase in gynecological issues like Polycystic Ovary Syndrome (PCOS), Polycystic Ovary Disorder (PCOD), endometriosis, etc., which are associated with hormonal imbalance and can lead to decrease in fertility. As per World Health Organization (WHO), PCOS is one of the most common hormonal disturbances affecting women of reproductive age. It affects an estimated 8–13% of reproductive-aged women and up to 70% of affected women remain undiagnosed worldwide. Moreover, PCOS is the commonest cause of anovulation and a leading cause of infertility.

Increased social awareness and acceptance of fertility treatments

The growing social awareness and acceptance of fertility treatments as a viable option is driving the growth of fertility treatments and challenging the historical taboos associated with fertility treatments. This increased acceptance can be attributed to easier availability of fertility treatments, improving education levels, increasing public discussions and government support through policies and schemes like Assisted Reproductive Technology (Regulation) Act 2021, Surrogacy Regulation Act 2021, etc.

Advancements in ART technologies leading to high success rates

Availability of advanced technologies in the field of reproductive technologies is contributing to the overall growth of the sector as it positively impacts the success

rate of the cycles/treatments. For example, Preimplantation Genetic Testing (PGT) helps in evaluating embryos for chromosomal abnormalities before transferring them to the uterus, thereby avoiding embryos that can cause genetic disorders.

Affordability of treatment and rise in income levels

As per People Research on India's Consumer Economy (ICE) 360° survey, the proportion of those in the middle- and high-income groups increased from 85% to ~86% between FY16 and FY21 respectively. Moving forward, this share is expected to reach ~95% and ~98% by FY31 and FY47 respectively, supported by growth in per capita income. This increasing income levels along with growing awareness of ART facilities is expected to positively influence the overall demand of ART services in India.

Low penetration of ART technologies coupled with increasing medical tourism

India's prominence as a medical tourism hub is supported by its cost advantage and improving healthcare infrastructure, particularly in specialized treatments such as IVF.

Additionally, according to the Ministry of Tourism, Government of India, initiatives such as the e-Medical Visa, expansion of accredited hospitals (NABH/JCI), and promotion under the Heal in India program are further strengthening India's medical tourism ecosystem. The relatively lower cost of procedures combined with skilled medical professionals continues to attract international patients. This policy support is expected to boost demand for fertility services, thereby supporting the growth of the overall ART market in India.

5. ASSESSMENT OF MEDICAL TOURISM INDUSTRY IN INDIA

Healthcare costs are higher in developed countries relative to India. Some of the factors that make India an attractive destination for medical tourism is the presence of technologically advanced hospitals with specialized doctors, low treatment costs, and facilities such as e-medical visa. Delhi, Mumbai, Chennai, Hyderabad, Kolkata, Bengaluru, Kochi, Pune and Ahmedabad are some of the key medical tourism cities in India. These cities attract medical tourists from across the country and abroad for quality and affordable medical treatment.

As per the Medical Tourism Index (MTI) 2020-21, India ranked 10th globally in terms of medical tourism out of the 46 countries assessed. The MTI provides a performance-based measure to evaluate the attractiveness of a country as a medical tourism destination. The total number of medical tourists visiting India stood at 0.5 million in CY2025. Majority of the medical tourists in 2025, are mainly from Africa, the Middle East, and South Asia. Numbers from the US and UK are rising due to expensive treatments and lengthy wait times in those countries.

Key growth drivers for medical tourism in India include stringent quality standards – increasing NABH and JCI accreditations across cardiac sciences, oncology, robotic surgery, and transplantation, has improved patient outcomes and built trust among international patients. As per the JCI website accessed in June 2026, India has 67 JCI-accredited hospitals, operated by 42 healthcare entities.

The South holds a dominant 43% share of JCI-accredited hospitals in India, anchored by key hubs such as Hyderabad, Bengaluru, and Chennai, with Kerala further strengthening the region's footprint through cities like Kochi, Thiruvananthapuram, and Coimbatore.

The West follows with 25%, driven primarily by Mumbai, Pune, and Ahmedabad.

The North accounts for 24%, led by New Delhi, Gurugram, Jaipur, and Chandigarh.

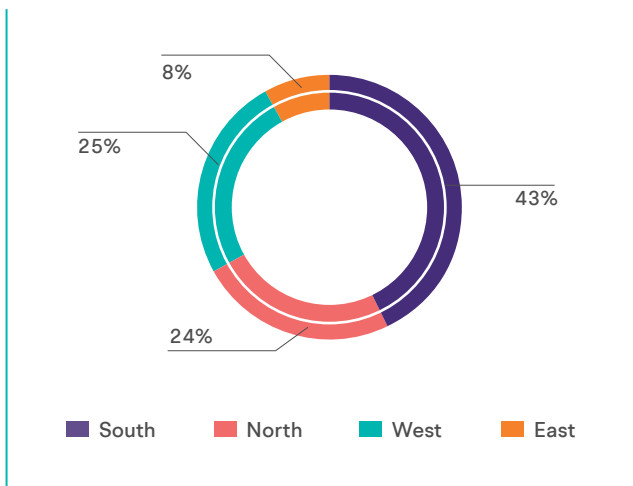
The East trails at ~8%, with limited presence confined largely to Kolkata and Howrah.

Government initiatives such as e-Medical Visa and the "Heal in India" program have simplified access, while hospitals and facilitators now provide end-to-end services including logistics, translation, and accommodation support, making the entire process smoother for patients. Furthermore, infrastructure investments in advanced technology like robotics and sophisticated imaging systems have enabled hospitals to deliver better care, whereas India's large pool of trained doctors and healthcare professionals adds credibility. The most compelling factor remains cost, with procedures priced 40-70% lower than in the US or Europe without compromising quality.

Market size of medical tourism industry in India

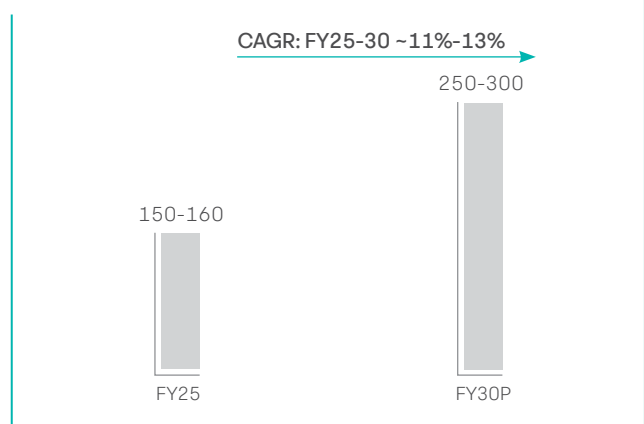
The Indian medical tourism market is estimated at ₹150-160 billion in FY25 and is projected to expand to ₹250-300 billion by FY30, reflecting a CAGR of 11-13% over FY2025-30. Within this market, the mother and child segment is estimated to account for a share of 3-5%, which is expected to be sustained through FY30. This growth is underpinned by rising demand across therapeutic areas such as congenital disorders in children, neurodevelopmental conditions (including ADHD, Autism Spectrum Disorder, and other mental, behavioral, and developmental disorders), and fertility treatments.

Geographical concentration of JCI accredited hospitals in India



Source: JCI, Crisil Intelligence

Market size of the medical tourism industry in India



Source: Crisil Intelligence

According to the Ministry of Tourism, demand for medical tourism in India is primarily driven by patients from countries such as Bangladesh, Iraq, Uzbekistan, Somalia, Turkmenistan, Oman, and Kenya. As highlighted in a PIB release dated May 2026, these international patients predominantly seek specialized medical treatments across a range of disciplines, including cardiac surgery, orthopedic procedures, oncology care, organ transplants, neurological interventions, cosmetic surgery, dental care, and fertility treatments.

In addition to foreign nationals, NRIs also travel to India to avail medical services, owing to the country's cost-competitive healthcare offerings and shorter waiting times. However, revenues generated from this cohort are typically captured within domestic healthcare revenues rather than being classified separately under medical tourism.

Consequently, the trajectory of the Indian medical tourism sector over FY2025–30 will remain closely linked to the economic stability and growth of key source markets, as well as their geopolitical relationships with India and the broader momentum of international tourism mobility. Several risk factors could influence international patient inflows, including geopolitical tensions, trade disruptions, currency volatility, visa-related restrictions, political instability, and fluctuations in global fuel prices.

Overall, a sustained recovery in global economic conditions, complemented by improving fundamentals in key source countries, will be essential to restore confidence in international travel and, by extension, the medical tourism segment.

COMPANY OVERVIEW

Rainbow Children's Medicare Limited (hereafter referred to as 'Rainbow' or 'the Company') stands as a leading provider of specialized pediatric and perinatal care in India, focused on delivering comprehensive healthcare for children and mothers. Founded in 1998 and headquartered in Hyderabad, the Company began operations with its first pediatric specialty hospital in Banjara Hills, Hyderabad, on November 14, 1999, under the vision of Dr. Ramesh Kancharla, its founding Promoter. Over the years, it has grown into a network of 24 hospitals and 5 clinics across 9 cities, offering over 2,435 beds dedicated to high-quality, child-centric services.

The Company operates two flagship brands: Rainbow Children's Hospital for pediatric care and Birthright by Rainbow for women's healthcare, including IVF obstetrics and gynecology. Pediatric services form the backbone, covering newborn and pediatric intensive care (PICU/NICU), multi-specialty treatments, and advanced quaternary care like multi-organ transplants. Key areas include neurology, nephrology, oncology, gastroenterology, cardiology, and emergency interventions, where about 50% of cases arrive as emergencies requiring swift action.

Birthright handles routine and complex obstetric care, multi-disciplinary fetal medicine, perinatal genetics, fertility support, including In Vitro Fertilisation (IVF), and gynecology treatments. This integrated mother-and-child ecosystem creates seamless care from pregnancy through neonatal stages to advanced pediatric needs, boosting patient loyalty and positioning Rainbow as a top referral center for critical cases.

Rainbow employs an asset-light hub-and-spoke model to expand reach efficiently while optimizing costs and resources. Large hub hospitals (around 200 plus beds) in major cities like Banjara Hills (Hyderabad), Marathahalli (Bengaluru), Guindy (Chennai), and Malviya Nagar (Delhi) serve as centers for tertiary and quaternary care, equipped with specialized PICU/NICU units. Spoke hospitals (mostly 70+ beds), provide secondary and tertiary services, ensuring quality care without full duplication of high-end facilities.

This setup improves bed utilization, balances service mixes, and cuts operational costs. Recent expansions include new units in Anna Nagar (Chennai), Rajahmundry, Electronic city, HRBR, Mahadevapura IVF, Warangal and Guwahati. The model supports scalability, with ongoing projects in Gurugram, Electronic City, Pune, Segualli and others.

Rainbow employs over 910 full-time doctors on retainer for 24/7 consultant-led care, many trained in the UK, USA, Canada, or Australia. It runs India's largest private pediatric Diplomate of National Board (DNB) training program, offering postgraduate fellowships to build future experts. A multi-disciplinary team, specialists, nurses, therapists, and support staff, collaborates on personalized plans, backed by child-friendly environments that ease hospital stress for kids and families.



International appeal grows, serving patients from Bangladesh, Bhutan, Bahrain, Africa (Kenya, Tanzania, etc.), and the Maldives, leveraging medical tourism hubs, competitive pricing, and expertise in high-risk pregnancies/IVF.

Rainbow invests in state-of-the-art infrastructure, tech like IoT for energy monitoring, solar initiatives, and ESG practices, including waste/water management and community pediatric awareness. Risks like regulations, capex intensity, talent shortages, and competition from public/non-profits are managed via a COSO-aligned framework, Risk Management Committee oversight, and compliance training.

Future plans emphasize optimizing existing units, targeted Tier II expansions via clinical models, IVF/maternity growth, international push, and M&A. This positions Rainbow to capture India's rising demand for specialized child/maternity care amid urbanization, delayed childbirths, and healthcare advances, delivering sustained value to patients and stakeholders.

Rainbow invests in state-of-the-art infrastructure, tech like IoT for energy monitoring, solar initiatives, and ESG practices, including waste/water management and community pediatric awareness. Risks like regulations, capex intensity, talent shortages, and competition from public/non-profits are managed via a COSO-aligned framework, Risk Management Committee oversight, and compliance training.



STRENGTHS

Innovative Hub-and-Spoke Model

Rainbow uses a smart hub-and-spoke model to deliver full-range healthcare services. Large central hubs, each with at least 150 beds, act as main centers for advanced care like secondary, tertiary, and top-level specialty services. Spoke hospitals, with a minimum of 50 beds, provide secondary and tertiary care in nearby regions.

Rainbow runs four key hubs today: Banjara Hills in Hyderabad, Marathahalli in Bengaluru, Guindy in Chennai, and Malviya Nagar in Delhi. This model places spokes at strategic location of city / state and connected with Hub Hospital, making quality care reachable for far-off areas. It also makes better use of special units like PICU and NICU beds, mixes care types well, and keeps costs in check.

Strong Brand Identity

Rainbow has built a powerful, well-known brand in pediatric healthcare. Its fame for cutting-edge treatments and fresh care methods draws patients and doctor recommendations from across regions. By forming close bonds with patients and families, Rainbow creates deep trust and loyalty, so families return for all their healthcare needs.

Excellence in Pediatric and Perinatal Care

Rainbow leads in pediatric and perinatal care with expert services in fields like neurology, nephrology, oncology, and cardiology. Its skill in blending children's and newborn care sets it apart from others in healthcare. This focus gives the Company a clear edge in the market.

Child-Centric Healthcare Framework

Rainbow puts children first in every part of its healthcare setup. The Company designs a friendly hospital space that cuts down stress and worry during visits. Staff receive special training to comfort and reassure kids, which leads to better treatment results and happier patients.

This child-first method improves how care happens and builds stronger ties between the hospital, children, and families.

Collaborative Multi-Disciplinary Approach

Rainbow brings together experts from many fields – like pediatrics, neurology, nephrology, oncology, and cardiology – for patient care. This team effort creates full, personal treatment plans that improve results. Nurses, therapists, and admin staff join in to deliver smooth, well-coordinated care.

Strategic Doctor Engagement

Rainbow's doctor model ensures top care around the clock. The Company has over 1,050+ full-time doctors on retainer, leading care in emergencies, neonatal and pediatric intensive units, and patient transfers. With about half of pediatric cases as emergencies, this setup allows fast, effective help.

Many doctors hold advanced training from places like the UK, USA, Canada, and Australia, raising care quality. Rainbow also runs India's biggest private pediatric DNB training program, with postgraduate and fellowship spots to train the next-generation of healthcare workers.

WEAKNESS

Evolving Regulatory Requirements

Rainbow must follow a broad set of law, rules and regulations set by central, state, and local authorities. These law, regulations and rules cover patient care, privacy, safety, and record-keeping. The fast-changing nature of healthcare regulations demands that the Company dedicate major resources to stay compliant and adjust to new requirements.

Handling these law, regulations and rules takes time and effort, pulling focus away from main patient care tasks. This can slow down key services and lower day-to-day efficiency. Some law, regulations and rules may also block the Company from rolling out new treatments or services, which could limit how well it meets patient needs. Failure to comply might bring fines, legal issues, or harm to reputation, all of which hit operations and growth.

High Capital Investment Needs

Rainbow works in a field that requires heavy spending to stay ahead. The Company regularly updates equipment to offer the newest treatments and keep an edge over rivals. Yet medical technology advances so quickly that replacement of existing equipments becomes necessary with the latest advanced equipments in the interest of patient care outcome.

These large outlays put pressure on financial resources and can raise treatment prices. Higher costs might then make it harder to draw patients who cannot pay for advanced care.

OPPORTUNITIES

Appeal to International Patients

Rainbow holds strong potential to attract patients from abroad who seek top healthcare. Its fame for quality care, modern setup, and skilled doctors makes it a top pick for overseas visitors. The Company's spots in medical tourism hotspots, plus fair pricing with no drop in standards, boost this draw further.

Rainbow hospitals already treat patients from nations like Bangladesh, Bhutan, Bahrain, Kenya, Tanzania, Rwanda, Somalia, Sudan, and the Maldives.

Underpenetrated Pediatric Market

India's fast-growing cities with 2 million plus people see strong progress in many areas. Yet these places lack enough pediatric hospitals, leaving critically sick children without proper care options. This market gap gives Rainbow a big chance to grow its reach and fill the rising need for quality children's healthcare.

By stepping in, the Company can solidify its lead in pediatric services while improving health results in these regions.

Growing Demand for Maternity Care

Later childbirth trends, fueled by better healthcare and changing / shifting social views, have raised the need for specialized maternity and IVF services. Rainbow with its team of expert across fields and top facilities, is well equipped to handle all such complex cases. The Company can grow its maternity and IVF offerings, build its strong name further, and greatly support the health of mothers and babies across India.

THREATS

Heightened Industry Competition

Rainbow faces tough rivalry from government hospitals and private non-profits, which often get tax breaks and funding from donations or endowments. The sector's expansion has also drawn new players, sharpening the fight for patients. To hold its ground, Rainbow hires top doctors and gives better services at fair prices. Still, these steps could impact profit margins.

Reliance on Skilled Professionals

Rainbow's success depends on pulling in, hiring, and holding onto top medical experts, especially in pediatrics and obstetrics. These specialists drive quality care, boost the Company's image, and bring more referrals and revenue. India, however, has a major shortage of seasoned doctors, making talent hard to find and keep.

Heavy competition for doctors, nurses, and technicians adds to the challenge, as others chase the same skilled workers.

FINANCIAL OVERVIEW

Financial Highlights

(₹ in million)

Particulars	FY2025-26	FY2024-25	YoY (%)
Income			
Revenue from operations	17,030.77	15,158.66	12.35%
Other income	437.88	510.08	(14.15%)
Total Income	17,468.65	15,668.74	11.49%
Expenses			
Cost of materials consumed	2,270.29	1,949.20	16.47%
Employee benefits expenses	2,335.30	2,063.67	13.16%
Finance cost	776.17	724.55	7.12%
Depreciation and amortization expense	1,505.70	1,384.40	8.76%
Professional fee to doctors	4,188.10	3,690.21	13.49%
Other expenses	2,795.41	2,556.70	9.34%
Total expenses	13,870.97	12,368.73	12.15%
Profit before exceptional items and tax	3,597.68	3,300.01	9.02%
Exceptional items	15.39	0.00	100.00%
Profit Before Tax (PBT)	3,582.29	3,300.01	8.55%
Tax expense			
(a) Current tax	964.79	873.08	10.50%
(b) Adjustment of tax related to earlier periods	(3.46)	19.85	452.66%
(c) Deferred tax expense/(credit)	(194.48)	(35.19)	(117.43%)
Total tax expense	766.85	857.74	(10.60%)
Profit for the period/year	2,815.44	2,442.27	15.28%

Particulars (₹ in million)	FY2025-26	FY2024-25	YoY Growth	% age of revenue	
				FY2025-26	FY2024-25
Revenue	17,030.77	15,158.66	12.00%		
EBITDA	5,441.67	4,898.88	11.00%	31.95%	32.32%
Profit Before Tax (PBT)	3,582.29	3,300.01	9.00%	21.03%	21.77%
Tax (Including Deferred Tax)	766.85	857.74	(11.00%)		
Profit after Tax	2,815.44	2,442.27	15.00%	16.53%	16.11%
EPS - Basic (₹)	27.41	23.97	14.00%		
EPS - Diluted (₹)	27.41	23.84	15.00%		
EBITDA (Pre-IND AS)	4,485.51	4,025.78	11.00%	26.34%	26.56%

Significant factors contributing to the growth in revenues are stated in table below:

Particulars	Units	FY2025-26	FY2024-25	YoY Change
In-patient (IP) volume	#	1,04,514	98,395	6.22%
Out-patient (OP) volume	#	15,98,970	14,26,733	12.07%
Delivery volume	#	19,228	17,349	10.83%
ARPOB	₹ per day	60,141	53,962	11.45%
ALOS	# days	2.71	2.85	(4.91)%
Occupancy	%	46.30%	50.53%	(8.37)%

Revenue

The revenue for FY2025-26 amounted to ₹17,030.77 million, reflecting a 12.35% increase compared to ₹15,158.66 million in FY2024-25. The growth was driven by a 6.22% rise in inpatient volumes, a 12.07% increase in outpatient volumes and an 11.45% increase in ARPOB (Average Revenue per Occupied Bed). The growth during FY2025-26 was primarily fueled by the Company's specialty services, including pediatric super-specialty, obstetrics, tertiary care and quaternary care services. These services, characterized by high ARPOB and relatively lower ALOS (Average Length of Stay), contributed significantly to revenue growth. Additionally, the company has made two acquisitions, which have also contributed to an increase in revenue (Pratiksha Women & Child Care Hospital Private Limited ₹648.70 million and Prashanthi Medicare Private Limited ₹191.52 million).

EBITDA

In FY2025-26, the EBITDA stood at ₹5,441.67 million, marking a strong 11.08% growth compared to ₹4,898.88 million in FY2024-25. It was driven by strong revenue growth combined with the effective management cost structure.

Other Income

Other income mainly comes from interest on fixed deposits, gains from mutual funds, reversals of expected credit losses, and various small sources. In FY2025-26, this income saw a 14.15% decrease, moving from ₹510.08 million to ₹437.88 million. The main reason was a ₹55.29 million decrease in mutual fund earnings, As the funds utilized for acquisitions and ongoing project.

Total Expenses

Total expenses grew by 12.15% in FY2025-26, adding ₹1,502.24 million to reach ₹13,870.97 million from ₹12,368.73 million in FY2024-25. This increase tied closely to key areas like a 16.47% rise in Cost of materials consumed, a 13.49% jump in professional fees to doctors, and a 13.16% increase in Employee benefits expense.

Other Expenses Breakdown

Other expenses cover items such as contract wages, canteen services, Allowance for expected credit loss, lab investigations, power and fuel costs, repairs and maintenance, business promotion and advertisement efforts, Corporate Social Responsibility (CSR) initiatives, and legal and professional fees.

Medical Consumables and Pharmacy Items

The Company spent ₹2,270.29 million in FY2025-26 on medical consumables and pharmacy items, including related GST and freight charges. This compared to ₹1,949.20 million in FY2024-25 and equaled 13.33% of revenues, up slightly from 12.86% the year before. The small rise as a share of revenue came from changes in clinical case mix, plus more use of centralized lab services and vaccinations.

The revenue for FY2025-26 amounted to ₹17,030.77 million, reflecting a 12.35% increase compared to ₹15,158.66 million in FY2024-25. The growth was driven by a 6.22% rise in inpatient volumes, a 12.07% increase in outpatient volumes and a 11.45% increase in ARPOB (Average Revenue per Occupied Bed).

OPERATIONAL EXPENSES

Employee Benefits Expense

In FY2025-26, employee benefits expenses, which cover salaries and other perks, reached ₹2,335.30 million. This marked a 13.16% rise from ₹2,063.67 million in FY2024-25. The increase stemmed from regular salary hikes, building up leadership and sales-marketing teams, and adding more staff due to new hospitals and acquisitions. As a result, these costs took up 13.71% of total hospital revenue, up slightly from 13.61% the year before.

Finance Costs

Finance costs mostly include interest on lease liabilities under Ind AS 116. These costs climbed to ₹776.17 million in FY2025-26 from ₹724.55 million in FY2024-25. The main reason was interest on fresh lease for the new hospitals added and acquisitions made this year.

Depreciation and Amortization

Depreciation and amortization expenses cover were on Property, Plant and Equipment (PPE), write-offs on intangible assets, and right-of-use assets. They grew to ₹1,505.70 million in FY2025-26 from ₹1,384.40 million the prior year. This uptick mainly came from higher charges on new units opened and acquisitions in FY2025-26 and added right-of-use assets.

Professional Fees to Doctors

Professional fees paid to doctors hit ₹4,188.10 million in FY2025-26, up from ₹3,690.21 million in FY2024-25. This reflected higher business volumes and the start of new hospitals. As a share of operating revenue, these fees rose from 24.34% to 24.59%.

Other Expenses

Other expenses jumped 9.34% to ₹2,795.41 million in FY2025-26 from ₹2,556.70 million in FY2024-25. Key drivers included higher spending on contract labor, allowance for expected credit loss, communication, canteen services, lab tests, power and fuel, repairs and upkeep, marketing and ads, Corporate Social Responsibility (CSR) work, plus legal and professional fees.

Income Tax Expense

Income tax expense decreased to ₹766.85 million in FY2025-26 from ₹857.74 million the year before. This worked out to an effective tax rate of 21.50% for FY2025-26.

Capital Expenditure

The net block of assets grew by ₹791.51 million to reach ₹8,924.33 million as of March 31, 2026. This growth is mainly tied to New acquisitions and new units in places like Rajahmundry (Andhra Pradesh) and Electronic City (Bengaluru), plus buys of other medical equipments. Capital work in progress stood at ₹757.51 million, linked to upcoming sites in Gurugram, Pune and Hennur.

Key Financial Ratio

Ratios	Unit	FY2025-26	FY2024-25	Change %
Liquidity ratios				
Current Ratio	#	3.55	5.46	(35%)
Inventory Turnover Ratio	Days	6.56	7.56	(13%)
Trade Receivables/Debtors Turnover Ratio	Days	18.87	20.52	(8%)
Leverage ratios				
Debt Equity Ratio	#	0		0%
Debt Service Coverage Ratio	Times	6.21	5.21	19%
Interest Coverage Ratio	Times	0		0%
Profitability ratios				
Operating Profit Margin	%	31.95%	32.32%	(1%)
Net Profit Margin	%	16.53%	16.11%	3%
Return on Equity Ratio/Net Worth (ROE)	%	18.07%	17.85%	1%
Return on Capital Employed (ROCE)	%	26.07%	26.95%	(3%)

STRATEGIC OUTLOOK

Rainbow stays fully committed to delivering top-quality multi-disciplinary care for children and newborns. This focus comes from steady investments in modern facilities, wider service ranges, hiring of leading medical experts, and rollout of cutting-edge technologies.

Looking ahead, the Company will work to improve results at its current hospitals by making operations smoother and more efficient. Adding new hospitals has helped reach deeper into local markets and boost total bed numbers. These steps will open up major growth chances in the coming years.

The Company plans to open facilities in carefully chosen areas, with extra attention on areas that still lack high-quality children's healthcare but show rising demand. It will follow a targeted plan in Tier II cities and check out fresh markets using a clinical model. This model acts as a clear guide for patient care, diagnosis, treatment choices, and medical decisions overall. It lets the Company run full checks on whether these markets make sense and hold real promise.

In Vitro Fertilisation (IVF) services stand out as a strong area for future gains, and the Company's focused push to improve these offerings will create more expansion paths. High-level pediatric care, newborn services, and business outside India also hold big potential. The Company keeps an open eye on mergers and acquisitions (M&A) deals to strengthen its position as leader in pediatrics and perinatal services.

Rainbow feels sure it can bring outstanding value to patients and keep growing steadily. This confidence rests on using its main strengths well and carrying out a mix of smart business moves.

HUMAN RESOURCE

The healthcare sector works under strict regulatory rules. HR teams ensure the Company complies with labor laws, patient privacy standards, and ethical guidelines. Regular audits, training programs, and a solid grievance system keep the organization honest and build trust with employees and patients.

During the year, the Company hired skilled clinical staff across new and existing locations to launch new specialities and strengthen current ones. It also built a strong leadership team to guide overall business goals. Rainbow remains fully committed to top-quality training and career growth programs.

This dedication earned recognition from the National Board of Examinations, which named Rainbow an MRCPCH Examination Center and training hub in India. The Company has created a complete clinical setup across its network

that supports ongoing learning and staff development. It also backs full-time doctors with clear career paths and growth options.

As of March 31, 2026, the Company employed 6,397 permanent staff members. This reflects its focus on creating and maintaining a committed, skilled workforce.

INTERNAL CONTROL SYSTEMS AND THEIR ADEQUACY

Rainbow has prioritized establishing an efficient internal control system to uphold governance standards and ensure operational excellence. The Company has implemented a well-defined internal control framework tailored to the size and complexity of its operations. In addition, Rainbow has enforced stringent measures to ensure effective oversight and risk management.

The Internal Audit function operates under a comprehensive charter approved by the Audit Committee, which outlines its scope, authority and responsibilities. The Audit Committee, comprising four independent directors, provides oversight and ensures that the Internal Audit team reports directly to it. Each year, the Internal Audit team develops a risk-based internal audit plan to evaluate the design and operational effectiveness of controls, subject to the Audit Committee's approval.

The Company's functional heads review internal audit reports, prepare detailed action plans with defined timelines and establish a responsibility matrix for each observation. Once these reviews are completed, the reports are presented to the Audit Committee for quarterly reviews and approvals.

Rainbow has also assigned a separate team of auditors to conduct concurrent reviews of daily transactions across all group hospitals. The outcomes of these reviews are evaluated monthly at the unit level, and regular updates are shared with management. Such an approach has enabled real-time monitoring and facilitated the prompt resolution of emerging issues.

Rainbow stays fully committed to delivering top-quality multi-disciplinary care for children and newborns. This focus comes from steady investments in modern facilities, wider service ranges, hiring of leading medical experts, and rollout of cutting-edge technologies.

Moreover, the Internal Audit team conducts annual testing of Entity Level Controls (ELCs) and Internal Controls over Financial Reporting (ICoFR) established by management. The quarterly updates on the status of internal controls, along with a comprehensive Action Taken Report (ATR) to track pending observations, are submitted to the Audit Committee. The systematic and diligent approach reflects the Company's commitment to continuously monitoring and improving its internal control processes.

RISK MANAGEMENT

Rainbow has set up a detailed Risk Management Framework to handle the challenges of its business environment. This approach follows the globally accepted Committee of Sponsoring Organizations (COSO) framework and covers all key areas of business operations. The Company uses tools like risk perception surveys, business environment reviews, and input from internal and external stakeholders to assess risks.

The framework helps identify, evaluate, and reduce potential risks. This setup ensures the Company stays strong and grows steadily in a changing environment. Functional heads prepare detailed Risk Registers, which form the base of this risk management system. They rate risks based on three main points: how likely the risk is to happen, how much damage it could cause, and how easily it can be spotted.

The Company follows a Risk Management Charter, reviewed and approved by the Board's Risk Management Committee (RMC). The RMC oversees all risk activities to make sure they work well. Rainbow uses checks like process walkthroughs, ongoing audits, and risk-focused internal reviews to watch over operations and fix possible issues. This method spots and closes gaps in internal processes to improve reliability.

Management quickly finds new risks and adds them to the Risk Register right away. Each risk gets a full root cause analysis, with clear signs set up for constant tracking. The Company creates a Management Information System (MIS) for every risk to track it properly. Detailed action plans follow, with regular updates sent to the RMC.

Rainbow prepares a monthly MIS report that lists all risks and shares it with management for review. In RMC meetings, members check risk status closely and give practical steps, which the team puts into action fast. The RMC also gets updates on risk efforts every six months to keep focus on lowering risks.

ENVIRONMENT, SOCIAL AND GOVERNANCE

Rainbow has taken major steps forward in building its ESG vision while ensuring long-term business sustainability. The Company now uses energy-saving measures like solar rooftops and solar water heaters. It also applies Internet of Things (IoT) technology to maintain equipment and track energy use more effectively.

A standout success over a year came from signing a Memorandum of Understanding (MoU) to obtain solar and wind power through the open access system. Rainbow keeps up strong waste and water management plans to lower its environmental effects. On the social side, the Company teams up with non-profits and schools to spread knowledge about children's healthcare.

CAUTIONARY STATEMENT

Certain statements made or discussed in this release may include forward-looking statements based on management's current expectations and beliefs about future developments and their possible effects on Rainbow Children's Medicare Limited. These forward-looking statements do not guarantee future performance and involve risks and uncertainties. Important factors could cause actual results to differ, sometimes greatly, from what these statements suggest. Rainbow Children's Medicare Limited has no plan or duty to update any forward-looking statement made in this release.

Board's Report

Dear Members,

Your Directors have pleasure in presenting the 28th (Twenty-Eighth) Annual Report on the business and operations of your Company along with the audited financial statements (Consolidated and Standalone) for the Financial Year ended March 31, 2026.

FINANCIAL RESULTS

The Financial performance of your Company for the Financial Year ended March 31, 2026 is summarized below:

(₹ in million)

Particulars	Year ended March 31, 2026 (Consolidated)	Year ended March 31, 2025 (Consolidated)	Year ended March 31, 2026 (Standalone)	Year ended March 31, 2025 (Standalone)
Total Income	17,468.65	15,668.74	15,891.14	15,034.56
Total Expenses	13,870.97	12,368.73	12,534.60	11,813.73
Profit/ (Loss) before Tax (PBT)	3,582.29	3,300.01	3,341.15	3,220.83
Profit/ (Loss) after Tax (PAT)	2,815.44	2,442.27	2,500.16	2,375.85

1. STATEMENT OF COMPANY'S AFFAIRS

During the Financial Year under review, the Company continued to demonstrate steady progress in scaling its operations and strengthening its institutional footprint, supported by disciplined execution across acquisitions and capacity expansion. The developments undertaken during the year have contributed to enhanced operational scale, improved revenue-generation potential, and stronger platform readiness for future growth.

During the year, the Company completed two hospital acquisitions, expanding its geographic footprint and capacity, in line with its growth strategy. Post year-end, it further strengthened its network by operationalising new hospital locations and launching an IVF centre, supporting volume growth and improved infrastructure utilisation over the medium term.

The expansion of the network during the year has increased the Company's operating base and strengthened its ability to deploy capital efficiently across established and emerging markets. Integrated maternal-to-child care, supported by multidisciplinary, round-the-clock systems, delivered a strong year of clinical outcomes. This consistent performance reflects Rainbow's clinical rigour and remains the foundation of its trust and excellence.

The Company delivered a strong financial performance during the year, achieving its highest-ever revenue, EBITDA, and PAT. These results underscore the successful execution of its growth strategy through business scale-up, incremental capacity additions, and effective integration of acquired entities.

The operational expansion initiatives undertaken during the year are expected to contribute to improved operational efficiencies, higher throughput, and greater revenue visibility, thereby supporting the Company's future growth trajectory.

2. FINANCIAL PERFORMANCE

I. Consolidated Performance

During the year under review, the consolidated income of the Company increased to ₹ 17,468.65 million compared to ₹ 15,668.74 million in the previous year, registering a growth of 11.49%. The consolidated net profit after tax increased to ₹ 2,815.44 million compared to ₹ 2,442.27 million in the previous year, representing a growth of 15.28%.

II. Standalone Performance

During the year under review, the standalone income of the Company increased to ₹ 15,891.14 million compared to ₹ 15,034.56 million in the previous year, registering a growth of 5.70%. The standalone net profit after tax increased to ₹ 2,500.16 million compared to ₹ 2,375.85 million in the previous year, representing a growth of 5.23%.

3. CONSOLIDATED FINANCIAL STATEMENTS

The consolidated financial statements of your Company for the Financial Year 2025-26, are prepared in compliance with applicable provisions of the Companies Act, 2013 (hereinafter referred to as "the Act"), Indian Accounting Standards and SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 (hereinafter referred to as "the

SEBI Listing Regulations"). The consolidated financial statements have been prepared based on the audited financial statements of the Company and its Subsidiaries, as approved by their respective Board of Directors.

4. CHANGE IN NATURE OF BUSINESS

During the year under review, there is no change in nature of business of your Company.

5. DIVIDEND

During the Financial Year, your Company declared and paid a dividend for Financial Year 2024-25 as follows:

Date of Declaration	Dividend Type	Dividend Per Share
July 5, 2025	Final Dividend	₹3/-

Your Directors are pleased to recommend dividend of ₹3.5/- per Equity Share of face value of ₹10/- each as Final Dividend for the Financial Year 2025-26 for approval by the shareholders at the ensuing Annual General Meeting ("AGM") of the Company.

The Company has fixed July 21, 2026 as the "Record Date" for determining entitlement of Members to final dividend for the Financial Year 2025-26, if approved at the AGM.

In accordance with the Regulation 43A of the SEBI Listing Regulations, the Board of your Company has formulated and adopted the Dividend Distribution Policy, which outlines the key principles guiding the Board and the management in matters relating to declaration and distribution of dividend. The Dividend Distribution Policy of the Company is available on the Company's website at:

https://d31scedd5hpubp.cloudfront.net/investor_files/Dividend_Distribution_Policy.pdf

INVESTOR EDUCATION AND PROTECTION FUND (IEPF)

Pursuant to the applicable provisions of the Act, read with the Investor Education and Protection Fund Authority (Accounting, Audit, Transfer and Refund) Rules, 2016 ("IEPF Rules"), all unpaid or unclaimed dividends and the underlying shares are required to be transferred by the Company to Investor Education and Protection Fund ("IEPF") established by the Government of India, after the completion of 7 (Seven) years from the date of transfer to the Unpaid Dividend Account.

The Company has consistently declared and paid dividends to its equity shareholders. Details of dividends declared during the recent Financial Years are given below:

- **Financial Year 2024-25:** Dividend of ₹3/ per equity share, declared on July 5, 2025
- **Financial Year 2023-24:** Dividend of ₹3/ per equity share, declared on July 30, 2024
- **Financial Year 2022-23:** Dividend of ₹3/ per equity share, declared on June 29, 2023
- **Financial Year 2021-22:** Dividend of ₹2/ per equity share, declared on September 15, 2022

As a period of 7 (Seven) years has not lapsed from the date of transfer of the said dividend amounts to the respective Unpaid Dividend Accounts, the provisions relating to the transfer of unpaid/unclaimed dividends to the IEPF are currently not applicable to the Company.

Further, the Company has uploaded the details of unpaid and unclaimed amounts lying with the Company on the Ministry of Corporate Affairs' website and the website of the Company at <https://www.rainbowhospitals.in/investors-relations/dividend>. The shareholders may also refer to the Notice of AGM regarding details of amounts and the corresponding shares proposed to be transferred to IEPF in the coming years.

Ms. Shreya Mitra, Company Secretary and Compliance Officer of the Company, acts as the Nodal Officer of the Company for the purposes of verification of claims and coordination with IEPF Authority pursuant to the IEPF Rules.

6. TRANSFER TO RESERVES

For the year under review, no amount is proposed to be transferred to any Reserve of the Company.

7. CHANGES IN SHARE CAPITAL

I) Changes in Authorized Share Capital:

During the year under review, there were no changes in the Authorized Share Capital. The Authorized Share Capital of the Company stands at ₹1,50,00,00,000/- divided into 15,00,00,000 Equity Shares of ₹10/- as on March 31, 2026.

II) Changes in Paid-up Share Capital:

During the year under review, the paid-up share capital was changed in the following manner:

- Allotment of 7,483 Equity shares of ₹10/- each on August 12, 2025 under 'Rainbow Children's Medicare Limited - Employees Stock Unit Plan 2023'.

As a result of above, the Paid-up Share Capital of the Company increased from ₹1,01,55,16,730

divided into 10,15,51,673 equity shares of ₹ 10/- each to ₹ 1,01,55,91,560 /- divided into 10,15,59,156 Equity Shares of ₹ 10/- each as on March 31, 2026.

Further, pursuant to the listing application by the Company in respect of the aforesaid shares allotted, the said equity shares were listed and admitted to dealings on the National Stock Exchange of India Limited and BSE Limited effective from August 22, 2025.

The Company's shares are compulsorily tradable in electronic form. As on March 31, 2026, the entire paid-up capital, is held in dematerialized form.

The Company's equity shares are listed on the National Stock Exchange of India Limited and BSE Limited, with listing fees paid to both exchanges for FY 2025-26 and FY 2026-27.

8. EMPLOYEES STOCK OPTION PLAN/ SCHEME

During the Financial Year 2024 - 25, the Board of Directors, at its meeting held on February 9, 2025, recommended, subject to approval of the shareholders, the introduction of the Rainbow Children's Medicare Limited–Employee Stock Option Scheme 2025 (“ESOP Scheme 2025”) to support the Company's long-term growth strategy and strengthen talent retention. The Scheme is designed to align employee interests with shareholder value, foster an ownership-driven culture, and enable the Company to attract, motivate, and retain skilled talent in a competitive and evolving business environment.

Subsequently, the Members of the Company approved the 'Rainbow Children's Medicare Limited - Employee Stock Option Scheme 2025' (“ESOP Scheme 2025”) by way of a special resolution passed through postal ballot on April 2, 2025 for issue of options to eligible employees, which may result in an issuance of a maximum number of 10,15,000 Equity Shares i.e., 10,15,000 Options. The ESOP Scheme 2025 shall be implemented through an irrevocable employee welfare trust namely 'Rainbow Employees Welfare Trust'. Disclosures as stipulated under the SEBI SBEB & SE Regulations with regard to the ESOP Scheme 2025 is available on the Company's website at https://d31scedd5hpubp.cloudfront.net/investor_files/Rainbow_-_Employee_Stock_Option_Scheme_2025.pdf.

Further, the Company also has in place the Employee Stock Unit Plan 2023' (“Stock Unit Plan 2023”). Disclosures as stipulated under the Securities and Exchange Board of India (Share Based Employee Benefits and Sweat Equity) Regulations, 2021 (“SEBI SBEB & SE Regulations”), with regard to the ESOP

Scheme 2023 is available on the Company's website at https://d31scedd5hpubp.cloudfront.net/investor_files/Rainbow_-_Employee_Stock_Unit_Plan_2023.pdf

During the year under review, there has been no material change in the ESOP Schemes and the same was in compliance with the Securities and Exchange Board of India (Share Based Employee Benefits and Sweat Equity) Regulations, 2021 (“SEBI SBEB & SE Regulations”). Applicable disclosures as stipulated under the SEBI SBEB & SE Regulations with regard to Stock Unit Plan 2023 and Stock Unit Plan 2025 are available on the Company's website at https://d31scedd5hpubp.cloudfront.net/investor_files/Information-as-per-SEBI-SBEB-Regulations-FY-26.pdf.

Further, the Shareholders' approval for the ESOP Scheme 2023 can be accessed on our website at https://d31scedd5hpubp.cloudfront.net/investor_files/Postal-Ballot-Result-march182023.pdf and ESOP Scheme 2025 https://d31scedd5hpubp.cloudfront.net/investor_files/Postal-Ballot-Result-9Feb2025.pdf.

The Company has obtained a certificate from M/s. KVSS & Co LLP, Practicing Company Secretaries, in terms of Regulation 13 of SEBI (Share Based Employee Benefits and Sweat Equity) Regulations, 2021, confirming that the ESOP Scheme 2023 and ESOP Scheme 2025 have been implemented in compliance with the applicable regulations and shareholder approvals and the certificates are attached as **Annexure 1 (a) & Annexure 1 (b)** to this Report and are available for inspection by the members at the ensuing AGM.

9. CREDIT RATING

During the year under review, ICRA Limited has reaffirmed the Issuer Rating of the Company at [ICRA]AA with a Stable outlook. The rating reflects ICRA's expectation that the Company will continue to maintain a strong credit profile, supported by healthy revenue and earnings growth, a robust business model, strong liquidity, and a conservative capital structure.

The disclosures pursuant to Regulation 46 of the SEBI Listing Regulations are available on the Company's website at <https://www.rainbowhospitals.in/investors-relations/credit-rating>.

10. SUBSIDIARIES

A report on the performance and financial position of each of the subsidiaries and their contribution to the overall performance of the Company for the Financial Year ended March 31, 2026 is set out in Form AOC-1 as per the Act and annexed herewith as **Annexure – 2** to this Report.

The annual financial statements of the subsidiaries shall be made available to the Members of the Company/ Subsidiary Companies seeking such information at any point of time and are also made available on the Company's website at <https://www.rainbowhospitals.in/investors-relations/subsidiary-financials>.

The Company has formulated a policy for determining material subsidiaries. The said policy is also available on the Company's website at:

https://d31scedd5hpubp.cloudfront.net/investor_files/Policy_for_determining_Material_Subsidiary-2025.pdf

During the year under review, the Company has made the following acquisitions:

Prashanthi Medicare Private Limited ("PMPL")

As part of the expansion strategy, the Company acquired PMPL to strengthen the Company's presence in its home state and reinforce its position as a leading provider of pediatric and perinatal healthcare, particularly in North Telangana. The region's strong demographic profile, growing healthcare demand, and increasing urbanization, makes it a strategic location for the development of a regional healthcare hub.

In this regard, the Business Strategy & Investment Committee of the Company, at its meeting held on June 28, 2025, approved the execution of the Share Subscription Agreement and Shareholders' Agreement for the acquisition of 76% of the fully diluted equity share capital and 100% of the Non-Convertible Redeemable Preference Shares (NCRPS) of M/s. Prashanthi Medicare Private Limited, for a total consideration of approximately ₹ 33 crores. Pursuant to the completion of the transaction, Prashanthi Medicare Private Limited became a subsidiary of the Company with effect from July 1, 2025.

Pratiksha Women & Child Care Hospital Private Limited ("PWCHPL")

Further, in addition to the earlier acquisition of Prashanthi Medicare Private Limited, the Board of Directors of the Company, at its meeting held on August 11, 2025, approved the execution of the Securities Subscription Agreement and Shareholders' Agreement for the acquisition of 76% of the fully diluted equity share capital and 100% of the Non-Convertible Redeemable Preference Shares (NCRPS) of M/s. Pratiksha Women & Child Care Hospital Private Limited, for a total consideration of approximately ₹ 171 crores. Pursuant to the completion of the transaction, the said entity became a subsidiary of the Company w.e.f. August 18, 2025.

The acquisition of PWCHPL strengthened Rainbow's presence in the North-East region of India,

strengthening its regional presence and extending its specialized pediatric and perinatal healthcare model to a new market. This strategic expansion strengthens the Company's national footprint, enhances its ability to serve a wider patient base, and supports its vision of delivering high-quality pediatric and perinatal healthcare across key regions of the country.

The Company does not have any joint venture or associate company as on March 31, 2026. During the year under review, apart from the entities that became subsidiaries of the Company, as disclosed elsewhere in this Report, no entity became or ceased to be a subsidiary, joint venture or associate of the Company.

11. MATERIAL CHANGES AND COMMITMENTS AFFECTING THE FINANCIAL POSITION

No material changes or commitments affecting the financial position of the Company have occurred between the end of the Financial Year ended March 31, 2026 and the date of this Report, other than those disclosed elsewhere in this Report.

12. PUBLIC DEPOSITS

The Company has not accepted any deposits from the public within the meaning of Section 73 of the Companies Act, 2013 read with the Companies (Acceptance of Deposits) Rules, 2014. Accordingly, no amount on account of principal or interest in respect of deposits was outstanding as at March 31, 2026. Consequently, the requirement to disclose details of deposits not in compliance with Chapter V of the Act is not applicable.

13. PARTICULARS OF EMPLOYEES AND RELATED DISCLOSURES

Disclosures pertaining to remuneration and other details as required under Section 197(12) of the Act read with Rule 5(1) of the Companies (Appointment and Remuneration of Managerial Personnel) Rules, 2014 are set out in prescribed format and annexed herewith as **Annexure - 3** to this Report.

The statement containing particulars of employees as required under Section 197(12) of the Act read with Rule 5(2) and 5(3) of the Companies (Appointment and Remuneration of Managerial Personnel) Rules, 2014, forms part of this Report. Further, the Report is being sent to the members excluding the aforesaid annexure. The said details would be available for inspection by the Shareholders, at the corporate office of the Company or through electronic mode, during business hours on working days up to the date of the forthcoming AGM. In terms of Section 136 of the Act, any shareholder interested in obtaining a copy thereof may write to the Company Secretary of the Company at companysecretary@rainbowhospitals.in.

14. DIRECTORS AND KEY MANAGERIAL PERSONNEL

During the year under review, the Board of Directors of the Company comprised an optimal mix of Executive and Non-Executive Directors, including Independent Directors, ensuring a diverse blend of skills, experience, and expertise. The detailed composition of the Board forms part of the Corporate Governance Report annexed to this Report.

None of the Directors of the Company are disqualified as per the provisions of Section 164(1) and (2) of the Act. The Directors have made necessary disclosures, as required under various provisions of the Act, and the SEBI Listing Regulations.

I. Directors

i. Retirement by rotation and subsequent re-appointment

Dr. Adarsh Kancharla (DIN: 08302615), Director of the Company is liable to retire by rotation at the forthcoming 28th AGM and being eligible, seeks re-appointment. For reference of members, a brief profile of Dr. Adarsh Kancharla (DIN: 08302615) is given in the Chapter on Corporate Governance and in the Notice convening the 28th AGM.

ii. Information u/r 36(3) of SEBI (Listing Obligations and Disclosure Requirements), Regulations, 2015

As required under regulation 36 (3) of the SEBI Listing Regulations, brief particulars of the Directors seeking appointment/re-appointments are mentioned in the explanatory statement to the notice of the AGM forming part of this Report.

iii. Declaration by independent directors on annual basis

Pursuant to the provisions of Section 149(7) of the Act, the Independent Directors have submitted declarations that each of them meets the criteria of independence as provided in Section 149(6) of the Act along with Rules framed thereunder and Regulation 16(1)(b) of the SEBI Listing Regulations. The Board has taken on record the said declarations submitted by the Independent Directors after undertaking due assessment of the veracity of the same. There has been no change in the circumstances affecting their status as Independent Directors of the Company.

During the year under review, the Non-Executive Directors of the Company had no pecuniary relationship or transactions with the Company, other than sitting fees, commission and reimbursement of expenses, if any.

Familiarization program for independent directors:

Pursuant to Regulation 25 of the SEBI Listing Regulations, the Company familiarises its Independent Directors with their roles, rights and responsibilities, as well as with the Company's business and operations, both upon induction and on a regular basis. Moreover, Directors are frequently updated, inter-alia, on business strategies and performance, management structure and key initiatives of the business at each Board Meeting. The details of the familiarization programme of the Independent Directors are available on the website of the Company at the link: https://d31scedd5hpubp.cloudfront.net/investor_files/Familiarisation_Programme_for_Independent_Directors_-_FY_2025-26.pdf.

II. Key Managerial Personnel

In accordance with the provisions of Section 2(51), 203 of the Act read with Companies (Appointment and Remuneration of Managerial Personnel) Rules, 2014, the following were the Key Managerial Personnel of the Company as on March 31, 2026.

1. Dr. Ramesh Kancharla - Chairman and Managing Director;
2. Dr. Dinesh Kumar Chirla - Whole-time Director;
3. Mr. Abrarali Dalal - Chief Executive Officer;
4. Mr. Vikas Maheshwari - Chief Financial Officer; and
5. Ms. Shreya Mitra - Company Secretary and Compliance Officer.

During the year under review, pursuant to the recommendation of the Nomination and Remuneration Committee of the Company, the Board of Directors in its meeting held on November 13, 2025, appointed Mr. Abrarali Dalal as the Chief Executive Officer (Key Managerial Personnel) of the Company with effect from January 20, 2026.

During the year under review, there were no resignations of the Key Managerial Personnel.

15. BOARD'S EVALUATION

Pursuant to the provisions of the Companies Act, 2013 and the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015, the Board carried out an annual performance evaluation of its own performance, that of its Committees, Individual Directors, the Chairman, Executive Directors and Committee Chairpersons for the Financial Year 2025-26.

The evaluation was facilitated through a structured digital platform administered by an independent external agency with expertise in board evaluations. The process was conducted on an anonymous basis to encourage objective and candid feedback. A comprehensive evaluation framework approved by the Nomination and Remuneration Committee ("NRC") was adopted, covering qualitative and quantitative parameters relevant to the roles and responsibilities of the Board, its Committees and individual members.

The evaluation of the Board and Individual Directors was based on various parameters, including strategic oversight, governance and compliance, contribution to Board deliberations, preparedness and participation in meetings, independence of judgement, leadership, integrity, stakeholder focus and commitment to the Company's values. The performance of each Committee was assessed with reference to its charter, effectiveness in discharging its responsibilities and contribution to the overall governance framework of the Company.

In addition to the above, the performance of Committee Chairpersons was separately evaluated based on their effectiveness in leading committee proceedings, driving agenda outcomes, facilitating constructive discussions and ensuring fulfilment of the respective committee's mandate. The evaluation process also enabled benchmarking of performance through overall evaluation scores and identification of areas for continuous improvement.

The Board noted the outcomes of the evaluation exercise and was satisfied with its overall effectiveness, the functioning of its Committees and the contributions made by individual Directors in discharging their duties and responsibilities.

The Independent Directors, at their separate meeting held on March 28, 2026, reviewed the performance of the Chairman, Non-Independent Directors and the Board as a whole, considering the views of Executive Directors and Non-Executive Directors. The Independent Directors also assessed the quality, content and timeliness of information flow between the Management and the Board, which is necessary for the Board to effectively and reasonably perform its duties.

16. POLICY ON DIRECTORS' APPOINTMENT AND REMUNERATION

In compliance with the provisions of Section 178 of the Act and Regulation 19 of the SEBI Listing Regulations, the Board has, on the recommendation of the Nomination & Remuneration Committee of the Company, framed a policy for selection and

appointment of Directors, Key Managerial Personnel (KMP), Senior Management and their remuneration.

The salient features of the Nomination and Remuneration Policy of the Company are:

- i. It lays down the criteria for determining qualifications, competencies, positive attributes and independence for appointment of a director (Executive/ Non-Executive/ Independent) of the Company;
- ii. To recommend to the Board the policy relating to the remuneration of the Directors, KMP and Senior Management/ Other Employees of the Company; and
- iii. Reviewing and approving corporate goals and objectives relevant to the compensation of the executive Directors, evaluating their performance in light of those goals and objectives and either as a committee or together with the other independent Directors (as directed by the Board), determine and approve executive Directors' compensation based on this evaluation; making recommendations to the Board with respect to KMP and Senior Management compensation and recommending incentive-compensation and equity-based plans that are subject to approval of the Board.

The Nomination and Remuneration Policy of the Company is available on the website of the Company and can be accessed at the following web link:

https://d31scedd5hpubp.cloudfront.net/investor_files/Nomination_and_Remuneration_PolicyFEB2025.pdf

17. MEETINGS OF THE BOARD AND ITS COMMITTEES

Six meetings of the Board were held during the year under review. The necessary quorum was present for all the meetings. The maximum interval between any two Board meetings did not exceed 120 days.

The details of the meetings and composition of the Board and Committees of the Board is detailed under Corporate Governance Report forming part of this Report.

18. DIRECTORS' RESPONSIBILITY STATEMENT

Pursuant to Section 134(3)(c) of the Act, the Directors confirm that:

- i. In the preparation of the annual accounts for the Financial Year ended March 31, 2026, the applicable accounting standards and Schedule III

of the Companies Act, 2013, have been followed and there are no material departures from the same;

- II. the Directors have selected such accounting policies and applied them consistently and made judgments and estimates that are reasonable and prudent so as to give a true and fair view of the state of affairs of your Company as at March 31, 2026 and of the profit of the Company for the Financial Year ended March 31, 2026;
- III. proper and sufficient care has been taken for the maintenance of adequate accounting records in accordance with the provisions of the Companies Act, 2013 for safeguarding the assets of the Company and for preventing and detecting fraud and other irregularities;
- IV. the annual accounts have been prepared on a 'going concern' basis;
- V. proper internal financial controls laid down by the Directors were followed by the Company and that such internal financial controls are adequate and were operating effectively; and
- VI. the Directors have devised proper systems to ensure compliance with the provisions of all applicable laws and that such systems were adequate and operating effectively.

19. AUDIT COMMITTEE

The Audit Committee performs the roles and functions as mandated under the Act, the SEBI Regulations and such other matters as prescribed by the Board from time to time.

All the members of the Audit Committee are Independent Directors and possess strong accounting and financial management expertise.

The composition of the Audit Committee is given below:

Name	Designation
Mr. Santanu Mukherjee	Chairperson
Mr. Aluri Srinivasa Rao	Member
Dr. Anil Dhawan	Member
Ms. Sundari R. Pisupati	Member

The extract of terms of reference of the Audit Committee, attendance at its meetings and other details are provided in the Corporate Governance Report, which forms part of this Report.

20. AUDITORS AND AUDITORS' REPORT

I. Statutory Auditors

M/s. S.R. Batliboi & Associates LLP, Chartered Accountants (Firm Registration No. 101049W/ E300004), were appointed as the Statutory Auditors of the Company for a term of 5 (five) years i.e., from the conclusion of 25th AGM of the Company which was held on June 29, 2023 till the conclusion of 30th AGM of the Company.

The Statutory Auditors of the Company have not reported any fraud as specified under the second proviso of Section 143(12) of the Companies Act, 2013 (including any statutory modification(s) or re-enactment(s) for the time being in force).

The Auditors' Report for the Financial Year ended March 31, 2026, does not contain any qualification, reservation or adverse remark, etc. Further, the Auditors' Report read along with notes to accounts is self-explanatory and therefore does not call for further comments.

II. Secretarial Auditors

Pursuant to the provisions of Section 204 and other applicable provisions, if any, of the Act read with the Companies (Appointment and Remuneration of Managerial Personnel) Rules, 2014 and Regulation 24A of the SEBI Listing Regulations, Mr. K.V.S. Subramanyam, a peer reviewed Company Secretary in practice (CP No. 4815), was appointed as the Secretarial Auditor of the Company, for conducting the Secretarial Audit of the Company, for a term of five consecutive years from the Financial Year 2025-26 to Financial Year 2029-30.

The Secretarial Audit Report for the Financial Year ended March 31, 2026 is annexed herewith as **Annexure – 4** and forms an integral part of this Report. The Secretarial Audit Report does not contain any qualification, reservation or adverse remark, etc.

The Secretarial Auditors of the Company have not reported any fraud as specified under the second proviso of Section 143(12) of the Act (including any statutory modification(s) or re-enactment(s) for the time being in force).

Additionally, in compliance with Regulation 24A of the Listing Regulations, the Annual Secretarial Compliance Report for the FY 2025-26, issued by Mr. K.V.S. Subramanyam, Secretarial Auditor

of the Company, was timely filed with the stock exchanges. This report pertains to the Company's adherence to the Securities and Exchange Board of India Act, 1992, the Securities Contracts (Regulation) Act, 1956, and the Rules, Regulations, Circulars, and Guidelines issued thereunder, as applicable. The Annual Secretarial Compliance Report is available on the Company's website and can be accessed at the weblink: https://d31scedd5hpubp.cloudfront.net/investor_files/Annual_Secretarial_Compliance_Report_-_FY_2025-26.pdf

III. Cost Records and Cost Auditors

In terms of the Section 148 of the Act read with Companies (Cost Records and Audit) Rules, 2014, the Company is required to maintain cost accounting records and get them audited every year. Accordingly, such accounts and records were made, maintained and audited for the Financial Year 2025-26.

During the year under review, M/s. Lavanya and Associates LLP (formerly known as M/s. Lavanya & Associates) were appointed as the Cost Auditors of the Company for the FY 2025-26. The Cost Auditors of the Company have not reported any fraud as specified under the second proviso of Section 143(12) of the Act (including any statutory modification(s) or re-enactment(s) for the time being in force).

Further, the Board of Directors on the basis of recommendations from Audit Committee, in its meeting held on May 23, 2026, has re-appointed M/s. Lavanya and Associates LLP as the Cost Auditors of the Company for the Financial Year 2026-27 at a fee of ₹ 2,20,000/- (Rupees Two Lakh and Twenty Thousand Only) plus applicable taxes and out-of-pocket expenses subject to the ratification of the said fees by the shareholders at the ensuing AGM, the resolution for which is set in the Notice of AGM for approval of the shareholders.

21. ANNUAL RETURN

As required under Section 92(3) of the Act read with the Companies (Management and Administration) Rules, 2014, the Annual Return of the Company is available on the Company's website at <https://www.rainbowhospitals.in/investors-relations/shareholder-information>

22. RELATED PARTY TRANSACTIONS

In compliance with the requirements of the Act and the SEBI Listing Regulations, your Company has formulated a Policy on Related Party Transactions which is also available on Company's website at

https://d31scedd5hpubp.cloudfront.net/investor_files/Policy_on_Materiality_and_Dealing_with_Related_Party_TransactionsFEB2025.pdf

The Policy intends to ensure that proper reporting, approval and disclosure processes are in place for all transactions between the Company and its Related Parties or between the subsidiary companies and their related parties. All Related Party Transactions are placed before the Audit Committee for review and approval. Prior omnibus approval is obtained for Related Party Transactions which are of repetitive nature and/ or entered in the Ordinary Course of Business and are at arm's length basis. All such transactions of the Company with its related parties were placed before the Audit Committee for review against pre-approval on quarterly basis.

All related party transaction entered during the year were in Ordinary Course of the Business and on arm's length basis and in compliance with the provisions of the Act, the SEBI Listing Regulations and the Policy. No Material Related Party Transactions were entered during the year by your Company. Accordingly, the disclosure of Related Party Transactions as required under Section 134(3)(h) of the Companies Act, 2013 in Form AOC-2 is not applicable.

The disclosures pertaining to the related party transactions, in accordance with Ind AS-24, have been provided under Note No. 2.31 of the standalone financial statements and the consolidated financial statements.

23. PARTICULARS OF LOANS, GUARANTEES AND INVESTMENTS

Loans, guarantees and investments covered under Section 186 of the Act have been disclosed in the financial statements, which forms part of this Report.

24. RISK MANAGEMENT

The Board of Directors of the Company has a Risk Management Committee to frame, implement and monitor the risk management plan for the Company.

The Committee is responsible for monitoring and reviewing the risk management plan and ensuring its effectiveness. The Company has a process of periodic reporting to the Risk Management Committee. The Risk Management Committee oversees how management monitors compliance with risk management policies and procedures and reviews the adequacy of the risk management framework in relation to the risks being faced by the Company. The Audit Committee has additional oversight in the area of financial risk and controls.

The details of the Risk Management Committee are given in the Corporate Governance Report, which forms part of this Report.

25. WHISTLE BLOWER POLICY AND VIGIL MECHANISM

In compliance with the provisions of section 177 of the Act and Regulation 22 of the SEBI Listing Regulations, the Company has in place the Whistle Blower Policy and Vigil Mechanism for Directors, employees and other stakeholders which provides a platform to them for raising their voice about any breach of code of conduct, financial irregularities, illegal or unethical practices, unethical behaviour, actual or suspected fraud. Adequate safeguards are provided against victimization to those who use such mechanism and direct access to the Chairman of the Audit Committee in appropriate cases is provided.

The policy ensures that strict confidentiality is maintained whilst dealing with concerns and also that no discrimination is made against any person. The Whistle Blower Policy and Vigil Mechanism may be accessed on the Company's website at https://d31scedd5hpubp.cloudfront.net/investor_files/Whistle%20Blower%20Policy.pdf

26. CORPORATE SOCIAL RESPONSIBILITY

The Company's CSR initiatives and activities are aligned to the requirements of Section 135 of the Act. The Company has a Board-level Committee, namely, CSR & ESG Committee. As on March 31, 2026, the Committee consists of Dr. Anil Dhawan, Mr. Santanu Mukherjee, Ms. Sundari R Pisupati, Dr. Ramesh Kancharla, Dr. Dinesh Kumar Chirla, and Dr. Adarsh Kancharla.

The Annual Report on CSR activities for the year under review is set out in **Annexure - 5** of this Report in the format prescribed in the Companies (Corporate Social Responsibility Policy) Rules, 2014. The CSR Policy is available on the Company's website at https://d31scedd5hpubp.cloudfront.net/investor_files/CSR_Policy.pdf

The details of the CSR & ESG Committee are provided in the Corporate Governance report, which forms part of this Report.

27. MANAGEMENT DISCUSSION AND ANALYSIS REPORT

The Management Discussion and Analysis Report of financial performance and results of operations of the Company, as required under the SEBI Listing Regulations, is provided in a separate section and forms an integral part of this report. It inter-alia gives details of the overall industry structure, economic developments, performance and state of affairs of

your Company's business, risks and concerns and material developments during the Financial Year under review.

28. BUSINESS RESPONSIBILITY AND SUSTAINABILITY REPORT

Pursuant to the requirements of Regulation 34(2) (f) of the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015, read with the applicable SEBI circulars, the Company has prepared the Business Responsibility and Sustainability Report (BRSR) describing the initiatives taken by the Company from environment, social and governance perspective for the Financial Year under review which forms part of this Report.

Further, the Company has obtained reasonable assurance on the BRSR Core parameters from an independent assurance provider, M/s. Adwin Advisory Private Limited.

The BRSR Report along with the BRSR Core Assurance Report, forms part of this Annual Report and is also available on the website of the Company which can be accessed at <https://www.rainbowhospitals.in/investors-relations/annual-reports> and the stock exchange(s) where the equity shares of the Company are listed.

29. CORPORATE GOVERNANCE REPORT

Your company is committed to maintain the highest standards of Corporate Governance and adhere to the Corporate Governance requirements set out by SEBI. Separate report on Corporate Governance, forms an integral part of this Report.

A certificate from M/s. KVSS & Co. LLP, Practicing Company Secretaries, confirming compliance with the conditions of corporate governance is also attached to the Corporate Governance Report.

30. DISCLOSURE UNDER THE SEXUAL HARASSMENT OF WOMEN AT WORKPLACE (PREVENTION, PROHIBITION AND REDRESSAL) ACT, 2013

The Company has in place an Anti-Sexual Harassment Policy in compliance with the requirements of the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013.

The Company has complied with the provisions relating to the constitution of Internal Complaints Committee ("ICC") as specified under the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013.

The Company conducts sessions for employees to build awareness among employees about the Policy

and the provisions of Prevention of Sexual Harassment of Women at Workplace Act.

During the year under review, no complaints of sexual harassment were reported to the Committee, nor were any disposed of. Accordingly, no complaints were pending at the beginning or at the close of the Financial Year, nor were any complaints pending for a period exceeding 90 days during the year.

The requisite details mandated by POSH are provided in the Corporate Governance Report, which is part of this Annual Report.

31. MATERNITY BENEFIT PROVIDED BY THE COMPANY UNDER MATERNITY BENEFIT ACT 1961

The Company declares that it has duly complied with the provisions of the Maternity Benefit Act, 1961. All eligible women employees have been extended the statutory benefits prescribed under the Act, including paid maternity leave, continuity of salary and service during the leave period, and post-maternity support such as nursing breaks and flexible return-to-work options, as applicable. The Company remains committed to fostering an inclusive and supportive work environment that upholds the rights and welfare of its women employees in accordance with applicable laws.

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

The particulars relating to conservation of energy, technology absorption and foreign exchange earnings and outgo, as required under Section 134(3)(m) of the Companies Act, 2013 read with the Companies (Accounts) Rules, 2014, are furnished below:

A. Conservation of Energy:

Your Company continues to focus on energy conservation, operational efficiency and sustainable practices across its facilities through adoption of energy-efficient technologies and renewable energy initiatives.

I. Steps taken or impact on conservation of energy:

The following measures were undertaken during the year under review:

- (i) Commissioning of rooftop solar power systems across various facilities.
- (ii) Procurement of green power through open access and third-party renewable energy arrangements.

- (iii) Installation of Variable Frequency Drives (VFDs) for optimization of energy consumption in operations.
- (iv) Upgradation to energy-efficient LED lighting systems across units.
- (v) Installation of AHUs integrated with VRV systems for efficient HVAC operations.
- (vi) Increased usage of heat pumps and solar water heaters for reduction in conventional energy consumption.
- (vii) Installation of motion sensors for lighting controls to minimize energy wastage.
- (viii) Deployment of IoT-based Building Management Systems (BMS) for monitoring and optimizing HVAC efficiency.

II. Impact of Measures:

The above initiatives have contributed towards reduction in energy consumption, improvement in operational efficiency and optimization of energy costs, while supporting the Company's sustainability objectives and reduction in greenhouse gas emissions.

III. Capital Investment on Energy conservation Equipment:

During the year under review, the Company incurred capital expenditure of approximately ₹ 6,74,38,323 towards energy conservation initiatives including rooftop solar installations, VFD systems, LED lighting upgrades, HVAC efficiency systems and other sustainability-linked infrastructure.

B. Technology Absorption:

I. Efforts made towards technology absorption, adaptation and innovation:

Your Company continued to strengthen its technology and digital infrastructure through implementation of advanced cybersecurity and operational efficiency systems, including:

- (i) Implementation of a robust cybersecurity framework with 24x7 Security Operations Centre (SOC) monitoring services.
- (ii) Penetration testing, breach and attack simulation exercises and ransomware resiliency testing.

- (iii) Deployment of IoT-enabled systems for monitoring and optimization of building operations and energy efficiency.
- (iv) Adoption of Retrofit Emission Control Devices (RECD) for reduction of particulate emissions and greenhouse gas impact.

II. Benefits derived from the above efforts:

The above initiatives have enhanced protection of sensitive information assets, strengthened cybersecurity resilience, enabled compliance with applicable regulatory and security standards, improved operational stability and supported the Company's digital transformation and ESG objectives.

III. Details of Imported Technology

During the last three years reckoned from the beginning of the Financial Year 2025-26, the Company has not imported any technology.

IV. Expenditure incurred on Research & Development

No expenditure was incurred on Research and Development during the year under review.

C. Foreign exchange earnings and outgo

S. No.	Particulars	Amount (₹ in Million)
1	Foreign Exchange Earnings	20.07
2	Foreign Exchange Outgo	52.32

33. INTERNAL FINANCIAL CONTROLS SYSTEMS AND THEIR ADEQUACY

Your Company has in place an adequate internal financial control framework with reference to financial and operating controls thereby ensuring orderly and efficient conduct of its business, including adherence to the Company's policies, safeguarding of its assets, prevention and detection of frauds and errors, accuracy and completeness of accounting records, and timely preparation of reliable financial information.

The Audit Committee periodically reviews the adequacy of these systems through independent evaluations conducted by the Internal Auditors and through management's rigorous "Internal Control over Financial Reporting" self-assessment process. Based on the results of management reviews, independent audits and the Audit Committee review, the Board is of the opinion that the internal financial controls were adequate and operating effectively

throughout the Financial Year ended March 31, 2026. The Board accepted the recommendations of the Audit Committee whenever made by the Committee during the year.

During the Financial Year 2025-26, such controls were tested and no reportable material weakness in the design or operation was observed.

The Directors have, in the Directors Responsibility Statement, confirmed the same to this effect.

34. BOARD POLICIES

The various policies that the Board has approved and adopted in accordance with the requirements set forth by the Act and the SEBI Listing Regulations can be accessed at the website of the Company at <https://www.rainbowhospitals.in/investors-relations/policies-and-programs>.

35. DISCLOSURE RELATED TO INSOLVENCY AND BANKRUPTCY:

No proceedings are initiated / pending against the Company under the Insolvency and Bankruptcy Code, 2016 as at March 31, 2026.

36. NO DIFFERENCE IN VALUATION:

The requirement to disclose the details of difference between amount of the valuation done at the time of onetime settlement and the valuation done while taking loan from the Banks or Financial Institutions along with the reasons thereof, is not applicable.

37. SIGNIFICANT/ MATERIAL ORDERS PASSED BY THE REGULATORS

There are no significant/ material orders passed by the Regulators or Courts or Tribunals impacting the going concern status of your Company and its operations in future.

38. COMPLIANCE OF SECRETARIAL STANDARDS

The Company has devised proper systems to ensure compliance with all applicable Secretarial Standards issued by the Institute of Company Secretaries of India ("ICSI") as required under Section 118(10) of the Act and such systems are adequate and operating effectively.

During the FY 2025-26, the Company adhered to the applicable provisions of the Secretarial Standards (SS-1 and SS-2) relating to "Meetings of the Board of Directors" and "General Meetings" issued by the ICSI.

39. POLICY ON BOARD DIVERSITY:

The Company recognizes and embraces the importance of a diverse Board in its success. The Company believes that a truly diverse Board will

leverage differences in thought, perspective, regional and industry experience, cultural and geographical background, age, ethnicity, race, gender, knowledge and skills including expertise in financial, global business, leadership, technology, mergers & acquisitions, Board service, strategy, sales and marketing, Environment, Social and Governance (ESG), risk and cybersecurity and other domains, which will ensure that the Company retains its competitive advantage. The Nomination & Remuneration Policy, adopted by the Board, sets out the Company's approach to Board Diversity. The Nomination and Remuneration Committee sets the parameters on which the assessment of the board composition on behalf of the board to be conducted and recommends the appointment of new Directors and Senior Management Personnel. The committee also oversees the conduct of the annual review of board effectiveness.

40. OTHER DISCLOSURES

During the year under review: -

- i. The Company has not issued any equity shares with differential rights as to dividend, voting or otherwise.
- ii. Except as disclosed in this report and the financials of the Company, there was no issue of shares (including sweat equity shares) to employees of the Company under any other scheme.

- iii. The Company does not have any scheme of provision of money for the purchase of its own shares by employees or by trustees for the benefit of employees.
- iv. Neither the Managing Director nor the Whole-time Directors of the Company receive any remuneration or commission from any of its subsidiaries.
- v. The Company does not have any shares in unclaimed suspense demat account.

41. ACKNOWLEDGEMENT & APPRECIATION

Your Directors express their sincere appreciation for the assistance and co-operation received from the Government authorities, financial institutions, banks, customers, vendors and members during the year under review. Your Directors also wish to place on record their deep sense of appreciation for the commitment and dedicated services of the employees.

For and on behalf of Board of Directors

Dr. Ramesh Kancharla
Chairman and Managing Director
DIN: 00212270

Place: Hyderabad
Date: May 23, 2026

ANNEXURE – 1(a)

COMPLIANCE CERTIFICATE

[Pursuant to Regulation 13 of the Securities and Exchange Board of India
(Share Based Employee Benefits and Sweat Equity) Regulations, 2021]

To
The Members of
Rainbow Children's Medicare Limited
Hyderabad

I, K.V.S. Subramanyam, Secretarial Auditor of the Company, pursuant to Regulation 13 of the Securities and Exchange Board of India (Share Based Employee Benefits and Sweat Equity) Regulations, 2021 (hereinafter referred to as '**the SEBI SBEB & SE Regulations**') am required to certify for the Financial Year ended on March 31, 2026 that the "**Rainbow Children's Medicare Limited – Employee Stock Unit Plan 2023**" (hereinafter referred to as "Plan") has been implemented in accordance with the SEBI SBEB & SE Regulations and the special resolution passed by the shareholders through postal ballot (hereinafter referred to as "**Resolution**")

Management Responsibility:

It is the responsibility of the Management of the Company to implement the Plan including designing, maintaining records and devising proper systems to ensure compliance with the provisions of all applicable laws and regulations and to ensure that the systems are adequate and operate effectively.

Auditor's Responsibility:

It is my responsibility to certify whether the Company has complied with the applicable provisions of the Regulations and the Resolution during the year ended March 31, 2026, in implementing the plan on the basis of information compiled or collated by the Management and the accounting and other relevant supporting records and documents provided to me for my examination.

Verification:

I verified the following:

- a. The Articles of Association of the Company;
- b. the Plan;
- c. Minutes of the meeting of the Board of Directors;
- d. Minutes of the meeting of the Nomination and Remuneration Committee;
- e. Notice of Postal Ballot along with the explanatory statement and certified true copy of special resolution passed by the shareholders of the Company approving the Employee Stock Unit Plan 2023;
- f. Form PAS-3 vide SRN: AB6007659 filed with the Registrar of Companies and disclosures and intimations submitted to the Stock Exchanges pertaining to allotment of equity shares under the Plan

Certification:

In my opinion and to the best of my knowledge and according to the verifications as considered necessary and explanations furnished to me by the Company and its Officers, I certify that the Company has implemented the Plan and made Allotment in accordance with the applicable provisions of the SEBI SBEB & SE Regulations and Resolution of the Company passed by the shareholders through postal ballot.

Assumption & Limitation of Scope and Review:

1. Ensuring the authenticity of documents and information furnished is the responsibility of the Board of Directors of the Company.
2. My responsibility is to issue to this certificate based upon my examination of relevant documents and information. It is neither an audit nor an investigation.

3. This certificate is neither an assurance as to the future viability of the Company nor of the efficiency or effectiveness with which the management has conducted the affairs of the Company.
4. This certificate is solely for your information and it is not to be used, circulated, quoted, or otherwise referred to for any purpose other than for the said Regulations.

Date: May 12, 2026

Place: Hyderabad

K.V.S. Subramanyam
Practicing Company Secretary
FCS No.: 5400
C P No.: 4815
PR. No: I2002AP308000 (5725/2024)
UDIN: F005400H000342165

ANNEXURE – 1(b)

COMPLIANCE CERTIFICATE

[Pursuant to Regulation 13 of the Securities and Exchange Board of India
(Share Based Employee Benefits and Sweat Equity) Regulations, 2021]

To
The Members of
Rainbow Children's Medicare Limited
Hyderabad

I, K.V.S. Subramanyam, Practising Company Secretary and Secretarial Auditor of the Company, pursuant to Regulation 13 of the Securities and Exchange Board of India (Share Based Employee Benefits and Sweat Equity) Regulations, 2021 (hereinafter referred to as 'the SEBI SBEB & SE Regulations') am required to certify for the Financial Year ended on March 31, 2026 that the "Rainbow Children's Medicare Limited – Employee Stock Option Scheme 2025" (hereinafter referred to as "Scheme") has been implemented in accordance with the SEBI SBEB & SE Regulations and the special resolution passed by the shareholders through postal ballot (hereinafter referred to as "Resolution")

Management Responsibility:

It is the responsibility of the Management of the Company to implement the Scheme including designing, maintaining records and devising proper systems to ensure compliance with the provisions of all applicable laws and regulations and to ensure that the systems are adequate and operate effectively.

Auditor's Responsibility:

It is my responsibility to certify whether the Company has complied with the applicable provisions of the Regulations and the Resolution during the year ended March 31, 2026, in implementing the plan on the basis of information compiled or collated by the Management and the accounting and other relevant supporting records and documents provided to me for my examination.

Verification:

I verified the following:

- a. The Articles of Association of the Company;
- b. the Scheme;
- c. Minutes of the meeting of the Board of Directors;
- d. Minutes of the meeting of the Nomination and Remuneration Committee;
- e. Notice of Postal Ballot along with the explanatory statement and certified true copy of special resolution passed by the shareholders of the Company approving the Employee Stock Option Scheme 2025;

Certification:

In my opinion and to the best of my knowledge and according to the verifications as considered necessary and explanations furnished to me by the Company and its Officers, I certify that the Company has implemented the Scheme in accordance with the applicable provisions of the SEBI SBEB & SE Regulations and Resolution of the Company passed by the shareholders through postal ballot.

Assumption & Limitation of Scope and Review:

1. Ensuring the authenticity of documents and information furnished is the responsibility of the Board of Directors of the Company.
2. My responsibility is to give certificate based upon my examination of relevant documents and information. It is neither an audit nor an investigation.
3. This certificate is neither an assurance as to the future viability of the Company nor of the efficiency or effectiveness with which the management has conducted the affairs of the Company.

4. This certificate is solely for your information and it is not to be used, circulated, quoted, or otherwise referred to for any purpose other than for the said Regulations.

Date: May 12, 2026

Place: Hyderabad

K.V.S. Subramanyam
Practicing Company Secretary
FCS No.: 5400
C P No.: 4815
PR. No: I2002AP308000 (5725/2024)
UDIN: F005400H000342220

FORM AOC-1

FORM AOC-1 (Pursuant to first proviso to sub-section (3) of Section 129 read with rule 5 of Companies (Accounts) Rules, 2014)

Statement containing salient features of the financial statement of subsidiaries/ associate companies/ joint ventures

PART "A": SUBSIDIARIES

S. Name	Date since when subsidiary was acquired	Country of Incorporation	Reporting Currency	Closing exchange rate against Indian Rupee as on Mar 31, 2026	% of Holding	Share Capital	Reserves and Surplus	Total Assets	Total Liabilities	Investments	Turnover	Profit/(loss) before taxation	Provision for taxation	Profit/(loss) after taxation	Proposed Dividend	
1																
1	Rainbow Children's Hospital Private Limited	India	INR	NA	100%	0.1	-0.06	0.11	0.70	0.00	0.00	-0.03	0.00	-0.03	-	-
2	Rainbow Speciality Hospitals Private Limited	India	INR	NA	78.81%	180	170.43	503.53	153.10	275.41	396.20	46.66	13.91	32.75	-	-
3	Rainbow Women & Children's Hospital Private Limited	India	INR	NA	100%	0.1	-0.13	0.04	0.07	0.00	0.00	-0.03	0.00	-0.03	-	-
4	Rosewalk Healthcare Private Limited	India	INR	NA	100%	360.47	-234.34	368.96	242.83	0.00	417.68	44.21	0.00	173.62	-	-
5	Rainbow Fertility Private Limited	India	INR	NA	100%	45	12.25	57.29	0.04	55.24	0.00	2.29	0.58	1.71	-	-
6	Rainbow C R O Private Limited	India	INR	NA	100%	0.1	6.08	6.84	0.66	0.00	3.14	3.08	0.81	2.27	-	-
7	Prashanthi Medicare Private Limited	India	INR	NA	76% - Equity shares 100% - NCRPS*	92.48	268.57	604.21	320.64	0.00	191.52	8.55	1.92	6.63	-	-
8	Pratiksha Women & Child Care Hospital Private Limited	India	INR	NA	76% - Equity shares 100% - NCRPS*	466.65	1489.1	2335.82	790.47	0.00	648.69	136.72	38.06	98.66	-	-

*NCRPS- Non-convertible Redeemable Preference Shares

The reporting period for all the subsidiaries is March 31, 2026.

PART "B": ASSOCIATES AND JOINT VENTURES:

As on March 31, 2026 the Company has no Associates and Joint Ventures.

For and on behalf of the Board of Directors of Rainbow Children's Medicare Limited

Dr. Ramesh Kancharla
Chairman and Managing Director
DIN: 00212270

Dr. Dinesh Kumar Chirla
Whole-time Director
DIN: 01395841

Vikas Maheshwari
Chief Financial Officer

Shreya Mitra
Company Secretary & Compliance Officer

Place: Hyderabad
Date: May 23, 2026

ANNEXURE – 3

Disclosures pertaining to remuneration under Section 197(12) of the Act read with Rule 5(1) of the Companies (Appointment and Remuneration of Managerial Personnel) Rules, 2014 for the year ended March 31, 2026.

A. Ratio of the remuneration of each director to the median remuneration of the employees of the company and the percentage increase/ (decrease) in remuneration of each Director, Chief Executive Officer, Chief Financial Officer, and Company Secretary, for FY 2025-26:

S. No.	Name	Designation	Ratio of remuneration of each Director to the median remuneration of employees	% Increase in Remuneration in the FY 2025-26
1.	Dr. Ramesh Kancharla ¹	Chairman & Managing Director	106	(17.22)
2.	Dr. Dinesh Kumar Chirla ¹	Whole-time Director	61	(23.13)
3.	Dr. Adarsh Kancharla ²	Non – Executive Director	1	(37.50)
4.	Mr. Aluri Srinivasa Rao ³	Independent Director	8	75.00
5.	Dr. Anil Dhawan ³	Independent Director	8	50.00
6.	Mr. Santanu Mukherjee ³	Independent Director	9	58.75
7.	Ms. Sundari R. Pisupati ³	Independent Director	8	64.29
8.	Mr. Abrarali Dalal ⁴	Chief Executive officer	Not Applicable	Not Applicable
9.	Mr. Vikas Maheshwari	Chief Financial Officer	85	45.36
10.	Ms. Shreya Mitra	Company Secretary & Compliance Officer	7	160.76

¹ Includes salary, and perquisites. They do not receive any amount as remuneration from any subsidiary company. There was no change in remuneration, change was due to avilment of perquisites.

² Includes sitting fees paid during the year under review, change was due to the number of meetings attended during the year.

³ Includes sitting fees and commission paid during the year under review, change was due to attending the numbers of meetings held during the year.

⁴ Appointed during FY 2025-26 for part of the year i.e. from January 20, 2026, hence the remuneration paid for FY 2025-26 is not comparable.

B. Percentage increase in the median remuneration of employees in the Financial Year:

The average percentage increase in the median remuneration of employees in the Financial Year is 7%

C. Number of permanent employees on the rolls of the Company:

The number of permanent employees on the rolls of the Company as of March 31, 2026 is 4,724.

D. Average percentile increase already made in the salaries of employees other than the managerial personnel in the last Financial Year and its comparison with the percentile increase in the managerial remuneration and justification thereof and point out if there are any exceptional circumstances for increase in the managerial remuneration:

The average increase in the salaries of employees other than Managerial Personnel was 6.7%. The above table contains the details of remuneration paid to the managerial personnel. The remuneration paid to managerial personnel is based on prevailing market trends, Company Performance and overall responsibility matrix and the same is in line with the resolutions approved by the Board of Directors and/or Shareholders.

E. Affirmation that the remuneration is as per the Remuneration Policy of the Company:

It is hereby confirmed that the remuneration is as per the Nomination and Remuneration Policy of the Company.

For and on behalf of Board of Directors

Dr. Ramesh Kancharla
Chairman and Managing Director
DIN: 00212270

Place: Hyderabad
Date: May 23, 2026

ANNEXURE – 4

Form No. MR-3

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

SECRETARIAL AUDIT REPORT FOR THE FINANCIAL YEAR ENDED MARCH 31, 2026

To
The Members,
RAINBOW CHILDREN'S MEDICARE LIMITED
Hyderabad

I have conducted the Secretarial audit of the compliance of applicable statutory provisions and the adherence to good corporate practices by **RAINBOW CHILDREN'S MEDICARE LIMITED** (hereinafter called the "Company"). Secretarial Audit was conducted in a manner that provided me with a reasonable basis for evaluating the corporate conducts / statutory compliances and expressing my opinion thereon.

Based on my verification of the Company's books, papers, minute books, forms and returns filed and other records maintained by the Company and also the information provided by the Company, its officers, agents and authorized representatives during the conduct of secretarial audit, I hereby report that in my opinion, the Company has, during the audit period covering the Financial Year ended on **March 31, 2026**, complied with the statutory provisions listed hereunder and also that the Company has proper Board-processes and compliance mechanism in place to the extent, in the manner and subject to the reporting made hereinafter:

I have examined the books, papers, minute books, forms and returns filed and other records maintained by the Company for the Financial Year ended **March 31, 2026**, according to the provisions of:

- (i) The Companies Act, 2013 (the Act) and the rules made there under;
- (ii) The Securities Contracts (Regulation) Act, 1956 ('SCRA') and the rules made there under;
- (iii) The Depositories Act, 1996 and the Regulations and Bye-laws framed thereunder;
- (iv) Foreign Exchange Management Act, 1999 and the rules and regulations made there under to the extent of Foreign Direct Investment, Overseas Direct Investment and External Commercial borrowings;
- (v) The following Regulations and Guidelines prescribed under the Securities and Exchange Board of India Act, 1992 ('SEBI Act'):-
 - (a) The Securities and Exchange Board of India (Substantial Acquisition of Shares and Takeovers) Regulations, 2011;
 - (b) The Securities and Exchange Board of India (Prohibition of Insider Trading) Regulations, 2015;
 - (c) The Securities and Exchange Board of India (Issue of Capital and Disclosure Requirements) Regulations, 2018;
 - (d) Securities and Exchange Board of India (Share Based Employee Benefits and Sweat Equity) Regulations, 2021;
 - (e) The Securities and Exchange Board of India SEBI (Issue and Listing of Non-Convertible Securities) Regulations, 2021; **Not applicable to the Company during the audit period**
 - (f) The Securities and Exchange Board of India (Registrars to an Issue and Share Transfer Agents) Regulations, 1993 regarding the Companies Act and dealing with client;
 - (g) The Securities and Exchange Board of India (Delisting of Equity Shares) Regulations, 2021; **Not applicable to the Company during the audit period** and
 - (h) The Securities and Exchange Board of India (Buyback of Securities) Regulations, 2018; **Not applicable to the Company during the audit period**

I have also examined compliance with the applicable clauses of the following:

- (i) Secretarial Standards issued by The Institute of Company Secretaries of India.
- (ii) The Securities and Exchange Board of India (Listing Obligations and Disclosure Requirements) Regulations, 2015 as amended from time to time;

During the period under review, the Company has complied with the provisions of the Act, Rules, Regulations, Guidelines, Standards, etc. mentioned above.

I further report that

The Board of Directors of the Company is duly constituted with a proper balance of Executive Directors, Non-Executive Directors and Independent Directors. There were no changes in the composition of the Board of Directors during the period under review.

Adequate notice is given to all directors to schedule the Board meetings, agenda and detailed notes on the agenda were sent in advance, and a system exists for seeking and obtaining further information and clarifications on the agenda items before the meeting and for meaningful participation at the meeting.

During the period under review, resolutions were carried out through majority. As confirmed by the Management, there were no dissenting views expressed by any of the members

on any business transacted at the meetings held during the period under review.

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

I further report that during the audit period, the Members of Company approved the "Rainbow Children's Medicare Limited - Employee Stock Option Scheme 2025" through Postal Ballot.

I further report that the company Allotted 7,483 Equity shares pursuant to the "Rainbow children's Medicare Limited – Employees Stock Unit plan 2023" in accordance with the applicable provisions of law.

K.V.S. Subramanyam

Practicing Company Secretary

FCS No.: 5400

C P No.: 4815

PR. No: I2002AP308000 (5725/2024)

UDIN: F005400H000342506

Date: May 12, 2026

Place: Hyderabad

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

Annexure

To
The Members,
RAINBOW CHILDREN'S MEDICARE LIMITED
Hyderabad

My report of even date is to be read along with this letter.

1. Maintenance of Secretarial records is the responsibility of the Management of the Company. My responsibility is to express an opinion on these secretarial records based on our audit.
2. I have followed the audit practices and process as were appropriate to obtain reasonable assurance about the correctness of the contents of the Secretarial records. The verification was done on a test basis to ensure that correct facts are reflected in secretarial records. I believe that the processes and practices we follow provided a reasonable basis for our opinion.
3. I have not verified the correctness and appropriateness of financial records and Books of Accounts of the Company.
4. Wherever required, I have obtained the Management representation about the compliance of laws, rules and regulations and happening of events etc.
5. The compliance of the provisions of Corporate and other applicable laws, rules, regulations, standards is the responsibility of the management. My examination was limited to the verification of procedures on a test basis.
6. The Secretarial Audit report is neither an assurance as to the future viability of the Company nor of the efficacy or effectiveness with which the Management has conducted the affairs of the Company.
7. I further report that, based on the information provided by the Company, its officers, authorized representatives during the conduct of the audit, in my opinion adequate systems and process and control mechanism exists in the Company to monitor compliance with applicable laws
8. I further report that the compliance by the Company of applicable fiscal laws like Direct & Indirect tax laws, Labour Laws, General and other specific Laws as may be applicable to the Company, have not been reviewed in this audit since the same has been subject to review by the statutory financial audit and other designated professionals.

K.V.S. Subramanyam
Practicing Company Secretary
FCS No.: 5400
C P No.: 4815
PR. No: I2002AP308000 (5725/2024)
UDIN: F005400H000342506

Date: May 12, 2026

Place: Hyderabad

ANNEXURE – 5

ANNUAL REPORT ON CSR ACTIVITIES

1. Brief outline on CSR Policy of the Company:

The Company approach towards Corporate Social Responsibility (“CSR”) is based upon its core values, which include fostering inclusive growth by sharing some of the wealth we create with the society at large. CSR has always been and shall always be an integral and strategic part of our business process. It is a vital constituent of our Company’s commitment to sustainability. True to the spirit of our vision, we strive to utilize the potential of human and natural capital around us in a manner that facilitates social, economic and environmental progress. The Company aims to be a good corporate citizen by subscribing to the principles of integrating its economic, environmental and social objectives, and effectively utilizing its own

resources towards improving the quality of life and building capacities of the local communities, society at large and various Stakeholders.

In accordance with the Companies Act, 2013, your Company has committed 2% (Average Net Profit) annually towards CSR initiatives. The CSR Policy of your Company outlines the approach and direction given by the Board, taking into account the recommendations of its CSR & ESG Committee, and includes guiding principles for selection, implementation and monitoring of CSR activities as well as formulation of the CSR annual action plan. Our CSR Activities focus on promoting Health care, Education, Sports and Rural & Skill Development programmes.

2. Composition of CSR & ESG Committee:

The CSR & ESG Committee comprises of following members as on March 31, 2026:

Sl. No	Name of Director	Designation/ Nature of Directorship	Number of meetings of CSR & ESG Committee held during the year	Number of meetings of CSR & ESG Committee attended during the year
1.	Dr. Anil Dhawan	Chairman (Independent Director)	1	1
2.	Dr. Ramesh Kancharla	Member (Chairman & Managing Director)	1	1
3.	Dr. Dinesh Kumar Chirla	Member (Whole-time Director)	1	1
4.	Dr. Adarsh Kancharla	Member (Non – Executive Director)	1	1
5.	Mr. Santanu Mukherjee	Member (Independent Director)	1	1
6.	Ms. Sundari R. Pisupati	Member (Independent Director)	1	0

3. The web-link(s) where Composition of CSR & ESG Committee, CSR policy and CSR projects approved by the board are disclosed on the website of the company are provided below:

Composition of the CSR & ESG Committee:	https://www.rainbowhospitals.in/investors-relations/board-&-board-committees
CSR Policy:	https://d31scedd5hpubp.cloudfront.net/investor_files/CSR_Policy.pdf
CSR Projects as approved by the Board:	https://d31scedd5hpubp.cloudfront.net/investor_files/csr-projects-approved-by-the-board-fy-2025-26.pdf

4. Executive summary along with the web-link(s) of Impact assessment of CSR projects carried out in pursuance of sub-rule (3) of rule 8 of the companies (Corporate Social Responsibility Policy) Rules, 2014, if applicable:

Not Applicable.

5. (a) Average net profits of the Company as per sub-section (5) of section 135: ₹ 2,83,49,63,360/-
 (b) Two percent of average net profit of the Company as per sub-section (5) of section 135: ₹ 5,66,99,267/-
 (c) Surplus arising out of the CSR projects or programmes or activities of the previous Financial Years – Nil
 (d) Amount required to be set off for the Financial Year, if any – Nil
 (e) Total CSR obligation for the Financial Year [(b)+(c)-(d)]. – ₹ 5,66,99,267/-
6. (a) Amount spent on CSR Projects (both Ongoing Project and other than Ongoing Project): ₹ 87,72,300/-
 (b) Amount spent in Administrative Overheads: ₹ 17,96,710/-
 (c) Amount spent on Impact Assessment, if applicable: Nil
 (d) Total amount spent for the Financial Year [(a)+(b)+(c)]: ₹ 1,05,69,010/-
 (e) CSR amount spent or unspent for the Financial Year:

Total Amount Spent for the Financial Year (In ₹)	Amount Unspent (In ₹)				
	Total Amount transferred to Unspent CSR Account as per section 135(6).		Amount transferred to any fund specified under Schedule VII as per second proviso to sub-section (5) of section 135.		
	Amount	Date of Transfer	Name of the Fund	Amount	Date of Transfer
₹ 1,05,69,010/-	₹ 4,61,30,257/-	April 29, 2026	Not Applicable	Nil	Not Applicable

- (f) Excess amount for set-off, if any:

Sl. No	Particular	Amount (In ₹)
(i)	Two percent of average net profit of the company as per subsection (5) of section 135	5,66,99,267
(ii)	Total amount spent for the Financial Year	1,05,69,010
(iii)	Excess amount spent for the Financial Year [(ii)-(i)]	Nil
(iv)	Surplus arising out of the CSR projects or programmes or activities of the previous Financial Years, if any	Nil
(v)	Amount available for set off in succeeding Financial Years [(iii)-(iv)]	Nil

7. Details of Unspent Corporate Social Responsibility amount for the preceding three Financial Years:

1	2	3	4	5	6	7	8	
Sl. No	Preceding Financial Year(s)	Amount transferred to Unspent CSR Account under sub-section (6) of section 135 (in ₹)	Balance Amount in Unspent CSR Account under sub-section (6) of section 135 (in ₹)	Amount spent in the Financial Year (in ₹)	Amount transferred to a Fund as specified under Schedule VII as per second proviso to sub-section (5) of section 135, if any		Amount remaining to be spent in succeeding Financial Years (in ₹)	Deficiency, if any
					Amount	Date of transfer.		
1.	2023-24	2,18,00,000	2,18,00,000	-	NA	NA	2,18,00,000	-
2.	2024-25	4,42,57,586	6,60,57,586	-	NA	NA	6,60,57,586	-

8. Whether any capital assets have been created or acquired through Corporate Social Responsibility amount spent in the Financial Year:

Yes No

If Yes, enter the number of Capital assets created/ acquired: **Not Applicable.**

Furnish the details relating to such asset(s) so created or acquired through Corporate Social Responsibility amount spent in the Financial Year:

Sl. No	Short particulars of the property or asset(s) [including complete address and location of the property]	Pincode of the property or asset(s)	Date of creation	Amount of CSR Amount spent	Details of Company/ Authority/ beneficiary of the registered owner		
					CSR Registration Number, if applicable	Name	Registered address
(1)	(2)	(3)	(4)	(5)	(6)		
Not Applicable							

(All the fields should be captured as appearing in the revenue record, flat no, house no, Municipal Office/Municipal Corporation/ Gram panchayat are to be specified and also the area of the immovable property as well as boundaries).

9. Specify the reason(s), if the company has failed to spend two per cent of the average net profit as per sub-section (5) of section 135. Not Applicable

For **Rainbow Children's Medicare Limited**

Dr. Ramesh Kancharla
Chairman and Managing Director
DIN: 00212270

Place: Hyderabad
Date: May 23, 2026

Dr. Anil Dhawan
Chairman of CSR & ESG Committee
DIN: 08191702

Place: London, UK
Date: May 23, 2026

Report on Corporate Governance

I. COMPANY'S PHILOSOPHY ON CORPORATE GOVERNANCE

Corporate Governance is integral to the Company's commitment to delivering safe, ethical and high quality healthcare while creating sustainable value for all stakeholders, including patients, employees, medical professionals, investors, regulators and communities. The Company's governance framework is founded on the principles of integrity, transparency, accountability, fairness and responsible stewardship, supported by robust systems, processes and controls.

The Company views corporate governance not merely as a regulatory obligation but as a strategic framework that enables clinical excellence, patient safety, operational effectiveness and stakeholder confidence. Its governance practices facilitate effective oversight of clinical quality, risk management, regulatory compliance, financial discipline and ethical conduct, ensuring resilience and sustainability in a dynamic healthcare environment.

The Company's governance philosophy is guided by a strong commitment to ethical business practices, transparent decision-making, equitable stakeholder engagement and responsible corporate citizenship. Accountability is embedded across clinical, operational and administrative functions, fostering a culture of ownership, professionalism and continuous improvement.

The Company remains committed to upholding the highest standards of Corporate Governance in both letter and spirit. Through a robust governance structure, effective internal controls, enterprise risk management practices and timely disclosures, the Company seeks to safeguard stakeholder interests, strengthen organizational resilience and support sustainable value creation while advancing its patient centric healthcare mission.

II. GOVERNANCE STRUCTURE



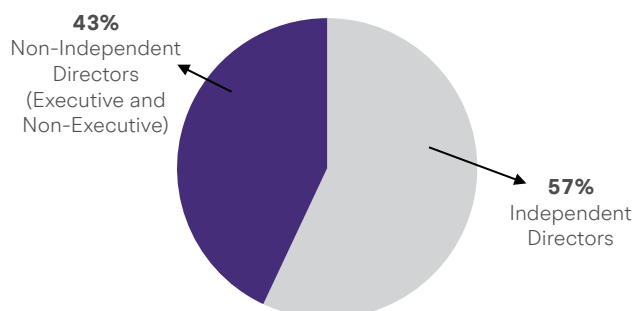
III. BOARD OF DIRECTORS

Our Board composition comprises of experts in various domains such as Corporate Governance, Healthcare Industry, Legal & Compliances, Information Technology, Finance & Accounts, Risk Management, ESG & Sustainability and HR Management. Our Board has an appropriate mix of Executive, Non – Executive and Independent Director(s) to maintain its independence and separate its functions of governance and management.

As on March 31, 2026, the Board comprised seven (7) Directors, including one Woman Director. The composition of the Board consisted of two (2) Executive Directors, one (1) Non-Executive Non-Independent Director and four (4) Independent Directors, including one Woman Independent Director.

The composition of the Board is in conformity with Regulation 17 of the SEBI Listing Regulations read with Section 149 and 152 of the Act.

Composition of Board



None of the Directors on the Board:

- holds directorships in more than ten (10) public companies, as prescribed under Section 165 of the Companies Act, 2013.
- holds directorships in more than seven (7) listed entities.
- serves as an Independent Director in more than seven (7) listed entities.
- being a Whole-time Director or Managing Director of the Company, serves as an Independent Director in any other listed entity.
- is a member of more than ten (10) committees or acts as Chairperson of more than five (5) committees across all public companies, whether listed or unlisted, in which such Director holds office.

Necessary disclosures regarding Committee positions in other public companies as on March 31, 2026 have been made by the Directors. None of the Directors of the Company are inter se related, except Dr. Ramesh Kancharla and Dr. Adarsh Kancharla, who are related to each other as father and son, respectively.

Independent Directors & Familiarisation Programme:

The Independent Directors of the Company are Non-Executive Directors and satisfy the criteria of independence prescribed under Regulation 16(1)(b) of the SEBI Listing Regulations and Section 149(6) of the Act, read with the rules made thereunder. Pursuant to Regulation 25(8) of the SEBI Listing Regulations, the Independent Directors have submitted declarations confirming that they are not aware of any circumstances or situations that exist or may reasonably be anticipated to arise which could impair

their ability to perform their duties independently and objectively.

The Board has taken on record the declarations and confirmations received from the Independent Directors and, after due assessment, is of the opinion that all Independent Directors fulfil the conditions specified under Section 149(6) of the Act and Regulation 16(1) (b) of the SEBI Listing Regulations and continue to remain independent of the management.

In accordance with the provisions of Section 150 of the Act read with Rule 6 of the Companies (Appointment and Qualification of Directors) Rules, 2014, all Independent Directors have registered their names in the databank maintained by the Indian Institute of Corporate Affairs.

The Company conducts Familiarization Programme for Independent Directors to provide them an opportunity to familiarize with the Company, its management and its operations so as to gain a clear understanding of their roles and responsibilities. They have full opportunity to interact with Senior Management Personnel and are provided all documents required and sought by them for enabling them to have a good understanding of the Company, its various operations and the industry of which it is a part.

The details of familiarisation programmes imparted to the Independent Directors of the Company have been disclosed on the website of the Company and can be accessed through the following link at:

https://d31scedd5hpupb.cloudfront.net/investor_files/Familiarisation_Programme_for_Independent_Directors_-_FY_2025-26.pdf

Meetings & Attendance

During the Financial Year 2025-26, six (6) meetings of the Board of Directors were convened and held. The gap between any two consecutive meetings was within the period prescribed under the Companies Act, 2013 and the SEBI Listing Regulations. The requisite quorum was present throughout all the meetings.

To enable effective participation and facilitate attendance from different locations, the Company provided video conferencing and other audio-visual facilities in compliance with the applicable statutory requirements.

S. No	Name and Category	Date of Board Meetings						Attendance
		May 24, 2025	July 26, 2025	August 11, 2025	November 13, 2025	January 28, 2026	March 28, 2026	
1	Ramesh Kancharla (CMD) (PED)							100%
2	Chirla Padmarao Dinesh Kumar (PED)							100%
3	Aluri Rao Srinivasa (IDNE)							100%
4	Anil Dhawan (IDNE)							83.33%
5	Santanu Mukherjee (IDNE)							100%
6	Sundari Raviprasad Pisupati (IDNE)							83.33%
7	Adarsh Kancharla (PNED)							50%

Attended in person Attended through video conference Leave of absence

(CMD) Chairman & Managing Director, (PED) Promoter Executive Director, (IDNE) Independent Non-Executive Director, (PNED) Promoter Non-Executive Director

During the Financial Year 2025-26, all agenda items required to be placed before the Board in terms of applicable laws, regulations and governance practices were periodically presented and deliberated upon. The Board reviewed matters relating to strategy, business performance, financial results, corporate governance, risk management, regulatory compliance and other significant operational matters.

The Board also reviewed compliance reports on applicable laws and regulations and took note of the recommendations and decisions of the Committees of the Board from time to time.

Independent Directors' Meetings and Attendance

Pursuant to Schedule IV of the Companies Act, 2013 and Regulation 25(3) of the SEBI Listing Regulations, a separate meeting of the Independent Directors was held on March 28, 2026, without the presence of the Executive Directors and members of the management.

During the meeting, the Independent Directors reviewed the performance of the Board as a whole, the Chairman and Non-Independent Directors and assessed the quality, quantity and timeliness of information flow between the management and the Board for effective discharge of their duties.

Name of the IDs	28-03-2026	Attendance
Mr. Aluri Srinivasa Rao		100%
Dr Anil Dhawan		100%
Mr. Santanu Mukherjee		100%
Mr. Sundari R Pisupati		100%

Attended through video conference

Details of the Board of Directors, Directorships and Committee Chairpersonships / Memberships in other Companies as on March 31, 2026 are given below:

Name of Director	Category#	Attendance Particulars			No. of other Directorships and Committee Memberships/ Chairmanships			Name of the Listed Companies where Company's Director is also a Director	
		Board Meetings		Last AGM held on 05.07.2025	Other Directorships*	Committee Memberships**	Committee Chairmanships**	Name of Listed Company	Category of Directorship
		Entitled	Attended						
Dr. Ramesh Kancharla (DIN: 00212270)	Chairman & PED	6	6	Yes	6	2	-	-	-
Dr. Dinesh Kumar Chirla (DIN: 01395841)	PED	6	6	Yes	6	-	-	-	-
Dr. Adarsh Kancharla (DIN: 08302615)	PNED	6	3	Yes	1	-	-	-	-
Mr. Aluri Srinivasa Rao (DIN: 00147058)	IDNE	6	6	No	1	2	-	-	-
Dr. Anil Dhawan (DIN: 08191702)	IDNE	6	5	Yes	1	2	-	-	-
Mr. Santanu Mukherjee (DIN: 07716452)	IDNE	6	6	Yes	8	8	5	1. Suven Life Sciences Limited	IDNE
								2. Sumedha Fiscal Services Limited	IDNE
								3. Aurobindo Pharma Ltd	IDNE
Ms. Sundari R. Pisupati (DIN: 01908852)	IDNE	6	5	Yes	4	5	2	-	-

PED - Promoter Executive Director, PNED – Promoter Non-Executive Director, IDNE - Independent Non-Executive Director,

Notes:

* Includes Rainbow Children's Medicare Limited but excludes Private Companies, High value debt listed companies, Foreign Companies and Companies under Section 8 of the Companies Act, 2013.

** For the purpose of considering the limit of Committee Memberships and Chairmanships of a Director, Audit Committee and Stakeholders Relationship Committee of Rainbow Children's Medicare Limited and other Indian Public Companies have only been considered.

Includes only equity listed Companies and high value debt listed entities.

Shareholding of Non-Executive Directors of the Company as on March 31, 2026

The shareholding of Non-Executive Directors as on March 31, 2026 is as follows:

S. No	Name of the Director	Category#	No. of Equity Shares held
1	Dr. Adarsh Kancharla	PNED	61,10,432
2	Mr. Aluri Srinivasa Rao	IDNE	Nil
3	Dr. Anil Dhawan	IDNE	Nil
4	Mr. Santanu Mukherjee	IDNE	Nil
5	Ms. Sundari R. Pisupati	IDNE	Nil

PNED – Promoter Non-Executive Director, IDNE - Independent Non-Executive Director.

As on March 31, 2026, none of the Non-Executive Directors of the Company were holding any convertible instruments in the Company.

Core skills/ expertise/ competencies of Board of Directors

In context of your Company's business and sector, the Board of Directors have identified the following:

- i. Core skills/ expertise/ competencies for it to function effectively
- ii. Directors who possess such core skills/ expertise/ competencies

S. No	Skills/ Expertise/ Competencies	Brief Descriptions
1	Leadership Experience	Strong management and leadership experience in leading well-governed large organization in the areas of business development, strategic planning and mergers & acquisitions and have visionary with strategic goal for the Company to identify possible road maps, inspire and motivate the strategy, approach, processes and other such key deliverables and mentor the leadership team to channelize its energy/ efforts in appropriate direction and thought to be a leader and a role model in good governance and ethical conduct of business, while encouraging the organisation to maximise stakeholders' value having hands on experience of leading an entity at the highest level.
2	Industry knowledge and experience	In-depth knowledge in the Healthcare Industry.
3	Information Technology	Information Technology expertise with knowledge of current and emerging technologies.
4	Governance including legal compliance	Experience in developing and implementing good corporate governance practices, maintaining accountability of Board and its management, managing stakeholders interest and responsibility towards customers, employees, suppliers, regulatory bodies etc. to support the Company's legal compliance systems and governance policies/ practices.
5	Expertise/ Experience in Finance/ Risk Management areas	Knowledge and skills in accounting and finance, business judgment, general management practices and processes, crisis response and management, industry knowledge, macro- economic perspectives, human resources, labour laws, international markets, sales and marketing, and risk management.
6	ESG & Sustainability	Experienced in overseeing ESG & Sustainability matters, including Corporate Social Responsibility, while possessing understanding of diverse and global sustainability and ESG practices, enabling effective alignment with the Company's growth strategy.
7	Human Resource management	Experience in the Human Resource Management with understanding of employment laws.

Given below is a list of core skills, expertise and competencies of the individual Directors

Name of Director(s)	Skills/ Expertise/ Competencies						
	Leadership Experience	Industry knowledge and experience	Information Technology	Governance including legal compliance	Expertise/ Experience in Finance / Risk Management areas	ESG & Sustainability	Human Resource Management
Dr. Ramesh Kancharla	√	√	√	√	√	√	√
Dr. Dinesh Kumar Chirla	√	√	√	√	√	√	√
Dr. Adarsh Kancharla	-	√	√	√	√	√	-
Mr. Aluri Srinivasa Rao	√	√	√	√	√	√	√
Dr. Anil Dhawan	√	√	√	√	√	√	√
Ms. Sundari R. Pisupati	√	-	√	√	√	√	√
Mr. Santanu Mukherjee	√	-	√	√	√	√	√

IV. BOARD COMMITTEES:

































To enable focused deliberations and strengthen oversight across key areas of governance and business operations, the Board had constituted seven (7) Committees as on March 31, 2026. These comprise five (5) statutory committees constituted in compliance with the requirements of the Companies Act, 2013 and the SEBI Listing Regulations, and two (2) non-statutory committees constituted by the Board to support strategic, financial and governance oversight.

The statutory committees of the Board are the Audit Committee, Corporate Social Responsibility (CSR) & ESG Committee, Nomination and Remuneration Committee, Stakeholders' Relationship Committee and Risk Management Committee. These Committees assist the Board in discharging its responsibilities in areas requiring focused review and oversight.

In addition to the statutory committees, the Board has constituted the Business Strategy & Investment Committee and the Treasury Management Committee.

Further, subsequent to the close of the Financial Year, the Board constituted the Those Charged With Governance (TCWG) Committee in line with the requirements of the National Financial Reporting Authority (NFRA) relating to communication between the Statutory Auditors and Those Charged With Governance.

The composition of the Board Committees as on March 31, 2026, is provided below:

Name	Designation	Audit Committee	Risk Management Committee	Nomination & Remuneration Committee	Stakeholders Relationship Committee	CSR & ESG Committee	Treasury Management Committee	Business Strategy & Investment Committee
Mr. Aluri Srinivasa Rao	Independent Director					-	-	-
Dr. Anil Dhawan	Independent Director		-				-	-
Mr. Santanu Mukherjee	Independent Director				-			
Ms. Sundari R. Pisupati	Independent Director		-				-	
Dr. Ramesh Kancharla	Chairman & Managing Director	-		-				
Dr. Dinesh Kumar Chirla	Whole-time Director	-	-	-	-		-	-
Dr. Adarsh Kancharla	Non-Executive Director	-		-	-		-	-
Mr. Vikas Maheshwari	Chief Financial Officer (KMP)	-		-	-	-		-
Mr. Abrarali Dalal	Chief Executive Officer (KMP)	-		-	-	-	-	
Ms. Shreya Mitra	Company Secretary and Compliance Officer (KMP)	-	-	-	-	-	-	-
Mr. Srinath Metla	Chief Strategy and Growth Officer	-		-	-	-	-	-

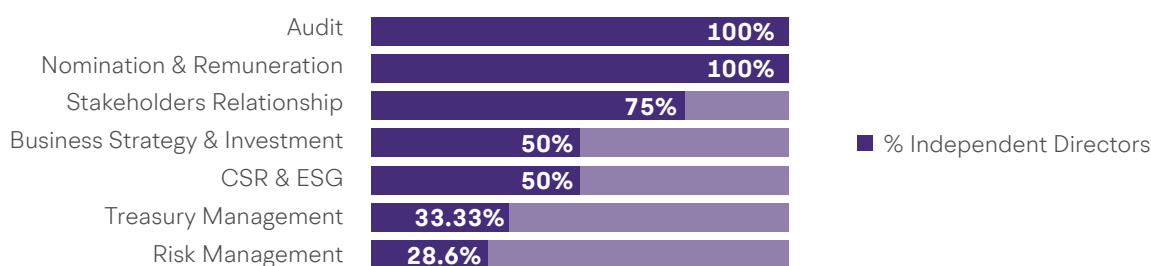


Chairperson



Member

Committees of the board



A. AUDIT COMMITTEE:

Your Company has duly constituted Audit Committee, and its composition meets the requirements of Section 177 of the Act and Regulation 18 of the SEBI Listing Regulations.

All members of the Committee are financially literate and have accounting or related financial management expertise.

During the Financial Year 2025-26, the Audit Committee met 5 (Five) times on May 24, 2025, July 26, 2025, August 11, 2025, November 13, 2025, and January 28, 2026.

The composition of the Audit Committee and the attendance details of the members as on March 31, 2026, are given below: -

Name of the members	Category*	Position	May 24, 2025	July 26, 2025	August 11, 2025	November 13, 2025	January 28, 2026	Attendance
Mr. Santanu Mukherjee	IDNE	Chairman						100%
Mr. Aluri Srinivasa Rao	IDNE	Member						100%
Dr. Anil Dhawan	IDNE	Member						100%
Ms. Sundari R. Pisupati	IDNE	Member						80%

Attended in person
 Attended through video conference
 Leave of absence

*IDNE – Independent Non-Executive Director.

Ms. Shreya Mitra, Company Secretary & Compliance Officer of the Company is the Secretary of the Committee.

In addition to the members of Audit Committee, these meetings are also attended by Chairman & Managing Director, Whole-time Director, Non-Executive Director, Chief Operating Officer, Chief Financial Officer, Internal Auditors, Statutory Auditors and other executives considered necessary for providing inputs to the Committee.

Terms of reference

The terms of reference, inter-alia, includes the following:

- (i) The Audit Committee shall have powers, which should include the following:
- To investigate any activity within its terms of reference;
 - To seek information from any employee of the Company;
 - To obtain outside legal or other professional advice;
 - To secure attendance of outsiders with relevant expertise if it considers necessary; and
 - Such powers as may be prescribed under the Companies Act and SEBI Listing Regulations.

- (ii) The role of the Audit Committee shall include the following:

- Oversight of the Company's financial reporting process, examination of the financial statement and the auditors' report thereon and the disclosure of its financial information to ensure that the financial statement is correct, sufficient and credible;
- Recommendation for appointment, re-appointment and replacement, remuneration and terms of appointment of auditors, including the internal auditor, cost auditor and statutory auditor, of the Company and the fixation of audit fee;
- Approval of payments to statutory auditors for any other services rendered by the statutory auditors of the Company;
- Reviewing with the management, the annual financial statements and auditor's report thereon before submission to the Board for approval, with particular reference to:
 - Matters required to be included in the Director's Responsibility Statement to be included in the Board's report in terms of clause (c) of sub-section 3 of section 134 of the Companies Act, 2013;
 - Changes, if any, in accounting policies and practices and reasons for the same;

- (iii)** Major accounting entries involving estimates based on the exercise of judgment by the management of the Company;
 - (iv)** Significant adjustments made in the financial statements arising out of audit findings;
 - (v)** Compliance with listing and other legal requirements relating to financial statements;
 - (vi)** Disclosure of any related party transactions; and
 - (vii)** Qualifications / modified opinion(s) in the draft audit report.
- (e)** Reviewing, with the management, the quarterly, half yearly and annual financial statements before submission to the board for approval;
 - (f)** Reviewing, with the management, the statement of uses/application of funds raised through an issue (public issue, rights issue, preferential issue, etc.), the statement of funds utilised for purposes other than those stated in the issue document/prospectus/notice and the report submitted by the monitoring agency monitoring the utilisation of proceeds of a public or rights issue, and making appropriate recommendations to the Board to take up steps in this matter;
 - (g)** Reviewing and monitoring the auditor's independence and performance, and effectiveness of audit process;
 - (h)** Formulating a policy on related party transactions, which shall include materiality of related party transactions;
 - (i)** Approval or any subsequent modification of transactions of the Company with related parties and omnibus approval for related party transactions proposed to be entered into by the Company subject to such conditions as may be prescribed;
 - (j)** Review, at least on a quarterly basis, the details of related party transactions entered into by the Company pursuant to each of the omnibus approvals given;
 - (k)** Scrutiny of inter-corporate loans and investments;
 - (l)** Undertaking or supervising valuation of undertakings or assets of the company, wherever it is necessary;
 - (m)** Evaluation of internal financial controls and risk management systems;
 - (n)** Reviewing, with the management, performance of statutory and internal auditors, adequacy of the internal control systems;
 - (o)** Reviewing the adequacy of internal audit function, if any, including the structure of the internal audit department, staffing and seniority of the official heading the department, reporting structure coverage and frequency of internal audit;
 - (p)** Discussion with internal auditors of any significant findings and follow up thereon;
 - (q)** Reviewing the findings of any internal investigations by the internal auditors into matters where there is suspected fraud or irregularity or a failure of internal control systems of a material nature and reporting the matter to the Board;
 - (r)** Discussion with statutory auditors before the audit commences, about the nature and scope of audit as well as post-audit discussion to ascertain any area of concern;
 - (s)** Looking into the reasons for substantial defaults in the payment to the depositors, debenture holders, shareholders (in case of non-payment of declared dividends) and creditors;
 - (t)** Recommending to the board of directors the appointment and removal of the external auditor, fixation of audit fees and approval for payment for any other services;
 - (u)** Reviewing the functioning of the whistle blower mechanism;
 - (v)** Approval of the appointment of the Chief Financial Officer of the Company ("CFO") (i.e., the whole-time finance director or any other person heading the finance function or discharging that function) after assessing the qualifications, experience and background, etc., of the candidate;
 - (w)** Carrying out any other functions as provided under the provisions of the Companies Act, 2013 the SEBI Listing Regulations and other applicable laws;
 - (x)** To formulate, review and make recommendations to the Board to amend the Terms of Reference of Audit Committee from time to time;

- (y) Establishing a vigil mechanism for directors and employees to report their genuine concerns or grievances;
- (z) Carrying out any other function as is mentioned in the terms of reference of the Audit Committee;
- (aa) Reviewing the utilization of loans and/or advances from/investment by the Company in the subsidiaries exceeding rupees 100 crore or 10% of the asset size of the subsidiary, whichever is lower including existing loans / advances / investments existing as on the date of coming into force of this provision;
- (bb) To consider and comment on rationale, cost-benefits and impact of schemes involving merger, demerger, amalgamation etc. on the Company and its shareholders and;
- (cc) Carrying out any other functions as may be required / mandated and/or delegated by the Board as per the provisions of the Companies Act, 2013, SEBI Listing Regulations, uniform listing agreements and/or any other applicable laws or by any regulatory authority and performing such other functions as may be necessary or appropriate for the performance of its duties.
- (iii) The Audit Committee shall mandatorily review the following information:
- (a) Management's discussion and analysis of financial condition and results of operations;
- (b) Statement of significant related party transactions (as defined by the Audit Committee), submitted by the management of the Company;
- (c) Management letters/letters of internal control weaknesses issued by the statutory auditors of the Company;
- (d) Internal audit reports relating to internal control weaknesses;
- (e) The appointment, removal and terms of remuneration of the chief internal auditor;
- (f) Statement of deviations:
- quarterly statement of deviation(s) including report of monitoring agency, if applicable, submitted to stock exchange(s) in terms of Regulation 32(1) of the SEBI Listing Regulations; and
 - annual statement of funds utilised for purposes other than those stated in the issue document/prospectus/notice in terms of Regulation 32(7) of the SEBI Listing Regulations;
- (g) To review the financial statements, in particular, the investments made by any unlisted subsidiary; and
- (h) Such information as may be prescribed under the Companies Act and SEBI Listing Regulations.

B. NOMINATION & REMUNERATION COMMITTEE

Your Company has a duly constituted Nomination & Remuneration Committee, and its composition meets the requirements of Section 178 of the Act and Regulation 19 of the SEBI Listing Regulations.

During the Financial Year 2025-26, the Committee met 4 (Four) times on May 24, 2025, July 26, 2025, November 13, 2025, and January 28, 2026.

The composition of the Nomination & Remuneration Committee and the attendance details of the members as on March 31, 2026, are given below: -

Name of the members	Category*	Position	May 24, 2025	July 26, 2025	November 13, 2025	January 28, 2026	Attendance
Mr. Aluri Srinivasa Rao	IDNE	Chairman					100%
Dr. Anil Dhawan	IDNE	Member					100%
Mr. Santanu Mukherjee	IDNE	Member					100%
Ms. Sundari R. Pisupati	IDNE	Member					100%



Attended in person



Attended through video conference



Leave of absence

*IDNE – Independent Non-Executive Director.

Ms. Shreya Mitra, Company Secretary & Compliance Officer of the Company is the Secretary of the Committee.

Terms of Reference

The terms of reference of the Nomination & Remuneration Committee, inter alia, includes the following:

- (a)** Formulation of the criteria for determining qualifications, positive attributes and independence of a director and recommend to the Board a policy, relating to the remuneration of the directors, key managerial personnel and other employees;

The Nomination and Remuneration Committee, while formulating the above policy, should ensure that:

- (i)** the level and composition of remuneration be reasonable and sufficient to attract, retain and motivate directors of the quality required to run our Company successfully;
 - (ii)** relationship of remuneration to performance is clear and meets appropriate performance benchmarks; and
 - (iii)** remuneration to directors, key managerial personnel and senior management involves a balance between fixed and incentive pay, reflecting the short and long term performance objectives appropriate to the working of the Company and its goals.
- (b)** Formulation of criteria for evaluation of performance of independent directors and the Board;
 - (c)** Devising a policy on Board diversity;
 - (d)** Identifying persons who are qualified to become directors of the Company and who may be appointed in senior management in accordance with the criteria laid down, and recommend to the Board their appointment and removal. The Company shall disclose the remuneration policy and the evaluation criteria in its annual report;
 - (e)** Analysing, monitoring and reviewing various human resource and compensation matters, including the compensation strategy;
 - (f)** Determining the Company's policy on specific remuneration packages for executive directors including pension rights and any compensation payment.
 - (g)** Recommending the remuneration, in whatever form, payable to non-executive directors and the senior management personnel and other staff (as deemed necessary);

- (h)** Reviewing and approving compensation strategy from time to time in the context of the then current Indian market in accordance with applicable laws;
- (i)** Determining whether to extend or continue the term of appointment of the independent director, on the basis of the report of performance evaluation of independent directors;
- (j)** Perform such functions as are required to be performed by the compensation committee under the Securities and Exchange Board of India (Share Based Employee Benefits and Sweat Equity) Regulations, 2021;
- (k)** Administering the employee stock option scheme/ plan approved by the Board and shareholders of the Company in accordance with the terms of such scheme/plan ("ESOP Scheme") including the following:
 - i.** Determining the eligibility of employees to participate under the ESOP Scheme;
 - ii.** Determining the quantum of option to be granted under the ESOP Scheme per employee and in aggregate;
 - iii.** Date of grant;
 - iv.** Determining the exercise price of the option under the ESOP Scheme;
 - v.** The conditions under which option may vest in employee and may lapse in case of termination of employment for misconduct;
 - vi.** The exercise period within which the employee should exercise the option and that option would lapse on failure to exercise the option within the exercise period;
 - vii.** The specified time period within which the employee shall exercise the vested option in the event of termination or resignation of an employee;
 - viii.** The right of an employee to exercise all the options vested in him at one time or at various points of time within the exercise period;
 - ix.** Re-pricing of the options which are not exercised, whether or not they have been vested if stock option rendered unattractive due to fall in the market price of the equity shares;
 - x.** The grant, vest and exercise of option in case of employees who are on long leave;
 - xi.** Allow exercise of unvested options on such terms and conditions as it may deem fit;
 - xii.** The procedure for cashless exercise of options;

- xiii. Forfeiture/ cancellation of options granted;
 - xiv. Formulating and implementing the procedure for making a fair and reasonable adjustment to the number of options and to the exercise price in case of corporate actions such as rights issues, bonus issues, merger, sale of division and others. In this regard following shall be taken into consideration:
 - the number and the price of stock option shall be adjusted in a manner such that total value of the option to the employee remains the same after the corporate action;
 - for this purpose, global best practices in this area including the procedures followed by the derivative markets in India and abroad may be considered; and the vesting period and the life of the options shall be left unaltered as far as possible to protect the rights of the employee who is granted such option.
- (l) Construing and interpreting the employee stock option scheme/plan approved by the Board and shareholders of the Company in accordance with the terms of such scheme/plan (“**ESOP Scheme**”) and any agreements defining the rights and obligations of the Company and eligible employees under the ESOP Scheme, and prescribing, amending and/or rescinding rules and regulations relating to the administration of the ESOP Scheme;
- (m) Framing suitable policies, procedures and systems to ensure that there is no violation of securities laws, as amended from time to time, including:
- a. the Securities and Exchange Board of India (Prohibition of Insider Trading) Regulations, 2015, as amended; and
 - b. the Securities and Exchange Board of India (Prohibition of Fraudulent and Unfair Trade Practices Relating to the Securities Market) Regulations, 2003, as amended, by the Company and its employees, as applicable;
- (n) Performing such other activities as may be delegated by the Board of Directors and/or are statutorily prescribed under any law be attended to by the Nomination and Remuneration Committee; and
- (o) Such terms of reference as may be prescribed under the Companies Act, SEBI Listing Regulations or other applicable laws or by any other regulatory authority.

Performance evaluation

The annual performance evaluation of the Board, its Committees and individual Directors for

FY 2025-26 was conducted in accordance with the provisions of the Companies Act, 2013 and the SEBI Listing Regulations. The evaluation was carried out through a structured framework and questionnaire approved by the Nomination and Remuneration Committee, covering various aspects including Board composition, governance effectiveness, strategic oversight, participation in deliberations and discharge of responsibilities.

A separate meeting of the Independent Directors was held on March 28, 2026, in compliance with the applicable statutory requirements. During the meeting, the Independent Directors reviewed the performance of the Board as a whole, the Chairperson and Non-Independent Directors, and assessed the quality, adequacy and timeliness of information flow between the management and the Board.

Further, at its meeting held on March 28, 2026, the Board evaluated its own performance, that of its Committees, individual Directors (including Independent Directors), Key Managerial Personnel and Senior Management Personnel. The performance of the Independent Directors was evaluated by the Board, excluding the Director being evaluated. The outcome of the evaluation affirmed the effective functioning of the Board and its Committees and the continued contribution of the Directors towards strengthening the Company's governance framework.

Additionally, the Board evaluated the performance of Key Managerial Personnel and Senior Management Personnel based on factors such as leadership, preparedness, professional conduct, and achievement of strategic and functional objectives. The Independent Directors' performance was evaluated separately by the Board, excluding the concerned Director to ensure fairness and objectivity.

Further, the evaluation process confirms that the Board and its Committees continue to operate effectively and the performance of the Directors and Chairman is highly satisfactory reflecting a sound governance framework and effective functioning.

Criteria for making payments to Non-Executive Directors

Non-Executive Directors and Independent Directors of the Company are paid sitting fees for attending Board/ Committee Meetings and Independent Directors are also paid Commission within the limits prescribed under the Act and in compliance with the provisions of the SEBI Listing Regulations.

The Company pays sitting fees of ₹75,000 per meeting of the Board and the Audit Committee, and ₹50,000 per meeting of the other Board Committees attended by the Directors.

The Company also pays commission to the Non-Executive Directors, within the overall limit of 1% of the net profits of the Company computed in accordance with the applicable provisions of the Companies Act, 2013, subject to the approval of the Members. The quantum of commission is determined by the Board from time to time based on the recommendation of the Nomination and Remuneration Committee and is distributed among the eligible Non-Executive Directors.





The Nomination and Remuneration Policy of the Company, inter alia, disclosing detailed criteria of making payments to Non-Executive Directors of the Company is placed on Company's website and can be accessed at: https://d31scedd5hpubp.cloudfront.net/investor_files/Nomination_and_Remuneration_PolicyFEB2025.pdf




C STAKEHOLDERS RELATIONSHIP COMMITTEE

Your Company has a duly constituted Stakeholders Relationship Committee and its composition meets the requirements of Section 178 of the Act and Regulation 20 of the SEBI Listing Regulations.

During the Financial Year 2025-26, the Committee met 1 (one) time on October 11, 2025.

The composition of the Stakeholders Relationship Committee and the attendance details of the members as on March 31, 2026, are given below: -

Name of the members	Category*	Position	October 11, 2025	Attendance
Ms. Sundari R. Pisupati	IDNE	Chairman		100%
Dr. Ramesh Kancharla	Chairman & PED	Member		100%
Mr. Aluri Srinivasa Rao	IDNE	Member		100%
Dr. Anil Dhawan	IDNE	Member		100%

 Attended in person
  Attended through video conference
  Leave of absence

*IDNE – Independent Non-Executive Director.

Ms. Shreya Mitra, Company Secretary & Compliance Officer of the Company is the Secretary of the Committee.

Terms of Reference

The terms of reference of the Stakeholders Relationship Committee, inter alia, includes the following:

- (a) Redressal of all security holders' and investors' grievances such as complaints related to transfer of shares, including non-receipt of share certificates and review of cases for refusal of transfer/transmission of shares and debentures, dematerialisation and re-materialisation of shares, non-receipt of balance sheet, non-receipt of declared dividends, non-receipt of annual reports, etc., assisting with quarterly reporting of such complaints and formulating procedures in line with statutory guidelines to ensure speedy disposal of various requests received from shareholders;
- (b) Reviewing of measures taken for effective exercise of voting rights by shareholders;
- (c) Investigating complaints relating to allotment of shares, approval of transfer or transmission of shares, debentures or any other securities;
- (d) Giving effect to all transfer/transmission of shares and debentures, dematerialisation of shares and re-materialisation of shares, split and issue of duplicate/consolidated share certificates, compliance with all the requirements related to shares, debentures and other securities from time to time;
- (e) Reviewing the measures and initiatives taken by the Company for reducing the quantum of unclaimed dividends and ensuring timely receipt of dividend warrants/annual reports/statutory notices by the shareholders of the Company;
- (f) Reviewing the adherence to the service standards by the Company with respect to various services rendered by the Registrar to an Issue and Share Transfer Agent of our Company and to recommend measures for overall improvement in the quality of investor services;
- (g) Carrying out such other functions as may be specified by the Board from time to time or

specified/provided under the Companies Act or SEBI Listing Regulations, or by any other regulatory authority;

- (h) To approve allotment of shares, debentures or any other securities as per the authority conferred / to be conferred to the Committee by the Board of Directors from time to time;
- (i) To approve requests for transfer, transposition, deletion, consolidation, sub-division, change of name, dematerialization, rematerialisation etc. of shares, debentures and other securities;
- (j) To monitor and expedite the status and process of dematerialization and rematerialisation of shares, debentures and other securities of the Company; and
- (k) Such terms of reference as may be prescribed under the Companies Act and SEBI Listing Regulations.

Compliance Officer

Ms. Shreya Mitra, Company Secretary, is the Compliance Officer of the Company. Her contact details are as follows:

Rainbow Children's Medicare Limited
8-2-19/1/A, Dault Arcade,
Road No.11, Banjara Hills,
Hyderabad - 500034, Telangana.
Telephone No: +91 40 49692244
E-mail: companysecretary@rainbowhospitals.in

The details of shareholders' complaints received and resolved during the Financial Year ended March 31, 2026 are given in the table below:













Particulars	No of Investor Complaints
Number of Shareholders' complaints outstanding as at April 1, 2025	0
Number of shareholders' complaints received during the Financial Year	9
Number of shareholders' complaints resolved to the satisfaction of shareholders during the Financial Year	9
Number of pending shareholders' complaints as at March 31, 2026	0

D. RISK MANAGEMENT COMMITTEE

Your Company has duly constituted a Risk Management Committee and its composition meets the requirements of Regulation 21 of the SEBI Listing Regulations.

During the Financial Year 2025-26, the Committee has met 2 (Two) times on October 11, 2025, and March 28, 2026.

The composition of the Risk Management Committee and the attendance details of the Members as on March 31, 2026, are given below:

Name of the members	Category*	Position	October 11,2025	March 28, 2026	Attendance
Mr. Santanu Mukherjee	IDNE	Chairman			100%
Dr. Ramesh Kancharla	Chairman & PED	Member			100%
Dr. Adarsh Kancharla	PNED	Member			0%
Mr. Aluri Srinivasa Rao	IDNE	Member			100%
Mr. Vikas Maheshwari	CFO	Member			100%
Mr. Srinath Metla ¹	CSGO	Member	∅		100%
Mr. Abrarali Dalal ²	CEO	Member	∅		100%



Attended in person



Attended through video conference



Leave of absence

∅ Not applicable

*IDNE - Independent Non-Executive Director; PED - Promoter Executive Director; PNED - Promoter Non-Executive Director; CSGO - Chief Strategy Growth Officer; CFO- Chief Financial Officer; and CEO- Chief Executive Officer.

¹ Appointed as a Member of the Committee w.e.f. November 13, 2025.

² Appointed as a Member of the Committee w.e.f. January 28, 2026.

Ms. Shreya Mitra, Company Secretary & Compliance Officer of the Company is the Secretary of the Committee.

Terms of Reference:-

The terms of reference of the Risk Management Committee, includes the following:

- (a) To periodically review the risk management policy at least once in two years, including by considering the changing industry dynamics and evolving complexity;
- (b) To formulate a detailed risk management policy covering risk across functions and plan integration through training and awareness programmes;
- (c) The policy shall include:
 1. A framework for identification of internal and external risks specifically faced by the listed entity, in particular including financial, operational, sectoral, sustainability (particularly, environment, social and governance related risks), information, cyber security risks or any other risk as may be determined by the committee;
 2. Measures for risk mitigation including systems and processes for internal control of identified risks;
 3. Business continuity plan.
- (d) To approve the process for risk identification and mitigation;
- (e) To decide on risk tolerance and appetite levels, recognizing contingent risks, inherent and residual risks including for cyber security;
- (f) To monitor the Company's compliance with the risk structure. Assess whether current exposure to the risks it faces is acceptable and that there is an effective remediation of non-compliance on an on-going basis;
- (g) To monitor and oversee implementation of the risk management policy, including evaluating the adequacy of risk management systems;
- (h) To ensure that appropriate methodology, processes and systems are in place to monitor

and evaluate risks associated with the business of the Company;







- (i) To approve major decisions affecting the risk profile or exposure and give appropriate directions;
- (j) To consider the effectiveness of decision making process in crisis and emergency situations;
- (k) To balance risks and opportunities;
- (l) To generally, assist the Board in the execution of its responsibility for the governance of risk;
- (m) To keep the board of directors informed about the nature and content of its discussions, recommendations and actions to be taken;
- (n) To consider the appointment, removal and terms of remuneration of the chief risk officer (if any) shall be subject to review by the Risk Management Committee;
- (o) The Risk Management Committee shall have powers to seek information from any employee, obtain outside legal or other professional advice and secure attendance of outsiders with relevant expertise, if it considers necessary;
- (p) The Risk Management Committee shall coordinate its activities with other committees, in instances where there is any overlap with activities of such committees, as per the framework laid down by the board of directors;
- (q) To attend to such other matters and functions as may be prescribed by the Board from time to time; and
- (r) Such terms of reference as may be prescribed under the Companies Act and SEBI Listing Regulations.




E. CSR & ESG COMMITTEE

Your Company has a duly constituted CSR & ESG Committee and its composition meets the requirements of Section 135 of the Act.

During the Financial Year 2025-26, the Committee met 1 (One) time on May 24, 2025.

The composition of the CSR & ESG Committee and the attendance details of the members as on March 31, 2026, are given below: -

Name of the members	Category*	Position	May 24, 2025	Attendance
Dr. Anil Dhawan	IDNE	Chairman		100%
Dr. Ramesh Kancharla	Chairman & PED	Member		100%
Dr. Dinesh Kumar Chirla	PED	Member		100%
Dr. Adarsh Kancharla	PNED	Member		100%
Mr. Santanu Mukherjee	IDNE	Member		100%
Ms. Sundari R. Pisupati	IDNE	Member		0%

 Attended in person
  Attended through video conference
  Leave of absence

*IDNE - Independent Non-Executive Director; PED – Promoter Executive Director; PNED – Promoter Non-Executive Director.

Ms. Shreya Mitra, Company Secretary & Compliance Officer of the Company is the Secretary of the Committee.

Terms of Reference:-

As the name of Corporate Social Responsibility Committee was changed to CSR & ESG Committee, the revised terms of reference of the CSR & ESG Committee, inter alia, includes the following:

CSR:

(a) To formulate and recommend to the Board, a corporate social responsibility policy stipulating, amongst others, the guiding principles for selection, implementation and monitoring the activities as well as formulation of the annual action plan which shall indicate the activities to be undertaken by the Company as specified in Schedule VII of the Companies Act and the rules made thereunder and make any revisions therein as and when decided by the Board, The annual action plan shall include following:

- (i) the list of corporate social responsibility projects or programmes that are approved to be undertaken in areas or subjects specified in Schedule VII of the Companies Act;
- (ii) the manner of execution of such projects or programmes as specified in the rules notified under the Companies Act;
- (iii) the modalities of utilisation of funds and implementation schedules for the projects or programmes;
- (iv) monitoring and reporting mechanism for the projects or programmes; and

(v) details of need and impact assessment, if any, for the projects undertaken by the Company.

- (b) Recommending the amount of expenditure to be incurred, which should be at least 2% of the average net profit of the Company in the three immediately preceding Financial Years or where the Company has not completed the period of three Financial Years since its incorporation, during such immediately preceding Financial Years;
- (c) To identify corporate social responsibility policy partners and corporate social responsibility policy programmes;
- (d) To review and recommend the amount of expenditure to be incurred for the corporate social responsibility activities and the distribution of the same to various corporate social responsibility programmes undertaken by the Company;
- (e) To delegate responsibilities to the corporate social responsibility team and supervise proper execution of all delegated responsibilities;
- (f) To review and monitor the implementation of corporate social responsibility programmes and issuing necessary directions as required for proper implementation and timely completion of corporate social responsibility programmes;
- (g) To perform such other duties and functions as the Board may require the CSR & ESG Committee to undertake to promote the corporate social responsibility activities of the Company and exercise such other powers as may be conferred upon the CSR & ESG Committee in terms of the provisions of Section 135 of the Companies Act;

- (h) To take note of the progress made by implementing agency (if any) appointed for the corporate social responsibility of the Company; and
- (i) Such terms of reference as may be prescribed under the Companies Act and SEBI Listing Regulations.

ESG:

- (a) Review and assess the company's current ESG performance and identify areas of improvements.
- (b) Develop, update and recommend the ESG policies, strategies, and initiatives in alignment with the company's overall business objectives.
- (c) Evaluate and recommend ESG related targets and key performance indicators (KPIs) for the company's operational units.
- (d) Ensure that the ESG strategy is properly reflected in the business planning and budgeting process and that business leaders are clear about their accountability for embedding ESG activities in their respective scorecard goals;
- (e) Identify potential ESG related risks and develop mitigation strategies to address these risks proactively, together with the Risk Management Committee.
- (f) Develop and implement a stakeholder engagement strategy to understand and address the ESG concerns of investors, employees, communities, and other relevant stakeholders.
- (g) Review and noting of the Business Responsibility and Sustainability Report or any other similar report.
- (h) Develop and implement the green & sustainable initiatives to minimize the company's

environmental footprint, including energy efficiency, waste reduction, and sustainable sourcing.

- (i) Monitor the implementation of ESG initiatives, ensuring compliance with relevant regulations & standards.
- (j) Oversee the company's ESG reporting and disclosure, ensuring clear, transparent, and accurate communication of ESG performance to stakeholders.
- (k) Undertake periodic audits and assessments of the company's ESG performance to ensure continuous improvement and adherence to established standards.
- (l) Monitor and respond to emerging regulatory changes related to ESG, ensuring the company remains compliant and proactive in adjusting policies and practices accordingly.
- (m) Do all acts, deeds & things incidental and deemed necessary for achievement of ESG goals, targets and strategy of the Company.
- (n) Such terms of reference as may be prescribed by the Board from time to time.

F. TREASURY MANAGEMENT COMMITTEE

The Board has constituted a Treasury Management Committee to direct and provide comprehensive oversight to the Company's treasury operations. The committee is responsible for ensuring the effective management of these operations, which includes monitoring cash positions and investment portfolios, assessing and managing financial risks etc.

During the Financial Year 2025-26, the Committee has met 2 (Two) times on May 23, 2025, and October 11, 2025.

The composition of the Treasury Management Committee and the attendance details of the Members as on March 31, 2026, are given below:

Name of Members	Category*	Position	May 23, 2025	October 11, 2025	Attendance
Dr. Ramesh Kancharla	Chairman & PED	Chairman			100%
Mr. Santanu Mukherjee	IDNE	Member			100%
Mr. Vikas Maheshwari	CFO	Member			100%

Attended in person Attended through video conference Leave of absence

* PED – Promoter Executive Director, IDNE - Independent Non-Executive Director; CFO- Chief Financial Officer.

Ms. Shreya Mitra, Company Secretary & Compliance Officer of the Company is the Secretary of the Committee.

Terms of Reference:-

The terms of reference of the Treasury Management Committee, includes the following:

- a) To ensure that the company's treasury operations are conducted in a safe, efficient, and cost-effective manner.
- b) Review and approve the company's annual treasury plan, including cash flow projections, investment strategies, and borrowing requirements.
- c) Review and approve all significant treasury transactions, including investments, borrowings, and foreign exchange transactions.
- d) Monitor the company's cash position and investment portfolio, ensuring compliance with investment guidelines and maximizing returns on investments.
- e) Assess and manage the company's financial risks, including interest rate risk, foreign exchange risk, and credit risk.
- f) Review the company's debt position, including the amount and type of debt, maturity dates, and interest rates.
- g) Develop and implement strategies to manage the company's liquidity, including cash management,

working capital management, and short-term funding.







- h) Develop and implement strategies to manage the company's capital structure, including maintaining an appropriate debt-to-equity ratio.
- i) Review and recommend changes to the company's banking relationships, including negotiating banking terms and conditions.
- j) Such terms of reference as may be prescribed by the Board from time to time.

G. BUSINESS STRATEGY & INVESTMENT COMMITTEE

The Business Strategy & Investment Committee plays a pivotal role in shaping the organization's long-term direction by carefully evaluating growth opportunities, strategic investments, and expansion initiatives. It assesses potential business prospects, mergers, acquisitions, and partnerships to ensure alignment with the company's overall vision and objectives. The committee also reviews capital allocation decisions, monitors market trends, and analyzes risks and returns associated with various investment opportunities. By providing strategic guidance and oversight, it helps the organization make informed decisions that promote sustainable growth, enhance shareholder value, and strengthen competitive positioning in the market.

During the Financial Year 2025-26, the Committee has met 2 (Two) times on June 28, 2025 and August 9, 2025.

The composition of the Business Strategy & Investment Committee and the attendance details of the Members as on March 31, 2026, are given below:

Name of Members	Category*	Position	June 28, 2025	August 9, 2025	Attendance
Dr. Ramesh Kancharla	Chairman & PED	Chairman			100%
Mr. Santanu Mukherjee	IDNE	Member			100%
Ms. Sundari R. Pisupati	IDNE	Member			100%
Mr. Abrarali Dalal [#]	CEO	Member	∅	∅	NA

 Attended in person  Attended through video conference  Leave of absence ∅ Not applicable

* PED – Promoter Executive Director, IDNE - Independent Non-Executive Director; CEO- Chief Executive Officer.

[#]Appointed w.e.f. March 28, 2026.

Ms. Shreya Mitra, Company Secretary & Compliance Officer of the Company is the Secretary of the Committee.

Terms of Reference:-

- a. To identify and evaluate strategic growth opportunities aligned with the long-term goals of the Company.
- b. Review proposals submitted by management for business expansion through mergers, acquisitions, investments, partnerships, or other strategic arrangements.
- c. Review and approve preliminary and final transaction documents, including term sheets, letters of intent (Lols), expressions of interest, and similar instruments.
- d. Supervise and oversee the conduct of financial, legal, commercial, operational, tax and technical due diligence, and review due diligence reports and findings.
- e. Approve deal structures and assess financial viability, valuation, and regulatory compliance of proposed transactions.
- f. To negotiate and finalise definitive agreements including but not limited to Shareholders' Agreements (SHA), Share Purchase Agreements (SPA), Business Transfer Agreements (BTA), Joint Venture Agreements, Investment Agreements, and such other transaction-related contracts.
- g. To authorise identified officials or directors of the Company to execute such definitive agreements and related ancillary documents on behalf of the Company.
- h. To approve disbursements, funding commitments, and related financial outflows in connection with approved transactions, subject to such limits as may be defined by the Board.
- i. To monitor implementation, post-deal integration, and ensure adherence to key conditions precedent, post-closing obligations, and strategic objectives of the deal.
- j. To engage external advisors, consultants, legal counsel, tax experts, and valuation professionals as may be necessary for evaluating and executing transactions.
- k. To report significant developments and material decisions to the Board for information and noting as and when required.
- l. To meet as and when required, depending on the nature and urgency of business matters.
- m. Such terms of reference as may be prescribed by the Board from time to time.
- n. The Board reserves the right to amend, alter, expand, or modify these Terms of Reference at its sole discretion and as may be required from time to time.

V. SENIOR MANAGEMENT:

Particulars of Senior Management as on March 31, 2026:

S. No	Name of Senior Management	Designation*	Change (Appointment/ Resignation) during FY 2025-26
1	Mr. Vikas Maheshwari	CFO (KMP)	-
2	Dr. Prashanth K	GMD	-
3	Ms. Shreya Mitra	CS & CO (KMP)	-
4	Mr. Srinath Metla	CSGO	Appointed w.e.f. June 9, 2025
5	Dr. Preetham Kumar Poddutoor	Director - New Initiatives, Acquisitions and Medical Supply Chain	Re-designated w.e.f. June 9, 2025
6	Dr. Pranathi Subrahmanyam Maddirala	Clinical Director of Obstetrics and Fetal Medicine	Re-designated w.e.f. July 26, 2025
7	Mr. Abrarali Dalal	CEO (KMP)	Appointed w.e.f. January 20, 2026

* KMP – Key Managerial Personnel; CFO – Chief Financial Officer; GMD – Group Medical Director; CS & CO – Company Secretary & Compliance Officer; CSGO – Chief Strategy and Growth Officer, CEO – Chief Executive Officer.

VI. REMUNERATION OF DIRECTORS:

The table below gives details of Remuneration of Directors for the Financial Year ended March 31, 2026.

(Amount in ₹)

Name of Director	Remuneration/ Allowance & Perquisites	Performance Linked Incentive	Commission*	Contribution towards Provident Fund	Sitting Fees	Severance Fee	Service Contract	Notice Period	Total
Dr. Ramesh Kancharla	3,79,16,669	-	-	-	-	-	3 Years	None, unless otherwise agreed by Board of Directors	3,79,16,669
Dr. Dinesh Kumar Chirla	2,17,16,824**	-	-	-	-	-	3 Years	None, unless otherwise agreed by Board of Directors	2,17,16,824
Dr. Adarsh Kancharla	-	-	-	-	2,50,000	-	-	-	2,50,000
Mr. Aluri Srinivasa Rao	-	-	18,00,000	-	11,75,000	-	-	-	29,75,000
Dr. Anil Dhawan	-	-	18,00,000	-	10,50,000	-	-	-	28,50,000
Mr. Santanu Mukherjee	-	-	18,00,000	-	13,75,000	-	-	-	31,75,000
Ms. Sundari R. Pisupati	-	-	18,00,000	-	10,75,000	-	-	-	28,75,000

* Commission relates to the Financial Year ended March 31, 2026, which was approved by the Board on May 23, 2026 and will be paid during Financial Year 2026-27.

** Remuneration by way of professional fee ₹ 2,10,05,321/- and Leave Travel allowance of ₹ 7,11,503.

There has been no other pecuniary relationship or transactions of the Non-Executive Directors vis-à-vis the Company during the year except the Sitting Fees and Commission paid to them as detailed above.

VII. GENERAL BODY MEETINGS

Details of Annual General Meetings held during the last three years, are as under:

Financial Year	Date and Time	Venue	No. of Special Resolutions set out at the AGM
2024-25	Saturday, July 5, 2025 at 11:30 A.M	Meeting convened through Video Conferencing/ Other Audio Visual Means	To approve increase in the limits applicable for making investments/ extending loans and giving guarantees or providing securities in connection with loans to persons/ bodies corporate.
2023-24	July 30, 2024 at 11:30 A.M	Meeting convened through Video Conferencing/ Other Audio Visual Means	1. To approve the remuneration payable to Dr. Ramesh Kancharla, Chairman and Managing Director of the Company. 2. To approve the remuneration payable to Dr. Dinesh Kumar Chirla, Whole-time Director of the Company.
2022-23	June 29, 2023 at 11:30 A.M	Meeting convened through Video Conferencing/ Other Audio Visual Means.	Re-appointment of Dr. Anil Dhawan (DIN: 08191702), as an Independent Director of the Company for a term of 5 (Five) years commencing from August 30, 2023.

VIII. POSTAL BALLOT

During the year under review, the Company conducted two postal ballots.

Postal Ballot dated April 2, 2025

Pursuant to the provisions of Section 110 and other applicable provisions, if any, of the Act, read together with Rule 20 & 22 of the Companies (Management and Administration) Rules, 2014 ("Rules") and SEBI Listing Regulations, the Members of the Company have passed the following Resolutions through postal ballot via remote e-voting facility:

Special Resolutions passed on April 2, 2025, approving the following resolutions:-

- a. Approval of 'Rainbow Children's Medicare Limited - Employee Stock Option Scheme 2025'.
- b. Approval for grant of Options to the employees of the subsidiary Company(ies) of the Company under 'Rainbow Children's Medicare Limited - Employee Stock Option Scheme 2025'.
- c. Approval for secondary acquisition of shares through Trust route for the implementation of 'Rainbow Children's Medicare Limited - Employee Stock Option Scheme 2025'.
- d. Approval for provision of money by the Company for purchase of its own Shares by the Trust under the 'Rainbow Children's Medicare Limited - Employee Stock Option Scheme 2025'.

S. No	Particulars	Response
1	Date of Postal Ballot	February 9, 2025
2	Cut-off Date of register of members for dispatch of notice	February 28, 2025
3	Dispatch of Postal Ballot Notice	March 3, 2025
4	Voting Period	March 4, 2025 at 9:00 AM to April 2, 2025 at 5:00 PM
5	Date of Passing resolution	April 2, 2025
6	Date of declaration of result	April 3, 2025

The Board had appointed Mr. K.V.S. Subramanyam (CP No. 4815) failing him Ms. Soumya Dafthardar (CP No. 13199), Practicing Company Secretaries and Partners of M/s. KVSS & CO. LLP (Formerly BS and Co LLP), a Company Secretary Firm, as Scrutinizer to scrutinise the remote e-voting process in a fair and transparent manner.

The details of voting pattern in respect of the Special Resolutions passed through postal Ballot is as under:

Resolution No: 1

Approval of 'Rainbow Children's Medicare Limited - Employee Stock Option Scheme 2025'.

Resolution required: (Ordinary/ Special) Special

Whether promoter/ promoter group are interested in the agenda/ resolution? No

Category	Mode of voting	No. of shares held	No. of Votes polled	% of Votes Polled on outstanding shares	No. of Votes in favour	No. of votes in against	% of Votes in favour on votes polled	% of votes against on votes polled
		(1)	(2)	(3)=[(2)/(1)] *100	(4)	(5)	(6)=[(4)/(2)]*100	(7)=[(5)/(2)]*100
Promoter and Promoter Group	E-Voting	5,06,26,873	5,06,26,873	100	5,06,26,873	0	100	0
	Poll		0	0	0	0	0	0
	Postal Ballot (if applicable)		0	0	0	0	0	0
	Total	5,06,26,873	5,06,26,873	100	5,06,26,873	0	100	0
Public Institutions	E-Voting	3,96,06,995	3,31,23,725	83.6310	2,07,84,570	1,23,39,155	62.7483	37.2517
	Poll		0	0	0	0	0	0
	Postal Ballot (if applicable)		0	0	0	0	0	0
	Total	3,96,06,995	3,31,23,725	83.6310	2,07,84,570	1,23,39,155	62.7483	37.2517
Public-Non Institutions	E-Voting	1,13,17,805	50,48,168	44.6038	50,44,956	3,212	99.9364	0.0636
	Poll		0	0	0	0	0	0
	Postal Ballot (if applicable)		0	0	0	0	0	0
	Total	1,13,17,805	50,48,168	44.6038	50,44,956	3,212	99.9364	0.0636
Total		10,15,51,673	8,87,98,766	87.4420	7,64,56,399	1,23,42,367	86.1007	13.8993

Resolution No: 2**Approval for grant of Options to the employees of the subsidiary Company(ies) of the Company under 'Rainbow Children's Medicare Limited – Employee Stock Option Scheme 2025'**

Resolution required: (Ordinary/ Special) Special

Whether promoter/ promoter group are interested in the agenda/ resolution? No

Category	Mode of voting	No. of shares held	No. of Votes polled	% of Votes Polled on outstanding shares	No. of Votes in favour	No. of votes in against	% of Votes in favour on votes polled	% of votes against on votes polled
		(1)	(2)	(3)=[(2)/ (1)] *100	(4)	(5)	(6)=[(4)/ (2)]*100	(7)=[(5)/ (2)]*100
Promoter and Promoter Group	E-Voting	5,06,26,873	5,06,26,873	100	5,06,26,873	0	100	0
	Poll		0	0	0	0	0	0
	Postal Ballot (if applicable)		0	0	0	0	0	0
	Total	5,06,26,873	5,06,26,873	100	5,06,26,873	0	100	0
Public Institutions	E-Voting	3,96,06,995	3,31,23,725	83.6310	2,08,09,342	1,23,14,383	62.8231	37.1769
	Poll		0	0	0	0	0	0
	Postal Ballot (if applicable)		0	0	0	0	0	0
	Total	3,96,06,995	3,31,23,725	83.6310	2,08,09,342	1,23,14,383	62.8231	37.1769
Public-Non Institutions	E-Voting	1,13,17,805	50,48,161	44.6037	50,44,822	3,339	99.9339	0.0661
	Poll		0	0	0	0	0	0
	Postal Ballot (if applicable)		0	0	0	0	0	0
	Total	1,13,17,805	50,48,161	44.6037	50,44,822	3,339	99.9339	0.0661
Total	10,15,51,673	8,87,98,759	87.4419	7,64,81,037	1,23,17,722	86.1285	13.8715	

Resolution No: 3**Approval for secondary acquisition of shares through Trust route for the implementation of 'Rainbow Children's Medicare Limited Employee Stock Option Scheme 2025'.**

Resolution required: (Ordinary/ Special) Special

Whether promoter/ promoter group are interested in the agenda/ resolution? No

Category	Mode of voting	No. of shares held	No. of Votes polled	% of Votes Polled on outstanding shares	No. of Votes in favour	No. of votes in against	% of Votes in favour on votes polled	% of votes against on votes polled
		(1)	(2)	(3)=[(2)/ (1)] *100	(4)	(5)	(6)=[(4)/ (2)]*100	(7)=[(5)/ (2)]*100
Promoter and Promoter Group	E-Voting	5,06,26,873	5,06,26,873	100	5,06,26,873	0	100	0
	Poll		0	0	0	0	0	0
	Postal Ballot (if applicable)		0	0	0	0	0	0
	Total	5,06,26,873	5,06,26,873	100	5,06,26,873	0	100	0
Public Institutions	E-Voting	3,96,06,995	3,31,23,725	83.6310	2,08,90,570	1,22,33,155	63.0683	36.9317
	Poll		0	0	0	0	0	0
	Postal Ballot (if applicable)		0	0	0	0	0	0
	Total	3,96,06,995	3,31,23,725	83.6310	2,08,90,570	1,22,33,155	63.0683	36.9317
Public-Non Institutions	E-Voting	1,13,17,805	50,48,129	44.6034	50,44,707	3,422	99.9322	0.0678
	Poll		0	0	0	0	0	0
	Postal Ballot (if applicable)		0	0	0	0	0	0
	Total	1,13,17,805	50,48,129	44.6034	50,44,707	3,422	99.9322	0.0678
Total	10,15,51,673	8,87,98,727	87.4419	7,65,62,150	1,22,36,577	86.2199	13.7801	

Resolution No: 4								
Approval for provision of money by the Company for purchase of its own Shares by the Trust under the 'Rainbow Children's Medicare Limited Employee Stock Option Scheme 2025'.								
Resolution required: (Ordinary/ Special)			Special					
Whether promoter/ promoter group are interested in the agenda/ resolution?			No					
Category	Mode of voting	No. of shares held	No. of Votes polled	% of Votes Polled on outstanding shares	No. of Votes in favour	No. of votes in against	% of Votes in favour on votes polled	% of votes against on votes polled
		(1)	(2)	(3)=[(2)/(1)]*100	(4)	(5)	(6)=[(4)/(2)]*100	(7)=[(5)/(2)]*100
Promoter and Promoter Group	E-Voting	5,06,26,873	5,06,26,873	100	5,06,26,873	0	100	0
	Poll		0	0	0	0	0	0
	Postal Ballot (if applicable)		0	0	0	0	0	0
	Total	5,06,26,873	5,06,26,873	100	5,06,26,873	0	100	0
Public Institutions	E-Voting	3,96,06,995	3,31,23,725	83.6310	2,09,15,342	1,22,08,383	63.1431	36.8569
	Poll		0	0	0	0	0	0
	Postal Ballot (if applicable)		0	0	0	0	0	0
	Total	3,96,06,995	3,31,23,725	83.6310	2,09,15,342	1,22,08,383	63.1431	36.8569
Public-Non Institutions	E-Voting	1,13,17,805	50,48,129	44.6034	50,44,572	3,557	99.9295	0.0705
	Poll		0	0	0	0	0	0
	Postal Ballot (if applicable)		0	0	0	0	0	0
	Total	1,13,17,805	50,48,129	44.6034	50,44,572	3,557	99.9295	0.0705
Total	10,15,51,673	8,87,98,727	87.4419	7,65,86,787	1,22,11,940	86.2476	13.7524	

Postal Ballot dated September 27, 2025

Pursuant to the provisions of Section 110 and other applicable provisions, if any, of the Act, read together with Rule 20 & 22 of the Companies (Management and Administration) Rules, 2014 ("Rules") and SEBI Listing Regulations, the Members of the Company have passed the following Resolutions through postal ballot via remote e-voting facility:

Special Resolutions passed on September 27, 2025, approving the following resolution:-

- a. Approval for giving loans under Section 185 of the Companies Act, 2013.

S. No	Particulars	Response
1	Date of Postal Ballot	August 11, 2025
2	Cut-off Date of register of members for dispatch of notice	August 22, 2025
3	Dispatch of Postal Ballot Notice	August 28, 2025
4	Voting Period	August 29, 2025 at 9:00 AM to September 27, 2025 at 5:00 PM
5	Date of Passing resolution	September 27, 2025
6	Date of declaration of result	September 29, 2025

The Board had appointed Mr. K.V.S. Subramanyam (CP No. 4815) failing him Ms. Soumya Dafthardar (CP No. 13199), Practicing Company Secretaries and Partners of M/s. KVSS & CO. LLP (Formerly BS and Co LLP), a Company Secretary Firm, as Scrutinizer to scrutinise the remote e-voting process in a fair and transparent manner.

The details of voting pattern in respect of the Special Resolution passed through postal Ballot is as under:

Resolution No: 1								
Resolution No: 1 Approval for giving loans under Section 185 of the Companies Act, 2013.								
Resolution required: (Ordinary/ Special)			Special					
Whether promoter/ promoter group are interested in the agenda/ resolution?			No					
Category	Mode of voting	No. of shares held	No. of Votes polled	% of Votes Polled on outstanding shares	No. of Votes in favour	No. of votes in against	% of Votes in favour on votes polled	% of votes against on votes polled
		(1)	(2)	(3)=[(2)/(1)]*100	(4)	(5)	(6)=[(4)/(2)]*100	(7)=[(5)/(2)]*100
Promoter and Promoter Group	E-Voting	5,06,26,873	5,06,26,873	100	5,06,26,873	0	100	0
	Poll		0	0	0	0	0	0
	Postal Ballot (if applicable)		0	0	0	0	0	0
	Total	5,06,26,873	5,06,26,873	100	5,06,26,873	0	100	0
Public Institutions	E-Voting	4,02,21,369	3,43,08,001	85.2979	3,28,46,176	14,61,825	95.7391	4.2609
	Poll		0	0	0	0	0	0
	Postal Ballot (if applicable)		0	0	0	0	0	0
	Total	4,02,21,369	3,43,08,001	85.2979	3,28,46,176	14,61,825	95.7391	4.2609
Public-Non Institutions	E-Voting	1,07,10,914	49,70,338	46.4044	49,67,171	3,167	99.9363	0.0637
	Poll		0	0	0	0	0	0
	Postal Ballot (if applicable)		0	0	0	0	0	0
	Total	1,07,10,914	49,70,338	46.4044	49,67,171	3,167	99.9363	0.0637
Total	10,15,59,156	8,99,05,212	88.5250	8,84,40,220	14,64,992	98.3705	1.6295	

Procedure for Postal Ballot:

Pursuant to the provisions of Section 110 and other applicable provisions, if any, of the Act read together with Rules and SEBI Listing Regulations, the Company provided e-voting facility to its shareholders to cast their votes electronically through e-voting platform by NSDL.

The Company completed dispatch of Postal Ballot Notices one day before the start of e-voting to all the members whose names appeared in the Register of Members/ List of Beneficial Owners maintained by the Company/ Depositories respectively as at close of business hours on Cut-off date and whose e-mail addresses were registered with the Company/ Depositories. The Company also published the notice in English language national daily newspaper circulating in the whole or substantially the whole of India and in one daily newspaper published in the language of the region, where the registered office of the listed entity is situated, regarding completion of dispatch of postal ballot notices.

The scrutinizers submitted their reports after completion of the scrutiny and the results of voting by postal ballot were then announced.

The voting results were communicated to the Stock Exchanges besides being displayed on the website of the Company, i.e. www.rainbowhospitals.in and on the website of NSDL at www.evoting.nsdl.com.

Special Resolution proposed to be conducted through Postal Ballot:

As on the date of this report, no business is proposed to be conducted through postal ballot.

IX. MEANS OF COMMUNICATION

The quarterly/ half-yearly/ annual financial results of the Company are intimated to the Stock Exchanges on their respective websites immediately after the Board Meeting at which they are approved. The results along with the QR Code and the press releases/ presentations made by the Company to Analysts/ Investors are also posted on the website of the Company viz. <https://www.rainbowhospitals.in/investors-relations/quarterly-results>.

The Company's website also displays all official news releases. The results of the Company are also published in English and Telugu language newspapers normally in Business Standard/ Surya.

The Company organizes investor conference calls to discuss its financial results every quarter, where investor queries were answered by the Executive Management of the Company. The audio recording and transcripts of the conference calls were posted on our website and on website of the Stock Exchanges.

All price sensitive information and matters that are material to shareholders were disclosed to the Stock Exchanges, where the securities of the Company are listed.

X. GENERAL SHAREHOLDER INFORMATION

(a) Corporate Identification Number:

L85110TG1998PLC029914

(b) Annual General Meeting:

The 28th Annual General Meeting of the Company is scheduled to be held as under: -

Date and Time: Wednesday, July 29, 2026 at 10:00 A.M. (IST)

Venue: The Company is conducting meeting through VC/ OAVM. For details please refer to the Notice of this AGM.

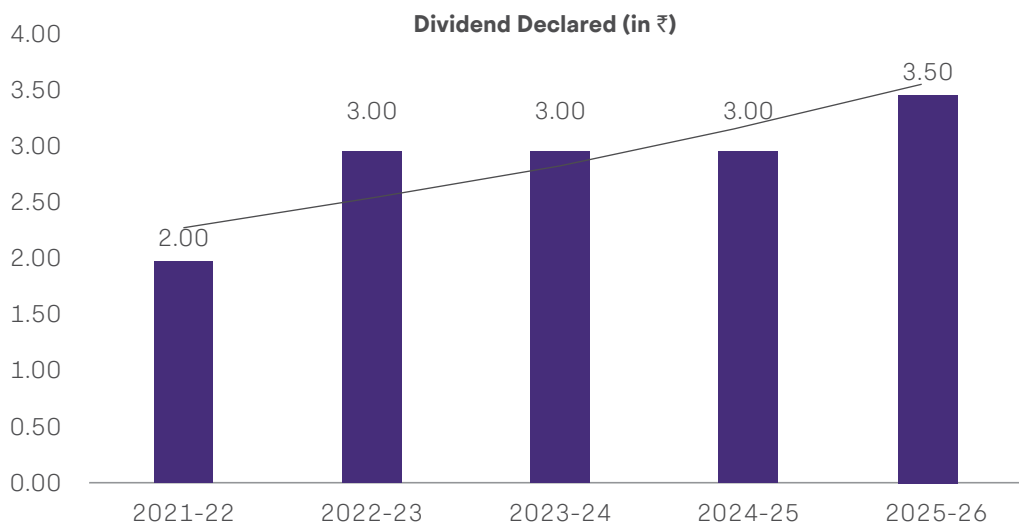
(c) Financial Year:

The Company follows Financial Year from April 1 to March 31. The Current Financial Year of the Company is April 1, 2025 to March 31, 2026.

(d) Details of dividend declared and paid by the Company for the Last 5 years:

Financial Year	Dividend Declared per Share (in ₹)	% of face value	Total amount of Dividend (in Crores)
2021-22	2	20%	20.3
2022-23	3	30%	30.45
2023-24	3	30%	30.47
2024-25	3	30%	30.47
2025-26	3.5*	35%	35.55

*Subject to shareholders' approval at the ensuing AGM.



Final Dividend payment for FY 2025-26: The Dividend, if declared by the members in the AGM shall be paid on or before August 27, 2026.

(e) Listing on Stock Exchanges:

Name of Stock Exchange	Address
BSE Limited	Phiroze Jeejeebhoy Towers, Dalal Street, Mumbai- 400001.
National Stock Exchange of India Limited	Exchange Plaza, C-1, Block G, Bandra Kurla Complex, Bandra (E), Mumbai - 400 051.

Annual Listing fees for the Financial Years 2025-26 & 2026-27 have been paid to both the Stock Exchanges.

(f) Suspension of Trading:

During the year under review, no order related to suspension of trading was passed.

(g) Registrar to an Issue and Share Transfer Agent:

Kfin Technologies Limited
Selenium Tower-B, Plot 31 & 32, Gachibowli, Financial District, Nanakramguda,
Serilingampally, Hyderabad - 500032, Telangana.

Contact Number: +91 4067162222

Email-id: einward.ris@kfintech.com

Website: www.kfintech.com

(h) Share Transfer System:

As mandated by SEBI, securities of Listed Companies can only be transferred in dematerialized form and also the entire share capital of the Company is in dematerialised form. The shares can be transferred by shareholders through their Depository Participants.

(i) Electronic Clearing Services (ECS)

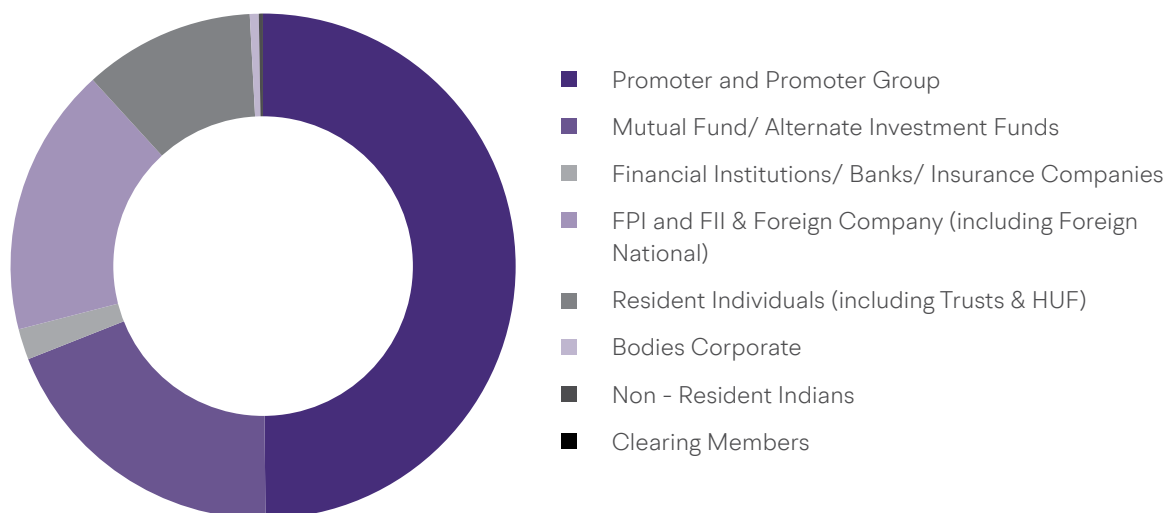
Members holding shares in dematerialised form are requested to intimate all changes pertaining to their bank details, National Electronic Clearing Service (NECS), Electronic Clearing Service (ECS) mandates, nominations, power of attorney, change of address, change of name, e-mail address, contact numbers etc., to their respective Depository Participant (DP). Changes intimated to the DP will help the Company and the Company's Registrar to an Issue and Share Transfer Agent to provide efficient and better services. Members holding shares in physical form are requested to intimate such changes to Company's Registrar to an Issue and Share Transfer Agent.

(j) Distribution of shareholding as on March 31, 2026:**i. Distribution of Equity Shareholding**

Slab	Shareholders		No. of Shares	
	Number	% to total	Shares	% to total
1 - 5000	87,033	98.27	3,52,00,020	3.47
5001 - 10,000	794	0.90	56,22,330	0.55
10,001 - 20,000	268	0.30	39,23,780	0.39
20,001 - 30,000	86	0.10	21,29,050	0.21
30,001 - 40,000	48	0.05	17,14,420	0.17
40,001 - 50,000	40	0.05	18,66,420	0.18
50,001 - 1,00,000	79	0.09	57,22,950	0.56
1,00,001 - above	213	0.24	95,94,12,590	94.47
Total	88,561	100.00	1,01,55,91,560	100.00

ii. Categories of Equity Shareholders as on March 31, 2026

S. No.	Category	No of Shares held	% of Share holding
1	Promoter and Promoter Group	5,06,16,873	49.84 %
2	Mutual Fund/ Alternate Investment Funds	1,94,56,467	19.16 %
3	Financial Institutions/ Banks/ Insurance Companies	20,04,487	1.97 %
4	FPI and FII & Foreign Company (including Foreign National)	1,75,05,755	17.24 %
5	Resident Individuals (including Trusts & HUF)	1,11,18,251	10.95 %
6	Bodies Corporate	5,80,063	0.57 %
7	Non - Resident Indians	2,74,481	0.27 %
8	Clearing Members	2,779	0.00 %
Total		10,15,59,156	100%

Shareholding (%) as on March 31, 2026**iii. Institutional Investors holding more than 1% shareholding as on March 31, 2026**

S. No	Name of Shareholders	Shareholding (%)
1	ICICI PUDENTIAL & ISIF EQUITY FUND	5.2
2	DSP MUTUAL FUND	4.3
3	FRANKLIN TEMPLETON INVESTMENT FUNDS	2.9
4	ABU DHABI INVESTMENT AUTHORITY	2.1
5	VANGUARD FUND	1.8
6	ASHOKA WHITEOAK / ASHOKA INDIA	1.7
7	TATA MUTUAL FUND	1.7
8	HDFC LIFE INSURANCE COMPANY	1.5
9	THE PRUDENTIAL ASSURANCE COMPANY LIMITED	1.1
10	NIPPON MUTUAL FUND	1.1
11	MOTILAL OSWAL MUTUAL FUND	1.0

(k) Dematerialisation of Shares and Liquidity

As on March 31, 2026, the entire equity share capital of your Company is held in dematerialised form with NSDL and CDSL under International Securities Identification Number (ISIN) – INE961001016. The equity shares of the Company are actively traded at BSE & NSE.

(l) Outstanding GDRs/ ADRs/ Warrants or Convertible Instruments

No GDRs/ ADRs/Warrants or Convertible Instruments have been issued by the Company.

(m) Commodity price risk or foreign risk and hedging activities

The Company is not exposed to any commodity price risk or foreign exchange risk in the course of its business operations. Accordingly, the Company

has not undertaken any hedging activities during the year under review.

(n) Plant Locations

The Company does not have any manufacturing or processing plants.

(o) Address for Correspondence

Name: Shreya Mitra
 Designation: Company Secretary & Compliance Officer
 Address: 8-2-19/1/A, Daulet Arcade, Road No. 11, Banjara Hills, Hyderabad – 500034, Telangana.
 Contact: 040- 49692244
 Email: companysecretary@rainbowhospitals.in
 Website: www.rainbowhospitals.in

Your Company has also designated investorrelations@rainbowhospitals.in as an exclusive email ID for Analysts and Institutional Investors and companysecretary@rainbowhospitals.in an exclusive email ID for the Investors for the purpose of registering their complaints and the same has been displayed on Company's website also.

(p) List of Credit Ratings:

The Company has neither issued any debt instruments nor undertaken any fixed deposit programme or any scheme or proposal involving mobilisation of funds, whether in India or abroad.

During the period under review, the Company was assigned a Corporate credit rating of [ICRA] AA (Stable) by ICRA Limited vide its letter dated August 14, 2025. The details of the credit ratings are available on the website of the Company at <https://www.rainbowhospitals.in/investors-relations/credit-rating>.

(q) Nodal Officer:

Details of Nodal Officer of the Company appointed in accordance with the provisions of IEPF Rules are given below:

Shreya Mitra, Nodal Officer, Company Secretary & Compliance Officer of the Company.

Corporate Office Address: 8-2-19/1/A, Daulet Arcade, Road No. 11, Banjara Hills, Hyderabad – 500 034, Telangana
Email: companysecretary@rainbowhospitals.in

XI. OTHER DISCLOSURES

(a) Related Party Transactions (RPTs)

The Company has not entered into any materially significant transactions with the related parties that may have potential conflict with the interests of the Company at large. Transactions with related parties are being disclosed in Note no. 2.31 to the Standalone Financial Statements of the Company forming part of the Annual Report and are transacted after obtaining applicable approval(s), wherever required.

The Audit Committee and the Board of Directors of the Company have formulated the Policy on dealing with RPTs and a Policy on materiality of RPTs which is disclosed on website of the Company and can be accessed through the following link:

https://d31scedd5hpubp.cloudfront.net/investor_files/Policy_on_Materiality_and_Dealing_with_Related_Party_TransactionsFEB2025.pdf

(b) Non-Compliances by the Company

During the last three years and the Financial Year 2025-26, there were no strictures or penalties imposed on the Company either by the Stock Exchanges or SEBI, or any other statutory authority for non-compliance of any matter related to capital markets.

(c) Vigil Mechanism and Whistle Blower Policy

In Compliance with the provisions of section 177 of the Act and Regulation 22 of SEBI Listing Regulations, the Company has in place the Whistle Blower Policy and Vigil Mechanism for Directors, employees and other stakeholders which provides a platform to them for raising their voice about any breach of code of conduct, financial irregularities, illegal or unethical practices, unethical behaviour, actual or suspected fraud. Adequate safeguards are provided against victimization to those who use such mechanism and direct access to the Chairman of the Audit Committee in appropriate cases is provided. During the year under review, no employee was denied access to the Audit Committee.

The policy on Vigil Mechanism and Whistle Blower Policy has been posted on the website of the Company and can be accessed through the following link: https://d31scedd5hpubp.cloudfront.net/investor_files/Whistle%20Blower%20Policy.pdf

(d) Details of compliance with mandatory requirements on Corporate Governance under the SEBI Listing Regulations

The Company has complied with the mandatory requirements on Corporate Governance under the SEBI Listing Regulations.

(e) Material Subsidiary Companies

Your Company does not have any material subsidiary company in terms of Regulation 16(c) of the SEBI Listing Regulations. The Board of Directors of the Company formulated a policy for determining "material" subsidiaries. The said Policy has been placed on the website of the Company and can be accessed through the following link:

https://d31scedd5hpubp.cloudfront.net/investor_files/Policy_for_determining_Material_Subsiary-2025.pdf

(f) Details of utilisation of funds raised through preferential allotment or qualified institutions placement as specified under Regulation 32 (7A)

During the Financial Year 2025-26, the Company has not raised funds through preferential allotment or qualified institutions placement.

(g) Practicing CS Certification

A certificate dated May 12, 2026 from M/s. KVSS & CO. LLP, a Company Secretary Firm, has been obtained as on March 31, 2026, certifying that none of the directors on the board of the company have been debarred or disqualified from being appointed or continuing as directors of Company by the Securities and Exchange Board of India/ Ministry of Corporate Affairs or any such statutory authority is annexed to this Report as **Annexure - A**.

(h) Recommendation of Committee(s) of the Board of Directors

During the year, all recommendations of the Committees of Board, were accepted by the Board of Directors.

(i) Statutory Auditor Fee

The total fee paid by the Company and its subsidiaries, on a consolidated basis, to the statutory auditor for all the services during the Financial Year 2025-26 is ₹ 6.95 Million.

(j) Disclosure under the sexual harassment of women at Workplace (prevention, prohibition and redressal) Act, 2013

In compliance of the sexual harassment of women at Workplace (prevention, prohibition and redressal) Act, 2013 and rules made thereunder, the Company has in place a policy to prevent and deal with sexual harassment at workplace.

No complaints were pending at the beginning of the year under the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013, and no complaints were received during the year under review.

(k) Loans and Advances by the Company and its subsidiaries in the nature of Loans to Firms/ Companies in which Directors are interested by name and amount.

The details of loans and advances in the nature of loans to firms/ companies in which Directors are interested, being disclosed in Note 2.10 to the Standalone and Consolidated Financial Statements of the Company forming part of the Annual Report.

(l) The Company has complied all the requirements of Corporate Governance Report as envisaged in sub-paras (2) to (10) of Part C of Schedule V of the Listing Regulations during the Financial Year 2025-26.

(m) Detail of compliance with the corporate governance requirements specified in Regulations 17 to 27 and clause (b) to (i) of sub - regulation (2) of Regulation 46 of SEBI Listing Regulations.

The Company is in compliance with the applicable corporate governance requirements specified in Regulations 17 to 27 and clause (b) to (i) of Regulation 46(2) of the SEBI Listing Regulations as well as the disclosure requirements as enumerated under Schedule V of the SEBI Listing Regulations.

(n) Disclosures with respect to demat suspense account/ unclaimed suspense account.

There are no shares which are lying in demat suspense account/ unclaimed suspense account as on March 31, 2026.

(o) Disclosure of agreements impacting management or control

In terms of Regulation 30A of the SEBI Listing Regulations, there are no such agreements entered which will impact the management or control of the Company.

(p) Insider Trading

In terms of the SEBI (Prohibition of Insider Trading) Regulations 2015 ("PIT Regulations"), the Company has a comprehensive Code of Conduct for regulating, monitoring and reporting of trading by Insiders. The said Code lays down guidelines which provide for the procedure to be followed and disclosures whilst dealing with shares of the Company. Further, in terms of the PIT Regulations, the Company has in place a Code of Practices and Procedures of Fair Disclosures of Unpublished Price Sensitive Information.

(q) Board Procedures

The Board meets at least once in a quarter to review financial results and operations of the Company. In addition to the above, the Board also meets as and when necessary to address specific issues concerning the businesses of your Company.

The Board Meetings are governed by a structured Agenda. The Agenda along with detailed explanatory notes and supporting material are circulated in advance before each

meeting to all the Directors for facilitating effective discussion and decision making. The Board has access to any information within your Company which includes the information as specified in Schedule II of the SEBI Listing Regulations.

(r) Mandatory requirements

To the extent applicable, during the year under review the Company has complied all the mandatory requirements of the SEBI Listing Regulations.

(s) Non- mandatory/Discretionary requirements:

The Company has adopted the following non-mandatory requirements on Corporate Governance:-

i. Audit qualifications

There was no audit qualification on your Company's financial statements, during the year under review.

ii. Reporting of Internal Auditor

The Internal Auditors of the Company i.e. M/s. Deloitte Touche Tohmatsu India LLP directly reports to the Audit Committee of the Company.

XII. CODE OF CONDUCT

The Board of Directors has laid down a Code of Conduct, which is applicable to all Directors and Senior Management Personnel of the Company. The Code has also been posted on the website of the Company.

All Board Members and Senior Management Personnel have affirmed with the compliance of Code of Conduct for the Financial Year 2025-26.

An annual declaration signed by Chief Executive Officer of the company affirming compliance to the Code by the Board of Directors and the Senior Management is annexed to this Report as **Annexure - B**. The Code of Conduct is available on website of the Company and can be accessed through the following link:

https://d31scedd5hpulp.cloudfront.net/investor_files/Code_of_conduct_for_Directors_and_Senior_ManagementFEB2025.pdf

XIII. CEO/ CFO CERTIFICATION

In compliance with Regulation 17(8) of the SEBI Listing Regulations, a certificate from Chief Executive officer and Chief Financial Officer of the Company to the Board of Directors as specified in Part B of Schedule II of the said regulations is annexed to this Report as **Annexure - C**.

XIV. COMPLIANCE CERTIFICATE ON CORPORATE GOVERNANCE

In compliance with SEBI Listing Regulations, a certificate on Corporate Governance issued by M/s. KVSS & CO. LLP, a Company Secretary Firm, is annexed to this Report as **Annexure - D**.

For and on behalf of Board of Directors

Place: Hyderabad
Date: May 23, 2026

Dr. Ramesh Kancharla
Chairman and Managing Director
DIN: 00212270

CERTIFICATE OF NON-DISQUALIFICATION OF DIRECTORS

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

To
The Members of
Rainbow Children's Medicare Limited
Hyderabad

We have examined the relevant registers, records, forms, returns and disclosures received from the Directors of Rainbow Children's Medicare Limited (hereinafter referred to as 'the Company') having CIN: L85110TG1998PLC029914 and having registered office at 8-2-120/103/1, Survey No. 403, Road No. 2, Banjara Hills, Hyderabad - 500034, Telangana, produced before us by the Company for the purpose of issuing this Certificate, in accordance with Regulation 34(3) read with Schedule V Para-C Sub clause 10(i) of the Securities and Exchange Board of India (Listing Obligations and Disclosure Requirements) Regulations, 2015.

In our opinion and to the best of our information and according to the verifications (including Directors Identification Number (DIN) status at the portal www.mca.gov.in) as considered necessary and explanations furnished to us by the Company & its officers, we hereby certify that none of the Directors on the Board of the Company as stated below for the Financial Year ending on March 31, 2026 have been debarred or disqualified from being appointed or continuing as Directors of companies by the Securities and Exchange Board of India, Ministry of Corporate Affairs, or any such other Statutory Authority.

S. No.	Name of Directors*	DIN	Date of Appointment in the Company
1	Dr. Ramesh Kancharla	00212270	August 7, 1998
2	Dr. Dinesh Kumar Chirla	01395841	December 14, 2005
3	Dr. Adarsh Kancharla	08302615	January 24, 2024
4	Dr. Anil Dhawan	08191702	August 30, 2018
5	Mr. Aluri Srinivasa Rao	00147058	March 15, 2019
6	Ms. Sundari R. Pisupati	01908852	September 16, 2021
7	Mr. Santanu Mukherjee	07716452	October 22, 2021

*The above-mentioned directors are as on March 31, 2026

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

**For KVSS & CO LLP, Company Secretaries
(Formerly known as BS AND CO LLP)**

K.V.S. Subramanyam
Practicing Company Secretary
FCS No.: 5400
C P No.: 4815

PR. No: P2008AP016900 (6593/2025)
UDIN: F005400H000341901

Date: May 12, 2026
Place: Hyderabad

Annexure - B**DECLARATION – COMPLIANCE WITH THE CODE OF CONDUCT**

In accordance with the SEBI (Listing Obligations and Disclosure Requirements) regulations, 2015, I, Mr. Abrarali Dalal, Chief Executive Officer of the Company hereby declare that the Board Members and the Senior Management Personnel have affirmed compliance with the Code of conduct of the Company during the Financial Year ended on March 31, 2026.

Place: Hyderabad

Date: May 23, 2026

Mr. Abrarali Dalal
Chief Executive Officer

COMPLIANCE CERTIFICATE

May 23, 2026

To
Members of Audit Committee and Board of Directors,
Rainbow Children's Medicare Limited.
8-2-19/1/A, Daulet Arcade,
Road No.11, Banjara Hills,
Hyderabad – 500034, Telangana.

Sub: Compliance Certification under Regulation 17(8) of the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015.

We, the undersigned to the best of our knowledge and belief, certify that:

- A.** We have reviewed financial statements and the cash flow statement for the Financial Year 2025-26 and that to the best of our knowledge and belief:
- (1)** these statements do not contain any materially untrue statement or omit any material fact or contain statements that might be misleading.
 - (2)** these statements together present a true and fair view of the Company's affairs and are in compliance with existing accounting standards, applicable laws and regulations.
- B.** There are, to the best of our knowledge and belief, no transactions entered into by the Company during the year which are fraudulent, illegal or violative of the Company's Code of Conduct.
- C.** We accept responsibility for establishing and maintaining internal controls for financial reporting and that we have evaluated the effectiveness of the internal control systems of the Company pertaining to financial reporting and we have disclosed to the Auditors and the Audit Committee, deficiencies in the design or operation of such internal controls, if any, of which we are aware and the steps we have taken or propose to take to rectify these deficiencies.
- D.** We have indicated to the Auditors and the Audit committee:
- (1)** Significant changes in the internal control over financial reporting during this year;
 - (2)** Significant changes in the accounting policies during the year and that the same have been disclosed in the notes to the financial statements; and
 - (3)** Instances of significant fraud of which we have become aware and the involvement therein, if any, of the management or an employee having a significant role in the Company's internal control systems over financial reporting.

Abrarali Dalal
Chief Executive Officer

Vikas Maheshwari
Chief Financial Officer

CORPORATE GOVERNANCE CERTIFICATE

To
The Members
Rainbow Children's Medicare Limited
Hyderabad

We have examined the compliance of the conditions of Corporate Governance by **Rainbow Children's Medicare Limited** ('the **Company**') for the year ended March 31, 2026, as stipulated under Regulations 17 to 27, clauses (b) to (i) and (t) of sub regulation (2) of Regulation 46 and para C, D and E of Schedule V of the Securities and Exchange Board of India (Listing Obligations and Disclosure Requirements) Regulations, 2015 ("**SEBI Listing Regulations**").

MANAGEMENT'S RESPONSIBILITY

The Compliance with the requirements of conditions of Corporate Governance is the responsibility of the Management of the Company. This responsibility includes the design, implementation and maintenance of internal control relevant to the compliance with the requirements in the Corporate Governance and applying an appropriate basis of preparation; and making estimates that are reasonable in the circumstances.

OUR RESPONSIBILITY

Pursuant to the requirement under SEBI Listing Regulations it is our responsibility to express limited assurance that the Company has complied with the requirements of the conditions of Corporate Governance.

OPINION

Based on our examination of the relevant records and according to the information and explanations provided to us and the representations provided by the Management, We certify that the Company has complied with the conditions of Corporate Governance as stipulated in regulations 17 to 27 and clauses (b) to (i) and (t) of sub- regulation (2) of Regulation 46 and para C, D and E of Schedule V of the SEBI Listing Regulations during the year ended March 31, 2026.

This certificate is neither an assurance as to the future viability of the Company nor of the efficiency or effectiveness with which the management has conducted the affairs of the Company.

For KVSS & CO LLP, Company Secretaries
(Formerly known as BS AND CO LLP)

K.V.S. Subramanyam

Practicing Company Secretary

FCS No.: 5400

C P No.: 4815

PR. No: I2002AP308000 (5725/2024)

UDIN: F005400H000341901

Date: May 12, 2026

Place: Hyderabad

Business Responsibility & Sustainability Report

SECTION A: GENERAL DISCLOSURES

I. Details of the listed entity

1. Corporate Identity Number (CIN) of the Listed Entity	L85110TG1998PLC029914
2. Name of the Listed Entity	Rainbow Children's Medicare Limited ("the Company/Rainbow/Rainbow Hospitals/ Rainbow Children's Hospital/ RCML")
3. Year of incorporation	1998
4. Registered office address	8-2-120/103/1, Survey No. 403, Road No. 2, Banjara Hills, Hyderabad – 500034, Telangana
5. Corporate address	8-2-19/1/A, Daulet Arcade, Road No.11, Banjara Hills, Hyderabad - 500034, Telangana.
6. E-mail	companysecretary@rainbowhospitals.in
7. Telephone	+91 40 49692244
8. Website	http://www.rainbowhospitals.in/
9. Financial year for which reporting is being done	FY 2025-26
10. Name of the Stock Exchange(s) where shares are listed	1. National Stock Exchange of India Limited 2. BSE Limited
11. Paid-up Capital	1,01,55,91,560
12. Name and contact details (telephone, email address) of the person who may be contacted in case of any queries on the BRSR report	Name: Ms. Shreya Mitra Designation: Company Secretary & Compliance Officer Tel No. +91 40 49692244 Email ID: companysecretary@rainbowhospitals.in
13. Reporting boundary - Are the disclosures under this report made on a standalone basis (i.e. only for the entity) or on a consolidated basis (i.e. for the entity and all the entities which form a part of its consolidated financial statements, taken together).	Consolidated basis
14. Name of assurance provider	M/s. Adwin Advisory Private Limited
15. Type of assurance obtained	Reasonable Assurance

II. Product/Services

16. Details of business activities (accounting for 90% of the turnover):

Sr. No.	Description of Main Activity	Description of Business Activity	% of Turnover of the entity
1	Human Health Activities	Medical services	100%

17. Products/Services sold by the entity (accounting for 90% of the entity's Turnover):

Sr. No.	Product/Service	NIC Code	% of total Turnover contributed
1	Health care services	86100	100%

III. Operations

18. Number of locations where plants and/or operations/offices of the entity are situated:

Location	Number of Plants	Number of Offices	Total
National	No. of hospitals: 23 No. of clinics: 5	1	29
International	-	-	-

19. Markets served by the entity**a. Number of locations**

Location	Number
National (No. of States)	6
International (No. of Countries)	0

b. What is the contribution of exports as a percentage of the total turnover of the entity?

The Company operates across six states in India and does not undertake export activities; accordingly, exports do not contribute to the Company's turnover. However, the Company extends healthcare services to both domestic and international patients, with foreign nationals visiting its hospitals in India for medical treatment and related healthcare services.

c. A brief on types of customers.

Rainbow Children's Hospital provides medical care and healthcare services to patients, with a specific focus on comprehensive pediatric, perinatal, and women's healthcare.

IV. Employees**20. Details as of the end of the financial year:****a. Employees and workers (including differently abled):**

Sr. No.	Particulars	Total (A)	Male		Female	
			No.(B)	%(B/A)	No.(C)	%(C/A)
EMPLOYEES						
1.	Permanent(D)	4,724	1,985	42%	2,739	58%
2.	Other than Permanent (E)	1,673	461	28%	1,212	72%
3.	Total employees (D+E)	6,397	2,446	38%	3,951	62%
WORKERS						
4.	Permanent(F)					
5.	Other than Permanent (G)					
6.	Total workers (F+G)					

b. Differently abled Employees and workers:

Sr. No.	Particulars	Total (A)	Male		Female	
			No.(B)	%(B/A)	No.(C)	%(C/A)
DIFFERENTLY ABLED EMPLOYEES						
1.	Permanent(D)	2	0	0	2	100%
2.	Other than Permanent (E)	0	0	0	0	0
3.	Total differently-abled employees (D+E)	2	0	0	2	100%
DIFFERENTLY ABLED WORKERS						
4.	Permanent(F)					
5.	Other than Permanent (G)					
6.	Total differently-abled workers (F+G)					

21. Participation/Inclusion/Representation of Women:

	Total (A)	Number and percentage of Females	
		No.(B)	%(B/A)
Board of Directors	7	1	14%
Key Management Personnel	3	1	33%

22. Turnover rate for permanent employees and workers:

(Disclose trends for the past 3 years)

	FY 2026			FY 2025			FY 2024		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Permanent Employees	34%	40%	37%	33%	35%	35%	27%	37%	33%
Permanent Workers	Not applicable								

Note: In FY 2025–26, employee attrition data includes nursing exits with tenure of less than 3 months.

V. Holding, Subsidiary, and Associate companies (including joint ventures)**23. a. Names of holding/ subsidiary/ associate companies/ joint ventures**

S. No.	Name of the holding/ subsidiary / associate companies / joint ventures (A)	Indicate whether holding/ Subsidiary/ Associate/ Joint Venture	% of shares held by listed entity	Does the entity indicated at column A, participate in the Business Responsibility initiatives of the listed entity? (Yes/No)
1	Rainbow Children's Hospital Private Limited	Subsidiary	100%	Yes
2	Rainbow Speciality Hospitals Private Limited	Subsidiary	78.81%	Yes
3	Rainbow Women & Children's Hospital Private Limited	Subsidiary	100%	Yes
4	Rosewalk Healthcare Private Limited	Subsidiary	100%	Yes
5	Rainbow Fertility Private Limited	Subsidiary	100%	Yes
6	Rainbow C R O Private Limited	Subsidiary	100%	Yes
7	Prashanthi Medicare Private Limited	Subsidiary	76%	Yes
8	Pratiksha Women & Child Care Hospital Private Limited	Subsidiary	76%	Yes

VI. CSR Details**24. (i) Whether CSR is applicable as per section 135 of the Companies Act, 2013: (Yes/No): Yes****(ii) Turnover (in ₹) - 15,456.60 Million****(iii) Net worth (in ₹) - 16,890.57 Million**

Above given figures are on a standalone basis

VII. Transparency and Disclosure Compliances

25. Complaints/Grievances on any of the principles (Principles 1 to 9) under the National Guidelines on Responsible Business Conduct:

Stakeholder group from whom the complaint is received	Grievance Redressal Mechanism in Place (Yes/No) (If Yes, then provide web-link for grievance redress policy)	FY 2026			FY 2025		
		Number of complaints filed during the year	Number of complaints pending resolution at close of the year	Remarks	Number of complaints filed during the year	Number of complaints pending resolution at close of the year	Remarks
Investors (other than shareholders)	Yes https://www.rainbowhospitals.in/investors-relations/investor-contact	Nil	Nil	-	Nil	Nil	-
Shareholders	Yes https://www.rainbowhospitals.in/investors-relations/investor-contact	9	0	-	12	Nil	-
Customers	Yes https://www.rainbowhospitals.in/investors-relations/investor-contact	30	3	27*	21	7	-
Value Chain Partners	Yes https://www.rainbowhospitals.in/investors-relations/investor-contact	Nil	Nil	-	Nil	Nil	-
Employees & Workers	https://www.rainbowhospitals.in/investors-relations/investor-contact	Nil	Nil	-	Nil	Nil	-
Communities	Yes https://www.rainbowhospitals.in/investors-relations/investor-contact	Nil	Nil	-	Nil	Nil	-

*Note: Of the total 30 complaints/grievances reported, 27 (including 7 pending complaints from previous year), cases were resolved and closed as of 31 March 2026

26. Overview of the entity's material responsible business conduct issues. Please indicate material responsible business conduct and sustainability issues pertaining to environmental and social matters that present a risk or an opportunity to your business, rationale for identifying the same, and approach to adapt or mitigate the risk along with its financial implications, as per the following format:

S. No.	Material issue identified	Indicate whether risk or opportunity (R/O)	Rationale for identifying the risk/opportunity	In case of risk, approach to adapt or mitigate	Financial implications of the risk or opportunity (Indicate positive or negative implications)
1	Energy efficiency and reduction of carbon emissions / GHG emissions in response to climate change	O	Hospital operations are energy-intensive because of continuous clinical services, critical equipment, HVAC loads, lighting and imaging systems etc. Improving energy efficiency helps reduce greenhouse gas emissions, supports regulatory alignment and lowers operating costs over time.	Deploy energy audits, LED retrofits, smart metering, HVAC optimisation, preventive maintenance, renewable energy sourcing where feasible and site-level monitoring of utility intensity.	Positive
2	Water and waste management (hazardous and non-hazardous)	R	Healthcare facilities generate biomedical, hazardous and domestic waste and are significant users of water. Weak waste segregation, treatment or reuse practices can lead to non-compliance, reputational damage, infection risk and higher operating cost.	Maintain strict segregation and labeling, authorised disposal through approved vendors, wastewater treatment and reuse, rainwater harvesting where feasible, 3R practices, periodic audits and compliance tracking with pollution control requirements.	Negative
3	Occupational health and safety	R	Clinical staff face exposure to infections, sharps injuries, chemicals, radiation, patient handling risks and fire/emergency hazards. A strong safety culture is essential to protect employees and ensure uninterrupted patient care.	Operate infection prevention and control protocols, PPE use, safety training, emergency drills, incident reporting, root-cause review, vaccination support, ergonomic controls and periodic health surveillance.	Negative
4	Privacy, cybersecurity and data security	R	Hospitals handle sensitive patient and employee data. Any unauthorised access, leak or cyber incident can result in legal exposure, regulatory scrutiny, service disruption and loss of trust.	Strengthen access controls, encryption, privileged-access management, backup and recovery protocols, vendor safeguards, awareness training, incident response and regular security audits.	Negative
5	Service quality, clinical outcomes and patient safety	O	High-quality and safe clinical care is central to the Group's value proposition. Better outcomes, fewer adverse events and a superior patient experience strengthen brand equity, referral strength and long-term loyalty.	Continue clinical audits, standard treatment protocols, infection control measures, patient feedback loops, quality committees, sentinel-event review, accreditation adherence and outcome tracking.	Positive

S. No.	Material issue identified	Indicate whether risk or opportunity (R/O)	Rationale for identifying the risk/opportunity	In case of risk, approach to adapt or mitigate	Financial implications of the risk or opportunity (Indicate positive or negative implications)
6	Digital transformation, technology and patient engagement	O	Technology-enabled care improves accessibility, process efficiency and patient reach. Digital platforms, telemedicine, analytics and digital outreach can deepen engagement and support scalable growth.	Invest in secure digital systems, interoperability, teleconsultation platforms, data analytics, automation, user training and process governance for technology adoption.	Positive
7	Risk management and business continuity	R	A healthcare business is exposed to operational, clinical, regulatory, technology, supply and external shocks. A structured risk management framework helps reduce disruption and protect continuity of care.	Maintain enterprise risk registers, review mitigation plans with stakeholders, monitor critical dependencies, stress-test business continuity and disaster recovery plans and conduct periodic management reviews.	Negative
8	Diversity, equity and inclusion	O	A diverse and inclusive workforce improves collaboration, innovation and decision-making. Inclusive employment practices also support employee engagement and reinforce the Group's employer brand.	Promote equitable hiring and promotion practices, inclusion initiatives, grievance redressal, anti-harassment measures, leadership accountability and regular workforce engagement.	Positive
9	Employee learning, talent attraction and retention	O	Healthcare quality depends on the availability of skilled doctors, nurses, technicians and support staff. Investment in learning and retention improves service continuity, productivity and patient experience.	Expand structured training, leadership development, clinical skill building, career pathways, succession planning, engagement surveys and retention-focused policies.	Positive
10	Medical ethics, legal and regulatory compliance	R	Operating in a highly regulated sector requires consistent compliance with healthcare, labour, environmental, data and anti-corruption requirements. Any breach can affect licenses, reputation and operating flexibility.	Strengthen code of conduct, compliance training, whistle-blower mechanisms, internal controls, policy reviews, ethics oversight and periodic legal/compliance audits.	Negative
11	Responsible procurement and supply chain resilience	R	Uninterrupted availability of medicines, consumables, diagnostics and equipment is critical in healthcare. Poor supplier governance or concentration risk can affect service delivery and cost stability.	Implement supplier due diligence, quality and ethical sourcing checks, critical inventory planning, alternate sourcing strategy, vendor performance review and procurement governance.	Negative

SECTION B: MANAGEMENT AND PROCESS DISCLOSURES

This section is aimed at helping businesses demonstrate the structures, policies and processes put in place towards adopting the NGRBC Principles and Core Elements.

Disclosure Questions	P1	P2	P3	P4	P5	P6	P7	P8	P9
Policy and management processes									
1. a. Whether your entity's policy/policies cover each principle and its core elements of the NGRBCs. (Yes/No)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
b. Has the policy been approved by the Board? (Yes/No)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
c. Web Link of the Policies, if available.	https://www.rainbowhospitals.in/investors-relations/policies-and-programs								
2. Whether the entity has translated the policy into procedures. (Yes / No)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
3. Do the enlisted policies extend to your value chain partners?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
4. Name of the national and international codes/certifications/labels/ standards (e.g. Forest Stewardship Council, Fairtrade, Rainforest Alliance, Trustea) standards (e.g. SA 8000, OHSAS, ISO, BIS) adopted by your entity and mapped to each principle.	Our practices align with key guidelines and regulations: <ul style="list-style-type: none"> • ISO 14001 Environmental Management System standards. • IFC Environment and Social Guidelines. • NABH accreditation for hospitals and healthcare providers. • NVG Guidelines from the Ministry of Corporate Affairs, Government of India. • Section 135 of the Companies Act, 2013, and SEBI (LODR) Regulations, 2015. 								
5. Specific commitments, goals, and targets set by the entity with defined timelines, if any.	The Company is committed to follow the impact guidelines for each of the 9 principles.								
6. Performance of the entity against the specific commitments, goals, and targets along with reasons in case the same are not met.	Yes. The Company regularly monitors performance against these indicators, implements corrective actions when required, and establishes preventive measures to enhance and sustain strong results.								
Governance, leadership and oversight									
7. Statement by director responsible for the business responsibility report, highlighting ESG related challenges, targets and achievements (listed entity has flexibility regarding the placement of this disclosure)	<p>At Rainbow Children's Hospital, sustainability is a core pillar of our corporate strategy and a vital driver of long-term value, reflecting our belief that environmental stewardship and clinical excellence are deeply intertwined. We are committed to leading a responsible transition by leveraging cutting-edge technologies to improve resource efficiency and decarbonize our operations, with a continued focus on increasing our reliance on renewable energy in alignment with national climate commitments. The increased adoption of renewable energy sources has also contributed to a reduction in Scope 2 emissions across operations. Our efforts extend to advancing circular economy principles through proactive water conservation and waste management initiatives. On the social front, we prioritize workplace safety, fair labor practices, and community empowerment, striving to ensure our entire workforce is deeply sensitized to human rights and sustainability. These efforts are underpinned by robust governance and active Board oversight, ensuring our practices remain transparent and aligned with international sustainability frameworks. Moving forward, we remain dedicated to embedding ESG principles deeper into our growth strategy, fulfilling our responsibility to future generations and setting new benchmarks for a resilient, ethical, and inclusive future.</p>								
8. Details of the highest authority responsible for implementation and oversight of the Business Responsibility policy (ies).	Dr. Ramesh Kancharla DIN:00212270 Chairman & Managing Director								
9. Does the entity have a specified Committee of the Board/ Director responsible for decision-making on sustainability-related issues? (Yes / No). If yes, provide details.	The CSR & ESG Committee is responsible for overseeing and guiding the company's sustainability efforts, ensuring informed decision-making on key environmental, social, and governance matters								

10. Details of review of NGRBCs by the Company:

Subject for review	Indicate whether review was undertaken by Director/ Committee of the Board/ Any other Committee									Frequency (Annually/ Half yearly/ Quarterly/ Any other-please specify)								
	P1	P2	P3	P4	P5	P6	P7	P8	P9	P1	P2	P3	P4	P5	P6	P7	P8	P9
	Performance against above policies and follow up action	Committee of the Board									Annually							
Compliance with statutory requirements of relevance to the principles, and, rectification of any non-compliances	Yes, the Committee of the Board ensures that the Company complies with all applicable laws and statutory requirements of the land it operates in.									Quarterly								

11. Has the entity carried out an independent assessment/ evaluation of the working of its policies by an external agency? (Yes/No) If yes provide the name of the agency.

P1	P2	P3	P4	P5	P6	P7	P8	P9
No								

12. If the answer to question (1) above is “No” i.e., not all Principles are covered by a policy, reasons to be stated:

Questions	P1	P2	P3	P4	P5	P6	P7	P8	P9
The entity does not consider the principles material to its business (Yes/No)									
The entity is not at a stage where it is in a position to formulate and implement the policies on specified principles (Yes/No)									
The entity does not have the financial or/human and technical resources available for the task (Yes/No)	Not Applicable								
It is planned to be done in the next financial year (Yes/No)									
Any other reason (please specify)									

SECTION C: PRINCIPLE-WISE PERFORMANCE DISCLOSURE**PRINCIPLE 1:**

Businesses should conduct and govern themselves with integrity, and in a manner that is Ethical, Transparent, and Accountable.

Essential Indicators

1. **Percentage coverage by training and awareness programmes on any of the principles during the financial year.**

Segment	Total number of training and awareness programmes held	Topics/principles covered under the training and its impact	% age of persons in respective category covered by the awareness programmes
Board of Directors	5	Familiarization programs covering business strategy, operations, risks, regulatory matters, ESG topics and ESG awareness session. Regular updates on SEBI regulations, company developments, and compliance matters.	100%
Key Managerial Personnel	5	Familiarization programs covering business strategy, operations, risks, regulatory matters, ESG topics and ESG awareness session. Regular updates on SEBI regulations, company developments, and compliance matters	100%
Employees other than BoD and KMPs	608	Code of Conduct, POSH, HR Policies and refreshers, Biomedical waste management compliance, grievance management, Effective Communication	100%
Workers		Not Applicable	

2. **Details of fines / penalties /punishment/ award/ compounding fees/ settlement amount paid in proceedings (by the entity or by directors / KMPs) with regulators/ law enforcement agencies/ judicial institutions, in the financial year, in the following format (Note: the entity shall make disclosures on the basis of materiality as specified in Regulation 30 of SEBI (Listing Obligations and Disclosure Obligations) Regulations, 2015 and as disclosed on the entity's website):**

Monetary				
NGRBC Principle	Name of the regulatory/ enforcement agencies/ judicial institutions	Amount (In INR)	Brief of the Case	Has an appeal been preferred? (Yes/No)
Penalty/ Fine				
Settlement			Nil	
Compounding fee				
Non-Monetary				
NGRBC Principle	Name of the regulatory/ enforcement agencies/ judicial institutions	Brief of the Case	Has an appeal been preferred? (Yes/No)	
Imprisonment				
Punishment			Nil	

3. **Of the instances disclosed in Question 2 above, details of the Appeal/ Revision preferred in case where monetary or non-monetary action has been appealed.**

Case Details	Name of the regulatory/ enforcement agencies/ judicial institutions
	Not Applicable

4. Does the entity have an anti-corruption or anti-bribery policy? If yes, provide details in brief and if available, provide a web-link to the policy.

Yes. We have an Anti-bribery and Anti-corruption policy. The policy reiterates that the Company does not tolerate any bribery and corruption directly or indirectly and upholds the highest standards of integrity and transparency in all its interactions and business activities.

The policy forms part of our Code of Conduct Policy and is available on our website at <https://www.rainbowhospitals.in/investors-relations/policies-and-programs>.

5. Number of Directors/KMPs/employees/workers against whom disciplinary action was taken by any law enforcement agency for the charges of bribery/ corruption:

	FY 2026	FY 2025
Director	NIL	NIL
KMPs	NIL	NIL
Employees	NIL	NIL
Workers	NIL	NIL

6. Details of complaints with regard to conflict of interest:

	FY 2026		FY 2025	
	Number	Remarks	Number	Remarks
Number of complaints received in relation to issues of Conflict of Interest of the Directors	Nil	-	Nil	-
Number of complaints received in relation to issues of Conflict of Interest of the KMPs	Nil	-	Nil	-

7. Provide details of any corrective action taken or underway on issues related to fines/penalties/action taken by regulators/ law enforcement agencies/ judicial institutions, on cases of corruption and conflicts of interest.

Not Applicable

8. Number of days of accounts payables ((Accounts payable *365) / Cost of goods/services procured) in the following format:

	FY 2026	FY 2025
Number of days of accounts payables	155.86	171.95*

*The previous year's data has been restated to align with the current year's consolidated reporting approach to ensure consistency and comparability across reporting years.

9. Open-ness of business

Provide details of the concentration of purchases and sales with trading houses, dealers, and related parties along with loans and advances & investments, with related parties, in the following format:

Parameter	Metrics	FY 2026	FY 2025
Concentration of Purchases	a. Purchases from trading houses as % of total purchases	Not Applicable owing to the nature of business, Rainbow does not procure from trading houses	Not Applicable owing to the nature of business, Rainbow does not procure from trading houses
	b. Number of trading houses where purchases are made from		
	c. Purchases from top 10 trading houses as % of total purchases from trading houses		
Concentration of Sales	a. Sales to dealers/ distributors as % of total sales	Not Applicable owing to the nature of business (providing healthcare) Rainbow does not have any sales to dealers/ distributors.	Not Applicable owing to the nature of business (providing healthcare) Rainbow does not have any sales to dealers/ distributors.
	b. Number of dealers distributors to whom sales are made		
	c. Sales to top 10 dealers/ distributors as % of total sales to dealers/ distributors		

Parameter	Metrics	FY 2026	FY 2025
Share of RPTs in	a. Purchases (Purchases with related parties/ Total Purchases)	2.68%	2.07%
	b. Sales (Sales to related parties/ Total Sales)	0.25%	0.32%
	c. Loans & advances (Loans & advances given to related parties / Total loans & advances)	15.87%	0.97%
	d. Investments (Investments in related parties/ Total Investments made)	28%	6.71%

Leadership Indicators

1. Awareness programmes conducted for value chain partners on any of the principles during the financial year:

Total number of awareness programmes held	Topics / principles covered under the training	%age of value chain partners covered (by value of business done with such partners) under the awareness programmes
1	Impact of geopolitical issue and sustainability	56%

2. Does the entity have processes in place to avoid/ manage conflict of interests involving members of the Board? (Yes/No). If yes, provide details of the same.

The Company has put in place a dedicated Code of Conduct for its Senior Management and Board Members, which sets out potential conflict-of-interest situations and provides guidance to avoid them. This Code is aligned with the Company's core values of integrity and ethical conduct and supports responsible leadership. By following these standards, the Company seeks to prevent misconduct and strengthen a culture of ethics across the organization.

PRINCIPLE 2:

Business should provide goods and services in a manner that is sustainable and safe

Essential Indicators

1. **Percentage of R&D and capital expenditure (capex) investments in specific technologies to improve the environmental and social impacts of product and processes to total R&D and capex investments made by the entity, respectively.**

	FY 2026	FY 2025	Details of improvements in environmental and social impacts
R&D	-	-	-
Capex	2.69%	0.89%	Solar Rooftops, RECD, VFD & LED Installation

2. a. **Does the entity have procedures in place for sustainable sourcing? (Yes/No)**
Yes
- b. **If yes, what percentage of inputs were sourced sustainably?**
- Laboratory procurement- 14.17% approx.
 - Power procurement- 33% approx.
3. **Describe the processes in place to safely reclaim your products for reusing, recycling and disposing at the end of life, for**
- (a) **Plastics (including packaging):**
Rainbow Hospitals follows responsible waste management practices by ensuring that plastic waste generated across its operations is regularly sold to authorised plastic recyclers for environmentally sound processing. Given the nature of the healthcare services sector, plastic waste generation remains relatively low. To further reduce plastic consumption, all units are equipped with water dispensers and disposable paper cups, thereby eliminating the requirement for plastic PET bottles. In addition, the Company has phased out the use of plastic bags across general hospital operations, including carry bags, medicine packaging, and food distribution, while promoting the adoption of eco-friendly alternatives across all facilities.
- (b) **E-waste:**
E-waste generated across the Company's units is systematically collected and stored in designated bins before being disposed of in accordance with the Company's ESG guidelines and E-Waste Management Policy. Rainbow has partnered with authorised third-party agencies to collect, recycle, and dispose of electronic waste in an environmentally responsible manner, ensuring compliance with applicable regulatory requirements.
- (c) **Hazardous waste:**
As a healthcare service provider, the Company places strong emphasis on the safe handling and disposal of hazardous waste, particularly Biomedical Waste (BMW). All biomedical waste is disposed of through authorised hazardous waste handlers in strict compliance with the Biomedical Waste Management Rules, 2016, ensuring safe treatment, transportation, and disposal practices across operations.
- (d) **Other waste:**
The Company ensures responsible management and disposal of other waste streams in alignment with applicable regulatory requirements and internal environmental policies. General waste is managed through authorised municipal waste management partners, while waste oil generated from operations is disposed of exclusively through certified vendors to prevent unauthorised handling or environmental contamination. General scrap materials are sold, as required, to authorised local recyclers, with detailed disposal records maintained to ensure transparency and traceability. Additionally, wastewater and other contaminated liquids are treated through in-house Sewage Treatment Plants (STP) and Effluent Treatment Plants (ETP) prior to safe discharge into municipal sewage systems, in accordance with established hospital policies and environmental norms.
4. **Whether Extended Producer Responsibility (EPR) is applicable to the entity's activities (Yes / No). If yes, whether the waste collection plan is in line with the Extended Producer Responsibility (EPR) plan submitted to Pollution Control Boards? If not, provide steps taken to address the same.**
Not Applicable

Leadership Indicators

1. **Has the entity conducted Life Cycle Perspective / Assessments (LCA) for any of its products (for manufacturing industry) or for its services (for service industry)? If yes, provide details in the following format?**

Not applicable as the Company is in healthcare services

2. **If there are any significant social or environmental concerns and/or risks arising from production or disposal of your products / services, as identified in the Life Cycle Perspective / Assessments (LCA) or through any other means, briefly describe the same along-with action taken to mitigate the same.**

Not Applicable

3. **Percentage of recycled or reused input material to total material (by value) used in production (for manufacturing industry) or providing services (for service industry).**

Indicate input material	Recycled or re-used input material to total material	
	FY 2026	FY 2025
	Not applicable	Not applicable

4. **Of the products and packaging reclaimed at end of life of products, amount (in metric tonnes) reused, recycled, and safely disposed, as per the following format:**

	FY 2026			FY 2025		
	Re-Used	Recycled	Safely Disposed	Re-Used	Recycled	Safely Disposed
Plastics (including packaging)	Not Applicable			Not Applicable		
E-waste						
Hazardous waste						
Other waste General Waste (Dry & Wet)						

5. **Reclaimed products and their packaging materials (as percentage of products sold) for each product category.**

Indicate product category	Reclaimed products and their packaging materials as % of total products sold in respective category
	Not Applicable

PRINCIPLE 3:

Business should respect and promote the well-being of all employees, including those in their value chains

Essential Indicators

1. a. Details of measures for the well-being of employees:

Category	Total (A)	% of employees covered by									
		Health insurance		Accident insurance		Maternity benefits		Paternity Benefits		Day Care facilities	
		Number (B)	% (B/A)	Number (C)	% (C/A)	Number (D)	% (D/A)	Number (E)	% (E/A)	Number (F)	% (F/A)
Permanent employees											
Male	1,985	1,985	100%	1,985	100%	NA	NA	1,985	100%	1,985	100%
Female	2,739	2,739	100%	2,739	100%	2,739	100%	NA	NA	2,739	100%
Total	4,724	4,724	100%	4,724	100%	2,739	58%	1,985	42%	4,724	100%
Other than Permanent employees											
Male	461	461	100%	239	52%	NA	NA	NA	NA	NA	NA
Female	1,212	1,212	100%	743	61%	NA	NA	NA	NA	NA	NA
Total	1,673	1,673	100%	982	59%	NA	NA	NA	NA	NA	NA

Note: The benefits disclosed above are available to all employees. Employees may avail themselves of the applicable benefits based on their individual requirements and eligibility.

b. Details of measures for the well-being of workers:

Category	Total (A)	% of workers covered by									
		Health insurance		Accident insurance		Maternity benefits		Paternity Benefits		Day Care facilities	
		Number (B)	% (B/A)	Number (C)	% (C/A)	Number (D)	% (D/A)	Number (E)	% (E/A)	Number (F)	% (F/A)
Permanent workers											
Male											
Female											Not applicable
Total											
Other than Permanent workers											
Male											
Female											Not applicable
Total											

c. Spending on measures towards well-being of employees and workers (including permanent and other than permanent) in the following format-

	FY 2026	FY 2025
Cost incurred on well-being measures as a % of total revenue of the company	0.34%	0.20%

2. Details of retirement benefits, for Current FY and Previous Financial Year

Benefits	FY 2026			FY 2025		
	No. of employees covered as a % of total employees	No. of workers covered as a % of total workers	Deducted and deposited with the authority (Y/N/N.A.)	No. of employees covered as a % of total employees	No. of workers covered as a % of total workers	Deducted and deposited with the authority (Y/N/N.A.)
PF	100%	NA	Yes	100%	NA	Yes
Gratuity	100%	NA	NA	100%	NA	NA
ESI	19%	NA	Yes	14%	NA	Yes
Others – please specify	NA	NA	NA	NA	NA	NA

3. Accessibility of workplaces

the premises / offices of the entity accessible to differently abled employees and workers, as per the requirements of the Rights of Persons with Disabilities Act, 2016? If not, whether any steps are being taken by the entity in this regard.

All Rainbow Group hospitals in India comply with the Rights of Persons with Disabilities Act, 2016, and provide accessible, inclusive facilities. Features such as wheelchair ramps and on-site assistance reflect the Company's commitment to barrier-free healthcare access for persons with disabilities.

4. Does the entity have an equal opportunity policy as per the Rights of Persons with Disabilities Act, 2016? If so, provide a web-link to the policy.

The Company upholds a firm commitment to non-discrimination and maintains a strong stance against any conduct that violates its ethical standards or Code of Conduct. These principles are formally articulated in the Business Responsibility Policy, reflecting the Company's dedication to fostering a culture of fairness, respect, and accountability across the organization.

The same can be accessed at https://d31scedd5hpubp.cloudfront.net/investor_files/Business%20Responsibility%20Policy.pdf

5. Return to work and Retention rates of permanent employees and workers that took parental leave.

Gender	Permanent employees		Permanent workers	
	Return to work rate	Retention rate	Return to work rate	Retention rate
Male	100%	79%		
Female	100%	51%	Not applicable	
Total	100%	59%		

6. Is there a mechanism available to receive and redress grievances for the following categories of employees and workers? If yes, give details of the mechanism in brief.

	Yes/No (If Yes, then give details of the mechanism in brief)
Permanent Workers	Not applicable
Other than Permanent Workers	
Permanent Employees	The Company has established a robust grievance reporting mechanism that enables employees to raise concerns through multiple channels, including the HRMS portal, unit-level contacts, a whistleblower hotline, an anti-sexual harassment helpline, and a corporate grievance and well-being channel. These channels operate in accordance with key policies such as the Whistleblower Policy, Anti-Sexual Harassment Policy, Anti-Discrimination Policy, and Code of Conduct, promoting a safe, inclusive, and ethical workplace.
Other than Permanent Employees	

7. Membership of employees and workers in association(s) or Unions recognised by the listed entity:

Category	FY 2026			FY 2025		
	Total employees/workers in respective category (A)	No. of employees/workers in respective category, who are part of association(s) or Union (B)	% (B/A)	Total employees/workers in respective category (C)	No. of employees/workers in respective category, who are part of association(s) or Union (D)	% (D/C)
Total Permanent Employees	4,724	0	0	3,972	0	0
Male	1,985	0	0	1,706	0	0
Female	2,739	0	0	2,266	0	0
Total Permanent Workers						
Male				Not applicable		
Female				Not applicable		

8. Details of training given to employees and workers:

Category	FY 2026					FY 2025*				
	Total (A)	On Health and safety measures		On Skill upgradation		Total (D)	On Health and safety measures		On Skill upgradation	
		No. (B)	% (B/A)	No. (C)	% (C/A)		No. (E)	% (E/D)	No. (F)	% (F/D)
Employees										
Male	1,985	398	20%	1,069	54%	1,706	1,391	82%	1,509	88%
Female	2,739	1,314	48%	2,136	78%	2,266	1,903	84%	1,999	88%
Total	4,724	1,712	36%	3,205	68%	3,972	3,294	83%	3,508	88%
Workers										
Male										
Female	Not applicable									
Total										

*Figures of FY 2025 have been restated to streamline the consolidation approach

9. Details of performance and career development reviews of employees and workers:

Category	FY 2026			FY 2025*		
	Total (A)	No. (B)	% (B/A)	Total (D)*	No. (E)*	% (E/D)*
Employees						
Male	1,985	1,791	90%	1,706	1,538	90%
Female	2,739	2,429	89%	2,266	2,032	90%
Total	4,724	4,220	89%	3,972	3,570	90%
Workers						
Male						
Female	Not applicable					
Total						

*Figures of FY 2025 have been restated to streamline the consolidation approach

10. Health and safety management system:

a. Whether an occupational health and safety management system has been implemented by the entity? (Yes/No). If yes, the coverage of such system.

Yes, the occupational health and safety management system is in place, which starts with analysing the risks that are associated with the workplace. With the use of existing control measures, how can they be reduced and further, with additional control measures how can they be minimized. The coverage of the system is hospital wide and covers all employees and healthcare workers.

b. What are the processes used to identify work-related hazards and assess risks on a routine and non-routine basis by the entity?

Yes, the company is dedicated to cultivating a culture of safety excellence, supported by a comprehensive occupational health and safety management system. This system establishes rigorous protocols for identifying hazards, implementing risk mitigation measures, and ensuring ongoing compliance. Regular internal audits reinforce adherence to industry-leading safety practices. Additionally, the company enhances its safety framework through a Process Safety Management system, demonstrating its steadfast commitment to protecting the well-being of employees and stakeholders.

c. Whether you have processes for workers to report the work-related hazards and to remove themselves from such risks. (Y/N)

Yes, the company has a standard protocol for reporting work-related hazards, ensuring a transparent and structured approach to workplace safety. A blame-free environment is actively promoted, allowing staff to report concerns without fear of humiliation or repercussions. Additionally, an annual safety culture survey, conducted using the AHRQ tool, provides valuable insights into employees' attitudes and behaviors regarding event reporting, helping to continuously enhance the organization's safety culture.

d. Do the employees/workers of the entity have access to non-occupational medical and healthcare services? (Yes/No)

Yes, the organization has a staff well-being policy that takes care of group medical insurance and other related programs.

11. Details of safety related incidents, in the following format:

Safety Incident/Number	Category	FY 2026	FY 2025
Lost Time Injury Frequency Rate (LTIFR) (per one million-person hours worked)	Employees	0	0
	Workers	NA	NA
Total recordable work-related injuries	Employees	0	0
	Workers	NA	NA
No. of fatalities	Employees	0	0
	Workers	NA	NA
High consequence work-related injury or ill-health (excluding fatalities)	Employees	0	0
	Workers	NA	NA

12. Describe the measures taken by the entity to ensure a safe and healthy work place.

The Company prioritizes employee well-being by maintaining a safe and healthy workplace through regular training programs and the provision of safety kits, including PPE and essential protective equipment. To prevent contamination and ensure compliance, the Company adheres to all local safety regulations, with most hospitals being NABH-accredited. This commitment to safety and quality reinforces high operational standards, fostering a secure environment for both staff and patients.

13. Number of Complaints on the following made by employees and workers:

	FY 2026			FY 2025		
	Filed during the year	Pending resolution at the end of year	Remarks	Filed during the year	Pending resolution at the end of year	Remarks
Working Conditions	0	0	-	0	0	-
Health & Safety	0	0	-	0	0	-

14. Assessment for the year:

% of your plants and offices that were assessed (by entity or statutory authorities or third parties)	
Health and safety practices	100% (Fire Safety & Electrical Safety audit have been conducted by EDGE)
Working Conditions	

15. Provide details of any corrective action taken or underway to address safety-related incidents (if any) and on significant risks/ concerns arising from assessments of health & safety practices and working conditions.

Not Applicable

Leadership Indicators**1. Does the entity extend any life insurance or any compensatory package in the event of death of (A) Employees (Y/N) (B) Workers(Y/N).**

Yes, the Company provides a comprehensive benefits package featuring Accidental Death Insurance and Workers' Compensation coverage. These measures offer financial protection for employees and their families in case of work-related fatalities.

2. Provide the measures undertaken by the entity to ensure that statutory dues have been deducted and deposited by the value chain partners.

Yes. Rainbow Hospitals maintains a robust internal control framework through regular audits that verify the timely remittance of all statutory dues. These audits ensure the company's adherence to labour laws and regulations. Furthermore, the company leverages the expertise of a dedicated Labour Law Consultant to assess the compliance posture of outsourced manpower vendors. This comprehensive approach allows the company to demonstrate its unwavering commitment to upholding the highest standards of labour law compliance. By prioritizing these initiatives, the company fosters a culture of transparency, accountability, and rigorous adherence to legal requirements across all its operations.

3. Provide the number of employees/workers having suffered high consequence work-related injury / ill-health / fatalities (as reported in Q11 of Essential Indicators above), who have been rehabilitated and placed in suitable employment or whose family members have been placed in suitable employment:

	Total no. of affected employees/ workers		No. of employees/workers that are rehabilitated and placed in suitable employment or whose family members have been placed in suitable employment	
	FY 2026	FY 2025	FY 2026	FY 2025
Employees	0	0	0	0
Workers	0	0	0	0

4. Does the entity provide transition assistance programs to facilitate continued employability and the management of career endings resulting from retirement or termination of employment? (Yes/ No)

Currently, the Company does not offer any formal transition assistance program

5. Details on assessment of value chain partners:

	% of value chain partners (by value of business done with such partners) that were assessed
Health and safety practices	NIL
Working Conditions	NIL

6. Provide details of any corrective actions taken or underway to address significant risks/concerns arising from assessments of health and safety practices and working conditions of value chain partners.

Not Applicable

PRINCIPLE 4:**Business should respect the interests of and be responsive to all its stakeholders****Essential Indicators****1. Describe the processes for identifying key stakeholder groups of the entity.**

The Company recognizes stakeholder engagement as essential to understanding expectations, managing risks, maintaining social legitimacy, strengthening credibility, and building trust. Stakeholders include individuals and groups that may directly or indirectly influence, or be influenced by, the Company's operations, activities, technological developments, regulatory changes, market conditions, and broader societal impact. These include patients, healthcare professionals, employees, communities, supply chain partners, clients, investors, regulators, and civil society organizations across all areas of the Company's operations. The Company is committed to engaging with stakeholders in an open and transparent manner to promote collaboration, mutual support, and long-term sustainable relationships.

2. List stakeholder groups identified as key for your entity and the frequency of engagement with each stakeholder group.

Stakeholder Group	Whether identified as a Vulnerable & Marginalized Group (Yes/ No)	Channels of communication (Email, SMS, Newspaper, Pamphlets, Advertisement, Community Meetings, Notice Board, Website), Other	Frequency of engagement (Annually/ Half yearly/Quarterly/ others – please specify)	Purpose and scope of engagement including key topics and concerns raised during such engagement
Investors	No	<ul style="list-style-type: none"> Integrated Annual Report Company's Investor Relations section of website Annual general meeting Quarterly and annual presentations, Press Release and earning calls Announcements to stock exchanges Analyst and Investor meet Newspaper publications 	Quarterly/ ongoing	<ul style="list-style-type: none"> Promote transparent communication of business performance Address investor/analyst queries and concerns Ensure robust corporate governance Share insights on Company strategy and sustainability initiatives
Government	No	Emails / Community meetings/ In person meeting	Need-based	Representations / Perspective on change in regulations/ upcoming laws
Society	Yes	Social media <ul style="list-style-type: none"> CSR Community building sessions Health and Social Awareness campaigns Health surveys Discussions on medical issues Press conferences 	Need-based	Analysis of the health needs of the society <ul style="list-style-type: none"> Identifying the gap between demand and supply Prevention of illnesses
Healthcare Professionals	No	Trainings, One-to-One Physician and HOD interactions, Employee Experience Surveys	Continuous	To develop State of the art infrastructure. <ul style="list-style-type: none"> To provide best in class medical facilities trainings specific to their domain
Employees	No	<ul style="list-style-type: none"> Emails Periodic town hall meetings for bottom-up communication Website Cultural events Structured employee surveys HRMS Portal Notice boards 	Continuous	<ul style="list-style-type: none"> Training and development Regular company updates psychological safety

Stakeholder Group	Whether identified as a Vulnerable & Marginalized Group (Yes/ No)	Channels of communication (Email, SMS, Newspaper, Pamphlets, Advertisement, Community Meetings, Notice Board, Website), Other	Frequency of engagement (Annually/ Half yearly/Quarterly/ others – please specify)	Purpose and scope of engagement including key topics and concerns raised during such engagement
Supplier / Partners	No	Digital meetings / In person meetings. Supplier forums, partner events, calls, e-mail	Need Based	<ul style="list-style-type: none"> Performance feedback Recognition and performance feedback Rate contract finalization, RFQs, rate negotiations, and strategic meetings
Patients/ Customers	Yes	<ul style="list-style-type: none"> Customer relationship management Website and social media Patient support desk and helpline Feedback system and satisfaction surveys SMS notifications Continuous, daily, weekly, or monthly monitoring tailored to stakeholder engagement type 	Continuous	<ul style="list-style-type: none"> Timely service availability Service quality and efficiency Cost-effectiveness Service/product innovation Environmental hygiene Patient data privacy (limiting personal data use and shredding documents)

Leadership Indicators

1. Provide the processes for consultation between stakeholders and the Board on economic, environmental, and social topics or if consultation is delegated, how is feedback from such consultations provided to the Board.

In line with its Business Responsibility Policy, the Company follows a multi-stakeholder approach to responsible and sustainable business conduct, integrating economic, environmental, and social considerations into decision-making. Stakeholder consultation and engagement on ESG-related matters are undertaken by relevant functional departments through structured and ongoing interactions, as prescribed under the Policy, which emphasizes transparency, accountability, and value-driven engagement with stakeholders. Management periodically consolidates stakeholder feedback on key economic, environmental, and social issues and presents material insights to the Board during its meetings to support informed oversight and decision-making. Where stakeholder engagement is delegated, a defined internal reporting mechanism ensures that significant ESG-related concerns and outcomes are escalated to the Board. This approach enables continuous dialogue, enhances transparency, and reinforces the Company's commitment to addressing stakeholder expectations while advancing its sustainability objectives.

2. Whether stakeholder consultation is used to support the identification and management of environmental, and social topics (Yes / No). If so, provide details of instances as to how the inputs received from stakeholders on these topics were incorporated into the policies and activities of the entity.

Yes, the Company systematically integrates stakeholder feedback into its ESG strategy through tools like surveys, materiality assessments, and grievance mechanisms. By engaging diverse groups including employees, suppliers, and partners based on their influence and impact, management identifies high-priority environmental and social topics to guide decision-making. These insights directly shape sustainability policies and CSR initiatives, ensuring that operational actions remain aligned with stakeholder expectations and drive continuous improvement.

3. Provide details of instances of engagement with, and actions taken to, address the concerns of vulnerable/ marginalized stakeholder groups.

The Company prioritizes the needs of vulnerable and marginalized groups via inclusive, targeted community programs. We enhance access to vital services, promote equal opportunities, and engage these groups with culturally attuned outreach and grievance channels. Inclusivity drives every effort, delivering tangible benefits to underserved communities

PRINCIPLE 5:**Businesses should respect and promote human rights****Essential Indicators**

1. Employees and workers who have been provided training on human rights issues and policy(ies) of the entity, in the following format:

Category	FY 2026			FY 2025		
	Total (A)	No. of employees / workers covered (B)	% (B / A)	Total (C)	No. of employees / workers covered (D)	% (D / C)
Employees						
Permanent	4,724	4,666	99%	3,972	3,237	81%
Other than permanent	1,673	1,509	90%	1,551	1,105	71%
Total Employees	6,397	6,175	97%	5,523	4,342	79%
Workers						
Permanent						
Other than permanent						Not applicable
Total Workers						

2. Details of minimum wages paid to employees and workers, in the following format:

Category	FY 2026					FY 2025				
	Total (A)	Equal to Minimum Wage		More than Minimum Wage		Total (D)	Equal to Minimum Wage		More than Minimum Wage	
		No. (B)	% (B/A)	No. (C)	% (C/A)		No. (E)	% (E/D)	No. (F)	% (F/D)
Employees										
Permanent	4,724	520	11%	4,204	89%	3,972	339	9%	3,633	91%
Male	1,985	205	16%	1,780	90%	1,706	160	9%	1,546	91%
Female	2,739	315	12%	2,424	89%	2,266	179	8%	2,087	92%
Other than Permanent	1,673	-	-	-	-	1,551	-	-	-	-
Male	461	-	-	-	-	390	-	-	-	-
Female	1,212	-	-	-	-	1,161	-	-	-	-
Workers										
Permanent										
Male										
Female										Not applicable
Other than Permanent										
Male										
Female										

3. Details of remuneration/ salary/ wages, in the following format:

- a. Median remuneration/wages:

	Male		Female	
	Number	Median remuneration/ salary/ wages of respective category	Number	Median remuneration/ salary/ wages of respective category
Board of Directors (BoD)	6	30,75,000	1	28,75,000
Key Managerial Personnel*	2	1,87,29,017	1	24,62,743
Employees other than BoD and KMP	1,983	3,82,476	2,738	3,38,304
Workers	NA		NA	NA

*1 KMP has joined during the year in the month of Jan 2026, hence only 3 months remuneration is considered.

- b. Gross wages paid to females as % of total wages paid by the entity, in the following format:

	FY 2026	FY 2025
Gross wages paid to females as % of total wages	48.4%	50.1%

4. Do you have a focal point (Individual/ Committee) responsible for addressing human rights impacts or issues caused or contributed to by the business? (Yes/No)

Yes, we have a focal point responsible for addressing human rights impacts or issues caused or contributed to by the business.

5. Describe the internal mechanisms in place to redress grievances related to human rights issues.

Yes. Rainbow Hospitals is steadfastly dedicated to upholding internationally recognized human rights principles and standards. To ensure this commitment is effectively implemented, the company has established robust procedures and processes across its operations to safeguard against any human rights violations. For concerns or grievances, individuals may contact: Grievance@rainbowhospitals.in.

6. Number of Complaints on the following made by employees and workers:

	FY 2026			FY 2025		
	Filed during the year	Pending resolution at the end of year	Remarks	Filed during the year	Pending resolution at the end of year	Remarks
Sexual Harassment	Nil	Nil	-	Nil	Nil	-
Discrimination at workplace	Nil	Nil	-	Nil	Nil	-
Child Labour	Nil	Nil	-	Nil	Nil	-
Forced Labour/Involuntary Labour	Nil	Nil	-	Nil	Nil	-
Wages	Nil	Nil	-	Nil	Nil	-
Other human rights related issues	Nil	Nil	-	Nil	Nil	-

7. Complaints filed under the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013, in the following format:

	FY 2026	FY 2025
Total Complaints reported under Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 (POSH)	Nil	Nil
Complaints on POSH as a % of female employees/workers	Nil	Nil
Complaints on POSH upheld	Nil	Nil

8. Mechanisms to prevent adverse consequences to the complaint in discrimination and harassment cases.

The Company is committed to fostering a safe, ethical, and inclusive workplace through its Code of Conduct, gender-neutral anti-harassment policy, and robust Business Responsibility and Risk (BRR) policies. These frameworks enable employees to report human rights concerns without fear of reprisal. Management ensures that all reported issues are thoroughly investigated and addressed in accordance with the Company's policies, while anti-retaliation measures further strengthen a respectful and supportive work environment for all.

9. Do human rights requirements form part of your business agreements and contracts? (Yes/No):

Yes

10. Assessment for the year:

	% of your plants and offices that were assessed (by entity or statutory authorities or third parties)
Child labour	100%
Forced/involuntary labor	100%
Sexual harassment	100%
Discrimination at workplace	100%
Wages	100%
labour laws compliance inspection	100%

11. Provide details of any corrective actions taken or underway to address significant risks/ concerns arising from the assessments at Question 10 above.

Not Applicable

Leadership Indicators**1. Details of a business process being modified/introduced as a result of addressing human rights grievances/complaints.**

Not applicable. Business processes were not modified/introduced as a result of addressing human rights grievances/complaints.

2. Details of the scope and coverage of any Human rights due diligence conducted.

The Company has not conducted a standalone human rights due diligence during the reporting period. However, respect for human rights is embedded in our governance framework through policies and practices relating to ethical business conduct, equal opportunity, non-discrimination, prevention of sexual harassment, employee health and safety, grievance redressal and compliance with applicable labour laws. The Company continues to monitor these aspects through its existing compliance and governance processes.

3. Is the premise/office of the entity accessible to differently abled visitors, as per the requirements of the Rights of Persons with Disabilities Act, 2016?

The Company is committed to creating an inclusive and accessible environment for all employees. In accordance with the Rights of Persons with Disabilities Act, 2016, all its hospitals in India are designed to meet the needs of persons with disabilities. This includes the provision of wheelchairs, ramps, accessible restrooms, and support staff as required, ensuring a barrier-free experience for everyone.

4. Details on assessment of value chain partners:

	% of value chain partners (by value of business done with such partners) that were assessed
Child labour	
Forced/involuntary labor	
Sexual harassment	
Discrimination at workplace	Nil
Wages	
Others-please specify	

5. Provide details of any corrective actions taken or underway to address significant risks/ concerns arising from the assessments in Question 4 above.

Not Applicable

PRINCIPLE 6:**Businesses should respect and make efforts to protect and restore the environment****Essential Indicators****1. Details of total energy consumption (in Joules or multiples) and energy intensity, in the following format:**

Parameter	Unit	FY 2026	FY 2025
From renewable sources			
Total electricity consumption (A) (In-house generation)	GJ	1,924.39	2,118.83
Total fuel consumption (B)	GJ	-	-
Energy consumption through other sources (C) – (Open Access)	GJ	29,598.18	28,639.27
Total energy consumed from renewable sources (A+B+C)	GJ	31,522.57	30,758.10
From non-renewable sources			
Total electricity consumption (D)	GJ	64,402.8	68,018.53
Total fuel consumption (E)	GJ	19,907	15,091.50
Energy consumption through other sources (F) (Natural Gas)	GJ	-	-
Total energy consumed from non-renewable sources (D+E+F)	GJ	84,309.8	83,110.03
Total energy consumed (A+B+C+D+E+F)	GJ	1,15,832.37	1,13,868.13
Energy intensity per rupee of turnover (Total energy consumption/ turnover in rupees)	GJ/Million INR	6.80	7.82
Energy intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total energy consumed/ Revenue from operations adjusted for PPP)	GJ/Million INR adjusted to PPP	138.33	161.74
Energy intensity in terms of physical output	GJ/No. of beds	48.77	55.14
Energy intensity (optional)- the relevant metric may be selected by the entity		-	-

Note: Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency. Yes. Reasonable assurance has been carried out by M/s. Adwin Advisory Private Limited for Financial Year 2025-26.

2. Does the entity have any sites/facilities identified as designated consumers (DCs) under the Performance, Achieve, and Trade (PAT) Scheme of the Government of India? (Y/N) If yes, disclose whether targets set under the PAT scheme have been achieved. In case targets have not been achieved, provide the remedial action taken, if any.

No

3. Provide details of the following disclosures related to water, in the following format:

Parameter	FY 2026	FY 2025
Water withdrawal by source (in kilolitres)		
(i) Surface Water	-	-
(ii) Ground Water	1,36,194.66	1,41,577.43*
(iii) Third Party Water	59,363.25	32,974.9
(iv) Seawater / desalinated water	-	-
(v) Others (Municipal)	70,407.76	68,479.7*
Total volume of water withdrawal (in kilolitres) (i + ii + iii + iv + v)	2,65,965.67	2,43,032.03*
Total volume of water consumption (in kilolitres)	1,50,887.28	1,33,260.12*
Water intensity per rupee of turnover (Total Water consumption / Revenue from operations) in kL/Million INR	8.85	9.16*
Water intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total water consumption/ Revenue from operations adjusted for PPP) in kL/Million INR adjusted to PPP	180.20	189.28*
Water intensity in terms of physical output in kL/No. of beds	63.53	64.53*
Water intensity (optional) – the relevant metric may be selected by the entity	-	-

*Figures have been restated to align with the revised calculation approach adopted in the current year

Note: Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency.

Yes. Reasonable assurance has been carried out by M/s. Adwin Advisory Private Limited for Financial Year 2025-26.

4. Provide the following details related to water discharged:

Parameter	FY 2026	FY 2025
Water discharge by destination and level of treatment (in kilolitres)		
i) To surface water		
- No treatment	-	-
- With treatment-please specify level of treatment	1,15,078.39	1,09,771.91
ii) To Groundwater		
- No treatment	-	-
- With treatment-please specify level of treatment	-	-
iii) To Seawater		
- No treatment	-	-
- With treatment-please specify level of treatment	-	-
iv) Sent to third-parties		
- No treatment	-	-
- With treatment-please specify level of treatment	-	-
v) Others		
- No treatment	-	-
- With treatment-please specify level of treatment	-	-
Total water discharge (in kilolitres)	1,15,078.39	1,09,771.91

Note: Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency.

Yes. Reasonable assurance has been carried out by Adwin Advisory Private Limited for Financial Year 2025-26.

5. Has the entity implemented a mechanism for Zero Liquid Discharge? If yes, provide details of its coverage and implementation.

No

6. Please provide details of air emissions (other than GHG emissions) by the entity, in the following format:

Parameter	Please specify unit	FY 2026	FY 2025
NOx	MT	1.182	2.331
Sox	MT	0.919	1.037
Particulate matter (PM)	MT	1.158	0.907
Persistent organic compounds (POP)	-	NA	NA
Volatile organic compounds (VOC)	-	NA	NA
Hazardous air pollutants (HAP)	-	NA	NA
Others-please specify	-	NA	NA

Note: Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency.

No

7. Provide details of greenhouse gas emissions (Scope 1 and Scope 2 emissions) & its intensity, in the following format:

Parameter	Unit	FY 2026	FY 2025
Total Scope 1 emissions (Break-up of the GHG into CO ₂ , CH ₄ , N ₂ O, HFCs, PFCs, SF ₆ , NF ₃ , if available)	Metric tonnes of CO ₂ equivalent	2346.06	2,055.61
Total Scope 2 emissions (Break-up of the GHG into CO ₂ , CH ₄ , N ₂ O, HFCs, PFCs, SF ₆ , NF ₃ , if available)	Metric tonnes of CO ₂ equivalent	12,701.66	13,735.96
Total Scope 1 and Scope 2 emission intensity per rupee of turnover (Total Scope 1 and Scope 2 GHG emissions / Revenue from operations)	emission intensity per million rupees of turnover	0.88	1.09
Total Scope 1 and Scope 2 emission intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total Scope 1 and Scope 2 GHG emissions / Revenue from operations adjusted for PPP)	emission intensity per million rupees of turnover adjusted for Purchasing Power Parity (PPP)	17.97	22.43
Total Scope 1 and Scope 2 emission intensity in terms of physical output (in terms of number of beds)	emission intensity per number of bed	6.33	7.65

Note: Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency.

Yes. Reasonable assurance has been carried out by Adwin Advisory Private Limited for Financial Year 2025-26.

8. Does the entity have any project related to reducing Green House Gas emission? If Yes, then provide details.

Yes, the Company has undertaken Solar Rooftop (SRT) installations at its Rajahmundry facility as part of its ongoing commitment to environmental sustainability and clean energy adoption. In addition, solar water heaters have been incorporated into new projects to promote energy efficiency and reduce dependence on conventional energy sources. These renewable energy initiatives contribute significantly to the Company's carbon reduction efforts, with the Solar Rooftop installation expected to avoid approximately 64 tons of carbon emissions annually, while the solar water heaters are estimated to prevent nearly 140 tons of carbon emissions per year. Through these initiatives, the Company continues to strengthen its focus on sustainable infrastructure and responsible environmental stewardship.

9. Provide details related to waste management by the entity, in the following format:

Parameter	FY 2026	FY 2025
Total Waste generated (in metric tonnes)		
Plastic waste (A)	5.74	4.06
E-waste (B)	3.48	1.73
Biomedical Waste (C)	365.68	339.17
Construction and demolition waste (D)	0.36	0
Battery waste (E)	0.01	3.55
Radioactive waste (F)	0	0
Other Hazardous waste. Please specify, if any. (G) (Waste Oil)	0.97	0.35
Other Non-hazardous waste generated (H). Please specify, if any. (Break-up by composition i.e. by materials relevant to the sector)	1,307.32	935.12
Total (A+B + C + D + E + F + G + H)	1,683.56	1,283.97
Waste intensity per rupee of turnover (Total waste generated / Revenue from operations)	0.098	0.089
Waste intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total waste generated / Revenue from operations adjusted for PPP)	2.01	1.82
Waste intensity in terms of physical output (in terms of number of beds)	0.70	0.62

Parameter	FY 2026	FY 2025
For each category of waste generated, total waste recovered through recycling, re-using or other recovery operations (in metric tonnes)		
Category of waste		
i) Recycled	-	-
ii) Re-used	-	-
iii) Other recovery operations (Co-processing)	-	-
Total	-	-
For each category of waste generated, total waste disposed by nature of disposal method (in metric tonnes)		
Category of waste		
i) Incineration	-	-
ii) Landfilling	-	-
iii) Other disposal operations	1,683.56	1,283.97
Total	1,683.56	1,283.97

Note: Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency.

Yes. Reasonable assurance has been carried out by Adwin Advisory Private Limited for Financial Year 2025-26.

10. Briefly describe the waste management practices adopted in your establishments. Describe the strategy adopted by your company to reduce usage of hazardous and toxic chemicals in your products and processes and the practices adopted to manage such wastes.

Waste or scrap materials generated during operations primarily comprise discarded items after use, as well as residual packaging materials arising from product manufacturing and consumption. Based on the level of infection risk and hazardous intensity, waste is strategically classified into two broad categories: Hazardous Waste and Non-Hazardous Waste.

Hazardous Waste is further divided into Solid Hazardous Waste and Liquid Hazardous Waste. Solid Hazardous Waste includes Clinical Hazardous Waste, such as Biomedical Waste (BMW), and Non-Clinical Hazardous Waste, including e-waste and battery waste. Liquid Hazardous Waste comprises medical effluent waste and waste oil generated from operations.

Non-Hazardous Waste is categorised into Solid General Waste, General Scrap, and Liquid Waste, such as treated sewage water from Sewage Treatment Plants (STP). These classifications enable effective waste segregation, safe handling, regulatory compliance, and environmentally responsible disposal practices.

Categories of Waste:

1. Solid Waste

- **General Waste:** Includes dry waste such as wrappers, paper, and tissues, along with wet waste comprising biodegradable kitchen and food waste.
- **Biomedical Waste (BMW):** Consists of human anatomical waste and contaminated medical materials, managed in strict accordance with the organisation's Biomedical Waste Management Policy and applicable regulatory requirements.
- **Scrap Waste:** Includes recyclable materials such as iron, plastic, cardboard, and other reusable materials, which are disposed of through authorised recycling vendors.
- **E-Waste:** Comprises discarded electrical and electronic equipment, managed in line with ESG guidelines in collaboration with authorised recyclers, including M/s Trittech Systems.

2. Liquid Waste

- **Infected Liquids:** Generated from surgical procedures, laboratories, and clinical processes requiring specialised handling and treatment.
- **Waste Oils:** Includes used oil generated from kitchens and diesel generators, which is disposed of through authorised CPCB-approved vendors.
- **Wastewater:** Treated through in-house Sewage Treatment Plant (STP) and Effluent Treatment Plant (ETP) systems prior to safe discharge into municipal drainage systems.

Waste Disposal Practices

- General waste is routed through authorised municipal waste management channels.
- Biomedical waste is collected and disposed of through authorised regulatory partners in compliance with biomedical waste management regulations.
- E-waste is systematically collected, safely stored, and periodically disposed of in accordance with the organisation's ESG policy.
- Scrap materials and waste oils are managed through approved vendors, with disposal records maintained for monitoring and traceability.
- Wastewater is treated in compliance with applicable environmental norms to prevent pollution and contamination.

FY26 Key Initiatives

1. Transition towards the adoption of sustainable and low-carbon materials across operations.
2. Promotion of recyclable and eco-friendly bags to reduce environmental impact.
3. Increased use of eco-friendly toys in pediatric care areas.
4. Progressive phase-out of plastic bags across facilities and operations.
5. Strengthening waste segregation practices and ensuring authorised disposal of all waste streams.
6. Reinforcement of the "Reduce, Reuse, Recycle" principle across operational activities to enhance resource efficiency and sustainability.

- 11. If the entity has operations/offices in/around ecologically sensitive areas (such as national parks, wildlife sanctuaries, biosphere reserves, wetlands, biodiversity hotspots, forests, coastal regulation zones etc.) where environmental approvals / clearances are required, please specify details in the following format:**

Sr. no.	Location of operations/offices	Type of operations	Whether the conditions of environmental approval/ clearance are being complied with? (Y/N) If no, the reasons thereof and corrective action taken, if any.
Not applicable			

- 12. Details of environmental impact assessments of projects undertaken by the entity based on applicable laws, in the current financial year:**

Name and brief details of project	EIA Notification No.	Date	Whether conducted by independent external agency (Yes/No)	Results communicated in public domain (Yes/No)	Relevant Web link
Not applicable					

- 13. Is the entity compliant with the applicable environmental law/ regulations/ guidelines in India; such as the Water (Prevention and Control of Pollution) Act, Air (Prevention and Control of Pollution) Act, Environment protection act and rules thereunder (Y/N). If not, provide details of all such non-compliances, in the following format:**

Yes, the Company is in compliance with all the relevant statutory regulations and guidelines. There were no cases of non-compliances recorded during the financial year.

S. No.	Specify the law/regulation / guidelines which was not complied with	Provide details of the non-compliance	Any fines / penalties / action taken by regulatory agencies such as pollution control boards or by courts	Corrective action taken, if any
Yes, the Company is in compliance with all the relevant statutory regulations and guidelines. There were no cases of non-compliances recorded during the financial year.				

Leadership Indicators**1. Water withdrawal, consumption and discharge in areas of water stress (in kilolitres):**

For each facility/ plant located in areas of water stress, provide the following information:

i) Name of the area

ii) Nature of operations

iii) Water withdrawal, consumption and discharge in the following format:

Parameter	FY 2026	FY 2025
Water withdrawal by source (in kilolitres)		
i) Surface Water	-	-
ii) Ground Water	-	-
iii) Third Party Water	-	-
iv) Seawater / desalinated water	-	-
v) Others	-	-
Total volume of water withdrawal (in kilolitres)	-	-
Total volume of water consumption (in kilolitres)	-	-
Water intensity per rupee of turnover (Total Water consumption / Revenue from operations)	-	-
Water intensity (optional) – the relevant metric may be selected by the entity	-	-
Water discharge by destination and level of treatment (in kilolitres)		
i) Into Surface water		
- No treatment	-	-
- With treatment – please specify level of treatment	-	-
ii) Into Groundwater		
- No treatment	-	-
- With treatment – please specify level of treatment	-	-
iii) Into Seawater		
- No treatment	-	-
- With treatment – please specify level of treatment	-	-
iv) Sent to third-parties		
- No treatment	-	-
- With treatment – please specify level of treatment	-	-
v) Others		
- No treatment	-	-
- With treatment – please specify level of treatment	-	-
Total water discharged (in kilolitres)	-	-

Note: Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency.

2. Please provide details of total Scope 3 emissions & its intensity, in the following format:

Parameter	Unit	FY 2026	FY 2025
Total Scope 3 emissions (Break-up of the GHG into CO ₂ , CH ₄ , N ₂ O, HFCs, PFCs, SF ₆ , NF ₃ , if available)	Metric tonnes of CO ₂ equivalent	-	-
Total Scope 3 emissions per rupee of turnover	emissions per rupee of turnover	-	-
Total Scope 3 emission intensity (optional) – the relevant metric may be selected by the entity		-	-

Note: Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency.

No

3. With respect to the ecologically sensitive areas reported at Question 11 of Essential Indicators above, provide details of significant direct & indirect impact of the entity on biodiversity in such areas along with prevention and remediation activities.

NA

4. If the entity has undertaken any specific initiatives or used innovative technology or solutions to improve resource efficiency or reduce impact due to emissions/effluent discharge/waste generated, please provide details of the same as well as outcome of such initiatives, as per the following format:

Sr. No	Initiative undertaken	Details of the initiative (Web-link, if any, may be provided along-with summary)	Outcome of the initiative
1	Renewable Energy Commissioning (Solar Roof top) at Rajahmundry	Renewable Energy Commissioning (Solar Roof top) at Rajahmundry	Energy Generation $80 * 4 = 320$ kwh/day, 72000 kwh/year, Carbon emission going to be avoided - 85 M tons/year.
	AHU with VRV control system	Energy Conservation technology used in new projects such as Mahadevpura IVF, Hennur IP, Electronic City in Bangalore and Vijayawada & LB Nagar for efficient energy usage and less carbon emissions	Energy savings - 25 % than conventional HVAC
	Solar Water Heaters and Heat pumps	Green Energy has been implemented in new projects for efficient use of renewable energy and Energy efficient Heat pumps for water heating	<ul style="list-style-type: none"> Heat pumps are 3.5 times more efficient than conventional electric heaters, resulting in energy savings of approximately 18,256 units across two newly commissioned units. Solar water heaters contributed additional savings of approximately 20,296 units of energy. These initiatives generated financial savings of around ₹1.6 lakh and helped avoid approximately 18 tonnes of carbon emissions.
	LED Lighting system	We executed Energy efficient LED lighting system	50 % more efficient than CFL and conventional Tubes
	Fixing of Retrofit Emission control Device	we fixed RECD - Devices at stack point of DGs for controlling and minimising emissions	As per CPCB it would be 70 to 90 % reduction in emissions (Particulate mater), co, HC and Nox

5. Does the entity have a business continuity and disaster management plan? Give details in 100 words/ web link.

We prioritize comprehensive disaster management and business continuity to protect lives, assets, and essential healthcare services during natural or man-made crises. Our hospitals leverage a National Emergency Services Network and 24/7 trauma care to handle threats like earthquakes, floods, fires, chemical spills, cyberattacks, and pandemics, supported by annual site-specific risk assessments and updated response plans featuring evacuation protocols, communication strategies, and triage procedures.

Preparedness Measures:

Each facility creates tailored evacuation plans from centralized SOPs, conducts quarterly mock drills, and delivers safety training across scenarios. Partnerships with nearby hospitals enable smooth patient transfers during emergencies.

Risk Framework:

Our Enterprise Risk Management operates at Corporate, Regional, and Unit levels to identify and mitigate growth-threatening risks. The Audit, Risk & Compliance Committee and Executive Leadership Team review critical risks, while organization-wide Business Continuity and Disaster Management Plans minimize downtime, losses, and disruptions for swift recovery.

6. Disclose any significant adverse impact to the environment, arising from the value chain of the entity. What mitigation or adaptation measures have been taken by the entity in this regard.

The Company has not conducted any formal assessment of value chain partners with respect to their direct or indirect environmental impacts during the reporting period..

7. Percentage of value chain partners (by value of business done with such partners) that were assessed for environmental impacts.

NA

8. How many Green Credits have been generated or procured:

a. By the listed entity - Nil

b. By the top ten (in terms of value of purchases and sales, respectively) value chain partners - Nil

PRINCIPLE 7:

Businesses, when engaging in influencing public and regulatory policy, should do so in a manner that is responsible and transparent

Essential Indicators

1. a. Number of affiliations with trade and industry chambers/associations.

10

- b. List the top 10 trade and industry chambers/associations (determined based on the total members of such body) the entity is a member of/ affiliated to.

S. No.	Name of the trade and industry chambers/ associations	Reach of trade and industry chambers/ associations (State/National)
1	Associated Chambers of Commerce and Industry of India (ASSOCHAM)	National
2	Directorate of Medical Education	National
3	Telangana Super Specialty Hospitals Association	State
4	Consortium of Accredited Healthcare Organizations (CAHO)	National
5	Association of Healthcare Providers India (AHPI)	National
6	Confederation of Indian Industry (CII) - Healthcare Council	National
7	Healthcare Federation of India (NATHEALTH)	National
8	Indian Medical Association (IMA)	National
9	National Accreditation Board for Hospitals & Healthcare Providers (NABH)	National
10	Federation of Telangana Chambers of Commerce and Industry (FTCCI)	State

2. Provide details of corrective action taken or underway on any issues related to anti-competitive conduct by the entity, based on adverse orders from regulatory authorities.

Name of authority	Brief of the case	Corrective action taken
	Not applicable	

Leadership Indicators

1. Details of public policy positions advocated by the entity:

S. No.	Public policy advocated	Method resorted for such advocacy	Whether information available in public domain? (Yes/No)	Frequency of Review by Board (Annually/ Half yearly/ Quarterly / Others – please specify)	Web Link, if available
-	-	-	-	-	-

PRINCIPLE 8:**Businesses should promote inclusive growth and equitable development****Essential Indicators**

1. Details of Social Impact Assessments (SIA) of projects undertaken by the entity based on applicable laws, in the current financial year:

Name and brief details of project	SIA Notification No.	Date of notification	Whether conducted by independent external agency (Yes / No)	Results communicated in public domain (Yes / No)	Relevant Web link
Not applicable					

2. Provide information on project(s) for which ongoing Rehabilitation and Resettlement (R&R) is being undertaken by your entity, in the following format:

S. No	Name of Project for which R&R is ongoing	State	District	No. of Project Affected Families (PAFs)	% of PAFs covered by R&R	Amounts paid to PAFs in the FY (In INR)
Not applicable						

3. Describe the mechanisms to receive and redress grievances of the community.

Rainbow has established a comprehensive grievance redressal mechanism to ensure that concerns raised by local communities are addressed promptly and effectively. The key channels include:

1. **Multi-Channel Communication Access:**

Rainbow provides a dedicated email ID, toll-free number, and official social media handles through which community members can raise concerns. Any query or complaint received via these channels is promptly directed to the respective operational unit for resolution

2. **On-Ground Public Relations Support:**

Each operational unit is supported by a dedicated Public Relations Officer (PRO). When a concern is raised, the PRO ensures it is communicated to the relevant department or functionary and follows through to facilitate a timely resolution

3. **Engagement with Local Authorities:**

Community members also have the option to report concerns directly to relevant local government authorities such as the Police Department, Health Department, or Municipal Corporation. Rainbow fully cooperates with these authorities to resolve issues.

4. **Percentage of input material (inputs to total inputs by value) sourced from suppliers:**

	FY 2026	FY 2025
Directly sourced from MSMEs/ small producers	53%	62%
Directly from within India	100%	100%

5. **Job creation in smaller towns – Disclose wages paid to persons employed (including employees or workers employed on a permanent or non-permanent / on contract basis) in the following locations, as % of total wage cost**

Location	FY 2026	FY 2025
Rural	0	-
Semi-urban	0	-
Urban	1.2%	-
Metropolitan	98.7%	100%

(Place to be categorized as per RBI Classification System - rural / semi-urban / urban / metropolitan)

Leadership Indicators

1. Provide details of actions taken to mitigate any negative social impacts identified in the Social Impact Assessments (Reference: Question 1 of Essential Indicators above):

Details of negative social impact identified	Corrective action taken
Not applicable	

2. Provide the following information on CSR projects undertaken by your entity in designated aspirational districts as identified by government bodies:

Sr. No.	State	Aspirational District	Amount spent (In INR)
Not applicable			

3. A. Do you have a preferential procurement policy where you give preference to purchase from suppliers comprising marginalized/ vulnerable group? (Yes/ No)
No
- B. From which marginalized /vulnerable groups do you procure?
Not Applicable
- C. What percentage of total procurement (by value) does it constitute?
Not Applicable

4. Details of the benefits derived and shared from the intellectual properties owned or acquired by your entity (in the current financial year), based on traditional knowledge:

S. No.	Intellectual Property based on traditional knowledge	Owned/ Acquired (Yes/No)	Benefit shared (Yes / No)	Basis of calculating benefit share
-	Nil	Nil	Nil	Nil

5. Details of corrective actions taken or underway, based on any adverse order in intellectual property-related disputes wherein usage of traditional knowledge is involved.

Name of authority	Brief of the Case	Corrective action taken
Not Applicable		

6. Details of beneficiaries of CSR Projects:

S. No	CSR Project	No. of persons benefitted from CSR Projects	% of beneficiaries from vulnerable and marginalized groups
1	Support to Emerging Sports Talent – Sanjana Sirimalla from Telangana, India	1	100
2	Swarna Bharat Trust	887	45.65
3	Datri Blood Stem Cell Donors Registry	56	35.71

PRINCIPLE 9:**Businesses should engage with and provide value to their consumers in a responsible manner****Essential indicators****1. Describe the mechanisms in place to receive and respond to consumer complaints and feedback.**

The Company has established a multi-channel customer feedback and grievance redressal mechanism through its website, dedicated email ID (queries@rainbowhospitals.in), call centre, SMS-based feedback, Google Business Profiles, social media platforms and its in-house application. All feedback and complaints are routed to the respective unit or department for timely resolution. The Company continues to strengthen its customer engagement framework through enhanced and centralised feedback management processes.

All feedback is shared with relevant teams for action, and the process is being upgraded with new, centralized touchpoints

2. Turnover of products and/ services as a percentage of turnover from all products/services that carry information about:

State	As a percentage to total turnover
Environmental and social parameters relevant to the product	
Safe and responsible usage	Not applicable
Recycling and/or safe disposal	

3. Number of consumer complaints in respect of the following:

	FY 2026		Remarks	FY 2025		Remarks
	Received during the year	Pending resolution at end of year		Received during the year	Pending resolution at end of year	
Data privacy	Nil	Nil	-	Nil	Nil	-
Advertising	Nil	Nil	-	Nil	Nil	-
Cyber-security	Nil	Nil	-	Nil	Nil	-
Delivery of essential services	30 *	3	-	21	7	-
Restrictive Trade Practices	Nil	Nil	-	Nil	Nil	-
Unfair Trade Practices	Nil	Nil	-	Nil	Nil	-
Others (Products defects reported)	Nil	Nil	-	Nil	Nil	-

Notes : (Includes past/pending cases; if received during the year, the total number of complaints/cases stood at 10 as on March 31, 2026)

4. Details of instances of product recalls on account of safety issues:

	Number	Reasons for recall
Voluntary recalls	0	-
Forced recalls	0	-

5. Does the entity have a framework/ policy on cyber security and risks related to data privacy? (Yes/No) If available, provide a web-link of the policy.

Rainbow Hospitals is committed to protecting personal privacy through a strong cybersecurity framework and data privacy policy. It follows industry standards with continuous monitoring, risk assessments, and staff training. The privacy policy, available at <https://www.rainbowhospitals.in/terms-and-conditions>, outlines how personal information is collected, used, and secured.

6. Provide details of any corrective actions taken or underway on issues relating to advertising, and delivery of essential services; cyber security and data privacy of customers; re-occurrence of instances of product recalls; penalty/ action taken by regulatory authorities on safety of products/services.

None

7. Provide the following information relating to data breaches:**a. Number of instances of data breaches**

NIL

b. Percentage of data breaches involving personally identifiable information of customers

NIL

c. Impact, if any, of the data breaches

NIL

Leadership Indicators**1. Channels/platforms where information on products and services of the entity can be accessed (provide web link, if available).**

The website features details regarding the company's healthcare services. The link for the website is <https://www.rainbowhospitals.in/>

LinkedIn: <https://in.linkedin.com/company/rainbow-hospital>

Instagram: <https://www.instagram.com/rainbowchildrenshospitals/?hl=en>

Twitter: https://twitter.com/rch_india?lang=en

Facebook: <https://www.facebook.com/rainbowchildrenshospitals>

2. Steps taken to inform and educate consumers about safe and responsible usage of products and/ or services.

Not applicable, owing to the nature of the business

3. Mechanisms in place to inform consumers of any risk of disruption/ discontinuation of essential services.

Rainbow engaged a leading consulting firm for a comprehensive Risk Assessment study to identify key vulnerabilities. Immediate corrective actions were implemented upon detection. Additionally, the company selected AWS as its website hosting platform, leveraging AWS's built-in Business Continuity Planning (BCP) features to ensure reliable availability.

4. A. Does the entity display product information on the product over and above what is mandated as per local laws? (Yes/No/Not Applicable)

Not Applicable

B. If yes, provide details in brief.

NA

Did your entity carry out any survey with regard to consumer satisfaction relating to the major products / services of the entity, significant locations of operation of the entity or the entity as a whole? (Yes/No)

Rainbow Children's Medicare Limited regularly surveys customer satisfaction across key services and major locations. Patient feedback is gathered primarily via SMS for OPD and call center services, supplemented by Net Promoter Scores (NPS) from outpatient and inpatient forms. The company also tracks Google My Business (GMB) ratings closely.

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Independent Assurance Statement

Independent Assurance Statement to Rainbow Children's Medicare Limited on its BRSR Core Report for FY 2025-26

TO THE BOARD OF DIRECTORS OF RAINBOW CHILDREN'S MEDICARE LIMITED

1. We, Adwin Advisory Private Limited ("Adwin"), have undertaken a **reasonable assurance engagement** for RAINBOW CHILDREN'S MEDICARE LIMITED (the "Company"), pursuant to our engagement letter dated **January 31, 2026**, in respect of the selected sustainability information comprising the **nine BRSR Core indicators** (the "Identified Sustainability Information") for the period **April 1, 2025 to March 31, 2026** (the "Reporting Period").

The Identified Sustainability Information forms part of the Business Responsibility and Sustainability Report ("BRSR") prepared by the Company for the above-mentioned period. This engagement was conducted by our multidisciplinary team, including assurance practitioners, environmental engineers, and specialists.

2. Identified Sustainability Information

The scope of our reasonable assurance engagement is limited to the nine BRSR Core indicators, as detailed in Appendix I of this report (the "Identified Sustainability Information"). The reporting boundary for these disclosures is in accordance with Question 13 of Section A: General Disclosures of the BRSR. Any specific exclusions or deviations from this boundary, where applicable, have been appropriately disclosed by the Company through notes under the respective questions in the BRSR.

3. Criteria

The Identified Sustainability Information has been prepared by the Company in accordance with the following criteria:

- Regulation 34(2)(f) of the Securities and Exchange Board of India (the "SEBI") (Listing Obligations and Disclosure Requirements), Regulations, 2015 as amended;

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- Business Responsibility and Sustainability Reporting Requirements for listed entities per Master Circular No. SEBI/HO/CFD/PoD2/CIR/P/0155 dated November 11, 2024 (the "SEBI Master Circular");
- SEBI Press Release PR No.36/2024 dated December 18, 2024; – Industry Standards on Reporting of BRSR Core as per SEBI Circular SEBI/HO/CFD/CFD-PoD-1/P/ CIR/2024/177 dated December 20, 2024; and
- SEBI Circular SEBI/HO/CFD/CFD - PoD- 1/P/ CIR/2025/42 dated March 28, 2025.

4. Management's Responsibility

- The preparation, content, and presentation of the information included in the Report are the sole responsibility of the Company's management. Adwin has not participated in the preparation or development of any of the underlying information contained in the Report.
- The Company's management is also responsible for the preparation and presentation of the other information included in the BRSR, excluding the Identified Sustainability Information and our independent assurance report thereon.
- Our responsibility is limited to expressing an independent, reasonable assurance opinion on the text, data, and statements falling within the defined scope of this engagement, in accordance with the agreed terms of reference, and for the purpose of informing the Company's management. We do not accept or assume any responsibility beyond the scope of this engagement.
- This assurance statement should not be relied upon for assessing or interpreting the overall performance of the Company, except in relation to the specific matters covered within the defined scope of assurance.

5. Inherent Limitations

The limited availability of well-established frameworks and practices for evaluating and measuring non-financial information may result in the use of varied, yet acceptable, measurement approaches and techniques. Consequently, this may impact the comparability of such information across different companies.

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6. Our Independence and Quality Control

We, Adwin Advisory Pvt. Ltd., have maintained our independence throughout this engagement and have complied with applicable ethical principles, including integrity, objectivity, professional competence and due care, confidentiality, and professional behavior, in accordance with relevant regulatory requirements and internationally accepted assurance practices. We confirm that our team possesses the necessary competencies, capabilities, and experience to perform this reasonable assurance engagement.

Further, we have established and maintain a quality management system designed to ensure compliance with applicable professional standards and regulatory requirements, including documented policies and procedures governing ethical conduct, engagement performance, and quality control.

7. Our Responsibility

Our responsibility is to express a reasonable assurance opinion on the Identified Sustainability Information set out in Appendix I, based on the procedures performed and the evidence obtained during the course of our engagement.


We conducted our assurance engagement in accordance with International Standard on Assurance Engagements (ISAE) 3000 (Revised), Assurance Engagements other than Audits or Reviews of Historical Financial Information, and, where relevant, ISAE 3410, Assurance Engagements on Greenhouse Gas Statements (collectively referred to as the "Standards").

These Standards require that we plan and perform the engagement to obtain reasonable assurance as to whether the Identified Sustainability Information included in the Report has been prepared, in all material respects, in accordance with the defined criteria.

8. Reasonable Assurance

A reasonable assurance engagement entails the identification and assessment of risks that could lead to material misstatement in the Identified Sustainability Information, whether arising from fraud or error, and the design and execution of procedures to address such risks in the given context. The nature and extent of procedures performed were determined based on our professional judgment and included, among others, making inquiries, observing key processes, reviewing relevant documentation, assessing the suitability of measurement and reporting methodologies, performing analytical procedures, and verifying information through

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reconciliation with underlying records.

The assurance procedures are performed at the corporate level and for hospitals and locations listed in the reporting boundaries of BRSR under Section A of the BRSR Report.

Considering the nature and scope of this engagement, our procedures included the following:

- Gaining an understanding of the Identified Sustainability Information and the related disclosures presented in the Report;
- Obtaining an understanding of the assessment criteria and their suitability for the evaluation and / or measurement of the Identified Sustainability Information;
- Conducting discussions with relevant personnel, including members of management and teams such as environment, energy, sustainability, compliance, and human resources, as well as individuals responsible for the preparation of the Report;
- Understanding and assessing the design of key systems, processes, and internal controls established for capturing, processing, and reporting the Identified Sustainability Information across the corporate office and plants on a sample basis. This also involved determining whether such controls have been implemented through procedures performed beyond inquiries;
- Based on the above understanding and risk assessment, determining the appropriate nature, timing, and extent of further assurance procedures;
- Reviewing key assumptions, emission factors, and methodologies adopted for the quantification of greenhouse gas (GHG) emissions;
- Assessing the processes followed by the Company for compiling sustainability data, including verification through sample-based reconciliation with underlying records; and
- Evaluating, on a sample basis, the consolidation of data from various plants and offices within the defined reporting boundary to assess completeness of the information reported.

Based on the procedures performed and the evidence obtained, we believe that the evidence is sufficient and appropriate to provide a reasonable basis for our assurance opinion.

9. Exclusions

Our assurance engagement was limited to the Identified Sustainability Information

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set out in Appendix I, and accordingly, our opinion does not extend to the following:

- Any operations of the Company that fall outside the reporting boundary defined for the Identified Sustainability Information;
- Any sections, disclosures, or data (whether qualitative or quantitative) within the Report other than the Identified Sustainability Information; and
- Statements that describe the Company's views, beliefs, aspirations, expectations, or forward-looking statements.

10. Reasonable Assurance Conclusion

Based on the procedures we have performed and the evidence we have obtained, in our opinion, the Identified Sustainability Information listed in Appendix I and presented in the Report for the financial year April 1, 2025 to March 31, 2026 is prepared, in all material respects, in accordance with the Criteria as stated in point 3 above.

11. Restriction on Use

Our Reasonable Assurance report has been prepared and addressed to the Board of Directors of the Company at the request of the Company solely, to assist the Company in reporting on the Company's sustainability performance and activities. Accordingly, we accept no liability to anyone, other than the Company. Our Reasonable Assurance report should not be used for any other purpose or by any person other than the addressees of our report. We neither accept nor assume any duty of care or liability for any other purpose or to any other party to whom our report is shown or into whose hands it may come without our prior consent in writing.


For or on behalf Adwin Advisory Private Limited

Sd/-
Ankita Kothari
Director

Sd/-
Sanskar Mittal
Technical Reviewer

Date: May 15, 2026

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ADWIN ADVISORY PRIVATE LIMITED**Appendix I**

The list of BRSR Core Indicators that were verified within this assurance engagement is given below:

S.No.	BRSR Core Attributes	BRSR Core Indicators
1.	Greenhouse Gas (GHG) Footprint	<ul style="list-style-type: none"> Total Scope 1 emissions Total Scope 2 emissions GHG Emission Intensity (Scope 1 + 2)
2.	Water Footprint	<ul style="list-style-type: none"> Total water consumption Water consumption intensity Water discharge by destination and levels of treatment
3.	Energy Footprint	<ul style="list-style-type: none"> Total energy consumed Percentage of energy consumed from renewable sources Energy intensity
4.	Embracing Circularity	<ul style="list-style-type: none"> Plastic waste E-waste Bio-medical waste Construction and demolition waste Battery waste Radioactive waste Other hazardous waste Other non-hazardous waste Total waste generated Waste intensity Total waste recovered through recycling, re-using, or other recovery operations Total waste disposed by nature of disposal method
5.	Employee Well-being and Safety	<ul style="list-style-type: none"> Spending on measures towards employee well-being as a percentage of total revenue from operations of the company Details of safety-related incidents for employees

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S.No.	BRSR Core Attributes	BRSR Core Indicators
6.	Enabling Gender Diversity in Business	<ul style="list-style-type: none"> Gross wages paid to females as a percentage of total wages paid Complaints on POSH
7.	Enabling Inclusive Development	<ul style="list-style-type: none"> Input material sourced from MSMEs/small producers as a percentage of total purchases directly sourced from MSMEs/small producers and directly from within India Job creation in smaller towns – wages paid to persons employed in smaller towns as a percentage of total wage cost
8.	Fairness in Engaging with Customers and Suppliers	<ul style="list-style-type: none"> Instances involving loss/breach of data of customers as a percentage of total data breaches or cyber security events Number of days of accounts payable
9.	Open-ness of Business	<ul style="list-style-type: none"> Concentration of purchases and sales done with trading houses, dealers, and related parties Loans and advances and investments with related parties

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Independent auditor's report

To the Members of Rainbow Children's Medicare Limited

Report on the Audit of the Standalone Financial Statements

OPINION

We have audited the standalone financial statements of Rainbow Children's Medicare Limited ("the Company"), which comprise the Balance sheet as at March 31, 2026, the Statement of Profit and Loss, including the statement of Other Comprehensive Income, the Cash Flow Statement and the Statement of Changes in Equity for the year then ended, and notes to the standalone financial statements, including a summary of material accounting policies and other explanatory information.

In our opinion and to the best of our information and according to the explanations given to us, the aforesaid standalone financial statements give the information required by the Companies Act, 2013, as amended ("the Act") in the manner so required and give a true and fair view in conformity with the accounting principles generally accepted in India, of the state of affairs of the Company as at March 31, 2026, its profit including other comprehensive income, its cash flows and the changes in equity for the year ended on that date.

BASIS FOR OPINION

We conducted our audit of the standalone financial statements in accordance with the Standards on Auditing (SAs), as specified under section 143(10) of the Act. Our responsibilities under those Standards are further described in the 'Auditor's Responsibilities for the Audit of the Standalone Financial Statements' section of our report. We are independent of the Company in accordance with the 'Code of Ethics' issued by the Institute of Chartered

Accountants of India together with the ethical requirements that are relevant to our audit of the financial statements under the provisions of the Act and the Rules thereunder, and we have fulfilled our other ethical responsibilities in accordance with these requirements and the Code of Ethics. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion on the standalone financial statements.

KEY AUDIT MATTERS

Key audit matters are those matters that, in our professional judgment, were of most significance in our audit of the standalone financial statements for the financial year ended March 31, 2026. These matters were addressed in the context of our audit of the standalone financial statements as a whole, and in forming our opinion thereon, and we do not provide a separate opinion on these matters. For each matter below, our description of how our audit addressed the matter is provided in that context.

We have determined the matters described below to be the key audit matters to be communicated in our report. We have fulfilled the responsibilities described in the Auditor's responsibilities for the audit of the standalone financial statements section of our report, including in relation to these matters. Accordingly, our audit included the performance of procedures designed to respond to our assessment of the risks of material misstatement of the standalone financial statements. The results of our audit procedures, including the procedures performed to address the matters below, provide the basis for our audit opinion on the accompanying standalone financial statements.

Key audit matters	How our audit addressed the key audit matter
<p>Impairment of loan receivable (as described in Note 2.10 & 2.11 of the standalone financial statements)</p> <p>In the earlier years, the Company has given an unsecured loan to an external party (Madhukar Rainbow Children's Hospital). As at March 31, 2026 the loan outstanding balance is ₹ 315.02 million (including Interest accrued of ₹ 111.54 million).</p> <p>Due to the insufficient cash profits in the aforementioned party for the repayment of the loan, the Company is exposed to risk in respect of the recoverability of the loan.</p>	<p>In view of the significance of the matter, we performed the following procedures:</p> <ol style="list-style-type: none"> 1. Evaluated the design and implementation and tested operating effectiveness of key internal controls over the Company's impairment assessment process of the loan receivable. 2. Traced interest paid during the year to bank statements and assessed the compliance with the stipulated terms of the loan agreement. 3. Obtained independent confirmation of balances as at March 31, 2026 from the external party. 4. Assessed the net worth of the external party on the basis of latest available financial statements.

Key audit matters	How our audit addressed the key audit matter
<p>The Company carries out assessment of recoverability of these loans and impairment at every period end. This assessment uses several key assumptions including estimates of future cash flows, discount rate and growth rate.</p> <p>We have identified impairment of loan as a key audit matter due to:</p> <ul style="list-style-type: none"> the significance of the carrying value of the loan; assessment of impairment involves Company's significant judgement and estimates. 	<p>5. Obtained the business projections of the external party from Management and performed the following procedures:</p> <ul style="list-style-type: none"> Compared the actual revenues and cash flows generated by the external party during the year with the budgets and estimates of the previous year. Evaluated the reasonability of future cash flow projections prepared by the Management with respect to the key assumptions which include discount rate and growth rate. Involved our internal experts to assess the methodology and key assumptions used for impairment assessment by management. <p>6. Verified the classification and disclosures of the loans in accordance with Schedule III of the Act and Ind-AS.</p>

OTHER INFORMATION

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

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

In connection with our audit of the standalone financial statements, our responsibility is to read the other information and, in doing so, consider whether such other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

RESPONSIBILITIES OF MANAGEMENT FOR THE STANDALONE FINANCIAL STATEMENTS

The Company's Board of Directors is responsible for the matters stated in section 134(5) of the Act with respect to the preparation of these standalone financial statements that give a true and fair view of the financial position, financial performance including other comprehensive income, cash flows and changes in equity of the Company in accordance with the accounting principles generally accepted in India, including the Indian Accounting Standards (Ind AS) specified under section 133 of the Act read with the Companies (Indian Accounting Standards) Rules, 2015, as amended. This responsibility also includes maintenance of adequate accounting records in accordance with the provisions of

the Act for safeguarding of the assets of the Company and for preventing and detecting frauds and other irregularities; selection and application of appropriate accounting policies; making judgments and estimates that are reasonable and prudent; and the design, implementation and maintenance of adequate internal financial controls, that were operating effectively for ensuring the accuracy and completeness of the accounting records, relevant to the preparation and presentation of the standalone financial statements that give a true and fair view and are free from material misstatement, whether due to fraud or error.

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

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

AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE STANDALONE FINANCIAL STATEMENTS

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

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

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

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

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

From the matters communicated with those charged with governance, we determine those matters that were of most significance in the audit of the standalone financial statements for the financial year ended March 31, 2026 and are therefore the key audit matters. We describe these matters in our auditor's report unless law or regulation precludes public disclosure about the matter or when, in extremely rare circumstances, we determine that a matter should not be communicated in our report because the adverse consequences of doing so would reasonably be expected to outweigh the public interest benefits of such communication.

REPORT ON OTHER LEGAL AND REGULATORY REQUIREMENTS

1. As required by the Companies (Auditor's Report) Order, 2020 ("the Order"), issued by the Central Government of India in terms of sub-section (11) of section 143 of the Act, we give in the "Annexure 1" a statement on the matters specified in paragraphs 3 and 4 of the Order.
2. As required by Section 143(3) of the Act, we report, to the extent applicable, that:
 - (a) We have sought and obtained all the information and explanations which to the best of our knowledge and belief were necessary for the purposes of our audit;
 - (b) In our opinion, proper books of account as required by law have been kept by the Company so far as it appears from our examination of those books except for the matters stated in the paragraph 2(i)(vi) below on reporting under Rule 11(g);
 - (c) The Balance Sheet, the Statement of Profit and Loss including the Statement of Other Comprehensive Income, the Cash Flow Statement and Statement of Changes in Equity dealt with by this Report are in agreement with the books of account;
 - (d) In our opinion, the aforesaid standalone financial statements comply with the Accounting Standards specified under Section 133 of the Act, read with Companies (Indian Accounting Standards) Rules, 2015, as amended;
 - (e) On the basis of the written representations received from the directors as on March 31, 2026 taken on record by the Board of Directors, none of the directors is disqualified as on March 31, 2026 from being appointed as a director in terms of Section 164 (2) of the Act;
 - (f) The modification relating to the maintenance of accounts and other matters connected therewith are as stated in paragraph (b) above.
 - (g) With respect to the adequacy of the internal financial controls with reference to these standalone financial

statements and the operating effectiveness of such controls, refer to our separate Report in “Annexure 2” to this report;

(h) In our opinion, the managerial remuneration for the year ended March 31, 2026 has been paid / provided by the Company to its directors in accordance with the provisions of section 197 read with Schedule V to the Act;

(i) With respect to the other matters to be included in the Auditor’s Report in accordance with Rule 11 of the Companies (Audit and Auditors) Rules, 2014, as amended in our opinion and to the best of our information and according to the explanations given to us:

i. The Company has disclosed the impact of pending litigations on its financial position in its standalone financial statements – refer note 2.28 to the standalone financial statements;

ii. The Company did not have any long-term contracts including derivative contracts for which there were any material foreseeable losses;

iii. There were no amounts which were required to be transferred to the Investor Education and Protection Fund by the Company.

iv. a) The management has represented that, to the best of its knowledge and belief, no funds have been advanced or loaned or invested (either from borrowed funds or share premium or any other sources or kind of funds) by the Company to or in any other persons or entities, including foreign entities (“Intermediaries”), with the understanding, whether recorded in writing or otherwise, that the Intermediary shall, whether directly or indirectly lend or invest in other persons or entities identified in any manner whatsoever by or on behalf of the Company (“Ultimate Beneficiaries”) or provide any guarantee, security or the like on behalf of the Ultimate Beneficiaries;

b) The management has represented that, to the best of its knowledge and belief, no funds have been received by the Company from any persons or entities, including foreign entities (“Funding Parties”), with the understanding, whether recorded in writing or otherwise, that the Company shall, whether directly or indirectly, lend or invest in other persons or entities identified in any manner whatsoever by or on behalf of the Funding Party (“Ultimate Beneficiaries”) or provide any guarantee, security or the like on behalf of the Ultimate Beneficiaries; and

c) Based on such audit procedures performed that have been considered reasonable and appropriate in the circumstances, nothing has come to our notice that has caused us to believe that the representations under sub-clause (a) and (b) contain any material misstatement.

v. The final dividend paid by the Company during the year in respect of the same declared for the previous year is in accordance with section 123 of the Act to the extent it applies to payment of dividend.

As stated in note 2.14(a) to the standalone financial statements, the Board of Directors of the Company have proposed final dividend for the year which is subject to the approval of the members at the ensuing Annual General Meeting. The dividend declared is in accordance with section 123 of the Act to the extent it applies to declaration of dividend.

vi. Based on our examination which included test checks, the Company has used accounting software for maintaining its books of account (SAP) and software for maintenance of hospital related revenue and consumption records (Arcus Air) which has a feature of recording audit trail (edit log) facility and the same has operated throughout the year for all relevant transactions recorded in the software’s except that, audit trail feature is not enabled for direct changes to data when using certain access rights, as described in note 2.47 to the standalone financial statements. Further, during the course of our audit we did not come across any instance of audit trail feature being tampered with, in respect of the software’s where the audit trail has been enabled. Additionally, the audit trail of prior years has been preserved by the Company as per the statutory requirements for record retention to the extent it was enabled and recorded in the respective years.

For S.R. Batliboi & Associates LLP

Chartered Accountants

ICAI Firm Registration Number: 101049W/E300004

per Atin Bhargava

Partner

Membership Number: 504777

UDIN: 26504777NILTXV1553

Place of Signature: Hyderabad

Date: May 23, 2026

Annexure '1' referred to in paragraph 1 under the heading "Report on other legal and regulatory requirements" of our report of even date

Re: Rainbow Children's Medicare Limited ("the Company")

In terms of the information and explanations sought by us and given by the Company and the books of account and records examined by us in the normal course of audit and to the best of our knowledge and belief, we state that:

- (i) (a) (A) The Company has maintained proper records showing full particulars, including quantitative details and situation of Property, Plant and Equipment.
- (a) (B) The Company has maintained proper records showing full particulars of intangible assets.
- (b) The Company has a regular program of physical verification of its Property, Plant and Equipment by which all property, plant and equipment are verified in a phased manner over a period of three years. In accordance with this program, certain property, plant and equipment were verified during the year. In our opinion, this periodicity of physical verification is reasonable having regard to the size of the Company and the nature of its assets. No material discrepancies were noticed on such verification.
- (c) The title deeds of all the immovable properties (other than properties where the Company is the lessee and the lease agreements are duly executed in favour of the lessee) are held in the name of the Company.
- (d) The Company has not revalued its Property, Plant and Equipment (including Right of use assets) or intangible assets during the year ended March 31, 2026.
- (e) There are no proceedings initiated or are pending against the Company for holding any benami property under the Prohibition of Benami Property Transactions Act, 1988 and rules made thereunder.
- (ii) (a) The management has conducted physical verification of inventory at reasonable intervals during the year. In our opinion the coverage and the procedure of such verification by the management is appropriate. No discrepancies were noticed on verification between the physical stocks and the book records that were more than 10% in the aggregate of each class of inventory.
- (b) The Company has not been sanctioned working capital limits in excess of ₹ five crores in aggregate from banks or financial institutions during any point of time of the year on the basis of security of current assets. Accordingly, the requirement

to report on clause 3(ii)(b) of the Order is not applicable to the Company.

- (iii) (a) During the year the Company has provided loans and advances in the nature of loans to companies and other parties as follows:

	Loans (₹ in million)	Advances in nature of loans (₹ in million)
Aggregate amount granted/ provided during the year		
- Subsidiaries	50.00	Nil
- Others	Nil	15.41
Balance outstanding as at balance sheet date in respect of above cases		
- Subsidiaries	50.00	Nil
- Others	203.47	10.71

- (b) The terms and conditions of the grant of all loans and advances in the nature of loans to companies and other parties are not prejudicial to the Company's interest.
- (c) The Company has granted loans and advance in the nature of loans during the year to companies and any other parties where the schedule of repayment of principal and payment of interest has been stipulated and the repayment or receipts are regular.
- (d) There are no amounts of loans or advances in the nature of loans granted to companies, firms, limited liability partnerships or any other parties which are overdue for more than ninety days.
- (e) There were no loans or advance in the nature of loan granted to companies or any other parties which was fallen due during the year, that have been renewed or extended or fresh loans granted to settle the overdues of existing loans given to the same parties.
- (f) The Company has not granted any loans or advances in the nature of loans, either repayable on demand or without specifying any terms or period of repayment to companies or any other parties. Accordingly, the requirement to report on clause 3(iii)(f) of the Order is not applicable to the Company.

- (iv) The Company has not advanced loans to directors / to a Company in which the director is interested to which provisions of section 185 of the Companies Act 2013 apply and hence not commented upon. Loans, investments, guarantees and security in respect of which provisions of 186 of the Companies Act, 2013 are applicable have been complied with by the Company.
- (v) The Company has neither accepted any deposits from the public nor accepted any amounts which are deemed to be deposits within the meaning of sections 73 to 76 of the Companies Act and the rules made thereunder, to the extent applicable. Accordingly, the requirement to report on clause 3(v) of the Order is not applicable to the Company.
- (vi) We have broadly reviewed the books of account maintained by the Company pursuant to the rules made by the Central Government for the maintenance of cost records under section 148(1) of the Companies Act, 2013, related to healthcare services, and are of the opinion that prima facie, the specified accounts and records have been made and maintained. We have not, however, made a detailed examination of the same.
- (vii) (a) The Company is regular in depositing with appropriate authorities undisputed statutory dues including goods and services tax, provident fund, employees' state insurance, income-tax, cess and other statutory dues applicable to it. According to the information and explanations given to us and based on audit procedures performed by us, no undisputed amounts payable in respect of these statutory dues were outstanding, at the year end, for a period of more than six months from the date they became payable.
- The provisions relating to sales-tax, service tax, duty of customs, duty of excise, value added tax are not applicable to the Company.
- (b) The dues of luxury tax and income tax which have not been deposited on account of any dispute are as follows:

Name of the statute	Nature of the dues	Amount (₹ in million)	Amount paid under protest (₹ in million)	Period to which the amount relates	Forum where the dispute is pending
Andhra Pradesh Tax on Luxuries Act, 1987	Luxury tax	18.55	8.30	Financial year 2010-11 to 2013-14	High court of Telangana
Income Tax Act, 1961	Tax and interest thereon	6.40	Nil	Financial year 2022-23	Joint Commissioner (Appeals) or the Commissioner of Income-tax (Appeals)
Goods and Services Tax Act, 2017	Tax, penalty and interest thereon	25.07	4.65	May 2021 to Sep 2022	Principal Commissioner (Appeals)

- (viii) The Company has not surrendered or disclosed any transaction, previously unrecorded in the books of account, in the tax assessments under the Income Tax Act, 1961 as income during the year. Accordingly, the requirement to report on clause 3(viii) of the Order is not applicable to the Company.
- (ix) (a) The Company did not have any outstanding loans or borrowings or interest thereon due to any lender during the year. Accordingly, the requirement to report on clause ix(a) of the Order is not applicable to the Company.
- (b) The Company has not been declared wilful defaulter by any bank or financial institution or government or any government authority.
- (c) The Company did not have any term loans outstanding during the year hence, the requirement to report on clause (ix)(c) of the Order is not applicable to the Company.
- (d) The Company did not raise any funds during the year hence, the requirement to report on clause (ix)(d) of the Order is not applicable to the Company.
- (e) On an overall examination of the standalone financial statements of the Company, the Company has not taken any funds from any entity or person on account of or to meet the obligations of its subsidiaries.

- (f) The Company has not raised loans during the year on the pledge of securities held in its subsidiaries. Hence, the requirement to report on clause (ix)(f) of the Order is not applicable to the Company.
- (x) (a) The Company has not raised any money during the year by way of initial public offer / further public offer (including debt instruments) hence, the requirement to report on clause 3(x)(a) of the Order is not applicable to the Company.
- (b) The Company has not made any preferential allotment or private placement of shares /fully or partially or optionally convertible debentures during the year under audit and hence, the requirement to report on clause 3(x)(b) of the Order is not applicable to the Company.
- (xi) (a) No fraud by the Company or no fraud on the Company has been noticed or reported during the year.
- (b) During the year, no report under sub-section (12) of section 143 of the Companies Act, 2013 has been filed by cost auditor/ secretarial auditor or by us in Form ADT – 4 as prescribed under Rule 13 of Companies (Audit and Auditors) Rules, 2014 with the Central Government.
- (c) As represented to us by the management, there are no whistle blower complaints received by the Company during the year.
- (xii) The Company is not a nidhi Company as per the provisions of the Companies Act, 2013. Therefore, the requirement to report on clause 3(xii)(a), (b) and (c) of the Order is not applicable to the Company.
- (xiii) Transactions with the related parties are in compliance with sections 177 and 188 of Companies Act, 2013 where applicable and the details have been disclosed in the notes to the standalone financial statements, as required by the applicable accounting standards.
- (xiv) (a) The Company has an internal audit system commensurate with the size and nature of its business.
- (b) The internal audit reports of the Company issued till the date of the audit report, for the period under audit have been considered by us.
- (xv) The Company has not entered into any non-cash transactions with its directors or persons connected with its directors and hence requirement to report on clause 3(xv) of the Order is not applicable to the Company.
- (xvi) (a) The provisions of section 45-IA of the Reserve Bank of India Act, 1934 (2 of 1934) are not applicable to the Company. Accordingly, the requirement to report on clause (xvi)(a) of the Order is not applicable to the Company.
- (b) The Company is not engaged in any non-banking financial or housing finance activities. Accordingly, the requirement to report on clause (xvi)(b) of the Order is not applicable to the Company.
- (c) The Company is not a Core Investment Company as defined in the regulations made by Reserve Bank of India. Accordingly, the requirement to report on clause 3(xvi)(c) of the Order is not applicable to the Company.
- (d) There is no Core Investment Company as a part of the Group, hence, the requirement to report on clause 3(xvi)(d) of the Order is not applicable to the Company.
- (xvii) The Company has not incurred cash losses in the current financial year. The Company has not incurred cash losses in the immediately preceding financial year.
- (xviii) There has been no resignation of the statutory auditors during the year and accordingly requirement to report on Clause 3(xviii) of the Order is not applicable to the Company.
- (xix) On the basis of the financial ratios disclosed in note 2.44 to the standalone financial statements, ageing and expected dates of realization of financial assets and payment of financial liabilities, other information accompanying the financial statements, our knowledge of the Board of Directors and management plans and based on our examination of the evidence supporting the assumptions, nothing has come to our attention, which causes us to believe that any material uncertainty exists as on the date of the audit report that Company is not capable of meeting its liabilities existing at the date of balance sheet as and when they fall due within a period of one year from the balance sheet date. We, however, state that this is not an assurance as to the future viability of the Company. We further state that our reporting is based on the facts up to the date of the audit report and we neither give any guarantee nor any assurance that all liabilities falling due within a period of one year from the balance sheet date, will get discharged by the Company as and when they fall due.

- (xx) (a) In respect of other than ongoing projects, there are no unspent amounts that are required to be transferred to a fund specified in Schedule VII of the Companies Act (the Act), in compliance with second proviso to sub section 5 of section 135 of the Act. This matter has been disclosed in note 2.37 to the standalone financial statements.
- (b) All amounts that are unspent under section (5) of section 135 of Companies Act, pursuant to any ongoing project, has been transferred to special account in compliance of with provisions of sub section (6) of section 135 of the said Act. This matter has been disclosed in note 2.37 to the standalone financial statements.

For S.R. Batliboi & Associates LLP

Chartered Accountants

ICAI Firm Registration Number: 101049W/E300004

per Atin Bhargava

Partner

Membership Number: 504777

UDIN: 26504777NILTXV1553

Place of Signature: Hyderabad

Date: May 23, 2026

Annexure '2' to the independent auditor's report of even date on the Standalone Financial Statements of Rainbow Children's Medicare Limited

Report on the Internal Financial Controls under Clause (i) of Sub-section 3 of Section 143 of the Companies Act, 2013 ("the Act")

We have audited the internal financial controls with reference to standalone financial statements of Rainbow Medicare Children's Limited ("the Company") as of March 31, 2026 in conjunction with our audit of the standalone financial statements of the Company for the year ended on that date.

MANAGEMENT'S RESPONSIBILITY FOR INTERNAL FINANCIAL CONTROLS

The Company's Management is responsible for establishing and maintaining internal financial controls based on the internal control over financial reporting criteria established by the Company considering the essential components of internal control stated in the Guidance Note on Audit of Internal Financial Controls Over Financial Reporting issued by the Institute of Chartered Accountants of India ("ICAI"). These responsibilities include the design, implementation and maintenance of adequate internal financial controls that were operating effectively for ensuring the orderly and efficient conduct of its business, including adherence to the Company's policies, the safeguarding of its assets, the prevention and detection of frauds and errors, the accuracy and completeness of the accounting records, and the timely preparation of reliable financial information, as required under the Companies Act, 2013.

AUDITOR'S RESPONSIBILITY

Our responsibility is to express an opinion on the Company's internal financial controls with reference to these standalone financial statements based on our audit. We conducted our audit in accordance with the Guidance Note on Audit of Internal Financial Controls Over Financial Reporting (the "Guidance Note") and the Standards on Auditing, as specified under section 143(10) of the Act, to the extent applicable to an audit of internal financial controls, both issued by ICAI. Those Standards and the Guidance Note require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether adequate internal financial controls with reference to these standalone financial statements was established and maintained and if such controls operated effectively in all material respects.

Our audit involves performing procedures to obtain audit evidence about the adequacy of the internal financial controls with reference to these standalone financial statements and their operating effectiveness. Our audit of internal financial controls with reference to standalone

financial statements included obtaining an understanding of internal financial controls with reference to these standalone financial statements, assessing the risk that a material weakness exists, and testing and evaluating the design and operating effectiveness of internal control based on the assessed risk. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion on the Company's internal financial controls with reference to these standalone financial statements.

MEANING OF INTERNAL FINANCIAL CONTROLS WITH REFERENCE TO THESE STANDALONE FINANCIAL STATEMENTS

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

INHERENT LIMITATIONS OF INTERNAL FINANCIAL CONTROLS WITH REFERENCE TO STANDALONE FINANCIAL STATEMENTS

Because of the inherent limitations of internal financial controls with reference to standalone financial statements, including the possibility of collusion or improper management override of controls, material misstatements due to error or fraud may occur and not be detected.

Also, projections of any evaluation of the internal financial controls with reference to standalone financial statements to future periods are subject to the risk that the internal financial control with reference to standalone financial statements may become inadequate because of changes in conditions, or that the degree of compliance with the policies or procedures may deteriorate.

OPINION

In our opinion, the Company has, in all material respects, adequate internal financial controls with reference to standalone financial statements and such internal financial controls with reference to standalone financial statements were operating effectively as at March 31, 2026, based on the internal control over financial reporting criteria established by the Company considering the essential

components of internal control stated in the Guidance Note issued by the ICAI.

For S.R. Batliboi & Associates LLP

Chartered Accountants

ICAI Firm Registration Number: 101049W/E300004

per Atin Bhargava

Partner

Membership Number: 504777

UDIN: 26504777NILTXV1553

Place of Signature: Hyderabad

Date: May 23, 2026

Standalone Balance Sheet

as at 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

Particulars	Notes	As at 31 March 2026	As at 31 March 2025
ASSETS			
Non-current assets			
a. Property, plant and equipment	2.1(a)	8,554.94	7,995.63
b. Capital work-in-progress	2.1(b)	756.61	276.69
c. Right-of-use of assets	2.32	5,930.61	5,579.54
d. Intangible assets	2.1(c)	94.19	102.41
e. Intangible assets under development	2.1(d)	34.70	6.93
f. Financial assets			
(i) Investments	2.2	2,176.99	465.45
(ii) Loans	2.10	659.09	299.54
(iii) Other financial assets	2.3 (a)	1,415.31	310.42
g. Deferred tax assets (net)	2.27 (d)	361.54	285.94
h. Non-current tax assets (net)	2.4	136.95	99.86
i. Other non-current assets	2.5	396.75	264.76
Total non-current assets		20,517.68	15,687.17
Current assets			
a. Inventories	2.6	299.06	227.42
b. Financial assets			
(i) Investments	2.7	3,714.30	5,495.01
(ii) Trade receivables	2.8	1,003.50	784.62
(iii) Cash and cash equivalents	2.9 (a)	172.80	168.90
(iv) Bank balances other than (iii) above	2.9 (b)	0.05	0.20
(v) Loans	2.11	50.43	30.45
(vi) Other financial assets	2.3 (b)	492.77	981.96
c. Other current assets	2.12	233.29	166.46
Total current assets		5,966.20	7,855.02
TOTAL ASSETS		26,483.88	23,542.19
EQUITY AND LIABILITIES			
EQUITY			
a. Equity share capital	2.13	1,015.59	1,015.52
b. Other equity	2.14	15,874.98	13,869.92
TOTAL EQUITY		16,890.57	14,885.44
LIABILITIES			
Non-current liabilities			
a. Financial liabilities			
(i) Lease liabilities	2.32	7,784.34	7,147.05
b. Provisions	2.15	152.95	94.24
Total non-current liabilities		7,937.29	7,241.29
Current liabilities			
a. Financial liabilities			
(i) Lease liabilities	2.32	229.28	196.50
(ii) Trade payables	2.16		
a) Total outstanding dues to micro enterprises and small enterprises		253.18	91.16
b) Total outstanding dues to creditors other than micro enterprises and small enterprises		620.88	701.56
(iii) Other financial liabilities	2.17	240.78	169.66
b. Other current liabilities	2.19	263.22	191.32
c. Provisions	2.18	48.68	65.26
Total current liabilities		1,656.02	1,415.46
TOTAL EQUITY AND LIABILITIES		26,483.88	23,542.19
Basis of preparation and Material accounting policies	1		

The accompanying notes referred to above form an integral part of the standalone financial statements. As per our report of even date attached.

for **S.R. Batliboi & Associates LLP**
Chartered Accountants
ICAI Firm Registration Number: 101049W/E300004

per Atin Bhargava
Partner
Membership Number.: 504777

for and on behalf of the Board of Directors of
Rainbow Children's Medicare Limited
CIN: L85110TG1998PLC029914

Dr. Ramesh Kancharla
Chairman and Managing Director
DIN: 00212270

Vikas Maheshwari
Chief Financial Officer

Dr. Dinesh Kumar Chirla
Director
DIN: 01395841

Shreya Mitra
Company Secretary
Membership Number: A54901

Place: Hyderabad
Date: 23 May 2026

Place: Hyderabad
Date: 23 May 2026

Place: Hyderabad
Date: 23 May 2026

Standalone Statement of Profit and Loss

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

Particulars	Notes	For the year ended 31 March 2026	For the year ended 31 March 2025
INCOME			
Revenue from operations	2.20	15,456.60	14,545.07
Other income	2.21	434.54	489.49
Total income		15,891.14	15,034.56
EXPENSES			
Cost of materials consumed	2.22	1,996.69	1,898.69
Employee benefits expense	2.23	2,123.93	1,976.08
Finance costs	2.24	713.96	695.94
Depreciation and amortisation expense	2.25	1,362.61	1,317.48
Professional fees to doctors	2.26 (i)	3,770.65	3,484.90
Other expenses	2.26 (ii)	2,566.76	2,440.64
Total expenses		12,534.60	11,813.73
Profit before exceptional items and tax		3,356.54	3,220.83
Exceptional items	2.30	15.39	-
Profit before tax		3,341.15	3,220.83
Tax expenses:	2.27		
(a) Current tax		917.83	856.68
(b) Adjustment of tax related to earlier periods		(3.46)	19.84
(c) Deferred tax credit		(73.38)	(31.54)
Total tax expense		840.99	844.98
Profit for the year		2,500.16	2,375.85
Other comprehensive income			
Items that will not be reclassified subsequently to the Statement of Profit or Loss			
Re-measurement loss on defined benefit obligation	2.30	(8.83)	(2.88)
Income tax effect	2.27	2.22	0.72
Other comprehensive income for the year, net of tax		(6.61)	(2.16)
Total comprehensive income for the year, net of tax		2,493.55	2,373.69
Earning per share (face value of share ₹10 each, fully paid)	2.35		
- Basic (₹)		24.62	23.40
- Diluted (₹)		24.62	23.27
Basis of preparation and Material accounting policies	1		

The accompanying notes referred to above form an integral part of the standalone financial statements.

As per our report of even date attached.

for **S.R. Batliboi & Associates LLP**
Chartered Accountants
ICAI Firm Registration Number: 101049W/E300004

per Atin Bhargava
Partner
Membership Number.: 504777

Place: Hyderabad
Date: 23 May 2026

for and on behalf of the Board of Directors of
Rainbow Children's Medicare Limited
CIN: L85110TG1998PLC029914

Dr. Ramesh Kancharla
Chairman and Managing Director
DIN: 00212270

Vikas Maheshwari
Chief Financial Officer

Place: Hyderabad
Date: 23 May 2026

Dr. Dinesh Kumar Chirla
Director
DIN: 01395841

Shreya Mitra
Company Secretary
Membership Number: A54901

Place: Hyderabad
Date: 23 May 2026

Standalone Statement of Cash Flows

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Cash flows from operating activities		
Profit before tax	3,341.15	3,220.83
Adjustments:		
Depreciation and amortisation expense	1,362.61	1,317.48
Gain on redemption of mutual funds (net)	(246.08)	(78.13)
Net gain on financial assets measured at fair value through profit or loss	(41.48)	(269.80)
Unrealised foreign exchange loss (net)	(0.64)	0.12
Interest income on financial assets carries at amortised cost	(133.29)	(140.01)
Employee share based payment expense	29.12	(12.71)
Finance cost	713.96	695.94
Bad debts written off	-	1.70
Allowance for expected credit loss	48.77	7.31
Gain on sale of property, plant and equipment (net)	(11.98)	(0.80)
Liabilities no longer required written back	(1.07)	(0.75)
	5,061.07	4,741.18
Adjustments for working capital:		
Increase in inventories	(71.64)	(1.56)
Increase in trade receivables	(267.65)	(78.04)
Increase in financial and other assets	(162.20)	(102.73)
Increase in trade payables	81.28	29.34
Increase in financial and current liabilities	86.42	48.65
Increase in provisions	33.29	54.02
Cash generated from operations	4,760.57	4,690.86
Income tax paid (net)	(951.46)	(840.39)
Net cash flows generated from operating activities (A)	3,809.11	3,850.47
Cash flows from investing activities		
Purchase of property, plant and equipment, intangibles, intangible assets under development including capital advances, capital creditors and capital work-in-progress	(1,998.94)	(1,433.04)
Proceeds from sale of property, plant and equipment	12.89	0.80
Investments in unquoted equity instruments of subsidiary companies	(1,548.12)	-
Investment in non convertible redeemable preference shares of subsidiary companies	(487.88)	-
Bank deposits redeemed with maturity of more than three months	1,257.95	2,343.71
Bank deposits invested with maturity of more than three months	(1,798.67)	(1,598.50)
Interest received	127.96	211.01
Gain on redemption of mutual funds (net)	246.08	78.13
Investment in mutual funds	(7,332.95)	(8,254.59)
Redemption of mutual funds	9,155.14	6,025.54
Loans given	(49.99)	-
Loans realised	2.00	-
Net cash flows (used in) investing activities (B)	(2,414.53)	(2,626.94)
Cash flows from financing activities		
Payment of principal portion of lease liabilities	(158.54)	(128.50)
Interest paid	(714.60)	(696.84)
Purchase of treasury shares	(212.96)	-
Proceeds from issue of equity shares on exercise of employee stock options	0.07	0.50
Dividend paid	(304.65)	(304.64)
Net cash flows (used in) financing activities (C)	(1,390.68)	(1,129.48)
Net increase in cash and cash equivalents (A+B+C)	3.90	94.05
Cash and cash equivalents at the beginning of the year	168.90	74.85
Cash and cash equivalents at the end of the year (note b)	172.80	168.90

Standalone Statement of Cash Flows (Contd..)

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

Notes:

- a) The above Standalone Statement of Cash Flows has been prepared under the "Indirect Method" as set out in the Indian Accounting Standard (Ind AS-7) - "Statement of Cash Flows".
- b) Components of cash and cash equivalents as at [Refer note 2.9 (a)]

	As at 31 March 2026	As at 31 March 2025
Cash on hand	7.87	10.90
Balance with banks:		
- Current accounts	164.93	158.00
- On deposit accounts (with original maturity of 3 months or less)	-	-
	172.80	168.90

- c) Reconciliation between opening and closing balances in the Balance sheet for liabilities arising from financing activities.

	As at 31 March 2026	As at 31 March 2025
Opening balance:		
Lease liabilities	7,343.55	7,347.00
Movement:		
Lease liabilities:		
Finance cost on lease liabilities (including capitalisation)	714.60	696.84
Addition to lease liabilities (net)	828.61	125.55
Lease modification	-	(0.50)
Payment of lease liabilities	(873.14)	(825.34)
Closing balance:		
Lease liabilities	8,013.62	7,343.55

The accompanying notes referred to above form an integral part of the standalone financial statements.

As per our report of even date attached.

for **S.R. Batliboi & Associates LLP**
Chartered Accountants
ICAI Firm Registration Number: 101049W/E300004

per Atin Bhargava
Partner
Membership Number.: 504777

Place: Hyderabad
Date: 23 May 2026

for and on behalf of the Board of Directors of
Rainbow Children's Medicare Limited
CIN: L85110TG1998PLC029914

Dr. Ramesh Kancharla
Chairman and Managing Director
DIN: 00212270

Vikas Maheshwari
Chief Financial Officer

Place: Hyderabad
Date: 23 May 2026

Dr. Dinesh Kumar Chirla
Director
DIN: 01395841

Shreya Mitra
Company Secretary
Membership Number: A54901

Place: Hyderabad
Date: 23 May 2026

Standalone Statement of Changes in Equity

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

(A) EQUITY SHARE CAPITAL

Particulars	Number of shares	Amount
Equity shares of ₹ 10 each issued, subscribed and fully paid-up		
As at 01 April 2024	101,501,687	1,015.02
Add: Shares issued during the year	49,986	0.50
As at 01 April 2025	101,551,673	1,015.52
Add: Shares issued during the year	7,483	0.07
As at 31 March 2026	101,559,156	1,015.59

(B) OTHER EQUITY

Particulars	Securities premium	General reserve	Share based payment reserve	Treasury Shares	Retained earning	Total other equity
Balance as at 01 April 2024	3,986.98	44.43	96.58	-	7,709.50	11,837.49
Profit for the year	-	-	-	-	2,375.85	2,375.85
Remeasurement of defined benefit liability (net of tax effect)	-	-	-	-	(2.16)	(2.16)
Employee share based payment expenses (refer note 2.45)	43.11	-	(79.73)	-	-	(36.62)
Appropriations:						
Final dividend on equity shares for the year ended 31 March 2024 i.e. ₹ 3 per share	-	-	-	-	(304.64)	(304.64)
Balance as at 31 March 2025	4,030.09	44.43	16.85	-	9,778.55	13,869.92
Balance as at 01 April 2025	4,030.09	44.43	16.85	-	9,778.55	13,869.92
Profit for the year	-	-	-	-	2,500.16	2,500.16
Remeasurement of defined benefit liability (net of tax effect)	-	-	-	-	(6.61)	(6.61)
Employee share based payment expenses (refer note 2.45)	7.96	-	21.16	-	-	29.12
Appropriations:						
Final dividend on equity shares for the year ended 31 March 2025 i.e. ₹ 3 per share	-	-	-	-	(304.65)	(304.65)
Purchase of treasury shares	-	-	-	(212.96)	-	(212.96)
Balance as at 31 March 2026	4,038.05	44.43	38.01	(212.96)	11,967.45	15,874.98

The accompanying notes referred to above form an integral part of the standalone financial statements.

As per our report of even date attached.

for **S.R. Batliboi & Associates LLP**
Chartered Accountants
ICAI Firm Registration Number: 101049W/E300004

per Atin Bhargava
Partner
Membership Number.: 504777

Place: Hyderabad
Date: 23 May 2026

for and on behalf of the Board of Directors of
Rainbow Children's Medicare Limited
CIN: L85110TG1998PLC029914

Dr. Ramesh Kancharla
Chairman and Managing Director
DIN: 00212270

Vikas Maheshwari
Chief Financial Officer

Place: Hyderabad
Date: 23 May 2026

Dr. Dinesh Kumar Chirla
Director
DIN: 01395841

Shreya Mitra
Company Secretary
Membership Number: A54901

Place: Hyderabad
Date: 23 May 2026

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

CORPORATE INFORMATION

Rainbow Children's Medicare Limited (CIN L85110TG1998PLC029914) ("the Company") is a public company domiciled in India and incorporated under the Companies Act, 2013 having registered office at 8-2-120/103/1, Survey No. 403, Road No.2, Banjara Hills, Hyderabad, Telangana-500034. The Company's shares are listed on the BSE Limited and National Stock Exchange of India Limited.

The Company is primarily engaged in the business of rendering medical and healthcare services.

The Standalone financial statements were approved for issue in accordance with a resolution passed by the Board of Directors of the Company on 23 May 2026.

1. BASIS OF PREPARATION AND MATERIAL ACCOUNTING POLICIES

1.1 Basis of preparation

(i) Statement of compliance

The standalone financial statements of the Company have been prepared in accordance with the Indian Accounting Standards ("Ind AS") as per the Companies (Indian Accounting Standards) Rules, 2015 (as amended from time to time) and presentation requirements of Division II of Schedule III to the Companies Act, 2013, (Ind AS compliant Schedule III), as applicable to the standalone financial statements notified under section 133 of Companies Act, 2013, ("the Act") and other relevant provisions of the Act. The company has prepared the standalone financial statements on the basis that it continues to operate as a going concern.

(ii) Basis of measurement

The standalone financial statements have been prepared on a historical cost convention and on accrual basis, except for certain financial assets and liabilities measured at fair value (refer accounting policy regarding financial instruments), defined benefit and other long-term employee benefits where present value of defined benefit obligations ("DBO") is measured as per actuarial valuation, and share based payment is measured at fair value. The accounting policies are applied consistently to all the years presented in the standalone financial statements except where a newly issued accounting standard is initially adopted or a revision to an existing accounting standard requires change in accounting policy hitherto in use.

(iii) Functional and Presentation Currency

These standalone financial statements are presented in Indian Rupees (INR or ₹), which is also the Company's functional currency. All amounts have been rounded off to two decimal places to the nearest million, unless otherwise indicated. The comparatives are presented for the year end and as on 31 March 2025.

(iv) Use of estimates and judgements:

In preparing these standalone financial statements, management has made judgements, estimates and assumptions that affect the application of accounting policies and the reported amounts of assets, liabilities, income and expenses. Actual results may differ from these estimates.

Estimates and underlying assumptions are reviewed on an periodic basis. Revisions to accounting estimates are recognised prospectively

Judgments

Information about judgments made in applying accounting policies that have the most significant effects on the amounts recognised in the Standalone Financial Statements is included in the following notes:

Lease term: Whether the Company is reasonably certain to exercise extension options (Note 1.2 (j))

Income taxes: Significant judgements are involved in determining the provision for income taxes, including the amount expected to be paid or recovered in connection with uncertain tax positions. (Note 1.2 (k))

Assumptions and estimation uncertainties

Information about assumptions and estimation uncertainties at the reporting date that have a significant risk of resulting in a material adjustment to the carrying amount of assets and liabilities within the next financial year is included in the following notes:

- **Contingent liabilities:** Contingent liabilities are not recognised in the financial statements but are disclosed in the notes. They are assessed continually to determine whether an outflow of resources embodying economic benefits has become probable. If it becomes probable that an outflow of

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

future economic benefits will be required for an item previously dealt with as a contingent liability, a provision is recognised in the financial statements of the period in which the change in probability occurs (except in the extremely rare circumstances where no reliable estimate can be made). (Note 1.2 (n))

- **Measurement of defined benefit obligations:** Key actuarial assumptions used for actuarial valuation. (Note 1.2 (h))

- **Impairment of financial assets:** The Company assesses on a forward-looking basis the expected credit losses associated with its assets carried at amortised cost. (Note 1.2 (d))

- **Impairment of non-financial assets:** Key assumptions underlying recoverable amount including forecasted projections.

- **Property, plant and equipment:** Useful life of asset. (Note 1.2 (b))

- **Lease liabilities:** measurement of incremental borrowing costs. (Note 1.2 (j))

- **Other estimates:** The preparation of financial statements involves estimates and assumptions that affect the reported amount of assets, liabilities, disclosure of contingent liabilities at the date of financial statements and the reported amount of revenues and expenses for the reporting period. Specifically, the Company estimates the probability of collection of accounts receivable by analyzing historical payment patterns, customer concentrations, customer credit-worthiness and current economic trends. If the financial condition of a customer deteriorates, additional allowances may be required.

(v) Current versus Non-current classification

All assets and liabilities are classified into current and non-current as per the Company's normal operating cycle and other criteria set out in the Schedule III to the Companies Act, 2013.

Assets

An asset is classified as current when it satisfies any of the following criteria:

- i. it is expected to be realised in, or is intended for sale or consumption in, the Company's normal operating cycle;

- ii. it is held primarily for the purpose of being traded;

- iii. it is expected to be realised within 12 months after the reporting date; or

- iv. it is cash or cash equivalent unless it is restricted from being exchanged or used to settle a liability for at least 12 months after the reporting date.

Current assets include the current portion of non-current financial assets. All other assets are classified as non-current.

Liabilities

A liability is classified as current when it satisfies any of the following criteria:

- i. it is expected to be settled in the Company's normal operating cycle;

- ii. it is held primarily for the purpose of being traded;

- iii. it is due to be settled within 12 months after the reporting date; or

- iv. the Company does not have an unconditional right to defer settlement of the liability for at least 12 months after the reporting date. Terms of a liability that could, at the option of the counterparty, result in its settlement by the issue of fresh instruments do not affect its classification.

Current liabilities include current portion of non-current financial liabilities. All other liabilities are classified as non-current.

Operating cycle

Operating cycle is the time between the acquisition of assets for processing and their realisation in cash or cash equivalents. The Company normal operating cycle is twelve months.

(vi) Measurement of fair values

Accounting policies and disclosures require the measurement of fair values, for both financial and non-financial assets and liabilities. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The fair value measurement is based on the

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

presumption that the transaction to sell the asset or transfer the liability takes place either:

- In the principal market for the asset or liability or
- In the absence of a principal market, in the most advantageous market for the asset or liability

The principal or the most advantageous market must be accessible by the Company. The fair value of an asset or a liability is measured using the assumptions that market participants would use when pricing the asset or liability, assuming that market participants act in their economic best interest.

The Company uses valuation techniques that are appropriate in the circumstances and for which sufficient data is available to measure fair value, maximizing the use of relevant observable inputs and minimizing the use of unobservable inputs.

Fair values are categorised into different levels in a fair value hierarchy based on the inputs used in the valuation techniques as follows:

- Level 1: quoted prices (unadjusted) in active markets for identical assets or liabilities.
- Level 2: inputs other than quoted prices included in Level 1 that are observable for the asset or liability, either directly (i.e. as prices) or indirectly (i.e. derived from prices).
- Level 3: inputs for the asset or liability that are not based on observable market data (unobservable inputs).

When measuring the fair value of an asset or a liability, the Company uses observable market data as far as possible. If the inputs used to measure the fair value of an asset or a liability fall into a different level of the fair value hierarchy, then the fair value measurement is categorised in its entirety in the same level of the fair value hierarchy as the lowest level input that is significant to the entire measurement.

Further information about the assumptions made in measuring fair values is included in the following notes in financial instruments [Refer note 2.4.1]

1.2 Material accounting policies:

a. Financial Instruments

i. Recognition and initial measurement

Trade receivables and debt securities issued are initially recognised when they are originated. All other financial assets and financial liabilities are initially recognised when the Company becomes a party to the contractual provisions of the instrument. A financial asset (unless it is a trade receivable without a significant financing component) or financial liability is initially measured at fair value plus or minus, for an item not at FVTPL, transaction costs that are directly attributable to its acquisition or issue. A trade receivable without a significant financing component is initially measured at the transaction price.

ii. Classification and subsequent measurement

Financial assets:

On initial recognition, a financial asset is classified as measured at:

- amortised cost;
- FVOCI – debt investment;
- FVOCI – equity investment; or
- FVTPL

Financial assets are not reclassified subsequent to their initial recognition unless the Company changes its business model for managing financial assets, in which case all affected financial assets are reclassified on the first day of the first reporting period following the change in the business model.

A financial asset is measured at amortised cost if it meets both of the following conditions and is not designated as at FVTPL.

- it is held within a business model whose objective is to hold assets to collect contractual cash flows; and
- its contractual terms give rise on specified dates to cash flows that are solely payments of principal and interest on the principal amount outstanding.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

A debt investment is measured at FVOCI if it meets both of the following conditions and is not designated as at FVTPL:

- it is held within a business model whose objective is achieved by both collecting contractual cash flows and selling financial assets; and
- its contractual terms give rise on specified dates to cash flows that are solely payments of principal and interest on the principal amount outstanding.

On initial recognition of an equity investment that is not held for trading, the Company may irrevocably elect to present subsequent changes in the investment's fair value in OCI. This election is made on an investment-by-investment basis.

All financial assets not classified as measured at amortised cost or FVOCI as described above are measured at FVTPL. On initial recognition, the Company may irrevocably designate a financial asset that otherwise meets the requirements to be measured at amortised cost or at FVOCI as at FVTPL if doing so eliminates or significantly reduces an accounting mismatch that would otherwise arise.

Financial assets – Subsequent measurement and gains and losses

Financial assets at FVTPL -These assets are subsequently measured at fair value. Net gains and losses, including any interest or dividend income, are recognised in profit or loss.

Financial assets at amortised cost -These assets are subsequently measured at amortised cost using the effective interest method. The amortised cost is reduced by impairment losses. Interest income, foreign exchange gains and losses and impairment are recognised in profit or loss. Any gain or loss on derecognition is recognised in profit or loss.

Equity investments at FVOCI -These assets are subsequently measured at fair value. Impairment losses (and reversal of impairment losses) on equity investments measured at FVOCI are not reported separately from other changes in fair value. Dividends are recognised as income in profit or loss unless the dividend clearly represents a recovery of part of the cost of the investment.

Other net gains and losses are recognised in OCI and are not reclassified to profit or loss.

Financial liabilities – Classification, subsequent measurement and gains and losses

Financial liabilities are classified as measured at amortised cost or FVTPL. A financial liability is classified as at FVTPL if it is classified as held-for-trading, it is a derivative or it is designated as such on initial recognition. Financial liabilities at FVTPL are measured at fair value and net gains and losses, including any interest expense, are recognised in profit or loss. Other financial liabilities are subsequently measured at amortised cost using the effective interest method. Interest expense and foreign exchange gains and losses are recognised in profit or loss. Any gain or loss on derecognition is also recognised in profit or loss.

iii. Derecognition

Financial assets:

The Company derecognises a financial asset when:

- the contractual rights to the cash flows from the financial asset expire; or
- it transfers the rights to receive the contractual cash flows in a transaction in which either:
 - substantially all of the risks and rewards of ownership of the financial asset are transferred; or
 - the Company neither transfers nor retains substantially all of the risks and rewards of ownership and it does not retain control of the financial asset. If of the financial asset.

Financial liabilities:

The Company derecognises a financial liability when its contractual obligations are discharged or cancelled or expire. The Company also derecognises a financial liability when its terms are modified and the cash flows of the modified liability are substantially different, in which case a new financial liability based on the modified terms is recognised at fair value. On derecognition of a financial liability, the difference between the carrying amount extinguished and the consideration paid (including any non-cash assets transferred or liabilities assumed) is recognised in profit or loss.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

Interest rate benchmark reform

When the basis for determining the contractual cash flows of a financial asset or financial liability measured at amortised cost changed as a result of interest rate benchmark reform, the Company updated the effective interest rate of the financial asset or financial liability to reflect the change that is required by the reform. A change in the basis for determining the contractual cash flows is required by interest rate benchmark reform if the following conditions are met:

- the change is necessary as a direct consequence of the reform; and
- the new basis for determining the contractual cash flows is economically equivalent to the previous basis – i.e., the basis immediately before the change.

When changes were made to a financial asset or financial liability in addition to changes to the basis for determining the contractual cash flows required by interest rate benchmark reform, the Company first updated the effective interest rate of the financial asset or financial liability to reflect the change that is required by interest rate benchmark reform. After that, the Company applied the policies on accounting for modifications to the additional changes.

Offsetting

Financial assets and financial liabilities are offset and the net amount presented in the balance sheet when, and only when, the Company currently has a legally enforceable right to set off the amounts, and it intends either to settle them on a net basis or to realise the asset and settle the liability simultaneously.

b. Property, plant and equipment

i. Recognition and measurement:

Items of property, plant and equipment are measured at cost (which includes capitalised borrowing costs, if any) less accumulated depreciation and accumulated impairment losses, if any. The cost on item of property, plant and equipment comprises its purchase price, taxes, duties, freight and any other directly attributable costs of bringing the assets to their working condition for their intended use and estimated cost of dismantling and removing the item and restoring the site on which it is located.

The cost of a self-constructed item of property, plant and equipment comprises the cost of materials, direct labour and any other costs directly attributable to bringing the item to its intended working condition and estimated costs of dismantling, removing and restoring the site on which it is located, wherever applicable.

When significant parts of an item of property, plant and equipment have different useful lives, they are accounted for as separate items (major components) of property, plant and equipment.

Gains and losses on disposal of an item of property, plant and equipment are determined by comparing the proceeds from disposal with the carrying amount of property, plant and equipment, and are recognised net in the standalone statement of profit and loss.

ii. Subsequent costs:

The cost of replacing a part of an item of property, plant and equipment is recognised in the carrying amount of the item if it is probable that the future economic benefits embodied within the part will flow to the Company, and its cost can be measured reliably.

iii. Depreciation:

Depreciation on Property, plant and equipment (other than for that class of assets specifically mentioned below) is calculated on a straight-line basis as per the useful life prescribed and in the manner laid down under Schedule II to the Companies Act 2013 and additions and deletions are restricted to the period of use. Depreciation is charged to standalone statement of profit and loss.

If the Management's estimate of the useful life of a property, plant and equipment is different than that envisaged in the aforesaid Schedule, depreciation is provided based on the Management's estimate of the useful life. Pursuant to this policy, depreciation on the following class of property, plant and equipment has been provided at the rates based on the following useful lives of property, plant and equipment as estimated by Management which is different from the useful life prescribed under Schedule II of the Companies Act, 2013.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

Description	Useful life (in years) by Management	Useful life (in years) under Schedule II of the Act
Buildings	60 years	60 years
Medical equipments*	7 years	13 years
Plant and equipments	15 years	15 years
Office equipments	5 years	5 years
Vehicles*	5 years	8 years
Computers	3 years	3 years
Furniture and Fixtures	10 years	10 years

*For these classes of assets, based on technical evaluation, the Management believes that the useful lives as given above best represents the period over which Management expects to use these assets. Hence, the useful lives of these assets are different from the useful lives as prescribed under Part C of Schedule II of the Companies Act 2013.

Leasehold Improvements are amortised over the period of lease or the estimated useful life, whichever is lower.

The useful lives and methods of depreciation of property, plant and equipment are reviewed at each financial year-end and adjusted prospectively.

Capital work-in-progress includes cost of property, plant and equipment under installation/under development as at the balance sheet date.

Advances paid towards acquisition of tangible and intangible assets outstanding at each balance sheet date are shown under other non-current assets as capital advances.

c. Intangible assets other than Goodwill and amortisation:

Computer software acquired by the Company, the value of which is not expected to diminish in the foreseeable future, is capitalised and recorded in the Balance sheet as computer software at cost of acquisition less accumulated amortisation and accumulated impairment losses.

Computer software is amortised on straight line basis over a period of five years.

Amortisation method and useful lives are reviewed at the end of each financial year and adjusted if appropriate.

The Company capitalizes costs related to specific upgrades and enhancements of software when it is probable the expenditures will result in additional features, functionality and significant customer experience. The Company also capitalizes all direct and incremental costs incurred during the development phase, until such time when the software is substantially complete and ready for use.

Intangible asset is de-recognised upon disposal or when no future economic benefits are expected from its use or disposal. Any gain or loss arising on de-recognition of the asset (calculated as the difference between the net disposal proceeds and the carrying amount of the asset) is recognized in the standalone statement of profit and loss, when the asset is derecognised.

d. Impairment of assets

Impairment of financial assets

The Company recognises loss allowances for ECLs on:

- financial assets measured at amortised cost;
- debt investments measured at FVOCI; and
- contract assets.

The Company also recognises loss allowances for ECLs on finance lease receivables, which are disclosed as financial assets.

The Company measures loss allowances at an amount equal to lifetime ECLs, except for the following, which are measured at 12-month ECLs:

- bank balances for which credit risk (i.e., the risk of default occurring over the expected life of the financial instrument) has not increased significantly since initial recognition.

Loss allowances for trade and finance lease receivables, loans and contract assets are always measured at an amount equal to lifetime ECLs.

Lifetime expected credit losses are the expected credit losses that result from all possible default events over the expected life of a financial instrument.

12-month expected credit losses are the portion of expected credit losses that result from default events that are possible within 12 months after the reporting

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

date (or a shorter period if the expected life of the instrument is less than 12 months).

In all cases, the maximum period considered when estimating expected credit losses is the maximum contractual period over which the Company is exposed to credit risk.

When determining whether the credit risk of a financial asset has increased significantly since initial recognition and when estimating ECLs, the Company considers reasonable and supportable information that is relevant and available without undue cost or effort. This includes both quantitative and qualitative information and analysis, based on the Company historical experience and informed credit assessment, that includes forward-looking information.

Measurement of expected credit losses

ECLs are a probability-weighted estimate of credit losses. Credit losses are measured as the present value of all cash shortfalls (i.e. the difference between the cash flows due to the entity in accordance with the contract and the cash flows that the Company expects to receive). ECLs are discounted at the effective interest rate of the financial asset.

Credit-impaired financial assets

At each reporting date, the Company assesses whether financial assets carried at amortised cost and debt securities at FVOCI are credit impaired. A financial asset is 'credit-impaired' when one or more events that have a detrimental impact on the estimated future cash flows of the financial asset have occurred.

Evidence that a financial asset is credit-impaired includes the following observable data:

- significant financial difficulty of the debtor;
- the restructuring of a loan or advance by the Company on terms that the Company would not consider otherwise.
- it is probable that the debtor will enter bankruptcy or another financial reorganisation; or
- the disappearance of an active market for a security because of financial difficulties.

Presentation of allowance for expected credit losses in the balance sheet

Loss allowances for financial assets measured at amortised cost are deducted from the gross carrying amount of the assets.

Write-off

The gross carrying amount of a financial asset is written off when the Company has no reasonable expectations of recovering a financial asset in its entirety or a portion thereof. For corporate customers, the Company individually makes an assessment with respect to the timing and amount of write-off based on whether there is a reasonable expectation of recovery. The Company expects no significant recovery from the amount written off. However, financial assets that are written off could still be subject to enforcement activities in order to comply with the Company procedures for recovery of amounts due.

e. Investments

Equity investments which are in scope of Ind AS 109 are measured at fair value. For all other equity instruments in scope of Ind AS 109, the Company may make an irrevocable election to present in other comprehensive income subsequent changes in the fair value. The Company makes such election on an instrument-by-instrument basis. The classification is made on initial recognition and is irrevocable.

If the Company decides to classify an equity instrument as at FVOCI, then all fair value changes on the instrument, excluding dividends, are recognised in the OCI. There is no recycling of the amounts from OCI to the Statement of Profit and Loss, even on sale of investment. However, the Company may transfer the cumulative gain or loss to retained earnings.

Equity instruments included within the FVTPL category are measured at fair value with all changes recognised in the Statement of Profit and Loss.

f. Investments in subsidiaries

Investment in equity instruments issued by subsidiary is measured at cost less impairment. Investments in subsidiary is evaluated for recoverability whenever events or changes in circumstances indicate that their carrying amounts may not be recoverable. For the purpose of impairment testing, the recoverable amount (i.e., the higher of the fair value less cost to sell and the value-in-use) is determined on an individual asset basis. If such investment is considered to be impaired, the impairment to be recognised in the Statement of Profit and Loss is measured by the amount by which the carrying value of the investment exceeds the estimated recoverable amount of the investment.

g. Inventories

Inventories are measured at the lower of cost and net realisable value.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

Cost includes all costs of purchase and other costs incurred in bringing the inventories to their present location and condition inclusive of non-refundable (adjustable) taxes wherever applicable. The Company follows the first in first out (FIFO) method for determining the cost of such inventories.

Net realisable value is the estimated selling price in the ordinary course of business, less estimated costs of completion and the estimated costs necessary to make the sale. The comparison of cost and net realisable value is made on an item-by-item basis.

h. Employee benefits

Short-term employee benefits

Short-term employee benefit obligations are measured on an undiscounted basis and are expensed as the related service is provided. A liability is recognised for the amount expected to be paid if the Company has a present legal or constructive obligation to pay this amount as a result of past service provided by the employee, and the amount of obligation can be estimated reliably.

Share based payment transactions

The grant date fair value of equity settled share based payment awards granted to employees is recognised as an employee expense, with a corresponding increase in equity, over the period that the employees unconditionally become entitled to the awards. The amount recognised as expense is based on the estimate of the number of awards for which the related service and non-market vesting conditions are expected to be met, such that the amount ultimately recognised as an expense is based on the number of awards that do meet the related service and non-market vesting conditions at the vesting date.

Post-employment benefit

Defined contribution plans

A defined contribution plan is a post-employment benefit plan under which an entity pays fixed contributions into a separate entity and will have no legal or constructive obligation to pay further amounts. The Company makes specified monthly contributions towards Government administered provident fund scheme. Obligations for contributions to defined contribution plans are recognised as an employee benefit expense in statement of profit or loss in the periods during which the related services are rendered by employees. Prepaid contributions are recognised as an asset to the extent that a cash refund or a reduction in future payment is available.

Defined benefit plans

A defined benefit plan is a post-employment benefit plan other than a defined contribution plan. The Company's net obligation in respect of defined benefit plans is calculated separately for each plan by estimating the amount of future benefit that employees have earned in the current and prior periods, discounting that amount and deducting the fair value of any plan assets.

The calculation of defined benefit obligation is performed annually by a qualified actuary using the projected unit credit method.

Re-measurements of the net defined benefit liability, which comprise actuarial gains and losses, the return on plan assets (excluding interest) and the effect of the asset ceiling (if any, excluding interest), are recognised in Other comprehensive income (OCI). The Company determines the net interest expense on the net defined benefit liability for the period by applying the discount rate used to measure the defined benefit obligation at the beginning of the annual period to the then-net defined benefit liability considering any changes in the net defined benefit liability during the period as a result of contributions and benefit payments. Net interest expense and other expenses related to defined benefit plans are recognised in statement of profit and loss.

When the benefits of a plan are changed or when a plan is curtailed, the resulting change in benefit that relates to past service ('past service cost' or 'past service gain') or the gain or loss on curtailment is recognised immediately in profit or loss. The Company recognises gains and losses on the settlement of a defined benefit plan when the settlement occurs.

The obligations are presented as current liabilities in the balance sheet if the entity does not have an unconditional right to defer settlement for at least twelve months after the reporting period, regardless of when the actual settlement is expected to occur.

Compensated absences

Accumulated leave, which is expected to be utilised within the next 12 months, is treated as short-term employee benefit and the accumulated leave expected to be carried forward beyond twelve months, as long-term employee benefit for measurement purposes. The Company records an obligation for such compensated absences in the period in which the employee renders the services that increase this entitlement. The obligation is measured on the basis of independent actuarial valuation using the projected unit credit method.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

i. Revenue recognition

The Company's revenue from medical and healthcare services comprises of income from hospital services and sale of pharmacy items.

Income from hospital services is recognised as when the related services are rendered. The performance obligations for this stream of revenue include accommodation, surgery, medical/clinical professional services, food and beverages, investigation and supply of pharmaceutical and related products.

Revenue is measured based on the transaction price, which is the fixed consideration adjusted for components of variable consideration which constitutes discounts, estimated disallowances and any other rights and obligations as specified in the contract with the customer. In determining the transaction price for the hospital services, the Company considers the effects of variable consideration, the existence of significant financing components, non-cash consideration, and consideration payable to the customer (if any). Revenue is recognised at the point in time for the inpatient / outpatient hospital services when the related services are rendered at the transaction price.

Revenue from sale of pharmacy is recognised when it transfers control over a good or service to the customer, generally on delivery of product to the customer.

Medical service fee is recognised when the related services are rendered unless significant future uncertainties exist.

Interest income or expense is recognised using the effective interest method. The 'effective interest rate' is the rate that exactly discounts estimated future cash payments or receipts through the expected life of the financial instrument to:

- the gross carrying amount of the financial asset; or
- the amortised cost of the financial liability.

In calculating interest income and expense, the effective interest rate is applied to the gross carrying amount of the asset (when the asset is not credit-impaired) or to the amortised cost of the liability. However, for financial assets that have become credit-impaired subsequent to initial recognition, interest income is calculated by applying the effective interest rate to the amortised cost of the financial asset. If the asset is no

longer credit-impaired, then the calculation of interest income reverts to the gross basis.

Dividend income is recognised in profit or loss on the date on which the Company's right to receive payment is established.

Contract balances:

(i) Contract assets (Unbilled revenue)

Contract assets represents value to the extent of medical and healthcare services rendered to the patients who are undergoing treatment/ observation on the balance sheet date and is not billed as at the balance sheet date. Contract assets are subject to impairment assessment. Refer to accounting policies on impairment of financial assets in section (d).

(ii) Trade receivables

A receivable is recognised if an amount of consideration that is unconditional (i.e., only the passage of time is required before payment of the consideration is due). Refer to accounting policies of financial assets in section (a) Financial instruments.

(iii) Contract liabilities

Contract liabilities include advances received from patients for hospital services and is pending for final billing on the balance sheet date.

j. Leases

At inception of a contract, the Company assesses whether a contract is, or contains, a lease. A contract is, or contains, a lease if the contract conveys the right to control the use of an identified asset for a period of time in exchange for consideration.

As a lessee

At commencement or on modification of a contract that contains a lease component, the Company allocates the consideration in the contract to each lease component on the basis of their relative stand-alone prices. However, for the leases of property the Company has elected not to separate non-lease components and account for the lease and non-lease components as a single lease component.

(i) Right-of-use asset

The Company recognises a right-of-use asset and a lease liability at the lease commencement date. The right-of-use asset is initially measured at cost, which comprises the initial amount of the lease liability adjusted for any lease payments

Notes to the Standalone Financial Statements

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

made at or before the commencement date, plus any initial direct costs incurred and remove the underlying asset or to restore the underlying asset or the site on which it is located, less any lease incentives received.

The right-of-use asset is subsequently depreciated using the straight-line method from the commencement date to the earlier of the end of the useful life of the right-of-use asset or the end of the lease term, unless the lease transfers ownership of the underlying asset to the Company by the end of the lease term or the cost of the right-of-use asset reflects that the Company will exercise a purchase option. In that case the right-of-use asset will be depreciated over the useful life of the underlying asset, which is determined on the same basis as those of property and equipment. In addition, the right-of-use asset is periodically reduced by impairment losses, if any, and adjusted for certain remeasurements of the lease liability.

(ii) lease liabilities

The lease liability is initially measured at the present value of the lease payments that are not paid at the commencement date, discounted using the interest rate implicit in the lease or, if that rate cannot be readily determined, the Company's incremental borrowing rate. Generally, the Company uses its incremental borrowing rate as the discount rate.

Lease payments included in the measurement of the lease liability comprise the following:

- fixed payments, including in-substance fixed payments;
- variable lease payments that depend on an index or a rate, initially measured using the index or rate as at the commencement date;
- amounts expected to be payable under a residual value guarantee; and
- the exercise price under a purchase option that the Company is reasonably certain to exercise, lease payments in an optional renewal period if the Company is reasonably certain to exercise an extension option, and penalties for early termination of a lease unless the Company is reasonably certain not to terminate early.

The lease liability is measured at amortised cost using the effective interest method. It is remeasured when there is a change in future lease payments arising from a change in an index or rate, if there is a change in the

Company's estimate of the amount expected to be payable under a residual value guarantee, or if the Company changes its assessment of whether it will exercise a purchase, extension or termination option or if there is a revised in-substance fixed lease payments.

When the lease liability is remeasured in this way, a corresponding adjustment is made to the carrying amount of the right-of-use asset or is recorded in profit or loss if the carrying amount of the right-of-use asset has been reduced to zero.

The Company presents right-of-use assets that do not meet the definition of investment property in 'Property, plant and equipment' and lease liabilities separately in the balance sheet within 'Financial Liabilities'.

Short-term leases and leases of low-value assets:

The Company has elected not to recognise right-of-use assets and lease liabilities for short-term leases of machinery and buildings that have a lease term of 12 months or less and leases of low-value assets. The Company recognizes the lease payments associated with these leases as an expense in profit or loss on a straight-line basis over the lease term.

k. Income-tax

Income tax comprises current and deferred tax. It is recognised in profit or loss except to the extent that it relates to a business combination or to an item recognised directly in equity or in other comprehensive income.

Current tax:

Current tax comprises the expected tax payable or receivable on the taxable income or loss for the year and any adjustment to the tax payable or receivable in respect of previous years. The amount of current tax reflects the best estimate of the tax amount expected to be paid or received after considering the uncertainty, if any, related to income taxes. It is measured using tax rates (and tax laws) enacted or substantively enacted by the reporting date. Current tax assets and

Notes to the Standalone Financial Statements

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current tax liabilities are offset only if there is a legally enforceable right to set off the recognised amounts, and it is intended to realise the asset and settle the liability on a net basis or simultaneously.

Deferred tax:

Deferred tax is recognised in respect of temporary differences between the carrying amounts of assets and liabilities for financial reporting purposes and the corresponding amounts used for taxation purposes.

Deferred tax assets are recognised to the extent that it is probable that future taxable profits will be available against which they can be used. The existence of unused tax losses is strong evidence that future taxable profit may not be available. Therefore, in case of a history of recent losses, the Company recognises a deferred tax asset only to the extent that it has sufficient taxable temporary differences or there is convincing other evidence that sufficient taxable profit will be available against which such deferred tax asset can be realised.

Deferred tax assets recognised or unrecognised, are reviewed at each reporting date and are recognised/reduced to the extent that it is probable/ no longer probable that the related tax benefit will be realised.

Deferred tax is measured at the tax rates that are expected to apply to the period when the asset is realised or the liability is settled, based on the laws that have been enacted or substantively enacted by the reporting date.

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

Deferred tax assets and liabilities are offset if there is a legally enforceable right to offset current tax liabilities and assets, and they relate to income taxes levied by the same tax authority on the same taxable entity, or on different tax entities, but they intend to settle current tax liabilities and assets on a net basis or their tax assets and liabilities will be realised simultaneously.

I. Earnings per share

Basic Earnings Per Share ("EPS") is computed by dividing the net profit attributable to the equity shareholders by the weighted average number of equity shares outstanding during the year. Diluted earnings per share is computed by dividing the net profit (after adjusting

employee share based payment expense) by the weighted average number of equity shares considered for deriving basic earnings per share and also the weighted average number of equity shares that could have been issued upon conversion of all dilutive potential equity shares. Dilutive potential equity shares are deemed converted as of the beginning of the year, unless issued at a later date. In computing diluted earnings per share, only potential equity shares that are dilutive and that either reduces earnings per share or increases loss per share are included. The number of shares and potentially dilutive equity shares are adjusted retrospectively for all periods presented for the share splits.

m. Provisions

A provision is recognised if, as a result of a past event, the Company has a present legal or constructive obligation that can be estimated reliably, and it is probable that an outflow of economic benefits will be required to settle the obligation. When the Company expects some or all of a provision to be reimbursed, the expense relating to a provision is presented in statement of profit and loss, net of any reimbursement.

If the effect of the time value of money is material, provisions are discounted using a current pre-tax rate that reflects, when appropriate, the risks specific to the liability. When discounting is used, the increase in the provision due to the passage of time is recognised as a finance cost.

n. Contingent liabilities and contingent assets

A contingent liability exists when there is a possible but not probable obligation, or a present obligation that may, but probably will not, require an outflow of resources, or a present obligation whose amount cannot be estimated reliably. Contingent liabilities do not warrant provisions but are disclosed unless the possibility of outflow of resources is remote.

Contingent assets are neither recognised nor disclosed in the Standalone Financial Statements. However, contingent assets are assessed continually and if it is virtually certain that an inflow of economic benefits will arise, the asset and related income are recognised in the period in which the change occurs.

o. Statement of cash flows

Cash flows are reported using the indirect method, whereby net profit/ (loss) before tax is adjusted for the effects of transactions of a non-cash nature and any deferrals or accruals of past or future cash receipts or

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

payments and item of income or expenses associated with investing or financing cash flows. The cash flows from regular revenue generating (operating activities), investing activities and financing activities of the Company are segregated.

p. Cash and cash equivalents

For the purpose of presentation in the statement of cash flows, cash and cash equivalents includes cash on hand, deposits held at call with banks, other short-term, highly liquid investments with original maturities of three months or less that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value. Where bank overdrafts/ cash credits which are repayable on demand form an integral part of an entity's cash management, bank overdrafts are included as a component of cash and cash equivalents. Bank overdrafts are shown within short term-borrowings in the balance sheet.

q. Dividend

The Company recognises a liability to pay dividend to equity holders of the Company when the distribution is authorised, and the distribution is no longer at the discretion of the Company. As per the corporate laws in India, a distribution is authorised when it is approved by the shareholders. A corresponding amount is recognised directly in equity.

r. Treasury Shares

The Company has created an Rainbow Employees Welfare Trust (the "ESOP Trust") for providing share-based payment to its employees. The Company uses ESOP Trust as a vehicle for distributing shares to employees under the employee remuneration schemes. The ET buys shares of the Company from the market, for giving shares to employees on exercise of equity settled ESOP. Share options exercised during the reporting period are satisfied with treasury shares. The Company treats ESOP Trust as its extension and shares held by ESOP Trust are treated as treasury shares.

Own equity instruments that are reacquired (treasury shares) are recognised at cost and deducted from equity. No gain or loss is recognised in profit or loss on the purchase, sale, issue or cancellation of the

Company's own equity instruments. Any difference between the carrying amount and the consideration, if reissued, is recognised in Capital reserve.

s. Non controlling interest ("NCI") Put option liability

Where a put option has been granted to NCI, the Group de-recognises the NCI and recognises a financial liability at each reporting date for the present value of the expected redemption amount.

The difference between the derecognised NCI and the recognised financial liability towards put option is recorded directly in equity, and no separate interest expense is recognised for the unwinding of discount. Upon exercise of the option, the liability is extinguished by payment of the exercise price. If the option expires unexercised, the liability is reversed and the NCI reinstated as if the option had never existed.

t. Events after reporting date

Where events occurring after the balance sheet date provide evidence of conditions that existed at the end of the reporting period, the impact of such events is adjusted within the financial statements. Otherwise, events after the balance sheet date of material size or nature are only disclosed.

u. Segment reporting

As defined in Ind AS 108, Operating Segments, the Chief Operating Decision Maker i.e. Board of Directors of the Company evaluates the Company's performance and allocates resources based on an analysis of various performance indicators by business segment. Medical and healthcare services have been considered as the only reportable segment. Hence, no separate final disclosure has been provided for the segment reporting.

v. Climate - related matters

The Company considers climate-related matters in estimates and assumptions, where appropriate. This assessment includes a wide range of possible impacts on the Company due to both physical and transition risks. Even though climate-related risks might not currently have a significant impact on measurement, the Company is closely monitoring relevant changes and developments.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.1 (a) PROPERTY, PLANT AND EQUIPMENT

Particulars	Freehold land	Buildings	Leasehold improvements (refer note (i) below)	Medical equipments (refer note (i) below)	Plant and equipments	Furniture and fixtures	Office equipments	Vehicles	Computers	Total
Cost or deemed cost										
As at 01 April 2024	38.47	400.65	4,242.37	2,123.17	1,191.02	634.40	355.69	197.80	223.44	9,407.01
Additions	1,766.52	1.71	298.04	241.30	123.80	57.85	58.61	3.56	32.45	2,583.84
Disposals	-	-	-	(1.20)	-	-	(0.21)	(3.79)	-	(5.20)
As at 31 March 2025 (A)	1,804.99	402.36	4,540.41	2,363.27	1,314.82	692.25	414.09	197.57	255.89	11,985.65
As at 01 April 2025	1,804.99	402.36	4,540.41	2,363.27	1,314.82	692.25	414.09	197.57	255.89	11,985.65
Additions	-	2.73	548.95	441.41	197.90	76.99	74.19	27.63	35.34	1,405.14
Disposals	-	-	-	(39.27)	(0.44)	-	-	(3.51)	-	(43.22)
As at 31 March 2026 (B)	1,804.99	405.09	5,089.36	2,765.41	1,512.28	769.24	488.28	221.69	291.23	13,347.57
Accumulated depreciation:										
As at 01 April 2024	-	21.77	957.12	1,124.93	322.40	290.81	212.07	117.72	129.37	3,176.19
Depreciation	-	6.66	264.03	256.49	86.48	67.37	56.70	30.04	51.26	819.03
Disposals	-	-	-	(1.20)	-	-	(0.21)	(3.79)	-	(5.20)
As at 31 March 2025 (C)	-	28.43	1,221.15	1,380.22	408.88	358.18	268.56	143.97	180.63	3,990.02
As at 01 April 2025	-	28.43	1,221.15	1,380.22	408.88	358.18	268.56	143.97	180.63	3,990.02
Depreciation	-	6.70	290.35	253.19	93.87	64.73	60.73	24.65	50.70	844.92
Disposals	-	-	-	(38.69)	(0.11)	-	-	(3.51)	-	(42.31)
As at 31 March 2026 (D)	-	35.13	1,511.50	1,594.72	502.64	422.91	329.29	165.11	231.33	4,792.63
Net carrying amount										
As at 31 March 2026 (B-D)	1,804.99	369.96	3,577.86	1,170.69	1,009.64	346.33	158.99	56.58	59.90	8,554.94
As at 31 March 2025 (A-C)	1,804.99	373.93	3,319.26	983.05	905.94	334.07	145.53	53.60	75.26	7,995.63

Note:

- (i) Delhi Development authority (DDA) has granted 5,500 square meters of land on perpetual lease to Madhukar Multispecialty Hospital Research Centre (MMHRC) in Malviyanagar (Delhi) via lease deed dated 16 September 2005. MMHRC has constructed a hospital building on this land with all infrastructure and services and 50% of the space was sublet to the Company to operate and render healthcare services. DDA vide its letter dated 28 January 2019 to MMHRC has restricted subletting to 25% instead of earlier 50% and accordingly the Company and MMHRC had executed the amended sub lease agreement dated 27 March 2019 which is effective from 01 April 2019. As at 31 March 2026, leasehold improvements and medical equipments include ₹ 87.14 million and ₹ 31.09 million (31 March 2025: ₹ 92.60 million and ₹ 26.91 million) respectively in respect of this hospital. The Management is utilising the assets for the purpose of providing medical services at MMHRC.
- (ii) Refer note 2.38 for details of incidental expenditure capitalised during the construction period.
- (iii) The title deeds of immovable properties (other than properties where the Company is the lessee and the lease arrangements are duly executed in favour of the lessee) are held in the name of the Company and the Company does not have any investment property.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.1 (b) CAPITAL WORK-IN-PROGRESS

Particulars	Amount
Cost or deemed cost	
As at 01 April 2024	138.24
Additions	2,722.29
Capitalisations	(2,583.84)
As at 31 March 2025	276.69
As at 01 April 2025	276.69
Additions	1,885.06
Capitalisations	(1,405.14)
As at 31 March 2026	756.61

Capital work-in-progress (CWIP) ageing schedule:

As at 31 March 2026

CWIP	Amount in CWIP for a period of				Total
	Less than 1 Year	1-2 Years	2-3 Years	More than 3 Years	
Projects in progress	637.36	95.38	23.07	0.80	756.61
Projects temporarily suspended	-	-	-	-	-

As at 31 March 2025

CWIP	Amount in CWIP for a period of				Total
	Less than 1 Year	1-2 Years	2-3 Years	More than 3 Years	
Projects in progress	245.05	28.91	2.38	0.35	276.69
Projects temporarily suspended	-	-	-	-	-

There are no capital work in progress projects, whose completion is overdue or has exceeded its cost compared to its original plan as at 31 March 2026 and 31 March 2025.

2.1 (c) INTANGIBLE ASSETS

Particulars	Intangible assets
	Software
Cost or deemed cost	
As at 01 April 2024	148.35
Additions	85.55
Disposals	-
As at 31 March 2025 (A)	233.90
As at 01 April 2025	233.90
Additions	22.43
Disposals	-
As at 31 March 2026 (B)	256.33

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.1 (c) INTANGIBLE ASSETS (continued)

Particulars	Intangible assets Software
Accumulated amortisation	
As at 01 April 2024	107.65
Amortisation	23.84
Disposals	-
As at 31 March 2025 (C)	131.49
As at 01 April 2025	131.49
Amortisation	30.65
Disposals	-
As at 31 March 2026 (D)	162.14
Net carrying amount	
As at 31 March 2026 (B-D)	94.19
As at 31 March 2025 (A-C)	102.41

2.1 (d) INTANGIBLE ASSETS UNDER DEVELOPMENT

Particulars	Amount
Cost or deemed cost	
As at 01 April 2024	60.92
Additions	31.56
Capitalisations	(85.55)
As at 31 March 2025	6.93
As at 01 April 2025	6.93
Additions	50.20
Capitalisations	(22.43)
As at 31 March 2026	34.70

Intangible assets under development ageing schedule:

As at 31 March 2026

Intangible assets under development	Amount in Intangible assets under development for a period of				Total
	Less than 1 Year	1-2 Years	2-3 Years	More than 3 Years	
Projects in progress	34.70	-	-	-	34.70
Projects temporarily suspended	-	-	-	-	-

As at 31 March 2025

Intangible assets under development	Amount in Intangible assets under development for a period of				Total
	Less than 1 Year	1-2 Years	2-3 Years	More than 3 Years	
Projects in progress	0.65	-	6.28	-	6.93
Projects temporarily suspended	-	-	-	-	-

The Company does not have any Intangible assets under development which is overdue or has exceeded its cost compared to its original plan as at 31 March 2026 and 31 March 2025.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

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2.2 NON-CURRENT INVESTMENTS

	As at 31 March 2026	As at 31 March 2025
A. Investments at fair value through other comprehensive income		
Investments in unquoted equity instruments		
- Vamana Solar Private Limited 2,600 shares of ₹10 each, fully paid up (31 March 2025: 2,600 shares)	0.03	0.03
B. Investments at cost		
(i) Investments in unquoted equity instruments - In subsidiaries		
(a) Rainbow Children's Hospital Private Limited 9,999 shares of ₹10 each, fully paid up (31 March 2025: 9,999 shares of ₹10 each)	0.10	0.10
Less: Impairment loss	(0.10)	(0.10)
	-	-
(b) Rainbow Women & Children's Hospitals Private Limited 9,999 shares of ₹10 each, fully paid up (31 March 2025: 9,999 shares of ₹10 each)	0.10	0.10
Less: Impairment loss	(0.10)	(0.10)
	-	-
(c) Rainbow Speciality Hospitals Private Limited 14,185,247 shares of ₹10 each, fully paid up (31 March 2025: 14,185,247 shares of ₹10 each)	142.51	142.51
(d) Rosewalk Healthcare Private Limited 36,046,585 shares of ₹10 each, fully paid up (31 March 2025: 36,046,585 shares of ₹10 each)	324.11	324.11
Less: Impairment loss *	(46.30)	(46.30)
	277.81	277.81
(e) Rainbow Fertility Private Limited 4,499,999 shares of ₹10 each, fully paid up (31 March 2025: 4,499,999 shares of ₹10 each)	45.00	45.00
(f) Rainbow CRO Private Limited 99,999 shares of ₹10 each, fully paid up (31 March 2025: 99,999 shares of ₹10 each)	0.10	0.10
(g) Prashanthi Medicare Private Limited** 1,140,000 shares of ₹10 each, fully paid up (31 March 2025: Nil)	248.52	-
(h) Pratiksha Women & Child Care Hospital Private Limited*** 4,275,000 shares of ₹10 each, fully paid up (31 March 2025: Nil)	1,299.60	-

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.2 NON-CURRENT INVESTMENTS (continued)

	As at 31 March 2026	As at 31 March 2025
C. Deemed investments at amortised cost		
(a) Prashanthi Medicare Private Limited** 774,800 0.001% Non-convertible redeemable preference shares of ₹100 each, fully paid up (31 March 2025: Nil)	25.95	-
(b) Pratiksha Women & Child Care Hospital Private Limited*** 410,400 0.001% Non-convertible redeemable preference shares of ₹1,000 each, fully paid up (31 March 2025: Nil)	137.47	-
	2,176.99	465.45
Aggregate book value of unquoted investments	2,176.99	465.45
Aggregate amount of impairment in value of investments	46.50	46.50

* The Company has carried out an impairment assessment for investment made by the Company. Based on the detailed impairment evaluation carried out by the Company duly considering the discounted future cashflows of the subsidiary, the Company has assessed that impairment loss on investment is ₹ Nil for the year ended 31 March 2026 (31 March 2025: ₹ Nil).

**During the year, the Company has invested in 774,800 Non convertible redeemable preference shares ("NCRPS") of face value ₹ 100 each, dividend rate of 0.001% p.a amounting to ₹ 77.50 million issued by Prashanthi Medicare Private Limited. These NCRPS shall get redeemed at par (a) within the maximum permissible time period under the provisions of Section 55 of the Companies Act; (b) upon termination of Shareholders agreement dated 28 June 2025; or (c) upon completion of transfer of call shares or put shares in accordance with the Shareholders Agreement dated 28 June 2025 whichever is earlier.

As per Ind AS 32, these NCRPS are classified as financial asset and initially measured at fair value of ₹51.55 million using an effective interest rate of 8.50%. The balance ₹ 25.95 million is recorded as a deemed equity investment.

***During the year, the Company has invested in 410,400 NCRPS of face value ₹ 1,000 each, dividend rate of 0.001% p.a amounting to ₹ 410.40 million issued by Pratiksha Women & Child Care Hospital Private Limited. These NCRPS shall get redeemed at par, (a) within the maximum permissible time period under the provisions of Section 55 of the Companies Act; (b) upon termination of Shareholders agreement dated 11 August 2025; or (c) upon completion of transfer of Call Shares or Put Shares in accordance with the Shareholders Agreement dated 11 August 2025 whichever is earlier. As per Ind AS 32, these NCRPS are classified as financial asset and initially measured at fair value of ₹ 272.93 million using an effective interest rate of 8.50%. The balance ₹ 137.47 million is recorded as a deemed equity investment.

The Company's exposure to credit risk and market risk related to investments has been disclosed in Note 2.39.

2.3 (a) OTHER FINANCIAL ASSETS (NON-CURRENT) (AT AMORTISED COST)

Particulars	As at 31 March 2026	As at 31 March 2025
Bank deposits with remaining maturity more than 12 months	1,041.97	20.26
Interest accrued on deposits	10.10	4.19
Security deposits	363.24	285.97
	1,415.31	310.42

The Company's exposure to credit and market risk are disclosed in Note 2.39.

2.3 (b) OTHER FINANCIAL ASSETS (CURRENT) (AT AMORTISED COST)

Particulars	As at 31 March 2026	As at 31 March 2025
Bank deposits with remaining maturity less than 12 months #	477.11	957.95
Interest accrued on deposits	15.66	24.01
	492.77	981.96

Includes an amount of ₹ 72.18 million (31 March 2025: 21.80 million) deposited towards on-going CSR projects and an amount of ₹ 4.44 million (31 March 2025: ₹ 3.00 million) towards margin money deposits against bank guarantees.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.4 NON-CURRENT TAX ASSETS (NET)

Particulars	As at 31 March 2026	As at 31 March 2025
Advance tax (net)	136.95	99.86
	136.95	99.86

2.5 OTHER NON-CURRENT ASSETS

Particulars	As at 31 March 2026	As at 31 March 2025
(Unsecured, considered good)		
Capital advances		
- to other than related parties	345.32	232.04
Prepaid expenses	32.94	19.56
Amounts paid under protest	18.49	13.16
	396.75	264.76

2.6 INVENTORIES

(valued at the lower of cost or net realisable value)

Particulars	As at 31 March 2026	As at 31 March 2025
Medical consumables and pharmacy items	299.06	227.42
	299.06	227.42

2.7 CURRENT INVESTMENTS

Particulars	As at 31 March 2026	As at 31 March 2025
Investments at fair value through profit or loss		
Quoted:		
Investments in Mutual funds - quoted		
Aditya Birla Sunlife Banking & PSU Debt Fund - Growth - Direct Plan 1,113,485.77 Units (31 March 2025: 1,113,485.77 Units)	437.39	414.40
HDFC Liquid Fund - Growth - Direct Plan Nil (31 March 2025: 5,901.57 Units)	-	30.06
HDFC Large & Midcap Fund - Growth - Direct Plan Nil (31 March 2025: 431,099.53 Units)	-	140.19
HDFC Corporate Bond Fund - Growth - Direct Plan Nil (31 March 2025: 13,722,798.35 Units)	-	446.56
HDFC Arbitrage Fund - Growth - Direct Plan 33,095,569.29 Units (31 March 2025: 8,439,290.35 Units)	699.91	167.33
DSP Liquid Fund - Growth - Direct Plan Nil (31 March 2025: 12,160.62 Units)	-	45.09
UTI Money Market Fund - Growth - Direct Plan Nil (31 March 2025: 43,049.97 Units)	-	131.76
ICICI Prudential Large & Midcap Fund - Growth - Direct Plan Nil (31 March 2025: 141,192.74 Units)	-	145.65

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.7 CURRENT INVESTMENTS (continued)

Particulars	As at 31 March 2026	As at 31 March 2025
ICICI Prudential Banking & PSU Debt Fund - Growth - Direct Plan 10,550,288.35 Units (31 March 2025: 10,550,288.35 Units)	373.00	352.11
ICICI Prudential All Seasons Bond Fund - Growth - Direct Plan 8,328,117.37 Units (31 March 2025: 8,328,117.37 Units)	341.32	325.26
ICICI Prudential Equity Arbitrage Fund - Growth - Direct Plan Nil (31 March 2025: 10,692,747.42 Units)	-	386.53
ICICI Prudential Equity-Arbitrage Fund - Direct Plan 10,980,107.06 Units (31 March 2025: Nil Units)	423.62	-
Sundaram Liquid Fund - Growth - Direct Plan Nil (31 March 2025: 9,082.04 Units)	-	20.81
Tata Money Market Fund - Growth - Direct Plan Nil (31 March 2025: 22,126.04 Units)	-	104.35
TATA Arbitrage Fund - Growth - Direct Plan 19,192,942.67 Units (31 March 2025: 19,192,942.67 Units)	304.66	284.83
Parag Parikh Flexi Cap Fund - Growth - Direct Plan Nil (31 March 2025: 1,691,383.96 Units)	-	145.12
SBI Arbitrage Opportunities Fund - Growth - Direct Plan 8,818,633.98 Units (31 March 2025: 8,818,633.98 Units)	332.55	311.41
SBI Corporate Bond Fund Nil (31 March 2025: 31,198,932.32 Units)	-	486.91
Kotak Banking & PSU Debt Fund - Growth - Direct Plan 5,299,050.66 Units (31 March 2025: 5,299,050.66 Units)	374.70	352.88
Kotak Corporate Bond Fund - Growth - Direct Plan Nil (31 March 2025: 106,266.49 Units)	-	408.91
Kotak Money Market Fund - Growth - Direct Plan Nil (31 March 2025: 40,461.73 Units)	-	179.87
Kotak Equity Arbitrage Fund - Growth - Direct Plan Nil (31 March 2025: 1,089,697.49 Units)	-	42.88
Kotak Dynamic Bond Fund - Growth - Direct 6,677,570.61 Units (31 March 2025: 6,677,570.61 Units)	277.87	268.07
Nippon India - Arbitrage Fund - Growth - Direct Plan Nil (31 March 2025: 3,817,291.94 Units)	-	107.63
Invesco India - Arbitrage Fund - Growth - Direct Plan 658,325.47 Units (31 March 2025: 1,498,997.32 Units)	23.85	50.83
Axis Liquid Fund - Growth - Direct Plan 13,081.91 Units (31 March 2025: 22,668.58 Units)	40.09	65.37
HSBC Liquid Fund - Growth - Direct Plan Nil (31 March 2025: 31,032.77 Units)	-	80.20
Invesco Liquid Fund - Growth - Direct Plan 7,981.95 Units (31 March 2025: Nil Units)	30.18	-
Canara Robeco Liquid Fund - Growth - Direct Plan 16,701.11 Units (31 March 2025: Nil Units)	55.16	-
	3,714.30	5,495.01
Aggregate amount of quoted investments and market value thereof	3,714.30	5,495.01

The company's exposure to credit risk and market risk related to investments has been disclosed in note 2.39

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.8 TRADE RECEIVABLES AND CONTRACT ASSETS

Particulars	As at 31 March 2026	As at 31 March 2025
Trade receivables - unsecured, considered good		
- from related parties (refer note 2.31 (c))	28.51	37.11
- from other than related parties	944.97	770.16
Contract assets (Unbilled revenue) - unsecured, considered good (refer note 2.42)	96.18	66.68
Total	1,069.66	873.95
Less: Allowance for expected credit loss	(66.16)	(89.33)
Net total trade receivables	1,003.50	784.62

Trade receivables are unsecured and are derived from revenue earned from providing medical, healthcare and other ancillary services. No interest is charged on the outstanding balance, regardless of the age of the balance. The Company applies Expected Credit Loss (ECL) model under simplified approach for measurement and recognition of impairment loss towards expected risk of delays and default in collection.

The Company has used a practical expedient by computing the expected credit loss allowance based on a provision matrix. Management makes specific provision in cases where there are known specific risks of customer default in making the repayments. The provision matrix takes into account historical credit loss experience and adjusted for forward-looking information. The expected credit loss allowance is based on the ageing of the days the receivables are due and the rates as per the provision matrix.

The Company is subject to concentration of credit risk in its trade receivables for one customer comprising of 31.14% (31 March 2025: 39%) of total trade receivables. Although the Company is directly affected by the financial condition of its customer, management does not believe significant credit risks exist at the balance sheet date. The Company does not require collateral or other securities to support its accounts receivable.

- (a) The Company's exposure to credit risk and loss allowances related to trade receivables are disclosed in note 2.39.
- (b) Trade receivables are non-interest bearing and are generally on terms of 30-45 days

Trade receivables and Contract assets ageing schedule:

As at 31 March 2026

Particulars	Contract assets (Unbilled revenue)	Current but not due	Outstanding for following periods from due date of payment					Total
			Less than 6 months	6 months - 1 year	1-2 years	2-3 years	More than 3 years	
(i) Contract assets (Unbilled Revenue), Undisputed - considered good	96.18	-	-	-	-	-	-	96.18
(ii) Undisputed Trade receivables – considered good	-	522.47	318.71	60.22	51.39	11.57	9.12	973.48
(iii) Undisputed Trade Receivables – which have significant increase in credit risk	-	-	-	-	-	-	-	-
(iv) Undisputed Trade Receivables – credit impaired	-	-	-	-	-	-	-	-
(v) Disputed Trade Receivables– considered good	-	-	-	-	-	-	-	-
(vi) Disputed Trade Receivables – which have significant increase in credit risk	-	-	-	-	-	-	-	-
(vii) Disputed Trade Receivables – credit impaired	-	-	-	-	-	-	-	-
Total	96.18	522.47	318.71	60.22	51.39	11.57	9.12	1,069.66
Less: Allowance for expected credit loss								(66.16)
Net total trade receivables								1,003.50

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.8 TRADE RECEIVABLES AND CONTRACT ASSETS (continued)

As at 31 March 2025

Particulars	Contract assets (Unbilled revenue)	Current but not due	Outstanding for following periods from due date of payment					Total
			Less than 6 months	6 months - 1 year	1-2 years	2-3 years	More than 3 years	
(i) Contract assets (Unbilled Revenue), Undisputed - considered good	66.68	-	-	-	-	-	-	66.68
(ii) Undisputed Trade receivables – considered good	-	449.11	223.01	52.34	35.06	42.10	5.65	807.27
(iii) Undisputed Trade Receivables – which have significant increase in credit risk	-	-	-	-	-	-	-	-
(iv) Undisputed Trade Receivables – credit impaired	-	-	-	-	-	-	-	-
(v) Disputed Trade Receivables– considered good	-	-	-	-	-	-	-	-
(vi) Disputed Trade Receivables – which have significant increase in credit risk	-	-	-	-	-	-	-	-
(vii) Disputed Trade Receivables – credit impaired	-	-	-	-	-	-	-	-
Total	66.68	449.11	223.01	52.34	35.06	42.10	5.65	873.95
Less: Allowance for expected credit loss								(89.33)
Net total trade receivables								784.62

There are no debts due by directors or other officers of the Company or any of them either severally or jointly with any other person or debts due by firms or private companies respectively in which any director is a partner or a director or a member.

2.9 (a) CASH AND CASH EQUIVALENTS

Particulars	As at 31 March 2026	As at 31 March 2025
Cash on hand	7.87	10.90
Balance with banks		
- On current accounts	164.93	158.00
	172.80	168.90

The Company's exposure to credit risk and market risk are disclosed in note 2.39.

2.9 (b) BANK BALANCES OTHER THAN CASH AND CASH EQUIVALENTS

Particulars	As at 31 March 2026	As at 31 March 2025
Unpaid dividend	0.05	0.20
	0.05	0.20

(i) The Company's exposure to credit risk and market risk are disclosed in note 2.39.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.9 (b) BANK BALANCES OTHER THAN CASH AND CASH EQUIVALENTS (continued)

(ii) Details of bank balances / deposits

Particulars	As at 31 March 2026	As at 31 March 2025
Bank balances available on demand/deposits with original maturity of 3 months or less included under Cash and cash equivalents	-	-
Bank deposits with original maturity more than 3 months but less than 12 months included under 'Bank balances other than cash and cash equivalents	-	-
Bank deposits with original maturity more than 12 months and remaining maturity less than 12 months included under Other financial assets (current) (refer note : 2.3(b))	477.11	957.95
Bank deposits with original maturity more than 12 months and remaining maturity more than 12 months included under Other financial assets (non-current) (refer note : 2.3(a))	1,041.97	20.26

2.10 LOANS (NON-CURRENT)

(Unsecured, considered good)

Particulars	As at 31 March 2026	As at 31 March 2025
Loans receivable	235.30	205.08
Investment in non-convertible redeemable preference shares (including accrued interest)*	342.25	-
	577.55	205.08
Interest accrued on - loans receivable ^	81.54	94.46
Total loan carried at amortised cost	659.09	299.54

*refer note 2.2(c)

2.11 LOANS (CURRENT)

(Unsecured, considered good)

Particulars	As at 31 March 2026	As at 31 March 2025
Loans receivable	18.17	0.40
	18.17	0.40
Interest accrued on - loans receivable ^	32.26	30.05
Total loan carried at amortised cost	50.43	30.45

Disclosure under Section 186(4) of the Companies Act, 2013

Loans:

Particulars	As at 31 March 2026	As at 31 March 2025
Opening balance	205.48	205.48
Given during the year	50.00	-
Repaid during the year	(2.00)	-
Closing balance	253.48	205.48

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.11 LOANS (CURRENT) (continued)

Details of unsecured outstanding loans as at 31 March 2026:

Name of the borrower	Nature of relationship	Purpose of deposits given	Rate of interest	As at 01 April 2025	Given during the year	Repaid during the year	As at 31 March 2026
Madhukar Rainbow Children's Hospital (refer note below)	Others	Working capital	8.50%	203.48	-	-	203.48
Rosewalk Healthcare Private Limited	Related party	Working capital	8.50%	2.00	10.00	(2.00)	10.00
Prashanthi Medicare Private Limited	Related Party	Working capital	8.50%	-	40.00	-	40.00
				205.48	50.00	(2.00)	253.48

Details of unsecured outstanding loans as at 31 March 2025:

Name of the borrower	Nature of relationship	Purpose of deposits given	Rate of interest	As at 01 April 2024	Given during the year	Repaid during the year	As at 31 March 2025
Madhukar Rainbow Children's Hospital (refer note below)	Others	Working capital	8.50%	203.48	-	-	203.48
Rosewalk Healthcare Private Limited	Related party	Working capital	9.50%	2.00	-	-	2.00
				205.48	-	-	205.48

^ Refer note 2.31 (c) for related party balances.

2.12 OTHER CURRENT ASSETS

Particulars	As at 31 March 2026	As at 31 March 2025
(Unsecured, considered good)		
Advances to suppliers	131.58	107.85
Prepaid expenses	83.18	48.26
Advance to employees ^{^^}	18.53	10.35
	233.29	166.46

^{^^} Refer note 2.31(c) for advance to Key managerial personnel

2.13 EQUITY SHARE CAPITAL

Particulars	As at 31 March 2026	As at 31 March 2025
Authorised		
150,000,000 (31 March 2025: 150,000,000) equity shares of ₹ 10 each	1,500.00	1,500.00
	1,500.00	1,500.00
Issued, subscribed and paid-up		
101,559,156 (31 March 2025: 101,551,673) equity shares of ₹ 10 each, fully paid-up	1,015.59	1,015.52
	1,015.59	1,015.52

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.13 EQUITY SHARE CAPITAL (continued)

a) Reconciliation of equity shares outstanding at the beginning and at the end of the year:

Particulars	As at 31 March 2026		As at 31 March 2025	
	Number of shares	Amount	Number of shares	Amount
Equity shares of ₹ 10 each, Issued, subscribed and fully paid-up				
At the commencement of the year	101,551,673	1,015.52	101,501,687	1,015.02
Add: Equity shares issued pursuant to employee stock option plan	7,483	0.07	49,986	0.50
At the end of the year *	101,559,156	1,015.59	101,551,673	1,015.52

* for details of shares reserved for issue under the share based payment plan of the group. Refer note 2.45

b) Terms/Rights attached to Equity shares :

The Company has a single class of equity shares of face value ₹ 10 each, fully paid up. Accordingly, all equity shares rank equally with regard to dividends and share in the Company's residual assets. The equity shares are entitled to receive dividend as declared from time to time subject to payment of dividend to preference shareholders. Each holder of equity shares is entitled to one vote per share. The Company declares and pays dividends in Indian Rupees.

On liquidation of the Company, the holders of equity shares will be entitled to receive the residual assets of the Company, remaining after distribution of all preferential amounts in proportion to the number of equity shares held.

c) Particulars of shareholders holding more than 5% shares in the company:

Name of shareholder	As at 31 March 2026		As at 31 March 2025	
	Number of shares	%	Number of shares	%
Equity shares of ₹ 10 each, fully paid-up held by:				
- Dr. Ramesh Kancharla	31,517,431	31.03%	31,517,431	31.04%
- Dr. Dinesh Kumar Chirla	6,633,310	6.53%	6,633,310	6.53%
- Dr. Adarsh Kancharla	6,110,432	6.02%	6,110,432	6.02%
- ICICI Prudential Asset Management Company Limited	5,267,872	5.19%	-	0.00%
- Kancharla Family Trust	5,205,700	5.13%	5,205,700	5.13%
	54,734,745	53.90%	49,466,873	48.72%

As per records of the Company, including its register of shareholder/members and other declarations received from shareholder regarding beneficial interest, the above shareholding represents both legal and beneficial ownership of shares.

d) During the five years immediately preceding the reporting date, no shares have been bought back, issued for consideration other than cash other than disclosed below.

During the year ended 31 March 2022, 48,167,004 equity shares of ₹ 10 each, fully paid up have been allotted as bonus shares by capitalisation of securities premium.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.13 EQUITY SHARE CAPITAL (continued)

e) Shareholding of promoters

As at 31 March 2026

Promoter Name	Number of shares at the beginning of the year	Change during the year	Number of shares at the end of the year	% of total shares	% change during the year
Equity shares:					
Dr Ramesh Kancharla	31,517,431	-	31,517,431	31.03%	-
Dr Dinesh Kumar Chirla	6,633,310	-	6,633,310	6.53%	-
Dr Adarsh Kancharla	6,110,432	-	6,110,432	6.02%	-
Kancharla Family Trust	5,205,700	-	5,205,700	5.13%	-
Total	49,466,873	-	49,466,873	48.71%	-

As at 31 March 2025

Promoter Name	Number of shares at the beginning of the year	Change during the year	Number of shares at the end of the year	% of total shares	% change during the year
Equity shares:					
Dr Ramesh Kancharla	31,494,654	22,777	31,517,431	31.04%	0.01%
Dr Dinesh Kumar Chirla	6,633,310	-	6,633,310	6.53%	-
Dr Adarsh Kancharla	6,110,432	-	6,110,432	6.02%	-
Kancharla Family Trust	5,179,200	26,500	5,205,700	5.13%	0.03%
Total	49,417,596	49,277	49,466,873	48.72%	0.04%

2.14 OTHER EQUITY

Particulars	Securities premium	General reserve	Share based payment reserve	Treasury Shares	Retained earning	Total other equity
Balance as at 01 April 2024	3,986.98	44.43	96.58	-	7,709.50	11,837.49
Profit for the year	-	-	-	-	2,375.85	2,375.85
Employee share based payment expenses (refer note 2.45)	43.11	-	(79.73)	-	-	(36.62)
Appropriations:						
Final dividend on equity shares for the year ended 31 March 2024 i.e. ₹ 3 per share	-	-	-	-	(304.64)	(304.64)
Remeasurement of defined benefit liability (net of tax effect)	-	-	-	-	(2.16)	(2.16)
Balance as at 31 March 2025	4,030.09	44.43	16.85	-	9,778.55	13,869.92

Particulars	Securities premium	General reserve	Share based payment reserve	Treasury Shares	Retained earning	Total other equity
Balance as at 01 April 2025	4,030.09	44.43	16.85	-	9,778.55	13,869.92
Profit for the year	-	-	-	-	2,500.16	2,500.16
Employee share based payment expenses (refer note 2.45)	7.96	-	21.16	-	-	29.12

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.14 OTHER EQUITY (continued)

Particulars	Securities premium	General reserve	Share based payment reserve	Treasury Shares	Retained earning	Total other equity
Appropriations:						
Final dividend on equity shares for the year ended 31 March 2025 i.e. ₹ 3 per share	-	-	-	-	(304.65)	(304.65)
Purchase of treasury shares	-	-	-	(212.96)	-	(212.96)
Remeasurement of defined benefit liability (net of tax effect)	-	-	-	-	(6.61)	(6.61)
Balance as at 31 March 2026	4,038.05	44.43	38.01	(212.96)	11,967.45	15,874.98

Nature and purpose

Securities premium

Securities premium is used to record the premium received on issue of shares. It is utilised in accordance with the provisions of the Companies Act, 2013.

General reserve

The general reserve is a free reserve which is used from time to time to transfer profits from retained earnings. As the general reserve is created by a transfer from one component of equity to another and is not an item of other comprehensive income, items included in the general reserve will not be reclassified subsequently to statement of profit and loss.

Retained earning

Retained earnings are the profits that the Company has earned till date, less any transfers to general reserve, dividends, or other distributions paid to shareholders. It includes impact of remeasurement gain/ (losses) net of taxes on defined benefit plans on account of changes in actuarial assumptions or experience adjustments within the plans.

Treasury shares

The reserve for shares of the Company held by the Rainbow Employees Welfare Trust (ESOP Trust). The Company has issued employees stock option scheme for its employees. The shares of the Company have been purchased and held by ESOP Trust to issue and allot to employees at the time of exercise of ESOP by Employees.

Share based payment reserve

The share options-based payment reserve is used to recognise the grant date fair value of options issued to employees under Employee stock option plan. The amounts recognised in this reserve are transferred to Securities Premium when Options are exercised by the employees or they expire unexercised (refer note 2.45).

2.14 (a) DIVIDEND

Distribution made and proposed

Particulars	31 March 2026	31 March 2025
Dividends on equity shares declared and paid:		
Final dividend for the year ended 31 March 2025: ₹ 3 per share (31 March 2024: ₹ 3 per share)	304.65	304.64
	304.65	304.64
Proposed dividend on Equity shares:		
Proposed dividend for the year ended 31 March 2026 : ₹ 3.50 per share (31 March 2025: ₹ 3 per share)	355.46	304.66
	355.46	304.66

The Board of Directors of the Company, at its meeting held on 23 May 2026, have proposed a final dividend of Rs. 3.50 per Equity Share having face value of Rs.10 each aggregating to Rs. 355.46 million for the financial year ended 31 March 2026. The proposal is subject to the approval of the shareholders at the forthcoming Annual General Meeting. Final dividend is accounted in the year in which it is approved by the shareholders.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.15 PROVISIONS (NON-CURRENT)

Particulars	As at 31 March 2026	As at 31 March 2025
Provision for employee benefits		
- Gratuity (refer note 2.30(b))	123.87	74.04
- Compensated absences	29.08	20.21
	152.95	94.24

2.16 TRADE PAYABLES

Particulars	As at 31 March 2026	As at 31 March 2025
Trade payables		
- total outstanding dues to micro enterprises and small enterprises (MSME) (refer note 2.36)	253.18	91.16
- total outstanding dues to creditors other than micro enterprises and small enterprises	620.88	701.56
	874.06	792.72

The Company's exposure to liquidity and currency risk and loss allowances related to trade payables are disclosed in note 2.39.

Trade payables are non-interest bearing and are normally settled on 30 to 45 days terms.

Refer note 2.31(c) for related party balances.

Trade payables ageing schedule

As at 31 March 2026

Particulars	Current but not due	Outstanding for following periods from due date of payment				Total
		Less than - 1 year	1-2 years	2-3 years	More than 3 years	
i) Undisputed dues of micro enterprises and small enterprises (refer note 2.36)	140.33	109.09	1.89	1.01	0.86	253.18
ii) Undisputed dues of creditors other than micro enterprises and small enterprises	356.80	257.68	1.73	1.03	3.64	620.88
iii) Disputed dues of micro enterprises and small enterprises	-	-	-	-	-	-
iv) Disputed dues of creditors other than micro enterprises and small enterprises	-	-	-	-	-	-
Total	497.13	366.77	3.62	2.04	4.50	874.06

As at 31 March 2025

Particulars	Current but not due	Outstanding for following periods from due date of payment				Total
		Less than - 1 year	1-2 years	2-3 years	More than 3 years	
i) Undisputed dues of micro enterprises and small enterprises (refer note 2.36)	-	89.07	1.53	0.09	0.47	91.16
ii) Undisputed dues of creditors other than micro enterprises and small enterprises	223.82	468.30	4.26	3.44	1.74	701.56
iii) Disputed dues of micro enterprises and small enterprises	-	-	-	-	-	-
iv) Disputed dues of creditors other than micro enterprises and small enterprises	-	-	-	-	-	-
Total	223.82	557.37	5.79	3.53	2.21	792.72

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.17 OTHER FINANCIAL LIABILITIES (CURRENT) (AT AMORTISED COST)

Particulars	As at 31 March 2026	As at 31 March 2025
Employee benefit payables ^	85.30	81.26
Creditor for capital goods	141.65	85.05
Other payables #	13.78	3.22
Unpaid dividend	0.05	0.13
	240.78	169.66

^ Refer note 2.31(c) for related party balances.

represents amounts received for Continuing Medical Education programmes

The Company's exposure to liquidity risk related to other financial liabilities are disclosed in note 2.39.

2.18 PROVISIONS (CURRENT)

Particulars	As at 31 March 2026	As at 31 March 2025
Provision for employee benefits		
Gratuity (refer note 2.30 (a))	26.11	35.25
Compensated absences	20.63	28.07
	46.74	63.32
Provision for claims, other than taxes arise in future*	1.94	1.94
	48.68	65.26
*Movement in provision for claims, other than taxes arise in future:		
Opening balance	1.94	1.94
Add: Addition during the year	-	-
Less: Utilisation/ reversal during the year	-	-
Closing balance	1.94	1.94

2.19 OTHER CURRENT LIABILITIES

Particulars	As at 31 March 2026	As at 31 March 2025
Contract liabilities (advance from patients) (refer note. 2.42)	43.53	38.23
Liability towards corporate social responsibility (refer note. 2.37)	118.31	66.06
Statutory liabilities	101.38	87.03
	263.22	191.32

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.20 REVENUE FROM OPERATIONS

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Income from medical and healthcare services		
- Revenue from hospital services (refer note 2.42)	13,160.22	12,554.04
- Revenue from pharmacy sales (refer note 2.42)	1,938.05	1,585.83
- Revenue from medical service fee (refer note 2.42)	242.86	264.93
	15,341.13	14,404.80
Other operating income		
- Cord blood extraction	35.30	29.11
- Canteen income	38.59	33.34
- Sale of baby products	-	37.50
- Others	41.58	40.32
	115.47	140.27
Total revenue from operations	15,456.60	14,545.07

2.21 OTHER INCOME

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Interest income on financial assets carried at amortised cost		
- Bank deposits	77.43	102.06
- Loans	37.38	17.49
- Income Tax refund	-	3.49
- Other financial assets	18.48	16.97
Gain on redemption of mutual funds (net)	246.08	78.13
Net gain on financial assets measured at fair value through profit or loss	41.48	269.80
Liabilities no longer required written back	1.07	0.75
Gain on sale of property, plant and equipment (net)	11.98	0.80
Foreign exchange gain (net)	0.64	-
	434.54	489.49

2.22 COST OF MATERIALS CONSUMED

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Inventory at the beginning of the year	227.42	225.86
Add: Purchases during the year	2,068.33	1,900.25
Less: Closing inventory	(299.06)	(227.42)
	1,996.69	1,898.69

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.23 EMPLOYEE BENEFITS EXPENSE *

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Salaries, wages and bonus	1,920.29	1,808.69
Contribution to provident and other funds (refer note 2.30(a))	91.49	84.17
Gratuity expense (refer note 2.30(C)(i))	28.16	44.70
Employee share based payment expenses (refer note 2.45) #	29.12	(12.71)
Staff welfare expenses	54.88	51.23
	2,123.93	1,976.08

* Net of amount capitalised (refer note 2.38)

During the previous year, the Company has reversed Employee share based payment expense towards unvested options of ₹ 52.05 million accounted in earlier previous year pursuant to resignation of Chief Operating Officer.

2.24 FINANCE COSTS *

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Interest expense on lease liabilities (refer note 2.32)	713.96	695.94
	713.96	695.94

* Net of amount capitalised (refer note 2.38)

2.25 DEPRECIATION AND AMORTISATION EXPENSE

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Depreciation on property, plant and equipment (refer note 2.1(a))	844.92	819.03
Amortisation of intangible assets (refer note 2.1(b))	30.65	23.84
Depreciation of right-of-use assets (refer note 2.32) *	487.04	474.61
	1,362.61	1,317.48

* Net of amount capitalised (refer note 2.38)

2.26 (i) PROFESSIONAL FEES TO DOCTORS

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Professional fees to doctors	3,770.65	3,484.90
	3,770.65	3,484.90

2.26 (ii) OTHER EXPENSES *

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Hospital maintenance	68.04	69.30
Canteen expenses	254.03	257.68
Contract wages	441.07	378.77
Housekeeping expenses	80.08	78.65
Power and fuel	260.30	260.76
Lab and investigations	160.76	171.09
Repairs and maintenance		
- Plant and equipment	87.84	97.57
- Others	222.94	210.11
Rent (refer note 2.32)	47.65	24.70

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.26 (II) OTHER EXPENSE (continued)

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Rates and taxes	181.94	159.58
Business promotion and advertisement	239.76	292.83
Travelling and conveyance	56.28	50.12
Printing and stationary	80.47	84.51
Bad debts written off	-	1.70
Allowance for expected credit loss	48.77	7.31
Communication expenses	114.05	118.78
Insurance	21.20	15.88
Professional and consultancy	78.36	44.11
Audit fees (refer note 2.34)	8.20	9.97
Directors sitting fees	5.81	4.48
Donations	0.12	-
Corporate social responsibility (refer note 2.37)	56.70	50.12
Bank charges	37.40	40.82
Unrealised foreign exchange loss (Net)	-	0.12
Miscellaneous expenses	14.99	11.68
	2,566.76	2,440.64

* Net of amount capitalised (refer note 2.38)

2.27 TAX EXPENSE, NET

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Amounts recognised in the Statement of Profit and Loss		
Current tax	917.83	856.68
Adjustment of tax related to earlier periods	(3.46)	19.84
Deferred tax	(73.38)	(31.54)
	840.99	844.98
Amounts recognised in other comprehensive income		
Deferred tax	2.22	0.72
	2.22	0.72
Amounts recognised in the Statement of Profit and Loss	838.77	844.26

a. Reconciliation of effective tax rate

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Profit before tax	3,341.15	3,220.83
Enacted tax rate	25.17%	25.17%
Tax expense at enacted rates	840.90	810.62
80JJAA deduction	(7.00)	(7.88)
Expenses not deductible for tax	11.93	14.96
Adjustment of tax related to earlier periods	(3.46)	19.84
Deferred tax recognised in other comprehensive income	(2.22)	0.72
Others	(1.38)	6.00
	838.77	844.26

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.27 TAX EXPENSE, NET (continued)

b. The following table provides the details of non-current tax assets and current tax liabilities:

Particulars	As at 31 March 2026	As at 31 March 2025
Non-current tax assets (net)	136.95	99.86
Net non-current tax assets at the end of the year	136.95	99.86

c. The gross movement in the net non-current tax assets is as follows:

Particulars	As at 31 March 2026	As at 31 March 2025
Net non-current tax assets at the beginning of the year	99.86	135.99
Income tax paid	951.46	840.39
Income tax expense for the year	(917.83)	(856.68)
Adjustment of tax related to earlier periods	3.46	(19.84)
Net non-current tax assets at the end of the year	136.95	99.86

d. Recognition of deferred tax assets and liabilities

(i) Deferred tax assets and liabilities are attributable to the following

Particulars	As at 31 March 2026	As at 31 March 2025
Deferred tax liability		
Property, plant and equipment	230.53	240.13
Fair value gain on mutual funds	93.46	83.09
Total deferred tax liability	323.99	323.22
Deferred tax asset		
Loss allowance on receivables	30.25	37.11
Provision for employee benefits	50.26	39.66
Provision for bonus	4.87	5.71
Lease liabilities (net of right-of-use of assets)	600.15	526.68
Total deferred tax asset	685.53	609.16
Net deferred tax assets	361.54	285.94

(ii) Movement in temporary differences

Particulars	Balance as at 01 April 2025	Recognised in		Balance as at 31 March 2026
		standalone statement of profit or loss during the year	Recognised in OCI during the year	
Loss allowance on receivables	37.11	(6.86)	-	30.25
Provision for employee benefits	39.66	8.38	2.22	50.26
Provision for bonus	5.71	(0.84)	-	4.87
Lease liabilities (net of right-of-use of assets)	526.68	73.47	-	600.15
Property, plant and equipment	(240.13)	9.60	-	(230.53)
Fair value gain on mutual funds	(83.09)	(10.37)	-	(93.46)
	285.94	73.38	2.22	361.54

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.27 TAX EXPENSE, NET (continued)

Particulars	Balance as at 01 April 2024	Recognised in		Balance as at 31 March 2025
		standalone statement of profit or loss during the year	Recognised in OCI during the year	
Loss allowance on receivables	35.13	1.98	-	37.11
Provision for employee benefits	30.92	8.02	0.72	39.66
Provision for bonus	11.19	(5.48)	-	5.71
Lease liabilities (net of right-of-use of assets)	446.01	80.67	-	526.68
Property, plant and equipment	(254.76)	14.63	-	(240.13)
Fair value gain on mutual funds	(14.81)	(68.28)	-	(83.09)
	253.68	31.54	0.72	285.94

2.28 CONTINGENT LIABILITIES

Particulars	As at 31 March 2026	As at 31 March 2025
(i) Demands under dispute		
- Income-tax matters	3.65	-
- Goods and services tax	25.07	100.56
- Luxury tax demand under dispute	18.55	18.55
(ii) Claims against the Company not acknowledged as debt (Medico-legal) *	200.00	145.82
	247.27	264.93

* The Company is involved in the disputes, law suites, claims from patients/patient relatives that arise from time to time in ordinary course of business. Based on external legal advise, management believes none of the matters, either in individual or in aggregate will have any material effect on its standalone financial statements, as the management believes it has a reasonable case in its defence of proceedings and hence, no provision is recognised in the standalone financial statements.

The Company is subject to legal proceedings and claims, which have arisen in the ordinary course of business including litigation before tax authorities and including matters mentioned above. The uncertainties and possible reimbursements are dependent on the outcome of the different legal processes which have been invoked by the claimants or the Company, as the case may be, and therefore cannot be predicted accurately. The Company engages reputed professional advisors to protect its interests and has been advised that it has strong legal positions against such disputes. The Management believes that it has a reasonable case in its defence of the proceedings and accordingly no further provision is required.

2.29 CAPITAL COMMITMENTS

Particulars	As at 31 March 2026	As at 31 March 2025
- Estimated amount of contracts remaining to be executed on capital account and not provided for (net of advances) #	1,744.19	558.90

represents capital commitments towards ongoing projects at Gurgaon, Coimbatore etc.,

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.30 EMPLOYEE BENEFIT PLANS

The employee benefit schemes are as under:

(a) Defined contribution benefit plans

The Company makes contributions, determined as a specified percentage of employee salaries, in respect of qualifying employees towards Provident fund and Employee state insurance (ESI), which is a defined contribution plan. The contribution is charged to the Statement of standalone profit and loss as they accrue. The amount recognised as an expense towards contribution to Provident fund and ESI for the year ended 31 March 2026 amounts to ₹ 87.63 million and ₹ 3.87 million respectively (31 March 2025: ₹ 79.21 million and ₹ 4.96 million respectively) (refer note 2.23).

(b) Defined benefit plans

The Company provides its employees with benefits under a defined benefit plan, referred to as the "Gratuity Plan". The Gratuity Plan entitles an employee, who has rendered at least five years of continuous service, to receive 15 days (31 March 2025: 15 days) salary for each year of completed service (service of six months and above is rounded off as one year) at the time of retirement/exit, restricted to a sum of ₹ 2.00 million. The Company contributes all ascertained liabilities towards gratuity to the Fund. The plan assets have been primarily invested in insurer managed funds. The Company's obligation in respect of gratuity plan, which is a defined benefit plan is provided for based on actuarial valuation carried out by an independent actuary using the projected unit credit method.

The following table sets out the status of the funded gratuity plan as required under Ind AS 19 "Employee Benefits":

A. Based on the actuarial valuation obtained in this respect, the following table sets out the status of the gratuity plan and the amounts recognised in the Company's standalone financial statements as at the balance sheet date :

Particulars	As at 31 March 2026	As at 31 March 2025
Defined benefit obligation	155.80	114.33
Fair value of plan assets	(5.83)	(5.04)
Net defined benefit obligation	149.97	109.29
Provisions (current) (Refer note 2.18)	26.11	35.25
Provisions (non-current) (Refer note 2.15)	123.86	74.04

B. Reconciliation of net defined benefit obligation:

The following table shows a reconciliation from the opening balances to the closing balances for the net defined benefit obligation, plan assets and its components:

i. Reconciliation of present value of defined benefit obligation:

Particulars	As at 31 March 2026	As at 31 March 2025
Defined benefit obligation as at beginning of the year	114.33	77.95
Current service cost	21.59	15.88
Past service cost (refer note: 2.43)	15.39	24.32
Interest cost	6.91	4.79
Actuarial gains recognised in other comprehensive income	9.28	2.63
Benefits paid	(11.70)	(11.24)
Defined benefit obligation at the end of the year	155.80	114.33

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.30 EMPLOYEE BENEFIT PLANS (continued)

ii. Reconciliation of fair value of plan assets

Particulars	As at 31 March 2026	As at 31 March 2025
Plan assets as at the beginning of the year	5.04	5.00
Contributions paid in to the plan	11.70	11.24
Interest on plan assets	0.34	0.29
Return on plan assets less interest on plan assets	0.45	(0.25)
Benefits paid	(11.70)	(11.24)
Plan assets as at the end of the year	5.83	5.04

C. (i) Gratuity expense recognised in the statement of profit and loss:

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Current service cost	21.59	15.88
Past service cost	15.39	24.32
Interest on defined benefit liability / (asset)	6.57	4.50
Gratuity expenses, included in employee benefit expenses	43.55	44.70

C. (ii) Re-measurements recognised in other comprehensive income

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Actuarial loss/(gain) on defined benefit obligation		
- Actuarial loss arising from change in financial assumptions	2.66	0.77
- Actuarial (gain) arising from change in demographic assumptions	(0.12)	(1.66)
- Actuarial loss/(gain) arising on account of experience changes	6.74	3.52
- Actual return on plan assets less interest on plan assets	(0.45)	0.25
Actuarial gain recognised in other comprehensive income	8.83	2.88

D. Plan assets

Plan assets comprises of the following :

Particulars	As at 31 March 2026	As at 31 March 2025
Fund managed by insurer	5.83	5.04

E. Defined benefit obligation

Actuarial assumptions at balance sheet date:

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Discount rate	6.55% p.a	6.90% p.a
Salary escalation rate	8% p.a	8% p.a
Attrition rate		
- Nursing staff	-	46.11% p.a
- Paramedical staff	-	27.92% p.a
- Patient care services staff	-	44.80% p.a
- Administration staff	-	36.12% p.a
- Support staff	-	33.65% p.a
- Nursing staff : Upto 5 years	43.00% p.a.	-
- Nursing staff : Above 5 years	18.00% p.a.	-
- Paramedical staff : Upto 5 years	32.00% p.a.	-

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.30 EMPLOYEE BENEFIT PLANS (continued)

E. Defined benefit obligation (continued)

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Paramedical staff : Above 5 years	14.00% p.a.	-
Patient care services staff : Upto 5 years	48.00% p.a.	-
Patient care services staff : Above 5 years	12.00% p.a.	-
Administration staff : Upto 5 years	35.00% p.a.	-
Administration staff : Above 5 years	8.00% p.a.	-
Support staff : Upto 5 years	44.00% p.a.	-
Support staff : Above 5 years	17.00% p.a.	-
Sales and Marketing : Upto 5 years	80.00% p.a.	-
Sales and Marketing : Above 5 years	41.00% p.a.	-
Operations : Upto 5 years	45.00% p.a.	-
Operations : Above 5 years	13.00% p.a.	-
Retirement Age	58 years	58 years

Maturity profile of defined benefit obligation

Particulars	As at 31 March 2026	As at 31 March 2025
Year 1	31.93	40.29
Year 2 to 5	88.43	77.48
Year 6 to 9	46.66	17.98
For 10 years and above	62.75	4.75

Discount rate: The discount rate is based on the prevailing market yields of Indian government securities as at the balance sheet date for the estimated term of the obligations.

Salary escalation rate: Salary escalation rate: The estimates of future salary increases considered takes into account the inflation, seniority, promotion and other relevant factors.

Sensitivity analysis: Reasonably possible changes at the reporting date to one of the relevant actuarial assumptions, holding other assumptions constant would have affected the defined benefit obligation by the amounts shown below:

	As at 31 March 2026		As at 31 March 2025	
	Increase	Decrease	Increase	Decrease
Discount rate (50 bps movement)	152.03	159.77	112.80	115.90
Salary escalation rate (50 bps movement)	159.16	152.53	115.90	112.87

Expected contributions to the plan for the next annual reporting year

Expected contribution to post-employment benefit plans for the financial year ending 31 March 2027 is ₹ 31.93 million.

The weighted average duration of the defined benefit obligation is 4.96 years (31 March 2025: 2.71 years)

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.31 RELATED PARTIES

a) Names of the related parties and description of relationship:

Entities in which control exists (Subsidiaries)	Rainbow Children's Hospital Private Limited
	Rainbow Women & Children's Hospital Private Limited
	Rainbow Speciality Hospitals Private Limited
	Rosewalk Healthcare Private Limited
	Rainbow Fertility Private Limited
	Rainbow C R O Private Limited
	Prashanthi Medicare Private Limited (w.e.f. 01 July 2025)
	Pratiksha Women & Child Care Hospital Private Limited (w.e.f. 18 August 2025)
Entities over which company is able to exercise control/ Significant influence	Rainbow Children's Hospital Foundation
	Rainbow Employees Welfare Trust (w.e.f. 08 July 2025)
Key managerial personnel (KMP)	Dr. Ramesh Kancharla, Chairman and Managing Director
	Dr. Dinesh Kumar Chirla, Whole-Time Director
	Mr. Anil Dhawan, Independent Director
	Mr. Santanu Mukherjee, Independent Director
	Ms. Sundari Raviprasad Pisupati, Independent Director
	Mr. Aluri Srinivasa Rao, Independent Director
	Mr. Ashish Kapil, Company Secretary (resigned w.e.f. 14 December 2024)
	Mrs. Shreya Mitra, Company Secretary (appointed w.e.f. 09 February 2025)
	Mr. Vikas Maheshwari, Chief Financial Officer
	Mr. Sanjeev Sukumaran, Chief Operating Officer (resigned w.e.f. 30 October 2024)
	Mr. Abrarali Dalal, Chief Operating Officer (appointed w.e.f. 20 January 2026)
Relative of key managerial personnel	Dr. Sai Aishwarya Chirla, Daughter of Dr.Dinesh Kumar Chirla
	Mr. Ramadhara Naidu Kancharla, brother of Dr. Ramesh Kancharla
Enterprises where key managerial personnel along with their relatives exercise significant influence	Ravindranath GE Medical Associates Private Limited
	Rainbow Children's Foundation
Enterprises where relative of key managerial personnel is a member	Unimed Healthcare Private Limited

(b) Following is the summary of significant related party transactions during the year:

	For the year ended 31 March 2026	For the year ended 31 March 2025
Revenue from medical/ professional services rendered		
- Rainbow Children's Foundation	4.13	7.44
- Rainbow C R O Private Limited	0.01	0.07
Revenue from pharmacy sales		
- Rainbow Speciality Hospitals Private Limited	8.51	7.47
- Rosewalk Healthcare Private Limited	20.30	11.37
- Prashanthi Medicare Private Limited	7.70	-
- Pratiksha Women & Child Care Hospital Private Limited	0.06	-
Revenue from sale of baby products		
- Rosewalk Healthcare Private Limited	-	25.30

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.31(B) RELATED PARTIES (continued)

	For the year ended 31 March 2026	For the year ended 31 March 2025
Professional services received		
- Ravindranath GE Medical Associates Private Limited	0.25	1.56
- Unimed Healthcare Private Limited	27.75	40.77
Professional services provided		
- Unimed Healthcare Private Limited	0.59	1.31
Medical service fee paid		
- Rainbow Speciality Hospitals Private Limited	2.08	3.07
Medical consumables and pharmacy items purchases		
- Rainbow Speciality Hospitals Private Limited	0.67	0.72
- Rosewalk Healthcare Private Limited	36.83	38.57
Reimbursement of expenditure		
- Rainbow Speciality Hospitals Private Limited	-	0.50
- Unimed Healthcare Private Limited	19.67	18.14
- Mr. K Ramadhar Naidu	0.54	0.04
Rental expenditure		
- Unimed Healthcare Private Limited	54.43	50.80
- Rainbow Speciality Hospitals Private Limited	4.20	1.75
CSR expenditure		
- Rainbow Children's Hospital Foundation	8.77	5.86
Donation expenditure		
- Rainbow Children's Hospital Foundation	0.12	-
Rental income		
- Rosewalk Healthcare Private Limited	2.25	1.24
Interest income on inter-corporate deposit		
- Rosewalk Healthcare Private Limited	0.63	0.19
- Prashanthi Medicare Private Limited	1.67	-
Interest income on Non convertible redeemable preference shares (debt component)		
- Prashanthi Medicare Private Limited	3.28	-
- Pratiksha Women & Child Care Hospital Private Limited	14.50	-
Inter-corporate deposits placed		
- Rosewalk Healthcare Private Limited	10.00	-
- Prashanthi Medicare Private Limited	40.00	-
Advance to KMP		
- Dr. Ramesh Kancharla	2.65	2.32
- Mr. Vikas Maheshwari	1.65	-
- Mrs. Shreya Mitra	0.20	-
Professional charges to KMP		
- Dr. Dinesh Kumar Chirla	21.01	28.25
Professional charges to relative of KMP		
- Dr. Sai Aishwarya Chirla	0.51	-
Issue of shares to KMP		
- Mr. Vikas Maheshwari	0.07	-

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.31(B) RELATED PARTIES (continued)

	For the year ended 31 March 2026	For the year ended 31 March 2025
Remuneration to KMP*		
- Dr. Ramesh Kancharla	37.92	45.00
- Mr. Abrarali Dalal	6.97	-
- Mr. Vikas Maheshwari (including perquisites)	30.49	25.57
- Mr. Sanjeev Sukumaran (including perquisites)	-	69.15
- Mr. Ashish Kapil	-	3.10
- Mrs. Shreya Mitra	2.46	0.68
Project management consultancy fee to relative of KMP		
- Mr. Ramadhara Naidu Kancharla	6.00	6.00
Commission to Independent Directors		
- Mr. Aluri Srinivasa Rao	1.80	1.00
- Mr. Anil Dhawan	1.80	1.00
- Mrs. Sundari Raviprasad Pisupati	1.80	1.00
- Mr. Santanu Mukherjee	1.80	1.00
Sitting fees paid to Directors		
- Mr. Anil Dhawan	1.05	0.90
- Mr. Aluri Srinivasa Rao	1.18	0.70
- Mrs. Sundari Raviprasad Pisupati	1.08	0.75
- Mr. Santanu Mukherjee	1.38	1.05
- Dr. Adarsh Kancharla	0.25	0.40
Leave travel allowance paid to KMP		
- Dr. Ramesh Kancharla	-	0.80
- Dr. Dinesh Kumar Chirla	0.71	-
Dividend paid during the year to KMP and relative of KMP		
- Dr. Ramesh Kancharla	94.55	94.48
- Dr. Dinesh Kumar Chirla	19.90	19.90
- Dr. Adarsh Kancharla	18.33	18.33
- Mr. Ramadhara Naidu Kancharla	0.18	0.18
- Mr. Vikas Maheshwari	0.02	-

*The KMP are covered by the Company's gratuity policy and are eligible for compensated absences along with other employees of the Company. The proportionate amount of gratuity and compensated absences cost pertaining to the KMP has not been included in the aforementioned disclosures as these are not determined on an individual basis.

c) The Company has the following amounts due from/ to the related parties

	As at 31 March 2026	As at 31 March 2025
Trade payables		
- Rosewalk Healthcare Private Limited	-	1.73
- Unimed Healthcare Private Limited	3.61	2.21
Trade receivables		
- Rosewalk Healthcare Private Limited	28.10	34.35
- Rainbow C R O Private Limited	0.04	0.04
- Rainbow Children's Foundation	-	2.00
- Unimed Healthcare Private Limited	0.37	0.72

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.31 RELATED PARTIES (continued)

	As at 31 March 2026	As at 31 March 2025
Advance to KMP		
- Dr. Ramesh Kancharla	1.31	2.65
- Mrs. Shreya Mitra	0.08	-
Project management consultancy fee payable		
- Mr. Ramadhara Naidu Kancharla	0.54	0.50
Commission payable to Independent Directors		
- Mr. Aluri Srinivasa Rao	1.80	1.00
- Mr. Anil Dhawan	1.80	1.00
- Mrs. Sundari Raviprasad Pisupati	1.80	1.00
- Mr. Santanu Mukherjee	1.80	1.00
Professional fee payable to KMP		
- Dr. Dinesh Kumar Chirla	2.52	2.81
Professional charges payable to relative of KMP		
- Dr. Sai Aishwarya Chirla	0.07	-
Non-current investments in equity shares (gross)		
- Rainbow Women & Children's Hospital Private Limited	0.10	0.10
- Rainbow Speciality Hospitals Private Limited	142.51	142.51
- Rainbow Children's Hospital Private Limited	0.10	0.10
- Rosewalk Healthcare Private Limited	324.11	324.11
- Rainbow Fertility Private Limited	45.00	45.00
- Rainbow C R O Private Limited	0.10	0.10
- Prashanthi Medicare Private Limited	248.52	-
- Pratiksha Women & Child Care Hospital Private Limited	1,299.60	-
Inter corporate deposits		
- Rosewalk Healthcare Private Limited	10.00	2.00
- Prashanthi Medicare Private Limited	40.00	-
Interest accrued on inter corporate deposits		
- Rosewalk Healthcare Private Limited	0.58	0.26
- Prashanthi Medicare Private Limited	1.67	-
Investment in Non convertible redeemable preference shares		
- Prashanthi Medicare Private Limited	77.48	-
- Pratiksha Women & Child Care Hospital Private Limited	410.40	-
Rent Payable		
- Unimed Healthcare Private Limited	4.90	4.90
Rent Receivable		
- Rosewalk Healthcare Private Limited	0.19	0.19
Rental Security Deposit paid		
- Unimed Healthcare Private Limited	30.00	30.00
Rental Security Deposit received		
- Rosewalk Healthcare Private Limited	0.07	0.07

a) Refer note 2.2 for details of investment made in subsidiaries.

b) All transactions with these related parties are at arm's length basis and resulting outstanding receivables and payables including financial assets and financial liabilities balances are settled in cash. None of the balances are secured. (All the amounts of transactions and balances disclosed in this note are gross (net of GST) and undiscounted.)

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for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.32 LEASES

A The Company as a lessee entered into various lease agreements majorly for buildings and used the following practical expedients on first time adoption of Ind AS 116:

- Applied the exemption not to recognize right-of-use assets and liabilities for leases with less than 12 months of lease term.
- Used hindsight when determining the lease term if the contract contains options to extend or terminate the lease.

Right-of-use of assets

Particulars	Category of ROU Assets
	Buildings
Cost as at 01 April 2024	7,374.93
Additions	146.96
Disposals	(5.80)
Modification	(0.28)
Cost as at 31 March 2025 (A)	7,515.81
Cost as at 01 April 2025	7,515.81
Additions	838.15
Disposals	(0.04)
Cost as at 31 March 2026 (B)	8,353.92
Accumulated depreciation	
Accumulated depreciation as at 01 April 2024	1,459.49
Depreciation charge for the year	474.61
Disposals	-
Depreciation capitalised (refer note 2.38)	2.17
Accumulated depreciation as at 31 March 2025 (C)	1,936.27
Accumulated depreciation as at 01 April 2025	1,936.27
Depreciation charge for the year	484.31
Disposals	-
Depreciation capitalised (refer note 2.38)	2.73
Accumulated depreciation as at 31 March 2026 (D)	2,423.31
Net carrying amounts	
As at 31 March 2026 (B-D)	5,930.61
As at 31 March 2025 (A-C)	5,579.54

B The following are the amounts recognised in the Statement of Profit and Loss :

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Depreciation expense on right-of-use of assets	487.04	474.61
Finance cost on lease liabilities	713.96	695.94
Expense relating to short term leases (included in other expenses)	47.65	24.70
Total	1,248.65	1,195.25

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.32 LEASES (continued)

C Following is the movement in lease liabilities :

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Opening Balance	7,343.55	7,347.00
Additions	828.61	131.76
Finance cost charge for the year	713.96	695.94
Finance cost capitalised (refer note 2.38)	0.64	0.90
Disposals	-	(6.21)
Payment of lease liabilities	(873.14)	(825.34)
Modification	-	(0.50)
Lease liability at the end of the year	8,013.62	7,343.55
Non-current lease liabilities	7,784.34	7,147.05
Current lease liabilities	229.28	196.50

D The following is the cash outflow on leases during the year:

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Payment of lease liabilities	873.14	825.34
Short-term lease expense	47.65	24.70
Total cash outflow on leases	920.79	850.04

E The table below provides details regarding the contractual maturities of lease liabilities as at year end on an undiscounted basis:

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Less than 1 year	935.23	862.05
1 to 5 years	4,086.81	3,712.90
Over 5 years	10,032.19	9,399.35

The Company does not face a significant liquidity risk with regard to its lease liabilities as the current assets are sufficient to meet the obligations related to lease liabilities as and when they fall due.

2.33 SEGMENT REPORTING

The Company is engaged in the business of rendering medical and healthcare services.

Ind AS 108 "Operating Segment" establishes standards for the way that public business enterprises report information about operating segments and related disclosures about products and services, geographic areas, and major customers. As defined in Ind AS 108, Operating segments are to be reported in a manner consistent with the internal reporting provided to the Chief Operating Decision Maker (CODM) i.e. the Chairman and Managing Director. The CODM evaluates the Company's performance and allocates resources on overall basis. The Company's sole operating segment is therefore 'Medical and Healthcare Services'. Accordingly, there are no additional disclosures to be provided under Ind AS 108 other than those already provided in the standalone financial statements.

Further the business operation of the Company are concentrated in India, and hence, the Company is considered to operate only in one geographical segment. There are no individual customer contributing more than 10% of Company's total revenue.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.34 AUDIT FEE (EXCLUDING GST)

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
As an auditor		
- Statutory audit fees	3.50	3.30
- Limited review	3.00	2.70
- Other services	-	2.00
- Reimbursement of expenses	0.45	0.45
Total	6.95	8.45

2.35 EARNINGS PER EQUITY SHARE :

The earnings per share has been computed as under:

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Profit for the year (A)	2,500.16	2,375.85
Add: Employee share based payment expenses (net of tax)	21.79	(9.51)
Profit attributable to equity shareholders (B)	2,521.95	2,366.34
Shares:		
Number of equity shares at the beginning of the year	101,551,673	101,501,687
Add: Number of shares issued on exercise of employee stock options	7,483	49,986
Less: Number of treasury shares outstanding during the year	(180,000)	-
Total number of equity shares outstanding at the end of the year	101,379,156	101,551,673
Weighted average number of equity shares outstanding during the year – Basic	101,538,617	101,536,429
Number of equity shares at the end of year (C)	101,538,617	101,536,429
Effect of potential equity shares on employee stock options outstanding (D)	36,270	175,050
Weighted average number of equity shares outstanding during the year – Diluted (E = C+D)	101,574,887	101,711,479
Earnings per share		
Earnings per share of par value ₹ 10 - Basic (₹) (A/C)	24.62	23.40
Earnings per share of par value ₹ 10 - Diluted (₹) (B/E)	24.62	23.27

Note: During the current year, employee stock options were not included in the calculation of diluted earnings per share because they are antidilutive for the year.

2.36 DETAILS OF DUES TO MICRO AND SMALL ENTERPRISES AS DEFINED UNDER MICRO, SMALL AND MEDIUM ENTERPRISES DEVELOPMENT ACT, 2006 ('MSMED ACT')

Particulars	As at 31 March 2026	As at 31 March 2025
(a) the principal amount and the interest due thereon remaining unpaid to any supplier at the end of each accounting year;	253.18	91.16
- Principal amount due to Micro and Small Enterprises	-	-
- Interest due on above	-	-
(b) the amount of interest paid by the buyer in terms of section 16 of the Micro, Small and Medium Enterprises Development Act, 2006, along with the amount of the payment made to the supplier beyond the appointed day;	-	-

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.36 DETAILS OF DUES TO MICRO AND SMALL ENTERPRISES AS DEFINED UNDER MICRO, SMALL AND MEDIUM ENTERPRISES DEVELOPMENT ACT, 2006 ('MSMED ACT') (continued)

Particulars	As at 31 March 2026	As at 31 March 2025
(c) the amount of interest due and payable for the period of delay in making payment (which have been paid but beyond the appointed day during the year) but without adding the interest specified under the Micro, Small and Medium Enterprises Development Act, 2006;	-	-
(d) the amount of interest accrued and remaining unpaid; and	-	-
(e) the amount of further interest remaining due and payable even in the succeeding years, until such date when the interest dues above are actually paid to the small enterprise, for the purpose of disallowance of a deductible expenditure under section 23 of the Micro, Small and Medium Enterprises Development Act, 2006.	-	-

This information is required to be disclosed under the Micro, Small and Medium Enterprises Development Act, 2006 and has been determined to the extent such parties have been identified on the basis of information available with the Company.

The Company's exposure to currency and liquidity risks related to trade payables is disclosed in note 2.39.

2.37 CORPORATE SOCIAL RESPONSIBILITY

As per Section 135 of the Companies Act, 2013, a CSR committee has been formed by the Company. The proposed areas for CSR activities, as per the CSR policy of the Company are promotion of education, sports, rural development activities, medical facilities, employment and ensuring environmental sustainability which are specified in Schedule VII of the Companies Act, 2013.

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Details of Corporate social responsibility expenditure		
(i) Gross amount required to be spent by the Company during the year	56.70	50.12
(ii) Amount approved by the Board to be spent during the year	56.70	50.12
(iii) Amount spent during the year (in cash)		
- construction/ acquisition of any asset	-	-
- on purpose other than above	10.57	5.86
(iv) Amount spent during the year (yet to be paid in cash)*		
- construction/ acquisition of any asset	-	-
- on purpose other than above	46.13	44.26
(v) (Shortfall) / Excess at the end of the year	-	-
(vi) Total of previous years shortfall	-	-
(vii) Contribution to a trust controlled by the Company in relation to CSR expenditure	8.77	5.86
(viii) Where a provision is made with respect to a liability incurred by entering into a contractual obligation, the movements in the provision during the year should be shown separately	NA	NA
(ix) Reason for shortfall	NA	NA
For the year ending 31 March 2026 and 31 March 2025 :		
(x) Nature of CSR activities:		
a) Promotion of education and sports	2.00	2.00
b) Rural development activities and training for women	6.77	3.76

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.37 CORPORATE SOCIAL RESPONSIBILITY (continued)

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
c) Promotion of medical facilities	-	0.10
d) Administrative overheads	1.80	-
e) Transferred to unspent CSR account (on-going project)*	46.13	44.26

* Consequent to the Companies (Corporate Social Responsibility Policy) Amendment Rules 2021 ("the Rules"), the Company has transferred the unspent amount of ₹ 46.13 million (31 March 2025 : ₹ 44.26 million) to a separate bank account subsequent to the balance sheet date under section 135 read with rules of Companies (CSR Policy) Rules, 2014.

In case of S. 135(6) (Ongoing Project)						
Opening Balance as at 1 April 2025		Amount required to be spent during the year	Amount spent during the year		Closing Balance as at 31 March 2026	
With Company	In Separate CSR Unspent A/c		From Company's bank A/c	From Separate CSR Unspent A/c	With Company	In Separate CSR Unspent A/c
-	66.06	56.70	10.57	-	-	112.19

In case of S. 135(6) (Ongoing Project)						
Opening Balance as at 1 April 2024		Amount required to be spent during the year	Amount spent during the year		Closing Balance as at 31 March 2025	
With Company	In Separate CSR Unspent A/c		From Company's bank A/c	From Separate CSR Unspent A/c	With Company	In Separate CSR Unspent A/c
-	21.80	50.12	5.86	-	-	66.06

2.38 INCIDENTAL EXPENDITURE CAPITALISED DURING THE CONSTRUCTION PERIOD

The Company has capitalised the following expenses to the cost of property, plant and equipment, as they are directly attributable to bringing the asset to the location and condition necessary for it to be capable of operating in the manner intended by management. Consequently amounts disclosed under the respective notes are net of amounts capitalised by the Company.

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Employee benefit expenses (A)	105.82	65.73
Finance cost (B)	0.64	0.90
Depreciation and amortisation (C)	2.73	2.17
Other expenses:		
Rent	2.38	-
Professional and consultancy	29.11	54.27
Travelling and conveyance	5.09	1.39
Power and fuel	4.63	0.26
Rates and taxes	-	20.27
Other expenses	27.34	6.16
Total (D)	68.55	82.35
Total (A+B+C+D)	177.74	151.15

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.39 FINANCIAL RISK MANAGEMENT

Risk management framework

The Company's financial risk management is an integral part of how to plan and execute its business strategies. The Company's management risk policy is set by the Board of directors. The Company's activities expose it to a variety of financial risks like credit risk, liquidity risk and market risk. The Company's primary focus is to foresee the unpredictability of financial markets and seek to minimize potential adverse effects on its financial performance. A summary of the risks have been given below:

Credit risk

Credit risk is the risk of financial loss to the Company if a customer or counterparty to a financial instrument fails to meet its contractual obligations, and arises principally from the Company's receivables from customers and loans given. Credit risk arises from cash held with banks, as well as credit exposure to trade receivables and other financial assets. The maximum exposure to credit risk is equal to the carrying value of the financial assets. The objective of managing counter party credit risk is to prevent losses in financial assets. The Company assesses the credit quality of the counterparties, taking into account their financial position, past experience and other factors.

Trade and other receivables

The Company's exposure to credit risk is influenced mainly by the individual characteristics of each customer. Trade receivables and unbilled revenue are typically unsecured and are derived from revenue earned from customers primarily located in India. The Company has a process in place to monitor outstanding receivables on a monthly basis. In monitoring customer credit risk, customers are grouped according to their credit characteristics, including government entities, insurance companies, corporates, individual and others. The default in collection as a percentage to total receivable is low.

As at 31 March 2026

Age	Gross carrying amount	Weighted average loss rate	Allowance for expected credit loss
Less than 6 months	937.36	1.89%	17.74
6 months - 1 year	60.22	18.98%	11.43
1-2 years	51.39	39.70%	20.40
2-3 years	11.57	66.64%	7.71
More than 3 years	9.12	97.37%	8.88
	1,069.66		66.16

As at 31 March 2025

Age	Gross carrying amount	Weighted average loss rate	Allowance for expected credit loss
Less than 6 months	738.80	3.01%	22.21
6 months - 1 year	52.34	18.97%	9.93
1-2 years	35.06	47.92%	16.80
2-3 years	42.10	82.52%	34.74
More than 3 years	5.65	100.00%	5.65
	873.95		89.33

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.39 FINANCIAL RISK MANAGEMENT (continued)

Movement in allowance for impairment in respect of trade receivables is as follows:

Particulars	As at 31 March 2026	As at 31 March 2025
Balance at the beginning of the year	89.33	139.59
Provision for expected credit loss	48.77	7.31
Bad debts written-off out of opening	(71.94)	(8.27)
Provision for discounts and disallowances adjusted from gross receivables	-	(49.30)
Net remeasurement of provision	66.16	89.33

Cash and bank balances, loans and other financial assets

Cash and bank balances comprises of deposits with bank, interest accrued on deposits and other financial assets consists of security deposits,. These deposits are held with credit worthy banks. The credit worthiness of such banks are evaluated by the Management on an ongoing basis and is considered to be good with low credit risk. Further, the Company maintains exposure in money market liquid mutual funds and loans. The Company has set counter-parties limits based on multiple factors including financial position, credit rating, etc. Loans are assessed on lifetime expected credit loss model and no impairment loss is anticipated. The Company's maximum exposure to credit risk as at 31 March 2026 and 31 March 2025 is the carrying value of each class of financial assets.

The security deposit pertains to rent deposit given to lessors. The Company does not expect any losses from non-performance by these counter-parties.

Liquidity risk

Liquidity risk is the risk that the Company will not be able to meet its financial obligations as they become due. The Company manages its liquidity risk by ensuring, that it will always have sufficient liquidity to meet its liabilities when due. The Company's Management is responsible for liquidity, funding as well as settlement management.

The Company aims to maintain the level of its cash and cash equivalents and other highly marketable investments at an amount in excess of expected cash outflows on financial liabilities (other than trade payables) over the next six months. The Company also monitors the level of expected cash inflows on trade receivables and loans together with expected cash outflows on trade payables and other financial liabilities.

Following are the financial assets at the reporting date:

Particulars	As at 31 March 2026	As at 31 March 2025
Trade receivables (refer note 2.8)	1,003.50	784.62
Cash and cash equivalents (refer note 2.9 (a))	172.80	168.90
Bank balances other than cash and cash equivalents (refer note 2.9 (b))	0.05	0.20
Investments (refer note 2.2 and 2.7)	5,891.29	5,960.46
Other financial assets (refer note 2.3 (a) and 2.3 (b))	1,908.08	1,292.39
Loans (refer note 2.10 and 2.11)	709.52	329.99
Total	9,685.24	8,536.56

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.39 FINANCIAL RISK MANAGEMENT (continued)

Liquidity risk(continued)

Following are the remaining contractual maturities of financial liabilities at the reporting date. The amounts are gross and undiscounted.

As at 31 March 2026

Particulars	Carrying Amount	Within 1 year	1-5 Years	More than five years	Total amount
Trade payables	874.06	874.06	-	-	874.06
Other financial liabilities	240.78	240.78	-	-	240.78
Lease liabilities (undiscounted)	8,013.62	935.23	4,086.81	10,032.19	15,054.23
Total	9,128.46	2,050.07	4,086.81	10,032.19	16,169.07

As at 31 March 2025

Particulars	Carrying Amount	Within 1 year	1-5 Years	More than five years	Total amount
Trade payables	792.72	792.72	-	-	792.72
Other financial liabilities	169.66	169.66	-	-	169.66
Lease liabilities (undiscounted)	7,343.55	862.05	3,712.90	9,399.35	13,974.30
Total	8,305.93	1,824.43	3,712.90	9,399.35	14,936.68

Market risk

Market risk is the risk that changes in market prices such as foreign exchange rates and interest rates will effect the Company's income or the value of its holdings of financial instruments. The objective of market risk management is to manage and control market risk exposures within acceptable parameters, while optimising the return.

Interest risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interests rate. Interest rate risk primarily arises from the Company's investments in bank deposits and loans given.

The interest rate profile of the Company's interest bearing financial instruments is as follows:

Particulars	As at 31 March 2026	As at 31 March 2025
Fixed rate instruments (excluding interest accrued)		
Financial assets	1,772.55	1,183.69
Financial liabilities	8,013.62	7,343.55

Foreign currency risk

Foreign currency risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in foreign exchange rate. The majority of the Company's assets are located in India and Indian rupee being the functional currency for the Company. The Company's exposure to the risk of changes in foreign exchange rates relates primarily to operating activities.

The Company has advances from and payables to employees denominated in USD and GBP and is therefore exposed to foreign exchange risk. These foreign currency monetary items are unhedged. Exchange differences arising on settlement or translation are recognised in the Statement of Profit and Loss.

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.39 FINANCIAL RISK MANAGEMENT (continued)

Exposure to currency risk

The summary quantitative data about the Company's gross exposure to currency risk is as follows:

Particulars	Currency	As at 31 March 2026	
		Amount in foreign currency (in whole no's)	Amount in INR
Employee payables	USD	873	0.08
Advance to employees	USD	16,531	1.47
Trade payables	USD	33,230	3.02

Particulars	Currency	As at 31 March 2025	
		Amount in foreign currency (in whole no's)	Amount in INR
Employee payables	USD	304	0.03
Advance to employees	USD	26,195	2.26
Advance to employees	GBP	5,562	0.59

Sensitivity analysis:

A reasonably possible strengthening / (weakening) of the INR, against USD and GBP would have affected the measurement of financial instruments denominated in foreign currency and affected equity and profit or loss by the amounts shown below. This analysis assumes that all other variables, in particular interest rates, remain constant and ignores any impact of forecasts sales and purchases.

	Profit before tax		Equity, net of tax	
	Strengthening	Weakening	Strengthening	Weakening
31 March 2026				
USD (5% movement)	(0.22)	(0.08)	(0.17)	(0.06)
31 March 2025				
USD (5% movement)	(0.11)	0.11	(0.08)	0.08
GBP (5% movement)	(0.03)	0.03	(0.02)	0.02

Except for these financial liabilities, it is not expected that cash flows included in the maturity analysis could occur significantly earlier, or at significantly different amounts.

2.40 CAPITAL MANAGEMENT

The Company's policy is to maintain a stable capital base so as to maintain investor, creditor and market confidence and to sustain future development of the business. The Management monitors the return on capital, as well as the level of dividends to equity shareholders. The Company aims to manage its capital efficiently so as to safeguard its ability to continue as a going concern and to optimise returns to all its shareholders. For the purpose of the Company's capital management, capital includes issued capital and all other equity reserves.

The Board of Directors seeks to maintain a balance between the higher returns that might be possible with higher levels of borrowing and the advantages and security afforded by a sound capital position.

The Company's adjusted debt to equity ratio is as follows:

Particulars	As at 31 March 2026	As at 31 March 2025
Lease liabilities	8,013.62	7,343.55
Less: Cash and cash equivalents	(172.80)	(168.90)
Net debt	7,840.82	7,174.65
Total equity	16,890.57	14,885.44
Gearing ratio	0.46	0.48

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2.41 FINANCIAL INSTRUMENTS

The fair values of financial assets and financial liabilities, together with the carrying amounts in the Balance sheet are as follows:
As at 31 March 2026

Particulars	Note	Carrying values measured at					Quoted prices in active markets (Level 1)	Significant observable inputs (Level 2)	Significant unobservable inputs (Level 3)
		Fair value through profit or loss account	Fair value through other comprehensive income	Other financial assets – amortised cost	Other financial liabilities – amortised cost	Total carrying amount			
Financial assets measured at fair value									
Investments in equity instruments *	2.2	-	0.03	-	-	0.03	-	-	0.03
Investments in mutual funds	2.7	3,714.30	-	-	-	3,714.30	3,714.30	-	-
		3,714.30	0.03	-	-	3,714.33	3,714.30	-	0.03
Financial assets at amortised cost									
Trade receivables	2.8	-	-	1,003.50	-	1,003.50	-	-	-
Cash and cash equivalents	2.9 (a)	-	-	172.80	-	172.80	-	-	-
Bank balances other than cash and cash equivalents	2.9 (b)	-	-	0.05	-	0.05	-	-	-
Loans	2.10 and 2.11	-	-	709.52	-	709.52	-	-	-
Other financial assets	2.3(a) and 2.3(b)	-	-	1,908.08	-	1,908.08	-	-	-
		-	-	3,793.95	-	3,793.95	-	-	-
Financial liabilities at amortised cost									
Trade payables	2.16	-	-	-	874.06	874.06	-	-	-
Other financial liabilities	2.17	-	-	-	240.78	240.78	-	-	-
		-	-	-	1,114.84	1,114.84	-	-	-

* Fair value information relating to investment in equity instruments are not presented as these are not material to the standalone financial statements.

Notes to the Standalone Financial Statements

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.41 FINANCIAL INSTRUMENTS (continued)

The fair values of financial assets and financial liabilities, together with the carrying amounts in the Balance sheet are as follows:
As at 31 March 2025

Particulars	Note	Carrying values measured at				Quoted prices in active markets (Level 1)	Significant observable inputs (Level 2)	Significant unobservable inputs (Level 3)
		Fair value through profit or loss account	Fair value through other comprehensive income	Other financial assets – amortised cost	Other financial liabilities – amortised cost			
Financial assets measured at fair value								
Investments in equity instruments *	2.2	-	0.03	-	-	0.03	-	0.03
Investments in mutual funds	2.7	5,495.01	-	-	-	5,495.01	-	-
		5,495.01	0.03	-	-	5,495.04	-	0.03
Financial assets at amortised cost								
Trade receivables	2.8	-	-	784.62	-	784.62	-	-
Cash and cash equivalents	2.9 (a)	-	-	168.90	-	168.90	-	-
Bank balances other than cash and cash equivalents	2.9 (b)	-	-	0.20	-	0.20	-	-
Loans	2.10 and 2.11	-	-	329.99	-	329.99	-	-
Other financial assets	2.3(a) and 2.3(b)	-	-	1,292.38	-	1,292.38	-	-
		-	-	2,576.09	-	2,576.09	-	-
Financial liabilities at amortised cost								
Trade payables	2.16	-	-	-	792.72	792.72	-	-
Other financial liabilities	2.17	-	-	-	169.66	169.66	-	-
		-	-	-	962.38	962.38	-	-

* Fair value information relating to investment in equity instruments are not presented as these are not material to the standalone financial statements.

Note: The Company has not disclosed fair values of financial assets and liabilities such as investments, trade receivables, loans, cash and cash equivalents, bank balances other than cash and cash equivalents, other financial assets, trade payables, lease liabilities and other financial liabilities since their carrying amounts are reasonable approximates of fair values.

Fair value hierarchy

Level 1: Includes financial instruments measured using quoted prices. The fair value of all mutual funds which is valued using the closing Net Asset Value (NAV) as at the reporting year.

Level 2: The fair value of financial instruments not actively traded in an active market is determined using valuation techniques which maximize the use of observable market data and rely as little as possible on entity specific estimates. If the significant inputs required to fair value an instrument are observable, the instrument is included in Level 2.

Level 3: If one or more of the significant inputs is not based on observable market data, the instrument is included in Level 3.

There have been no transfers between Level 1, Level 2 and Level 3 for the year ended 31 March 2026 and 31 March 2025.

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for the year ended 31 March 2026

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2.42 REVENUE FROM CONTRACTS WITH CUSTOMERS

Disaggregated revenue information

Set out below is the disaggregation of the Company's revenue from contracts with customers:

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Income from medical and healthcare services		
Revenue from hospital services	13,160.22	12,554.04
Revenue from pharmacy sales	1,938.05	1,585.83
Revenue from medical service fee	242.86	264.93
Total revenue from contracts with customers	15,341.13	14,404.80

Location of revenue recognition

All the business operations of the Company are in India.

No single customer represents 10% or more of the Company's total revenue during the year ended 31 March 2026 and 31 March 2025.

Reconciliation of revenue recognised with the contracted price is as follows:

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Contracted price	15,403.65	14,488.40
Reduction towards variable consideration components*		
- Discounts	(56.87)	(56.97)
- Disallowances	(5.65)	(26.63)
Revenue from contracts with customers	15,341.13	14,404.80

*Variable consideration components include discounts and disallowances on the contract price.

Contract balances

Particulars	As at 31 March 2026	As at 31 March 2025
Trade receivables		
- to related parties	28.51	37.11
- to other than related parties	944.97	770.16
Contract assets (unbilled revenue)	96.18	66.68
Contract liabilities (advance from patients)	43.53	38.23

Movement in contract liabilities during the year:

Particulars	As at 31 March 2026	As at 31 March 2025
Balance at the beginning of the year	38.23	33.72
Less: Revenue recognised from above	(38.23)	(33.72)
Add: Addition during the year	43.53	38.23
Balance at the end of the year	43.53	38.23

Performance Obligation

The revenue from rendering medical & healthcare services and pharmaceutical products satisfies 'at a point in time' recognition criteria as prescribed by Ind AS 115.

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.43 NEW LABOUR CODES

Effective 21 November 2025, the Government of India consolidated multiple existing labour laws into a unified framework comprising four Labour Codes, collectively referred to as the 'New Labour Codes'. The Ministry of Labour & Employment notified Central Rules on 08 May 2026, however State Rules are yet to be notified. The Company has considered restructured compensation of its employees with effect from 01 April 2026 and assessed the impact of changes consistent with the New Labour Codes, rules and FAQs. Under Ind AS 19, changes to employee benefit plans arising from legislative amendments constitute a plan amendment and require recognition of the resulting past service cost immediately in the statement of profit and loss. The implementation of New Labour Codes has resulted in an increase of ₹15.39 million in the provision for defined benefit obligation, which has been recognised as an exceptional item in the statement of profit and loss in the current reporting period.

2.44 RATIOS AS PER THE SCHEDULE III REQUIREMENTS

a) Current ratio = Current assets divided by Current liabilities

Particulars	31 March 2026	31 March 2025
Current assets	5,966.20	7,855.02
Current liabilities	1,656.02	1,415.46
Ratio	3.60	5.55
% Change from previous year	(35.14%)	

Reason for change more than 25%:

This ratio has decreased from 5.55 in March 2025 to 3.60 in March 2026 mainly due to decrease in current investments and redemption of fixed deposits during the year.

b) Debt equity ratio = Total debt divided by Shareholder's equity where total debt refers to sum of current & non current borrowings

Particulars	31 March 2026	31 March 2025
Total debt (including lease liabilities)	8,013.62	7,343.55
Shareholder's equity	16,890.57	14,885.44
Ratio	0.47	0.49
% Change from previous year	(4.08%)	

Reason for change more than 25%: Not applicable

c) Debt Service Coverage Ratio = Earnings available for debt service divided by interest and lease payments + principal repayments

Particulars	31 March 2026	31 March 2025
Net profit after taxes	2,500.16	2,375.85
Add: Non cash operating expenses and finance cost	2,142.48	2,007.22
- Allowance/(reversal) for expected credit loss	48.77	7.31
- Employee share based payment expenses	29.12	(12.71)
- Depreciation and amortisation	1,362.61	1,317.48
- Finance cost	713.96	695.94
- (Gain) on sale of property, plant and equipment	(11.98)	(0.80)
Earnings available for debt service	4,642.64	4,383.07
Payment of lease liabilities	873.14	825.34
Total principal repayments	873.14	825.34
Ratio	5.32	5.31
% Change from previous year	0.19%	

Reason for change more than 25%: Not applicable

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.44 RATIOS AS PER THE SCHEDULE III REQUIREMENTS (continued)

d) Return on Equity ratio / Return on investment ratio = Net profit after taxes by average shareholder's equity

Particulars	31 March 2026	31 March 2025
Net profit after taxes	2,500.16	2,375.85
Earning available to equity shareholders	2,500.16	2,375.85
Average shareholder's equity	15,888.01	13,868.98
Ratio	15.74%	17.13%
% Change from previous year	(8.11%)	

Reason for change more than 25%: Not applicable

e) Inventory turnover ratio = Cost of goods sold divided by average inventory

Particulars	31 March 2026	31 March 2025
Cost of materials consumed	1,996.69	1,898.69
Average inventory	263.24	226.64
Inventory turnover ratio	7.59	8.38
% Change from previous year	(9.43%)	

Reason for change more than 25%: Not applicable

f) Trade receivables turnover ratio = Credit sales divided by Average trade receivables

Particulars	31 March 2026	31 March 2025
Credit sales	5,521.64	5,350.03
Average Trade Receivables	894.06	750.11
Ratio	6.18	7.13
% Change from previous year	(13.32%)	

Reason for change more than 25%: Not applicable

g) Trade payables turnover ratio = Purchases divided by Average trade payables

Particulars	31 March 2026	31 March 2025
Purchases	2,068.33	1,900.25
Average trade payables	833.39	811.09
Ratio	2.48	2.34
% Change from previous year	5.98%	

Reason for change more than 25%: Not applicable

h) Net capital turnover ratio = Revenue from operations divided by Working capital where Working capital= Current assets - Current liabilities

Particulars	31 March 2026	31 March 2025
Revenue from operations	15,456.60	14,545.07
Working capital	4,310.18	6,439.56
Ratio	3.59	2.26
% Change from previous year	58.85%	

Reason for change more than 25%:

This ratio has increased from 2.26 in March 2025 to 3.59 in March 2026 mainly due to decrease in current investments and redemption of fixed deposits during the year.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.44 RATIOS AS PER THE SCHEDULE III REQUIREMENTS (continued)

i) Net profit ratio = Net profit after taxes divided by Revenue from operations

Particulars	31 March 2026	31 March 2025
Net profit after taxes	2,500.16	2,375.85
Revenue from operations	15,456.60	14,545.07
Ratio	16.18%	16.33%
% Change from previous year	(0.92%)	

Reason for change more than 25%: Not applicable

j) Return on Capital employed (pre cash)=Earnings before interest and taxes (EBIT) divided by Capital employed (pre cash)

Particulars	31 March 2026	31 March 2025
Profit before taxes (A)	3,341.15	3,220.83
Finance costs (B)	713.96	695.94
EBIT (C) = (A)+(B)	4,055.11	3,916.77
Capital employed (Pre Cash) (H)=(D)-(E)-(F)+(G)	17,123.22	15,062.04
Total assets (D)	26,483.88	23,542.19
Total liabilities (E)	9,593.31	8,656.75
Intangible assets and Intangible assets under development (F)	128.89	109.34
Deferred tax assets (net) (G)	361.54	285.94
Ratio (C)/(H)	23.68%	26.00%
% Change from previous year	(8.92%)	

Reason for change more than 25%: Not applicable

k) Return on Investment = Income generated from invested funds divided by Average Invested Funds

Particulars	31 March 2026	31 March 2025
Gain on redemption of mutual funds (net)	246.08	78.13
Net gain on financial assets measured at fair value through profit or loss	41.48	269.80
Interest income on bank deposits	77.43	102.06
Income generated from invested funds (A)	364.99	449.99
Average Invested Funds (B)	7,174.52	6,061.91
Ratio (A)/(B)	5.09%	7.42%
% Change from previous year	(31.47%)	

Reason for change more than 25%:

This ratio has decreased from 7.42% in March 2025 to 5.09% in March 2026 mainly due to redemption of mutual funds.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.45 SHARE BASED PAYMENT ARRANGEMENT

(a) Stock Unit Plan 2023

Pursuant to the resolutions passed by the Board of Directors on 18 March 2023 and by the Shareholders on 06 May 2023, the Company approved 'The Rainbow Children's Medicare Limited - Employee Stock Unit Plan 2023 ("Stock Unit Plan 2023") in compliance with the SEBI (Share Based Employee Benefits and Sweat Equity) Regulations, 2021 ("SEBI SBEB SE Regulations"). The Stock Unit Plan 2023 is for issue of employee stock units to eligible employees, which may result in an issuance of a maximum number of 400,000 Equity Shares. Upon exercise and payment of the exercise price, an unit holder will be entitled to be allotted one Equity Share per employee stock unit.

Upon recommendation of the Nomination and Remuneration Committee, the Board of Directors of the Company in their meeting held on 14 May 2023 and 07 August 2023, granted 275,000 and 37,414 Stock Units respectively under the Stock Unit Plan 2023 to its eligible employees which shall be exercisable into 312,414 equity shares having face value of ₹10 each fully paid-up. The exercise price per stock unit shall be the face value of equity shares of the Company i.e., ₹10 each. The vested Stock Units shall be exercisable within a period of three months from the date of each vesting. The Stock Units shall vest after the minimum vesting period of one year and not later than the maximum period of five years from the date of grant. The plan is in terms of SEBI SBEB SE Regulations.

Movement in the stock units under the Plan	No. of stock units	
	As at 31 March 2026	As at 31 March 2025
Stock units outstanding at the beginning of the year	29,931	312,414
Less : Stock units exercised during the year *	7,483	49,986
Less : Stock units lapsed during the year	-	12,497
Less : Stock units cancelled during the year #	-	220,000
Stock units exercisable at the end of the year	22,448	29,931

*During the previous year, upon recommendation of the Nomination and Remuneration Committee, the Board of Directors of the Company in their meeting held on 19 May 2024, vested 44,000 stock units under Stock Unit Plan 2023 at an exercise price of ₹ 10 per share to the Chief Operating Officer of the Company. Each stock unit represents one equity share of ₹ 10 each, fully paid-up. On 17 July 2024, the Nomination and Remuneration Committee through circular resolution allotted 44,000 equity shares of ₹ 10 each to the Chief Operating Officer of the Company.

During the previous year, upon recommendation of the Nomination and Remuneration Committee, the Board of Directors of the Company in their meeting held on 13 August 2024, vested 5,986 stock units under Stock Unit Plan 2023 at an exercise price of ₹ 10 per share to the Chief Financial Officer of the Company. Each stock unit represents one equity share of ₹ 10 each, fully paid-up. On 22 August 2024, the Nomination and Remuneration Committee through circular resolution allotted 5,986 equity shares of ₹ 10 each to the Chief Financial Officer of the Company.

During the year, upon recommendation of the Nomination and Remuneration Committee, the Board of Directors of the Company in their meeting held on 12 August 2025, vested 7,483 stock units under Stock Unit Plan 2023 at an exercise price of ₹ 10 per share to the Chief Financial Officer of the Company. Each stock unit represents one equity share of ₹ 10 each, fully paid-up. On 12 August 2025, the Nomination and Remuneration Committee through circular resolution allotted 7,483 equity shares of ₹ 10 each to the Chief Financial Officer of the Company.

#On 27 October 2024, the Company has accepted the resignation of an eligible employee. Accordingly, the Company has cancelled 220,000 stock units.

The weighted average share price at the date of exercise for options was ₹ 1,537.60 per share (31 March 2025 : ₹ 1,188.65 per share) and weighted average remaining contractual life for the share options outstanding as at 31 March 2026 was 2.41 years (31 March 2025: 3.41 years)

Fair value measurement

The fair value at grant date is determined using the Black Scholes valuation option-pricing model which takes into account the exercise price, the term of the option, the share price at grant date and expected price volatility of the underlying share, the expected dividend yield and the risk free interest rate for the term of the option.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.45 SHARE BASED PAYMENT ARRANGEMENT (continued)

The key inputs used in Black-Scholes model for calculating fair value of options under the plan as on the date of grant are as follows:

	Chief Operating Officer	Chief Financial Officer
No. of stock units granted	275,000	37,414
Date of grant	14 May 2023	07 August 2023
Vesting period (years)	5 years	5 years
Expected life of the stock units granted (vesting & exercise period in years)	5.14 years	4.65 years
Stock price on the date of valuation (in ₹)	849.65	1,080.20
Fair value at grant date (in ₹)	835.18	1,064.17
Expected volatility	40.25%	35.00%
Dividend yield	0.24%	0.27%
Risk free rate	6.84%	7.24%

For details on the employee benefits expense, refer note 2.23

(b) ESOP Scheme 2025 :

Pursuant to the resolutions passed by the Board of Directors on 09 February 2025 and by the Shareholders on 02 April 2025, the Company approved 'The Rainbow Children's Medicare Limited - Employee Stock Option Scheme 2025 ("ESOP Scheme 2025") in compliance with the SEBI (Share Based Employee Benefits and Sweat Equity) Regulations, 2021 ("SEBI SBEB SE Regulations"). The ESOP Scheme 2025 is for issue of employee stock options to eligible employees, which may result in an issuance of a maximum number of 1,015,000 Equity Shares. Upon exercise and payment of the exercise price, an option holder will be entitled to be allotted one Equity Share per employee stock option. The exercise price per option shall be determined by the Nomination and Remuneration Committee subject to a maximum discount of up to 20% from the market price of shares as on the date of Grant.

The Nomination and Remuneration Committee ("NRC") of the Company in its meeting held on 26 July 2025, 13 November 2025 and 28 January 2026 granted 140,810, 5,660 and 100,000 Stock options, respectively under the ESOP Scheme 2025 to its eligible employees which shall be exercisable into 246,470 equity shares, respectively, having face value of ₹10 each fully paid-up. The exercise price per stock option shall be determined at a discount of not more than 20% on the latest available closing price of the Company's equity shares on the National Stock Exchange of India Limited, being the stock exchange with the highest trading volume, as on 25 July 2025, 12 November 2025 and 27 January 2026, respectively, i.e., the trading day immediately preceding the date on which the grant of options was approved by the Nomination and Remuneration Committee. The stock options shall vest after the minimum vesting period of 1 year and not later than the maximum period of 10 years from the date of grant. The vested Stock options shall be exercisable within a period of maximum of 2 years from the date of each vesting.

Pursuant to the resolution passed by the Board of Directors on 09 February 2025, the Rainbow Employees Welfare Trust (the "ESOP Trust") was formed to support the ESOP Scheme 2025 by acquiring through secondary market acquisitions, equity shares which are used for issuance to eligible employees upon exercise of stock options thereunder.

The Company has acquired 180,000 shares from the secondary market for an aggregate consideration of ₹ 212.96 million as at 31 March 2026. These shares are disclosed as treasury shares in other equity

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.45 SHARE BASED PAYMENT ARRANGEMENT (continued)

Movement in the stock units under the Plan	As at 31 March 2026	As at 31 March 2025
Stock units outstanding at the beginning of the year		
Stock units granted during the year	246,470	-
Add : Stock units exercised during the year	-	-
Less : Stock units lapsed during the year	-	-
Less : Stock units cancelled during the year	32,980	-
Stock units exercisable at the end of the year	213,490	-

Fair value measurement

The fair value at grant date is determined using the Black Scholes valuation option-pricing model which takes into account the exercise price, the term of the option, the share price at grant date and expected price volatility of the underlying share, the expected dividend yield and the risk free interest rate for the term of the option. The key inputs used in Black-Scholes model for calculating fair value of options under the plan as on the date of grant are as follows:

Movement in the stock units under the Plan	Grant date 26 July 2025	Grant date 13 November 2025	Grant date 28 January 2026
No. of stock units granted	140,810	5,660	100,000
Vesting period (years)	5	5	5
Expected life of the stock units granted (vesting & exercise period in years)	1 st Year - 5%, 2 nd Year - 10%, 3 rd Year -20%, 4 th Year -25%, 5 th Year -40%		1 st Year - 20%, 2 nd Year - 20%, 3 rd Year -20%, 4 th Year -20%, 5 th Year -20%
Stock price on the date of valuation (in ₹)	1,556.40	1,359.10	1,188.50
Fair value at grant date (in ₹)	757.51	587.49	493.62
Expected volatility	36.78%	35.15%	34.37%
Dividend yield	0.19%	0.22%	0.25%
Risk free rate	5.89%	6.04%	6.19%

For details on the employee benefits expense, refer note 2.23

The weighted average share price at the date of exercise for options was ₹ 1,537.60 per share (31 March 2025: ₹ 1,188.65 per share) and weighted average remaining contractual life for the share options outstanding as at 31 March 2026 was 2.41 years (31 March 2025: 3.41 years)

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.46 OTHER STATUTORY INFORMATION

- i. The Company do not have any Benami property and neither any proceedings have been initiated or is pending against the Company for holding any Benami property.
- ii. The Company do not have any transactions with companies struck off.
- iii. The Company do not have any charges or satisfaction which is yet to be registered with ROC beyond the statutory year.
- iv. The Company has not been declared a wilful defaulter by any bank or financial institution or any other lender during the current year.
- v. The Company have not advanced or loaned or invested funds to any other person(s) or entity(ies), including foreign entities (Intermediaries) with the understanding that the Intermediary shall:
 - a. directly or indirectly lend or invest in other persons or entities identified in any manner whatsoever by or on behalf of the company (Ultimate Beneficiaries) or
 - b. provide any guarantee, security or the like to or on behalf of the Ultimate Beneficiaries
- vi. The Company has not received any fund from any person(s) or entity(ies), including foreign entities (Funding Party) with the understanding (whether recorded in writing or otherwise) that the Company shall:
 - a. directly or indirectly lend or invest in other persons or entities identified in any manner whatsoever by or on behalf of the Funding Party (Ultimate Beneficiaries) or
 - b. provide any guarantee, security or the like on behalf of the Ultimate Beneficiaries.
- vii. The Company has not traded or invested in Crypto currency or Virtual Currency during the financial year.
- viii. The Company does not have any such transaction which is not recorded in the books of accounts that has been surrendered or disclosed as income during the year in the tax assessments under the Income Tax Act, 1961 (such as, search or survey or any other relevant provisions of the Income Tax Act, 1961.
- ix. The Company has complied with the number of layers prescribed under the Companies Act, 2013.
- x. The Company has not revalued its Property, plant and equipment (including right of use of assets) or intangible assets or both during the current or previous year.
- xi. The Company did not have any long-term contracts including derivative contracts for which there were any material foreseeable losses.
- xii. There were no amounts which were required to be transferred to Investor Education Protection Fund by the Company.

Notes to the Standalone Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.47 The Company has used accounting software for maintaining its books of account (SAP) and software for maintenance of hospital related revenue and consumption records (Arcus Air) which has a feature of recording audit trail (edit log) facility and the same has operated throughout the year for all relevant transactions recorded in the softwares, except that audit trail feature is not enabled at the database level. Further no instance of audit trail feature being tampered with was noted in respect of the softwares where the audit trail has been enabled. Additionally, the audit trail of prior years has been preserved as per the statutory requirements for record retention to the extent it was enabled and recorded in the respective years.

2.48 SUBSEQUENT EVENTS

There are no significant adjusting events that occurred subsequent to the balance sheet date.

As per our report of even date attached.

for **S.R. Batliboi & Associates LLP**
Chartered Accountants
ICAI Firm Registration Number: 101049W/E300004

per Atin Bhargava
Partner
Membership Number.: 504777

Place: Hyderabad
Date: 23 May 2026

for and on behalf of the Board of Directors of
Rainbow Children's Medicare Limited
CIN: L85110TG1998PLC029914

Dr. Ramesh Kancharla
Chairman and Managing Director
DIN: 00212270

Vikas Maheshwari
Chief Financial Officer

Place: Hyderabad
Date: 23 May 2026

Dr. Dinesh Kumar Chirla
Director
DIN: 01395841

Shreya Mitra
Company Secretary
Membership Number: A54901

Place: Hyderabad
Date: 23 May 2026

Independent auditor's report

To the Members of Rainbow Children's Medicare Limited

Report on the Audit of the Consolidated Financial Statements

OPINION

We have audited the consolidated financial statements of Rainbow Children's Medicare Limited (hereinafter referred to as "the Holding Company"), its subsidiaries (the Holding Company, its subsidiaries and other consolidating entity together referred to as "the Group") comprising of the consolidated Balance sheet as at March 31, 2026, the consolidated Statement of Profit and Loss, including other comprehensive income, the consolidated Cash Flow Statement and the consolidated Statement of Changes in Equity for the year then ended, and notes to the consolidated financial statements, including a summary of material accounting policies and other explanatory information (hereinafter referred to as "the consolidated financial statements").

In our opinion and to the best of our information and according to the explanations given to us and based on the consideration of reports of other auditors on separate financial statements and on the other financial information of the subsidiaries, the aforesaid consolidated financial statements give the information required by the Companies Act, 2013, as amended ("the Act") in the manner so required and give a true and fair view in conformity with the accounting principles generally accepted in India, of the consolidated state of affairs of the Group as at March 31, 2026, their consolidated profit including other comprehensive income, their consolidated cash flows and the consolidated statement of changes in equity for the year ended on that date.

BASIS FOR OPINION

We conducted our audit of the consolidated financial statements in accordance with the Standards on Auditing (SAs), as specified under section 143(10) of the Act. Our responsibilities under those Standards are further described in the 'Auditor's Responsibilities for the Audit

of the Consolidated Financial Statements' section of our report. We are independent of the Group, in accordance with the 'Code of Ethics' issued by the Institute of Chartered Accountants of India together with the ethical requirements that are relevant to our audit of the financial statements under the provisions of the Act and the Rules thereunder, and we have fulfilled our other ethical responsibilities in accordance with these requirements and the Code of Ethics. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion on the consolidated financial statements.

KEY AUDIT MATTERS

Key audit matters are those matters that, in our professional judgment, were of most significance in our audit of the consolidated financial statements for the financial year ended March 31, 2026. These matters were addressed in the context of our audit of the consolidated financial statements as a whole, and in forming our opinion thereon, and we do not provide a separate opinion on these matters. For each matter below, our description of how our audit addressed the matter is provided in that context.

We have determined the matters described below to be the key audit matters to be communicated in our report. We have fulfilled the responsibilities described in the Auditor's responsibilities for the audit of the consolidated financial statements section of our report, including in relation to these matters. Accordingly, our audit included the performance of procedures designed to respond to our assessment of the risks of material misstatement of the consolidated financial statements. The results of audit procedures performed by us and by other auditors of components not audited by us, as reported by them in their audit reports furnished to us by the management, including those procedures performed to address the matters below, provide the basis for our audit opinion on the accompanying consolidated financial statements.

Key audit matters	How our audit addressed the key audit matter
Impairment of loan receivable (as described in Note 2.10 of the consolidated financial statements)	
In the earlier years, the Group has given an unsecured loan to an external party (Madhukar Rainbow Children's Hospital). As at March 31, 2026 the loan outstanding balance is Rs 315.02 million (including interest accrued of Rs 111.54 million).	In view of the significance of the matter, we performed the following procedures:
Due to the insufficient cash profits in the aforementioned party for the repayment of the loan, the Group is exposed to risk in respect of the recoverability of the loan.	<ol style="list-style-type: none"> 1. Evaluated the design and implementation and tested operating effectiveness of key internal controls over the Group's impairment assessment process of the loan receivable. 2. Traced interest paid during the year to bank statements and assessed the compliance with the stipulated terms of the loan agreement.

Key audit matters	How our audit addressed the key audit matter
<p>The Group carries out assessment of recoverability of these loans and impairment at every period end. This assessment uses several key assumptions including estimates of future cash flows, discount rate and growth rate.</p> <p>We have identified impairment of loan as a key audit matter due to:</p> <ul style="list-style-type: none"> the significance of the carrying value of the loan; assessment of impairment involves Group's significant judgement and estimates. 	<ol style="list-style-type: none"> Obtained independent confirmation of balances as at March 31, 2026 from the external party . Assessed the net worth of the external party on the basis of latest available financial statements. Obtained the business projections of the external party from Management and performed the following procedures: <ul style="list-style-type: none"> Compared the actual revenues and cash flows generated by the external party during the year with the budgets and estimates of the previous year. Evaluated the reasonability of future cash flow projections prepared by the Management with respect to the key assumptions which include discount rate and growth rate. Involved our internal experts to assess the methodology and key assumptions used for impairment assessment by management. Verified the classification and disclosures of the loans in accordance with Schedule III of the Act and Ind-AS.
<p>Accounting for business combination (as described in Note 2.49 of the consolidated financial statements)</p> <p>During the year ended March 31, 2026, the Group completed acquisition of Prashanthi Medicare Private Limited and Pratiksha Women & Child Care Hospital Private Limited with a purchase consideration of Rs 1,710 million and 326 million respectively.</p> <p>The Group accounted for the above acquisitions under the acquisition method of accounting for business combinations in accordance with Ind AS 103 Business Combinations. The assets and liabilities acquired were recognized at fair value at the date of acquisition. Goodwill was recognized as the remaining portion of the purchase price that was not allocated to the acquired assets and liabilities as part of the purchase price allocation.</p> <p>Identification and valuation of assets and liabilities as at the respective acquisition date has been performed by the management as part of the Purchase Price Allocation (PPA) in consultation with external fair value specialists (management expert).</p> <p>The accounting for the above business combinations have been considered to be key audit matter for current year audit as same involved significant judgments and assumptions as part of estimation and allocation of fair value of asset and liabilities recognized as part of the acquisition of respective entities.</p>	<p>With respect to the accounting for these business combinations, we:</p> <ul style="list-style-type: none"> Obtained an understanding of these transactions including management process and tested the Design, Implementation and Operating effectiveness of controls over Purchase Price Allocation (PPA) performed by the management in consultation with external fair valuation specialist (Management expert) and internal controls relating to accounting for the business combination. We obtained the Shareholders Agreement ("SHA"), traced the value of the consideration transferred and understood the key terms and conditions for each acquisition Assessed the competence, capabilities and objectivity of the management expert engaged by the Company and obtained understanding of the work of the management experts by reviewing the valuation reports. Read minutes of board meetings approving the acquisition. With the assistance of our fair value specialist, evaluated the appropriateness of the valuation methodology and reasonableness of the key valuation assumptions used by management and tested mathematical accuracy of the calculations used in the PPA. Evaluated the appropriateness of the accounting and disclosures in the financial statements in compliance with the Indian accounting standards.

OTHER INFORMATION

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

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

In connection with our audit of the consolidated financial statements, our responsibility is to read the other information and, in doing so, consider whether such other information is materially inconsistent with the consolidated financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

RESPONSIBILITIES OF MANAGEMENT FOR THE CONSOLIDATED FINANCIAL STATEMENTS

The Holding Company's Board of Directors is responsible for the preparation and presentation of these consolidated financial statements in terms of the requirements of the Act that give a true and fair view of the consolidated financial position, consolidated financial performance including other comprehensive income, consolidated cash flows and consolidated statement of changes in equity of the Group in accordance with the accounting principles generally accepted in India, including the Indian Accounting Standards (Ind AS) specified under section 133 of the Act read with the Companies (Indian Accounting Standards) Rules, 2015, as amended. The respective Board of Directors of the companies included in the Group are responsible for maintenance of adequate accounting records in accordance with the provisions of the Act for safeguarding of the assets of their respective company and for preventing and detecting frauds and other irregularities; selection and application of appropriate accounting policies; making judgments and estimates that are reasonable and prudent; and the design, implementation and maintenance of adequate internal financial controls, that were operating effectively for ensuring the accuracy and completeness of the accounting records, relevant to the preparation and presentation of the consolidated financial statements that give a true and fair view and are free from material misstatement, whether due to fraud or error, which have been used for the purpose of preparation of the consolidated financial statements by the Directors of the Holding Company, as aforesaid.

In preparing the consolidated financial statements, the respective Board of Directors of the companies included in the Group are responsible for assessing the ability of

their respective companies to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Group or to cease operations, or has no realistic alternative but to do so.

Those respective Board of Directors of the companies included in the Group are also responsible for overseeing the financial reporting process of their respective companies.

AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE CONSOLIDATED FINANCIAL STATEMENTS

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

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

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

are required to draw attention in our auditor's report to the related disclosures in the consolidated financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Group to cease to continue as a going concern.

- Evaluate the overall presentation, structure and content of the consolidated financial statements, including the disclosures, and whether the consolidated financial statements represent the underlying transactions and events in a manner that achieves fair presentation.
- Obtain sufficient appropriate audit evidence regarding the financial information of the entities or business activities within the Group of which we are the independent auditors and whose financial information we have audited, to express an opinion on the consolidated financial statements. We are responsible for the direction, supervision and performance of the audit of the financial statements of such entities included in the consolidated financial statements of which we are the independent auditors. For the other entities included in the consolidated financial statements, which have been audited by other auditors, such other auditors remain responsible for the direction, supervision and performance of the audits carried out by them. We remain solely responsible for our audit opinion.

We communicate with those charged with governance of the Holding Company and such other entities included in the consolidated financial statements of which we are the independent auditors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

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

From the matters communicated with those charged with governance, we determine those matters that were of most significance in the audit of the consolidated financial statements for the financial year ended March 31, 2026 and are therefore the key audit matters. We describe these matters in our auditor's report unless law or regulation precludes public disclosure about the matter or when, in extremely rare circumstances, we determine that a matter should not be communicated in our report because the adverse consequences of doing so would reasonably be expected to outweigh the public interest benefits of such communication.

OTHER MATTERS

- (a) We did not audit the financial statements and other financial information, in respect of 6 subsidiaries, whose financial statements include total assets of Rs 936.79 million as at March 31, 2026, and total revenues of Rs 817.02 million and net cash inflows of Rs 25.67 million for the year ended on that date. These financial statement and other financial information have been audited by other auditors, which financial statements, other financial information and auditor's reports have been furnished to us by the management. Our opinion on the consolidated financial statements, in so far as it relates to the amounts and disclosures included in respect of these subsidiaries and our report in terms of sub-sections (3) of Section 143 of the Act, in so far as it relates to the aforesaid subsidiaries, is based solely on the reports of such other auditors.

Our opinion above on the consolidated financial statements, and our report on Other Legal and Regulatory Requirements below, is not modified in respect of the above matters with respect to our reliance on the work done and the reports of the other auditors and the financial statements and other financial information certified by the Management.

REPORT ON OTHER LEGAL AND REGULATORY REQUIREMENTS

1. As required by the Companies (Auditor's Report) Order, 2020 ("the Order"), issued by the Central Government of India in terms of sub-section (11) of section 143 of the Act, based on our audit and on the consideration of report of the other auditors on separate financial statements and the other financial information of the subsidiary companies, incorporated in India and to the extent applicable, as noted in the 'Other Matter' paragraph we give in the "Annexure 1" a statement on the matters specified in paragraph 3(xxi) of the Order.
2. As required by Section 143(3) of the Act, based on our audit and on the consideration of report of the other auditors on separate financial statements and the other financial information of subsidiaries, as noted in the 'other matter' paragraph we report, to the extent applicable, that:
 - (a) We/the other auditors whose report we have relied upon have sought and obtained all the information and explanations which to the best of our knowledge and belief were necessary for the purposes of our audit of the aforesaid consolidated financial statements;
 - (b) In our opinion, proper books of account as required by law relating to preparation of the aforesaid consolidation of the financial statements have been kept so far as it appears from our examination of those books and reports

- of the other auditors except that with respect to certain subsidiaries as disclosed in note 2.47 to the consolidated financial statements and for the matters stated in the paragraph 2(i)(vi) below on reporting under Rule 11(g);
- (c) The Consolidated Balance Sheet, the Consolidated Statement of Profit and Loss including the Statement of Other Comprehensive Income, the Consolidated Cash Flow Statement and Consolidated Statement of Changes in Equity dealt with by this Report are in agreement with the books of account maintained for the purpose of preparation of the consolidated financial statements;
- (d) In our opinion, the aforesaid consolidated financial statements comply with the Accounting Standards specified under Section 133 of the Act, read with Companies (Indian Accounting Standards) Rules, 2015, as amended;
- (e) On the basis of the written representations received from the directors of the Holding Company as on March 31, 2026 taken on record by the Board of Directors of the Holding Company and the reports of the statutory auditors who are appointed under Section 139 of the Act, of its subsidiary companies none of the directors of the Group's companies, incorporated in India, is disqualified as on March 31, 2026 from being appointed as a director in terms of Section 164 (2) of the Act;
- (f) The modification relating to the maintenance of accounts and other matters connected therewith are as stated in paragraph (b) above.
- (g) With respect to the adequacy of the internal financial controls with reference to consolidated financial statements of the Holding Company and its subsidiary companies, incorporated in India, and the operating effectiveness of such controls, refer to our separate Report in "Annexure 2" to this report;
- (h) In our opinion and based on the consideration of reports of other statutory auditors of the subsidiaries, the managerial remuneration for the year ended March 31, 2026 has been paid / provided by the Holding Company, its subsidiaries incorporated in India to their directors in accordance with the provisions of section 197 read with Schedule V to the Act;
- (i) With respect to the other matters to be included in the Auditor's Report in accordance with Rule 11 of the Companies (Audit and Auditors) Rules, 2014, as amended, in our opinion and to the best of our information and according to the explanations given to us and based on the consideration of the report of the other auditors on separate financial statements as also the other financial information of the subsidiaries, as noted in the 'Other matter' paragraph:
- i. The consolidated financial statements disclose the impact of pending litigations on its consolidated financial position of the Group in its consolidated financial statements – Refer Note 2.28 to the consolidated financial statements;
 - ii. The Group did not have any material foreseeable losses in long-term contracts including derivative contracts during the year ended March 31, 2026;
 - iii. There were no amounts which were required to be transferred to the Investor Education and Protection Fund by the Holding Company, its subsidiaries, incorporated in India during the year ended March 31, 2026.
 - iv.
 - a) The respective managements of the Holding Company and its subsidiaries which are companies incorporated in India whose financial statements have been audited under the Act have represented to us and the other auditors of such subsidiaries respectively that, to the best of its knowledge and belief, no funds have been advanced or loaned or invested (either from borrowed funds or share premium or any other sources or kind of funds) by the Holding Company or any of such subsidiaries to or in any other persons or entities, including foreign entities ("Intermediaries"), with the understanding, whether recorded in writing or otherwise, that the Intermediary shall, whether, directly or indirectly lend or invest in other persons or entities identified in any manner whatsoever by or on behalf of the respective Holding Company or any of such subsidiaries ("Ultimate Beneficiaries") or provide any guarantee, security or the like on behalf of the Ultimate Beneficiaries;
 - b) The respective managements of the Holding Company and its subsidiaries which are companies incorporated in India whose financial statements have been audited under the Act have represented to us and the other auditors of such subsidiaries respectively

- that, to the best of its knowledge and belief, no funds have been received by the respective Holding Company or any of such subsidiaries from any persons or entities, including foreign entities ("Funding Parties"), with the understanding, whether recorded in writing or otherwise, that the Holding Company or any of such subsidiaries shall, whether, directly or indirectly, lend or invest in other persons or entities identified in any manner whatsoever by or on behalf of the Funding Party ("Ultimate Beneficiaries") or provide any guarantee, security or the like on behalf of the Ultimate Beneficiaries; and
- c) Based on the audit procedures that have been considered reasonable and appropriate in the circumstances performed by us and that performed by the auditors of the subsidiaries, which are companies incorporated in India whose financial statements have been audited under the Act, nothing has come to our or other auditor's notice that has caused us or the other auditors to believe that the representations under sub-clause (a) and (b) contain any material mis-statement.
- v) The final dividend paid by the Holding Company during the year in respect of the same declared for the previous year is in accordance with section 123 of the Act to the extent it applies to payment of dividend.
- vi) Based on our examination which included test checks and that performed by the respective auditors of the subsidiaries which are companies incorporated in India whose financial statements have been audited under the Act, except for the instances discussed in note 2.48 to the consolidated financial statements, have used accounting software for maintaining its books of account (SAP) and software for maintenance of hospital related revenue and consumption records (Arcus Air) which has a feature of recording audit trail (edit log) facility and the same has operated throughout the year for all relevant transactions recorded in the software's except that, audit trail feature is not enabled for direct changes to data when using certain access rights, as described in note 2.48 to the consolidated financial statements. Further, during the course of our audit, we and respective auditors of the above referred subsidiaries did not come across any instance of audit trail feature being tampered with, in respect of the software's where the audit trail has been enabled. Additionally, the audit trail of prior years has been preserved by the Group as per the statutory requirements for record retention to the extent it was enabled and recorded in the respective years except for few subsidiaries as stated in note 2.48 to the consolidated financial statements.

As stated in note 2.13(a) to the consolidated financial statements, the Board of Directors of the Holding Company have proposed final dividend for the year which is subject to the approval of the members of the respective companies at the respective ensuing Annual General Meeting. The dividend declared is in accordance with section 123 of the Act to the extent it applies to declaration of dividend.

For S.R. Batliboi & Associates LLP

Chartered Accountants

ICAI Firm Registration Number: 101049W/E300004

per Atin Bhargava

Partner

Membership Number: 504777

UDIN: 26504777SQAJBQ9483

Place of Signature: Hyderabad

Date: May 23, 2026

Annexure ‘1’ referred to in paragraph under the heading “Report on other legal and regulatory requirements” of our report of even date on the consolidated financial statements of Rainbow Children’s Medicare Limited (“the Holding Company”)

In terms of the information and explanations sought by us and given by the Company and the books of account and records examined by us in the normal course of audit and to the best of our knowledge and belief, we state that:

(xxi) There are no qualifications or adverse remarks by the respective auditors in the Companies (Auditors Report) Order (CARO) reports of the companies included in the consolidated financial statements. Accordingly, the requirement to report on clause 3(xxi) of the Order is not applicable to the Holding Company.

For S.R. Batliboi & Associates LLP

Chartered Accountants

ICAI Firm Registration Number: 101049W/E300004

per Atin Bhargava

Partner

Membership Number: 504777

UDIN: 26504777SQAJBQ9483

Place of Signature: Hyderabad

Date: May 23, 2026

Annexure '2' to the Independent Auditor's Report of even date on the Consolidated Financial Statements of Rainbow Children's Medicare Limited

Report on the Internal Financial Controls under Clause (i) of Sub-section 3 of Section 143 of the Companies Act, 2013 ("the Act")

In conjunction with our audit of the consolidated financial statements of Rainbow Children's Medicare limited (hereinafter referred to as the "Holding Company") as of and for the year ended March 31, 2026, we have audited the internal financial controls with reference to consolidated financial statements of the Holding Company and its subsidiaries (the Holding Company and its subsidiaries together referred to as "the Group"), which are companies incorporated in India, as of that date.

MANAGEMENT'S RESPONSIBILITY FOR INTERNAL FINANCIAL CONTROLS

The respective Board of Directors of the companies included in the Group, which are companies incorporated in India, are responsible for establishing and maintaining internal financial controls based on the internal control over financial reporting criteria established by the Holding Company considering the essential components of internal control stated in the Guidance Note on Audit of Internal Financial Controls Over Financial Reporting issued by the Institute of Chartered Accountants of India (ICAI). These responsibilities include the design, implementation and maintenance of adequate internal financial controls that were operating effectively for ensuring the orderly and efficient conduct of its business, including adherence to the respective company's policies, the safeguarding of its assets, the prevention and detection of frauds and errors, the accuracy and completeness of the accounting records, and the timely preparation of reliable financial information, as required under the Companies Act, 2013.

AUDITOR'S RESPONSIBILITY

Our responsibility is to express an opinion on the Holding Company's internal financial controls with reference to consolidated financial statements based on our audit. We conducted our audit in accordance with the Guidance Note on Audit of Internal Financial Controls Over Financial Reporting (the "Guidance Note") and the Standards on Auditing, specified under section 143(10) of the Act, to the extent applicable to an audit of internal financial controls, both, issued by ICAI. Those Standards and the Guidance Note require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether adequate internal financial controls with reference to consolidated financial statements was established and maintained and if such controls operated effectively in all material respects.

Our audit involves performing procedures to obtain audit evidence about the adequacy of the internal financial controls with reference to consolidated financial statements and their operating effectiveness. Our audit of internal financial controls with reference to consolidated financial statements included obtaining an understanding of internal financial controls with reference to consolidated financial statements, assessing the risk that a material weakness exists, and testing and evaluating the design and operating effectiveness of internal control based on the assessed risk. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error.

We believe that the audit evidence we have obtained and the audit evidence obtained by the other auditors in terms of their reports referred to in the Other Matters paragraph below, is sufficient and appropriate to provide a basis for our audit opinion on the internal financial controls with reference to consolidated financial statements.

MEANING OF INTERNAL FINANCIAL CONTROLS WITH REFERENCE TO CONSOLIDATED FINANCIAL STATEMENTS

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

INHERENT LIMITATIONS OF INTERNAL FINANCIAL CONTROLS WITH REFERENCE TO CONSOLIDATED FINANCIAL STATEMENTS

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

OPINION

In our opinion, the Group, which are companies incorporated in India, have, maintained in all material respects, adequate internal financial controls with reference to consolidated financial statements and such internal financial controls with reference to consolidated financial statements were operating effectively as at March 31, 2026, based on the internal control over financial reporting criteria established

by the Holding Company considering the essential components of internal control stated in the Guidance Note issued by the ICAI.

OTHER MATTERS

Our report under Section 143(3)(i) of the Act on the adequacy and operating effectiveness of the internal financial controls with reference to consolidated financial statements of the Holding Company, in so far as it relates to these 6 subsidiaries, which are companies incorporated in India, is based on the corresponding reports of the auditors of such subsidiaries incorporated in India.

For S.R. Batliboi & Associates LLP

Chartered Accountants

ICAI Firm Registration Number: 101049W/E300004

per Atin Bhargava

Partner

Membership Number: 504777

UDIN: 26504777SQAJBQ9483

Place of Signature: Hyderabad

Date: May 23, 2026

Consolidated Balance Sheet

as at 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

Particulars	Notes	As at 31 March 2026	As at 31 March 2025
ASSETS			
Non-current assets			
a. Property, plant and equipment	2.1(a)	8,924.33	8,132.82
b. Capital work-in-progress	2.1(b)	757.51	277.66
c. Right-of-use of assets	2.32	6,691.81	5,745.33
d. Goodwill	2.1(c)	1,568.90	-
e. Other intangible assets	2.1(c)	373.85	103.28
f. Intangible assets under development	2.1(d)	34.70	6.93
g. Financial assets			
(i) Investments	2.2	0.03	0.03
(ii) Loans	2.10 (a)	275.01	297.72
(iii) Other financial assets	2.3 (a)	1,423.24	319.74
h. Deferred tax assets (net)	2.27(d)	500.70	295.89
i. Non-current tax assets (net)	2.4	158.23	103.68
j. Other non-current assets	2.5	411.57	266.25
Total non-current assets		21,119.88	15,549.33
Current assets			
a. Inventories	2.6	416.34	275.69
b. Financial assets			
(i) Investments	2.7	4,044.95	5,707.28
(ii) Trade receivables	2.8	1,031.79	773.01
(iii) Cash and cash equivalents	2.9 (a)	338.94	202.55
(iv) Bank balances other than (iii) above	2.9 (b)	-	0.20
(v) Loans	2.10 (b)	40.01	30.00
(vi) Other financial assets	2.3 (b)	506.43	1,054.70
c. Other current assets	2.11	250.08	177.10
Total current assets		6,628.54	8,220.53
TOTAL ASSETS		27,748.42	23,769.86
EQUITY AND LIABILITIES			
EQUITY			
a. Equity share capital	2.12	1,015.59	1,015.52
b. Other equity	2.13	15,465.15	13,666.41
Equity attributable to owners of the Company		16,480.74	14,681.93
Non-controlling interest		155.14	68.17
TOTAL EQUITY		16,635.88	14,750.10
LIABILITIES			
Non-current liabilities			
a. Financial liabilities			
(i) Lease liabilities	2.32	8,653.70	7,416.79
(ii) Other financial liabilities	2.16	434.07	-
b. Provisions	2.14	159.53	97.25
Total non-current liabilities		9,247.30	7,514.04
Current liabilities			
a. Financial liabilities			
(i) Lease liabilities	2.32	256.14	219.02
(ii) Trade payables	2.15		
a) Total outstanding dues to micro enterprises and small enterprises		295.89	102.02
b) Total outstanding dues to creditors other than micro enterprises and small enterprises		709.79	740.20
(iii) Other financial liabilities	2.16	259.65	178.07
b. Other current liabilities	2.19	284.14	199.45
c. Provisions	2.17	51.21	66.96
d. Deferred tax liabilities (net)	2.27(d)	7.92	-
e. Current tax liabilities (net)	2.18	0.50	-
Total current liabilities		1,865.24	1,505.72
TOTAL EQUITY AND LIABILITIES		27,748.42	23,769.86
Basis of preparation and Material accounting policies	1		

The accompanying notes referred to above form an integral part of the consolidated financial statements. As per our report of even date attached.

for **S.R. Batliboi & Associates LLP**
Chartered Accountants
ICAI Firm Registration Number: 101049W/E300004

per Atin Bhargava
Partner
Membership Number: 504777

for and on behalf of the Board of Directors of
Rainbow Children's Medicare Limited
CIN: L85110TG1998PLC029914

Dr. Ramesh Kancharla
Chairman and Managing Director
DIN: 00212270

Vikas Maheshwari
Chief Financial Officer

Dr. Dinesh Kumar Chirla
Director
DIN: 01395841

Shreya Mitra
Company Secretary
Membership Number: A54901

Place: Hyderabad
Date: 23 May 2026

Place: Hyderabad
Date: 23 May 2026

Place: Hyderabad
Date: 23 May 2026

Consolidated Statement of Profit and Loss

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

Particulars	Notes	For the year ended 31 March 2026	For the year ended 31 March 2025
INCOME			
Revenue from operations	2.20	17,030.77	15,158.66
Other income	2.21	437.88	510.08
Total income		17,468.65	15,668.74
EXPENSES			
Cost of materials consumed	2.22	2,270.29	1,949.20
Employee benefits expense	2.23	2,335.30	2,063.67
Finance costs	2.24	776.17	724.55
Depreciation and amortisation expense	2.25	1,505.70	1,384.40
Professional fees to doctors	2.26 (i)	4,188.10	3,690.21
Other expenses	2.26 (ii)	2,795.41	2,556.70
Total expenses		13,870.97	12,368.73
Profit before exceptional items and tax		3,597.68	3,300.01
Exceptional items	2.1(b)	15.39	-
Profit before tax		3,582.29	3,300.01
Tax expenses:	2.27		
(a) Current tax		964.79	873.08
(b) Adjustment of tax related to earlier periods		(3.46)	19.85
(c) Deferred tax credit		(194.48)	(35.19)
Total tax expense		766.85	857.74
Profit for the year		2,815.44	2,442.27
Other comprehensive income			
Items that will not be reclassified subsequently to the Statement of Profit or Loss			
Re-measurement gain on defined benefit obligation	2.30	(9.58)	(0.98)
Income tax effect	2.27	2.41	0.37
Other comprehensive income for the year, net of tax		(7.17)	(0.61)
Total Comprehensive Income for the year, net of tax		2,808.27	2,441.66
Profit for the year attributable to:			
Owners of the Company		2,783.23	2,434.24
Non-controlling interests		32.21	8.03
Other comprehensive income for the year attributable to:			
Owners of the Company		(7.12)	(0.83)
Non-controlling interests		(0.05)	0.22
Total comprehensive income for the year attributable to:			
Owners of the Company		2,776.11	2,433.41
Non-controlling interests		32.16	8.25
Earning per share (face value of share ₹10 each, fully paid)	2.35		
- Basic (Rs)		27.41	23.97
- Diluted (Rs)		27.41	23.84
Basis of preparation and Material accounting policies	1		

The accompanying notes referred to above form an integral part of the consolidated financial statements.

As per our report of even date attached.

for **S.R. Batliboi & Associates LLP**
Chartered Accountants
ICAI Firm Registration Number: 101049W/E300004

per Atin Bhargava
Partner
Membership Number: 504777

for and on behalf of the Board of Directors of
Rainbow Children's Medicare Limited
CIN: L85110TG1998PLC029914

Dr. Ramesh Kancharla
Chairman and Managing Director
DIN: 00212270

Vikas Maheshwari
Chief Financial Officer

Dr. Dinesh Kumar Chirla
Director
DIN: 01395841

Shreya Mitra
Company Secretary
Membership Number: A54901

Place: Hyderabad
Date: 23 May 2026

Place: Hyderabad
Date: 23 May 2026

Place: Hyderabad
Date: 23 May 2026

Consolidated Statement of Cash Flows

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Cash flows from operating activities		
Profit before tax	3,582.29	3,300.01
Adjustments:		
Depreciation and amortisation expense	1,505.70	1,384.40
Gain on redemption of mutual funds (net)	(246.82)	(78.53)
Unrealised foreign exchange loss (net)	(0.64)	0.14
Net gain on financial assets measured at fair value through profit or loss	(57.44)	(281.02)
Interest income on financial assets carried at amortised cost	(116.27)	(144.29)
Finance costs	776.17	724.55
Employee share based payment expense	29.12	(12.71)
Advances written off	-	0.10
Allowance for expected credit loss	53.30	7.31
Bad debts written off	0.51	1.73
Gain on sale of property, plant & equipment (net)	(11.98)	(0.80)
Liabilities no longer required written back	(4.73)	(1.68)
	5,509.21	4,899.21
Adjustments for working capital:		
Increase in inventories	(140.65)	(35.91)
Increase trade receivables	(312.59)	(77.63)
Increase in financial and other assets	(156.71)	(106.42)
Increase in trade payables	167.28	95.46
Increase/ (decrease) in financial and current liabilities	108.44	(18.58)
Increase in provisions	36.95	56.38
Cash flow generated from operations	5,211.93	4,812.51
Income tax paid, net	(1,015.38)	(855.93)
Net cash flow generated from operating activities (A)	4,196.55	3,956.58
Cash flows from investing activities		
Purchase of property, plant and equipment, other intangibles, intangible assets under development including capital advances, capital creditors and capital work-in-progress	(2,164.55)	(1,456.70)
Proceeds from sale of property, plant and equipment	12.89	0.80
Acquisition of subsidiary, net of cash and cash equivalents acquired	(2,031.93)	-
Bank deposits redeemed with maturity of more than three months	1,326.15	2,489.94
Bank deposits invested with maturity of more than three months	(1,811.95)	(1,661.19)
Interest received	116.34	221.90
Investment in mutual funds	(7,439.45)	(8,254.59)
Redemption of mutual funds	9,406.04	5,981.86
Net cash flows (used) in investing activities	(2,586.46)	(2,677.98)
Cash flows from financing activities		
Payment of principal portion of lease liabilities	(179.99)	(148.55)
Interest paid	(776.17)	(724.55)
Purchase of treasury shares	(212.96)	-
Dividend paid	(304.65)	(304.64)
Proceeds from issue of equity shares on exercise of employee stock options	0.07	0.50
Net cash flow (used) in financing activities	(1,473.70)	(1,177.24)
Net increase / (decrease) in cash and cash equivalents (A+B+C)	136.39	101.36
Cash and cash equivalents at the beginning of the year	202.55	101.19
Cash and cash equivalents at the end of the year (note b)	338.94	202.55

Consolidated Statement of Cash Flows (Contd.) for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

- a) The above Consolidated Statement of Cash Flows has been prepared under the “Indirect Method” as set out in the Indian Accounting Standard (Ind AS-7) - “Statement of Cash Flows”.
- b) Components of cash and cash equivalents as at (Refer note 2.9 (a))

	As at 31 March 2026	As at 31 March 2025
Cash on hand	11.33	11.80
Balance with banks:		
- Current accounts	327.61	190.75
- On deposit accounts (with original maturity of 3 months or less)	-	-
	338.94	202.55

- c) Reconciliation between opening and closing balances in the Balance sheet for liabilities arising from financing activities.

	As at 31 March 2026	As at 31 March 2025
Opening balance:		
Lease liabilities	7,635.81	7,653.06
Movement:		
Lease liabilities		
Finance cost on lease liabilities (including capitalisation)	776.81	725.45
Addition to lease liabilities (net)	1,455.57	130.90
Lease modification	(2.19)	(0.50)
Payment of lease liabilities	(956.16)	(873.10)
Closing balance		
Lease liabilities	8,909.84	7,635.81

The accompanying notes referred to above form an integral part of the consolidated financial statements.

As per our report of even date attached.

for **S.R. Batliboi & Associates LLP**
Chartered Accountants
ICAI Firm Registration Number: 101049W/E300004

per Atin Bhargava
Partner
Membership Number: 504777

Place: Hyderabad
Date: 23 May 2026

for and on behalf of the Board of Directors of
Rainbow Children's Medicare Limited
CIN: L85110TG1998PLC029914

Dr. Ramesh Kancharla
Chairman and Managing Director
DIN: 00212270

Vikas Maheshwari
Chief Financial Officer

Place: Hyderabad
Date: 23 May 2026

Dr. Dinesh Kumar Chirla
Director
DIN: 01395841

Shreya Mitra
Company Secretary
Membership Number: A54901

Place: Hyderabad
Date: 23 May 2026

Consolidated Statement of Changes in Equity

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

(A) SHARE CAPITAL

Particulars	Number of shares	Amount
Equity shares of ₹ 10 each issued, subscribed and fully paid-up		
As at 01 April 2024	101,501,687	1,015.02
Add: Shares issued during the year	49,986	0.50
As at 01 April 2025	101,551,673	1,015.52
Add: Shares issued during the year	7,483	0.07
As at 31 March 2026	101,559,156	1,015.59

(B) OTHER EQUITY

Particulars	Other equity								Total Equity
	Reserves and surplus						Equity attributable to shareholders of the Company	Non-Controlling Interest (NCI)	
	Securities premium	General reserve	Share Options outstanding account	Capital reserve	Treasury Shares	Retained earning			
Balance as at 01 April 2024	3,986.96	43.89	96.58	8.95	-	7,437.88	11,574.26	59.92	11,634.18
Profit for the year	-	-	-	-	-	2,434.24	2,434.24	8.03	2,442.27
Remeasurement of defined benefit liability (net of tax effect)	-	-	-	-	-	(0.83)	(0.83)	0.22	(0.61)
Employee share based payment expenses (refer note 2.45)	43.11	-	(79.73)	-	-	-	(36.62)	-	(36.62)
Appropriations/Adjustments:									
Final dividend on equity shares for the period ended 31 March 2024 i.e. ₹ 3 per share	-	-	-	-	-	(304.64)	(304.64)	-	(304.64)
Balance as at 31 March 2025	4,030.07	43.89	16.85	8.95	-	9,566.65	13,666.41	68.17	13,734.58

Consolidated Statement of Changes in Equity (Contd.) for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

(B) OTHER EQUITY (continued)

Particulars	Other equity								
	Reserves and surplus						Equity attributable to shareholders of the Company	Non-Controlling Interest (NCI)	Total Equity
	Securities premium	General reserve	Share Options outstanding account	Capital reserve	Treasury Shares	Retained earning			
Balance as at 01 April 2025	4,030.07	43.89	16.85	8.95	-	9,566.65	13,666.41	68.17	13,734.58
Profit for the year	-	-	-	-	-	2,783.23	2,783.23	32.21	2,815.44
Remeasurement of defined benefit liability (net of tax effect)	-	-	-	-	-	(7.12)	(7.12)	(0.05)	(7.17)
NCI on the date of acquisition (refer note 2.49)	-	-	-	-	-	(488.88)	(488.88)	488.88	-
Derecognition of NCI to financial liability (refer note 2.16)	-	-	-	-	-	-	-	(434.07)	(434.07)
Employee share based payment expenses (refer note 2.45)	7.96	-	21.16	-	-	-	29.12	-	29.12
Appropriations/Adjustments:									
Final dividend on equity shares for the period ended 31 March 2025 i.e. ₹ 3 per share	-	-	-	-	-	(304.65)	(304.65)	-	(304.65)
Purchase of treasury shares	-	-	-	-	(212.96)	-	(212.96)	-	(212.96)
Balance as at 31 March 2026	4,038.03	43.89	38.01	8.95	(212.96)	11,549.23	15,465.15	155.14	15,620.29

The accompanying notes referred to above form an integral part of the consolidated financial statements.

As per our report of even date attached.

for **S.R. Batliboi & Associates LLP**
Chartered Accountants
ICAI Firm Registration Number: 101049W/E300004

per Atin Bhargava
Partner
Membership Number: 504777

Place: Hyderabad
Date: 23 May 2026

for and on behalf of the Board of Directors of
Rainbow Children's Medicare Limited
CIN: L85110TG1998PLC029914

Dr. Ramesh Kancharla
Chairman and Managing Director
DIN: 00212270

Vikas Maheshwari
Chief Financial Officer

Place: Hyderabad
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Dr. Dinesh Kumar Chirla
Director
DIN: 01395841

Shreya Mitra
Company Secretary
Membership Number: A54901

Place: Hyderabad
Date: 23 May 2026

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

GROUP INFORMATION

The consolidated financial statements comprise financial statements of Rainbow Children's Medicare Limited ('Company' or 'Holding Company') (CIN L85110TG1998PLC029914) and its subsidiaries (collectively, the Group) for the year ended 31 March 2026. The Holding Company is a public company domiciled in India and incorporated under the Companies Act, 2013 having registered office at 8-2-120/103/1, Survey No. 403, Road No.2, Banjara Hills, Hyderabad, Telangana-500034. The Group is primarily engaged in the business of rendering medical and healthcare services.

As a part of its business activities, the Holding Company holds interests in eight subsidiaries (the Company and its subsidiaries hereinafter referred to as the 'Group') through which it manages and operate a network of hospitals.

The Holding Company's shares are listed on the BSE Limited and National Stock Exchange of India Limited. The consolidated financial statements were approved by the Board of Directors for issue on 23 May 2026.

1. BASIS OF PREPARATION AND MATERIAL ACCOUNTING POLICIES

1.1 Basis of preparation

(i) Statement of compliance

The consolidated financial statements of the Group have been prepared in accordance with the Indian Accounting Standards ("Ind AS") as per the Companies (Indian Accounting Standards) Rules, 2015 notified under section 133 of Companies Act, 2013, ("the Act") and other relevant provision of the Act under the historical cost convention on an accrual and going concern basis except for certain financial instruments which are measured at fair values, notified under the Act and rules prescribed thereunder. The company has prepared the consolidated financial statements on the basis that it continues to operate as a going concern.

(ii) Basis of Measurement

The consolidated financial statements have been prepared on a historical cost convention and on accrual basis, except for certain financial assets and liabilities measured at fair value (refer accounting policy regarding financial instruments), defined benefit and other long-term employee benefits where present value of defined benefit obligations ("DBO") is measured at as per actuarial valuation, Asset and liabilities assumed as part of business combination measured at fair

value and share based payment is measured at fair value. The accounting policies are applied consistently to all the years presented in the consolidated financial statements except where a newly issued accounting standard is initially adopted or a revision to an existing accounting standard requires change in accounting policy hitherto in use.

(iii) Functional and Presentation Currency

These consolidated financial statements are presented in Indian Rupees (INR or ₹), which is also the Group's functional currency. All amounts have been rounded-off to two decimal places to the nearest million, unless otherwise indicated. The comparatives are presented for the year ended and as on 31 March 2025.

(iv) Use of estimates and judgements:

In preparing these consolidated financial statements, management has made judgements, estimates and assumptions that affect the application of accounting policies and the reported amounts of assets, liabilities, income and expenses. Actual results may differ from these estimates

Estimates and underlying assumptions are reviewed on an periodic basis. Revisions to accounting estimates are recognised prospectively.

Judgments

Information about judgments made in applying accounting policies that have the most significant effects on the amounts recognised in the Consolidated Financial Statements is included in the following notes:

- **Lease term:** Whether the Group is reasonably certain to exercise extension options (Note 1.2(i))
- **Income taxes:** Significant judgements are involved in determining the provision for income taxes, including the amount expected to be paid or recovered in connection with uncertain tax positions. (Note 1.2(k))
- **Business Combination:** The Company uses the acquisition method of accounting to account for business combinations. The acquisition date is the date on which control is transferred to the acquirer. Judgement is applied in determining the

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

acquisition date, determining whether control is transferred from one party to another and whether acquisition constitutes a business or asset acquisition. Control exists when the Company is exposed to or has rights to variable returns from its involvement with the entity and has the ability to affect those returns through power over the entity. In assessing control, potential voting rights are considered only if the rights are substantive.

Assumptions and estimation uncertainties

Information about assumptions and estimation uncertainties at the reporting date that have a significant risk of resulting in a material adjustment to the carrying amount of assets and liabilities within the next financial year is included in the following notes:

- **Contingent liabilities:** Contingent liabilities are not recognised in the financial statements but are disclosed in the notes. They are assessed continually to determine whether an outflow of resources embodying economic benefits has become probable. If it becomes probable that an outflow of future economic benefits will be required for an item previously dealt with as a contingent liability, a provision is recognised in the financial statements of the period in which the change in probability occurs (except in the extremely rare circumstances where no reliable estimate can be made). (Note 1.2(m))
- **Income taxes:** Significant judgements are involved in determining the provision for income taxes, including the amount expected to be paid or recovered in connection with uncertain tax positions. (Note 1.2(j))
- **Measurement of defined benefit obligations:** Key actuarial assumptions used for actuarial valuation. (Note 1.2(g))
- **Impairment of financial assets:** The Group assesses on a forward-looking basis the expected credit losses associated with its assets carried at amortised cost. (Note 1.2(d))
- **Impairment of non-financial assets:** Key assumptions underlying recoverable amount including forecasted projections.
- **Property, plant and equipment:** Useful life of asset. (Note 1.2(b))
- **Lease liabilities:** measurement of incremental borrowing costs. (Note 1.2(i))
- **Other estimates:** The preparation of financial statements involves estimates and assumptions that affect the reported amount of assets, liabilities, disclosure of contingent liabilities at the date of financial statements and the reported amount of revenues and expenses for the reporting period. Specifically, the Group estimates the probability of collection of accounts receivable by analyzing historical payment patterns, customer concentrations, customer credit-worthiness and current economic trends. If the financial condition of a customer deteriorates, additional allowances may be required.

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

(v) Subsidiaries considered in the Consolidated Financial Statements

Name of the Company	Country of Incorporation	Proportion of ownership interest (%) and voting power held	
		As at 31 March 2026	As at 31 March 2025
Subsidiary Companies			
Rainbow Children's Hospital Private Limited	India	100.00%	100.00%
Rainbow Women & Children's Hospitals Private Limited	India	100.00%	100.00%
Rainbow Speciality Hospitals Private Limited	India	78.81%	78.81%
Rosewalk Healthcare Private Limited	India	100.00%	100.00%
Rainbow Fertility Private Limited	India	100.00%	100.00%
Rainbow C R O Private Limited	India	100.00%	100.00%
Prashanthi Medicare Private Limited	India	76.00%	0.00%
Pratiksha Women & Child Care Hospital Private Limited	India	76.00%	0.00%
Other Consolidating entities			
Rainbow Children's Hospital Foundation (Trust)	India	NA*	NA*

*The Company does not have any equity interests in this entity, but has significant influence over it.

Business combination and goodwill

Business combinations are accounted for under Ind AS 103 using the acquisition method. The cost of an acquisition is measured as the aggregate of the consideration transferred measured at acquisition date fair value and the amount of any non-controlling interests in the acquiree. For each business combination, the Group elects whether to measure the non-controlling interests in the acquiree at fair value or at the proportionate share of the acquiree's identifiable net assets. Acquisition related costs are expensed as incurred.

At the acquisition date, the identifiable assets acquired, and the liabilities assumed are recognised at their acquisition date fair values. For this purpose, the liabilities assumed include contingent liabilities representing present

obligation and they are measured at their acquisition fair values irrespective of the fact that outflow of resources embodying economic benefits is not probable. However, the following assets and liabilities acquired in a business combination are measured at the basis indicated below:

- Deferred tax assets or liabilities, and the liabilities or assets related to employee benefit arrangements are recognised and measured in accordance with Ind AS 12 Income Tax and Ind AS 19 Employee Benefits respectively.

When the Group acquires a business, it assesses the financial assets and liabilities assumed for appropriate classification and designation in accordance with the contractual terms, economic circumstances and pertinent conditions as at the acquisition date. This includes the separation of embedded derivatives in host contracts by the acquiree.

Goodwill is initially measured at cost, being the excess of the aggregate of the consideration transferred and the amount recognised for non-controlling interests, and any previous interest held, over the net identifiable assets acquired and liabilities assumed. If the fair value of the net assets acquired is in excess of the aggregate consideration transferred, the Group re-assesses whether it has correctly identified all of the assets acquired and all of the liabilities assumed and reviews the procedures used to measure the amounts to be recognised at the acquisition date. If the reassessment still results in an excess of the fair value of net assets acquired over the aggregate consideration transferred, then the gain is recognised in OCI and accumulated in equity as capital reserve. However, if there is no clear evidence of bargain purchase, the entity recognise the gain directly in equity as capital reserve, without routing the same through OCI.

After initial recognition, goodwill is measured at cost less any accumulated impairment losses. For the purpose of impairment testing, goodwill

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

acquired in a business combination is, from the acquisition date, allocated to each of the Group's cash-generating units that are expected to benefit from the combination, irrespective of whether other assets or liabilities of the acquiree are assigned to those units.

A cash generating unit to which goodwill has been allocated is tested for impairment annually, or more frequently when there is an indication that the unit may be impaired. If the recoverable amount of the cash generating unit is less than its carrying amount, the impairment loss is allocated first to reduce the carrying amount of any goodwill allocated to the unit and then to the other assets of the unit pro rata based on the carrying amount of each asset in the unit.

Any impairment loss for goodwill is recognised in profit or loss. An impairment loss recognised for goodwill is not reversed in subsequent periods.

Where goodwill has been allocated to a cash-generating unit and part of the operation within that unit is disposed of, the goodwill associated with the disposed operation is included in the carrying amount of the operation when determining the gain or loss on disposal. Goodwill disposed in these circumstances is measured based on the relative values of the disposed operation and the portion of the cash-generating unit retained.

If the initial accounting for a business combination is incomplete by the end of the reporting period in which the combination occurs, the Group reports provisional amounts for the items for which the accounting is incomplete. Those provisional amounts are adjusted through goodwill during the measurement period, or additional assets or liabilities are recognised, to reflect new information obtained about facts and circumstances that existed at the acquisition date that, if known, would have affected the amounts recognized at that date. These adjustments are called as measurement period adjustments. The measurement period does not exceed one year from the acquisition date.

(vi) Principles of consolidation

Subsidiaries are entities controlled by the Group. Control is achieved when the Group is exposed, or has rights, to variable returns from its involvement

with the investee and has the ability to affect those returns through its power over the investee.

Specifically, the Group controls an investee if and only if the Group has:

- (i) Power over the investee (i.e. existing rights that give it the current ability to direct the relevant activities of the investee)
- (ii) Exposure, or rights, to variable returns from its involvement with the investee, and
- (iii) The ability to use its power over the investee to affect its returns.

Generally, there is a presumption that a majority of voting rights result in control. To support this presumption and when the Group has less than a majority of the voting or similar rights of an investee, the Group considers all relevant facts and circumstances in assessing whether it has power over an investee, including:

- (i) The contractual arrangement with the other vote holders of the investee;
- (ii) Rights arising from other contractual arrangements;
- (iii) The Group's voting rights and potential voting rights;
- (iv) The size of the Group's holding of voting rights relative to the size and dispersion of the holdings of the other voting rights holders.

The Group re-assesses whether or not it controls an investee if facts and circumstances indicate that there are changes to one or more of the three elements of control. Consolidation of an entity begins when the Group obtains control over that entity and ceases when the Group loses control over the entity. Assets, liabilities, income and expenses of an entity acquired or disposed of during the year are included in these Consolidated Financial Statements from the date the Group gains control until the date the Group ceases to control the subsidiary. A change in the ownership interest of a subsidiary, without a loss of control, is accounted for as an equity transaction.

The Consolidated Financial Statements of the Holding Company and its subsidiaries have

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

been combined on a line-by-line basis by adding together the book values of like items of assets, liabilities, income, expenses and cash flows after eliminating intra-group balances/ transactions and resulting unrealised profits in full. Eliminate in full intra-group assets and liabilities, equity, income, expenses and cash flows relating to transactions between entities of the Group (profits or losses resulting from intragroup transactions that are recognised in assets, such as inventory, property, plant and equipment are eliminated in full). Unrealised losses resulting from intra-group transactions have also been eliminated in full as per Ind AS 110. The amounts shown in respect of reserves comprise the amount of the relevant reserves as per the Balance sheet of the Holding Company and its share in the post-acquisition increase in the relevant reserves of the subsidiaries.

The excess/ deficit of cost to the Holding Company of its investment in the subsidiaries over its portion of equity at the respective dates on which investment in such entities were made is recognised in the Consolidated Financial Statements as goodwill/ capital reserve. The Holding Company's portion of equity in such entities is determined on the basis of the book values of assets and liabilities as per the financial statements of such entities as on the date of investment and if not available, the financial statements for the immediately preceding period adjusted for the effects of significant transactions, up to the date of investment.

Non-Controlling Interests (NCI) in the net assets of consolidated subsidiaries consists of: (a) the amount of equity attributable to minorities at the date on which investment in a subsidiary is made; and (b) the minorities' share of movements in equity since the date the holding subsidiary relationship came into existence.

The Consolidated Financial Statements are presented, to the extent possible, in the same format as that adopted by the Holding Company for its separate financial statements. The Consolidated Financial Statements are prepared using uniform accounting policies for like transactions and other events in similar circumstances. If a member of the Group uses accounting policies other than those adopted in the Consolidated Financial Statements for like transactions and events in similar circumstances,

appropriate adjustments are made to that Group member's financial statements in preparing the Consolidated Financial Statements to ensure conformity with the Group's accounting policies.

The financial statements of all entities used for the purpose of consolidation are drawn up to same reporting date as that of the Holding Company, i.e. year ended on 31 March 2026.

(vii) Current versus Non-current classification

All assets and liabilities are classified into current and non-current as per the Group's normal operating cycle and other criteria set out in the Schedule III to the Companies Act, 2013.

Assets

An asset is classified as current when it satisfies any of the following criteria:

- i. it is expected to be realised in, or is intended for sale or consumption in, the Group's normal operating cycle;
- ii. it is held primarily for the purpose of being traded;
- iii. it is expected to be realised within 12 months after the reporting date; or
- iv. it is cash or cash equivalent unless it is restricted from being exchanged or used to settle a liability for at least 12 months after the reporting date.

Current assets include the current portion of non-current financial assets. All other assets are classified as non-current.

Liabilities

A liability is classified as current when it satisfies any of the following criteria:

- i. it is expected to be settled in the Group's normal operating cycle;
- ii. it is held primarily for the purpose of being traded;
- iii. it is due to be settled within 12 months after the reporting date; or
- iv. the Group does not have an unconditional right to defer settlement of the liability for

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

at least 12 months after the reporting date. Terms of a liability that could, at the option of the counterparty, result in its settlement by the issue of fresh instruments do not affect its classification.

Current liabilities include current portion of non-current financial liabilities. All other liabilities are classified as non-current.

Operating cycle

Operating cycle is the time between the acquisition of assets for processing and their realisation in cash or cash equivalents. The Group normal operating cycle is twelve months.

(viii) Measurement of fair values

Group accounting policies and disclosures require the measurement of fair values, for both financial and non-financial assets and liabilities.

Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The fair value measurement is based on the presumption that the transaction to sell the asset or transfer the liability takes place either:

- In the principal market for the asset or liability or
- In the absence of a principal market, in the most advantageous market for the asset or liability

The principal or the most advantageous market must be accessible by the Group. The fair value of an asset or a liability is measured using the assumptions that market participants would use when pricing the asset or liability, assuming that market participants act in their economic best interest.

The Group uses valuation techniques that are appropriate in the circumstances and for which sufficient data is available to measure fair value, maximizing the use of relevant observable inputs and minimizing the use of unobservable inputs.

Fair values are categorised into different levels in a fair value hierarchy based on the inputs used in the valuation techniques as follows:

- Level 1: quoted prices (unadjusted) in active markets for identical assets or liabilities.
- Level 2: inputs other than quoted prices included in Level 1 that are observable for the asset or liability, either directly (i.e. as prices) or indirectly (i.e. derived from prices).
- Level 3: inputs for the asset or liability that are not based on observable market data (unobservable inputs).

When measuring the fair value of an asset or a liability, the Group uses observable market data as far as possible. If the inputs used to measure the fair value of an asset or a liability fall into a different level of the fair value hierarchy, then the fair value measurement is categorised in its entirety in the same level of the fair value hierarchy as the lowest level input that is significant to the entire measurement.

Further information about the assumptions made in measuring fair values is included in the following notes in financial instruments [Refer note 2.4.1].

1.2 MATERIAL ACCOUNTING POLICIES

a. Financial Instruments

i. Recognition and initial measurement

Trade receivables and debt securities issued are initially recognised when they are originated. All other financial assets and financial liabilities are initially recognised when the Group becomes a party to the contractual provisions of the instrument. A financial asset (unless it is a trade receivable without a significant financing component) or financial liability is initially measured at fair value plus or minus, for an item not at FVTPL, transaction costs that are directly attributable to its acquisition or issue. A trade receivable without a significant financing component is initially measured at the transaction price.

ii. Classification and subsequent measurement

Financial assets:

On initial recognition, a financial asset is classified and subsequently measured at:

- amortised cost;
- FVOCI – debt investment;
- FVOCI – equity investment; or
- FVTPL

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

Financial assets are not reclassified subsequent to their initial recognition unless the Group changes its business model for managing financial assets, in which case all affected financial assets are reclassified on the first day of the first reporting period following the change in the business model.

A financial asset is measured at amortised cost if it meets both of the following conditions and is not designated as at FVTPL:

- it is held within a business model whose objective is to hold assets to collect contractual cash flows; and
- its contractual terms give rise on specified dates to cash flows that are solely payments of principal and interest on the principal amount outstanding.

A debt investment is measured at FVOCI if it meets both of the following conditions and is not designated as at FVTPL:

- it is held within a business model whose objective is achieved by both collecting contractual cash flows and selling financial assets; and
- its contractual terms give rise on specified dates to cash flows that are solely payments of principal and interest on the principal amount outstanding.

On initial recognition of an equity investment that is not held for trading, the Group may irrevocably elect to present subsequent changes in the investment's fair value in OCI. This election is made on an investment-by-investment basis.

All financial assets not classified as measured at amortised cost or FVOCI as described above are measured at FVTPL. On initial recognition, the Group may irrevocably designate a financial asset that otherwise meets the requirements to be measured at amortised cost or at FVOCI as at FVTPL if doing so eliminates or significantly reduces an accounting mismatch that would otherwise arise.

Financial assets – Subsequent measurement and gains and losses

Financial assets at FVTPL -These assets are subsequently measured at fair value. Net gains

and losses, including any interest or dividend income, are recognised in profit or loss.

Financial assets at amortised cost -These assets are subsequently measured at amortised cost using the effective interest method. The amortised cost is reduced by impairment losses. Interest income, foreign exchange gains and losses and impairment are recognised in profit or loss. Any gain or loss on derecognition is recognised in profit or loss.

Equity investments at FVOCI -These assets are subsequently measured at fair value. Impairment losses (and reversal of impairment losses) on equity investments measured at FVOCI are not reported separately from other changes in fair value. Dividends are recognised as income in profit or loss unless the dividend clearly represents a recovery of part of the cost of the investment. Other net gains and losses are recognised in OCI and are not reclassified to profit or loss.

Financial liabilities – Classification, subsequent measurement and gains and losses:

Financial liabilities are classified as measured at amortised cost or FVTPL. A financial liability is classified as at FVTPL if it is classified (as held-for-trading, it is a derivative or it is designated as such on initial recognition. Financial liabilities at FVTPL are measured at fair value and net gains and losses, including any interest expense, are recognised in profit or loss. Other financial liabilities are subsequently measured at amortised cost using the effective interest method. Interest expense and foreign exchange gains and losses are recognised in profit or loss. Any gain or loss on derecognition is also recognised in profit or loss.

iii. Derecognition

Financial assets:

The Group derecognises a financial asset when:

- the contractual rights to the cash flows from the financial asset expire; or
- it transfers the rights to receive the contractual cash flows in a transaction in which either:
 - substantially all of the risks and rewards of ownership of the financial asset are transferred; or

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

- the Group neither transfers nor retains substantially all of the risks and rewards of ownership and it does not retain control of the financial asset.

Financial liabilities:

The Group derecognises a financial liability when its contractual obligations are discharged or cancelled or expire. The Group also derecognises a financial liability when its terms are modified and the cash flows of the modified liability are substantially different, in which case a new financial liability based on the modified terms is recognised at fair value. On derecognition of a financial liability, the difference between the carrying amount extinguished and the consideration paid (including any non-cash assets transferred or liabilities assumed) is recognised in profit or loss.

Interest rate benchmark reform

When the basis for determining the contractual cash flows of a financial asset or financial liability measured at amortised cost changed as a result of interest rate benchmark reform, the Group updated the effective interest rate of the financial asset or financial liability to reflect the change that is required by the reform. A change in the basis for determining the contractual cash flows is required by interest rate benchmark reform if the following conditions are met:

- the change is necessary as a direct consequence of the reform; and
- the new basis for determining the contractual cash flows is economically equivalent to the previous basis – i.e., the basis immediately before the change.

When changes were made to a financial asset or financial liability in addition to changes to the basis for determining the contractual cash flows required by interest rate benchmark reform, the Group first updated the effective interest rate of the financial asset or financial liability to reflect the change that is required by interest rate benchmark reform. After that, the Group applied the policies on accounting for modifications to the additional changes.

Offsetting

Financial assets and financial liabilities are offset and the net amount presented in the balance

sheet when, and only when, the Group currently has a legally enforceable right to set off the amounts and it intends either to settle them on a net basis or to realise the asset and settle the liability simultaneously.

b. Property, plant and equipment

i. Recognition and measurement:

Items of property, plant and equipment are measured at cost (which includes capitalised borrowing costs, if any) less accumulated depreciation and accumulated impairment losses, if any. The cost on item of property, plant and equipment comprises its purchase price, taxes, duties, freight and any other directly attributable costs of bringing the assets to their working condition for their intended use and estimated cost of dismantling and removing the item and restoring the site on which it is located.

The cost of a self-constructed item of property, plant and equipment comprises the cost of materials, direct labour and any other costs directly attributable to bringing the item to its intended working condition and estimated costs of dismantling, removing and restoring the site on which it is located, wherever applicable.

When significant parts of an item of property, plant and equipment have different useful lives, they are accounted for as separate items (major components) of property, plant and equipment.

Gains and losses on disposal of an item of property, plant and equipment are determined by comparing the proceeds from disposal with the carrying amount of property, plant and equipment, and are recognised net in the consolidated statement of profit and loss.

ii. Subsequent costs:

The cost of replacing a part of an item of property, plant and equipment is recognised in the carrying amount of the item if it is probable that the future economic benefits embodied within the part will flow to the Group, and its cost can be measured reliably.

iii. Depreciation:

Depreciation on Property, plant and equipment (other than for that class of assets specifically mentioned below) is calculated on a straight-line basis as per the useful life prescribed and in the manner laid down under Schedule II

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to the Companies Act 2013 and additions and deletions are restricted to the period of use. Depreciation is charged to consolidated statement of profit and loss.

If the Management's estimate of the useful life of a property, plant and equipment is different than that envisaged in the aforesaid Schedule, depreciation is provided based on the Management's estimate of the useful life. Pursuant to this policy, depreciation on the following class of property, plant and equipment has been provided at the rates based on the following useful lives of property, plant and equipment as estimated by Management which is different from the useful life prescribed under Schedule II of the Companies Act, 2013.

Description	Useful life (in years) by Management	Useful life (in years) under Schedule II of the Act
Buildings	60 years	60 years
Medical equipments*	7 years	13 years
Plant and equipments	15 years	15 years
Office equipments	5 years	5 years
Vehicles*	5 years	8 years
Computers	3 years	3 years
Furniture and Fixtures	10 years	10 years

*For these classes of assets, based on technical evaluation, the Management believes that the useful lives as given above best represents the period over which Management expects to use these assets. Hence, the useful lives of these assets are different from the useful lives as prescribed under Part C of Schedule II of the Companies Act 2013.

Leasehold Improvements are amortised over the period of lease or the estimated useful life, whichever is lower.

The useful lives and methods of depreciation of property, plant and equipment are reviewed at each financial year-end and adjusted prospectively.

Capital work-in-progress includes cost of property, plant and equipment under installation/under development as at the balance sheet date.

Advances paid towards acquisition of tangible and intangible assets outstanding at each balance sheet date are shown under other non-current assets as capital advances.

c. Intangible assets other than Goodwill and amortisation:

Intangible assets acquired separately are measured on initial recognition at cost. The cost of intangible assets acquired in a business combination is their fair value at the date of acquisition. Following initial recognition, intangible assets are carried at cost less any accumulated amortisation and accumulated impairment losses.

The Group capitalizes costs related to specific upgrades and enhancements of software when it is probable the expenditures will result in additional features, functionality and significant customer experience. The Group also capitalizes all direct and incremental costs incurred during the development phase, until such time when the software is substantially complete and ready for use.

Intangible assets with finite lives are amortised over the useful economic life and assessed for impairment whenever there is an indication that the intangible asset may be impaired. The amortisation period and the amortisation method for an intangible asset with a finite useful life are reviewed at least at the end of each reporting period. Changes in the expected useful life or the expected pattern of consumption of future economic benefits embodied in the asset are considered to modify the amortisation period or method, as appropriate, and are treated as changes in accounting estimates. The amortisation expense on intangible assets with finite lives is recognised in the consolidated statement of profit and loss unless such expenditure forms part of carrying value of another asset. Intangible assets with indefinite useful lives are not amortized, but are tested for impairment annually, either individually or at the cash-generating unit level. The assessment of indefinite life is reviewed annually to determine whether the indefinite life continues to be supportable. If not, the change in useful life from indefinite to finite is made on a prospective basis.

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Intangible asset is de-recognised upon disposal or when no future economic benefits are expected from its use or disposal. Any gain or loss arising on de-recognition of the asset (calculated as the difference between the net disposal proceeds and the carrying amount of the asset) is recognized in the consolidated statement of profit and loss, when the asset is derecognised.

Amortisation

The estimated useful life of an identifiable intangible asset is based on a number of factors including the effects of obsolescence, demand, competition and other economic factors (such as the stability of the industry and known technological advances) and the level of maintenance expenditures required to obtain the expected future cash flows from the asset. The estimated useful lives of intangibles are as follows:

Description	Useful life (in years) by Management
Brand	8-10 years
Non compete	10 years
Computer software	5 years

d. Impairment of assets

Impairment of financial assets

The Group recognises loss allowances for ECLs on:

- financial assets measured at amortised cost;
- debt investments measured at FVOCI; and
- contract assets.

The Group also recognises loss allowances for ECLs on finance lease receivables, which are disclosed as financial assets.

The Group measures loss allowances at an amount equal to lifetime ECLs, except for the following, which are measured at 12-month ECLs:

- bank balances for which credit risk (i.e., the risk of default occurring over the expected life of the financial instrument) has not increased significantly since initial recognition.

Loss allowances for trade and finance lease receivables, loans and contract assets are always measured at an amount equal to lifetime ECLs.

Lifetime expected credit losses are the expected credit losses that result from all possible default events over the expected life of a financial instrument.

12-month expected credit losses are the portion of expected credit losses that result from default events that are possible within 12 months after the reporting date (or a shorter period if the expected life of the instrument is less than 12 months).

In all cases, the maximum period considered when estimating expected credit losses is the maximum contractual period over which the Group is exposed to credit risk.

When determining whether the credit risk of a financial asset has increased significantly since initial recognition and when estimating ECLs, the Group considers reasonable and supportable information that is relevant and available without undue cost or effort. This includes both quantitative and qualitative information and analysis, based on the Group historical experience and informed credit assessment, that includes forward-looking information.

Measurement of expected credit losses

ECLs are a probability-weighted estimate of credit losses. Credit losses are measured as the present value of all cash shortfalls (i.e. the difference between the cash flows due to the entity in accordance with the contract and the cash flows that the Group expects to receive). ECLs are discounted at the effective interest rate of the financial asset.

Credit-impaired financial assets:

At each reporting date, the Group assesses whether financial assets carried at amortised cost and debt securities at FVOCI are credit impaired. A financial asset is 'credit-impaired' when one or more events that have a detrimental impact on the estimated future cash flows of the financial asset have occurred.

Evidence that a financial asset is credit-impaired includes the following observable data:

- significant financial difficulty of the debtor;
- the restructuring of a loan or advance by the Group on terms that the Group would not consider otherwise.
- it is probable that the debtor will enter bankruptcy or other financial reorganisation; or
- the disappearance of an active market for a security because of financial difficulties.

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Presentation of allowance for expected credit losses in the balance sheet

Loss allowances for financial assets measured at amortised cost are deducted from the gross carrying amount of the assets.

Write-off

The gross carrying amount of a financial asset is written off when the Group has no reasonable expectations of recovering a financial asset in its entirety or a portion thereof. For corporate customers, the Group individually makes an assessment with respect to the timing and amount of write-off based on whether there is a reasonable expectation of recovery. The Group expects no significant recovery from the amount written off. However, financial assets that are written off could still be subject to enforcement activities in order to comply with the Group procedures for recovery of amounts due.

e. Investments

Equity investments which are in scope of Ind AS 109 are measured at fair value. For all other equity instruments in scope of Ind AS 109, the Group may make an irrevocable election to present in other comprehensive income subsequent changes in the fair value. The Group makes such election on an instrument-by-instrument basis. The classification is made on initial recognition and is irrevocable.

If the Group decides to classify an equity instrument as at FVOCI, then all fair value changes on the instrument, excluding dividends, are recognised in the OCI. There is no recycling of the amounts from OCI to the Statement of Profit and Loss, even on sale of investment. However, the Group may transfer the cumulative gain or loss to retained earnings.

Equity instruments included within the FVTPL category are measured at fair value with all changes recognised in the Statement of Profit and Loss.

f. Inventories

Inventories are measured at the lower of cost and net realisable value.

Cost includes all costs of purchase and other costs incurred in bringing the inventories to their present location and condition inclusive of non-refundable (adjustable) taxes wherever applicable. The Group follows the first in first out (FIFO) method for determining the cost of such inventories.

Net realisable value is the estimated selling price in the ordinary course of business, less estimated costs of completion and the estimated costs necessary to make the sale. The comparison of cost and net realisable value is made on an item-by-item basis.

g. Employee benefits

i. Short-term employee benefits

Short-term employee benefit obligations are measured on an undiscounted basis and are expensed as the related service is provided. A liability is recognised for the amount expected to be paid if the Group has a present legal or constructive obligation to pay this amount as a result of past service provided by the employee, and the amount of obligation can be estimated reliably.

Share based payment transactions

The grant date fair value of equity settled share-based payment awards granted to employees is recognised as an employee expense, with a corresponding increase in equity, over the period that the employees unconditionally become entitled to the awards. The amount recognised as expense is based on the estimate of the number of awards for which the related service and non-market vesting conditions are expected to be met, such that the amount ultimately recognised as an expense is based on the number of awards that do meet the related service and non-market vesting conditions at the vesting date.

ii. Post-employment benefit Defined contribution plans

A defined contribution plan is a post-employment benefit plan under which an entity pays fixed contributions into a separate entity and will have no legal or constructive obligation to pay further amounts.

The Group makes specified monthly contributions towards Government administered provident fund scheme. Obligations for contributions to defined contribution plans are recognised as an employee benefit expense in statement of profit or loss in the periods during which the related services are rendered by employees. Prepaid contributions are recognised as an asset to the extent that a cash refund or a reduction in future payment is available.

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Defined benefit plans

A defined benefit plan is a post-employment benefit plan other than a defined contribution plan. The Group's net obligation in respect of defined benefit plans is calculated separately for each plan by estimating the amount of future benefit that employees have earned in the current and prior periods, discounting that amount and deducting the fair value of any plan assets.

The calculation of defined benefit obligation is performed annually by a qualified actuary using the projected unit credit method.

Re-measurements of the net defined benefit liability, which comprise actuarial gains and losses, the return on plan assets (excluding interest) and the effect of the asset ceiling (if any, excluding interest), are recognised in Other comprehensive income (OCI). The Group determines the net interest expense on the net defined benefit liability for the period by applying the discount rate used to measure the defined benefit obligation at the beginning of the annual period to the then-net defined benefit liability considering any changes in the net defined benefit liability during the period as a result of contributions and benefit payments. Net interest expense and other expenses related to defined benefit plans are recognised in statement of profit and loss.

When the benefits of a plan are changed or when a plan is curtailed, the resulting change in benefit that relates to past service ('past service cost' or 'past service gain') or the gain or loss on curtailment is recognised immediately in profit or loss. The Group recognises gains and losses on the settlement of a defined benefit plan when the settlement occurs.

The obligations are presented as current liabilities in the balance sheet if the entity does not have an unconditional right to defer settlement for at least twelve months after the reporting period, regardless of when the actual settlement is expected to occur.

Compensated absences

Accumulated leave, which is expected to be utilised within the next 12 months, is treated as short-term employee benefit and the accumulated leave expected to be carried forward beyond twelve months, as long-term employee benefit for measurement purposes.

The Group records an obligation for such compensated absences in the period in which the employee renders the services that increase this entitlement. The obligation is measured on the basis of independent actuarial valuation using the projected unit credit method.

h. Revenue recognition

The Group's revenue from medical and healthcare services comprises of income from hospital services and sale of pharmacy items.

Income from hospital services is recognised as revenue when the related services are rendered. The performance obligations for this stream of revenue include accommodation, surgery, medical/clinical professional services, food and beverages, investigation and supply of pharmaceutical and related products.

Revenue is measured based on the transaction price, which is the fixed consideration adjusted for components of variable consideration which constitutes discounts, estimated disallowances and any other rights and obligations as specified in the contract with the customer. In determining the transaction price for the hospital services, the Group considers the effects of variable consideration, the existence of significant financing components, non-cash consideration, and consideration payable to the customer (if any). Revenue is recognised at the point in time for the inpatient / outpatient hospital services when the related services are rendered at the transaction price.

Revenue from sale of pharmacy is recognised when it transfers control over a good or service to the customer, generally on delivery of product to the customer.

Medical service fee is recognized when the related services are rendered unless significant future uncertainties exist.

Interest income or expense is recognised using the effective interest method. The 'effective interest rate' is the rate that exactly discounts estimated future cash payments or receipts through the expected life of the financial instrument to:

- the gross carrying amount of the financial asset; or
- the amortised cost of the financial liability

In calculating interest income and expense, the effective interest rate is applied to the gross carrying amount

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of the asset (when the asset is not credit-impaired) or to the amortised cost of the liability. However, for financial assets that have become credit-impaired subsequent to initial recognition, interest income is calculated by applying the effective interest rate to the amortised cost of the financial asset. If the asset is no longer credit-impaired, then the calculation of interest income reverts to the gross basis.

Dividend income is recognised in profit or loss on the date on which the Group's right to receive payment is established.

Contract balances:

(i) Contract assets (Unbilled revenue)

Contract assets represents value to the extent of medical and healthcare services rendered to the patients who are undergoing treatment/ observation on the balance sheet date and is not billed as at the balance sheet date. Contract assets are subject to impairment assessment. Refer to accounting policies on impairment of financial assets in section (d).

(ii) Trade receivables

A receivable is recognised if an amount of consideration that is unconditional (i.e., only the passage of time is required before payment of the consideration is due). Refer to accounting policies of financial assets in section (a) Financial instruments.

(iii) Contract liabilities

Contract liabilities include advances received from patients for hospital services and is pending for final billing on the balance sheet date.

i. Leases

At inception of a contract, the Group assesses whether a contract is, or contains, a lease. A contract is, or contains, a lease if the contract conveys the right to control the use of an identified asset for a period of time in exchange for consideration.

As a lessee

At commencement or on modification of a contract that contains a lease component, the Group allocates the consideration in the contract to each lease component on the basis of their relative stand-alone prices. However, for the leases of property the Group has elected not to separate non-lease components and account for the lease and non-lease components as a single lease component.

(i) Right-of-use asset

The Group recognises a right-of-use asset and a lease liability at the lease commencement date. The right-of-use asset is initially measured at cost, which comprises the initial amount of the lease liability adjusted for any lease payments made at or before the commencement date, plus any initial direct costs incurred and remove the underlying asset or to restore the underlying asset or the site on which it is located, less any lease incentives received.

The right-of-use asset is subsequently depreciated using the straight-line method from the commencement date to the earlier of the end of the useful life of the right-of-use asset or the end of the lease term, unless the lease transfers ownership of the underlying asset to the Group by the end of the lease term or the cost of the right-of-use asset reflects that the Group will exercise a purchase option. In that case the right-of-use asset will be depreciated over the useful life of the underlying asset, which is determined on the same basis as those of property and equipment. In addition, the right-of-use asset is periodically reduced by impairment losses, if any, and adjusted for certain remeasurements of the lease liability.

ii. lease liabilities

The lease liability is initially measured at the present value of the lease payments that are not paid at the commencement date, discounted using the interest rate implicit in the lease or, if that rate cannot be readily determined, the Group's incremental borrowing rate. Generally, the Group uses its incremental borrowing rate as the discount rate.

Lease payments included in the measurement of the lease liability comprise the following:

- fixed payments, including in-substance fixed payments;
- variable lease payments that depend on an index or a rate, initially measured using the index or rate as at the commencement date;
- amounts expected to be payable under a residual value guarantee; and
- the exercise price under a purchase option that the Group is reasonably certain to

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exercise, lease payments in an optional renewal period if the Group is reasonably certain to exercise an extension option, and penalties for early termination of a lease unless the Group is reasonably certain not to terminate early.

The lease liability is measured at amortised cost using the effective interest method. It is remeasured when there is a change in future lease payments arising from a change in an index or rate, if there is a change in the Group's estimate of the amount expected to be payable under a residual value guarantee, or if the Group changes its assessment of whether it will exercise a purchase, extension or termination option or if there is a revised in-substance fixed lease payment.

When the lease liability is remeasured in this way, a corresponding adjustment is made to the carrying amount of the right-of-use asset or is recorded in profit or loss if the carrying amount of the right-of-use asset has been reduced to zero.

The Group presents right-of-use assets that do not meet the definition of investment property in 'Property, plant and equipment' and lease liabilities separately in the balance sheet within 'Financial Liabilities'.

Short-term leases and leases of low-value assets:

The Group has elected not to recognise right-of-use assets and lease liabilities for short-term leases of machinery and buildings that have a lease term of 12 months or less and leases of low-value assets. The Group recognizes the lease payments associated with these leases as an expense in profit or loss on a straight-line basis over the lease term.

j. Income-tax

Income tax comprises current and deferred tax. It is recognised in profit or loss except to the extent that it relates to a business combination or to an item recognised directly in equity or in other comprehensive income.

Current tax:

Current tax comprises the expected tax payable or receivable on the taxable income or loss for the year and any adjustment to the tax payable or receivable in respect of previous years. The amount of current tax reflects the best estimate of the tax amount expected

to be paid or received after considering the uncertainty, if any, related to income taxes. It is measured using tax rates (and tax laws) enacted or substantively enacted by the reporting date.

Current tax assets and current tax liabilities are offset only if there is a legally enforceable right to set off the recognised amounts, and it is intended to realise the asset and settle the liability on a net basis or simultaneously.

Deferred tax:

Deferred tax is recognised in respect of temporary differences between the carrying amounts of assets and liabilities for financial reporting purposes and the corresponding amounts used for taxation purposes.

Deferred tax assets are recognised to the extent that it is probable that future taxable profits will be available against which they can be used. The existence of unused tax losses is strong evidence that future taxable profit may not be available. Therefore, in case of a history of recent losses, the Group recognises a deferred tax asset only to the extent that it has sufficient taxable temporary differences or there is convincing other evidence that sufficient taxable profit will be available against which such deferred tax asset can be realised.

Deferred tax assets recognised or unrecognised, are reviewed at each reporting date and are recognised/reduced to the extent that it is probable/ no longer probable respectively that the related tax benefit will be realised.

Deferred tax is measured at the tax rates that are expected to apply to the period when the asset is realised or the liability is settled, based on the laws that have been enacted or substantively enacted by the reporting date.

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

Deferred tax assets and liabilities are offset if there is a legally enforceable right to offset current tax liabilities and assets, and they relate to income taxes levied by the same tax authority on the same taxable entity, or on different tax entities, but they intend to settle current tax liabilities and assets on a net basis or their tax assets and liabilities will be realised simultaneously.

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k. Earnings per share

Basic Earnings Per Share ('EPS') is computed by dividing the net profit attributable to the equity shareholders by the weighted average number of equity shares outstanding during the year. Diluted earnings per share is computed by dividing the net profit by the weighted average number of equity shares considered for deriving basic earnings per share and also the weighted average number of equity shares that could have been issued upon conversion of all dilutive potential equity shares. Dilutive potential equity shares are deemed converted as of the beginning of the year, unless issued at a later date. In computing diluted earnings per share, only potential equity shares that are dilutive and that either reduces earnings per share or increases loss per share are included. The number of shares and potentially dilutive equity shares are adjusted retrospectively for all periods presented for the share splits.

l. Provisions

A provision is recognised if, as a result of a past event, the Group has a present legal or constructive obligation that can be estimated reliably, and it is probable that an outflow of economic benefits will be required to settle the obligation. When the Group expects some or all of a provision to be reimbursed, the expense relating to a provision is presented in statement of profit and loss, net of any reimbursement.

If the effect of the time value of money is material, provisions are discounted using a current pre-tax rate that reflects, when appropriate, the risks specific to the liability. When discounting is used, the increase in the provision due to the passage of time is recognised as a finance cost.

m. Contingent liabilities and contingent assets

A contingent liability exists when there is a possible but not probable obligation, or a present obligation that may, but probably will not, require an outflow of resources, or a present obligation whose amount cannot be estimated reliably. Contingent liabilities do not warrant provisions but are disclosed unless the possibility of outflow of resources is remote.

Contingent assets are neither recognised nor disclosed in the Consolidated Financial Statements. However, contingent assets are assessed continually and if it is virtually certain that an inflow of economic benefits will arise, the asset and related income are recognised in the period in which the change occurs.

n. Statement of cash flows

Cash flows are reported using the indirect method, whereby net profit/ (loss) before tax is adjusted for the effects of transactions of a non-cash nature and any deferrals or accruals of past or future cash receipts or payments and item of income or expenses associated with investing or financing cash flows. The cash flows from regular revenue generating (operating activities), investing activities and financing activities of the Group are segregated.

o. Cash and cash equivalents

For the purpose of presentation in the statement of cash flows, cash and cash equivalents includes cash on hand, deposits held at call with banks, other short-term, highly liquid investments with original maturities of three months or less that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value. Where bank overdrafts/ cash credits which are repayable on demand form an integral part of an entity's cash management, bank overdrafts are included as a component of cash and cash equivalents. Bank overdrafts are shown within short term-borrowings in the balance sheet.

p. Events after reporting date

Where events occurring after the balance sheet date provide evidence of conditions that existed at the end of the reporting period, the impact of such events is adjusted within the financial statements. Otherwise, events after the balance sheet date of material size or nature are only disclosed.

q. Segment reporting

As defined in Ind AS 108, Operating Segments, the Chief Operating Decision Maker i.e. Board of Directors of the Group evaluates the Group performance and allocates resources based on an analysis of various performance indicators by business segment. Medical and Healthcare services has been considered as the only reportable segment. Hence, no separate final disclosure have been provided for the segment reporting.

r. Treasury Shares

The Holding Company has created an Rainbow Employees Welfare Trust (the "ESOP Trust") for providing share-based payment to its employees. The Holding Company uses ESOP Trust as a vehicle for distributing shares to employees under the employee remuneration schemes. The ESOP Trust

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buys shares of the Company from the market, for giving shares to employees on exercise of equity settled ESOP. Share options exercised during the reporting period are satisfied with treasury shares. The Holding Company treats ESOP Trust as its extension and shares held by ESOP Trust are treated as treasury shares.

Own equity instruments that are reacquired (treasury shares) are recognised at cost and deducted from equity. No gain or loss is recognised in profit or loss on the purchase, sale, issue or cancellation of the Group's own equity instruments. Any difference between the carrying amount and the consideration, if reissued, is recognised in Capital reserve.

s. NCI Put option liability

Where a put option has been granted to NCI, the Group de-recognises the NCI and recognises a financial liability at each reporting date for the present value of the expected redemption amount.

The difference between the derecognised NCI and the recognised financial liability towards put option is recorded directly in equity, and no separate interest

expense is recognised for the unwinding of discount. Upon exercise of the option, the liability is extinguished by payment of the exercise price. If the option expires unexercised, the liability is reversed and the NCI reinstated as if the option had never existed.

t. Dividend

The Group recognises a liability to pay dividend to owners of the parent when the distribution is authorised, and the distribution is no longer at the discretion of the Group. A corresponding amount is recognised directly in equity. As per the corporate laws in India, a distribution is authorised when it is approved by the shareholders.

u. Climate - related matters

The Group considers climate-related matters in estimates and assumptions, where appropriate. This assessment includes a wide range of possible impacts on the Group due to both physical and transition risks. Even though climate-related risks might not currently have a significant impact on measurement, the Group is closely monitoring relevant changes and developments.

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2.1 (a) PROPERTY, PLANT AND EQUIPMENT

Particulars	Freehold land	Buildings	Leasehold improvements (refer note (i) below)	Medical equipments (refer note (i) below)	Plant and equipments	Furniture and fixtures	Office equipments	Vehicles	Computers	Total
Cost or deemed cost										
As at 01 April 2024	38.47	400.65	4,315.33	2,311.55	1,225.66	671.53	367.82	207.50	234.75	9,773.26
Additions	1,766.52	1.71	310.17	244.37	125.68	58.03	62.57	3.56	32.99	2,605.60
Disposals	-	-	-	(1.20)	-	-	(0.21)	(3.79)	-	(5.20)
As at 31 March 2025 (A)	1,804.99	402.36	4,625.50	2,554.72	1,351.34	729.56	430.18	207.27	267.74	12,373.66
As at 01 April 2025	1,804.99	402.36	4,625.50	2,554.72	1,351.34	729.56	430.18	207.27	267.74	12,373.66
Additions	-	2.73	608.63	596.59	217.42	109.21	91.05	36.54	46.77	1,708.94
Disposals	-	-	-	(39.27)	(0.44)	-	-	(3.51)	-	(43.22)
As at 31 March 2026 (B)	1,804.99	405.09	5,234.13	3,112.04	1,568.32	838.77	521.23	240.30	314.51	14,039.38
Accumulated depreciation:										
As at 01 April 2024	-	21.77	989.39	1,254.83	328.77	309.40	220.18	122.65	139.21	3,386.20
Depreciation	-	6.66	268.95	281.75	88.85	71.03	58.44	31.82	52.34	859.84
Disposals	-	-	-	(1.20)	-	-	(0.21)	(3.79)	-	(5.20)
As at 31 March 2025 (C)	-	28.43	1,258.34	1,535.38	417.62	380.43	278.41	150.68	191.55	4,240.84
As at 01 April 2025	-	28.43	1,258.34	1,535.38	417.62	380.43	278.41	150.68	191.55	4,240.84
Depreciation	-	6.70	299.05	293.17	98.63	71.78	65.96	27.24	53.99	916.52
Disposals	-	-	-	(38.69)	(0.11)	-	-	(3.51)	-	(42.31)
As at 31 March 2026 (D)	-	35.13	1,557.39	1,789.86	516.14	452.21	344.37	174.41	245.54	5,115.05
Net carrying amount										
As at 31 March 2026 (B-D)	1,804.99	369.96	3,676.74	1,322.18	1,052.18	386.56	176.86	65.89	68.97	8,924.33
As at 31 March 2025 (A-C)	1,804.99	373.93	3,367.16	1,019.34	933.72	349.13	151.77	56.59	76.19	8,132.82

Note:

- Delhi Development authority (DDA) has granted 5,500 square meters of land on perpetual lease to Madhukar Multispecialty Hospital Research Centre (MMHRC) in Malviyanagar (Delhi) via lease deed dated 16 September 2005. MMHRC has constructed a hospital building on this land with all infrastructure and services and 50% of the space was sublet to the Holding Company to operate and render healthcare services. DDA vide its letter dated 28 January 2019 to MMHRC has restricted subletting to 25% instead of earlier 50% and accordingly the Holding Company and MMHRC had executed amended the sub lease agreement dated 27 March 2019 which is effective from 01 April 2019. As at 31 March 2026, leasehold improvements and medical equipments include ₹87.14 million and Rs 31.09 million (31 March 2025: ₹92.60 million and Rs 26.91 million) respectively in respect of this hospital. The Management is utilising the assets for the purpose of providing medical services at MMHRC.
- Refer note 2.38 for details of incidental expenditure capitalised during the construction period.
- The title deeds of immovable properties (other than properties where the Group is the lessee and the lease arrangements are duly executed in favour of the lessee) are held in the name of the Group and the Group does not have any investment property.

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2.1 (b) CAPITAL WORK-IN-PROGRESS

Particulars	Total
Cost or deemed cost	
As at 01 April 2024	138.09
Additions	2,745.17
Capitalisation	(2,605.60)
As at 31 March 2025	277.66
As at 01 April 2025	277.66
Additions	2,061.73
Capitalisation	(1,581.88)
As at 31 March 2026	757.51

Capital work-in-progress (CWIP) ageing schedule:

As at 31 March 2026

CWIP	Amount in CWIP for a period of				Total
	Less than 1 Year	1-2 Years	2-3 Years	More than 3 Years	
Projects in progress	638.40	95.39	22.92	0.80	757.51
Projects temporarily suspended	-	-	-	-	-

As at 31 March 2025

CWIP	Amount in CWIP for a period of				Total
	Less than 1 Year	1-2 Years	2-3 Years	More than 3 Years	
Projects in progress	246.00	28.93	2.38	0.35	277.66
Projects temporarily suspended	-	-	-	-	-

There are no capital work in progress projects, whose completion is overdue or has exceed its cost compared to its original plan as at 31 March 2026 and 31 March 2025.

2.1 (c) OTHER INTANGIBLE ASSETS, GOODWILL

Particulars	Goodwill	Other intangible assets			Total
		Brand	Non-Compete	Software	
Cost or deemed cost					
As at 01 April 2024	-	-	-	152.63	152.63
Additions	-	-	-	86.23	86.23
Disposals	-	-	-	2.17	2.17
As at 31 March 2025 (A)	-	-	-	241.03	241.03
As at 01 April 2025	-	-	-	241.03	241.03
Additions	-	-	-	23.72	23.72
Goodwill arising on business combinations*	1,568.90	134.56	162.46	0.87	297.89
Disposals	-	-	-	-	-

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for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.1 (c) OTHER INTANGIBLE ASSETS, GOODWILL (continued)

Particulars	Goodwill	Other intangible assets			Total
		Brand	Non-Compete	Software	
As at 31 March 2026 (B)	1,568.90	134.56	162.46	265.62	562.64
Accumulated amortisation					
As at 01 April 2024	-	-	-	111.71	111.71
Amortisation	-	-	-	24.03	24.03
Disposals	-	-	-	2.01	2.01
As at 31 March 2025 (C)	-	-	-	137.75	137.75
As at 01 April 2025	-	-	-	137.75	137.75
Amortisation	-	8.91	10.58	31.55	51.04
Disposals	-	-	-	-	-
As at 31 March 2026 (D)	-	8.91	10.58	169.30	188.79
Net carrying amount					
As at 31 March 2026 (B-D)	1,568.90	125.65	151.88	96.32	373.85
As at 31 March 2025 (A-C)	-	-	-	103.28	103.28

* Goodwill arising upon business combinations is not amortised but tested for impairment at least annually or more frequently if there is any indication that the cash generating unit to which goodwill is allocated is impaired

For the purpose of impairment testing, goodwill is allocated to a cash generating unit, representing the lowest level within the Company at which goodwill is monitored for internal management purposes and which is not higher than the Company's operating segment.

The carrying amount of goodwill was allocated to the cash generating units as follows:

Entity	Amount
Prashanthi Medicare Private Limited	204.44
Pratiksha Women & Child Care Hospital Private Limited	1,364.46
	1,568.90

Refer to Note 2.49 of these consolidated financial statements for details regarding goodwill arising on business combinations

2.1 (d) INTANGIBLE ASSETS UNDER DEVELOPMENT

Particulars	Total
Cost or deemed cost	
As at 01 April 2024	60.92
Additions	32.24
Capitalisation	(86.23)
As at 31 March 2025	6.93
As at 01 April 2025	6.93
Additions	51.48
Capitalisation	(23.71)
As at 31 March 2026	34.70
Net carrying amount	
As at 31 March 2026	34.70
As at 31 March 2025	6.93

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.1 (d) INTANGIBLE ASSETS UNDER DEVELOPMENT (continued)

Intangible assets under development ageing schedule:

As at 31 March 2026

Intangible assets under development	Amount in Intangible assets under development for a period of				Total
	Less than 1 Year	1-2 Years	2-3 Years	More than 3 Years	
Projects in progress	34.70	-	-	-	34.70
Projects temporarily suspended	-	-	-	-	-

As at 31 March 2025

Intangible assets under development	Amount in Intangible assets under development for a period of				Total
	Less than 1 Year	1-2 Years	2-3 Years	More than 3 Years	
Projects in progress	0.65	-	6.28	-	6.93
Projects temporarily suspended	-	-	-	-	-

The Group does not have any Intangible assets under development which is overdue or has exceeded its cost compared to its original plan as at 31 March 2026 and 31 March 2025.

2.2 NON-CURRENT INVESTMENTS

Particulars	As at 31 March 2026	As at 31 March 2025
Investments valued at fair value through other comprehensive income		
Investments in unquoted equity instruments		
Vamana Solar Private Limited 2,600 shares of ₹10 each, fully paid up (31 March 2025: 2,600 shares)	0.03	0.03
	0.03	0.03
Aggregate amount of unquoted investments	0.03	0.03
Aggregate amount of impairment in value of investments	-	-

The Group's exposure to credit risk and market risk related to investments has been disclosed in note 2.39.

2.3 (a) OTHER FINANCIAL ASSETS (NON-CURRENT) (AT AMORTISED COST)

Particulars	As at 31 March 2026	As at 31 March 2025
Bank deposits with remaining maturity more than 12 months	1,041.98	20.26
Interest accrued on deposits	10.10	4.19
Security deposits	371.16	295.29
	1,423.24	319.74

The Group's exposure to credit and market risk are disclosed in Note 2.39.

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.3 (b) OTHER FINANCIAL ASSETS (CURRENT) (AT AMORTISED COST)

(Unsecured, considered good)

Particulars	As at 31 March 2026	As at 31 March 2025
Bank deposits with remaining maturity less than 12 months #	490.23	1,026.15
Interest accrued on deposits	16.20	28.55
	506.43	1,054.70

Includes an amount of ₹ 73.67 million (31 March 2025: ₹ 23.20 million) deposited towards on-going CSR projects and an amount of ₹ 4.44 million (31 March 2025: 3.00 million) towards margin money deposits against bank guarantees.

The Group's exposure to credit and market risk are disclosed in Note 2.39.

2.4 NON-CURRENT TAX ASSETS (NET)

Particulars	As at 31 March 2026	As at 31 March 2025
Advance tax (net of provision for taxation) (refer note 2.27 (b))	158.23	103.68
	158.23	103.68

2.5 OTHER NON-CURRENT ASSETS

Particulars	As at 31 March 2026	As at 31 March 2025
(Unsecured, considered good)		
Capital advances		
- to other than related parties	359.97	233.47
Prepaid expenses	33.11	19.62
Amounts paid under protest (refer note 2.28)	18.49	13.16
	411.57	266.25

2.6 INVENTORIES

(valued at the lower of cost or net realisable value)

Particulars	As at 31 March 2026	As at 31 March 2025
Medical consumables and pharmacy items	416.34	275.69
	416.34	275.69

2.7 CURRENT INVESTMENTS

Particulars	As at 31 March 2026	As at 31 March 2025
Investments at fair value through profit or loss		
Quoted:		
Investments in Mutual funds - quoted		
Aditya Birla Sunlife Banking & PSU Debt Fund - Growth - Direct Plan 1,113,485.77 Units (31 March 2025: 1,113,485.77 Units)	437.39	414.40
HDFC Liquid Fund - Growth - Direct Plan 4,242.78 Units (31 March 2025: 9,878.16 Units)	22.95	50.31
HDFC Large & Midcap Fund - Growth - Direct Plan Nil Units (31 March 2025: 431,099.53 Units)	-	140.19

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.7 CURRENT INVESTMENTS (continued)

Particulars	As at 31 March 2026	As at 31 March 2025
HDFC Corporate Bond Fund - Growth - Direct Plan 1,423,984.46 Units (31 March 2025: 13,722,798.35 Units)	48.61	446.56
HDFC Arbitrage Fund - Wholesale Plan - Growth - Direct Plan 12,251,096.62 Units (31 March 2025: 9,684,059.54 Units)	259.09	192.02
HDFC Arbitrage Fund - Growth - Direct Plan 33,095,569.29 Units (31 March 2025: 8,439,290.35 Units)	699.91	167.33
DSP Liquid Fund - Growth - Direct Plan Nil Units (31 March 2025: 20,633.61 Units)	-	45.09
UTI Money Market Fund - Growth - Direct Plan Nil Units (31 March 2025: 43,049.97 Units)	-	131.76
ICICI Prudential Large & Midcap Fund - Growth - Direct Plan Nil Units (31 March 2025: 141,192.74 Units)	-	145.65
ICICI Prudential Banking & PSU Debt Fund - Growth - Direct Plan 10,550,288.35 Units (31 March 2025: 10,550,288.35 Units)	373.00	352.11
ICICI Prudential All Seasons Bond Fund - Growth - Direct Plan 8,328,117.37 Units (31 March 2025: 8,328,117.37 Units)	341.32	325.26
ICICI Prudential Equity Arbitrage Fund - Growth - Direct Plan 10,980,107.06 Units (31 March 2025: 10,692,747.42 Units)	423.62	386.53
Sundaram Liquid Fund - Growth - Direct Plan Nil Units (31 March 2025: 9,082.04 Units)	-	20.81
Tata Money Market Fund - Growth - Direct Plan Nil Units (31 March 2025: 22,126.01 Units)	-	104.35
TATA Arbitrage Fund - Growth - Direct Plan 19,192,942.67 Units (31 March 2025: 19,192,942.67 Units)	304.66	284.83
Parag Parikh Flexi Cap Fund - Growth - Direct Plan Nil Units (31 March 2025: 1,691,383.96 Units)	-	145.12
SBI Arbitrage Opportunities Fund - Growth - Direct Plan 8,818,633.98 Units (31 March 2025: 8,818,633.98 Units)	332.55	311.41
SBI Corporate Bond Fund Nil Units (31 March 2025: 31,198,932.32 Units)	-	486.91
Kotak Banking & PSU Debt Fund - Growth - Direct Plan 5,299,050.66 Units (31 March 2025: 5,299,050.66 Units)	374.70	352.88
Kotak Corporate Bond Fund - Growth - Direct Plan Nil Units (31 March 2025: 106,266.49 Units)	-	408.91
Kotak Money Market Fund - Growth - Direct Plan Nil Units (31 March 2025: 40,461.73 Units)	-	179.87
Kotak Equity Arbitrage Fund - Growth - Direct Plan Nil Units (31 March 2025: 1,089,697.49 Units)	-	42.88
Kotak Dynamic Bond Fund - Growth - Direct 6,677,570.61 Units (31 March 2025: 6,677,570.61 Units)	277.87	268.07
Nippon India - Arbitrage Fund - Growth - Direct Plan Nil Units (31 March 2025: 3,817,291.94 Units)	-	107.63
Invesco India - Arbitrage Fund - Growth - Direct Plan 1,498,997.32 Units (31 March 2025: 1,498,997.32 Units)	23.85	50.83
Axis Liquid Fund - Growth - Direct Plan 13,081.91 Units (31 March 2025: 22,668.58 Units)	40.09	65.37

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.7 CURRENT INVESTMENTS (continued)

Particulars	As at 31 March 2026	As at 31 March 2025
HSBC Liquid Fund - Growth - Direct Plan Nil Units (31 March 2025: 31,032.77 Units)	-	80.20
Invesco Liquid Fund - Growth - Direct Plan 7,981.95 Units (31 March 2025: Nil Units)	30.18	-
Canara Robeco Liquid Fund - Growth - Direct Plan 16701.11 Units (31 March 2025: Nil Units)	55.16	-
	4,044.95	5,707.28
Aggregate amount of quoted investments and market value thereof	4,044.95	5,707.28

The Group's exposure to credit risk and market risk related to investments has been disclosed in note 2.39.

2.8 TRADE RECEIVABLES

Particulars	As at 31 March 2026	As at 31 March 2025
Trade receivables - unsecured, considered good (refer note (b) below)		
- from related parties (refer note 2.31 (c))	6.18	2.72
- from other than related parties	992.56	791.23
Contract assets (Unbilled revenue) - unsecured, considered good (refer note 2.42)	104.45	70.02
Total	1,103.19	863.97
Less: Allowance for expected credit loss	(71.40)	(90.96)
Net total trade receivables	1,031.79	773.01

Trade receivables are unsecured and are derived from revenue earned from providing medical, healthcare and other ancillary services. No interest is charged on the outstanding balance, regardless of the age of the balance. The Group applies Expected Credit Loss (ECL) model for measurement and recognition of impairment loss towards expected risk of delays and default in collection.

The Group has used a practical expedient by computing the expected credit loss allowance based on a provision matrix. Management makes specific provision in cases where there are known specific risks of customer default in making the repayments. The provision matrix takes into account historical credit loss experience and adjusted for forward-looking information. The expected credit loss allowance is based on the ageing of the days the receivables are due and the rates as per the provision matrix.

The Group is subject to concentrations of credit risk in its accounts receivable for one customer comprising of 30% (31 March 2025: 39%) of Total Trade Receivables. Although the Group is directly affected by the financial condition of its customer, management does not believe significant credit risks exist at the balance sheet date. The Group does not require collateral or other securities to support its accounts receivable.

- The Group's exposure to credit risk and loss allowances related to trade receivables are disclosed in note 2.39.
- Trade receivables are non-interest bearing and are generally on terms of 30-45 days.

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.8 TRADE RECEIVABLES (continued)

Trade Receivables ageing schedule:

As at 31 March 2026

Particulars	Unbilled Revenue	Not due	Outstanding for following periods from due date of payment					Total
			Less than 6 months	6 months - 1 year	1-2 years	2-3 years	More than 3 years	
(i) Unbilled Revenue (Undisputed - considered good)	104.45	-	-	-	-	-	-	104.45
(ii) Undisputed Trade receivables – considered good	-	549.42	323.07	57.86	47.53	11.71	9.15	998.74
(iii) Undisputed Trade Receivables – which have significant increase in credit risk	-	-	-	-	-	-	-	-
(iv) Undisputed Trade Receivables – credit impaired	-	-	-	-	-	-	-	-
(v) Disputed Trade Receivables– considered good	-	-	-	-	-	-	-	-
(vi) Disputed Trade Receivables – which have significant increase in credit risk	-	-	-	-	-	-	-	-
(vii) Disputed Trade Receivables – credit impaired	-	-	-	-	-	-	-	-
Total	104.45	549.42	323.07	57.86	47.53	11.71	9.15	1,103.19
Less: Allowance for expected credit loss								(71.40)
Net total trade receivables								1,031.79

As at 31 March 2025

Particulars	Unbilled Revenue	Not due	Outstanding for following periods from due date of payment					Total
			Less than 6 months	6 months - 1 year	1-2 years	2-3 years	More than 3 years	
(i) Unbilled Revenue (Undisputed - considered good)	70.02	-	-	-	-	-	-	70.02
(ii) Undisputed Trade receivables – considered good	-	449.14	231.99	49.70	24.65	32.40	6.07	793.95
(iii) Undisputed Trade Receivables – which have significant increase in credit risk	-	-	-	-	-	-	-	-
(iv) Undisputed Trade Receivables – credit impaired	-	-	-	-	-	-	-	-
(v) Disputed Trade Receivables– considered good	-	-	-	-	-	-	-	-
(vi) Disputed Trade Receivables – which have significant increase in credit risk	-	-	-	-	-	-	-	-
(vii) Disputed Trade Receivables – credit impaired	-	-	-	-	-	-	-	-
Total	70.02	449.14	231.99	49.70	24.65	32.40	6.07	863.97
Less: Allowance for expected credit loss								(90.96)
Net total trade receivables								773.01

There are no debts due by directors or other officers of the Group or any of them either severally or jointly with any other person or debts due by firms or private companies respectively in which any director is a partner or a director or a member.

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.9 (a) Cash and cash equivalents

Particulars	As at 31 March 2026	As at 31 March 2025
Cash on hand	11.33	11.80
Balance with banks		
- On current accounts	327.61	190.75
	338.94	202.55

2.9 (b) Bank balances other than cash and cash equivalents

Particulars	As at 31 March 2026	As at 31 March 2025
Unpaid dividend	-	0.20
	-	0.20

(i) The Group's exposure to credit risk and market risk are disclosed in note 2.39.

(ii) Details of bank balances / deposits

Particulars	As at 31 March 2026	As at 31 March 2025
Bank deposits with original maturity more than 12 months and remaining maturity less than 12 months included under Other financial assets (current) (refer note 2.3(b))	490.23	1,026.15
Bank deposits with original maturity more than 12 months and remaining maturity more than 12 months included under Other financial assets (non-current) (refer note 2.3(a))	1,041.98	20.26

2.10 (a) Loans (non-current)

(Unsecured, considered good)

Particulars	As at 31 March 2026	As at 31 March 2025
Loans receivable**	193.47	203.47
	193.47	203.47
Interest accrued on - Loans receivable**	81.54	94.25
	275.01	297.72

2.10 (b) Loans (current)

Particulars	As at 31 March 2026	As at 31 March 2025
Loans receivable **		
- considered good	10.01	-
	10.01	-
Interest accrued on - Loans receivable **	30.00	30.00
Total loan carried at amortised cost	40.01	30.00

** Unsecured Loan was given to an external party (Madhukar Rainbow Children's Hospital) at an interest rate of 8.50% p.a. (31 March 2025: 8.50% p.a.). This loan was given towards the working capital requirements of the borrower.

During the previous year, there has been a change in the terms of repayment of loan (principal) for Madhukar Rainbow Children's Hospital by providing a moratorium period of 2 years from 01 April 2024 to 01 April 2026 and reduced the rate of interest from 9.5% p.a. to 8.5% p.a.

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.10 (b) Loans (current) (continued)

Disclosure under Section 186(4) of the Companies Act, 2013

Loans:

Particulars	As at 31 March 2026	As at 31 March 2025
Opening balance	203.47	203.47
Given during the year	-	-
Repaid during the year	-	-
Closing balance	203.47	203.47

2.11 OTHER CURRENT ASSETS

(Unsecured, considered good)

Particulars	As at 31 March 2026	As at 31 March 2025
Advances to suppliers	141.59	115.32
Prepaid expenses	85.41	49.61
Advance to employees *	18.93	10.59
Balances with government authorities	4.15	1.58
	250.08	177.10

* Refer note 2.31(c) for advance to Key managerial personnel

2.12 SHARE CAPITAL

Particulars	As at 31 March 2026	As at 31 March 2025
Authorised		
150,000,000 (31 March 2025: 150,000,000) equity shares of ₹ 10 each	1,500.00	1,500.00
	1,500.00	1,500.00
Issued, subscribed and paid-up		
101,559,156 (31 March 2025: 101,551,673) equity shares of ₹ 10 each, fully paid-up	1,015.59	1,015.52
	1,015.59	1,015.52

a) Reconciliation of equity shares outstanding at the beginning and at the end of the year :

Particulars	As at 31 March 2026		As at 31 March 2025	
	Number of shares	Amount	Number of shares	Amount
Equity shares of ₹ 10 each, fully paid-up				
At the commencement of the year	101,551,673	1,015.52	101,501,687	1,015.02
Add: Shares issued during the year	7,483	0.07	49,986	0.50
At the end of the year*	101,559,156	1,015.59	101,551,673	1,015.52

* for details of shares reserved for issue under the share based payment plan of the group. Refer note 2.45

b) Term/Rights attached to equity shares :

The Holding Company has a single class of equity shares of face value ₹ 10 each, fully paid up. Accordingly, all equity shares rank equally with regard to dividends and share in the Holding Company's residual assets. The equity shares are entitled to receive dividend as declared from time to time subject to payment of dividend to preference shareholders. Each holder of equity shares is entitled to one vote per share. The Holding Company declares and pays dividends in Indian Rupees.

Notes to the Consolidated Financial Statements

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.12 SHARE CAPITAL (continued)

On liquidation of the Holding Company, the holders of equity shares will be entitled to receive the residual assets of the Holding Company, remaining after distribution of all preferential amounts in proportion to the number of equity shares held.

c) Particulars of shareholders holding more than 5% shares of a class of shares:

Name of shareholder	As at 31 March 2026		As at 31 March 2025	
	Number of shares	%	Number of shares	%
(i) Equity shares of ₹ 10 each, fully paid-up held by:				
- Dr. Ramesh Kancharla	31,517,431	31.03%	31,517,431	31.04%
- Dr. Dinesh Kumar Chirla	6,633,310	6.53%	6,633,310	6.53%
- Dr. Adarsh Kancharla	6,110,432	6.02%	6,110,432	6.02%
- ICICI Prudential Asset Management Company Limited	5,267,872	5.19%	-	0.00%
- Kancharla Family Trust	5,205,700	5.13%	5,205,700	5.13%
	54,734,745	53.89%	49,466,873	48.71%

As per records of the Holding Company, including its register of shareholder/members and other declarations received from shareholder regarding beneficial interest, the above shareholding represents both legal and beneficial ownership of shares.

d) During the five years immediately preceding the reporting date, no shares have been bought back, issued for consideration other than cash other than disclosed below:

During the year ended 31 March 2022, 48,167,004 equity shares of ₹ 10 each, fully paid up of the Holding Company have been allotted as bonus shares by capitalisation of securities premium.

e) Shareholding of promoters

As at 31 March 2026

Promoter Name	Number of shares at the beginning of the year	Change during the year	Number of shares at the end of the year	% of total shares	% change during the year
Equity shares:					
Dr Ramesh Kancharla	31,517,431	-	31,517,431	31.03%	-
Dr Dinesh Kumar Chirla	6,633,310	-	6,633,310	6.53%	-
Dr Adarsh Kancharla	6,110,432	-	6,110,432	6.02%	-
Kancharla Family Trust	5,205,700	-	5,205,700	5.13%	-
Total	49,466,873	-	49,466,873	48.71%	0.00%

As at 31 March 2025

Promoter Name	Number of shares at the beginning of the year	Change during the year	Number of shares at the end of the year	% of total shares	% change during the year
Equity shares:					
Dr Ramesh Kancharla	31,494,654	22,777	31,517,431	31.04%	0.01%
Dr Dinesh Kumar Chirla	6,633,310	-	6,633,310	6.53%	-
Dr Adarsh Kancharla	6,110,432	-	6,110,432	6.02%	-
Kancharla Family Trust	5,179,200	26,500	5,205,700	5.13%	0.03%
Total	49,417,596	49,277	49,466,873	48.72%	0.04%

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.13 OTHER EQUITY

Particulars	Securities premium	General reserve	Share Options outstanding account	Capital reserve	Treasury Shares	Retained earning	Total other equity
Balance as at 01 April 2024	3,986.96	43.89	96.58	8.95		7,437.88	11,574.26
Profit for the year	-	-	-	-		2,434.24	2,434.24
Employee share based payment expenses (refer note 2.45)	43.11	-	(79.73)	-		-	(36.62)
Appropriations/Adjustments:							
Final dividend on equity shares for the period ended 31 March 2024 i.e. ₹ 3 per share	-	-	-	-		(304.64)	(304.64)
Remeasurement of defined benefit liability (net of tax effect)	-	-	-	-		(0.83)	(0.83)
Balance as at 31 March 2025	4,030.07	43.89	16.85	8.95	-	9,566.65	13,666.41

Particulars	Securities premium	General reserve	Share Options outstanding account	Capital reserve	Treasury Shares	Retained earning	Total other equity
Balance as at 01 April 2025	4,030.07	43.89	16.85	8.95	-	9,566.65	13,666.41
Profit for the year	-	-	-	-	-	2,783.23	2,783.23
Employee share based payment expenses (refer note 2.45)	7.96	-	21.16	-	-	-	29.12
NCI on the date of acquisition (refer note 2.49)						(488.88)	(488.88)
Appropriations/Adjustments:							
Final dividend on equity shares for the period ended 31 March 2025 i.e. ₹ 3 per share	-	-	-	-	-	(304.65)	(304.65)
Purchase of treasury shares	-	-	-	-	(212.96)	-	(212.96)
Remeasurement of defined benefit liability (net of tax effect)	-	-	-	-	-	(7.12)	(7.12)
Balance as at 31 March 2026	4,038.03	43.89	38.01	8.95	(212.96)	11,549.23	15,465.15

Nature and purpose

Securities premium

Securities premium is used to record the premium received on issue of shares. It is utilised in accordance with the provisions of the Companies Act, 2013.

General reserve

The general reserve is a free reserve which is used from time to time to transfer profits from retained earnings. As the general reserve is created by a transfer from one component of equity to another and is not an item of other comprehensive income, items included in the general reserve will not be reclassified subsequently to statement of profit and loss.

Retained earning

Retained earnings are the profits that the Company has earned till date, less any transfers to general reserve, dividends, or other distributions paid to shareholders. It includes impact of remeasurement gain/ (losses) net of taxes on defined benefit plans on account of changes in actuarial assumptions or experience adjustments within the plans.

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.13 OTHER EQUITY (continued)

Treasury Shares

The reserve for shares of the Company held by the Rainbow Employees Welfare Trust (ESOP Trust). The Company has issued employees stock option scheme for its employees. The shares of the Company have been purchased and held by ESOP Trust to issue and allot to employees at the time of exercise of ESOP by Employees.

Capital reserve

The Group has acquired a subsidiary through business combination resulting in bargain purchase.

Share options outstanding account

The share options outstanding account is used to recognise the value of equity settled share based payments provided to employees under Employee Stock Unit Plan 2023 and ESOP scheme 2025 (refer note : 2.45).

2.13 (a) DIVIDEND

Distribution made and proposed

Particulars	31 March 2026	31 March 2025
Dividends on equity shares declared and paid:		
Final dividend for the year ended 31 March 2025: ₹3 per share (31 March 2024: Rs 3 per share)	304.65	304.64
	304.65	304.64
Proposed dividends on Equity shares:		
Proposed dividend for the year ended 31 March 2026: ₹ 3.50 per share (31 March 2025: Rs 3 per share)	355.46	304.65
	355.46	304.65

The Board of Directors of the Company, at its meeting held on 23 May 2026, have proposed a final dividend of ₹ 3.50 per Equity Share having face value of ₹10 each aggregating to ₹ 355.46 million for the financial year ended 31 March 2026. The proposal is subject to the approval of the shareholders at the forthcoming Annual General Meeting. Final dividend is accounted in the year in which it is approved by the shareholders.

2.14 PROVISIONS (NON-CURRENT)

Particulars	As at 31 March 2026	As at 31 March 2025
Provision for employee benefits		
- Gratuity (refer note 2.30(b))	128.20	76.30
- Compensated absences	31.33	20.95
	159.53	97.25

2.15 TRADE PAYABLES

Particulars	As at 31 March 2026	As at 31 March 2025
Trade payables		
- total outstanding dues to micro enterprises and small enterprises (MSME) (refer note 2.36)	295.89	102.02
- total outstanding dues to creditors other than micro enterprises and small enterprises	709.79	740.20
	1,005.68	842.22

The Group's exposure to liquidity and currency risk and loss allowances related to trade payables are disclosed in note 2.39.

Trade payables are non-interest bearing and are normally settled on 30 to 45 days terms.

Refer note 2.31(c) for related party balances.

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.15 TRADE PAYABLES (continued)

Trade payables ageing schedule

As at 31 March 2026

Particulars	Current but not due	Not due	Outstanding for following periods from due date of payment				Total
			Less than 1 year	1-2 years	2-3 years	More than 3 years	
i) Undisputed dues of micro enterprises and small enterprises (refer note 2.36)	163.02	-	128.30	2.29	1.30	0.98	295.89
ii) Undisputed dues of creditors other than micro enterprises and small enterprises	398.64	-	306.25	-	0.90	4.00	709.79
iii) Disputed dues of micro enterprises and small enterprises	-	-	-	-	-	-	-
iv) Disputed dues of creditors other than micro enterprises and small enterprises	-	-	-	-	-	-	-
Total	561.66	-	434.55	2.29	2.20	4.98	1005.68

As at 31 March 2025

Particulars	Current but not due	Not due	Outstanding for following periods from due date of payment				Total
			Less than 1 year	1-2 years	2-3 years	More than 3 years	
i) Undisputed dues of micro enterprises and small enterprises (refer note 2.36)	-	-	99.93	1.53	0.09	0.47	102.02
ii) Undisputed dues of creditors other than micro enterprises and small enterprises	237.85	-	492.02	5.19	3.33	1.81	740.20
iii) Disputed dues of micro enterprises and small enterprises	-	-	-	-	-	-	-
iv) Disputed dues of creditors other than micro enterprises and small enterprises	-	-	-	-	-	-	-
Total	237.85	-	591.95	6.72	3.42	2.28	842.22

2.16 OTHER FINANCIAL LIABILITIES (NON CURRENT)

Particulars	As at 31 March 2026	As at 31 March 2025
Liability for put option with non controlling interest	434.07	-
	434.07	-

NCI Put Option liability

Liability for put options issued to non-controlling interests which do not grant present access to ownership interest to us is recognized at the present value of the redemption amount and is reclassified from equity. At the end of each reporting period, the non-controlling interests subject to the put option is derecognized and the difference between the amount derecognized and present value of the redemption amount, which is recorded as a financial liability, is accounted for as an equity transaction.

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

Movement of liability for put option with non controlling interests :

Particulars	As at 31 March 2026	As at 31 March 2025
Balance at the beginning of the year	-	-
Addition on account of acquisition	-	-
Add: transfer from non controlling interest	434.07	-
Add: Fair value through other equity	-	-
Balance at the end of the year	434.07	-

2.16 OTHER FINANCIAL LIABILITIES

Particulars	As at 31 March 2026	As at 31 March 2025
Employee benefit payables [^]	102.08	89.03
Creditors for capital goods	143.52	85.69
Other payables	14.00	3.22
Unpaid dividend	0.05	0.13
	259.65	178.07

[^] Refer note 2.31(c) for related party balances.

The Group's exposure to liquidity risk related to other financial liabilities are disclosed in note 2.39.

2.17 PROVISIONS (CURRENT)

Particulars	As at 31 March 2026	As at 31 March 2025
Provision for employee benefits		
Gratuity (refer note 2.30 (b))	27.04	36.20
Compensated absences	22.23	28.82
	49.27	65.02
Provision for claims, other than taxes*	1.94	1.94
	51.21	66.96
*Movement in provision for claims, other than taxes:		
Opening balance	1.94	1.94
Add: Addition during the year	-	-
Less: Utilisation/ reversal during the year	-	-
Closing balance	1.94	1.94

Provision for claims, other than taxes represents claims pending before Courts and based on Management's estimate of claims, provision is made on prudent basis that possible outflow of resources may arise in future.

2.18 CURRENT TAX LIABILITIES (NET)

Particulars	As at 31 March 2026	As at 31 March 2025
Provision for taxation (net of advance tax)	0.50	-
	0.50	-

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.19 OTHER CURRENT LIABILITIES

Particulars	As at 31 March 2026	As at 31 March 2025
Contract liabilities (advance from patients) (refer note. 2.42)	49.84	41.17
Liability towards corporate social responsibility	119.80	67.46
Statutory liabilities	114.50	90.82
	284.14	199.45

2.20 REVENUE FROM OPERATIONS

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Income from medical and healthcare services		
- Revenue from hospital services (refer note 2.42)	14,485.73	13,149.59
- Revenue from pharmacy sales (refer note 2.42)	2,042.85	1,531.01
- Revenue from medical service fee (refer note 2.42)	248.51	269.48
	16,777.09	14,950.08
Other operating income		
- Cord blood extraction	16.76	22.58
- Canteen income	18.50	28.23
- Sale of baby products	-	81.56
- Others	218.42	76.21
	253.68	208.58
Total revenue from operations	17,030.77	15,158.66

2.21 OTHER INCOME

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Interest income on financial assets carried at amortised cost		
- Bank deposits	79.89	109.25
- Loans	17.30	17.30
- Other financial assets carried at amortised cost	19.08	17.74
- Income tax refund	-	3.65
Gain on redemption of mutual funds (net)	246.82	78.53
Net gain on financial assets measured at fair value through profit or loss	57.44	281.02
Liabilities no longer required written back	4.73	1.68
Gain on sale of property, plant & equipment (net)	11.98	0.80
Foreign exchange gain (net)	0.64	-
Other non-operating income	-	0.11
	437.88	510.08

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.22 COST OF MATERIALS CONSUMED

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Inventory at the beginning of year	275.69	239.78
Add: Purchases during the year	2,410.94	1,985.11
Less: Closing inventory	(416.34)	(275.69)
	2,270.29	1,949.20

2.23 EMPLOYEE BENEFITS EXPENSE *

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Salaries, wages and bonus	2,116.27	1,888.91
Contribution to provident and other funds (refer note 2.30(a))	103.29	88.24
Gratuity expense (refer note 2.30(C)(i))	29.93	47.00
Employee share based payment expenses (refer note 2.45) #	29.12	(12.71)
Staff welfare expenses	56.69	52.23
	2,335.30	2,063.67

* Net of amount capitalised (refer note 2.38)

During the previous year, the Holding Company has reversed Employee share based payment expense towards unvested options of ₹52.05 million accounted in earlier previous year pursuant to resignation of Chief Operating Officer.

2.24 FINANCE COSTS *

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Interest expense on lease liabilities (refer note 2.32)	776.17	724.55
	776.17	724.55

* Net of amount capitalised (refer note 2.38)

2.25 DEPRECIATION AND AMORTISATION EXPENSE

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Depreciation on property, plant and equipment (refer note 2.1(a))	916.52	859.84
Amortisation of intangible assets (refer note 2.1(c))	51.04	24.03
Depreciation of right-of-use assets (refer note 2.32) *	538.14	500.53
	1,505.70	1,384.40

* Net of amount capitalised (refer note 2.38)

2.26 (i) PROFESSIONAL FEES TO DOCTORS

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Professional fees to doctors	4,188.10	3,690.21
	4,188.10	3,690.21

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.26 (ii) OTHER EXPENSES *

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Hospital maintenance	74.06	71.58
Canteen expenses	272.06	271.05
Contract wages	487.94	400.66
Housekeeping expenses	87.39	82.27
Power and fuel	288.46	277.21
Lab and investigations	167.30	171.99
Repairs and maintenance		
- Plant and equipment	104.97	108.20
- Others	238.18	219.48
Rent (refer note 2.32)	44.45	22.49
Rates and taxes	198.02	168.39
Business promotion and advertisement	271.06	309.44
Travelling and conveyance	60.17	50.74
Printing and stationery	86.59	87.78
Bad debts written off	0.51	1.73
Advances written off	-	0.10
Allowance for expected credit loss	53.30	7.31
Communication expenses	120.61	121.13
Insurance	21.88	16.56
Professional and consultancy	88.41	46.99
Audit fees (refer note 2.34)	8.20	9.97
Directors sitting fees	5.81	4.48
Donations	0.12	-
Corporate social responsibility (refer note 2.37)	56.70	51.52
Bank charges	42.72	43.56
Unrealised foreign exchange loss (net)	-	0.14
Miscellaneous expenses	16.50	11.93
	2,795.41	2,556.70

* Net of amount capitalised (refer note 2.38)

2.27 TAX EXPENSE (net)

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Amounts recognised in the Statement of Profit and Loss		
Current tax	964.79	873.08
Adjustment of tax related to earlier periods	(3.46)	19.85
Deferred tax credit	(194.48)	(35.19)
	766.85	857.74
Amounts recognised in other comprehensive income		
Deferred tax credit	2.41	0.37
	2.41	0.37
Amounts recognised in the Statement of Profit and Loss	764.44	857.37

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.27 TAX EXPENSE (net) (continued)

a. Reconciliation of effective tax rate

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Profit before tax	3,582.29	3,300.01
Enacted tax rate	25.17%	25.17%
Tax expense at enacted rates	901.59	830.55
80JJAA deduction	(8.22)	(7.88)
Expenses not deductible for tax	16.45	14.96
Adjustment of tax related to earlier periods	(3.46)	19.85
Deferred tax recognised in other comprehensive income	(2.41)	(0.37)
Deferred tax recognised on accumulated unabsorbed losses and depreciation of Rosewalk Healthcare Private Limited	(104.14)	-
Others	(35.37)	0.25
	764.44	857.37

b. The following table provides the details of non-current tax assets and current tax liabilities:

Particulars	As at 31 March 2026	As at 31 March 2025
Non-current tax assets (net)	158.23	103.68
Current tax liabilities (net)	(0.50)	-
Net non-current tax assets at the end of the year	157.73	103.68

c. The gross movement in the net non-current tax assets is as follows:

Particulars	As at 31 March 2026	As at 31 March 2025
Net non-current tax assets at the beginning of the year	103.68	140.68
Income tax paid	1,015.38	855.93
Income tax expense for the year	(964.79)	(873.08)
Adjustment of tax related to earlier periods	3.46	(19.85)
Net non-current tax assets at the end of the year	157.73	103.68

d. Recognition of deferred tax assets and liabilities

(i) Deferred tax assets and liabilities are attributable to the following

Particulars	As at 31 March 2026	As at 31 March 2025
Deferred tax liability		
Property, plant and equipment	226.29	238.72
Fair value gain on mutual funds	100.66	83.44
Total deferred tax liability	326.95	322.16
Deferred tax asset		
Loss allowance on receivables	33.43	37.36
Provision for employee benefits	52.66	40.45
Provision for bonus	6.10	6.04

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.27 TAX EXPENSE (net) (continued)

Particulars	As at 31 March 2026	As at 31 March 2025
Lease liabilities (net of right-of-use of assets)	637.20	534.20
Unabsorbed losses and depreciation	90.34	-
Total deferred tax asset	819.73	618.05
Net deferred tax asset	492.78	295.89
Deferred tax asset	500.70	
Net deferred tax liability	7.92	

(ii) Movement in temporary differences

Particulars	Balance as at 01 April 2025	Recognised in standalone statement of profit or loss during the year	Recognised in OCI	Balance as at 31 March 2026
Loss allowance on receivables	37.36	(3.93)	-	33.43
Provision for employee benefits	40.45	9.80	2.41	52.66
Provision for bonus	6.04	0.06	-	6.10
Lease liabilities (net of right-of-use of assets)	534.20	103.00	-	637.20
Property, plant and equipment	(238.72)	12.43	-	(226.29)
Unabsorbed losses and depreciation	-	90.34	-	90.34
Fair value gain on mutual funds	(83.44)	(17.22)	-	(100.66)
	295.89	194.48	2.41	492.78

Particulars	Balance as at 01 April 2024	Recognised in standalone statement of profit or loss during the year	Recognised in OCI	Balance as at 31 March 2025
Loss allowance on receivables	35.40	1.96	-	37.36
Provision for employee benefits	31.67	8.41	0.37	40.45
Provision for bonus	11.48	(5.44)	-	6.04
Lease liabilities (net of right-of-use of assets)	452.66	81.54	-	534.20
Property, plant and equipment	(256.04)	17.32	-	(238.72)
Fair value gain on mutual funds	(14.84)	(68.60)	-	(83.44)
	260.33	35.19	0.37	295.89

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.28 CONTINGENT LIABILITIES

Particulars	As at 31 March 2026	As at 31 March 2025
(i) Demands under dispute		
- Income-tax matters	3.65	-
- Goods and services tax	25.07	100.56
- Luxury tax demand under dispute	18.55	18.55
(ii) Claims against the Group not acknowledged as debt (Medico-legal) *	200.00	145.82
	247.27	264.93

* The Group is involved in the disputes, law suites, claims from patients/patient relatives that arise from time to time in ordinary course of business. Based on external legal advise, management believes none of the matters, either in individual or in aggregate will have any material effect on its consolidated financial statements, as the management believes it has a reasonable case in its defence of proceedings and hence, no provision is recognised in the consolidated financial statements.

The Group is subject to legal proceedings and claims, which have arisen in the ordinary course of business including litigation before tax authorities and including matters mentioned above. The uncertainties and possible reimbursements are dependent on the outcome of the different legal processes which have been invoked by the claimants or the Group, as the case may be, and therefore cannot be predicted accurately. The Group engages reputed professional advisors to protect its interests and has been advised that it has strong legal positions against such disputes. The Management believes that it has a reasonable case in its defence of the proceedings and accordingly no further provision is required.

2.29 CAPITAL COMMITMENTS

Particulars	As at 31 March 2026	As at 31 March 2025
- Estimated amount of contracts remaining to be executed on capital account and not provided for (net of advances)#	1,766.33	560.61

represents capital commitments towards on going projects at Gurgaon, Coimbatore etc.

2.30 EMPLOYEE BENEFIT PLANS

The employee benefit schemes are as under:

(a) Defined contribution benefit plans

The Group makes contributions, determined as a specified percentage of employee salaries, in respect of qualifying employees towards Provident fund and Employee state insurance (ESI), which is a defined contribution plan. The contribution is charged to the Statement of consolidated profit and loss as they accrue. The amount recognised as an expense towards contribution to Provident fund and ESI for the year ended 31 March 2026 amounts to ₹ 98.03 million and ₹ 5.26 million respectively (31 March 2025: ₹ 83.13 million and ₹ 5.11 million respectively) (refer note 2.23).

(b) Defined benefit plans

The Group provides its employees with benefits under a defined benefit plan, referred to as the "Gratuity Plan". The Gratuity Plan entitles an employee, who has rendered at least five years of continuous service, to receive 15 days' salary for each year of completed service (service of six months and above is rounded off as one year) at the time of retirement/exit, restricted to a sum of ₹ 2.00 million. The Holding company contributes all ascertained liabilities towards gratuity to the Fund. The plan assets have been primarily invested in insurer managed funds. The Group's obligation in respect of gratuity plan, which is a defined benefit plan is provided for based on actuarial valuation carried out by an independent actuary using the projected unit credit method.

The following table sets out the status of the funded gratuity plan as required under Ind AS 19 "Employee Benefits"

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.30 EMPLOYEE BENEFIT PLANS (continued)

- A. Based on the actuarial valuation obtained in this respect, the following table sets out the status of the gratuity plan and the amounts recognised in the Company's consolidated financial statements as at the balance sheet date :**

Particulars	As at 31 March 2026	As at 31 March 2025
Defined benefit obligation	161.07	117.54
Fair value of plan assets	(5.83)	(5.04)
Net defined benefit obligation	155.24	112.50
Provisions (current) (Refer note 2.17)	27.04	36.20
Provisions (non-current) (Refer note 2.14)	128.20	76.30

B. Reconciliation of net defined benefit obligation:

The following table shows a reconciliation from the opening balances to the closing balances for the net defined benefit obligation, plan assets and its components:

i. Reconciliation of present value of defined benefit obligation:

Particulars	As at 31 March 2026	As at 31 March 2025
Defined benefit obligation as at beginning of the year	117.54	81.15
Current service cost	22.96	17.23
Past service cost	15.59	25.03
Interest cost	7.11	5.02
Actuarial gains recognised in other comprehensive income	10.04	0.73
Benefits paid	(12.17)	(11.61)
Defined benefit obligation at the end of the year	161.07	117.54

ii. Reconciliation of fair value of plan assets

Particulars	As at 31 March 2026	As at 31 March 2025
Fair value of plan assets as at the beginning of the year	5.04	5.00
Contributions paid in to the plan	11.70	11.24
Interest on plan assets	0.34	0.29
Return on plan assets less interest on plan assets	0.45	(0.25)
Benefits paid	(11.70)	(11.24)
Fair value of plan assets as at the end of the year	5.83	5.04

C. (i) Gratuity expense recognised in the statement of profit and loss:

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Current service cost	22.96	17.23
Past service cost	15.59	25.03
Interest on defined benefit liability/(asset)	6.77	4.74
Gratuity expenses, included in employee benefit expenses	45.32	47.00

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for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.30 EMPLOYEE BENEFIT PLANS (continued)

C. (ii) Re-measurements recognised in other comprehensive income

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Actuarial (gain)/loss on defined benefit obligation		
- Actuarial loss/(gain) arising from change in financial assumptions	2.79	0.80
- Actuarial gain arising from change in demographic assumptions	0.32	(3.10)
- Actuarial gain arising on account of experience changes	6.92	3.03
- Actual return on plan assets less interest on plan assets	(0.45)	0.25
Actuarial gain recognised in other comprehensive income	9.58	0.98

D. Plan assets

Plan assets comprises of the following :

Particulars	As at 31 March 2026	As at 31 March 2025
Fund managed by insurer	5.83	5.04

E. Defined benefit obligation

Actuarial assumptions at balance sheet date:

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Discount rate	6.90% p.a	6.90% p.a
Salary escalation rate	8% p.a	8% p.a
Attrition rate		
Nursing staff		46.11% p.a
Paramedical staff		27.92% p.a
Patient care services		44.8% p.a
Administration		36.12% p.a
Support staff		33.65% p.a
Nursing staff : Upto 5 years	43.00% p.a.	
Nursing staff : Above 5 years	18.00% p.a.	
Paramedical staff : Upto 5 years	32.00% p.a.	
Paramedical staff : Above 5 years	14.00% p.a.	
Patient care services staff : Upto 5 years	48.00% p.a.	
Patient care services staff : Above 5 years	12.00% p.a.	
Administration staff : Upto 5 years	35.00% p.a.	
Administration staff : Above 5 years	8.00% p.a.	
Support staff : Upto 5 years	44.00% p.a.	
Support staff : Above 5 years	17.00% p.a.	
Sales and Marketing : Upto 5 years	80.00% p.a.	
Sales and Marketing : Above 5 years	41.00% p.a.	
Operations : Upto 5 years	45.00% p.a.	
Operations : Above 5 years	13.00% p.a.	
Retirement Age	58 years	58 years

Maturity profile of defined benefit obligation

Particulars	As at 31 March 2026	As at 31 March 2025
1 st following year	32.86	41.24
Year 2 to 5	90.91	79.73
Year 6 to 9	47.78	18.62
For 10 years and above	68.40	4.99

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.30 EMPLOYEE BENEFIT PLANS (continued)

Discount rate: The discount rate is based on the prevailing market yields of Indian government securities as at the balance sheet date for the estimated term of the obligations.

Salary escalation rate: The estimates of future salary increases considered takes into account the inflation, seniority, promotion and other relevant factors.

Sensitivity analysis: Reasonably possible changes at the reporting date to one of the relevant actuarial assumptions, holding other assumptions constant would have affected the defined benefit obligation by the amounts shown below:

	As at 31 March 2026		As at 31 March 2025	
	Increase	Decrease	Increase	Decrease
Discount rate (50 bps movement)	156.55	165.23	115.96	119.17
Salary escalation rate (50 bps movement)	165.43	157.59	119.16	116.03

Expected contributions to the plan for the next annual reporting period

Expected contribution to post-employment benefit plans for the next year ending 31 March 2026 is ₹ 32.86 million.

The weighted average duration of the defined benefit obligation is 4.96 years (31 March 2025: 2.71 years)

2.31 RELATED PARTIES

a) Names of the related parties and description of relationship:

Key managerial personnel (KMP)	Dr. Ramesh Kancharla, Chairman and Managing Director
	Dr. Dinesh Kumar Chirla, Whole-Time Director
	Mr. Anil Dhawan, Independent Director
	Mr. Santanu Mukherjee, Independent Director
	Ms. Sundari Raviprasad Pisupati, Independent Director
	Mr. Aluri Srinivasa Rao, Independent Director
	Dr. Nageswar Rao Koneti, Director
	Mr. Ashish Kapil, Company Secretary (resigned w.e.f 14 December 2024)
	Mrs. Shreya Mitra, Company Secretary (appointed w.e.f. 9 February 2025)
	Mr. Vikas Maheshwari, Chief Financial Officer
	Mr. Sanjeev Sukumaran, Chief Operating Officer (resigned w.e.f. 30 October 2024)
	Mr. Abrarali Dalal, Chief Operating Officer (appointed w.e.f. 20 January 2026)
	Dr. Adarsh Kancharla, Non-Executive Director (appointed w.e.f 24 January 2024)
	Dr. Prashanthi Macha, Director (appointed w.e.f. 01 July 2024)
	Mr. Mohan Rao Tumu (resigned w.e.f. 09 July 2025)
Mrs. Bela Sharma, Director (resigned w.e.f. 18 August 2025)	
Dr. Pramod Kumar Sharma, Director (appointed w.e.f. 19 November 2024)	
Relative of key managerial personnel	Dr. Sai Aishwarya Chirla, Daughter of Dr. Dinesh Kumar Chirla
	Mr. Ramadhara Naidu Kancharla, brother of Dr. Ramesh Kancharla
Enterprises where key managerial personnel along with their relatives exercise significant influence	Ravindranath GE Medical Associates Private Limited
	Coras Pratiksha Orthopaedic Hospital - Partnership firm
	Pratiksha Medicare - Partnership firm
	Pratiksha Medicos - Partnership firm
	Structure and earthquake - Partnership firm
	Prathiksha Day Care Centre - Partnership firm
	Pratiksha Hospitals Private Limited
	Prashanthi Centre for Fertility Private Limited
Rainbow Children's Foundation	
Enterprises where relative of key managerial personnel is a member	Unimed Healthcare Private Limited

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.31 RELATED PARTIES (continued)

(b) Following is the summary of significant related party transactions during the year:

	For the year ended 31 March 2026	For the year ended 31 March 2025
Revenue from medical/ professional services rendered		
- Rainbow Children's Foundation	4.13	7.44
- Coras Pratiksha Orthopaedic Hospital - Partnership firm	15.50	-
- Unimed Healthcare Private Limited	0.59	1.31
Professional services received		
- Ravindranath GE Medical Associates Private Limited	0.25	1.56
- Unimed Healthcare Private Limited	27.75	40.77
Medical service fee paid		
- Ravindranath GE Medical Associates Private Limited	-	0.00
- Coras Pratiksha Orthopaedic Hospital - Partnership firm	4.07	-
Medical consumables and pharmacy items purchases		
- Pratiksha Medicos - Partnership firm	7.95	-
- Pratiksha Medicare - Partnership firm	4.45	-
- Prashanthi Centre for Fertility Private Limited	0.02	-
Housekeeping expenses		
- Structures and Earthquake - Partnership firm	1.80	-
Travel advance given to KMP		
- Dr. Ramesh Kancharla	2.65	2.32
- Mr. Vikas Maheshwari	1.65	-
- Mrs. Shreya Mitra	0.20	-
Professional charges to KMP		
- Dr. Dinesh Kumar Chirla	21.01	28.25
- Dr. Nageswar Rao Koneti	15.00	15.00
- Dr. Prashanthi Macha	5.40	-
- Dr. Pramod Kumar Sharma	0.24	-
Professional charges to relative of KMP		
- Dr. Sai Aishwarya Chirla	0.51	-
Issue of shares to KMP		
- Mr. Vikas Maheshwari	0.07	-
Remuneration to KMP*		
- Dr. Ramesh Kancharla	37.92	45.00
- Mr. Abrarali Dalal	6.97	-
- Mr. Vikas Maheshwari (including perquisites)	30.49	25.57
- Mr. Sanjeev Sukumaran (including perquisites)	-	69.15
- Mr. Ashish Kapil	-	3.10
- Mrs. Shreya Mitra	2.46	0.68
Project management consultancy fee to relative of KMP		
- Mr. Ramadhara Naidu Kancharla	6.00	6.00
Reimbursement of expenditure		
- Unimed Healthcare Private Limited	19.67	18.14
- Coras Pratiksha Orthopaedic Hospital - Partnership firm	0.59	-
- Mr. K Ramadhar Naidu	0.54	0.04

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.31 RELATED PARTIES (continued)

	For the year ended 31 March 2026	For the year ended 31 March 2025
Rental expenditure		
- Unimed Healthcare Private Limited	54.43	50.80
- Pratiksha Hospitals Private Limited	21.23	-
- Prathiksha Day Care Centre - Partnership firm	2.65	-
- Dr. Prashanthi Macha	11.25	-
- Dr. Pramod Kumar Sharma	0.57	-
Commission to Independent Directors		
- Mr. Aluri Srinivasa Rao	1.80	1.00
- Mr. Anil Dhawan	1.80	1.00
- Mrs. Sundari Raviprasad Pisupati	1.80	1.00
- Mr. Santanu Mukherjee	1.80	1.00
*The KMP's are covered by the Group's gratuity policy and are eligible for compensated absences along with other employees of the Group. The proportionate amount of gratuity and compensated absences cost pertaining to the KMP has not been included in the aforementioned disclosures as these are not determined on an individual basis.		
Sitting fees paid to Directors		
- Mr. Anil Dhawan	1.05	0.90
- Mr. Aluri Srinivasa Rao	1.18	0.70
- Mrs. Sundari Raviprasad Pisupati	1.48	0.95
- Mr. Santanu Mukherjee	1.88	1.30
- Dr. Adarsh Kancharla	0.25	0.40
Leave travel allowance to KMP		
- Dr. Ramesh Kancharla	-	0.80
- Dr. Dinesh Kumar Chirla	0.71	-
Dividend paid during the year		
- Dr. Ramesh Kancharla	94.55	94.48
- Dr. Dinesh Kumar Chirla	19.90	19.90
- Dr. Adarsh Kancharla	18.33	18.33
- Mr. Ramadhara Naidu Kancharla	0.18	0.18
- Mr. Vikas Maheshwari	0.02	-
- Mr. Ashish Kapil	-	0.00

*The KMP's are covered by the Group's gratuity policy and are eligible for compensated absences along with other employees of the Group. The proportionate amount of gratuity and compensated absences cost pertaining to the KMP has not been included in the aforementioned disclosures as these are not determined on an individual basis.

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.31 RELATED PARTIES (continued)

c) The Group has the following amounts due from/ to the related parties:

	As at 31 March 2026	As at 31 March 2025
Trade payables		
- Coras Pratiksha Orthopaedic Hospital - Partnership firm	0.29	-
- Pratiksha Medicos - Partnership firm	0.17	-
- Structures and Earthquake - Partnership firm	0.18	-
- Unimed Healthcare Private Limited	3.61	2.21
- Dr. Pramod Kumar Sharma	0.04	-
Trade receivables		
- Rainbow Children's Foundation	-	2.00
- Coras Pratiksha Orthopaedic Hospital - Partnership firm	5.81	
- Unimed Healthcare Private Limited	0.37	0.72
Travel advance to KMP		
- Dr. Ramesh Kancharla	1.31	2.65
- Mrs. Shreya Mitra	0.08	-
Sitting fees payable to Directors		
- Mrs. Sundari Raviprasad Pisupati	0.05	-
- Mr. Santanu Mukherjee	0.05	-
Commission payable to Independent Directors		
- Mr. Aluri Srinivasa Rao	1.80	1.00
- Mr. Anil Dhawan	1.80	1.00
- Mrs. Sundari Raviprasad Pisupati	1.80	1.00
- Mr. Santanu Mukherjee	1.80	1.00
Professional fee payable to KMP		
- Dr. Dinesh Kumar Chirla	2.52	2.81
- Dr. Nageswar Rao Koneti	1.25	1.25
- Dr. Prashanthi Macha	0.54	-
Professional charges payable		
- Dr. Sai Aishwarya Chirla	0.07	-
Project management consultancy fee		
- Mr. Ramadhara Naidu Kancharla	0.54	0.50
Rent Payable		
- Unimed Healthcare Private Limited	4.90	4.90
Rental Security Deposit		
- Dr. Prashanthi Macha	10.00	-
- Unimed Healthcare Private Limited	30.00	30.00

d) All transactions with these related parties are at arm's length basis and resulting outstanding receivables and payables including financial assets and financial liabilities balances are settled in cash. None of the balances are secured. (All the amounts of transactions and balances disclosed in this note are gross (net of GST) and undiscounted).

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for the year ended 31 March 2026

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2.32 LEASES

A The Group as a lessee entered into various lease agreements majorly for buildings (Major lease periods are between 3 to 20 years) the year is between and used the following practical expedients on first time adoption of Ind AS 116:

(a) Applied the exemption not to recognize right-of-use assets and liabilities for leases with less than 12 months of lease term.

(b) Used hindsight when determining the lease term if the contract contains options to extend or terminate the lease.

Right-of-use of assets

Particulars	Category of ROU Assets
	Buildings
Cost as at 01 April 2024	7,659.31
Additions	152.31
Disposals	(5.80)
Modification	(0.28)
Cost as at 31 March 2025 (A)	7,805.54
Cost as at 01 April 2025	7,805.54
Additions	1,485.12
Disposals	(0.04)
Modification	(0.47)
Cost as at 31 March 2026 (B)	9,290.15
Accumulated depreciation as at 01 April 2024	1,557.51
Depreciation charge for the year	500.53
Disposals	-
Depreciation capitalised (refer note 2.38)	2.17
Modification	-
Accumulated depreciation as at 31 March 2025 (C)	2,060.21
Accumulated depreciation as at 01 April 2025	2,060.21
Depreciation charge for the year	535.41
Disposals	-
Depreciation capitalised (refer note 2.38)	2.73
Modification	-
Accumulated depreciation as at 31 March 2026 (D)	2,598.34
Net carrying amounts	
As at 31 March 2026 (B-D)	6,691.81
As at 31 March 2025 (A-C)	5,745.33

B The following are the amounts recognised in Statement of Profit and Loss account:

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Depreciation expense on right-of-use of assets	538.14	500.53
Finance cost on lease liabilities	776.17	724.55
Expenses relating to short term leases (included in other expenses)	44.45	22.49
Total	1,358.76	1,247.57

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.32 LEASES (continued)

C Following is the movement in lease liabilities :

Particulars	As at 31 March 2026	As at 31 March 2025
Opening Balance	7,635.81	7,653.06
Additions	1,455.57	137.11
Finance cost	776.17	724.55
Finance cost capitalised (refer note 2.38)	0.64	0.90
Disposals	-	(6.21)
Payment of lease liabilities	(956.16)	(873.10)
Modification	(2.19)	(0.50)
Lease liability at the end of the year	8,909.84	7,635.81
Non-current lease liabilities	8,653.70	7,416.79
Current lease liabilities	256.14	219.02

D The following is the cash outflow on leases during the years:

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Payment of lease liabilities	956.16	873.10
Short-term lease expense	44.45	22.49
Total cash outflow on leases	1,000.61	895.59

E The table below provides details regarding the contractual maturities of lease liabilities as at year-end on an undiscounted basis:

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Less than 1 year	1,046.57	913.46
1 to 5 years	4,535.25	3,939.51
More than 5 years	11,253.70	9,552.44

The Group does not face a significant liquidity risk with regard to its lease liabilities as the current assets are sufficient to meet the obligations related to lease liabilities as and when they fall due.

2.33 SEGMENT REPORTING

The Group is engaged in the business of rendering medical and healthcare services.

Ind AS 108 "Operating Segment" establishes standards for the way that public business enterprises report information about operating segments and related disclosures about products and services, geographic areas, and major customers. As defined in Ind AS 108, Operating segments are to be reported in a manner consistent with the internal reporting provided to the Chief Operating Decision Maker (CODM) i.e. the Chairman and Managing Director. The CODM evaluates the Group's performance and allocates resources on overall basis. The Group's sole operating segment is therefore 'Medical and Healthcare Services'. Accordingly, there are no additional disclosures to be provided under Ind AS 108 other than those already provided in the consolidated financial statements.

Further the business operation of the Group are concentrated in India, and hence, the Group is considered to operate only in one geographical segment. There are no individual customer contributing more than 10% of Group's total revenue.

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.34 AUDIT FEES (EXCLUDING GST)

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
As an auditor		
- Statutory audit fees	3.50	3.30
- Limited review	3.00	2.70
- Other services	-	2.00
- Reimbursement of expenses	0.45	0.45
Total	6.95	8.45

2.35 EARNINGS PER SHARE (EPS):

The earnings per share has been computed as under:

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Profit for the year (After adjusting Non-Controlling Interest) (A)	2,783.23	2,434.24
Add: Employee share based payment expenses (net of tax) (refer note 2.23)	21.79	(9.51)
Profit attributable to equity shareholders (After adjusting Non-Controlling Interest) (B)	2,805.02	2,424.73
Shares		
Number of equity shares at the beginning of the year	101,551,673	101,501,687
Add: Number of shares issued on exercise of employee stock options	7,483	49,986
Less: Number of treasury shares outstanding during the year	(180,000)	
Total number of equity shares outstanding at the end of the year	101,379,156	101,551,673
Weighted average number of equity shares outstanding at the end of year – Basic	101,538,617	101,536,429
Number of equity shares at the end of year (C)	101,538,617	101,536,429
Effect of potential equity shares on employee stock options outstanding (D)	36,270	175,050
Weighted average number of equity shares outstanding during the year – Diluted (E = C+D)	101,574,887	101,711,479
Earnings per share		
Earnings per share of par value ₹ 10 - Basic (₹) (A/C)	27.41	23.97
Earnings per share of par value ₹ 10 - Diluted (₹) (B/E)	27.41	23.84

Note: During the current year, employee stock options were not included in the calculation of diluted earnings per share because they are antidilutive for the year.

2.36 DETAILS OF DUES TO MICRO AND SMALL ENTERPRISES AS DEFINED UNDER MICRO, SMALL AND MEDIUM ENTERPRISES DEVELOPMENT ACT, 2006 ('MSMED ACT')

The Ministry of Micro, Small and Medium Enterprises has issued an Office Memorandum dated 26 August 2008 which recommends that the Micro and Small Enterprises should mention in their correspondence with its customers the Entrepreneurs Memorandum Number as allocated after filing of the Memorandum. Accordingly, the disclosure in respect of the amounts payable to such enterprises as at 31 March 2026 has been made in the Consolidated Financial Statements based on information received and available with the Group. The Group has not received any claim for interest from any supplier under the said MSMED Act.

Notes to the Consolidated Financial Statements

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2.36 DETAILS OF DUES TO MICRO AND SMALL ENTERPRISES AS DEFINED UNDER MICRO, SMALL AND MEDIUM ENTERPRISES DEVELOPMENT ACT, 2006 ('MSMED ACT') (continued)

Particulars	As at 31 March 2026	As at 31 March 2025
(a) the principal amount and the interest due thereon remaining unpaid to any supplier at the end of each accounting year;		
- Principal amount due to Micro and Small Enterprises	295.89	102.02
- Interest due on above	-	-
(b) the amount of interest paid by the buyer in terms of section 16 of the Micro, Small and Medium Enterprises Development Act, 2006, along with the amount of the payment made to the supplier beyond the appointed day;	-	-
(c) the amount of interest due and payable for the period of delay in making payment (which have been paid but beyond the appointed day during the year) but without adding the interest specified under the Micro, Small and Medium Enterprises Development Act, 2006;	-	-
(d) the amount of interest accrued and remaining unpaid; and	-	-
(e) the amount of further interest remaining due and payable even in the succeeding years, until such date when the interest dues above are actually paid to the small enterprise, for the purpose of disallowance of a deductible expenditure under section 23 of the Micro, Small and Medium Enterprises Development Act, 2006.	-	-

This information is required to be disclosed under the Micro, Small and Medium Enterprises Development Act, 2006 and has been determined to the extent such parties have been identified on the basis of information available with the Group.

The Group's exposure to currency and liquidity risks related to trade payables is disclosed in note 2.39.

2.37 CORPORATE SOCIAL RESPONSIBILITY

As per Section 135 of the Companies Act, 2013, a CSR committee has been formed by the Holding Company. The proposed areas for CSR activities, as per the CSR policy of the Holding Company are promotion of education and sports, rural development activities, medical facilities, and ensuring environmental sustainability which are specified in Schedule VII of the Companies Act, 2013.

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Details of Corporate social responsibility expenditure		
(i) Gross amount required to be spent by the Group during the year	56.70	51.52
(ii) Amount approved by the Board to be spent during the year	56.70	51.52
(iii) Amount spent during the year (in cash)		
- construction/ acquisition of any asset	-	-
- on purpose other than above	10.57	5.86
(iv) Amount spent during the year (yet to be paid in cash)*		
- construction/ acquisition of any asset	-	-
- on purpose other than above	46.13	45.66
(v) (Shortfall) / Excess at the end of the year	-	-
(vi) Total of previous years shortfall	-	-
(vii) Contribution to a trust controlled by the Holding Company in relation to CSR expenditure	8.77	5.86
(viii) Where a provision is made with respect to a liability incurred by entering into a contractual obligation, the movements in the provision during the year should be shown separately	NA	NA

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for the year ended 31 March 2026

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2.37 CORPORATE SOCIAL RESPONSIBILITY (continued)

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
(ix) Reason for shortfall For the year ending 31 March 2026 and 31 March 2025 :	NA	NA
(x) Nature of CSR activities:		
a) Promotion of education and sports	2.00	2.00
b) Rural development activities and training for women	6.77	3.76
c) Promotion of medical facilities	-	0.10
d) Administrative overheads	1.80	-
e) Transferred to unspent CSR account (on-going project)*	46.13	45.66

* Consequent to the Companies (Corporate Social Responsibility Policy) Amendment Rules 2021 ("the Rules"), the Holding Company has transferred the unspent amount of ₹ 46.13 million (31 March 2025 : ₹ 45.66 million) to a separate bank account subsequent to the balance sheet date under section 135 read with rules of Companies (CSR Policy) Rules, 2014.

In case of S. 135(6) (Ongoing Project)						
Opening Balance as at 1 April 2025		Amount required to be spent during the year	Amount spent during the year		Closing Balance as at 31 March 2026	
With Company	In Separate CSR Unspent A/c		From Company's bank A/c	From Separate CSR Unspent A/c	With Company	In Separate CSR Unspent A/c
-	67.46	56.70	10.57	-	-	113.59

In case of S. 135(6) (Ongoing Project)						
Opening Balance as at 1 April 2024		Amount required to be spent during the year	Amount spent during the year		Closing Balance as at 31 March 2025	
With Company	In Separate CSR Unspent A/c		From Company's bank A/c	From Separate CSR Unspent A/c	With Company	In Separate CSR Unspent A/c
-	21.80	51.52	5.86	-	-	67.46

2.38 INCIDENTAL EXPENDITURE CAPITALISED DURING THE CONSTRUCTION PERIOD

The Holding Company has capitalised the following expenses to the cost of property, plant and equipment, as they are directly attributable to bringing the asset to the location and condition necessary for it to be capable of operating in the manner intended by management. Consequently amounts disclosed under the respective notes are net of amounts capitalised by the Holding Company.

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Employee benefit expenses (A)	105.82	65.73
Finance cost (B)	0.64	0.90
Depreciation and amortisation (C)	2.73	2.17
Other expenses:		
Rent	2.38	-
Professional and consultancy	29.11	54.27
Travelling and conveyance	5.09	1.39
Power and fuel	4.63	0.26
Rates and taxes	-	20.27
Other expenses	27.34	6.16
Total (D)	68.55	82.35
Total (A+B+C+D)	177.74	151.15

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2.39 FINANCIAL RISK MANAGEMENT

Risk management framework

The Group's financial risk management is an integral part of how to plan and execute its business strategies. The Group's management risk policy is set by the Board of Directors. The Group's activities expose it to a variety of financial risks like credit risk, liquidity risk and market risk. The Group's primary focus is to foresee the unpredictability of financial markets and seek to minimize potential adverse effects on its financial performance. A summary of the risks have been given below:

Credit risk

Credit risk is the risk of financial loss to the Group if a customer or counterparty to a financial instrument fails to meet its contractual obligations, and arises principally from the Group's receivables from customers and loans given. Credit risk arises from cash held with banks, as well as credit exposure to trade receivables and other financial assets. The maximum exposure to credit risk is equal to the carrying value of the financial assets. The objective of managing counter party credit risk is to prevent losses in financial assets. The Group assesses the credit quality of the counterparties, taking into account their financial position, past experience and other factors.

Trade and other receivables

The Group's exposure to credit risk is influenced mainly by the individual characteristics of each customer. Trade receivables and unbilled revenue are typically unsecured and are derived from revenue earned from customers primarily located in India. The Group has a process in place to monitor outstanding receivables on a monthly basis. In monitoring customer credit risk, customers are grouped according to their credit characteristics, including government entities, insurance companies, corporates, individual and others. The default in collection as a percentage to total receivable is low.

The following table provides information about the exposure to credit risk and expected credit loss for trade receivables:

As at 31 March 2026

Age	Gross carrying amount	Weighted average loss rate	Allowance for expected credit loss
Less than 6 months	976.95	1.92%	18.79
6 months - 1 year	57.86	19.05%	11.02
1-2 years	47.53	53.00%	25.19
2-3 years	11.71	100.00%	7.22
More than 3 years	9.15	100.00%	9.18
	1,103.19		71.40

As at 31 March 2025

Age	Gross carrying amount	Weighted average loss rate	Allowance for expected credit loss
Less than 6 months	751.16	2.96%	22.21
6 months - 1 year	49.70	19.98%	9.93
1-2 years	24.65	82.59%	20.36
2-3 years	32.40	100.00%	32.40
More than 3 years	6.07	100.00%	6.07
	863.97		90.96

Management believes that the unimpaired amounts that are past due by more than six months are still collectible in full, based on historical payment behaviour and extensive analysis of customer credit risk.

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2.39 FINANCIAL RISK MANAGEMENT (continued)

Movement in allowance for impairment in respect of trade receivables is as follows:

Particulars	As at 31 March 2026	As at 31 March 2025
Balance at the beginning of the year	90.96	141.57
(Reversal)/provision for expected credit loss	53.30	7.31
Bad debts written-off out of opening	(23.56)	(8.62)
Provision for discounts and disallowances adjusted from gross receivables	(49.30)	(49.30)
Net remeasurement of provision	71.40	90.96

Cash and bank balances, loans and other financial assets

Cash and bank balances comprises of deposits with bank, interest accrued on deposits and other financial assets consists of security deposits. These deposits are held with credit worthy banks. The credit worthiness of such banks are evaluated by the Management on an ongoing basis and is considered to be good with low credit risk. Further, the Group maintains exposure in money market liquid mutual funds and loans. The Group has set counter-parties limits based on multiple factors including financial position, credit rating, etc. Loans are assessed on lifetime expected credit loss model and no impairment loss is anticipated. The Group's maximum exposure to credit risk as at 31 March 2026 and 31 March 2025 is the carrying value of each class of financial assets.

The security deposit pertains to rent deposit given to lessors. The Group does not expect any losses from non-performance by these counter-parties.

Liquidity risk

Liquidity risk is the risk that the Group will not be able to meet its financial obligations as they become due. The Group manages its liquidity risk by ensuring, that it will always have sufficient liquidity to meet its liabilities when due. The Group's Management is responsible for liquidity, funding as well as settlement Management.

The Group aims to maintain the level of its cash and cash equivalents and other highly marketable investments at an amount in excess of expected cash outflows on financial liabilities (other than trade payables) over the next six months. The Group also monitors the level of expected cash inflows on trade receivables and loans together with expected cash outflows on trade payables and other financial liabilities.

Following are the financial assets at the reporting date:

Particulars	As at 31 March 2026	As at 31 March 2025
Trade receivables (Refer note 2.8)	1,031.79	773.01
Cash and cash equivalents (refer note 2.9(a))	338.94	202.55
Bank balances other than cash and cash equivalents (refer note 2.9(b))	-	0.20
Investments (Refer note 2.7)	4,044.98	5,707.31
Other financial assets (Refer note 2.3(a) and 2.3(b))	1,929.67	1,374.44
Loans (Refer note 2.10(a) and 2.10(b))	315.02	327.72
Total	7,660.40	8,385.23

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2.39 FINANCIAL RISK MANAGEMENT (continued)

Following are the remaining contractual maturities of financial liabilities at the reporting date. The amounts are gross and undiscounted.

As at 31 March 2026

Particulars	Carrying Amount	Within 1 year	1-5 Years	More than five years	Total amount
Trade payables	1,005.68	1,005.68	-	-	1,005.68
Other financial liabilities	259.65	259.65	-	-	259.65
Lease liabilities (undiscounted)	8,909.84	1,046.57	4,535.25	11,253.70	16,835.52
Total	10,175.17	2,311.90	4,535.25	11,253.70	18,100.85

As at 31 March 2025

Particulars	Carrying Amount	Within 1 year	1-5 Years	More than five years	Total amount
Trade payables	842.22	842.22	-	-	842.22
Other financial liabilities	178.07	178.07	-	-	178.07
Lease liabilities (undiscounted)	7,635.81	913.46	3,939.51	9,552.44	14,405.41
Total	8,656.10	1,933.75	3,939.51	9,552.44	15,425.70

Market risk

Market risk is the risk that changes in market prices such as foreign exchange rates and interest rates will effect the Group's income or the value of its holdings of financial instruments. The objective of market risk management is to manage and control market risk exposures within acceptable parameters, while optimising the return.

Interest risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interests rate. Interest rate risk primarily arises from the investments with bank deposits and loans given.

The interest rate profile of the Group's interest bearing financial instruments is as follows:

Particulars	As at 31 March 2026	As at 31 March 2025
Fixed rate instruments (excluding interest accrued)		
Financial assets	1,725.68	1,249.88
Financial liabilities	8,909.84	7,635.81

Foreign currency risk

Foreign currency risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in foreign exchange rate. The majority of the Group's assets are located in India and Indian rupee being the functional currency for the Group. The Group's exposure to the risk of changes in foreign exchange rates relates primarily to operating activities.

The Group has advances from and payables to employees denominated in USD and GBP and is therefore exposed to foreign exchange risk. These foreign currency monetary items are unhedged. Exchange differences arising on settlement or translation are recognised in the Statement of Profit and Loss.

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.39 FINANCIAL RISK MANAGEMENT (continued)

Exposure to currency risk

The summary quantitative data about the Group's gross exposure to currency risk is as follows:

Particulars	Currency	As at 31 March 2026		As at 31 March 2025	
		Amount in foreign currency (in whole no's)	Amount in INR	Amount in foreign currency (in whole no's)	Amount in INR
Employee payables	USD	873	0.03	304	0.03
Advance to employees	USD	16,531	2.26	26,195	2.26
Advance to employees	GBP	-	-	5,562	0.59
Trade payables	USD	33,230	0.59	-	-

Sensitivity analysis:

A reasonably possible strengthening / (weakening) of the INR, against USD and GBP would have affected the measurement of financial instruments denominated in foreign currency and affected equity and profit or loss by the amounts shown below. This analysis assumes that all other variables, in particular interest rates, remain constant and ignores any impact of forecasts sales and purchases.

	Profit before tax		Equity, net of tax	
	Strengthening	Weakening	Strengthening	Weakening
31 March 2026				
USD (5% movement)	(0.14)	0.14	(0.11)	0.11
31 March 2025				
USD (5% movement)	(0.11)	0.11	(0.08)	0.08
GBP (5% movement)	(0.03)	0.03	(0.02)	0.02

Except for these financial liabilities, it is not expected that cash flows included in the maturity analysis could occur significantly earlier, or at significantly different amounts.

2.40 CAPITAL MANAGEMENT

The Group's policy is to maintain a stable and strong capital base so as to maintain investor, creditor and market confidence and to sustain future development of the business. Management monitors the return on capital, as well as the level of dividends to equity shareholders. The Group aims to manage its capital efficiently so as to safeguard its ability to continue as a going concern and to optimise returns to all its shareholders. For the purpose of the Group's capital management, capital includes issued capital and all other equity reserves. Total debt includes borrowings, lease liabilities and bank overdraft.

The Board of Directors seeks to maintain a balance between the higher returns that might be possible with higher levels of borrowing and the advantages and security afforded by a sound capital position.

The Group's adjusted debt to equity ratio is as follows:

Particulars	As at 31 March 2026	As at 31 March 2025
Lease liabilities	8,909.84	7,635.81
Less: Cash and cash equivalents	(338.94)	(202.55)
Net debt	8,570.90	7,433.26
Total equity	16,635.88	14,750.10
Gearing ratio	0.52	0.50

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.41 FINANCIAL INSTRUMENTS

The fair values of financial assets and financial liabilities, together with the carrying amounts in the Balance sheet are as follows:
As at 31 March 2026

Particulars	Note	Carrying values measured at					Quoted prices in active markets (Level 1)	Significant observable inputs (Level 2)	Significant unobservable inputs (Level 3)
		Fair value through profit or loss account	Fair value through other comprehensive income	Other financial assets – amortised cost	Other financial liabilities – amortised cost	Total carrying amount			
Financial assets measured at fair value									
Investments in equity instruments*	2.2	-	0.03	-	-	0.03	-	-	0.03
Investments in mutual funds	2.7	4,044.95	-	-	-	4,044.95	4,044.95	-	-
		4,044.95	0.03	-	-	4,044.98	4,044.95	-	0.03
Financial assets at amortised cost									
Trade receivables	2.8	-	-	1,031.79	-	1,031.79	-	-	-
Cash and cash equivalents	2.9 (a)	-	-	338.94	-	338.94	-	-	-
Loans	2.10	-	-	315.02	-	315.02	-	-	-
Other financial assets	2.3 (a) & 2.3 (b)	-	-	1,929.67	-	1,929.67	-	-	-
		-	-	3,615.42	-	3,615.42	-	-	-
Financial liabilities at amortised cost									
Trade payables	2.15	-	-	-	1,005.68	1,005.68	-	-	-
Other financial liabilities	2.16	-	-	-	259.65	259.65	-	-	-
		-	-	-	1,265.33	1,265.33	-	-	-

* Fair value information relating to investment in equity instruments are not presented as these are not material to the consolidated financial statements.

Notes to the Consolidated Financial Statements

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.41 FINANCIAL INSTRUMENTS (continued)

As at 31 March 2025

Particulars	Note	Carrying values measured at						Quoted prices in active markets (Level 1)	Significant observable inputs (Level 2)	Significant unobservable inputs (Level 3)
		Fair value through profit or loss account	Fair value through other comprehensive income	Other financial assets – amortised cost	Other financial liabilities – amortised cost	Total carrying amount	Significant observable inputs (Level 1)			
Financial assets measured at fair value										
Investments in equity instruments*	2.2	-	0.03	-	-	-	0.03	-	-	0.03
Investments in mutual funds	2.7	5,707.28	-	-	-	-	5,707.28	5,707.28	-	-
		5,707.28	0.03	-	-	-	5,707.31	5,707.28	-	0.03
Financial assets at amortised cost										
Trade receivables	2.8	-	-	773.01	-	-	773.01	-	-	-
Cash and cash equivalents	2.9 (a)	-	-	202.55	-	-	202.55	-	-	-
Bank balances other than cash and cash equivalents	2.9 (b)	-	-	0.20	-	-	0.20	-	-	-
Loans	2.10	-	-	327.72	-	-	327.72	-	-	-
Other financial assets	2.3 (a) & 2.3 (b)	-	-	1,374.44	-	-	1,374.44	-	-	-
		-	-	2,677.92	-	-	2,677.92	-	-	-
Financial liabilities at amortised cost										
Trade payables	2.15	-	-	-	842.22	-	842.22	-	-	-
Other financial liabilities	2.16	-	-	-	178.07	-	178.07	-	-	-
		-	-	-	1,020.29	-	1,020.29	-	-	-

Note: The Group has not disclosed fair values of financial assets and liabilities such as investments, trade receivables, loans, cash and cash equivalents, bank balances other than cash and cash equivalents, other financial assets, trade payables, lease liabilities and other financial liabilities since their carrying amounts are reasonable approximates of fair values.

Fair value hierarchy

Level 1: Includes financial instruments measured using quoted prices. The fair value of all mutual funds which is valued using the closing Net Asset Value (NAV) as at the reporting period.

Level 2: The fair value of financial instruments not actively traded in an active market is determined using valuation techniques which maximize the use of observable market data and rely as little as possible on entity specific estimates. If the significant inputs required to fair value an instrument are observable, the instrument is included in Level 2.

Level 3: If one or more of the significant inputs is not based on observable market data, the instrument is included in Level 3.

There have been no transfers between Level 1, Level 2 and Level 3 for the year ended 31 March 2026 and 31 March 2025.

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.42 REVENUE FROM CONTRACTS WITH CUSTOMERS

Disaggregated revenue information

Set out below is the disaggregation of the Group's revenue from contracts with customers:

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Income from medical and healthcare services		
Revenue from hospital services	14,485.73	13,149.59
Revenue from pharmacy sales	2,042.85	1,531.01
Revenue from medical service fee	248.51	269.48
Total revenue from contracts with customers	16,777.09	14,950.08

Location of revenue recognition

All the business operations of the Group are in India.

No single customer represents 10% or more of the Group's total revenue during the year ended 31 March 2026 and 31 March 2025.

Reconciliation of revenue recognised with the contracted price is as follows:

Particulars	For the year ended 31 March 2026	For the year ended 31 March 2025
Contracted price	16,857.71	15,040.32
Reduction towards variable consideration components*		
- Discounts	(72.93)	(62.86)
- Disallowances	(7.69)	(27.38)
Revenue recognised	16,777.09	14,950.08

*Variable consideration components include discounts and disallowances on the contract price.

Contract balances

Particulars	As at 31 March 2026	As at 31 March 2025
Trade receivables*		
- from related parties (refer note 2.31 (c))	6.18	2.72
- from other than related parties	992.56	791.23
Unbilled revenue	104.45	70.02
Contract liabilities (advance from patients)#	49.84	41.17

Movement in contract liabilities during the year:

Particulars	As at 31 March 2026	As at 31 March 2025
Balance at the beginning of the year	41.17	39.38
Less: Revenue recognised from above	(41.17)	(39.38)
Add: Addition during the year	49.84	41.17
Balance at the end of the year	49.84	41.17

* Trade receivables are non-interest bearing and are generally on terms of 30-45 days.

Contract liabilities include advances received from patients for hospital services pending final billing.

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

Performance Obligation

The revenue from rendering medical & healthcare services and pharmaceutical products satisfies 'at a point in time' recognition criteria as prescribed by Ind AS 115.

2.43 NEW LABOUR CODES

Effective 21 November 2025, the Government of India consolidated multiple existing labour laws into a unified framework comprising four Labour Codes, collectively referred to as the 'New Labour Codes'. The Ministry of Labour & Employment notified Central Rules on 08 May 2026, however State Rules are yet to be notified. The Company has considered restructured compensation of its employees with effect from 01 April 2026 and assessed the impact of changes consistent with the New Labour Codes, rules and FAQs. Under Ind AS 19, changes to employee benefit plans arising from legislative amendments constitute a plan amendment and require recognition of the resulting past service cost immediately in the statement of profit and loss. The implementation of New Labour Codes has resulted in an increase of Rs 15.39 million in the provision for defined benefit obligation, which has been recognised as an exceptional item in the statement of profit and loss in the current reporting period.

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.44 ADDITIONAL INFORMATION AS REQUIRED UNDER PARA 2 OF GENERAL INSTRUCTION OF DIVISION II OF SCHEDULE III TO THE COMPANIES ACT, 2013.

31 March 2026

Name of the entity	Percentage holding	Country of Incorporation	Net Assets (i.e. total assets minus total liabilities)		Share in profit or (loss)		Share in Other comprehensive income		Share in Total comprehensive income	
			As % of consolidated net assets	Amount	As % of consolidated profit / (loss)	Amount	As % of Other comprehensive income	Amount	As % of consolidated total comprehensive income	Amount
Holding Company										
Rainbow Children's Medicare Limited		India	101.53%	16,890.33	88.80%	2,500.13	92.19%	(6.61)	88.79%	2,493.52
Wholly owned subsidiary										
Rainbow Children's Hospital Private Limited	100%	India	0.00%	0.04	(0.00%)	(0.03)	0.00%	-	(0.00%)	(0.03)
Rainbow Woman and Children's Hospital Private Limited	100%	India	(0.00%)	(0.03)	(0.00%)	(0.03)	0.00%	-	(0.00%)	(0.03)
Rosewalk Healthcare Private Limited	100%	India	0.76%	126.14	6.17%	173.66	4.56%	(0.33)	6.17%	173.33
Rainbow C R O Private Limited	100%	India	0.04%	6.18	0.08%	2.27	0.00%	-	0.08%	2.27
Rainbow Fertility Private Limited	100%	India	0.34%	57.27	0.06%	1.73	0.00%	-	0.06%	1.73
Subsidiary										
Rainbow Speciality Hospital Private Limited	78.81%	India	2.11%	350.47	1.16%	32.76	3.23%	(0.23)	1.16%	32.53
Prashanthi Medicare Private Limited	76.00%	India	1.70%	283.57	0.24%	6.62	0.00%	-	0.24%	6.62
Pratiksha Women & Child Care Hospital Private Limited	76.00%	India	9.29%	1,545.29	3.50%	98.64	0.00%	-	3.51%	98.64
Non-controlling interests in subsidiary			0.93%	155.14	1.14%	32.21	0.68%	(0.05)	1.15%	32.16
Other Consolidating entities										
Rainbow Children's Hospital Foundation		India	(0.00%)	(0.05)	(0.00%)	(0.01)	0.00%	-	(0.00%)	(0.01)
Elimination			(16.70%)	(2,778.46)	(1.16%)	(32.52)	(0.66%)	0.05	(1.16%)	(32.49)
Total			100.00%	16,635.88	100.00%	2,815.44	100.00%	(7.17)	100.00%	2,808.27

Note: Net assets, share in profit or loss and other comprehensive income of the Holding Company and subsidiaries are as per the standalone financial statements of respective entities.

Notes to the Consolidated Financial Statements

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.44 ADDITIONAL INFORMATION AS REQUIRED UNDER PARA 2 OF GENERAL INSTRUCTION OF DIVISION II OF SCHEDULE III TO THE COMPANIES ACT, 2013. (continued)

31 March 2025

Name of the entity	Percentage holding	Country of incorporation	Net Assets (i.e. total assets minus total liabilities)		Share in profit or (loss)		Share in Other comprehensive income		Share in Total comprehensive income	
			As % of consolidated net assets	Amount	As % of consolidated profit / (loss)	Amount	As % of Other comprehensive income	Amount	As % of consolidated total comprehensive income	Amount
Holding Company										
Rainbow Children's Medicare Limited		India	100.92%	14,885.44	97.28%	2,375.85	353.69%	(2.16)	97.22%	2,373.69
Wholly owned subsidiary										
Rainbow Children's Hospital Private Limited	100%	India	0.00%	0.06	(0.00%)	(0.00)	0.00%	-	(0.00%)	(0.00)
Rainbow Woman and Children's Hospital Private Limited	100%	India	0.00%	-	0.00%	0.00	0.00%	-	0.00%	0.00
Rosewalk Healthcare Private Limited	100%	India	(0.32%)	(47.16)	0.97%	23.63	(82.95%)	0.51	0.99%	24.14
Rainbow C R O Private Limited	100%	India	0.03%	3.91	0.08%	2.07	0.00%	-	0.08%	2.07
Rainbow Fertility Private Limited	100%	India	0.38%	55.54	0.12%	2.84	0.00%	-	0.12%	2.84
Subsidiary										
Rainbow Speciality Hospital Private Limited	78.81%	India	2.16%	317.91	1.55%	37.88	(172.13%)	1.05	1.59%	38.93
Non-controlling interests in subsidiary			0.46%	68.17	0.33%	8.03	(36.48%)	0.22	0.34%	8.25
Other Consolidating entities										
Rainbow Children's Hospital Foundation		India	0.00%	(0.04)		0.01		-		
Elimination			(3.62%)	(533.73)	(0.33%)	(8.04)	37.88%	(0.23)	(0.34%)	(8.27)
Total			100.00%	14,750.10	100.00%	2,442.27	100.00%	(0.61)	100.00%	2,441.66

Note: Net assets, share in profit or loss and other comprehensive income of the Holding Company and subsidiaries are as per the standalone financial statements of respective entities.

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2.45 SHARE BASED PAYMENT ARRANGEMENT

(a) Stock Unit Plan 2023

Pursuant to the resolutions passed by the Board on 18 March 2023 and by the Shareholders on 06 May 2023, the Holding Company approved 'The Rainbow Children's Medicare Limited - Employee Stock Unit Plan 2023 ("Stock Unit Plan 2023") in compliance with the SEBI (Share Based Employee Benefits and Sweat Equity) Regulations, 2021 ("SEBI SBEB SE Regulations"). The Stock Unit Plan 2023 is for issue of employee stock units to eligible employees, which may result in an issuance of a maximum number of 400,000 Equity Shares. Upon exercise and payment of the exercise price, an option holder will be entitled to be allotted one Equity Share per employee stock unit.

Upon recommendation of the Nomination and Remuneration Committee, the Board of Directors of the Holding Company in their meeting held on 14 May 2023 and 07 August 2023, granted 275,000 and 37,414 Stock Units respectively under the Stock Unit Plan 2023 to its eligible employees which shall be exercisable into 312,414 equity shares having face value of ₹10 each fully paid-up. The exercise price per stock unit shall be the face value of equity shares of the Holding Company i.e., ₹10 each. The vested Stock Units shall be exercisable within a period of three months from the date of each vesting. The Stock Units shall vest after the minimum vesting period of one year and not later than the maximum period of five years from the date of grant. The plan is in terms of SEBI SBEB SE Regulations.

Movement in the stock units under the Plan	No. of stock options	
	As at 31 March 2026	As at 31 March 2025
Stock units outstanding at the beginning of the year	29,931	312,414
Less : Stock units exercised during the year*	7,483	49,986
Less : Stock units lapsed during the year	-	12,497
Less : Stock units cancelled during the year #	-	220,000
Stock units exercisable at the end of the year	22,448	29,931

*During the previous year, upon recommendation of the Nomination and Remuneration Committee, the Board of Directors of the Holding company in their meeting held on 19 May 2024, vested 44,000 stock units under Stock Unit Plan 2023 at an exercise price of Rs 10 per share to the Chief Operating Officer of the Holding company. Each stock unit represents one equity share of Rs 10 each, fully paid-up. On 17 July 2024, the Nomination and Remuneration Committee through circular resolution allotted 44,000 equity shares of ₹ 10 each to the Chief Operating Officer of the Holding company.

During the previous year, upon recommendation of the Nomination and Remuneration Committee, the Board of Directors of the Holding company in their meeting held on 13 August 2024, vested 5,986 stock units under Stock Unit Plan 2023 at an exercise price of Rs 10 per share to the Chief Financial Officer of the Holding company. Each stock unit represents one equity share of Rs 10 each, fully paid-up. On 22 August 2024, the Nomination and Remuneration Committee through circular resolution allotted 5,986 equity shares of ₹ 10 each to the Chief Financial Officer of the Holding company.

During the year, upon recommendation of the Nomination and Remuneration Committee, the Board of Directors of the Holding company in their meeting held on 12 August 2025, vested 7,483 stock units under Stock Unit Plan 2023 at an exercise price of Rs 10 per share to the Chief Financial Officer of the Holding company. Each stock unit represents one equity share of Rs 10 each, fully paid-up. On 12 August 2025, the Nomination and Remuneration Committee through circular resolution allotted 7,483 equity shares of ₹ 10 each to the Chief Financial Officer of the Holding company.

#On 27 October 2024, the Company has accepted the resignation of an eligible employee. Accordingly, the Company has cancelled 220,000 stock units.

The weighted average share price at the date of exercise for options was Rs 1,537.60 per share (31 March 2025: Rs 1,188.65 per share) and weighted average remaining contractual life for the share options outstanding as at 31 March 2026 was 2.41 years (31 March 2025: 3.41 years)

Fair value measurement

The fair value at grant date is determined using the Black Scholes valuation option-pricing model which takes into account the exercise price, the term of the option, the share price at grant date and expected price volatility of the underlying share, the expected dividend yield and the risk free interest rate for the term of the option.

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2.45 SHARE BASED PAYMENT ARRANGEMENT (continued)

The key inputs used in Black-Scholes model for calculating fair value of options under the plan as on the date of grant are as follows:

	Chief Operating Officer	Chief Financial Officer
No. of stock units granted	275,000	37,414
Date of grant	14 May 2023	07 August 2023
Vesting period (years)	5 years	5 years
Expected life of the stock units granted (vesting & exercise period in years)	5.14 years	4.65 years
Stock price on the date of valuation (in Rs)	849.65	1,080.20
Fair value at grant date (in Rs)	835.18	1,064.17
Expected volatility	40.25%	35.00%
Dividend yield	0.24%	0.27%
Risk free rate	6.84%	7.24%

For details on the employee benefits expense, refer note 2.23

(b) The ESOP 2025 Scheme:

Pursuant to the resolutions passed by the Board of Directors on 09 February 2025 and by the Shareholders on 02 April 2025, the Company approved 'The Rainbow Children's Medicare Limited - Employee Stock Option Scheme 2025 ("ESOP scheme 2025") in compliance with the SEBI (Share Based Employee Benefits and Sweat Equity) Regulations, 2021 ("SEBI SBEB SE Regulations"). The ESOP scheme 2025 is for issue of employee stock options to eligible employees, which may result in an issuance of a maximum number of 1,015,000 Equity Shares. Upon exercise and payment of the exercise price, an option holder will be entitled to be allotted one Equity Share per employee stock option. The exercise price per option shall be determined by the Nomination and Remuneration Committee subject to a maximum discount of up to 20% from the market price of shares as on the date of Grant.

The Nomination and Remuneration Committee ("NRC") of the Company in its meeting held on 26 July 2025, 13 November 2025 and 28 January 2026 granted 140,810, 5,660 and 100,000 Stock options, respectively under the ESOP scheme 2025 to its eligible employees which shall be exercisable into 140,810, 5,660 and 100,000 equity shares, respectively, having face value of ₹10 each fully paid-up. The Exercise price per stock option shall be determined at a discount of not more than 20% on the latest available closing price of the Company's equity shares on the National Stock Exchange of India Limited, being the stock exchange with the highest trading volume, as on 25 July 2025, 12 November 2025 and 27 January 2026, respectively, i.e., the trading day immediately preceding the date on which the grant of options was approved by the NRC. The Stock options shall vest after the minimum vesting period of 1 year and not later than the maximum period of 10 years from the date of grant. The vested Stock options shall be exercisable within a period of maximum of 2 years from the date of each vesting.

Pursuant to the resolution passed by the Board of Directors on 09 February 2025, the Rainbow Employees Welfare Trust (the "ESOP Trust") was formed to support the ESOP scheme 2025 by acquiring through secondary market acquisitions, equity shares which are used for issuance to eligible employees upon exercise of stock options thereunder.

The Company has acquired 180,000 shares from the secondary market for an aggregate consideration of Rs 212.96 million as at 31 March 2026.

Fair value measurement

The fair value at grant date is determined using the Black Scholes valuation option-pricing model which takes into account the exercise price, the term of the option, the share price at grant date and expected price volatility of the underlying share, the expected dividend yield and the risk free interest rate for the term of the option.

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(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.45 SHARE BASED PAYMENT ARRANGEMENT (continued)

The key inputs used in Black-Scholes model for calculating fair value of options under the plan as on the date of grant are as follows:

	ESOP 2025		
	26 July 2025	13 November 2025	28 January 2026
Date of grant			
No. of stock units granted	140,810	5,660	100,000
Vesting period (years)	5	5	5
Expected life of the stock units granted (vesting & exercise period in years)	1 st Year - 5%, 2 nd Year - 10%, 3 rd Year - 20%, 4 Year - 25%, 5 Year - 40%		1 st Year - 20%, 2 nd Year - 20%, 3 rd Year - 20%, 4 Year - 20%, 5 Year - 20%
Stock price on the date of valuation (in Rs)	1,556.4	1,359.10	1,188.50
Fair value at grant date (in Rs)	757.51	587.49	493.62
Expected volatility	36.78%	35.15%	34.37%
Dividend yield	0.19%	0.22%	0.25%
Risk free rate	5.89%	6.04%	6.19%

For details on the employee benefits expense, refer note 2.23

2.46 OTHER STATUTORY INFORMATION:

- i. The Group do not have any Benami property and neither any proceedings have been initiated or is pending against the Group for holding any Benami property.
- ii. The Group do not have any transactions with companies struck off.
- iii. The Group do not have any charges or satisfaction which is yet to be registered with ROC beyond the statutory period.
- iv. The Group has not been declared a willful defaulter by any bank or financial institution or any other lender during the current year.
- v. The Group have not advanced or loaned or invested funds to any other persons or entities including foreign entities (Intermediaries) with the understanding that the Intermediary shall:
 - a. directly or indirectly lend or invest in other persons or entities identified in any manner whatsoever by or on behalf of the Group (Ultimate Beneficiaries) or
 - b. provide any guarantee, security or the like to or on behalf of the Ultimate Beneficiaries.
- vi. The Group has not received any fund from any persons or entities, including foreign entities (Funding Party) with the understanding (whether recorded in writing or otherwise) that the Group shall:
 - a. directly or indirectly lend or invest in other persons or entities identified in any manner whatsoever by or on behalf of the Funding Party (Ultimate Beneficiaries) or
 - b. provide any guarantee, security or the like on behalf of the Ultimate Beneficiaries.
- vii. The Group has not traded or invested in Crypto currency or Virtual Currency during the financial year.

Notes to the Consolidated Financial Statements

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2.46 OTHER STATUTORY INFORMATION: (continued)

- viii. The Group does not have any such transaction which is not recorded in the books of accounts that has been surrendered or disclosed as income during the year in the tax assessments under the Income Tax Act, 1961 (such as, search or survey or any other relevant provisions of the Income Tax Act, 1961.
- ix. The Group has complied with the number of layers prescribed under the Companies Act, 2013.
- x. The Group has not revalued its Property, plant and equipment (including right of use of assets) or intangible assets or both during the current or previous year.
- xi. The Company did not have any long-term contracts including derivative contracts for which there were any material foreseeable losses.
- xii. There were no amounts which were required to be transferred to Investor Education Protection Fund by the Company.

2.47 The Group is maintaining its books of account in electronic mode and these books of account are accessible in India at all times. The Group has maintained backup of books of accounts on servers located in India on daily basis except incase of Prashanthi Medicare Private Limited and Pratiksha Women & Child Care Hospital Private Limited, the backup of books of account was not maintained during the period from 01 April 2025 to 30 June 2025 and 01 April 2025 to 17 August 2025 respectively.

2.48 The Group has used accounting software for maintaining its books of account (SAP) and software for maintenance of hospital related revenue and consumption records (Arcus Air) which has a feature of recording audit trail (edit log) facility and the same has operated throughout the year for all relevant transactions recorded in the softwares, except that audit trail feature is not enabled at the database level and in case of two subsidiaries i.e Prashanthi Medicare Private Limited and Pratiksha Women & Child Care Hospital Private Limited, audit trail has operated only during the period 01 July 2025 to 31 March 2026 and 18 August 2025 to 31 March 2026 respectively. Further no instance of audit trail feature being tampered with was noted in respect of the softwares where the audit trail has been enabled. Additionally, the audit trail of prior years has been preserved as per the statutory requirements for record retention to the extent it was enabled and recorded in the respective years except in case of Prashanthi Medicare Private Limited and Pratiksha Women & Child Care Hospital Private Limited.

2.49 BUSINESS COMBINATIONS

Acquisitions of Subsidiaries during the year ended 31 March 2026

1. Acquisition of Prashanthi Medicare Private Limited

Pursuant to Securities Subscription Agreement ('SSA') and Shareholders Agreement ('SHA') dated 28 June 2025, the Company has acquired 76% of equity share capital and 100% of Non-Convertible Redeemable Preference shares of M/s. Prashanthi Medicare Private Limited ("Prashanthi Hospital") for an aggregate cash consideration of Rs 326.00 million. Consequent to this acquisition, Prashanthi Hospital became a subsidiary of the Company with effect from 01 July 2025 upon satisfactory completion of the closing conditions under the SSA and has been consolidated with effect from that date.

Refer table below for summary of net assets acquired.

Prashanthi Hospital is a 100 bed, NABH-accredited facility with a strong reputation for delivering high quality care across obstetrics, gynaecology, neonatology, pediatrics, and minimally invasive surgery. Recognized for its clinical excellence, patient-centric approach and strong regional brand equity, the hospital has become a preferred healthcare destination for women and children in Warangal region.

The primary reason for such an acquisition by the Company is to expand into tier-II cities where specialized healthcare services remain underserved. This aligns with the Company's growth strategy and further strengthens its position in southern India.

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.49 BUSINESS COMBINATIONS (continued)

Prashanthi hospital has contributed ₹ 191.52 million of revenue and ₹ 8.54 million to the profit before tax from continuing operations of the Group. If the combination had taken place at the beginning of the year, revenue from continuing operations would have been 191.52 million of revenue and the profit before tax from continuing operations for the Group would have been ₹ 8.54 million.

2. Acquisition of Pratiksha Women and Child Care Private Limited

Pursuant to Securities Subscription Agreement ('SSA') and Shareholders Agreement ('SHA') dated 11 August 2025, the Company has acquired 76% of equity share capital and 100% of Non-Convertible Redeemable Preference shares of M/s. Pratiksha Women & Child Care Hospital Private Limited ('Pratiksha Hospital') for an aggregate cash consideration of ₹ 1,710.00 million. Consequent to this acquisition, Pratiksha Hospital became a subsidiary of the Company with effect from 18 August 2025 upon satisfactory completion of the closing conditions under the SSA and has been consolidated with effect from that date. The transaction was accounted in accordance with Ind AS 103 and the initial accounting has been provisionally determined. refer table below for summary of net assets acquired.

Pratiksha Women and Child Care Private Limited is 150 bed, NABH-accredited facility with a strong reputation for delivering high quality care across obstetrics, gynaecology, laparoscopic surgeries, neonatology, pediatrics, and pediatrics critical care. Recognized for its clinical excellence, deep community trust and strong regional brand equity, the hospital has become a preferred healthcare destination for women and children in Northeast region.

The primary reason for such an acquisition of Pratiksha Hospital will deepen Rainbow's footprint in North-East, India reinforcing its position as the leading provider of pediatrics & women healthcare. Strong demographic base, rising healthcare demand, higher birth rate and Increasing urbanization, makes it an ideal location for a regional healthcare hub.

Pratiksha hospital has contributed ₹ 648.70 million of revenue and ₹ 136.73 million to the profit before tax from continuing operations of the Group. If the combination had taken place at the beginning of the year, revenue from continuing operations would have been ₹ 648.70 million and the profit before tax from continuing operations for the Group would have been ₹ 136.73 million.

A. Assets acquired and liabilities assumed

The fair values of the identifiable assets and liabilities as at the date of acquisition are:

Particulars	Prashanthi hospital	Pratiksha hospital	Total
Brand	13.95	120.61	134.56
Non-compete fees	28.93	133.53	162.46
Property, plant and equipment	74.46	81.78	156.24
Inventories	1.57	-	1.57
Other Assets	2.46	13.54	16.00
Total Assets	121.37	349.46	470.83
Other liabilities	0.26	-	0.26
Total Liabilities	0.26	-	0.26
Total identifiable net assets at fair value	121.11	349.46	470.57
Non controlling interests measured at fair value	78.48	410.40	488.88
Goodwill arising on acquisition	204.44	1,364.46	1,568.90

Notes to the Consolidated Financial Statements

for the year ended 31 March 2026

(All amounts are in Indian rupees million, except share data and unless otherwise stated)

2.49 BUSINESS COMBINATIONS: (continued)

B. Cash flow on acquisition

Particulars	Prashanthi hospital	Pratiksha hospital	Total
Subscription of equity shares	248.52	1,299.60	1,548.12
Non convertible redeemable preference shares	77.48	410.40	487.88
Net cash acquired with the subsidiary	(1.02)	(3.04)	(4.07)
Net cash flow on acquisition	324.98	1,706.96	2,031.93

2.50 SUBSEQUENT EVENTS

There are no significant adjusting events that occurred subsequent to the balance sheet date.

As per our report of even date attached.

for **S.R. Batliboi & Associates LLP**
Chartered Accountants
ICAI Firm Registration Number: 101049W/E300004

per Atin Bhargava
Partner
Membership Number.: 504777

Place: Hyderabad
Date: 23 May 2026

for and on behalf of the Board of Directors of
Rainbow Children's Medicare Limited
CIN: L85110TG1998PLC029914

Dr. Ramesh Kancharla
Chairman and Managing Director
DIN: 00212270

Vikas Maheshwari
Chief Financial Officer

Place: Hyderabad
Date: 23 May 2026

Dr. Dinesh Kumar Chirla
Director
DIN: 01395841

Shreya Mitra
Company Secretary
Membership Number: A54901

Place: Hyderabad
Date: 23 May 2026



RAINBOW CHILDREN'S MEDICARE LIMITED

Corporate Identity Number: L85110TG1998PLC029914

Regd. Office: 8-2-120/103/1, Survey No. 403, Road No. 2, Banjara Hills, Hyderabad – 500034, Telangana.

Corporate Office: 8-2-19/1/A, Daulet Arcade, Road No. 11, Banjara Hills, Hyderabad- 500034, Telangana.

Website: www.rainbowhospitals.in; **E-Mail:** companysecretary@rainbowhospitals.in

Telephone No: +91 40 49692244

Notice of Annual General Meeting

Notice is hereby given that the 28th (Twenty-eighth) Annual General Meeting (“**AGM**”) of the members of Rainbow Children's Medicare Limited (“the **Company**”) will be held on Wednesday, July 29, 2026 at 10:00 A.M. (IST) through Video Conferencing/ Other Audio-Visual Means (“**VC/OAVM**”) facility, to transact the following business:

ORDINARY BUSINESS:

1. To receive, consider and adopt the Audited Standalone Financial statements of the Company for the Financial Year ended March 31, 2026, the reports of the Auditors and Board of Directors thereon and the Audited Consolidated Financial statements of the Company for the Financial Year ended March 31, 2026 and the report of the Auditors thereon.
2. To declare dividend of ₹3.5/- per Equity Share for the Financial Year ended March 31, 2026.
3. To appoint a Director in place of Dr. Adarsh Kancharla (DIN: 08302615), who retires by rotation and being eligible, offers himself for re-appointment. **(Annexure A)**

SPECIAL BUSINESS:

4. **To ratify the remuneration payable to Cost Auditors for the Financial Year 2026-27.**

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

“**RESOLVED THAT** pursuant to the provisions of Section 148 and other applicable provisions, if any, of the Companies Act, 2013 read with the Companies (Audit and Auditors) Rules, 2014 (including any statutory modification(s)/ amendment(s)/ re-enactment(s) thereof, for the time being in force) and any other applicable provisions/ statute as may be applicable from time to time, the Members of the Company hereby ratify the remuneration of ₹2,20,000/- (Rupees Two Lakh and Twenty Thousand Only) plus applicable taxes and out-of-pocket expenses payable

to M/s. Lavanya & Associates LLP, Cost Accountants, appointed as the Cost Auditors of the Company for the Financial Year 2026-27.

RESOLVED FURTHER THAT the Board of Directors or the Company Secretary of the Company be and are hereby authorized to do all such acts, deeds, matters and things as may be considered necessary, desirable or expedient to give effect to this resolution.”

5. **To consider, review and approve the re-appointment of Dr. Ramesh Kancharla (DIN: 00212270), Chairman and Managing Director of the Company.**

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

“**RESOLVED THAT** pursuant to the provisions of Section 196, 203, and other applicable provisions, if any, of the Companies Act, 2013 (“Act”) read with the Rules made thereunder, and the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 (“the Listing Regulations”) (including any statutory modification(s), or re-enactment(s) thereof for the time being in force), the provisions of the Articles of Association of the Company, and based on the recommendations of the Nomination & Remuneration Committee, Audit Committee and the Board of Directors of the Company, the approval of the Members of the Company be and is hereby accorded for re-appointment of Dr. Ramesh Kancharla (DIN: 00212270), in respect of whom the Company has received a Notice in writing under Section 160(1) of the Act proposing his candidature for the office of a Director, as Chairman & Managing Director of the Company, liable to retire by rotation, to hold office for a period of five (5) consecutive years i.e., from August 11, 2026 till August 10, 2031, with a power to the Board of Directors to change the designation of Dr. Ramesh Kancharla from time to time, as may be considered appropriate by the Board without any further approval of the Members of the Company.

RESOLVED FURTHER THAT the Board of Directors of the Company (which term shall be deemed to hereinafter include any Committee of the Board constituted to exercise its powers, including the powers conferred by this Resolution), and the Company Secretary of the Company, be and is hereby authorized to take all such steps as may be necessary, proper and expedient to give effect to this resolution.”

6. To consider, review and approve the remuneration payable to Dr. Ramesh Kancharla (DIN: 00212270), as Chairman and Managing Director of the Company.

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

“RESOLVED THAT pursuant to the provisions of Section 197, 198, Schedule V and other applicable provisions, if any, of the Companies Act, 2013 (“Act”) read with the Rules made thereunder, and the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 (“the Listing Regulations”) (including any statutory modification(s), or re-enactment(s) thereof for the time being in force), the provisions of the Articles of Association of the Company, and based on the recommendations of the Nomination & Remuneration Committee, Audit Committee and the Board of Directors of the Company, the approval of the Members of the Company be and is hereby accorded for remuneration payable to Dr. Ramesh Kancharla (DIN: 00212270) as Chairman and Managing Director of the Company, for a period of three (3) consecutive years i.e., from August 11, 2026 to August 10, 2029, on the following terms and conditions:

- 1. Basic Salary:** ₹50,00,000/- (Rupees Fifty Lakhs only) per month.
- 2. Special Allowance:** ₹4,16,670/- (Rupees Four Lakhs Sixteen Thousand Six Hundred and Seventy only) per month.
- 3. Perquisites, Allowances and Other Benefits:** In addition to the above remuneration, Dr. Ramesh Kancharla shall be entitled to perquisites, allowances and benefits not exceeding ₹1,35,00,000/- (Rupees One Crore Thirty-Five Lakhs only) per annum. The said perquisites, allowances and benefits shall be evaluated, wherever applicable, as per the provisions of the Income Tax Act, 2025 and the rules made thereunder, including any statutory modification(s) or re-enactment(s) thereof. In the absence of any such rules, the perquisites, allowances and benefits shall be evaluated at actual cost, in accordance with the policies of the Company in force from time to time.

Such perquisites, allowances and benefits may include, inter alia, reimbursement of

medical expenses for self and family, health insurance, personal accident insurance, leave travel allowance, club memberships, company-maintained car with chauffeur, business travel, reimbursement of mobile phone, telephone and internet expenses, gratuity, retirement benefits, leave encashment and such other benefits, facilities and amenities as may be available to senior executives of the Company from time to time.

- 4. Minimum Remuneration:** In the event of absence or inadequacy of profits in any Financial Year during the tenure of Dr. Ramesh Kancharla as Chairman and Managing Director of the Company, the remuneration as set out above shall be paid as minimum remuneration for such Financial Year, in accordance with the provisions of Section 197 read with Schedule V and other applicable provisions, if any, of the Act and the rules made thereunder, as well as the applicable provisions of the Listing Regulations (including any statutory modification(s) or re-enactment(s) thereof for the time being in force), without requiring any further approval of the members of the Company.

RESOLVED FURTHER THAT the Board of Directors of the Company (hereinafter referred to as the “Board”) be and is hereby authorized to alter, vary, revise or modify the remuneration payable to Dr. Ramesh Kancharla from time to time, within the overall limits specified under Section 197 of the Act, including Schedule V thereof, the rules made thereunder and the applicable provisions of the Listing Regulations, and in accordance with the remuneration structure and policies of the Company, without requiring any further approval of the members of the Company.

RESOLVED FURTHER THAT the Board of Directors of the Company (which term shall be deemed to hereinafter include any Committee of the Board constituted to exercise its powers, including the powers conferred by this Resolution), and the Company Secretary of the Company, be and is hereby authorized to take all such steps as may be necessary, proper and expedient to give effect to this Resolution.”

7. To consider review and approve the re-appointment of Dr. Dinesh Kumar Chirla (DIN: 01395841), Whole-time Director of the Company.

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

“RESOLVED THAT pursuant to the provisions of Section 196, 203, Schedule V and other applicable provisions, if any, of the Companies Act, 2013 (“Act”) read with the Rules made thereunder, and the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 (“the Listing Regulations”) (including

any statutory modification(s), or re-enactment(s) thereof for the time being in force), the provisions of the Articles of Association of the Company, and based on the recommendations of the Nomination & Remuneration Committee, Audit Committee and the Board of Directors of the Company, the approval of the Members of the Company be and is hereby accorded for re-appointment of Dr. Dinesh Kumar Chirla (DIN: 01395841), in respect of whom the Company has received a Notice in writing under Section 160(1) of the Act proposing his candidature for the office of a Director, as Whole Time Director of the Company, liable to retire by rotation, to hold office for a period of five (5) consecutive years i.e., from August 11, 2026 till August 10, 2031, with a power to the Board of Directors to change the designation of Dr. Dinesh Kumar Chirla from time to time, as may be considered appropriate by the Board without any further approval of the Members of the Company.

RESOLVED FURTHER THAT the Board of Directors of the Company (which term shall be deemed to hereinafter include any Committee of the Board constituted to exercise its powers, including the powers conferred by this Resolution), and the Company Secretary of the Company, be and is hereby authorized to take all such steps as may be necessary, proper and expedient to give effect to this Resolution.”

8. To consider and approve the payment of remuneration to Dr. Dinesh Kumar Chirla (DIN: 01395841), Whole-time Director of the Company.

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

“**RESOLVED THAT** pursuant to the provisions of Section 197, 198, Schedule V and other applicable provisions, if any, of the Companies Act, 2013 (“Act”) read with the Rules made thereunder, and the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 (“the Listing Regulations”) (including any statutory modification(s), or re-enactment(s) thereof for the time being in force), the provisions of the Articles of Association of the Company, and based on the recommendations of the Nomination & Remuneration Committee, Audit Committee and the Board of Directors of the Company, the approval of the Members of the Company be and is hereby accorded for remuneration payable to Dr. Dinesh Kumar Chirla (DIN: 01395841) as Whole-time Director of the Company for a period of three (3) consecutive years i.e., from August 11, 2026 to August 10, 2029, on the following terms and conditions including remuneration by way of professional fees and other perquisites:

1. **Remuneration by way of Professional Fee:** Not exceeding ₹30,00,000/- (Rupees Thirty Lakhs only) per month.

2. **Perquisites, Allowances and Other Benefits:**

In addition to the above professional fee, Dr. Dinesh Kumar Chirla shall be entitled to perquisites, allowances and benefits not exceeding ₹60,00,000/- (Rupees Sixty Lakhs only) per annum. The said perquisites, allowances and benefits shall be evaluated, wherever applicable, in accordance with the provisions of the Income Tax Act, 2025 and the rules made thereunder, including any statutory modification(s) or re-enactment(s) thereof, and in the absence of any such provisions, at actual cost in accordance with the policies of the Company.

Such perquisites, allowances and benefits may include medical and insurance benefits, leave travel assistance, club membership, company-maintained car, communication and travel expenses and other benefits, facilities and amenities as may be applicable from time to time.

3. **Minimum Remuneration:** In the event of absence or inadequacy of profits in any Financial Year during the tenure of Dr. Dinesh Kumar Chirla, the professional fee, perquisites, allowances and other benefits as set out above shall be paid as minimum remuneration for such Financial Year, in accordance with the provisions of Section 197 read with Schedule V and other applicable provisions, if any, of the Act and the rules made thereunder, as well as the applicable provisions of the Listing Regulations (including any statutory modification(s) or re-enactment(s) thereof for the time being in force), without requiring any further approval of the members of the Company.

RESOLVED FURTHER THAT the Board of Directors of the Company (hereinafter referred to as the “Board”) be and is hereby authorised to alter, vary, revise or modify the remuneration payable to Dr. Dinesh Kumar Chirla from time to time, within the overall limits specified under Section 197 of the Act, including Schedule V thereof, the rules made thereunder and the applicable provisions of the Listing Regulations, (including any statutory modification(s) or re-enactment(s) thereof for the time being in force), and in accordance with the remuneration structure and policies of the Company, without requiring any further approval of the members of the Company.

RESOLVED FURTHER THAT the Board of Directors of the Company (which term shall be deemed to hereinafter include any Committee of the Board constituted to exercise its powers, including the powers conferred by this Resolution), and the Company Secretary of the Company, be and is hereby authorized to take all such steps as may be necessary, proper and expedient to give effect to this Resolution.”

9. To consider, approve and recommend for the re-appointment of Mr. Santanu Mukherjee (DIN: 07716452), as an Independent Director of the Company.

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

“RESOLVED THAT pursuant to the provisions of Sections 149, 150 and 152, Schedule IV and other applicable provisions, if any, of the Companies Act, 2013 (“the Act”) and Rules made thereunder, and the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 (“the Listing Regulations”) (including any statutory modification(s) or re-enactment(s) thereof for the time being in force), the provisions of the Articles of Association of the Company and based on the recommendation of the Nomination and Remuneration Committee and the Board of Directors of the Company, approval of the Members of the Company be and is hereby accorded for re-appointment of Mr. Santanu Mukherjee (DIN: 07716452), who holds office as an Independent Director up-to October 21, 2026 and who has submitted a declaration that he meets the criteria of independence under Section 149(6) of the Act and Regulation 16(1)(b) of the Listing Regulations and is eligible for re-appointment under the provisions of the Act, the Rules made thereunder and the Listing Regulations, and in respect of whom the Company has received a Notice in writing under Section 160(1) of the Act proposing his candidature for the office of a Director, as an Independent Director, not liable to retire by rotation, to hold office for a second term of five (5) consecutive years i.e., from October 22, 2026 up to October 21, 2031, on the terms and conditions including remuneration as set out in the Explanatory Statement annexed to this Notice.

RESOLVED FURTHER THAT the Board of Directors of the Company (which term shall be deemed to hereinafter include any Committee of the Board constituted to exercise its powers, including the powers conferred by this Resolution), and the Company Secretary of the Company, be and is hereby authorized to take all such steps as may be necessary, proper and expedient to give effect to this Resolution.”

10. To consider, approve and recommend for the re-appointment of Ms. Sundari R. Pisupati (DIN: 01908852), as an Independent Director of the Company.

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

“RESOLVED THAT pursuant to the provisions of Sections 149, 150 and 152, Schedule IV and other

applicable provisions, if any, of the Companies Act, 2013 (“the Act”) and Rules made thereunder, and the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 (“the Listing Regulations”) (including any statutory modification(s) or re-enactment(s) thereof for the time being in force), the provisions of the Articles of Association of the Company and based on the recommendation of the Nomination and Remuneration Committee and the Board of Directors of the Company, approval of the Members of the Company be and is hereby accorded for re-appointment of Ms. Sundari R. Pisupati (DIN: 01908852), who holds office as an Independent Director up-to September 15, 2026 and who has submitted a declaration that she meets the criteria of independence under Section 149(6) of the Act and Regulation 16(1)(b) of the Listing Regulations and is eligible for re-appointment under the provisions of the Act, the Rules made thereunder and the Listing Regulations, and in respect of whom the Company has received a Notice in writing under Section 160(1) of the Act proposing her candidature for the office of a Director, as an Independent Director, not liable to retire by rotation, to hold office for a second term of five (5) consecutive years i.e., from September 16, 2026 up to September 15, 2031, on the terms and conditions including remuneration as set out in the Explanatory Statement annexed to this Notice.

RESOLVED FURTHER THAT the Board of Directors of the Company (which term shall be deemed to hereinafter include any Committee of the Board constituted to exercise its powers, including the powers conferred by this Resolution), and the Company Secretary of the Company, be and is hereby authorized to take all such steps as may be necessary, proper and expedient to give effect to this Resolution.”

By Order of the Board
For **Rainbow Children’s Medicare Limited**

Shreya Mitra
Company Secretary and Compliance Officer
M. No: A54901

Place: Hyderabad
Date: May 23, 2026

Registered Office:
8-2-120/103/1, Survey No. 403, Road No. 2,
Banjara Hills, Hyderabad – 500034, Telangana.
CIN: L85110TG1998PLC029914;
E-Mail: companysecretary@rainbowhospitals.in
Website: www.rainbowhospitals.in;
Telephone No: +91 40 49692244

NOTES:

1. An Explanatory Statement pursuant to Section 102 of the Companies Act, 2013 (the "**Act**"), the Secretarial Standards on General Meetings ("SS-2") issued by the Institute of Company Secretaries of India and SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015, is annexed hereto.
2. In compliance with the circular issued by the Ministry of Corporate Affairs ("**MCA**"), vide its General Circular No. 14/2020 dated April 08, 2020 and subsequent circulars issued in this regard, latest being General Circular No. 3/2025 dated September 22, 2025 (hereinafter collectively referred to as "**MCA Circulars**"), applicable provisions of the Act and Securities and Exchange Board of India (Listing Obligations and Disclosure Requirements) Regulations, 2015 ("**SEBI Listing Regulations**") and relevant circulars issued by Securities and Exchange Board of India ("SEBI") in this regard, the 28th Annual General Meeting ("AGM") of the Company is being conducted through Video Conferencing ("**VC**") / Other Audio-Visual Means ("**OAVM**"), which does not require physical presence of the Members at a common venue. The deemed venue for the AGM shall be the Corporate Office of the Company.
3. Pursuant to the MCA Circulars, provisions of the Act, SS-2 and the SEBI Listing Regulations, the facility to appoint proxy to attend and cast vote on behalf of the members is not available for this AGM. However, the Body Corporates are entitled to appoint authorised representatives to attend the AGM through VC/OAVM and participate therein and cast their votes through e-voting. Hence the Proxy Form and Attendance Slip are not annexed to this Notice.
4. In case of joint holders, only such joint holder who is higher in the order of names will be entitled to vote.
5. Since, the AGM will be held through VC/ OAVM, pursuant to the MCA Circulars r/w SEBI Listing Regulations, physical attendance of the members is not required at the AGM, and attendance of the members through VC/OAVM will be counted for the purpose of reckoning the quorum under section 103 of the Act. Route map of the venue of the Meeting is accordingly not annexed hereto.
6. For enabling the members to participate at the 28th AGM through VC / OAVM, the Company has appointed National Securities Depository Limited ("NSDL") to provide VC/OAVM facility and e-voting facility, for the AGM. The Members can join the AGM in the VC/OAVM mode 15 minutes before and 15 minutes after the scheduled time of the commencement of the Meeting by following the procedure mentioned in the Notice. The Members will be able to view the proceedings

on the NSDL's e-Voting website at www.evoting.nsdl.com. Participation at the AGM through VC / OAVM shall be allowed on a first-come, first-served basis for 1000 members. This will not include large members (members holding 2% or more shareholding), Promoters, Institutional Investors, Directors, Key Managerial Personnel, the Chairpersons of the Audit Committee, Nomination and Remuneration Committee and Stakeholders' Relationship Committee, Auditors etc. who are allowed to attend the AGM without restriction on account of first come first served basis.

7. Institutional/ corporate shareholders (i.e. other than individuals, HUF's, NRI's, etc.) intending to participate through their authorized representative(s) are requested to send a scanned copy (JPEG/ PDF format) of their Board resolution/ authority letter/ power of attorney, etc. authorizing their representative(s) to participate in the AGM (through VC/ OAVM) and to vote on their behalf through remote e-voting or e-voting during the AGM. The said resolution/ authority letter/ power of attorney, etc. shall be sent through registered email address to the Scrutinizer at kvs1175@gmail.com with a copy marked to evoting@nsdl.com and to the Company at companysecretary@rainbowhospitals.in. Institutional shareholders/ Corporate Shareholders (i.e. other than individuals, HUF, NRI, etc.) can also upload their Board Resolution/ Power of Attorney/ Authority Letter, etc. by clicking on "Upload Board Resolution/ Authority Letter" displayed under "e-Voting" tab in their login on the NSDL portal.

ELECTRONIC DISPATCH OF ANNUAL REPORT AND PROCESS FOR REGISTRATION OF E-MAIL ID AND FOR OBTAINING COPY OF ANNUAL REPORT:

8. In accordance with the MCA Circulars read with SEBI Listing Regulations, the Notice of the 28th AGM along with the Annual Report for the Financial Year 2025-26 is being sent by electronic mode to Members whose e-mail id is registered with the Company or the Depository Participants (DPs) or Registrar to an Issue and Share Transfer Agent ("RTA") of the Company. Physical copy of the Notice of the 28th AGM along with Annual Report for the Financial Year 2025-26 shall be sent to those members who request for the same. Members may send their request on companysecretary@rainbowhospitals.in or through a request letter at the Corporate Office of the Company at 8-2-19/1A, Daulet Arcade, Road No.11, Banjara Hills, Hyderabad-500034, Telangana, addressed to the Company Secretary. The Company is also sending a letter providing the web-link, including the exact path, where complete details of this AGM Notice and the Annual Report is available to those Members who have not registered e-mail ids with Company/ RTA/ DP. Notice along with Annual Report for the Financial Year 2025-26 will also be available on the website of the Company at <https://www.rainbowhospitals.in/>, websites of the Stock Exchanges i.e. BSE Limited

and National Stock Exchange of India Limited at www.bseindia.com and www.nseindia.com respectively, and also on the website of NSDL i.e. www.evoting.nsdl.com.

9. As the equity shares of the Company are presently held in dematerialised form, Members are requested to ensure that their KYC details, including e-mail address, mobile number, PAN, bank account details and nomination, as applicable, are updated with their respective Depository Participants. Members requiring any assistance in relation to updating their KYC details or other shareholder information may contact the Company's Registrar to an Issue and Share Transfer Agent at v-raju.sv@kfintech.com or the Company at companysecretary@rainbowhospitals.in.
10. The Notice of AGM and Annual Report will be sent to those Members/ beneficial owners whose name will appear in the Register of Members/ list of beneficiaries received from the Depositories as on Friday, June 26, 2026.

DIVIDEND RELATED INFORMATION:

11. Final dividend as recommended by the Board of Directors for the Financial Year ended March 31, 2026, if approved at the AGM, will be payable to those members of the Company who hold shares:

In demat mode, based on the list of beneficial owners to be received from NSDL and CDSL as at the close of business hours on Tuesday, July 21, 2026, being the record date.

The final dividend, if declared at the AGM, will be paid on or before Thursday, August 27, 2026.

12. Members holding shares in demat mode are hereby informed that bank particulars registered with their respective DPs, with whom they maintain their demat accounts, will be used by the Company for the payment of dividend. Members holding shares in demat mode are requested to intimate any change in their address and/or bank mandate to their DPs only, as the Company or its RTA cannot act on any request received directly on the same.
13. Members holding shares in physical form are requested to intimate any change of address and/or bank mandate to RTA of the Company by sending a request in Form ISR-1 Selenium, Tower B, Plot No 31 & 32, Financial District, - Nanakramguda, Serilingampally, Hyderabad, Rangareddi-500032, Telangana or by email to v-raju.sv@kfintech.com from their registered email id.

SEBI vide its Master Circular No. SEBI/HO/38/13/(4)2026-MIRSD-POD/I/4298/2026 dated February 6, 2026, has mandated that with effect from April 1,

2024, dividend to security holders (holding securities in physical form whose folio(s) do not have PAN, Contact Details, Bank Account Details and Specimen Signature updated), shall be paid only through electronic mode. Such payment shall be made only after furnishing the PAN, contact details including mobile number, bank account details and specimen signature.

Further, relevant FAQs published by SEBI on its website can be viewed at the following link: https://www.sebi.gov.in/sebi_data/faqfiles/jan-2026/1767611333081.pdf

TAX ON DIVIDEND:

14. Members may note that pursuant to the Finance Act, as amended, dividend income is now taxable in the hands of the members and the Company is required to deduct tax at source ("TDS") from dividend paid to the members at the rates prescribed in the Income Tax Act, 2025. In order to enable the Company to determine the appropriate TDS rate as applicable, members are requested to submit the documents in accordance with the provisions of the **Income Tax Act, 2025 and Rules thereto.**

- i. **For Resident Members:** Tax at source shall be deducted under Section 393(1) of the Income Tax Act, 2025 at 10% on the amount of Dividend declared and paid in Financial year 2026-27 subject to PAN details registered/updated by the member. If PAN is not registered/updated in the demat account/folio as on the cut-off date, TDS would be deducted @20% as per Section 397(2) of the Income Tax Act, 2025. No tax at source is required to be deducted, if during the Financial Year, the aggregate dividend paid or likely to be paid to an individual member does not exceed ₹10,000 (Rupees Ten Thousand Only). Further, in cases where the shareholder provides Form 121 (applicable to Individual and HUF other than a Company or a Firm)/Form 121 (applicable to an Individual who is of the age of 60 years and above), provided that the eligibility conditions are being met, no TDS shall be deducted.
- ii. **For Non-Resident Members:** Tax at source shall be deducted under Section 393(2) of the Income-Tax Act, 2025 at the applicable rates. As per the relevant provisions of the Income-Tax Act, 2025, the withholding tax shall be at the rate of 20% (plus applicable surcharge and cess) on the amount of dividend payable to non-resident members. As per Section 159 of the Income Tax Act, 2025, members may be entitled to avail lower TDS rate as per Double Taxation Avoidance Agreement ("DTAA"). To avail the Tax Treaty benefits, the non-resident member will have to provide the following:

- a. Self-attested copy of Tax Residency Certificate ("TRC") obtained from the tax authorities of the country of which the member is a resident.
 - b. Self-declaration in Form 41.
 - c. Self-attested copy of the Permanent Account Number (PAN Card) allotted by the Indian Income Tax authorities, if any.
 - d. Self-declaration, certifying the following points:
 - Member remained a tax resident of the country of its residence during the Financial Year 2025-26;
 - Member is eligible to claim the beneficial DTAA rate for the purposes of tax withholding on dividend declared by the Company;
 - Member has no reason to believe that its claim for the benefits of the DTAA is impaired in any manner;
 - Member is the ultimate beneficial owner of its shareholding in the Company and dividend receivable from the Company; and
 - Member does not have a taxable presence or a permanent establishment in India during the Financial Year 2025-26.
15. The Company shall not be obligated to apply the beneficial DTAA rates at the time of tax deduction/ withholding on dividend amounts. Application of beneficial DTAA Rate shall depend upon the completeness and satisfactory review by the Company of the documents submitted by the non-resident member.
16. In order to enable the Company to determine the appropriate TDS/withholding tax rate applicable, members are requested to provide the aforesaid details and documents on or before Saturday, July 18, 2026 at <https://www.kfintech.com> or by sending over email to v-raju.sv@kfintech.com from your registered email ID. No communication on the tax determination/deduction shall be entertained post Saturday, July 18, 2026. Members may note that in case the tax on said dividend is deducted at a higher rate due to non-receipt of the aforementioned details/ documents, there would still be an option available to the member to file the return of income and claim an appropriate refund, if eligible.
17. In accordance with the provisions of the Income Tax Act 2025, TDS certificates can be made available to the members at their registered e-mail ID after filing of the quarterly TDS Returns of the Company, post payment of the said dividend.
18. Dividends, if not encashed for a consecutive period of 7 years, from the date of transfer to Unpaid/Unclaimed Dividend Account of the Company, are liable to be transferred to Investor Education and Protection Fund ("IEPF"). Further, the shares of a member who does not encash his/ her dividend for a continuous period of 7 years, are also liable to be transferred to the demat account of IEPF Authority. In view of this, members, who have not yet claimed their dividend, paid by the Company up to and during the Financial Year ended March 31, 2027, are requested to claim their dividends from the Company / RTA, within the stipulated timeline. Information in respect of the unclaimed dividend as on March 31, 2027, will be uploaded on the website of the Company <https://www.rainbowhospitals.in/> after the AGM. The members, whose unclaimed dividends / shares have been transferred to IEPF, may claim the same as well as the corresponding dividend by making an application to the IEPF Authority, in Form No. IEPF-5 available on <https://www.mca.gov.in/content/mca/global/en/mca/iepf-related-services/IEPF-5.html>. The member can file only one consolidated claim in a Financial Year as per the IEPF Rules. The procedure for claiming the shares from IEPF Authority is available on <https://www.iepf.gov.in>.

GENERAL INFORMATION

19. **KYC updation for physical members:** SEBI vide its Master Circular No. SEBI/HO/38/13/(4)2026-MIRSD-POD/I/4298/2026 dated February 6, 2026, mandated that the security holders (holding securities in physical form), whose folio(s) are not updated with the KYC details (any of the details viz., PAN (linked with Aadhaar); Contact Details; Postal Address with Pin code, Mobile Number, Bank Account Details and signature, if any) shall be eligible for any payment including dividend, interest or redemption in respect of such folios, as may be applicable, only through electronic mode with effect from April 01, 2024. Further, such security holder shall not be able to lodge grievance or avail any service request from the RTA, until the KYC details are updated. Therefore, members of the Company, holding shares in physical mode are requested to immediately update their aforesaid KYC details with the RTA of the Company to avoid any hardship /consequences as above.

20. Members who hold shares in dematerialised form and wish to update their PAN, contact details, Bank details, signatures and Nomination, are requested to contact their respective DPs.
21. All existing investors are encouraged, in their own interest, to provide 'choice of nomination' for ensuring smooth transmission of securities held by them as well as to prevent accumulation of unclaimed assets in securities market. However, all new investors shall continue to be required to mandatorily provide the 'Choice of Nomination' for demat accounts except for jointly held demat accounts.
22. As per Regulation 40(1) of the SEBI Listing Regulations, as amended, read with SEBI Master Circular no. HO/38/13/(4)2026-MIRSD-POD/1/4298/2026 dated February 6, 2026 has mandated the listed companies to issue securities in dematerialized form only while processing service requests, viz. issue of duplicate securities certificate; claim from unclaimed suspense account; renewal/ exchange of securities certificate; endorsement; sub-division/splitting of securities certificate; consolidation of securities certificates/folios; transmission and transposition. In view of the above and to eliminate risk associated with physical shares and to avail various benefits of dematerialisation, members are advised to dematerialise their shares held in physical form. Members are accordingly requested to get in touch with any Depository Participant having registration with SEBI to open a Demat account or alternatively, contact RTA to seek guidance in the demat procedure. Members may also visit website of the depositories, NSDL viz. <https://nsdl.co.in/faqs/faq.php> or CDSL viz. <https://www.cdslindia.com/investors/open-demat.html> for further understanding of the demat procedure.
23. Relevant documents referred to in the accompanying Notice and the statement pursuant to Section 102(1) of the Companies Act, 2013 shall be available for inspection through electronic mode, upon receipt of a request, being sent via e-mail: to companysecretary@rainbowhospitals.in.
24. During the AGM, the Register of Directors and Key Managerial Personnel and their Shareholding, maintained under Section 170 of the Act, the Register of Contracts or Arrangements in which Directors are interested, under Section 189 of the Act and the Certificate from Secretarial Auditors of the Company certifying that the ESOP Schemes of the Company are being implemented in accordance with the Securities and Exchange Board of India (Share Based Employee Benefits and Sweat Equity) Regulations, 2021 shall be available for inspection electronically upon login at NSDL e-voting system at <https://www.evoting.nsdl.com>.
25. The details of the Director being re-appointed, at the 28th AGM are provided in the explanatory statement of this Notice. The Company has received the requisite consent/declarations for the re-appointment under the Act and the rules made thereunder and SEBI Listing Regulations.
26. With a view to safeguard the interests of the investors and to streamline the resolution mechanism in the Indian Securities Market, SEBI vide its circular no. SEBI/HO/OIAE/OIAE_IAD-3/P/CIR/2023/195 dated December 28, 2023 as amended from time to time, mandated establishment of common Online Dispute Resolution Portal ("ODR Portal"), by Market Infrastructure Institutions, which harnesses online conciliation and online arbitration for resolution of disputes arising between investors/clients and listed companies (including their RTAs) or specified intermediaries/regulated entities, in Indian Securities Market.
- The ODR Portal allows the investors/shareholders to enroll themselves, file unresolved grievance, upload documents and get status updates pertaining to the unresolved grievances filed against listed entities/ its RTA.
- The process for initiation of Dispute Resolution process is enumerated below:
- An investor/client shall first take up his/her grievance with the Market Participant by lodging a complaint directly with the concerned Market Participant.
 - If the grievance is not redressed satisfactorily the investor/shareholder may escalate the same through the SCORES Portal (www.scores.gov.in) in accordance with SCORES Guidelines in accordance with the process laid out.
 - If the investor/client is still not satisfied with the outcome, he/she can initiate dispute resolution through the ODR Portal. Alternatively, the investor/client may initiate dispute resolution through the ODR Portal if the grievance lodged with the concerned Market Participant was not satisfactorily resolved or at any stage of the subsequent escalations (prior to or at the end of such escalation(s)).
 - The concerned Market Participant may also initiate dispute resolution through the ODR Portal after having given due notice of at least 15 calendar days to the investor/client for resolution of the dispute which has not been satisfactorily resolved between them.

- The SMART ODR Portal can be accessed at: <https://smartodr.in/login> and for more information shareholders are requested to visit the weblink <https://www.dreamfolks.com/investor-information.html>.

27. VOTING THROUGH ELECTRONIC MEANS:

- Pursuant to the provisions of Section 108 of the Act read with Rule 20 of the Companies (Management and Administration) Rules, 2014 (as amended), Regulation 44 of SEBI Listing Regulations (as amended) and applicable Circulars, the Company is pleased to provide the facility to members to exercise their right to vote on the resolutions proposed to be passed at AGM by electronic means. For this purpose, the Company has appointed NSDL, as the authorised agency for facilitating voting through electronic means. The facility of casting votes by a member using remote e-voting system as well as e-voting on the date of the AGM will be provided by NSDL.
 - The members, whose names appear in the Register of Members/list of Beneficial Owners as on the closure of Wednesday, July 22, 2026, being the cut-off date, are entitled to vote on the resolutions set forth in this Notice. The voting right of members shall be in proportion to their share in the paid-up equity share capital of the Company as on the cut-off date. A person who is not a member as on the cut-off date should treat this Notice of AGM for informational purposes only.
 - The members present in the AGM through VC / OAVM facility and have not cast their vote on the resolutions through remote e-voting, shall be eligible to vote during the AGM. The e-voting module shall be activated 30 minutes before the scheduled time of the AGM and shall remain activated 15 minutes after the closure of AGM and shall be disabled by NSDL for voting thereafter.
 - The Board of Directors of the Company have appointed Mr. K.V.S. Subramanyam, (C P No.: 4815), Designated Partner of M/s. KVSS & CO. LLP (Formerly BS and Co LLP), a Practicing Company Secretary Firm as Scrutinizer to scrutinize the remote e-voting process and e-voting during the AGM in a fair and transparent manner. Upon completion of the scrutiny of the votes cast, the Scrutinizer will submit his report to the Chairperson of the Company or to any other person authorized by him not later than two (2) working days from the conclusion of AGM.
28. Members desiring any information/ clarification on any matter to be placed at the AGM are requested to write to the Company at companysecretary@rainbowhospitals.in at least 7 days before AGM from their registered email address mentioning their name,

DPID Client ID/ folio no. and mobile number to enable the management to keep information ready at the AGM.

29. Members can also provide their feedback on the Shareholders Services of the Company by filling the "Shareholders Satisfaction Survey" attached to this notice and emailing the same at companysecretary@rainbowhospitals.in through their registered e-mail ID or sending the signed copy at the Corporate Office of the Company at 8-2-19/1/A, Daulet Arcade, Road No. 11, Banjara Hills, Hyderabad – 500034, Telangana.

Your feedback will help the Company in improving its Shareholders Service Standards.

THE INSTRUCTIONS FOR MEMBERS FOR REMOTE E-VOTING AND JOINING ANNUAL GENERAL MEETING ARE AS UNDER:

- To comply with the provisions of Section 108 of the Act and Rules framed thereunder, Regulation 44 of the Listing Regulations, Secretarial Standard - 2 issued by the Institute of Company Secretaries of India and MCA Circulars, the Members are provided with the facility to cast their vote electronically through remote e-voting (prior to AGM) and e-voting (during the AGM) services provided by NSDL on all resolutions set forth in this Notice.

Only those Members who will be present in the AGM through VC/ OAVM facility and have not cast their vote on the resolutions through remote e-voting and are otherwise not barred from doing so, shall be eligible to vote through e-voting system during the AGM.
- The remote e-voting period begins on Saturday, July 25, 2026 at 09:00 A.M (IST) and ends on Tuesday, July 28, 2026 at 5:00 P.M (IST). The remote e-voting module shall be disabled by NSDL for voting thereafter. Once the vote on a resolution is cast by the shareholder, the same shall not be allowed to be changed subsequently.
- The Members, whose names appear in the Register of Members/ Beneficial Owners as on the record date (cut-off date) i.e., Wednesday, July 22, 2026 may cast their vote electronically.

A person who is not a Member as on the cut-off date should treat this Notice for information purpose only. The voting right of shareholders shall be in proportion to their share in the paid-up equity share capital of the Company as on the cut-off date, being Wednesday, July 22, 2026. In case of joint holders, the members whose name appears as the first holder in the order of names as per the Register of Members of the Company will be entitled to vote.

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

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

Step 1: Access to the NSDL e-voting system.





Step 2: Cast your vote electronically on NSDL e-voting system.

Step 1: Access to NSDL e-Voting system**A) Login method for e-Voting and joining virtual meeting for Individual shareholders holding securities in demat mode**

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

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

Type of Shareholders	Login Method
Individual Shareholders holding securities in demat mode with NSDL	<ol style="list-style-type: none"> For OTP based login you can click on https://eservices.nsdl.com/SecureWeb/evoting/evotinglogin.jsp. You will have to enter your 8-digit DP ID, 8-digit Client Id, PAN No., Verification code and generate OTP. Enter the OTP received on registered email id/mobile number and click on login. After successful authentication, you will be redirected to NSDL Depository site wherein you can see e-Voting page. Click on company name or e-Voting service provider i.e., NSDL and you will be redirected to e-Voting website of NSDL for casting your vote during the remote e-Voting period or joining virtual meeting & voting during the meeting. Existing IDeAS user can visit the e-Services website of NSDL Viz. https://eservices.nsdl.com either on a Personal Computer or on a mobile. On the e-Services home page click on the “Beneficial Owner” icon under “Login” which is available under ‘IDeAS’ section, this will prompt you to enter your existing User ID and Password. After successful authentication, you will be able to see e-Voting services under Value added services. Click on “Access to e-Voting” under e-Voting services and you will be able to see e-Voting page. Click on company name or e-Voting service provider i.e. NSDL and you will be re-directed to e-Voting website of NSDL for casting your vote during the remote e-Voting period or joining virtual meeting & voting during the meeting. If you are not registered for IDeAS e-Services, option to register is available at https://eservices.nsdl.com. Select “Register Online for IDeAS portal” or click at https://eservices.nsdl.com/SecureWeb/IdeasDirectReg.jsp. Visit the e-Voting website of NSDL. Open web browser by typing the following URL: https://www.evoting.nsdl.com/ either on a Personal Computer or on a mobile. Once the home page of e-Voting system is launched, click on the icon “Login” which is available under ‘Shareholder/Member’ section. A new screen will open. You will have to enter your User ID (i.e. your sixteen digit demat account number hold with NSDL), Password/OTP and a Verification Code as shown on the screen. After successful authentication, you will be redirected to NSDL Depository site wherein you can see e-Voting page. Click on company name or e-Voting service provider i.e. NSDL and you will be redirected to e-Voting website of NSDL for casting your vote during the remote e-Voting period or joining virtual meeting & voting during the meeting. Shareholders/Members can also download NSDL Mobile App “NSDL Speede” facility by scanning the QR code mentioned below for seamless voting experience.

Type of Shareholders	Login Method
	<p>NSDL Mobile App is available on</p> <p>   </p> <div style="display: flex; justify-content: space-around;">   </div>
Individual Shareholders holding securities in demat mode with CDSL	<ol style="list-style-type: none"> Users who have opted for CDSL Easi/ Easiest facility, they can login through their existing user id and password. Option will be made available to reach e-Voting page without any further authentication. The users of Easi/ Easiest are requested to visit CDSL website www.cdslindia.com and click on login icon & New System Myeasi Tab and then use your existing my easi username & password. After successful login, the Easi/ Easiest user will be able to see the e-Voting option for eligible companies where the e-voting is in progress as per the information provided by company. On clicking the e-voting option, the user will be able to see e-Voting page of the e-Voting service provider for casting your vote during the remote e-Voting period or joining virtual meeting & voting during the meeting. Additionally, there are also links provided to access the system of all e-Voting Service Providers, so that the user can visit the e-Voting service providers' website directly. If the user is not registered for Easi/ Easiest, option to register is available at CDSL website www.cdslindia.com and click on login and New System Myeasi Tab and then click on registration option. Alternatively, the user can directly access e-Voting page by providing demat Account Number and PAN No. from an e-Voting link available on www.cdslindia.com home page. The system will authenticate the user by sending OTP on registered Mobile & Email as recorded in the demat Account. After successful authentication, user will be able to see the e-Voting option where the e-Voting is in progress and also able to directly access the system of all e-Voting Service Providers.
Individual Shareholders (holding securities in demat mode) through their depository participants	You can also login using the login credentials of your demat account through your Depository Participant registered with NSDL/ CDSL for e-Voting facility. upon logging in, you will be able to see e-Voting option. Click on e-Voting option, you will be redirected to NSDL/ CDSL Depository site after successful authentication, wherein you can see e-Voting feature i.e., NSDL. Click on company name or e-Voting service provider i.e. NSDL and you will be redirected to e-Voting website of NSDL for casting your vote during the remote e-Voting period or joining virtual meeting & voting during the meeting.

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

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

Login	Helpdesk details
Individual Shareholders holding securities in demat mode with NSDL	Members facing any technical issue in login can contact NSDL helpdesk by sending a request at evoting@nsdl.com or call at: 022 - 4886 7000
Individual Shareholders holding securities in demat mode with CDSL	Members facing any technical issue in login can contact CDSL helpdesk by sending a request at helpdesk.evoting@cdslindia.com or contact at 1800-21-09911

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

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

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

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

4. Your User ID details are given below:

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

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

a) If you are already registered for e-Voting, then you can use your existing password to login and cast your vote.

b) If you are using NSDL e-Voting system for the first time, you will need to retrieve the 'initial password' which was communicated to you. Once you retrieve your 'initial password', you need to enter the 'initial password' and the system will force you to change your password.

c) How to retrieve your 'initial password'?

(i) If your email ID is registered in your demat account or with the company, your 'initial password' is communicated to you on your email ID. Trace the email sent to you from NSDL from your mailbox. Open the email and open the attachment i.e. a .pdf file. Open the .pdf file. The password to open the .pdf file is your 8 digit client ID for NSDL account, last 8 digits of client ID for CDSL account or folio number for shares held in physical form. The .pdf file contains your 'User ID' and your 'initial password'.

(ii) If your email ID is not registered, please follow steps mentioned below in **process for those shareholders whose email ids are not registered.**

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

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

b) **Physical User Reset Password?** (If you are holding shares in physical mode) option available on www.evoting.nsdl.com.

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

- d) Members can also use the OTP (One Time Password) based login for casting the votes on the e-Voting system of NSDL.
7. After entering your password, tick on Agree to "Terms and Conditions" by selecting on the check box.
 8. Now, you will have to click on "Login" button.
 9. After you click on the "Login" button, Home page of e-Voting will open.

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

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

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

Process for those shareholders whose email ids are not registered with the depositories for getting the electronic copy of this notice along with Annual Report, procuring user id and password and registration of e mail ids for e-voting for the resolutions set out in this notice:

1. In case shares are held in demat mode, please provide DPID-CLID (16 digit DPID + CLID or 16 digit beneficiary ID), Name, client master or copy of Consolidated Account statement,

PAN (self-attested scanned copy of PAN card), AADHAR (self-attested scanned copy of Aadhar Card) to companysecretary@rainbowhospitals.in. If you are an Individual shareholder holding securities in demat mode, you are requested to refer to the login method explained at step 1 (A) i.e. **Login method for e-Voting and joining virtual meeting for Individual shareholders holding securities in demat mode.**

2. Alternatively shareholder/members may send a request to evoting@nsdl.com for procuring user id and password for e-voting by providing above-mentioned documents.
3. In terms of SEBI circular dated December 9, 2020 on e-Voting facility provided by Listed Companies, Individual shareholders holding securities in demat mode are allowed to vote through their demat account maintained with Depositories and Depository Participants. Shareholders are required to update their mobile number and email ID correctly in their demat account in order to access e-Voting facility.

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

1. The procedure for e-Voting on the day of the AGM is same as the instructions mentioned above for remote e-voting.
2. Only those Members/ shareholders, who will be present in the AGM through VC/OAVM facility and have not cast their vote on the Resolutions through remote e-Voting and are otherwise not barred from doing so, shall be eligible to vote through e-Voting system in the AGM.
3. Members who have voted through Remote e-Voting will be eligible to attend the AGM. However, they will not be eligible to vote at the AGM.
4. The details of the person who may be contacted for any grievances connected with the facility for e-Voting on the day of the AGM shall be the same person mentioned for Remote e-voting.

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

1. Member will be provided with a facility to attend the AGM through VC/OAVM through the NSDL e-Voting system. Members may

access by following the steps mentioned above for **Access to NSDL e-Voting system**. After successful login, you can see link of "VC/ OAVM link" placed under "**Join Meeting**" menu against company name. You are requested to click on VC/OAVM link placed under Join Meeting menu. The link for VC/ OAVM will be available in Shareholder/ Member login where the EVEN of Company will be displayed. Please note that the members who do not have the User ID and Password for e-Voting or have forgotten the User ID and Password may retrieve the same by following the remote e-Voting instructions mentioned in the notice to avoid last minute rush.

2. Members are encouraged to join the Meeting through laptops for better experience.
3. Members are requested to allow camera option and use Internet with a good speed to avoid any disturbance during the meeting.
4. Please note that Participants Connecting from Mobile Devices or Tablets or through Laptop connecting via Mobile Hotspot may experience Audio/Video loss due to fluctuation in their respective network. It is therefore recommended to use stable Wi-Fi or LAN Connection to mitigate any kind of aforesaid glitches.

General Guidelines for shareholders:

1. Institutional shareholders (i.e. other than individuals, HUF, NRI etc.) are required to send scanned copy (PDF/JPG Format) of the relevant Board Resolution/ Authority letter etc. with attested specimen signature of the duly authorized signatory(ies) who are authorized to vote, to the Scrutinizer by e-mail to kvs1175@gmail.com with a copy marked to NSDL to evoting@nsdl.com. Institutional shareholders (i.e. other than individuals, HUF, NRI etc.) can also upload their Board Resolution / Power of Attorney / Authority Letter etc. by clicking on "Upload Board Resolution / Authority Letter" displayed under "e-Voting" tab in their login.
2. It is strongly recommended not to share your password with any other person and take utmost care to keep your password confidential. Login to the e-voting website will be disabled upon five unsuccessful attempts to key in the correct password. In such an event, you will need to go through the "Forgot User Details/Password?" or "Physical User Reset Password?" option available on www.evoting.nsdl.com to reset the password.
3. Members who would like to express their views / ask questions as a speaker at the Meeting may preregister themselves by sending their request from their registered e-mail address mentioning their name, DP ID and Client ID / folio number, PAN, mobile number at companysecretary@rainbowhospitals.in from Saturday, July 25, 2026 (9:00 a.m. IST) to Tuesday, July 28, 2026 (5:00 p.m. IST). Only those Members who have pre-registered themselves as a speaker will be allowed to express their views/ask questions during the AGM. The Company reserves the right to restrict the number of speakers depending on the availability of time for the AGM.
4. In case of any queries, you may refer the Frequently Asked Questions (FAQs) for Shareholders and e-voting user manual for Shareholders available at the download section of www.evoting.nsdl.com or send a request at evoting@nsdl.com or contact Mr. Amit Vishal, Vice-President, NSDL at evoting@nsdl.com or call on toll free no.: 022 - 4886 7000 or write at NSDL, T301, 3rd Floor, Naman Chambers, G Block, Plot No- C-32, Bandra Kurla Complex, Bandra East, Mumbai- 400051.
5. Any person holding shares in physical form and non-individual shareholders, who acquires shares of the Company and becomes member of the Company after the notice is sent through e-mail and holding shares as of the cut-off date i.e. Wednesday, July 22, 2026 may obtain the login ID and password by sending a request at evoting@nsdl.com or Issuer/RTA. However, if you are already registered with NSDL for remote e-voting, then you can use your existing user ID and password for casting your vote. If you forgot your password, you can reset your password by using "Forgot User Details/Password" or "Physical User Reset Password" option available on www.evoting.nsdl.com or call on 022 - 4886 7000. In case of Individual Shareholders holding securities in demat mode who acquires shares of the Company and becomes a Member of the Company after sending of the Notice and holding shares as of the cut-off date i.e. Wednesday, July 22, 2026 may follow steps mentioned in the Notice of the AGM under "Access to NSDL e-Voting system".

Declaration of Results

1. The Scrutinizer shall provide, not later than two working days of conclusion of the AGM, a consolidated Scrutinizer's Report of the total votes cast in favour or against, if any, to the Chairman or in his absence, a person authorised by him in writing who shall countersign the same and declare the result of the voting forthwith.
2. The results declared along with the Scrutinizer's Report shall be placed on the Company's website www.rainbowhospitals.in

- and on the website of NSDL at www.evoting.nsd.com immediately after the results are declared by the Chairman or any other person authorized by the Chairman and the same shall be communicated to BSE Limited and National Stock Exchange of India Limited, where the shares of the Company are listed. Also, the results shall be placed at the corporate office of the Company.
3. The recorded transcript of the proceeding of AGM shall be placed on the Company's website at www.rainbowhospitals.in.

INFORMATION AT A GLANCE

Particulars	Details
Time and date of AGM	10:00 A.M. (IST), Wednesday, July 29, 2026
Mode	Video conference and other audio-visual means
Participation through video-conferencing	https://eservices.nsd.com
Helpline number for VC participation	022 - 4886 7000
Cut-off date for e-voting	Wednesday, July 22, 2026
E-voting start time and date	At 9:00 AM on Saturday, July 25, 2026
E-voting end time and date	At 5:00 PM on Tuesday, July 28, 2026
E-voting website	https://www.evoting.nsd.com/
Name, address and contact details of e-voting service provider	Mr. Amit Vishal, Vice president , NSDL at evoting@nsdl.com Address: T301, 3 rd Floor, Naman Chambers, G Block, Plot No- C-32, Bandra Kurla Complex, Bandra East, Mumbai- 400051. Contact Details: 022 - 4886 7000 or send a request to evoting@nsdl.com
Name, address and contact details of Registrar to an Issue and Share Transfer Agent	Mr. SV Raju, Deputy Vice President and Mr. Vijayashailu Je N (Assistant Vice President)., KFin Technologies Limited (formerly known as KFin Technologies Private Limited) Address: Selenium, Tower-B Plot 31 and 32, Financial District Nanakramguda, Serilingampally Hyderabad, Rangareddi 500 032 Telangana, India Contact Details: 18003094001 Website: www.kfintech.com

(Annexure - A)**ITEM NO. 3**

The Board Members were informed that pursuant to Section 152 of the Companies Act, 2013, ("Act") at every Annual General Meeting of the Company, one third of the total rotational directors of the Company shall be liable to retire by rotation.

The Board Members were further informed that, the directors who are liable to retire by rotation at every Annual General Meeting shall be those who have been longest in office since their last appointment and shall be eligible for re-appointment.

The Board Members were further informed that, Dr. Ramesh Kancharla, Chairman and Managing Director, Dr. Dinesh Kumar Chirla, Whole-time Director and Dr. Adarsh Kancharla, Non – Executive Director are rotational Directors of the Company and office of Dr. Adarsh Kancharla, Non – Executive Director is longest among these Directors.

Based on the above, Dr. Adarsh Kancharla shall retire by rotation at the forthcoming Annual General Meeting. The Act also provides that such retiring Director shall be eligible for re-election. Accordingly, Dr. Adarsh Kancharla, being eligible, offers himself for re-appointment.

The Board Members were further informed that, the Nomination and Remuneration Committee in its meeting held on May 23, 2026, before the Board Meeting, has

considered the re-appointment of Dr. Adarsh Kancharla as Non – Executive Director and recommended the same to the Board for its approval.

The Members may note that the Board has approved payment of sitting fees, as may be decided by the Board from time to time, and reimbursement of expenses for attending meetings of the Board and its Committee(s), in accordance with the applicable provisions of the Act and the Listing Regulations.

The requisite details pursuant to Regulation 36(3) of the Listing Regulations and Secretarial Standard on General Meetings ("SS-2") issued by the Institute of Company Secretaries of India are specified in the table below.

Dr. Ramesh Kancharla, Chairman and Managing Director of the Company, being the father of Dr. Adarsh Kancharla, may be deemed to be interested in the resolutions.

Save and except the above, none of the other Directors, Key Managerial Personnel or their relatives are, in any way, concerned or interested, financially or otherwise, in the resolutions, except to the extent of their shareholding, if any, in the Company.

The Board of Directors accordingly recommends the Ordinary Resolution set out at Item No. 3, for approval of the Members of the Company.

DETAILS OF DIRECTORS SEEKING RE-APPOINTMENT

(Pursuant to Regulation 36(3) of the SEBI (LODR) regulations, 2015 and the Secretarial Standards on General Meetings are as follows):

Name	Dr. Adarsh Kancharla	
DIN	08302615	
Age	30 years	
Qualification and Experience (including expertise in specific functional area) / Skills and Capabilities/ Brief Resume	<p>Dr. Adarsh Kancharla, a Promoter, has been a member of the Board since January 2024. He holds an MBBS and MD in Pediatrics from Sri Ramachandra Institute, Chennai, and gained clinical experience at Rainbow Children's Hospital before completing a fellowship at King's College Hospital, London (March 2024–March 2025).</p> <p>He has authored several publications in reputed journals and is currently pursuing an MBA at Harvard Business School, reflecting his focus on combining clinical expertise with strategic leadership.</p> <p>Dr. Adarsh Kancharla brings valuable insights into the healthcare industry, clinical practice and emerging trends in healthcare management. His combination of medical expertise and business education enables him to contribute to the Board's deliberations on strategy, organizational development, governance and innovation. He also provides a valuable perspective on talent development and the evolving healthcare landscape, supporting the Company's long-term growth objectives.</p>	
Date of first appointment on the Board	January 24, 2024	
Directorships held in other companies including the listed companies	<ul style="list-style-type: none"> Nexgen Futurus Private Limited 	
Resignations from the Listed Companies in the past three years	Nil	
Chairman / member of the Committee of the Board of Directors of the Company as on date of Appointment	<p>Chairmanship</p> <p>Nil</p> <p>Memberships</p> <ul style="list-style-type: none"> Risk Management Committee CSR & ESG Committee 	
Memberships/ Chairmanships of committees of other companies including the listed companies	Nil	
Number of Equity Shares held in the Company	61,10,432 Equity Shares	
Relationship between Directors and other KMPs inter-se	Mr. Adarsh Kancharla is the son of Mr. Ramesh Kancharla, Chairman and Managing Director of the Company.	
Number of meetings of the Board, Audit Committee and the Stakeholders' Relationship Committees attended during the last Financial Year (FY 2025-26)	<p>Meetings</p> <p>Board Meeting</p> <p>Audit Committee</p> <p>Stakeholders' Relationship Committees</p>	<p>Attended</p> <p>3</p> <p>Not a member of the Committee</p> <p>Not a member of the Committee</p>
Remuneration (including sitting fees, if any) last drawn in Financial Year (FY 2025-26)	Detailed in Corporate Governance Report forming part of the Report.	
Remuneration proposed to be paid and Terms and conditions of Appointment/ Re-appointment	Payment of sitting fees as may be decided by the Board from time to time.	

EXPLANATORY STATEMENT PURSUANT TO SECTION 102 OF THE COMPANIES ACT, 2013**ITEM NO. 4**

The Board of Directors of the Company in their meeting held on May 23, 2026, on recommendation by the Audit Committee, appointed M/s. Lavanya & Associates LLP as the Cost Auditors for the Financial Year 2026-27 at a remuneration of ₹2,20,000/- (Rupees Two Lakhs and Twenty Thousand Only) per annum plus applicable taxes and out-of-pocket expenses.

Pursuant to the provisions of Section 148 and other applicable provisions, if any, of the Companies Act, 2013 read with the rules made thereunder, the remuneration payable to the cost auditors is to be ratified by the Members of the Company.

None of the Directors or Key Managerial Personnel or their relatives are concerned or interested (to the extent of their shareholding in the Company, if any), financially or otherwise, in the resolution set out at Item No. 4 of the Notice.

Accordingly, based on the recommendations of the Audit Committee, the Board of Directors recommends the resolution contained in item no. 4 of the accompanying Notice to the shareholders for approval by way of an Ordinary Resolution.

ITEM NO. 5 and 6

Dr. Ramesh Kancharla (DIN: 00212270) is one of the Promoters of the Company and has been associated with the Company since its incorporation as its Chairman and Managing Director.

He holds a Bachelor of Medicine and Bachelor of Surgery ("MBBS") degree from Sri Venkateswara University, Tamil Nadu and a Doctor of Medicine ("MD") in Pediatrics from Mangalore University, Karnataka. He is also a member of the Royal Colleges of Physicians of the United Kingdom.

The Members of the Company at their 23rd Annual General Meeting held on August 11, 2021, had re-appointed Dr. Ramesh Kancharla as Chairman and Managing Director of the Company, liable to retire by rotation, for a period of five (5) years with effect from August 11, 2021, up to August 10, 2026.

Further, the Members had also approved the revision in remuneration payable to Dr. Ramesh Kancharla for the remaining tenure of his current term at the 26th Annual General Meeting of the Company held on July 30, 2024, in accordance with the provisions of the Companies Act, 2013 ("the Act") and the SEBI (Listing Obligations

and Disclosure Requirements) Regulations, 2015 ("the Listing Regulations").

Dr. Ramesh Kancharla has over 35 years of extensive experience in the field of pediatrics healthcare. Prior to establishing Rainbow Children's Hospital, he was associated with King's College Hospital, London, where he completed his specialist training in pediatric gastroenterology, hepatology and nutrition. Over the years, he has been recognised with several prestigious awards and accolades, including the "Lifetime Achiever of the Year in Pediatric Gastroenterology & Hepatology" by Times of India in 2017, "Entrepreneur of the Year" award by Sakshi Media Group in 2018, "Lifetime Achievement Award" at the Times Health Excellence Awards, 2022 and "Healthcare Leader of the Year" award at the Financial Express Healthcare Awards, 2024.

Dr. Ramesh Kancharla is currently responsible for development and execution of short- and long-term strategies and he is also in-charge of the day-to-day management aspects of the Company. Under his leadership and strategic guidance, the Company has significantly expanded its operational footprint, strengthened its clinical capabilities and established itself as one of the leading providers of pediatric and women healthcare services in India. During his tenure as Chairman and Managing Director, the Company has achieved substantial operational and financial growth.

During the aforesaid period, the Company has also expanded its network and continued to focus on operational excellence, patient care standards, clinical outcomes, corporate governance and long-term stakeholder value creation. The Board places on record its appreciation for the leadership and contribution of Dr. Ramesh Kancharla in strengthening the Company's brand, operational efficiency and long-term growth strategy. The financial performance of the Company under the leadership of Dr. Ramesh Kancharla, during the last three Financial Years is summarised below:

Particulars	FY 2023-24 (₹ Million)	FY 2024-25 (₹ Million)	FY 2025-26 (₹ Million)
Consolidated Total Income	13,330.64	15,668.74	17,468.65
Consolidated Profit After Tax (PAT)	2,182.87	2,442.27	2,815.44

During the aforesaid period, the Company continued to focus on operational excellence, patient care standards, clinical outcomes, corporate governance and long-term

stakeholder value creation. The Company also witnessed a significant expansion of its healthcare network, as set out below:

Particulars	FY 2023-24	FY 2024-25	FY 2025-26
Number of Hospitals	19	19	24
Number of Clinics	4	5	5

The Board places on record its appreciation for the leadership and contribution of Dr. Ramesh Kancharla in driving the Company's growth, strengthening its brand, enhancing operational efficiency and supporting the expansion of its healthcare network, while creating long-term value for all stakeholders.

During the Financial Year 2025-26, Dr. Ramesh Kancharla attended all the meetings of the Board of Directors held during the year. He is also a member of the Stakeholders' Relationship Committee, Risk Management Committee and CSR & ESG Committee of the Board. Further, he is also a member of Business Strategy & Investment Committee, Treasury Management Committee and TCWG Committee, voluntary Committees of the Board. Through his extensive industry experience, strategic vision and domain expertise, he has been actively contributing to the deliberations and decision-making processes of the Board and its Committees, particularly in relation to the Company's business strategy, operational growth, clinical excellence and long-term value creation.

In view of his significant contribution to the overall business operations, financial performance, strategic direction and sustained growth of the Company, and based on his leadership experience and continued value addition, the Nomination and Remuneration Committee ("NRC"), after carrying out performance evaluation, has recommended the re-appointment of Dr. Ramesh Kancharla as Chairman and Managing Director of the Company for a further term of five (5) consecutive years from August 11, 2026 to August 10, 2031, liable to retire by rotation, and payment of remuneration for a period of three (3) consecutive years from August 11, 2026 to August 10, 2029, subject to approval of the Members of the Company.

The Audit Committee of the Company has also reviewed and recommended the proposed remuneration payable to Dr. Ramesh Kancharla, considering that the same constitutes a related party transaction under the applicable provisions of the Act and the Listing Regulations. The Members may note that the proposed remuneration payable to Dr. Ramesh Kancharla is within the threshold prescribed for material related party transactions under Regulation 23 of the Listing Regulations and accordingly, separate approval of the Members as a material related party transaction is not applicable.

The Board of Directors, at its meeting held on May 23, 2026, based on the recommendations of the NRC and the Audit Committee, considered and approved the re-appointment of Dr. Ramesh Kancharla as Chairman and Managing Director of the Company for a period of five (5) consecutive years and the remuneration payable to him for a period of three (3) consecutive years as set out at item on 5 and 6 respectively, subject to approval of the Members of the Company.

The Members may further note that there is no change in the remuneration proposed to be paid to Dr. Ramesh Kancharla from the remuneration structure last approved by the Members of the Company at the 26th Annual General Meeting held on July 30, 2024.

Further, Dr. Ramesh Kancharla has confirmed that he is not drawing any remuneration, commission, sitting fees or any other pecuniary benefits from any other company, including any subsidiary company of the Company.

Dr. Ramesh Kancharla has confirmed that he is not disqualified from being appointed as a Director in terms of Section 164 of the Act and has furnished his consent to act as Director in Form DIR-2. He has further confirmed that he is not debarred from holding the office of Director by virtue of any order passed by the Securities and Exchange Board of India or any other statutory authority. The Company has received a notice in writing pursuant to Section 160(1) of the Act, proposing the candidature of Dr. Ramesh Kancharla for the office of Director of the Company.

The Company is presently earning adequate profits and the overall managerial remuneration payable to all managerial personnel is within the limits prescribed under Section 197 of the Act. However, as an abundant caution, and considering that during the tenure of Dr. Ramesh Kancharla, the remuneration proposed to be paid to him, together with the remuneration payable to other executive directors of the Company, may exceed the overall managerial remuneration limit of eleven per cent (11%) of the net profits of the Company, as computed in accordance with the provisions of Sections 197 and 198 read with Schedule V of the Act, approval of the Members is being sought in advance by way of a separate Special Resolution set out at Item No. 6 forming part of this Notice.

Further, pursuant to Regulation 17(6)(e) of the Listing Regulations, the remuneration payable to executive directors who are promoters or members of the promoter group shall be subject to approval of the Members by way of Special Resolution in the event that:

(i) the annual remuneration payable to such executive director exceeds ₹5 crore or 2.5% of the net profits of the listed entity, whichever is higher; or

(ii) where there is more than one such director, the aggregate annual remuneration payable to all such directors exceeds 5% of the net profits of the listed entity.

Accordingly, approval of the Members is being sought by way of Ordinary Resolution in terms of the Act for the re-appointment of Dr. Ramesh Kancharla as Chairman and Managing Director of the Company and by way of Special Resolution for payment of remuneration to Dr. Ramesh Kancharla as Chairman and Managing Director of the Company in terms of the Act and the Listing Regulations.

The terms and conditions of re-appointment of Dr. Ramesh Kancharla as Chairman and Managing Director of the Company, including the remuneration payable to him, as set out in the respective resolutions forming part of this Notice, together with the draft letter of re-appointment / service contract proposed to be entered into with him, shall be available for inspection by the Members in accordance with the provisions of Section 190 of the Companies Act, 2013.

All documents referred to in this Notice and the Explanatory Statement are available for inspection by the Members at the corporate office of the Company during business

hours on all working days up to the date of the Annual General Meeting.

The requisite details pursuant to Regulation 36(3) of the Listing Regulations and Secretarial Standard on General Meetings ("SS-2") issued by the Institute of Company Secretaries of India are specified in the table below.

The necessary disclosures as required under Schedule V to the Companies Act, 2013 are provided in **Annexure B**.

Dr. Adarsh Kancharla, Non-Executive Director of the Company, being the son of Dr. Ramesh Kancharla, may be deemed to be interested in the resolutions.

Save and except the above, none of the other Directors, Key Managerial Personnel or their relatives are, in any way, concerned or interested, financially or otherwise, in the resolutions, except to the extent of their shareholding, if any, in the Company.

The Board of Directors accordingly recommends the Ordinary Resolution and Special Resolution set out at Item Nos. 5 and 6, respectively, for approval of the Members of the Company.

DETAILS OF DIRECTORS SEEKING RE-APPOINTMENT

(Pursuant to Regulation 36(3) of the SEBI (LODR) regulations, 2015 and the Secretarial Standards on General Meetings are as follows):

Name	Dr. Ramesh Kancharla
DIN	00212270
Age	65 years
Qualification and Experience (including expertise in specific functional area) / Skills and Capabilities/ Brief Resume	<p>Dr. Ramesh Kancharla is one of the Promoters and Chairman & Managing Director of the Company.</p> <p>He holds a Bachelor of Medicine and Bachelor of Surgery (“MBBS”) from Sri Venkateswara University, Tamil Nadu and a Doctor in Medicine (“MD”) in pediatrics from Mangalore University, Mangaluru, Karnataka.</p> <p>He is a member of the Royal Colleges of Physicians of the United Kingdom.</p> <p>He has over 35 years of experience and has made significant contributions to pediatric healthcare. Prior to setting up the Rainbow Children’s Hospital, he was associated with King’s College Hospital, London where he completed his specialist training in pediatric gastroenterology, hepatology and nutrition. He has been recognized with several prestigious awards, including the Lifetime Achiever of the Year in Pediatric Gastroenterology & Hepatology by Times of India in the year 2017 and the award for the best healthcare professional at the Telangana’s Best Healthcare Professional Awards, 2017.</p> <p>In 2018, he was awarded the Entrepreneur of the Year award by the Sakshi Media Group. In 2022, he was bestowed with a Lifetime Achievement Award at the Times Health Excellence Awards, 2022 for exemplary contribution to pediatric healthcare. In 2024, he was bestowed with ‘healthcare leader of year’ award at the Financial Express, Healthcare award, 2024.</p> <p>As the Founder, Chairman & Managing Director of the Company, Dr. Ramesh Kancharla brings over three decades of leadership experience in the healthcare sector. He has been instrumental in shaping the Company’s vision, strategy and growth, and possesses deep expertise in healthcare delivery, industry dynamics, organizational development and talent management. Through his stewardship of the Company, he has developed significant experience in corporate governance, financial oversight, enterprise risk management and sustainable value creation, enabling him to provide strategic guidance to the Board across key business and operational matters.</p>
Date of first appointment on the Board	August 7, 1998
Directorships held in other companies including the listed companies	<ul style="list-style-type: none"> • Rainbow Children’s Hospital Private Limited • Rainbow Speciality Hospitals Private Limited • Rainbow Women & Children’s Hospital Private Limited • Nexgen Futurus Private Limited • Rainbow Fertility Private Limited • Rainbow Advanced Health Sciences Private Limited <p>Pratiksha Women & Child Care Hospital Private Limited</p>
Resignations from the Listed Companies in the past three years	Nil

Name	Dr. Ramesh Kancharla								
Chairman / member of the Committee of the Board of Directors of the Company as on date of Appointment	<p>Chairmanship</p> <p>Nil</p> <p>Memberships</p> <ul style="list-style-type: none"> • Stakeholders' Relationship Committee • Risk Management Committee • CSR & ESG Committee 								
Memberships/ Chairmanships of committees of other companies including the listed companies	<ul style="list-style-type: none"> • Rainbow Speciality Hospitals Private Limited <p>Memberships</p> <ul style="list-style-type: none"> - Audit Committee - CSR & ESG Committee <ul style="list-style-type: none"> • Pratiksha Women & Child Care Hospital Private Limited <p>Memberships</p> <ul style="list-style-type: none"> - Nomination & Remuneration Committee 								
Number of Equity Shares held in the Company	3,14,94,654 Equity Shares								
Relationship between Directors and other KMPs inter-se	Mr. Ramesh Kancharla is the father of Mr. Adarsh Kancharla, Director of the Company								
Number of meetings of the Board, Audit Committee and the Stakeholders' Relationship Committees attended during the last Financial Year (FY 2025-26)	<table border="0"> <thead> <tr> <th style="text-align: left;">Meetings</th> <th style="text-align: left;">Attended</th> </tr> </thead> <tbody> <tr> <td>Board Meeting</td> <td>6</td> </tr> <tr> <td>Audit Committee</td> <td>Not a member of the Committee</td> </tr> <tr> <td>Stakeholders' Relationship Committees</td> <td>1</td> </tr> </tbody> </table>	Meetings	Attended	Board Meeting	6	Audit Committee	Not a member of the Committee	Stakeholders' Relationship Committees	1
Meetings	Attended								
Board Meeting	6								
Audit Committee	Not a member of the Committee								
Stakeholders' Relationship Committees	1								
Remuneration (including sitting fees, if any) last drawn in Financial Year (FY 2025-26)	Detailed in Corporate Governance Report forming part of the Report.								
Remuneration proposed to be paid and Terms and conditions of Appointment/ Re-appointment	Detailed in the Resolution.								

ITEM NO. 7 & 8

Dr. Dinesh Kumar Chirla (DIN: 01395841) is one of the Promoters of the Company and has been associated with the Company since December 2005. He is presently serving as Whole-time Director of the Company and is a qualified and experienced Pediatrician and Neonatologist, actively involved in the operations of the Company in a professional capacity.

He holds a Bachelor of Medicine and Bachelor of Surgery ("MBBS") degree from Marathwada University, Doctor of Medicine ("MD") in Pediatrics from Dr. Babasaheb Ambedkar Marathwada University and Doctorate of Medicine ("DM") in Neonatology from Bombay University. He is also a Member of the Royal College of Pediatrics and Child Health ("MRCPCH"), London, United Kingdom and was awarded Fellowship of the Royal College of Pediatrics and Child Health ("FRCPCH") in the year 2015.

The Members of the Company at their 23rd Annual General Meeting held on August 11, 2021, had re-appointed Dr. Dinesh Kumar Chirla as Whole-time Director of the Company, liable to retire by rotation, for a period of five (5) years with effect from August 11, 2021, up to August 10, 2026.

Further, the Members had also approved the revision in remuneration payable by way of professional fees and other perquisites to Dr. Dinesh Kumar Chirla for the remaining tenure of his current term at the 26th Annual General Meeting of the Company held on July 30, 2024, in accordance with the provisions of the Companies Act, 2013 ("the Act") and the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 ("the Listing Regulations").

Dr. Dinesh Kumar Chirla is an experienced and leading Pediatrician and Neonatologist with over 32 years of experience in the field of neonatal and pediatric intensive care. After completing his training in India, he underwent fellowship training in Neonatology at Mercy Hospital, Melbourne, Australia and thereafter worked as Senior Clinical Fellow in Neonatology at St. Michael's Hospital, Bristol, United Kingdom. He subsequently completed fellowship training in Pediatric Intensive Care at Bristol Children's Hospital, United Kingdom before returning to India.

Over the years, Dr. Dinesh Kumar Chirla has been recognised for his contribution to neonatal and pediatric healthcare. He was awarded FRCPCH by the Royal College of Pediatrics and Child Health, London in 2015 and FNNF by the National Neonatology Forum India in 2018. He has also been instrumental in establishing one of the largest neonatal and pediatric emergency transport networks and in creating significant milestones in neonatal care, including recognition in the Guinness Book of World Records and LIMCA Book of Records. He has numerous research publications to his credit and has contributed to various medical textbooks and national and international conferences.

Dr. Dinesh Kumar Chirla is currently overseeing Company's operations as a professional doctor in compliance with the Company's contractual and other legal obligations. Under his professional guidance and operational leadership, the Company has significantly strengthened its neonatal and pediatric intensive care capabilities and enhanced its clinical excellence standards across its hospitals. During his tenure as Whole-time Director, the Company has achieved substantial operational and financial growth.

During the aforesaid period, the Company has also expanded its network and continued to focus on operational excellence, patient care standards, clinical outcomes, corporate governance and long-term stakeholder value creation. The Board places on record its appreciation for the leadership and contribution of Dr. Dinesh Kumar Chirla in strengthening the Company's clinical excellence, operational efficiency and long-term growth strategy.

The financial performance of the Company under the leadership of Dr. Dinesh Kumar Chirla, during the last three Financial Years is summarised below:

Particulars	FY 2023-24 (₹ Million)	FY 2024-25 (₹ Million)	FY 2025-26 (₹ Million)
Consolidated Total Income	13,330.64	15,668.74	17,468.65
Consolidated Profit After Tax (PAT)	2,182.87	2,442.27	2,815.44

During the aforesaid period, the Company continued to focus on operational excellence, patient care standards, clinical outcomes, corporate governance and long-term stakeholder value creation. The Company also witnessed a significant expansion of its healthcare network, as set out below:

Particulars	FY 2023-24	FY 2024-25	FY 2025-26
Number of Hospitals	19	19	24
Number of Clinics	4	5	5

The Board places on record its appreciation for the leadership and contribution of Dr. Dinesh Kumar Chirla in driving the Company's growth, strengthening its brand, enhancing operational efficiency and supporting the expansion of its healthcare network, while creating long-term value for all stakeholders.

During the Financial Year 2025-26, Dr. Dinesh Kumar Chirla attended all meetings of the Board of Directors held during the year. Through his extensive medical expertise, operational experience and domain knowledge, he has been actively contributing to the deliberations and decision-making processes of the Board and its Committees, particularly in relation to the Company's clinical protocols, operational management, patient care standards and long-term growth initiatives.

In view of his experience, professional expertise, contribution and continued involvement in the operations of the Company, the Nomination and Remuneration Committee ("NRC"), after carrying out performance evaluation, has recommended the re-appointment of Dr. Dinesh Kumar Chirla as Whole-time Director of the Company for a further term of five (5) consecutive years from August 11, 2026 to August 10, 2031, liable to retire by rotation, and payment of remuneration by way of professional fees and other perquisites for a period of three (3) consecutive years from August 11, 2026 to August 10, 2029, subject to approval of the Members of the Company.

The Audit Committee of the Company has also reviewed and recommended the proposed remuneration payable to Dr. Dinesh Kumar Chirla, considering that the same constitutes a related party transaction under the applicable provisions of the Act and the Listing Regulations. The Members may note that the proposed remuneration payable to Dr. Dinesh Kumar Chirla is within the threshold prescribed for material related party transactions under Regulation 23 of the Listing Regulations and accordingly, separate approval of the Members as a material related party transaction is not applicable.

The Board of Directors, at its meeting held on May 23, 2026, based on the recommendations of the NRC and Audit Committee, considered and approved the re-appointment of Dr. Dinesh Kumar Chirla as Whole-time Director of the Company for a period of five (5) consecutive years and the remuneration payable to him by way of professional fees and other perquisites for a period of three (3) consecutive years as set out at Item Nos.7 and 8, respectively, subject to approval of the Members of the Company.

The Members may further note that there is no change in the remuneration proposed to be paid to Dr. Dinesh Kumar Chirla from the remuneration structure last approved by the Members of the Company at the 26th Annual General Meeting held on July 30, 2024.

Further, Dr. Dinesh Kumar Chirla has confirmed that he is not drawing any remuneration, commission, sitting fees or any other pecuniary benefits from any other company, including any subsidiary company of the Company.

Dr. Dinesh Kumar Chirla has confirmed that he is not disqualified from being appointed as a Director in terms of Section 164 of the Act and has furnished his consent to act as Director in Form DIR-2. He has further confirmed that he is not debarred from holding the office of Director by virtue of any order passed by the Securities and Exchange Board of India or any other statutory authority. The Company has received a notice in writing pursuant to Section 160(1) of the Act, proposing the candidature of Dr. Dinesh Kumar Chirla for the office of Director of the Company.

The professional services rendered by Dr. Dinesh Kumar Chirla are of a specialised nature and, in the opinion of the NRC and the Board of Directors, he possesses the requisite qualifications and experience for rendering such professional services.

The Company is presently earning adequate profits and the overall managerial remuneration payable to all managerial personnel is within the limits prescribed under Section 197 of the Act. However, as an abundant caution, and considering that during the tenure of Dr. Dinesh Kumar Chirla, the remuneration proposed to be paid to him, together with the remuneration payable to other executive directors of the Company, may exceed the overall managerial remuneration limit of eleven per cent (11%) of the net profits of the Company, as computed in accordance with the provisions of Sections 197 and 198 read with Schedule V of the Act, approval of the Members is being sought in advance by way of a separate Special Resolution set out at Item No. 8 forming part of this Notice.

Further, pursuant to Regulation 17(6)(e) of the Listing Regulations, the remuneration payable to executive directors who are promoters or members of the promoter group shall be subject to approval of the Members by way of Special Resolution in the event that:

- (i) the annual remuneration payable to such executive director exceeds ₹5 crore or 2.5% of the net profits of the listed entity, whichever is higher; or
- (ii) where there is more than one such director, the aggregate annual remuneration payable to all such directors exceeds 5% of the net profits of the listed entity.

Accordingly, approval of the Members is being sought by way of Ordinary Resolution in terms of the Act for the re-appointment of Dr. Dinesh Kumar Chirla as Whole-time Director of the Company and by way of Special Resolution for payment of remuneration by way of professional fees and other perquisites to Dr. Dinesh Kumar Chirla as Whole-time Director of the Company in terms of the Act and the Listing Regulations.

The terms and conditions of re-appointment of Dr. Dinesh Kumar Chirla as Whole-time Director of the Company, including the remuneration payable to him by way of professional fees and other perquisites, as set out in the respective resolutions forming part of this Notice, together with the draft letter of re-appointment / service contract proposed to be entered into with him, shall be available for inspection by the Members in accordance with the provisions of Section 190 of the Companies Act, 2013.

All documents referred to in this Notice and the Explanatory Statement are available for inspection by the Members at the corporate office of the Company during business hours on all working days up to the date of the Annual General Meeting.

The requisite details pursuant to Regulation 36(3) of the Listing Regulations and Secretarial Standard on General Meetings (“SS-2”) issued by the Institute of Company Secretaries of India are specified in the table below.

The necessary disclosures as required under Schedule V to the Companies Act, 2013 are provided in **Annexure B**.

Except Dr. Dinesh Kumar Chirla and his relatives, none of the other Directors, Key Managerial Personnel or their

relatives are, in any way, concerned or interested, financially or otherwise, in the resolutions, except to the extent of their shareholding, if any, in the Company.

The Board of Directors accordingly recommends the Ordinary Resolution and Special Resolution set out at Item Nos. 7 and 8, respectively, for approval of the Members of the Company.

DETAILS OF DIRECTORS SEEKING RE-APPOINTMENT

(Pursuant to Regulation 36(3) of the SEBI (LODR) regulations, 2015 and the Secretarial Standards on General Meetings are as follows):

Name	Dr. Dinesh Kumar Chirla
DIN	01395841
Age	56 years
Qualification and Experience (including expertise in specific functional area) / Skills and Capabilities/ Brief Resume	<p>Dr. Dinesh Kumar Chirla is one of the promoters of the Company. Dr. Chirla is on the board of our Company since 2005.</p> <p>He graduated (MBBS) from Marathwada University, MD (Pediatrics) from Dr. Babasaheb Ambedkar Marathwada University and DM (Neonatology) from Bombay University.</p> <p>He is Member of Royal College of Paediatrics’ (MRCPCH) Royal College of Paediatrics, London, UK and was included in CSST (Neonatology) from Royal College of Paediatrics, London, UK. He was awarded FRCPCH from Royal college of Paediatrics, London, UK in 2015.</p> <p>He was also awarded FNNF in 2018 by National Neonatology Forum India. After his training in India, he did Fellowship training Neonatology at Mercy Hospital, in Melbourne, Australia. Then moved to UK and worked as a Senior Clinical Fellow Neonatology at St. Michael’s Hospital, Bristol, UK. He subsequently did Fellowship training in Pediatric Intensive care at Bristol Children Hospital, UK before returning to India.</p> <p>He is with Rainbow Children’s Hospital from last 23 years. He is the Whole-time Director of the Company and Director of Intensive Care for the Rainbow Group. He is a Gold Medallist and has numerous prizes to his credit. He has 70 Research Publications to his credit and contributed to several text books.</p> <p>He is also instrumental in creating Guinness book of world record of largest gathering of preterm babies under one roof and LIMCA RECORD-Saving smallest baby Cherry in south Asia (Bwt375 grams). He created largest Neonatal and Pediatric Emergency transport Network and implementing HFOV during transport. He was Chairperson - IAP intensive Care chapter 2023 and is a VICE PRESIDENT NNFI 2024. He conducted many National and International conferences.</p> <p>He is an invited Faculty for many National and International Conferences including Oration. He was awarded Best Doctor award by various organisation and felicitated by organisations for his contribution.</p> <p>As Whole-time Director, Dr. Dinesh Kumar Chirla brings extensive leadership experience and deep domain expertise in pediatrics, neonatology and healthcare delivery. He has played a key role in developing and scaling specialized clinical services, fostering clinical talent and driving excellence in patient care across the Rainbow Group. His experience in clinical governance, patient safety, healthcare operations and risk management enables him to contribute valuable insights to the Board on matters relating to quality of care, organizational growth and long-term sustainability of healthcare services.</p>

Name	Dr. Dinesh Kumar Chirla	
Date of first appointment on the Board	December 14, 2005	
Directorships held in other companies including the listed companies	<ul style="list-style-type: none"> • Rainbow Children's Hospital Private Limited • Rainbow Speciality Hospitals Private Limited • Rainbow Women & Children's Hospital Private Limited • Rainbow Fertility Private Limited • Rainbow Advanced Health Sciences Private Limited • Rosewalk Healthcare Private Limited 	
Resignations from the Listed Companies in the past three years	Nil	
Chairman / member of the Committee of the Board of Directors of the Company as on date of Appointment	<p>Chairmanship Nil</p> <p>Membership other than Chairmanship</p> <ul style="list-style-type: none"> • CSR & ESG Committee 	
Memberships/ Chairmanships of committees of other companies including the listed companies	Nil	
Number of Equity Shares held in the Company	66,33,310 Equity Shares	
Relationship between Directors and other KMPs inter-se	Not related to any Director or KMP of the Company	
Number of meetings of the Board, Audit Committee and the Stakeholders' Relationship Committees attended during the last Financial Year (FY 2025-26)	<p>Meetings</p> <p>Board Meeting</p> <p>Audit Committee</p> <p>Stakeholders' Relationship Committees</p>	<p>Attended</p> <p>6</p> <p>Not a member of the Committee</p> <p>Not a member of the Committee</p>
Remuneration (including sitting fees, if any) last drawn in Financial Year (FY 2025-26)	Detailed in Corporate Governance Report forming part of the Report.	
Remuneration proposed to be paid and Terms and conditions of Appointment/ Re-appointment	Detailed in the Resolution.	

ITEM NO. 9

Mr. Santanu Mukherjee (DIN: 07716452) was appointed as an Independent Director of the Company pursuant to the provisions of Section 149 of the Companies Act, 2013 ("the Act") read with the Companies (Appointment and Qualification of Directors) Rules, 2014 and the applicable provisions of the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 ("the Listing Regulations"), by the Members at the Extra-Ordinary General Meeting held on November 3, 2021, for a term of five (5) consecutive years commencing from October 22, 2021, and he holds office up to October 21, 2026.

Mr. Santanu Mukherjee holds a Bachelor of Science (Honours) degree from Presidency College, University of Calcutta. He is a certified associate of the Indian Institute of Bankers and has over 39 years of extensive experience in the banking sector.

Mr. Santanu Mukherjee served as the Managing Director of the State Bank of Hyderabad and also headed the French operations of the State Bank of India in Paris. Throughout his distinguished banking career, he has held several important leadership positions across various functions and geographies. He is also a member of the Board of Governors of the Institute of Management Technology, Hyderabad.

Mr. Santanu Mukherjee is presently serving as the Chairman of the Audit Committee and Risk Management Committee of the Company and is also a member of the Nomination and Remuneration Committee and CSR & ESG Committee of the Board. Further, he is also a member of Business Strategy & Investment Committee, Treasury Management Committee and TCWG Committee, voluntary Committees of the Board. His extensive experience in banking, finance, treasury operations, risk management and governance has been of significant value to the Company in strengthening its governance framework, internal controls, financial oversight mechanisms and strategic decision-making processes.

During his tenure as an Independent Director of the Company, Mr. Santanu Mukherjee has made valuable contributions towards strengthening the governance and compliance framework of the Company through his active participation in the deliberations of the Board and Committees. His guidance and insights have assisted the Company in matters relating to financial oversight, enterprise risk management, governance standards, regulatory compliance and long-term stakeholder value creation.

During the Financial Year 2025-26, Mr. Santanu Mukherjee attended all meetings of the Board of Directors held during the year. Through his rich professional experience, independent judgment and strategic insights, he has been actively contributing to the deliberations and decision-making processes of the Board and its Committees, particularly in relation to financial oversight, governance standards, enterprise risk management, regulatory compliance and long-term strategic initiatives.

The Members may further note that the role and responsibilities of Independent Directors have undergone significant expansion over the years on account of evolving corporate governance standards, enhanced regulatory expectations and increased responsibilities under the Act, the Listing Regulations and other applicable laws. Independent Directors are now required to devote substantial time and attention towards Board and Committee matters, including oversight of financial reporting, risk management, related party transactions, internal controls, ESG initiatives, regulatory compliance and stakeholder protection. In view of the increasing complexity of business operations and evolving governance landscape, the guidance, expertise and active oversight provided by experienced Independent Directors assume significant importance for the Company.

In accordance with the provisions of Section 149(10) and (11) of the Act, an Independent Director shall hold office for a term of up to five consecutive years and shall be eligible for re-appointment for a second term of up to five (5) consecutive years. Further, such re-appointment shall be subject to approval of Members by way of Special Resolution in accordance with the provisions of the Act and Regulation 25(2A) of the Listing Regulations.

The Nomination and Remuneration Committee ("NRC"), after taking into account the performance evaluation of Mr. Santanu Mukherjee during his present tenure and considering his knowledge, expertise, experience, skills, contribution to Board deliberations and understanding of the Company's business and industry, has recommended his re-appointment as an Independent Director of the Company for a second term of five (5) consecutive years.

The NRC has further considered the skills, expertise and competencies required for the Board and is of the view that Mr. Santanu Mukherjee possesses the requisite integrity, independence of judgment, professional expertise and experience, which would be of significant value to the Company.

The NRC has also reviewed the remuneration payable to Non-Executive Directors, including Independent Directors, taking into consideration the size and scale of the Company's operations, industry practices, increased responsibilities and time commitments of Independent Directors, evolving governance and compliance requirements and the remuneration practices followed by comparable listed companies. Based on such benchmarking exercise and evaluation, the NRC has recommended continuation of the commission payable to Mr. Santanu Mukherjee as approved earlier by the Members, within the overall limits prescribed under Section 197 of the Act.

The Members may note that the Company, at its 27th Annual General Meeting held on July 5, 2025, had approved payment of remuneration by way of commission

of ₹18,00,000/- per annum to each of the Non-Executive Directors, including Independent Directors, within the limits prescribed under Section 197 of the Act, and the same shall continue to be applicable to Mr. Santanu Mukherjee and be paid in such amounts or proportion and in such manner as the Board of Directors may from time to time determine, based on the performance of the Company and performance evaluation of Mr. Santanu Mukherjee. He shall also be entitled to sitting fees, as may be decided by the Board from time to time, and reimbursement of expenses for attending meetings of the Board and its Committee(s), in accordance with the applicable provisions of the Act and the Listing Regulations.

The Members may further note that Mr. Santanu Mukherjee also serves as an Independent Director on the Board of certain subsidiary companies of the Company, where his experience and guidance continue to provide significant value in strengthening governance practices, financial oversight and strategic supervision at the group level. Further, he is also drawing sitting fees from such subsidiary companies.

Based on the recommendation of the NRC, the Board of Directors of the Company, at its meeting held on May 23, 2026, has considered and approved the re-appointment of Mr. Santanu Mukherjee as an Independent Director of the Company, not liable to retire by rotation, for a second term of five (5) consecutive years commencing from October 22, 2026 up to October 21, 2031, subject to approval of the Members.

The Company has received a notice in writing pursuant to Section 160(1) of the Act, proposing the candidature of Mr. Santanu Mukherjee for the office of Director of the Company.

The Company has received the following statutory confirmations from Mr. Santanu Mukherjee:

- (i) Consent to act as Director in Form DIR-2, pursuant to the provisions of the Act;
- (ii) Declaration in Form DIR-8 confirming that he is not disqualified from being appointed as a Director under Section 164 of the Act;
- (iii) Declaration confirming that he meets the criteria of independence as prescribed under Section 149(6) of the Act and Regulation 16(1)(b) of the Listing Regulations; and
- (iv) Confirmation that he is registered with the Independent Directors' databank in terms of Section 150 of the Act read with Rule 6 of the Companies (Appointment and Qualifications of Directors) Rules, 2014.

He has further confirmed that he is not debarred from holding the office of Director by virtue of any order passed by the Securities and Exchange Board of India or any other statutory authority. In terms of Regulation 25(8) of the Listing Regulations, he has also confirmed that he is not aware of any circumstance or situation which exists or may reasonably be anticipated that could impair or impact his ability to discharge his duties.

In the opinion of the Board, Mr. Santanu Mukherjee fulfils the conditions specified in the Act, the Rules made thereunder and the Listing Regulations for his re-appointment as an Independent Director of the Company and is independent of the management.

The terms and conditions of re-appointment of Mr. Santanu Mukherjee as an Independent Director of the Company, shall be available on the website of the Company at https://d31scedd5hpubp.cloudfront.net/investor_files/Terms%20and%20Conditions%20of%20appointment%20of%20Independent%20Directors.pdf.

All documents referred to in this Notice and the Explanatory Statement are available for inspection by the Members at the Corporate office of the Company during business hours on all working days up to the date of the Annual General Meeting.

The requisite details pursuant to Regulation 36(3) of the Listing Regulations and Secretarial Standard on General Meetings ("SS-2") issued by the Institute of Company Secretaries of India are specified in the table below.

The Board is of the opinion that the continued association of Mr. Santanu Mukherjee would be beneficial to the Company and it is desirable to continue to avail his services as an Independent Director.

Accordingly, approval of the Members is sought for re-appointment of Mr. Santanu Mukherjee as an Independent Director of the Company, not liable to retire by rotation, for a second term of five (5) consecutive years from October 22, 2026 up to October 21, 2031, by way of a Special Resolution.

Except Mr. Santanu Mukherjee, none of the Directors, Key Managerial Personnel of the Company or their relatives are, in any way, concerned or interested, financially or otherwise, in the resolution set out at Item No. 9 of this Notice, except to the extent of their shareholding, if any, in the Company.

Accordingly, the Board recommends the Special Resolution set out under Item No. 9 for approval of the Members of the Company.

DETAILS OF DIRECTORS SEEKING RE-APPOINTMENT

(Pursuant to Regulation 36(3) of the SEBI (LODR) regulations, 2015 and the Secretarial Standards on General Meetings are as follows):

Name	Mr. Santanu Mukherjee
DIN	07716452
Age	69 years
Qualification and Experience (including expertise in specific functional area) / Skills and Capabilities/ Brief Resume	<p>Mr. Santanu Mukherjee holds a Bachelor of Science (Honours) degree from Presidency College, University of Calcutta.</p> <p>He is a certified associate of the Indian Institute of Bankers and has over 39 years of experience in the banking sector.</p> <p>Mr. Mukherjee served as the Managing Director of the State Bank of Hyderabad and also headed the French operations of the State Bank of India in Paris.</p> <p>Throughout his career, he has held various important positions in banking. He is a member of the Board of Governors of the Institute of Management Technology, Hyderabad.</p> <p>He is on the Board of the Company since October, 2021.</p> <p>Mr. Santanu Mukherjee brings over three decades of leadership experience in the banking and financial services sector. His extensive experience in leading large and complex organizations has equipped him with deep expertise in finance, enterprise risk management, corporate governance, regulatory compliance and human capital management. Having held senior leadership positions in banking operations, he also possesses valuable insights into technology-led transformation, business strategy and sustainability practices. His diverse experience and strategic perspective enable him to contribute effectively to the Board's deliberations on governance, risk oversight, financial stewardship, organizational development and long-term value creation.</p>
Date of first appointment on the Board	October 22, 2021
Directorships held in other companies including the listed companies	<ul style="list-style-type: none"> • Suven Life Sciences Limited • Rainbow Speciality Hospitals Private Limited • Sumedha Fiscal Services Limited • Muthoot Housing Finance Company Limited • Aurobindo Pharma Ltd. • Pratiksha Women & Child Care Hospital Private Limited • Apitoria Pharma Private Limited
Resignations from the Listed Companies in the past three years	<ul style="list-style-type: none"> • NACL Industries Limited • Bandhan Bank Limited
Chairman / member of the Committee of the Board of Directors of the Company as on date of Appointment	<p>Chairmanship</p> <ul style="list-style-type: none"> • Audit Committee • Risk Management Committee <p>Membership other than Chairmanship</p> <ul style="list-style-type: none"> • Nomination & Remuneration Committee • CSR & ESG Committee

Name	Mr. Santanu Mukherjee	
Memberships/ Chairmanships of committees of other companies including the listed companies	<ul style="list-style-type: none"> • Suven Life Sciences Limited • Rainbow Speciality Hospitals Private Limited • Sumedha Fiscal Services Limited • Muthoot Housing Finance Company Limited • Aurobindo Pharma Ltd • Pratiksha Women & Child Care Hospital Private Limited 	
Number of Equity Shares held in the Company	Nil	
Relationship between Directors and other KMPs inter-se	Not related to any Director or KMP of the Company	
Number of meetings of the Board, Audit Committee and the Stakeholders' Relationship Committees attended during the last Financial Year (FY 2025-26)	Meetings	Attended
	Board Meeting	6
	Audit Committee	5
	Stakeholders' Relationship Committees	Not a member of the Committee
Remuneration (including sitting fees, if any) last drawn in Financial Year (FY 2025-26)	Detailed in Corporate Governance Report forming part of the Report.	
Remuneration proposed to be paid and Terms and conditions of Appointment/ Re-appointment	Detailed in the explanatory statement.	

ITEM NO. 10

Ms. Sundari R. Pisupati (DIN: 01908852) was appointed as an Independent Director of the Company pursuant to the provisions of Section 149 of the Companies Act, 2013 ("the Act") read with the Companies (Appointment and Qualification of Directors) Rules, 2014 and the applicable provisions of the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 ("the Listing Regulations"), by the Members at the Extra-Ordinary General Meeting held on October 20, 2021, for a term of five (5) consecutive years commencing from September 16, 2021, and she holds office up to September 15, 2026.

Ms. Sundari R. Pisupati holds a Bachelor of Laws degree from the National Law School of India University, Bangalore, where she was the university topper and a gold medallist. She also holds a Master of Laws degree from Columbia University School of Law, New York, and is a licensed lawyer in both New York and India.

Ms. Sundari R. Pisupati has over 30 years of extensive experience in the legal and corporate advisory space and has handled several large corporate and commercial transactions for domestic and international clients. She advises companies across diverse sectors including information technology, financial services, venture capital, infrastructure, biotechnology and pharmaceuticals. She has been recognised in the Legal Powerlist 2020 as one of the Top Individual Lawyers and was also awarded the Certificate of Excellence as one of the "25 Most Trusted Corporate Legal Consultants to Watch in 2019" by Startup City.

Ms. Sundari R. Pisupati is presently serving as the Chairperson of the Stakeholders' Relationship Committee of the Company and is also a member of the Audit Committee, Nomination and Remuneration Committee and CSR & ESG Committee of the Board. Further, she is also a member of Business Strategy & Investment Committee and TCWG Committee, voluntary Committees of the Board. Her extensive legal expertise, regulatory knowledge and experience in advising corporates on governance, strategic transactions and compliance matters have been of significant value to the Company in strengthening its governance framework, regulatory compliance standards and stakeholder engagement mechanisms.

During her tenure as an Independent Director of the Company, Ms. Sundari R. Pisupati has made valuable contributions towards strengthening the governance and compliance framework of the Company through her active participation in the deliberations of the Board and Committees. Her guidance and insights have assisted the Company in matters relating to corporate governance, legal and regulatory compliance, stakeholder protection, related party transactions, ESG initiatives and long-term stakeholder value creation.

During the Financial Year 2025-26, Ms. Sundari R. Pisupati attended 5 out of 6 meetings of the Board of Directors held during the year. Through her rich professional experience, independent judgment and strategic insights, she has been actively contributing to the deliberations and decision-making processes of the Board and its Committees, particularly in relation to corporate governance, legal and regulatory matters, stakeholder protection, ESG initiatives and long-term strategic initiatives.

The Members may further note that the role and responsibilities of Independent Directors have undergone significant expansion over the years on account of evolving corporate governance standards, enhanced regulatory expectations and increased responsibilities under the Act, the Listing Regulations and other applicable laws. Independent Directors are now required to devote substantial time and attention towards Board and Committee matters, including oversight of governance practices, related party transactions, regulatory compliance, stakeholder grievances, ESG initiatives, risk management and protection of stakeholder interests. In view of the increasing complexity of business operations and evolving governance landscape, the guidance, expertise and active oversight provided by experienced Independent Directors assume significant importance for the Company.

In accordance with the provisions of Section 149(10) and (11) of the Act, an Independent Director shall hold office for a term of up to five consecutive years and shall be eligible for re-appointment for a second term of up to five (5) consecutive years. Further, such re-appointment shall be subject to approval of Members by way of Special Resolution in accordance with the provisions of the Act and Regulation 25(2A) of the Listing Regulations.

The Nomination and Remuneration Committee ("NRC"), after taking into account the performance evaluation of Ms. Sundari R. Pisupati during her present tenure and considering her knowledge, expertise, experience, skills, contribution to Board deliberations and understanding of the Company's business and industry, has recommended her re-appointment as an Independent Director of the Company for a second term of five (5) consecutive years.

The NRC has further considered the skills, expertise and competencies required for the Board and is of the view that Ms. Sundari R. Pisupati possesses the requisite integrity, independence of judgment, professional expertise and experience, which would be of significant value to the Company.

The NRC has also reviewed the remuneration payable to Non-Executive Directors, including Independent Directors, taking into consideration the size and scale of the Company's operations, industry practices, increased responsibilities and time commitments of Independent Directors, evolving governance and compliance requirements and the remuneration practices followed

by comparable listed companies. Based on such benchmarking exercise and evaluation, the NRC has recommended continuation of the commission payable to Ms. Sundari R. Pisupati as approved earlier by the Members, within the overall limits prescribed under Section 197 of the Act.

The Members may note that the Company, at its 27th Annual General Meeting held on July 5, 2025, had approved payment of remuneration by way of commission of ₹18,00,000/- per annum to each of the Non-Executive Directors, including Independent Directors, within the limits prescribed under Section 197 of the Act, and the same shall continue to be applicable to Ms. Sundari R. Pisupati and be paid in such amounts or proportion and in such manner as the Board of Directors may from time to time determine, based on the performance of the Company and performance evaluation of Ms. Sundari R. Pisupati. She shall also be entitled to sitting fees, as may be decided by the Board from time to time, and reimbursement of expenses for attending meetings of the Board and its Committee(s), in accordance with the applicable provisions of the Act and the Listing Regulations.

The Members may further note that Ms. Sundari R. Pisupati also serves as an Independent Director on the Board of certain subsidiary companies of the Company, where her experience and guidance continue to provide significant value in strengthening governance practices, regulatory compliance standards and strategic supervision at the group level. She is also drawing sitting fees from such subsidiary companies.

Based on the recommendation of the NRC, the Board of Directors of the Company, at its meeting held on May 23, 2026, has considered and approved the re-appointment of Ms. Sundari R. Pisupati as an Independent Director of the Company, not liable to retire by rotation, for a second term of five (5) consecutive years commencing from September 16, 2026 up to September 15, 2031, subject to approval of the Members.

The Company has received a notice in writing pursuant to Section 160(1) of the Act, proposing the candidature of Ms. Sundari R. Pisupati for the office of Director of the Company.

The Company has received the following statutory confirmations from Ms. Sundari R. Pisupati:

- (i) Consent to act as Director in Form DIR-2, pursuant to the provisions of the Act;
- (ii) Declaration in Form DIR-8 confirming that she is not disqualified from being appointed as a Director under Section 164 of the Act;
- (iii) Declaration confirming that she meets the criteria of independence as prescribed under Section 149(6) of the Act and Regulation 16(1)(b) of the Listing Regulations; and

- (iv) Confirmation that she is registered with the Independent Directors' databank in terms of Section 150 of the Act read with Rule 6 of the Companies (Appointment and Qualifications of Directors) Rules, 2014.

She has further confirmed that she is not debarred from holding the office of Director by virtue of any order passed by the Securities and Exchange Board of India or any other statutory authority. In terms of Regulation 25(8) of the Listing Regulations, she has also confirmed that she is not aware of any circumstance or situation which exists or may reasonably be anticipated that could impair or impact her ability to discharge her duties.

In the opinion of the Board, Ms. Sundari R. Pisupati fulfils the conditions specified in the Act, the Rules made thereunder and the Listing Regulations for her re-appointment as an Independent Director of the Company and is independent of the management.

The terms and conditions of re-appointment of Ms. Sundari R. Pisupati as an Independent Director of the Company, shall be available on the website of the Company at https://d31scedd5hpubp.cloudfront.net/investor_files/Terms%20and%20Conditions%20of%20appointment%20of%20Independent%20Directors.pdf.

All documents referred to in this Notice and the Explanatory Statement are available for inspection by the Members at the Corporate office of the Company during business hours on all working days up to the date of the Annual General Meeting.

The requisite details pursuant to Regulation 36(3) of the Listing Regulations and Secretarial Standard on General Meetings ("SS-2") issued by the Institute of Company Secretaries of India are specified in the table below.

The Board is of the opinion that the continued association of Ms. Sundari R. Pisupati would be beneficial to the Company and it is desirable to continue to avail her services as an Independent Director.

Accordingly, approval of the Members is sought for re-appointment of Ms. Sundari R. Pisupati as an Independent Director of the Company, not liable to retire by rotation, for a second term of five (5) consecutive years from September 16, 2026 up to September 15, 2031, by way of a Special Resolution.

Except Ms. Sundari R. Pisupati, none of the Directors, Key Managerial Personnel of the Company or their relatives are, in any way, concerned or interested, financially or otherwise, in the resolution set out at Item No. 10 of this Notice, except to the extent of their shareholding, if any, in the Company.

The Board of Directors accordingly recommends the Special Resolution set out under Item No. 10 for approval of the Members of the Company.

DETAILS OF DIRECTORS SEEKING RE-APPOINTMENT

(Pursuant to Regulation 36(3) of the SEBI (LODR) regulations, 2015 and the Secretarial Standards on General Meetings are as follows):

Name	Ms. Sundari R Pisupati
DIN	01908852
Age	55 years
Qualification and Experience (including expertise in specific functional area) / Skills and Capabilities/ Brief Resume	<p>Ms. Sundari Raviprasad Pisupati holds a Bachelor of Laws degree from the National Law School of India University, Bangalore, where she was the university topper and a gold medalist. She also holds a Master of Laws degree from Columbia University School of Law, New York, and is a licensed lawyer in both New York and India.</p> <p>With over 30 years of legal experience, Ms. Pisupati has handled large corporate and commercial transactions for domestic and international clients.</p> <p>She advises companies across various industries, including information technology, financial services, venture capital, infrastructure, biotechnology, and pharmaceuticals.</p> <p>Recognised in the Legal Powerlist 2020 as one of the Top Individual Lawyers, she also received the Certificate of Excellence as one of the '25 Most Trusted Corporate Legal Consultants to Watch in 2019' by Startup City. She is on the Board of our Company since September, 2021.</p> <p>Ms. Sundari Raviprasad Pisupati brings extensive leadership and advisory experience gained over three decades of legal practice across multiple industries and jurisdictions. She possesses deep expertise in corporate governance, legal and regulatory compliance, risk management, strategic transactions and business advisory.</p>
Date of first appointment on the Board	September 16, 2021
Directorships held in other companies including the listed companies	<ul style="list-style-type: none"> • Eugia Pharma Specialities Limited • Rainbow Speciality Hospitals Private Limited • Pratiksha Women & Child Care Hospital Private Limited
Resignations from the Listed Companies in the past three years	Nil
Chairman / member of the Committee of the Board of Directors of the Company as on date of Appointment	<p>Chairmanship</p> <ul style="list-style-type: none"> • Stakeholders' Relationship Committee <p>Membership other than Chairmanship</p> <ul style="list-style-type: none"> • Audit Committee • Nomination & Remuneration Committee • CSR & ESG Committee
Memberships/ Chairmanships of committees of other companies including the listed companies	<ul style="list-style-type: none"> • Eugia Pharma Specialities Limited • Rainbow Speciality Hospitals Private Limited • Pratiksha Women & Child Care Hospital Private Limited
Number of Equity Shares held in the Company	Nil
Relationship between Directors and other KMPs inter-se	Not related to any Director or KMP of the Company

Name	Ms. Sundari R Pisupati	
Number of meetings of the Board, Audit Committee and the Stakeholders' Relationship Committees attended during the last Financial Year (FY 2025-26)	Meetings	Attended
	Board Meeting	5
	Audit Committee	4
	Stakeholders' Relationship Committees	1
Remuneration (including sitting fees, if any) last drawn in Financial Year (FY 2025-26)	Detailed in Corporate Governance Report forming part of the Report.	
Remuneration proposed to be paid and Terms and conditions of Appointment/ Re-appointment	Detailed in the explanatory statement.	

By Order of the Board
For **Rainbow Children's Medicare Limited**

Shreya Mitra
Company Secretary and Compliance Officer
M. No: A54901

Date: May 23, 2026

Place: Hyderabad

ANNEXURE B**Disclosure under Schedule V to the Companies Act, 2013****I GENERAL INFORMATION:**

- Nature of Industry:** Healthcare Services
- Date or expected date of commencement of Commercial production:** The Company commenced its operations in the year 1999 with its first hospital at Banjara Hills, Hyderabad
- In case of new Company, expected date of commencement of activities as per project approved by Financial Institutions appearing in prospectus:** N.A.

4. **Financial performance:**

Particulars	(₹ In million)	
	2025-26	2024-25
Total Income	15,891.14	15,034.56
Less: Expenses	(12,534.60)	(11,813.73)
Less: Exceptional Items	(15.39)	-
Profit before tax	3,341.15	3,220.83
Less: Tax expenses	(840.99)	(844.98)
Net Profit after tax	2,500.16	2,375.85

- Foreign Investment or collaborations, if any:** The Foreign investment in the Company is 17.38% of the total shareholding as on March 31, 2026. No foreign collaborations have been entered by the Company.

II INFORMATION ABOUT THE DIRECTOR:

S. No.	Particulars	Dr. Ramesh Kancharla	Dr. Dinesh Kumar Chirla
1.	Background Details	As stated in the explanatory statement above.	As stated in the explanatory statement above.
2.	Past Remuneration	As mentioned in the Corporate Governance Report.	As mentioned in the Corporate Governance Report.
3.	Recognition or Awards	<p>Dr. Ramesh Kancharla has been recognized with several prestigious awards, including the following:</p> <p>(a) 2017- Lifetime Achiever of the Year in Pediatric Gastroenterology & Hepatology by Times of India and Best healthcare professional at the Telangana's Best Healthcare Professional Awards, 2017.</p> <p>(b) 2018 - Entrepreneur of the Year award by the Sakshi Media Group.</p> <p>(c) 2022 - Lifetime Achievement Award at the Times Health Excellence Awards, 2022 for exemplary contribution to paediatric healthcare.</p> <p>(d) 2024 - Healthcare leader of year' award at the Financial Express, Healthcare award, 2024.</p>	<p>Dr. Dinesh Kumar Chirla has been recognized with several prestigious awards, including the following:</p> <p>(a) Awarded FRCPCH from Royal college of Paediatrics, London, UK in 2015.</p> <p>(b) Awarded FNNF in 2018 by National Neonatology Forum India.</p>

S. No.	Particulars	Dr. Ramesh Kancharla	Dr. Dinesh Kumar Chirla
4.	Job profile and his suitability	Dr. Ramesh Kancharla is the Chairman and Managing Director of the Company. He has over 35 years of experience with our Company. He is currently responsible for development and execution of short and long term strategies and he is also in-charge of the day to day management aspects of our Company.	Dr. Dinesh Kumar Chirla is the Whole-time Director of the Company. Dr. Chirla has over 32 years of experience as an experienced and leading Pediatrician & Neonatologist in India, he is currently overseeing Company's operations as a professional doctor in compliance with the Company's contractual and other legal obligations.
5.	Remuneration proposed	As stated in the Resolution set out at item no. 6 of the Notice.	As stated in the Resolution set out at item no. 8 of the Notice.
6.	Comparative remuneration profile with respect of industry, size of Company, profile of the position and person	Considering the size of the company, the work profile and the responsibilities to be handled by the Directors and in accordance with industry standards, the proposed remuneration is in line with the compensation drawn for similar positions in companies in similar industry and of similar size and scale.	
7.	Pecuniary relationship directly or indirectly with the Company or the relationship with the Managerial Personnel or other director, if any	Dr. Ramesh Kancharla has no pecuniary relationship directly or indirectly with the Company or its Managerial Personnel or other director except to the extent of his remuneration and shareholding in the Company. Dr. Adarsh Kancharla, Non-Executive Director is son of Dr. Ramesh Kancharla, Chairman and Managing Director of the Company	Dr. Dinesh Kumar Chirla has no pecuniary relationship directly or indirectly with the Company or its Managerial Personnel or other Director except to the extent of his remuneration by way of professional fee and shareholding in the Company.

III. OTHER INFORMATION:

- Reasons for loss or inadequate profits:** The Company is earning profits and the overall remuneration paid to all the managerial Personnel of the Company is well within the overall limit of 11%, however, during the currency of tenure of the directors, the profits may be deemed inadequate and exceed the overall limit of 11%. Accordingly, as a matter of abundant precaution, the approval of members is proposed to be taken in compliance with the provisions of Section 197 read with Schedule V to the Companies Act, 2013
- Steps taken or proposed to be taken for improvement:** The Company is taking all steps and measures to increase its revenue & achieve higher profitability through continuous business expansions.
- Expected increase in productivity and profits in measurable terms:** The Company is taking various initiatives to maintain its leadership, improve market share and financial performance. It has been aggressively pursuing and implementing its strategies to improve financial performance.

By Order of the Board
For **Rainbow Children's Medicare Limited**

Shreya Mitra
Company Secretary and Compliance Officer
M. No: A54901

Date: May 23, 2026

Place: Hyderabad

Registered Office:

8-2-120/103/1, Survey No. 403, Road No. 2,
Banjara Hills, Hyderabad – 500034, Telangana.

CIN: L85110TG1998PLC029914; **E-Mail:** companysecretary@rainbowhospitals.in

Website: www.rainbowhospitals.in; **Telephone No:** +91 40 49692244



RAINBOW CHILDREN'S MEDICARE LIMITED

Corporate Identity Number: L85110TG1998PLC029914

Regd. Office: 8-2-120/103/1, Survey No. 403, Road No. 2, Banjara Hills, Hyderabad – 500034, Telangana.

Corporate Office: 8-2-19/1/A, Daulet Arcade, Road No. 11, Banjara Hills, Hyderabad - 500034, Telangana.

Website: www.rainbowhospitals.in; **E-Mail:** companysecretary@rainbowhospitals.in

Telephone No: +91 40 49692244

Shareholder Satisfaction Survey

Dear Member,

As part of our constant endeavour to improve shareholder service, we seek your feedback on this Shareholder's Satisfaction Survey. Please spare a few minutes of your valuable time to fill this questionnaire.

Name of Sole/First Shareholder

DP ID & Client ID/Folio Number

Email ID

Kindly rate your responses on specified service areas listed below on the following scale:

S. No	Area	Rating				
		5	4	3	2	1
1.	Overall Service Rating of RTA					
2.	Response to queries/grievances by Company/RTA					
3.	Receipt of various documents from the Company i.e. Annual Report, ECS Intimation etc.					
4.	Quality of disclosures to Stock Exchanges/on Company Website					
5.	Quality and content of Annual Report					

5- Excellent; 4-Very Good; 3-Good; 2-Satisfactory; 1-Need Improvement

Do you have any grievance which has not been addresses so far : Yes No

If yes, please provide a brief summary of the grievance.

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Any suggestions for improving the quality of Investor Services

.....

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(SIGNATURE OF THE MEMBER)

THANK YOU FOR YOUR SUPPORT. YOUR FEEDBACK IS IMPORTANT TO US.


Rainbow™
Children's
Hospital


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