IPO Note: Manipal Health Enterprises Ltd.

Industry: Healthcare **Date: July 28, 2026**

Issue Snapshot	
Company Name	Manipal Health Enterprises Ltd.
Issue Opens	July 29, 2026 to July 31, 2026
Price Band	Rs. 560 – Rs. 590
Bid Lot	25 Equity Shares and in multiples thereof.
The Offer	Public issue of 15,72,07,054 Equity shares of face value Rs. 2 each, (Comprising of fresh issue of 13,55,93,220 Equity Shares* (Rs. 8,000.0 cr.) and Offer for Sale of 2,16,13,834 Equity Shares* (Rs. 1,275.2 cr.) by Selling Shareholder).
Issue Size	Rs. 9,210.4 - 9,275.2 Crores
IPO Process	100% Book Building
Face Value	Rs. 2.00
Exchanges	NSE & BSE
BRLM	Kotak Mahindra Capital Company Ltd., Axis Capital Ltd., Goldman Sachs (India) Securities Pvt. Ltd., Jefferies India Pvt. Ltd., J.P. Morgan India Pvt. Ltd., UBS Securities India Pvt. Ltd., DBS Bank India Ltd.
Registrar	KFin Technologies Ltd.

Issue Break up		
QIB ex Anchor	30%	4,70,85,845
Anchor Investor	45%	7,06,28,768
HNI<Rs. 10 Lakhs	5%	78,47,641
HNI>Rs. 10 Lakhs	10%	1,56,95,282
RII	10%	1,56,95,282
Total Public	**100%**	**15,69,52,817**
Employee Reservation		2,54,237
Total		**15,72,07,054**

Equity Share Pre Issue (Nos. Cr.)	118.0
Fresh Share (Nos. Cr.)	13.6
OFS Share (Nos. Cr.)	2.2
Equity Share Post Issue (Nos. Cr.)	131.5
Market Cap (Rs. Cr.)	77,605.7
Equity Dilution	10.3%
Stake Sale by OFS	1.6%

Objects of the Offer

Offer for Sale

The Company will not receive any proceeds from the Offer for Sale by the Selling Shareholders. (up to 10,808,861 equity shares by Imperius Healthcare Investments Pte. Ltd., up to 6,792,002 equity shares by Manipal Education And Medical Group India Pvt. Ltd., up to 2,329,667 equity shares by TPG SG Magazine Pte. Ltd., up to 792,494 equity shares by Seventy Second Investment Company LLC, up to 405,791 equity shares by Ammar SDN BHD, up to 264,556 equity shares by Novo Holdings Invest Asia A/S, and up to 220,463 equity shares by Phoenix Bear Investments, LLC)

Fresh Issue

- Repayment/ prepayment, in full or in part, of certain outstanding borrowings and accrued interest thereon availed by one of Material Subsidiaries, namely, Manipal Hospitals Private Limited (Rs. 5553 crore);
- Acquisition of minority stake in the stepdown Subsidiary, Sahyadri Hospitals Private Limited (Rs. 574 crore); and
- General corporate purposes.

Company Highlights

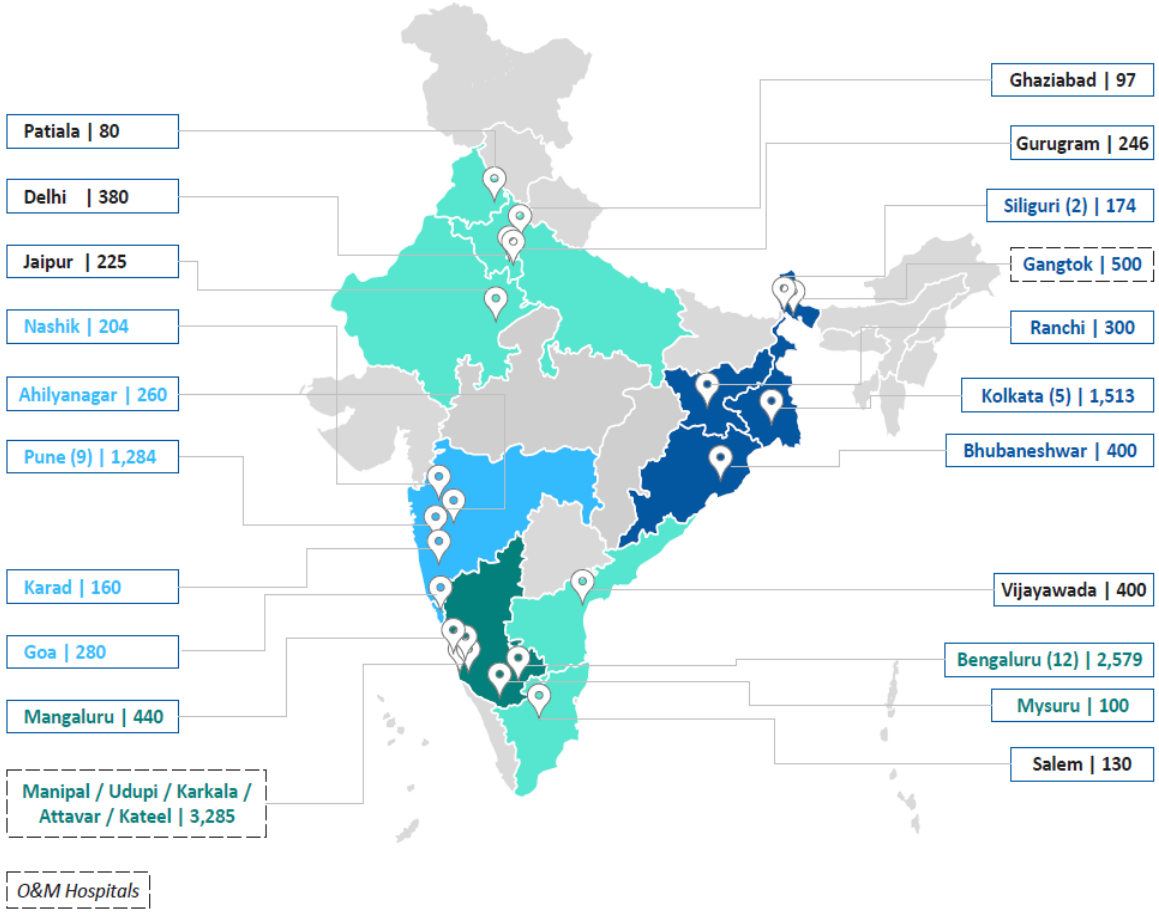
- Manipal Health Enterprises Ltd. (MHEL) operates a pan India network of multispecialty hospitals delivering a comprehensive range of care services—from outpatient services to complex tertiary and quaternary interventions. As of March 31, 2026, the company operated 49 hospitals with 13,037 licensed beds across 14 states and union territories. It has the widest footprint in terms of presence of hospitals among private hospital chains in India as of March 31, 2026 (Source: CRISIL Report). It is the largest pan-India multispecialty hospital network by bed capacity and the second largest hospital chain by number of hospitals as of March 31, 2026.
- For FY26, it reported the second-highest revenue from operations of Rs. 10335.75 cr. among private hospital chains in India. In its three key regions of (i) Karnataka, (ii) Maharashtra and Goa and (iii) West Bengal, Odisha, Jharkhand, and Sikkim (in eastern India), it had 6,404, 2,188 and 2,887 licensed beds, respectively, as of March 31, 2026. Among private hospital chains in India, as of March 31, 2026, MHEL is the largest player in (i) Karnataka, (ii) Maharashtra and Goa region, and (iii) in select states of West Bengal, Odisha, Jharkhand, and Sikkim (in eastern India) (Source: CRISIL Report). Licensed beds represent the total number of hospital beds approved by regulatory authorities in a facility.
- MHEL is the only private hospital chain network in India to lead in three metro markets of Bengaluru (Karnataka), Kolkata (West Bengal) and Pune (Maharashtra) by bed capacity (5,376) as of March 31, 2026 (Source: CRISIL Report). As of March 31, 2026, it had 2,579, 1,513 and 1,284 licensed beds and 12, 5, and 9 hospitals in Bengaluru (Karnataka), Kolkata (West

- Bengal) and Pune (Maharashtra), respectively. Its multi-hospital presence in these metros allows it to deliver care closer to patients' homes, reduce travel times for critical interventions, and serve broad referral areas within each city. In line with its core philosophy to improve access to healthcare, the company maintains a balanced presence across metros and non-metros, with 46.78% of its licensed beds located in metros and 53.22% of its licensed beds located in non-metros as of March 31, 2026. It served 7.63 million patients across its network (including O&M hospitals) in FY26.
- The company offers clinical services across multiple specialties, with a focus on tertiary and quaternary care, particularly in cardiac sciences, oncology, neurosciences, gastro sciences, orthopedics and renal sciences (CONGO-R). These high-acuity specialties contributed 64.30%, 62.56% and 61.55% of its gross inpatient revenue in FY26, FY25 and FY24, respectively, equivalent to Rs. 5,030.95 crore, Rs. 3,915.21 crore and Rs. 2,839.65 crore. On a pro forma basis, they contributed 64.09% and 62.10% of inpatient revenue in FY26 and FY25, respectively, equivalent to Rs. 5,352.78 crore and Rs. 4,459.71 crore.
- The Company's inpatient volumes increased from 0.33 million patients in FY24 to 0.53 million patients in FY26, representing a CAGR of 26.26%. Despite increasing its CONGO-R mix, which comprises complex specialty services that typically require longer hospital stays, the average length of stay (ALOS) decreased from 2.93 days in FY24 to 2.88 days in FY25 and further to 2.78 days in FY26, demonstrating the Company's focus on operational efficiency.

View

- MHEL is the largest pan-India multispecialty hospital network by bed capacity, with 13,037 beds as of March 31, 2026, and was also the second-largest hospital chain by number of hospitals as of the same date. The breadth of the Company's network enables it to improve access to healthcare across India, serve a diverse patient base and provide healthcare services closer to patients' homes.
- MHEL seeks to maintain and strengthen its leadership in its key regions of Karnataka, Maharashtra and Goa, and eastern India (particularly West Bengal), while increasing its presence in regions such as Delhi NCR, central India, and eastern India (particularly Ranchi, Jharkhand, and Bhubaneswar, Odisha). The Company aims to continue enhancing clinical case mix by increasing the share of high-end and complex procedures within its CONGO-R specialties.
- MHEL will continue to pursue select acquisitions to enter new markets and consolidate positions in existing ones, leveraging its track record of integration and operational turnaround. The Company continuously evaluates inorganic growth opportunities in its key markets of Karnataka; West Bengal, Odisha, Jharkhand and Sikkim (in eastern India); and Maharashtra and Goa, including the Mumbai–Pune economic corridor, as well as in geographies such as Delhi-NCR, Telangana, Kerala, Andhra Pradesh and Chhattisgarh.
- MHEL intends to scale technology-enabled, "physical-plus-digital" model anchored in a unified hospital information system, a database that integrates clinical, diagnostic and administrative workflows across its network. Its digital strategy encompasses leverage digital, AI and technology to extend patient reach and access, transform patient and clinician experiences, expand out-of-hospital care and continue focus on operational excellence to drive efficiencies.
- MHEL adopts the latest medical technologies and intends to continue investing in high end medical equipment to expand access to complex care and support superior clinical outcomes. Over the past few years, it has added 41 robotic systems, expanding its minimally invasive capabilities, and has also invested in advanced linear accelerator and tomotherapy systems, spine robotics, soft and hard tissue robotic systems, and mammography infrastructure.
- The Company operates a patient-centric ecosystem rooted in transparency, and clinical and service excellence. It offers protocol-driven care enabled by safety frameworks to ensure high-quality care for its patients. The Company's focus on reducing turn-around-times ("TATs"), adoption of digital tools for scheduling appointments and providing culturally sensitive multi-lingual support enables it to provide seamless and personalized care to its patients.
- IML has maintained a consistent track record of financial performance. The company focus on efficiency, productivity improvements, and cost rationalization to keep its operating costs under control. The company has recorded Revenue/EBITDA/PAT CAGR of 29.4%/24.6%/31.1% respectively over the FY24-FY26 period. The Company focuses on operational efficiencies and disciplined working capital management, resulting in a negative working capital cycle of 13 days in FY26.
- In terms of the valuations, on the higher price band, MHEL demands P/E multiple of 84.7x on FY26 diluted EPS and EV/EBITDA multiple of 31.6x on FY26 diluted EBITDA.

Network



Three Key Regions

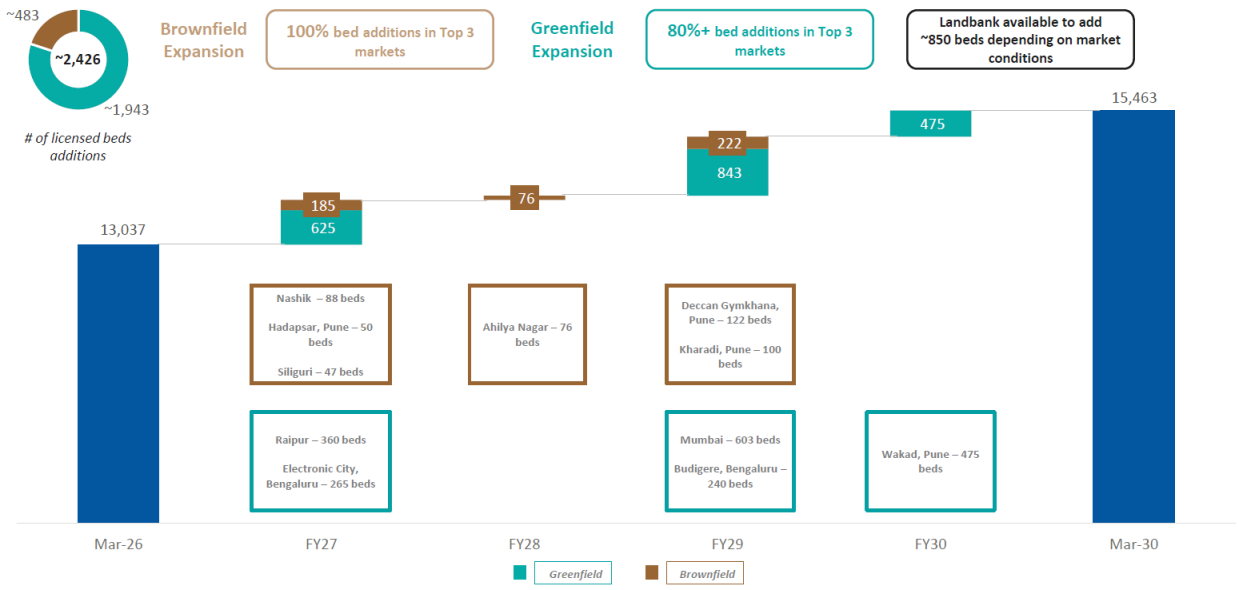
Region-Wise Bed Capacity[1]	Karnataka	Maharashtra & Goa	West Bengal, Odisha, Jharkhand, and Sikkim (in Eastern India)
Manipal Health Enterprises Limited	**6,404**	**2,188**	**2,887**
Apollo Hospitals Enterprise Limited	781	N/A	N/A
Max Healthcare Group	-	808	250
Fortis Healthcare Limited	886	770	374
Narayana Hrudayalaya Limited	2,295	N/A	1,453
Aster DM Healthcare Limited	1,231	250	-
Global Health Limited	-	-	310
Krishna Institute of Medical Sciences Limited	800	1,309	-
Region-Wise Metrics			
GSDP[2] (₹ Trillion)	28.8 *Karnataka: #4 amongst states*	Maharashtra: 45.3 *Maharashtra: #1 amongst states*	West Bengal: 18.2
NSDP[2]/Capita (₹)	380,906	Maharashtra: 309,300	N/A
Beds / 10k populace[3]	Total: 40-42; Private: 30-31	National Avg: 16 Total: 17-18; Private: 15-16	Total: 10.5-11.5; Private: 3-4
Private Healthcare Insurance Penetration[4] (%)	66%	National Avg: 23.95% 63%	12%

Amongst the leading states in terms of Insurance penetration

Acquisitions

Hospital /Group	Location	Year of acquisition	No. of hospitals & licensed beds	Revenue from operations (₹ Cr)		Revenue CAGR FY24 to FY26	EBITDA Margin		Acquisition rationale
				FY24	FY26		FY24	FY26	
Columbia Asia	Bengaluru, Mysore, Gurugram, Ghaziabad, Patiala, Pune & Kolkata	FY 2022	12 hospitals and 1,427 licensed beds	1,787.8	2,474.3	17.6%	30.5%	33.8%	To add to multi-city presence and strengthen position in Bengaluru
Vikram Hospitals	Bengaluru	FY 2022	1 hospital; 220 licensed beds	230.6	285.2	11.2%	32.1%	33.7%	To strengthen position in Bengaluru
AMRI	Kolkata & Bhubaneswar	FY 2024	4 hospitals; 1,321 licensed beds	1,074.8	1,350.4	12.1%	21.3%	23.8%	To consolidate position in West Bengal with a view to expand its operations and hospital network in eastern India through Bhubaneswar, Odisha
Medica Synergie	Kolkata, Ranchi and Siliguri	FY 2025	4 hospitals; 974 licensed beds						To enhance leadership in Kolkata / eastern India through network depth and service-line integration
Sahyadri Group	Pune, Nasik, Karad and Ahilyanagar	FY 2026	10 hospitals; 1,606 licensed beds						To establish leadership in Pune and strengthen West India footprint across the Pune–Mumbai economic corridor

Expansion Plan Through 2030



Key Operational Parameters

	FY24	FY25	FY25 (Pro Forma)	FY26	FY26 (Pro Forma)
Financial Metrics					
Revenue from Operations (₹ Cr)	6171.6	8242.3	9263.6	10335.8	10935.6
Revenue growth (%)	27.5%	33.6%	NA	25.4%	18.1%
Profit for the year (₹ Cr)	533.2	1081.7	534.8	916.5	684.9
PAT Margin (%)	8.6%	13.1%	5.8%	8.9%	6.3%
EBITDA (excluding exceptional items) (₹ Cr)	1776.6	2247.1	2468.4	2795.9	2928.5
Adjusted EBITDA (₹ Cr)	1696.6	2165.4	2361.7	2644.2	2749.6
EBITDA (excluding exceptional items) Margin (%)	28.8%	27.3%	26.7%	27.1%	26.8%
Adjusted EBITDA Margin (%)	27.5%	26.3%	25.5%	25.6%	25.1%
Return on Capital Employed (ROCE) (%)	27.7%	27.0%	NA	21.9%	NA
Net Debt (including lease liabilities) / Adjusted EBITDA (x)	2.2	2.0	NA	3.7	NA
Material Cost to Revenue (%)	20.3%	20.4%	20.4%	20.5%	20.5%
Operational Metrics					
Number of hospitals (Nos.)	33	37	47	49	49
Licensed beds (Nos.)	9,520	10,494	12,100	13,037	13,037
Operational beds (Nos.)	4,055	5,179	6,263	6,227	6,878
Occupancy (%)	65.3%	67.1%	66.2%	64.5%	64.5%
Average Revenue per Occupied Bed (ARPOB) (₹ per day)	61,741.7	63,312.2	59,820.4	68,937.6	66,144.6
Average Length of Stay (ALOS) (days)	2.9	2.9	2.9	2.8	2.8
Outpatient volumes (Footfalls)	38,10,672	47,17,313	50,88,359	54,83,403	57,17,889
Inpatient volumes (Footfalls)	3,30,725	4,39,724	5,22,575	5,27,227	5,78,099
Outpatient volume growth (%)	19.0%	23.8%	NA	16.2%	12.4%
Inpatient volume growth (%)	18.9%	33.0%	NA	19.9%	10.6%
Specialty-wise Revenue Mix					
Cardiac sciences (%)	15.2%	15.7%	16.6%	16.3%	16.8%
Oncology (%)	8.9%	10.2%	10.0%	11.6%	11.4%
Neurosciences (%)	9.1%	9.2%	9.2%	9.1%	9.1%
Gastro sciences (%)	7.6%	7.4%	7.1%	7.2%	7.0%
Orthopedics (%)	12.9%	12.5%	12.1%	12.9%	12.6%
Renal sciences (%)	7.8%	7.6%	7.2%	7.3%	7.2%
Others (%)	38.5%	37.4%	37.9%	35.7%	35.9%
Payor-wise Revenue Mix					
Cash (%)	32.6%	31.2%	31.0%	30.3%	30.3%
Third Party Administrators / Insurance (%)	49.5%	49.2%	49.1%	49.7%	49.5%
Government (%)	11.0%	13.4%	13.7%	13.8%	14.0%
Others (%)	6.9%	6.2%	6.2%	6.2%	6.1%
Employee Count (Nos.)	15,778	19,707	23,217	24,240	24,240

Segment-wise Revenue from Operations

	FY24		FY25		FY25 (Pro Forma)		FY26		FY26 (Pro Forma)	
	Rs. Cr.	%	Rs. Cr.	%	Rs. Cr.	%	Rs. Cr.	%	Rs. Cr.	%
Cardiac sciences	702.9	15.2%	985.0	15.7%	1192.6	16.6%	1273.2	16.3%	1400.1	16.8%
Oncology	409.4	8.9%	640.6	10.2%	715.6	10.0%	907.3	11.6%	949.7	11.4%
Neuro sciences	420.6	9.1%	572.6	9.2%	661.5	9.2%	709.6	9.1%	763.4	9.1%
Gastro sciences	352.1	7.6%	460.9	7.4%	506.6	7.1%	559.8	7.2%	584.8	7.0%
Orthopedics	596.5	12.9%	783.7	12.5%	867.3	12.1%	1006.6	12.9%	1055.4	12.6%
Renal sciences	358.1	7.8%	472.4	7.6%	516.1	7.2%	574.4	7.3%	599.4	7.2%
Total CONGO-R	2839.7	61.6%	3915.2	62.6%	4459.7	62.1%	5031.0	64.3%	5352.8	64.1%
Others	1773.1	38.5%	2342.9	37.4%	2722.0	37.9%	2793.5	35.7%	3000.4	35.9%
Total Gross Inpatient Revenue	**4,612.7**	**100.0%**	**6,258.1**	**100.0%**	**7,181.7**	**100.0%**	**7,824.5**	**100.0%**	**8,353.1**	**100.0%**

Financial Statement

(In Rs. Cr)	FY24	FY25	FY25 (Pro Forma)	FY26	FY26 (Pro Forma)
Share Capital	75.6	77.1	77.1	236.0	
Net Worth	4087.5	6000.2	6160.3	8798.8	
Long Term Borrowings	3700.1	4470.0	9725.7	9948.8	
Other Long Term Liabilities	1374.4	1807.1	2823.3	2754.6	
Short-term borrowings	243.8	296.8	301.9	604.6	
Other Current Liabilities	1412.9	1498.0	2432.7	2757.8	
Fixed Assets	8200.0	10440.2	16570.3	19548.2	
Non Current Assets	8336.4	777.3	820.2	1207.3	
Current Assets	2051.4	2848.1	4046.8	4102.5	
Total Assets	10818.8	14072.1	21443.8	24864.5	
Revenue from Operations	6171.6	8242.3	9263.6	10335.8	10935.6
Revenue Growth (%)		33.6		25.4	18.0
EBITDA	1683.1	2126.5	2322.8	2611.2	2716.6
EBITDA Margin (%)	27.3	25.8	25.1	25.3	24.8
Net Profit	533.2	1081.7	534.8	916.5	684.9
Net Profit Margin (%)	8.6	13.1	5.8	8.9	6.3
Earnings Per Share (Rs.)	5.3	9.3	4.5	7.7	5.6
Return on Networth (%)	14.8	18.2		10.6	
Net Asset Value per Share (Rs.)	35.6	50.9		72.6	

Source: RHP, Ashika Research

Cash Flow Statement

(In Rs. Cr)	FY24	FY25	FY26
Cash flow from Operations Activities	1388.6	1569.8	2078.4
Cash flow from Investing Activities	(870.5)	(2658.3)	(7036.7)
Cash flow from Financing Activities	(250.2)	904.1	4954.4
Net increase/(decrease) in cash and cash equivalents	267.9	(184.4)	(3.9)
Cash and cash equivalents at the beginning of the year	68.2	360.9	291.3
Cash and cash equivalents at the end of the year	360.9	291.3	299.3

Source: RHP

Comparison with Listed Industry Peers

Co Name	Net Sales (Rs. Cr.)	OPM (%)	D/E (x)	ROCE (%)	RONW (%)	P/E (x)	P/BV (x)	EV/EBIDTA (x)	MCap/Sales (x)	Market Cap (Rs. Cr.)
Manipal Health Enterprises Ltd.	10335.8	25.3	0.3	10.8	5.5	84.7	4.6	31.6	7.5	77605.7
Apollo Hospitals Enterprise Ltd.	21794.0	14.8	0.7	21.2	20.5	65.8	13.5	33.4	5.1	127682.2
Max Healthcare Institute Ltd.	8373.5	28.7	0.3	15.0	14.5	73.1	9.9	44.8	12.6	105473.6
Fortis Healthcare Ltd.	9127.8	23.4	0.3	14.1	11.3	68.4	7.2	34.5	7.8	71260.5

ANALYST CERTIFICATION

The undersigned analyst hereby certifies that all the opinions presented in this report accurately reflect their personal views regarding the subject securities, issuers, products, sectors, or industries. No part of their compensation has been, is, or will be directly or indirectly tied to specific recommendations or views expressed in this report. The analyst assumes primary responsibility for the creation of this research report and has diligently endeavored to establish and maintain independence and objectivity in formulating any recommendations.

Investors are strongly advised to carefully consider all relevant risk factors, including their financial condition and suitability to risk-return profiles, and to seek professional advice before making any investment decisions.

Ashika Stock Services Limited (ASSL) commenced its operations in 1994 and is currently a trading and clearing member of various prominent stock exchanges, including BSE Limited (BSE), National Stock Exchange of India Limited (NSE), Metropolitan Stock Exchange of India Limited (MSEI), National Commodity and Derivative Exchange (NCDEX), and Multi Commodity Exchange (MCX). ASSL is dedicated to offering a comprehensive range of services to its esteemed clients, encompassing broking services, depository services (both CDSL and NSDL), and the distribution of financial products such as mutual funds, IPOs, and bonds.

Recognized as a "Research Entity" under SEBI (Research Analyst) Regulations 2014 since 2015 (Registration No. INH000000206), ASSL operates as a wholly-owned subsidiary of Ashika Global Securities (P) Ltd., a non-deposit-taking NBFC company registered with the Reserve Bank of India (RBI). The broader Ashika Group, with detailed information available on our website (www.ashikagroup.com), serves as an integrated financial service provider involved in diverse activities, including Investment Banking, Corporate Lending, Debt Syndication, and other advisory services.

Krishna Kumar Agarwal

Digitally signed by Krishna Kumar Agarwal
Date: 2026.07.28 09:58:08 +05'30'

Over the past three years, ASSL has not faced any substantial or material disciplinary actions imposed by regulatory authorities. Nonetheless, routine inspections conducted by SEBI, Exchanges, and Depositories have identified certain operational deviations. In response to these observations, advisory letters or minor penalties have been issued by the relevant authorities.

DISCLOSURE

ASSL prepares and distributes research reports solely in its capacity as a Research Analyst under SEBI (Research Analyst) Regulations 2014. The disclosures and disclaimer provided herein are integral components of all research reports being disseminated.

1) ASSL, its associates, and its Research Analysts (including their relatives) may hold a financial interest in the subject company(ies). This financial interest extends beyond merely having an open stock market position and may include acting as an advisor to, or having a loan transaction with, the subject company(ies), in addition to being registered as clients.

2) ASSL and its Research Analysts (including their relatives) do not possess any actual or beneficial ownership of 1% or more of securities in the subject company(ies) at the conclusion of the month immediately preceding the publication date of the source research report or the date of the relevant public appearance. Nevertheless, it is noted that associates of ASSL may hold actual or beneficial ownership of 1% or more of securities in the subject company(ies).

3) ASSL and its Research Analysts (including their relatives) do not possess any other material conflict of interest at the time of publishing the source research report or the date of the relevant public appearance. It is important to note, however, that associates of ASSL may have an actual or potential conflict of interest, distinct from ownership considerations.

4) ASSL or its associates may have received compensation for investment banking, merchant banking, and brokerage services, from the subject companies within the preceding 12 months. However, it is important to clarify that neither ASSL, its associates, nor its Research Analysts (who are part of the Research Desk) have received any compensation or other benefits from the subject companies or third parties in relation to the specific research report or research recommendation. Furthermore, Research Analysts have not received any compensation from the companies mentioned in the research report or recommendation over the past twelve months.

5) The subject companies featured in the research report or recommendation may be a current client of ASSL or may have been a client within the twelve months preceding the date of the relevant public appearance, particularly for investment banking, merchant banking, or brokerage services.

6) ASSL or its Research Analysts have not been involved in managing or co-managing public offerings of securities for the subject company(ies) within the past twelve months. However, it is worth noting that associates of ASSL may have managed or co-managed public offerings of securities for the subject company(ies) in the past twelve months.

7) Research Analysts have not held positions as officers, directors, or employees of the companies mentioned in the report or recommendation.

8) Neither ASSL nor its Research Analysts have been engaged in market making activity for the companies mentioned in the report / recommendation.

DISCLAIMER

The research recommendations and information provided herein are intended solely for the personal use of the authorized recipient and should not be construed as an offer document or as investment, legal, or taxation advice, nor should it be considered a solicitation of any action based upon it. This report is strictly not for public distribution or use by any individual or entity in jurisdictions where such distribution, publication, availability, or utilization would contravene the law, regulation, or be subject to registration or licensing requirements.

Recipients of this report will not be treated as customers merely by virtue of receiving it. The content is derived from information obtained from public sources deemed reliable, but we do not guarantee its accuracy or completeness. All estimates, expressions of opinion, and other subjective judgments contained herein are as of the date of this document and are subject to change without notice.

Recipients should conduct their own investigations and due diligence. ASSL disclaims any responsibility for any loss or damage that may result from inadvertent errors in the information contained in this report. Past performance should not be relied upon as a guide for future performance; future returns are not guaranteed, and the possibility of loss of capital exists.