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To,

BSE Limited
Scrip Code: 542650

National Stock Exchange of India Limited
Scrip Symbol: METROPOLIS

Dear Sir/Madam,

Sub: Earnings call transcript for Q1 FY27

Pursuant to Regulation 30 read with Schedule III of the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015, please find enclosed herewith the transcript of Q1 FY27 earnings conference call held on Wednesday, August 05, 2026. The transcript is also available on the Company's website i.e. www.metropolisindia.com

You are requested to take the above information on record.

Thanking you,
Yours faithfully,

For **Metropolis Healthcare Limited**

Kamlesh Chandrashekhar Kulkarni

Digitally signed by Kamlesh Chandrashekhar Kulkarni
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Encl: a/a

“Metropolis Healthcare Limited Q1 FY'27 Earnings Conference Call”

August 05, 2026

E&OE - This transcript is edited for factual errors. In case of discrepancy, the audio recording uploaded on the stock exchanges on August 05, 2026 will prevail.

MANAGEMENT: **MS. AMEERA SHAH – CHAIRPERSON & WHOLE-TIME DIRECTOR, METROPOLIS HEALTHCARE LIMITED**
MR. SURENDRAN CHEMMENKOTIL – MANAGING DIRECTOR, METROPOLIS HEALTHCARE LIMITED
MR. SAMEER PATEL – CHIEF FINANCIAL OFFICER, METROPOLIS HEALTHCARE LIMITED
MR. MOHAN MENON – CHIEF MARKETING OFFICER, METROPOLIS HEALTHCARE LIMITED

MODERATOR: **MR. ABIN BENNY – JM FINANCIAL INSTITUTIONAL SECURITIES LIMITED**

Moderator: Ladies and gentlemen, good day, and welcome to the Q1 FY 2027 Earnings Conference Call of Metropolis Healthcare Limited, hosted by JM Financial Institutional Securities.

This conference call may contain forward-looking statements about the company, which are based on the beliefs, opinions and expectations of the company as on the date of this call. These statements do not guarantee the future performance of the company and may involve risks and uncertainties which are difficult to predict.

As a reminder, all participant lines will be in the listen-only mode and there will be an opportunity for you to ask questions after the presentation concludes. Should you need assistance during this conference call, please signal an operator by pressing "*" then "0" on your touchtone phone. Please note that this conference is being recorded.

I now hand the conference over to Mr. Abin Benny from JM Financial Institutional Securities. Thank you, and over to you, sir.

Abin Benny: Thank you, Alaric. Good morning, and warm welcome to all participants on the Metropolis Healthcare Q1 FY 2027 Earnings Call hosted by JM Financial.

Today on this call, we have with us the Management, Ms. Ameera Shah – Promoter and Chairperson, Mr. Surendran Chemmenkotil – Managing Director, Mr. Sameer Patel – Chief Financial Officer, and Mr. Mohan Menon – the Chief Marketing Officer.

I will now hand over the call to Ms. Ameera Shah for her opening remarks. Thank you, and over to you, ma'am.

Ameera Shah: Hi. Good morning, everyone, and thank you for joining us today for the Q1 FY 2027 Earnings Conference Call at Metropolis Healthcare.

I am joined by Surendran – MD, Sameer Patel – CFO, Mohan Menon – CMO, and the rest of our leadership team, along with SGA, our Investor Relations Partner.

We have uploaded the Investor Presentations on the Exchanges and website, and I hope you have had an opportunity to go through the same.

To give you a brief perspective on the broader landscape before I move to company-specific updates, the Indian diagnostics industry is entering a phase of sustained structural growth supported by three reinforcing shifts:

1. Patients, clinicians, and institutions are moving towards organized quality-led diagnostic providers as expectations around accuracy, consistency, advanced testing capabilities and service standards continue to rise. This is accelerating the shift away from non-standardized, unorganized diagnostics and creating an opportunity for trusted branded players with scale and quality.

2. India's healthcare ecosystem is expanding beyond metropolitan markets. New hospital capacity, rising OPD and IPD volumes, greater availability of specialists, and improving access across Tier-2 and Tier-3 cities are bringing more patients into the formal healthcare system. Hospitals and institutional partners are also outsourcing a larger share of specialized and high-end testing to providers with strong quality systems, comprehensive test menus, scientific depth and nationwide reach.
3. Treatment pathways are becoming more advanced. The pharma industry's growing focus on targeted therapies, biologics and biosimilars across oncology, neurology and autoimmune disorders is increasing the need for precise diagnosis, patient stratification, biomarker-led treatment selection and ongoing monitoring. This is expanding the role of molecular, genomic and immunological testing across the patient journey.

Together, these shifts are broadening the addressable market for diagnostics and creating a strong structural opportunity in Specialty Testing.

However this opportunity will not accrue evenly across the industry. Specialty Diagnostics is an attractive segment, but it is not an automatic ride to win. Success cannot be built simply by adding new tests or investing in advanced equipment. It requires years of investment in scientific expertise, quality systems, clinical credibility, specialist relationships, and a broad high-end test portfolio. These capabilities create meaningful entry barriers and differentiate providers that can participate sustainably in this market.

Metropolis has built these capabilities over several decades. Our Specialty portfolio comprises more than 2,200 tests across gastroenterology, nephrology, neurology, oncology, and chronic disease categories, including allergy and autoimmunity. This breadth allows us to support specialist-led pathways across diagnosis, treatment selection and ongoing monitoring.

We have also added 36 new tests during the quarter, following 347 additions in FY 2026, including the integration of the core test menu, further strengthening our capabilities across high-growth, high-value Specialty categories.

Our scientific differentiation is supported by a 99% EQAS score, which is an External Quality Assurance Score, 99.99% report accuracy and a lab network in which every lab is either accredited or benchmarked to recognize quality standards. Around 30,000 specialist doctors across the country prescribe tests through Metropolis and every leading hospital individual and chain in the country, reflecting the depth of clinician trust built over many years through scientific programs, educational initiatives, sustained engagement and a deeply scientifically operational culture at Metropolis, which manages the trust earned over years.

On the tech and digital transformation front, technology remains a strategic pillar of our long-term growth. We are executing a company-wide automation and digital transformation program spanning labs, customer engagement, vendor consolidation, commercial operations, finance, procurement and support functions. Across these initiatives, we are strengthening data

governance and ensuring DPDP-compliant handling of patient data with a clear focus on privacy, security, and responsible use of information.

Within labs, automation and in-platform standardization are improving quality, throughput and turnaround times, particularly in oncology and Specialty Diagnostics.

Beyond Laboratories, AI and automation are improving workflow efficiency, strengthening decision-making, enhancing customer engagement, improving inventory management, and simplifying back office operations.

Taken together, these initiatives are creating meaningful productivity gains and building a more scalable, data-led, and efficient operating model across the organization. This growth continues to be anchored in quality, with strong external quality assurance scores, high report accuracy, and a lab network operating under the accreditation and benchmarking standards.

Turning to the current quarter of Q1 FY 2027:

We began on a strong note. We delivered healthy growth in both patient and test volumes, translating into an even stronger financial performance. We exceeded our stated guidance with revenue growing by approximately 17% year-on-year, driven largely by volume growth, while margins expanded through operating leverage and continued efficiency gains. The strong growth in patient volumes are driven by a combination of structural industry trends and focused execution. We further strengthen our presence in Tier-2 and Tier-3 markets, where awareness of high-quality diagnostics is rising alongside improving healthcare access. We believe this is a good start to our year and that we can sustain revenue growth outlook of 14%-15% for the year, which we expect to be primarily driven by volume growth.

On the margin front:

Supported by ongoing operational efficiencies and cost optimization initiatives, we expect an improvement of 100-150 basis points on EBITDA during the current financial year and over this year and the next year, we remain focused on achieving an EBITDA margin of 27%-28%.

On the inorganic growth front:

Our other recent acquisitions are now fully integrated and are performing in line with our expectations. With the businesses benefiting from the wider Metropolis network operating processes and commercial capabilities.

Core Diagnostics is currently in the final leg of integration. Since it has been a year since the acquisition, it is an appropriate time to reflect on the objectives of the acquisition and the progress we have made against them:

- Our first objective was to build a strong genomics platform for Metropolis. When we evaluated the build versus buy decision for genomics, we recognized that while acquiring sequencing platforms and equipment is relatively straightforward, the real gestation period in genomics lies in building scientific expertise, R&D capabilities and the ability to accurately interpret complex genomic data. We believe that acquiring Core Diagnostics would accelerate our genomics journey by 2-3 years and that has proven to be the right decision. Over the past year, our genomics portfolio has doubled and is now one of the fastest-growing segments within our Specialty business.
- Our second goal of acquiring Core was to strengthen our brand in North India through deep clinician and hospital relationships. We wanted to leverage Core Diagnostics strong relationships with leading hospitals and doctors. Over the past year, supported by our genomics and Specialty portfolio, we have significantly strengthened our scientific engagement in the region. As a result, North India now contributes 18% of the company's revenue, up from a single-digit contribution before the acquisition and has emerged as the fastest-growing region in our network.
- Our third goal was to create shareholder value through disciplined acquisitions. We acquired a distressed loss-making business of Core at an attractive valuation of less than 2x revenue, with a clear plan to transform it into a business capable of delivering EBITDA margins of around 25% over 3-4 years from acquisition. Based on the EBITDA that Core Diagnostics is expected to generate in FY 2027, which is just the second year as part of Metropolis, our effective acquisition multiple would be approximately 10x EBITDA. This demonstrates the value that disciplined acquisitions and successful integration can create for our shareholders.
- As the Core integration progresses, our focus is increasingly shifting from integration to growth. We are seeing encouraging early signs as we use Metropolis pan-India network to expand the reach of Core Super Specialty capabilities, driving higher test volumes, improving network utilization, and creating operating leverage. This further strengthens our Specialty Diagnostics portfolio and our ability to serve clinicians and patients with advanced testing solutions. We are confident that we will be able to enhance revenue and EBITDA growth for Core going forward as per estimates given previously.

Under the Metropolis 3.0 strategy, as we move ahead in FY 2027, our focus will be translated into 5 key execution priorities:

1. Accelerating network expansion. We will continue to expand our network to improve accessibility, especially in Tier-2 and Tier-3 towns and drive higher sample volumes through our recently commissioned laboratories, resulting in better capacity utilization, operating leverage, and profitable growth. We aim to open approximately 400-500 centers in Tier-2 and Tier-3 towns this year.
2. Strengthening Specialty Diagnostics is the second. We will further expand our advanced testing portfolio while deepening engagement with clinicians. Growth in Specialty Diagnostics also drives higher Routine and allied test volumes, improving

wallet share and customer retention. We aim to increase contribution of this portfolio to 45% from the current 40%.

3. We will strengthen our TruHealth portfolio through targeted wellness offerings and higher customer engagement, driving increased adoption, customer lifetime value and market share in preventive diagnostics. We have expanded TruHealth beyond pathology to include basic radiology, vital checks and consultations. We will continue to increase the number of our centers to provide all these services under one roof. While this may not become a huge contributor to revenue, it certainly helps increase average revenue per patient and build further engagement with our consumers.
4. Leveraging technology and AI. Continued investments in digital platforms, automation and AI will improve customer experience, lab efficiency, doctor and patient engagement, and support long-term profitable growth.
5. Pursuing disciplined inorganic growth. With recent integrations progressing well, we are building our acquisition funnel. We will continue evaluating high-quality, strategically aligned assets that can create long-term value through our proven integration playbook.

With this, I hand over the call to Suren to take you through the business performance for Q1 FY 2027. Thank you. Suren, to you.

Surendran Chemmenkotil: Thank you, Ameera and good morning, everyone.

Quarter 1 Financial Year 2027 marks a strong start to the year with broad-based growth across businesses, geographies, and channels. Revenue grew by about 17% year-on-year to INR 450 crores, ahead of our stated guidance, while EBITDA margin expanded by 210 basis points to 25.2%. Usually, Quarter 1 is not a strong quarter for Metropolis. However, this year we saw the revenue sequentially increase by approximately 6%, reflecting seasonal momentum, healthy operating leverage, and disciplined execution.

Growth was broad-based across channels, geographies, and test categories. B2C grew by 18%, and B2B grew by 15%. All regions delivered double-digit growth, while Routine, Semi-Specialty, Specialty and TruHealth also recorded high double-digit growth during this quarter. What is particularly encouraging is that the performance was predominantly volume-based.

Despite no price increase over the last 18 months, we delivered 17% revenue growth, supported by 10% growth in patient volumes and 11% growth in test volumes, with the balance coming from a richer mix and improved realizations. This demonstrates the strength of our underlying business and structural demand drivers supporting the diagnostic industry. The only industry-wide price increase during this period was for CGHS tests as you know. This helped other players in the industry as a one-time benefit much more than us. As for us, it is a very small component of the total business.

Volume growth was driven by a combination of network expansion and improved productivity across our existing network. During the last 12 months, we added more than 500 service centers,

including 300 centers in Quarter 1 2027, and remain on track to add more than 500 centers during the current financial year. We are now operating across 750 towns in the country and are deepening our presence in existing as well as new territories.

Our network expansion strategy continued to be a key growth enabler. Over the last two years, we have significantly strengthened our presence while simultaneously deepening our footprint within the existing markets. The expanding network is improving accessibility, driving patient acquisition and increasing sample throughput across our laboratory infrastructure. Our center-to-laboratory ratio improved from 1:21 a year ago to 1:24 in Quarter 1, and we remain on track to improve this to around 1:30 by year-end, creating meaningful operating leverage as utilization continues to improve. Importantly, our expansion strategy is data-driven rather than opportunistic. Every new center is selected based on detailed market mapping, including population density, healthcare infrastructure, competitive intensity and our ability to establish a strong market position. This disciplined approach enables us to penetrate underserved markets while strengthening our brand presence and improving access to quality diagnostics.

Alongside expansion, we have improved the productivity of our existing network through focused operating initiatives. We continue to increase throughput at high-potential centers, rationalize underperforming locations and redeploy resources to more productive markets. Volume growth during the quarter reflected a balanced contribution from healthy growth across our mature centers and the ramp-up of centers added over the last 12 months.

Continued investments in micro-marketing, deeper clinician engagement, expanded test menus, and the targeted activation of newly launched centers are accelerating growth across both existing and new markets. Taken together, these factors give us the confidence that our growth momentum is broad-based, structural, and sustainable.

Speaking of our sales channels, our B2C business delivered 18% revenue growth with a balanced contribution from enhanced revenue across mature centers and the ramp-up of centers added over the last year. Growth was strong across our own centers and across Tier-2 and Tier-3 markets, with rural centers delivering 36% revenue growth.

CLM-led customer engagement, local micro-marketing, strong brand pull, and increasing digital adoption all contributed to patient acquisition. Specialty revenue within B2C grew by 21%, while TruHealth and value-added offerings such as body vital checks, consults, and ECG supported higher revenue per patient.

Our B2B business grew by 15%, led by a deliberate focus on hospitals, clinicians, and high-quality organized institutions. We are prioritizing relationships where scientific capabilities, Specialty portfolio, service quality and nationwide network create a higher right to win.

Our partner portal and other digital enablement initiatives are making it easier for partners to do business with us, improving visibility, service responsiveness and access to our wider test menu.

With a presence of more than 750 towns, we are also targeting additional business from smaller laboratories and hospitals in these markets, giving us significant headroom for growth.

Our presence in North India has been strengthened steadily. Revenue from the region grew by 19% on a year-on-year basis and now contributes to 18% of our overall revenue, supported by successful integration of Core Diagnostics, Scientific Pathology Agra, and DAPIC Dehradun. Our strategy over time has been to acquire high-quality assets in a particular geography and then drive sustained organic growth by leveraging our strong brand, deepening doctor engagement, expanding our network and enhancing our test portfolio. We remain confident of further increasing revenues and market share from North over time.

The best hospitals and leading specialists trust Metropolis for their specialized testing requirements. While we will continue to build our B2C business in select pockets of North India markets such as Delhi, Punjab and Uttar Pradesh and the surrounding regions, we will continue to predominantly run on the B2B markets, driven by our strength in Specialty Diagnostics and deep relationship with the clinicians and hospitals.

Our recent acquisitions in Agra and Dehradun are also performing very well, with both business tracking ahead of the revenue growth and EBITDA. We remain confident of further increasing our revenue and market share in North India over time.

Coming to Specialty Testing and TruHealth:

Both our strategic growth engines continue to perform well. TruHealth revenues grew 22%, supported by integrated preventive healthcare offerings and targeted digital customer acquisition initiatives. Radiology integrated wellness packages grew by more than 40%, while premium TruHealth packages grew by more than 50%, led by doctor consultations, body vital checkups and ECG-led extensions.

Specialty Diagnostics grew by 17% during the quarter, supported by increasing adoption of advanced testing, deeper clinician engagement, and cross-selling of Core Diagnostics, oncology and Super Specialty capabilities across the Metropolis network.

Our genomics capabilities and Core Super Specialty menu are increasingly complementary. Genomics brings advanced testing and interpretation capabilities, while Core adds a deeper Super Specialty oncology portfolio and established clinician relationships. We are now taking the Core test menu to our existing clients, prescribing clinicians and service networks across India, expanding access to these tests and increasing our share of Specialty Testing. With Core Diagnostics in the final leg of integration, we remain focused on accelerating Specialty volumes through our nationwide reach and wider clinician network.

Our international business continued to perform well, delivering healthy growth in both revenue and EBITDA. We are the market leaders in two of the five countries in which we operate and rank amongst the top three players in all the markets. While business model is similar to India,

with specialized testing being offshored to our reference laboratories in India, the operating environment across African markets is quite different. Over the years, we have developed a deep understanding of these markets and built the capabilities required to succeed in them.

We remain optimistic about the strength of the brand we have built internationally and are confident of continuing to grow our business across these markets.

Coming to margins and productivity:

EBITDA margin expanded to 25.2%, an improvement of 210 basis points year-on-year and ahead of our guidance.

The expansion was driven by healthy volume-led operating leverage, disciplined cost management, and continued progress on our productivity agenda. A key contributor has been our laboratory transformation program. We are standardizing testing platforms across the network, consolidating vendors, increasing automation and improving procurement efficiencies. These initiatives are at different stages of roll-out. Those already implemented are improving throughput, turnaround time, material productivity and laboratory utilization, while further benefits are expected as the remaining platform transitions and automation initiatives go-live over the coming quarters.

Importantly, our organic business delivered healthy margin expansion both year-on-year and sequentially. This was achieved despite the relatively lower margin profile of Core Diagnostics and the impact of advancing annual employee increments from July to April this year.

Lastly, over the past 12 to 18 months, we have strengthened our leadership team, completed the integration of acquisitions, expanded our network, and significantly enhanced our operational capabilities. With strong momentum across all growth engines, healthy volume-led growth trajectory, and multiple productivity initiatives beginning to scale, we remain confident of delivering sustainable, profitable growth and continuing to outperform the diagnostic industry over the medium term.

With this, I hand it over to Sameer, who will take us through the financial highlights. Thank you, and over to you, Sameer.

Sameer Patel: Thank you, Suren. Good morning, everyone.

Let me briefly walk you through the key financial highlights of Quarter 1 FY 2027:

Revenue stood at INR 450 crores, registering growth of 17% year-on-year, supported by 10% growth in patient volume and 11% growth in test volume. B2C and B2B revenue for the quarter grew 18% and 15%, respectively, on a year-on-year basis.

Our focused segments continued to perform well. TruHealth contributed 18% of Quarter 1 FY 2027 revenue and grew 22% year-on-year. Specialty contributed 40% of revenue, grew 17% year-on-year.

While the acquisition of Core Diagnostics was completed March 2025 and was therefore part of the base for Q1 FY 2027, the acquisition of DAPIC Dehradun and Scientific Pathology, Agra were completed towards end of the Q1 FY 2027. As a result, Q1 FY 2027 numbers are now consolidated.

With respect to margins:

Q1 EBITDA stood at INR 113 crores, growing 27% year-on-year. EBITDA margin expanded by 210 basis points to 25.2%. Q1 PAT stood at INR 57 crores, growing at 26% year-on-year. PAT margin expanded by 90 basis points to 12.6%.

With this, I open the floor for question-and-answer session.

Moderator: Thank you. We will now begin with the question-and-answer session. Ladies and gentlemen, we will wait for a moment while the question queue assembles. The first question comes from the line of Tausif Shaikh with BNP. Please go ahead.

Tausif Shaikh: Good morning. Thanks for the opportunity. Congrats on good set of numbers. First question is on patient volume growth of 10% during the quarter. Can you give us the split between B2B and B2C separately for the quarter? And also some color would be helpful for the strong volume growth which we have seen this quarter despite a seasonally weak quarter and a delayed monsoon.

Surendran Chemmenkotil: The B2C patient volume growth is about 13.5%, and B2B patient volume growth is about 6%. That's the split of B2B and B2C.

Ameera Shah: If you talk about Q1 sort of patient volume growth, I think it's a combination of two things. We also mentioned some of the things that are spurring the industry to progress in general. Obviously, part of it is execution in terms of building access in markets in which diagnostics was not frequently prescribed and creating market categories for tests in which earlier people were not getting diagnosed at all. Part of it is seasonal sort of momentum. While Q4 was a normal quarter, it wasn't an exceptionally strong quarter and we don't know whether there was some overflow from there that made Q1 a little stronger than it normally is but a little difficult to completely dissect the reason, but we have some theories around what it could be.

Tausif Shaikh: That's helpful, Ma'am. Ma'am, my second question is related to your strategy in Tier-2 and Tier-3 cities and against standalone labs. Wanted to check whether Metropolis is involved into getting into O&M agreement or regional lab management with the standalone players, where Metropolis starts managing these labs and start developing franchises and ultimately there's some kind of profit share agreement with the standalone labs and Metropolis.

Surendran Chemmenkotil: Basically we already have this business of lab-on-lease model. We are running it for many years. What happens is in a lab run by a pathologist, we just take over the lab completely and bring in all the system, processes, people, etc. from Metropolis. This is a model that we have been running it for a few years and as and when we get the right opportunity, we just continue to explore this. What happens over a period of time after this is some of these cases, we look at acquiring them or some places we continue to do the model for a longer duration of time. This is something that is already in working.

Tausif Shaikh: Is it possible, can you share the number of labs you have in this model?

Surendran Chemmenkotil: I will have to come back to you on that, the exact number, because it's spread across the markets and this has been in operation for almost about 10-odd years now. I need to come back to you exactly on the specific numbers on this.

Tausif Shaikh: Thanks. That is helpful. I will get back in the queue.

Moderator: The next question comes from the line of Surya Patra with PhillipCapital India. Please go ahead.

Surya Patra: Thanks for the opportunity, ma'am. First thing is on the TruHealth, which is definitely delivering a consistent performance. Strong, that too. Recently that you have mentioned, even radiology is also kind of blended into that, which is also supporting the momentum there. Now I think you have taken a new initiative about TruHealth Mind and Body. Can you talk something about that? What is the objective here and what practically that we are trying to achieve through that new initiative and what growth possible that we can achieve out of it?

Ameera Shah: TruHealth has basically got two parts of it. One part of it is you are basically trying to check what is happening in the body and mind sort of start to finish. In some cases, these are consumers who are walking in saying, “Look, I have not fallen sick, but I just want to find out what is going on.” In some cases, these are consumers who are walking in for some illness test, but are choosing to up-sell themselves to a bigger bundle and say that “Look, if I am going to get pricked, then I might as well do more tests at one time.” It is a combination of these two. Metropolis's attempt is to be a health partner to our consumers. To say that “Look, any kind of information that you need for your body, whether it's coming through blood or whether it's coming through vitals or it's coming through basic radiology or a test for your cognitive assessment or your mental health, we are here to sort of provide it for you.” So, it's just an attempt to make sure that we are screening every aspect of ourselves. We don't really have any particular targets for individual packages or individual things, but overall, as a TruHealth portfolio, we certainly believe that we will keep innovating new products and new options and keep growing it in multiple markets.

Surya Patra: Is it a blend of even genomic and advanced radiology, ma'am?

Ameera Shah: Radiology, yes. Basic radiology, yes. Things like X-ray, ECG, sonography are sometimes a part of it. But genomics are so far not a part of it. That may be something we may do in the future

once we become more comfortable with the science behind sort of predictive genomics, which we think at this point of time is more useful and scientifically correct for illness. The predictive genomics for wellness has still not gotten validated in India.

Surya Patra: Sure. Second question is about the CGHS price revision, what has happened, I think industry started getting the benefit out of it. So, the CGHS pricing benefit that is accruing to competition. So, if you can tell that, okay, what portion of our business is CGHS, whether we have seen any benefit out of it?

Surendran Chemmenkotil: Our contribution of CGHS to the overall business was almost about a percentage or so and hence, we are not getting a huge bump up on the CGHS price increase but whatever you get it out of that small business we have, we definitely get it. Unlike some of the other peer group companies, in our case, the numbers are very low.

Surya Patra: Okay.

Ameera Shah: We are continuing to empanel with CGHS across the country. While this one-time benefit will obviously not accrue next year but overall, we believe that this is a business that can continue to grow fast as we keep empaneling.

Surya Patra: Sure. You have alluded in the opening remarks your five strategies for growth. If you just see, because we have seen the integration benefit flowing in already and the growth hence can see a moderation in the current financial year for organic business now. Is it fair to believe that the way that you have alluded, the focus is on the B2B growth, that to the Tier-3 kind of areas, that is the core area beyond what qualitative or AI-related kind of initiatives that we are taking or what would be the kind of real driver here going ahead?

Ameera Shah: Just to clarify, then Suren can talk about the plans. Just to clarify our current numbers of Q1 are organic growth. Therefore, we believe, as we said that the guidance we believe is possible for the year is about 14%-15% for the year. And obviously, we said that we are expecting a margin expansion of 120-150 basis points for this year, which will be driven by lots of productivity and operating leverage. Suren can give you further details.

Surendran Chemmenkotil: Just to further detail this out. We continue to maintain that our medium-term CAGR guidance is about 14%-15%. Out of this 14%-15%, about 9%-10% will come from patient volume growth, and the remaining will come from the product mix. The volume growth actually will happen because of the 2 initiatives – One is, of course, our expansion into the Tier-2, Tier-3 towns and increased number of network that we are building. Every quarter we do now about 200-250 new centers, and over a period of 2-3 quarters that getting matured and that delivering the numbers. That cycle has actually now kicked in for 5-6 quarters now. That's now continued to give us the benefits. So, the patient volume growth will come from that. And parallelly, what we do is all our existing centers, a lot of initiatives on the ground, digital and the doctor engagement also help us to get the patient volume growth from the existing centers. Their productivity goes up. So, that gives me the patient volume growth, and that's why we are saying that about 9%-10%

is definitely doable going ahead. The mix actually is getting better because we already talked about the TruHealth and the Specialty now growing at around 17% on the Specialty and 20% on TruHealth gives us the realization benefits of about 5%-6%. That's largely the overall growth plans and the way we look at in the days to come.

Moderator: Thank you. The next question comes from the line of Sudarshan Agarwal with Axis Capital. Please go ahead.

Sudarshan Agarwal: One of the questions that I had was on your center closure. You said you have added around 300 centers but in terms of the total center count, it has actually come down. I believe you would have rationalized some. These would be in Tier-2, Tier-3 towns, underperforming and how should we think about it going ahead? I mean, net additions is something that you are saying you will add 500 or attrition will continue to happen?

Surendran Chemmenkotil: Yes. Let me tell you about almost every year to 18 months, we take this call of looking at low productive centers and centers where we have quality issues, etc. We just try to knock them off. In some cases, of course, the partner also decided to do something else or move out of the city, move out of the country, do something else in his life. It's a regular process. Every year we take a call on how many of them are not really been productive for us, not worth to put our efforts and energy there. That's why we just knock them off. This time, we knocked it off after almost two years, we knocked off these 300 centers. The number that we are talking about, 500 center expansion, is a net number that we are talking about.

Sudarshan Agarwal: Got it. On my second question, when you allude to your Tier-2, Tier-3 expansion, how is the traction on the wellness side over there? Your wellness portfolio, I would guess is more on your metro cities or core markets, right? Is the traction in the Tier-2, Tier-3 markets also strong and do you expect this wellness share to continue inching up over the next couple of years because of your foray into Tier-2, Tier-3?

Surendran Chemmenkotil: Currently, majority of the wellness or TruHealth is happening in the big cities, Tier-1 and a little bit of Tier-2 towns and the second part of Tier-2 towns and the Tier-3 and beyond, it started to gain traction on the TruHealth. Now that's why we stay confident that there is an opportunity, there's a headroom available to build the TruHealth portfolio further. So, as and when a new center, a new town comes up, basically the Routine and Semi-Specialty, then the Specialty kicks off, then later comes the TruHealth. That's the sequence in which the wellness gets built up. Currently we have a lot of opportunity to build the TruHealth portfolio from Tier-1 and Tier-2 towns, we are just on the job on it.

Sudarshan Agarwal: Got it. I have more questions. I will get back in that case. Thank you.

Surendran Chemmenkotil: Yes. Thank you.

Moderator: The next question comes from the line of Samit Bhaskar from Kotak Institutional Equities. Please go ahead.

Samit Basak: Yes. In the line of the 5%-6% realization growth which we had there in this quarter, was that entirely led by the TruHealth and Specialty mix exchange? Because if I look at the revenue growth and contribution on a YoY basis, that the revenue growth was more or less in line with the company top line growth and contribution was also roughly flattish. So, I just wanted to understand if there was any element of price hikes included here.

Surendran Chemmenkotil: No, there is absolutely no price increase during this quarter. In fact, last time we increased the prices was January 2025. There's no price increase after that. We just talked about the CGHS price increase, which is a very insignificant part of our business. That really didn't help us too much. Most of it is driven by the organic growth, both in terms of volumes as well as the realization. Like you mentioned, the realization growth has come on the back of TruHealth and Specialty growing at 21% and 17% respectively.

Samit Basak: What is our stance on price hikes in the near-to-medium term? Are you planning any?

Surendran Chemmenkotil: In the near future, we are not contemplating a price increase at this stage. At the right appropriate opportunity, whenever the market is conducive to absorb a little more on the price, we will definitely would like to do that. Definitely, the agenda is to at least to pass on part of the inflation that may come on to us, to the consumer at the appropriate time.

Samit Basak: My second question is on our medium-term margin guidance of 27%-28% over the next couple of years. On one hand, we are witnessing an improving productivity at some of our mature collection centers and labs. On the other hand, we are also expanding into Tier-2, Tier-3 towns but the margin profile is relatively a bit lower. Also, in the context of the ongoing geopolitical situation, RM pressures. Could you split the margin guidance, maybe what kind of a drag we would be facing on this cost pressures and deteriorating geodynamics, and what kind of benefits from the productivity improvements?

Surendran Chemmenkotil: See, we are not now further expanding beyond the 750 towns. We are deepening our presence in 750 towns. We have our networks, we have our logistics system, and we have our collection center. We are going further deeper into 750 towns. So, we are not exposing to beyond 750 towns to add further cost at this point of time. Secondly, we have also halted the lab expansion agenda that we had on almost last five quarters. We have not really went on with the lab expansion. So, these two things will make sure that we don't further have any stress on margin because of the new towns and new labs. Right? Increasing productivity from the existing centers and the new centers coming up, we will continue to be the agenda, and that's where we are confident about getting our margins to 27% and 28% on the back of the operating leverage and some of the other cost initiatives that we have already taken.

Ameera Shah: Just to add to that, the Tier-2, Tier-3 cities do not have worse economics than the metros. So, expanding to smaller markets does not mean that the margin profile becomes in a worse situation. We have actually seen the margin profile to be fairly strong in strong branded markets and therefore we are not worried about those economics changing significantly.

Samit Basak: Okay. Thank you.

Moderator: The next question comes from the line of Shyam Srinivasan with Goldman Sachs. Please go ahead.

Shyam Srinivasan: Yes. Good morning. Thank you for taking my question. Just the first one is on B2B revenues, which have after, I think, 15% of organic growth in Quarter 4. We have kind of maintained the same in Quarter 1. And I also thank you for dissecting it between volume at 6%. I Just want to understand from the 9%, how should we look at, is it TruHealth plus Specialty that is increasing faster and that's leading to higher realizations? So, if you could just explain some of the dynamics around B2B and maybe a note on competitive intensity as well, please.

Surendran Chemmenkotil: Okay. Let me just update you on the number. Like Quarter 4, when we said 15% B2B growth, that was largely organic. We did not consider the new acquired entities like Core, etc., on the denominator. But this time when we are saying that 15% B2B business growth, the Core revenue is also on the denominator. Right? That's, at least in terms of the number-wise one clarification that I would like to give you. Most of the business that we have on B2B is on Specialty. Because at the end of the day, who is our B2B customer? B2B customers are smaller labs, hospitals, and then of course, institutional business, etc. So, we get more and more Specialty from B2B hospitals and B2B labs. But of course, our corporate and the other institutional business that we have, that's the only place that we have things beyond the Specialty business. Largely, you must assume that it's Specialty business.

Ameera Shah: On the competitive dynamics, like Suren said, your B2B labs are your customers but it depends on which kind of lab you go and add, right? For example, across the country, there are something like 3 lakh labs, and only about 10% of them are run by MD pathologists. 90% are run by technicians. Therefore, what lands up happening is the kind of tests that they are able to do locally and the kind of tests they are able to refer are different because the doctor who's referring to them is different. So usually it's the GP who's referring to the technician lab and therefore treating more common illnesses, which may or may not require specialized tests. Therefore, the technician lab will process a few routine tests themselves and outsource what we call a Semi-Specialized Test. It is the MD pathologist labs and the hospitals and the nursing homes who traditionally will have some specialists with them, who will then treat more complex diseases, and therefore, while the hospitals and the MD labs will do the Routine tests in-house, they will outsource more Specialty tests. A lot of this is about selecting the kind of customer that you want business from, and therefore, Metropolis goes to those type of customers who actually have the ability to outsource specialized tests, and we actually help them grow by creating the market for them as well. So, on the competitive dynamic space, we have seen nothing irrational happening. The normal competitive intensity in the diagnostics industry, which we have seen for 10-15 years, continues to be there where obviously everybody is jostling for their piece of the pie. However, we have seen that obviously not everybody is succeeding the same way. It's easy in our industry to pick up samples and just to build distribution. But the unit economics of those samples, the quality of that business is what really differentiates one player from another. Usually, we have seen that a lot of the entrants who have come in are going after volume at high

servicing costs and therefore are not able to make money in this industry. Most of them are able to get to INR 50 crores, INR 75 crores a year by doing this, and then they realize that they are not making money. They understand that actually this is a little harder business than originally thought. Maybe start stagnating a little bit.

So, to scale profitably is really the challenge and the goal in this business for everybody. All people are not able to do it unless you have the right domain and the right scale opportunities and the ability to build trust with doctors that gets you a full price patient walking in and Specialty tests.

Moderator: Thank you. The next question comes from the line of Abin Benny with JM Financial Institutional Securities. Please go ahead.

Abin Benny: Thank you for the opportunity. I hope I am audible. My first question is regarding that if we have to think of in terms of the next cycle of potential acquisitions, let's say in future. Ma'am, what would be the newer geographies and capabilities where we would want to focus on, any white spaces that we might want to fill up?

Ameera Shah: There are still many, many markets across all parts of India but we may not have a strong consumer brand in that particular sector or that particular market. So, I think we would continue to be open to bolt-on acquisitions where following the same path we have in the past, where you are acquiring a strong consumer brand, which is based on ethical practices, strong science and positive unit economics. The people behind the scenes matter as well because they continue to work with you, therefore them having a good reputation and all of it coming at a disciplined valuation. That combination is not always easy to find, but we continue to search for those kind of deals for us. We are also open to doing larger deals if finally there is an accruance of value for our shareholders, which is EPS accretive, and we are able to get at the right prices and potentially turn around.

Abin Benny: Got it. The second question. The GLP-1 trend that we are now seeing is going down in the pharma industry. So, what is the kind of trend that you are observing on the diagnostics and any color regarding the current way the industry is shaping up for us now?

Ameera Shah: You mean specific to GLP-1?

Abin Benny: Yes, ma'am. GLP-1 and diabetic industry.

Ameera Shah: The tests that are required for pre-screening or pre-prescription GLP are fairly common tests. While we have created packages for pre-GLP testing, doctors are maybe writing their own prescriptions and not necessarily only writing the packages. So, some of these tests are fairly common for other diseases or illnesses or areas as well. SO, it's quite difficult to sort of separate whether it is meant for GLP or not. That could be a contributor to the growth as well, in the organic growth it's possible and not be sort of specified under GLP itself. But I think it's still

early days because while people are taking injections and drugs as we have seen, I think this will play out a little longer over time.

Abin Benny: Got it, ma'am. Thank you very much.

Moderator: The next question comes from the line of Kunal Thanvi with Banyan Tree Advisors. Please go ahead.

Kunal Thanvi: Hi, thanks for the opportunity. I had two questions. One was on, Ameera, you had made a comment about the three reasons for accelerated growth for us and the industry. One of them was about share of organized players improving more and more. Can you put more light on this? What are the trends that you are seeing? Is there any unusual increase that you have seen in the last 18 months or so or it is the usual slow share that we have been taking through? Second question was, when we see our growth and when we see all national players, the larger ones, we have seen an uptick in the base rate growth for all of the large players, including Metropolis. Of course, it has been slightly higher than your stated guidance for this year. Any thoughts on the guidance, like when we say 14%-15%, are we being conservative or you feel this quarter growth was slightly one-off and from 2Q it will go back to the base rate for us and for the industry? Because it is now three quarters in a row when we have seen, apart from Metropolis, other players also inching up in terms of their base rate growths. These are the two questions. Thanks.

Ameera Shah: I think on your first question, look, there is no third-party industry level data to provide you about movement of unorganized to organized. I don't have any data points. So, I can only tell you anecdotally, when we speak with vendors in the industry and we sort of get an assessment of their providing services to smaller unorganized sector, products and services and providing to the larger, the anecdotal data that we get from them is that the volume growth at the smaller labs and the unorganized sector is slower. They are buying less materials from them and it is faster at some of the organized players. So, that is one anecdotal sort of evidence that you get.

The same thing happens when we are engaging with our B2B customers on the ground. You get a sense that price increase for them is difficult, volume increase is marginal and therefore, you also find very small ones shutting down. You can definitely see some green shoots or early trends of organization of the industry. It is a slow and steady pace. There is no catalyst which is causing it to now transform from 10%-15% organized industry to suddenly a 30%, that you are going to see a very marked change. I think every year, as we have been seeing, we will continue to see it sort of scraping away and consolidating, but it is a slower journey. It is not going to be a super-fast journey. I think on your.

Surendran Chemmenkotil: Second question is whether your projection for the guidance.

Ameera Shah: For the guidance. Look, I think none of us have a crystal ball. The reality is climate change is changing everything for everybody. Weathers are unpredictable and our business is heavily influenced by weather. Conditions which then impact and create diseases and then require testing. It's quite difficult to predict. I think we would like to stick to our guidance for 14%-15%,

because, as you have seen over the last two quarters before this, we have been able to deliver that number. We don't want to focus really on the seasonality of quarter-by-quarter, because life is very difficult to predict that way. I think over the overall year, I think we feel fairly comfortable in sort of getting to a 14%-15% number.

Kunal Thanvi: Sure.

Moderator: Thank you. The next question comes from the line of Tarun Bhatnagar with Tribeca Investment Partners. Please go ahead.

Tarun Bhatnagar: Hi. Thank you for taking my question. My question is on the pricing. One of your large peers has mentioned that they are relooking pricing. My question is whether you think the industry is more conducive to price increases and what factors would determine whether you take a price increase? The second question is if you can guide us on the CAPEX for the next two years. Thank you.

Surendran Chemmenkotil: Metropolis, you have seen the last two, three years, every year we have taken a price increase. Last three years, if you look at it. This is a year we have not taken a price increase. That's largely because of the GST benefits that has come into the industry, and we thought it's passing on to the consumer is the right thing to do. That's the reason we have not taken the price increase. Otherwise, there is always a cost of inflation and we would like to build in that on the price increase. This year, then we didn't do it for the reasons I mentioned. As we go forward, of course, part of the inflation will have to be passed on to the consumer. So, wherever that need to be done, we will definitely do it. As far as the CAPEX is concerned, I think last year we did INR 65 crores of CAPEX and I think our CAPEX requirement for this year will also be in the similar lines. I am saying for the Group, including all the acquired entities, everything put together.

Tarun Bhatnagar: Thank you.

Moderator: The next question comes from the line of Anshul Agrawal with Emkay Global Financial Services. Please go ahead.

Anshul Agrawal: Hi. Thank you for the opportunity. First question is on network. Is your network rationalization planning done with? Are you going to rationalize more centers going forward?

Surendran Chemmenkotil: No, Anshul, I think I told you, this exercise we carry out in once in 18 months, 24 months, only if there are centers which are not productive or not meeting our quality requirements. Of course, if any of the partners choose to move out, etc. Please understand also that this rationalization, we have done this without impacting any revenues because there is hardly any revenues coming from these centers, which are very low productivity numbers. This is not going to happen every quarter. It could happen only once in 12 to 18 months' time.

Anshul Agrawal: Got it, sir. Very clear. Just to understand the math behind the target that you gave of having 30 centers servicing one lab by the end of the year, if I just add about, say, 500 net additions or

gross additions going forward, the lab network sort of diminishes. Is there some rationalization that is expected to happen at the lab network as well?

Surendran Chemmenkotil: If you look at it, our lab numbers in the last two quarters are only coming down, right? When we acquired Core, also all the Core labs, wherever we have common labs, we have just shut them down. I think largely there is no further opportunity for us to rationalize the labs per se. So, the ratio will go up largely on the back of the centers that we will add up. If I add up another 500 centers during this year net number, that will take the ratio to another five per lab. That's why it's coming closer to that 30 number.

Anshul Agrawal: Got it, sir. That's it from my end. Thank you so much.

Moderator: The next question comes from the line of Raman KV with Sequent Investments. Please go ahead.

Raman Venkata Kerti: Sorry if this is a repetitive question, I joined the call a little late. Can you specify what was the revenue from CGHS during the quarter?

Surendran Chemmenkotil: I have mentioned that for us, the CGHS is about a percentage or so of the total revenue. That's not a big number.

Raman Venkata Kerti: Understood. Sir, also with respect to Core Diagnostics and TruHealth, I just want to understand how are the average revenue per test for the portfolio of Core Diagnostics and TruHealth versus Metropolis and what's the margin difference between both of them at full utilization? What will be the incremental margin difference when we compare the Core and TruHealth portfolio versus the standalone Metropolis portfolio?

Surendran Chemmenkotil: Core is a separate unit altogether. TruHealth is a business vertical for us, just to clarify that point. TruHealth, our ticket size is currently about INR 2,500, is the ticket size. The margins are largely in line with the company lines of margins. That's what it is. Core Diagnostics is overall part of the B2B segment for us. Whatever we talked about the B2B revenue per patient, is the revenue per patient from a Core Diagnostics as well. The margins of Core Diagnostics, we already mentioned that in the last quarter and this quarter we are high single-digit margin from the Core Diagnostics business.

Raman Venkata Kerti: Can we assume that at full integration of Core Diagnostics, and once it picks up, let's say about a year or two from now, both Core and TruHealth will have a better margin than your average margin of 22%-24%? Will they have the similar kind of margin profile? I just want to understand, from a margin perspective, how much incremental margin difference is there between a regular test portfolio and a comprehensive specialized test portfolio from that point.

Ameera Shah: Just to step in there. I think any data I give you will actually not answer that question, because it is not as simple. It's not a product where you are saying that a Comprehensive Testing Portfolio has this margin and this. A Comprehensive Testing Portfolio also has many different tests which all have different margins. It depends on the combination of tests you have in that portfolio.

Broadly, we mentioned that when we did the acquisition of Core, we had said that within three to four years of acquisition, we would like to bring the Core margin to the 25% number. That's the direction we are moving in. For example, at the end of the last quarter, we saw approximately 8% margin for Core. This year, that will obviously move up in this direction but it will take us, like we said, three to four years to get to that number. TruHealth portfolio, as Suren mentioned, is already at the company level of margin. Therefore, both of these will continue to be in line and will be accretive to our EBITDA growth in the next phase.

Moderator: Thank you. Ladies and gentlemen, that was the last question for today. I would now like to hand the conference over to the Management for the closing remarks.

Ameera Shah: Thank you to all of you for joining us for this call for Q1 FY 2027 today. As you heard from our comments, the Management Team remain extremely optimistic for what's to come in FY 2026-2027 for Metropolis. We believe that we have all the levers, not only for a strong growth this year, but also for margin expansion strategy. We have our three-year strategies in place that really continue to drive the business in a very positive direction organically. We continue to obviously scout for the right deals with the right people, not just for the sake of adding revenue or for the sake of doing deals, but for the right strategic direction. Those will continue to be on top of whatever we do organically. The industry continues to have the structural trends in the positive direction. We all look forward to a great Q2, just as we had a really good Q1. Thank you all for joining us, and we will chat with you next quarter.

Moderator: Thank you, ma'am. Ladies and gentlemen, on behalf of JM Financial Institutional Securities, that concludes this conference call. Thank you for joining us, and you may now disconnect your lines.