

THE CHALLENGE

52% of Africans are deprived of access to adequate basic healthcare services due to costly, inefficient health systems.



Poor quality of service

6-hr+ waiting time for PHC; up to 6 years for surgery



Costly healthcare services

FFS reimbursement resulting and delayed or foregone service seeking



Poor data and disease management

Disjointed health tech platforms resulting in a siloed approach to patient management



Inadequate resources

1 physician per 5,000 people vs. 9 globally - overworked, underpaid and burnt-out workforce

THE SOLUTION

An end-to-end, inclusive, tech-enabled healthcare ECOSYSTEM that sustainably increases patient access, reduces costs and improves health outcomes.



Accessible, community-embedded facilities

Health villages in communities with virtual access to hubs



Affordable, high-quality service

Value-based healthcare with low cost PHC and ASC services



Full, end-to-end healthtech platform

Reduced healthcare costs via shared information and operational efficiencies



Patient-Centric approach

Patient owning and understanding their full healthcare information

HOW IT WORKS

EHV is deploying a Hub and Spoke model to accelerate patient reach and access

Omni-Channel experience

In-person and virtual access to clinicians



Facilities within Reach

Community-based care



"One-stop-shop" Healthcare Hubs

PHC and ASC services



Primary healthcare services



Day surgical procedures



Diagnosis



Psychotherapy



Physiotherapy



Pharmacy

"Auxiliary Services"***

THE MARKET OPPORTUNITY

A growing \$16.7bn market opportunity exists in Africa, with South Africa alone representing ~30% of it.

Total Addressable
Market (TAM)

US\$ 145bn

5.4% yoy growth

Serviceable
Available Market
(SAM)

US\$ 88bn

5.65% yoy growth

Obtainable Market

US\$ 16.7bn

5.5% CAGR growth

CURRENT PERFORMANCE

Sept'21

Launch of EHV
Rosebank in South
Africa – 1st facility

15,000

Patients onboarded
at EHV Rosebank to
date

3,000

Patient visits at
EHV Rosebank
to date

100%

Revenue
growth in the
first 6 months

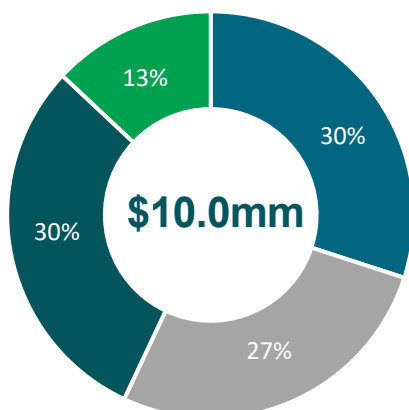
40%

Proportion of new,
organic patients
per month

23%

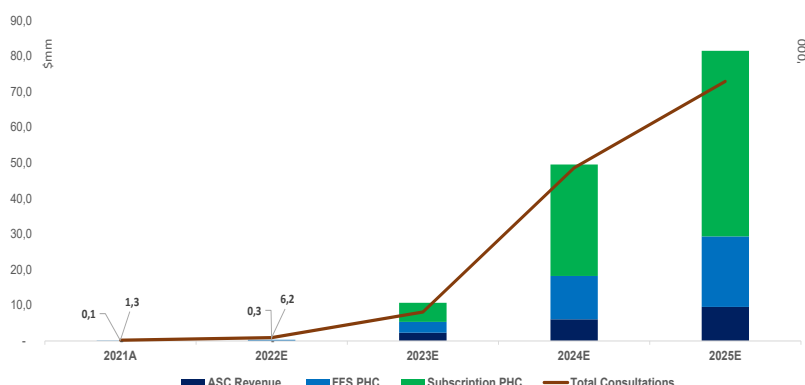
Current capacity
utilization vs.
breakeven of 45%

FUNDING ASK AND USES OF FUNDS



- ASC Development - \$3.0mm (30%)
- Technology hires and enhancements - \$3.0mm (30%)
- Primary Care Expansion - \$2.7mm (27%)
 - Including four new facilities in: Braamfontein, Midrand, Bryanston, Atteridgeville
- Working Capital - \$1.3mm (13%)

FINANCIAL PERFORMANCE



- 2021 based on 4 months of operations (Sept to Dec)
 - Fee-For-Service (FFS) General Practitioners (GP) primary healthcare (PHC)
- 2022 run-rate based on FFS GP PHC services only
 - Consolidating growth on single site
- Projections for 2023+ are driven by
 - FFS full PHC & additional sites
 - Ambulatory Surgical Centres (ASC)
 - PHC subscription model

THE MANAGEMENT TEAM AND ADVISORS



Garikai Govati
Founder & CEO



Dr. Samantha Fee
Clinical Director



Alexander Blake
CTO



Mary Oppenheimer
Philanthropist



Simon Chikumbu
Chairman – AON



Rhobhi Matinyi
Co-founder



Garikai Govati
Founder & CEO

+27 81 891 9783
gazah@epionehv.com

Epione Health Villages

5 Glenhove Road
Melrose Estate
Johannesburg, South Africa

+27 11 880 5349
www.epionehv.com
hello@epionehv.com