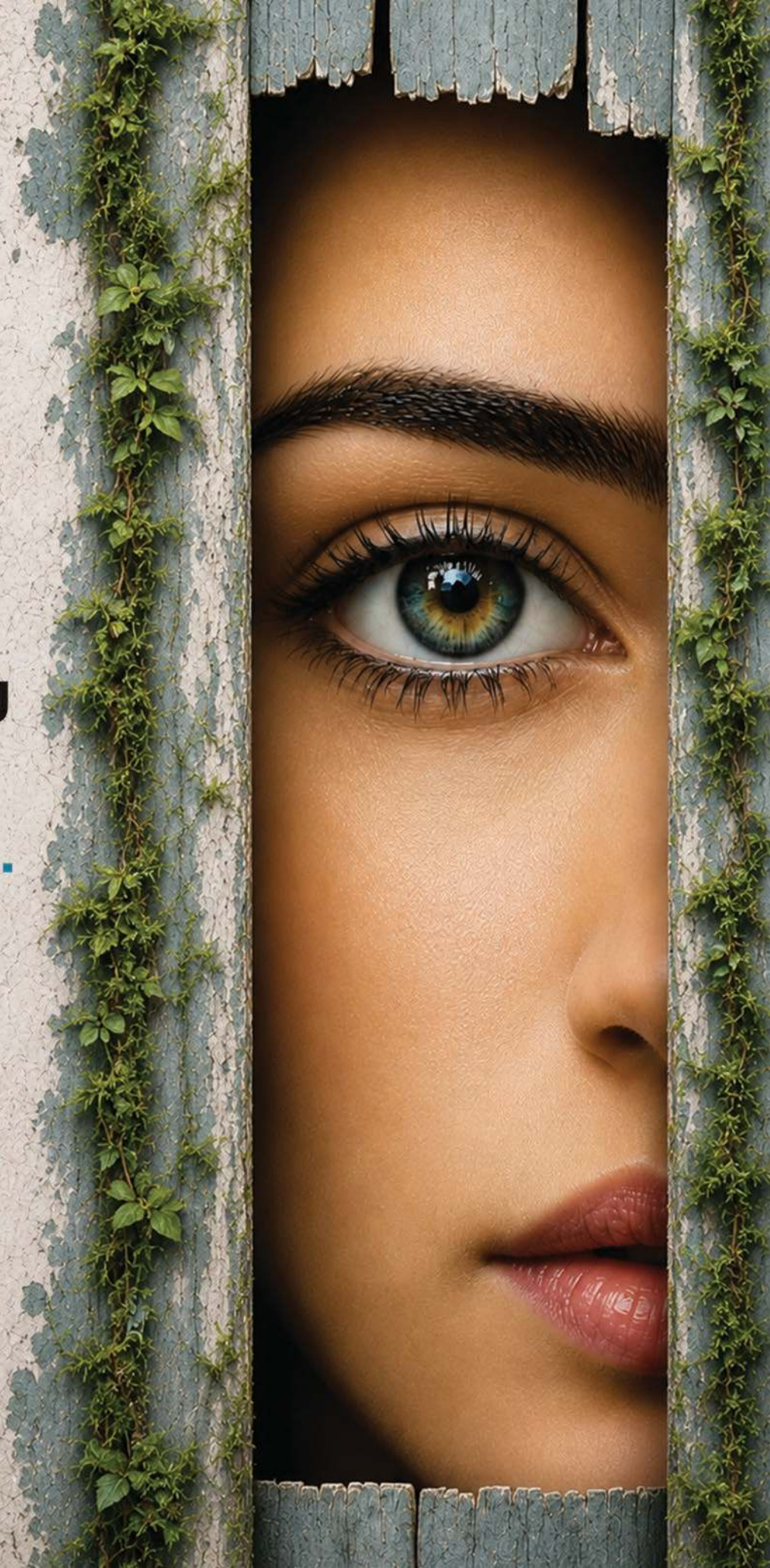
Apollo HOSPITALS
TOUCHING LIVES



THE I IS FOR YOU

INTEGRITY. INCLUSION. IMPACT.

ESG Report **2025-26**

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About the Report

Overview

As one of India's foremost healthcare providers, Apollo Hospitals remains steadfast in its corporate sustainability mission by engaging in meaningful stakeholder engagement and creating long-term stakeholder value through sustainable and responsible business practices. This edition of our ESG report is a testament to our unwavering commitment, spotlighting significant strides made under the strategic pillars of the Apollo Sustainability Action Plan (ASAP) during FY 2025-26.

Reporting Standards

This edition of our annual ESG report documents the key actions undertaken, milestones achieved, and measurable progress made in advancing responsible business practices, brought to life through robust data, compelling narratives, and clear visual representations. Apollo Hospitals Enterprise Limited has reported the information cited in this report for the reporting period with reference to the GRI Standards, 2021 and the Sustainability Accounting Standards Board (SASB): Health Care Delivery standards. We have further strengthened our commitment to the ISSB framework, aligning our disclosures in preparation for the evolving reporting standards applicable to our region.

In alignment with our corporate sustainability goals anchored in the 'triple bottom line': encompassing People, Planet, and Profit, we provide disclosures to leading rating frameworks such as the Dow Jones Sustainability Index (DJSI). We have also extended our disclosures to include the FTSE Russell ESG Scores and reinforced our transparency across globally recognised sustainability benchmarks such as Morningstar's Sustainalytics.

Through this report, we present a holistic view of Apollo's sustainable and responsible business practices to all our stakeholders: articulating strategic plans, ambitious targets, proactive approaches to tackling emerging challenges, and the tangible attainment of our goals. This report stands as a powerful demonstration of Apollo's deepened commitment across the critical pillars of corporate governance architecture: accountability, transparency, and responsible corporate citizenship, setting a new benchmark for ESG excellence in Indian healthcare.

Reporting Boundary

The scope of our reporting encompasses operations on a consolidated basis for FY 2025-26, in line with our financial reporting, unless specified otherwise. Our environmental indicators have been reported based on the operational boundary approach as per the GHG Protocol.

Our joint ventures and associates are excluded from the reporting boundary due to Apollo's limited managerial influence over these entities. Furthermore, our commitment to transparency is upheld through the diligent disclosure of any significant changes in our reporting boundary from previous years.

During FY 2025-26, following the restructuring of Apollo Hospitals Enterprise Limited's digital health and pharmacy businesses into a separate, publicly traded company encompassing Apollo 24/7 (our digital platform), Apollo Pharmacy (our retail pharmacy units), and Keimed (our wholesale distribution arm), these entities are no longer part of the reporting boundary for data pertaining to the reported financial year.

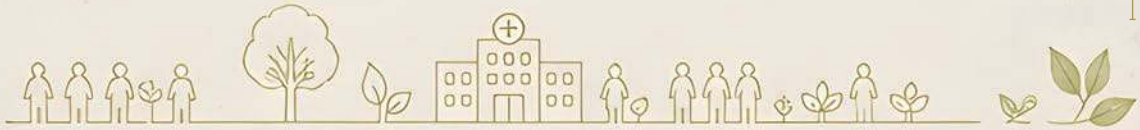
This practice underscores our dedication to providing stakeholders with a clear and detailed understanding of the scope and limitations of our report. We have continued to evaluate the potential evolution of our reporting boundaries, proactively assessing sustainability risks, opportunities, and impacts on the environment and society. Apollo Hospitals remains resolute in its pledge to enhance reporting standards and maintain the highest levels of transparency regarding our sustainability performance — thereby strengthening trust and accountability year on year.

Feedback Invitation

Apollo deeply values continuous improvement and responsiveness to our stakeholders' expectations. We encourage and welcome your input, ideas, and questions to help us elevate our sustainability journey.

Please feel free to reach out to us:

	Designated Contact:	Dr. Karan Thakur
	Designation:	Vice President – Corporate Affairs and Sustainability
	Email:	karan_t@apollohospitals.com



Message from the Chairman

Dear Stakeholders,

Healthcare is entering one of the most transformative periods in its history. For generations, medicine has advanced by responding to illness after it appeared. Today, we have the opportunity to reshape that journey by anticipating risk earlier and preserving health for longer – and sustainability now sits at the very heart of that reshaping.

This transformation is occurring through the thoughtful convergence of clinical excellence, scientific discovery, digital innovation and responsible growth. One truth remains unchanged: technology may enhance our capabilities, but compassion, judgement and human connection will always remain the foundation of healing.

Despite remarkable progress in improving life expectancy and expanding access to quality healthcare, the rising incidence of non-communicable diseases remains a core concern. Cardiovascular disease, diabetes and cancer now account for nearly 63% of all deaths in India, with cardiovascular disease emerging as the leading cause, responsible for almost 28% of total mortality. This calls for a fundamental shift from episodic treatment to continuous health management, early detection and personalised care – delivered in a manner that is mindful of our impact on people and the planet.

At Apollo, we are advancing this vision by bringing together clinical leadership with the powerful triad of Intelligence, Intent and Impact. Guided by these principles, we are committed to creating a more personalised path to better health for every individual who places their trust in our hands, while building an organisation that is environmentally responsible, socially inclusive and governed with integrity.

Despite remarkable progress in improving life expectancy and expanding access to quality healthcare, the rising incidence of non-communicable diseases remains a core concern. Cardiovascular disease, diabetes and cancer now account for nearly 63% of all deaths in India, with cardiovascular disease emerging as the leading cause, responsible for almost 28% of total mortality.

An Intelligent, Responsible Healthcare Ecosystem

Intent delivers its greatest value when combined with intelligence. At Apollo, we are building an intelligent healthcare ecosystem by combining technology with clinical expertise, enabling our caregivers to deliver evidence-based care with greater consistency and precision. Over the past year, we have further strengthened our AI-led capabilities, while our cloud-enabled digital infrastructure, AI-powered radiology and real-time clinical dashboards are enhancing clinical precision, operational efficiency and patient safety.

This same intent extends to how we run our operations. In FY 2025-26, renewable energy met 25% of our total energy consumption, and our energy intensity per rupee of turnover improved by ~9.5% year-on-year. We also expanded our Scope 3 emissions reporting to five categories, recovered 43.7% of our total generated waste through recycling and reuse, and continued to see our water intensity track favourably against our FY 2021-22 baseline.

Our People, Our Purpose

The true promise of modern medicine lies not only in treating disease, but in anticipating risk before illness takes hold and in nurturing the people and communities who make that possible. This philosophy is reflected in Apollo ProHealth, our flagship preventive healthcare programme, which continues to enable early detection of silent health risks for individuals across the country.

It is equally reflected in our workforce and our communities. Women now make up 51% of our employees, and our Board reflects 60% gender diversity. We recorded zero fatalities, zero high-consequence work-related injuries and zero LTIFR in FY 2025-26,

a reflection of our unwavering focus on the safety of everyone who works with us. Through our Corporate Social Responsibility initiatives, we invested over ₹277 million this year, positively impacting more than 2 million lives across the communities we serve.

Investing in India's Healthcare Future

The 'I is for You' is, above all, our promise to make world-class healthcare more accessible to every life we touch – sustainably and responsibly. As we expand our presence, every new hospital represents our commitment to bringing advanced clinical excellence closer to communities, strengthening healthcare infrastructure and creating lasting impact for patients, for the planet and for the generations that follow.

I extend my heartfelt gratitude to our esteemed Board of Directors for their guidance, to our shareholders and stakeholders for their continued trust and confidence, and to the entire Apollo family of clinicians, nurses and staff whose unwavering commitment brings our purpose to life every single day.

Together, we will continue to shape the future of healthcare with compassion, courage and conviction – bringing Health and Happiness@Home to every family, and building a healthier, more sustainable India and a healthier world.

My warm personal regards to all of you.

Dr. Prathap C. Reddy
Chairman & Founder, Apollo Hospitals



About Apollo

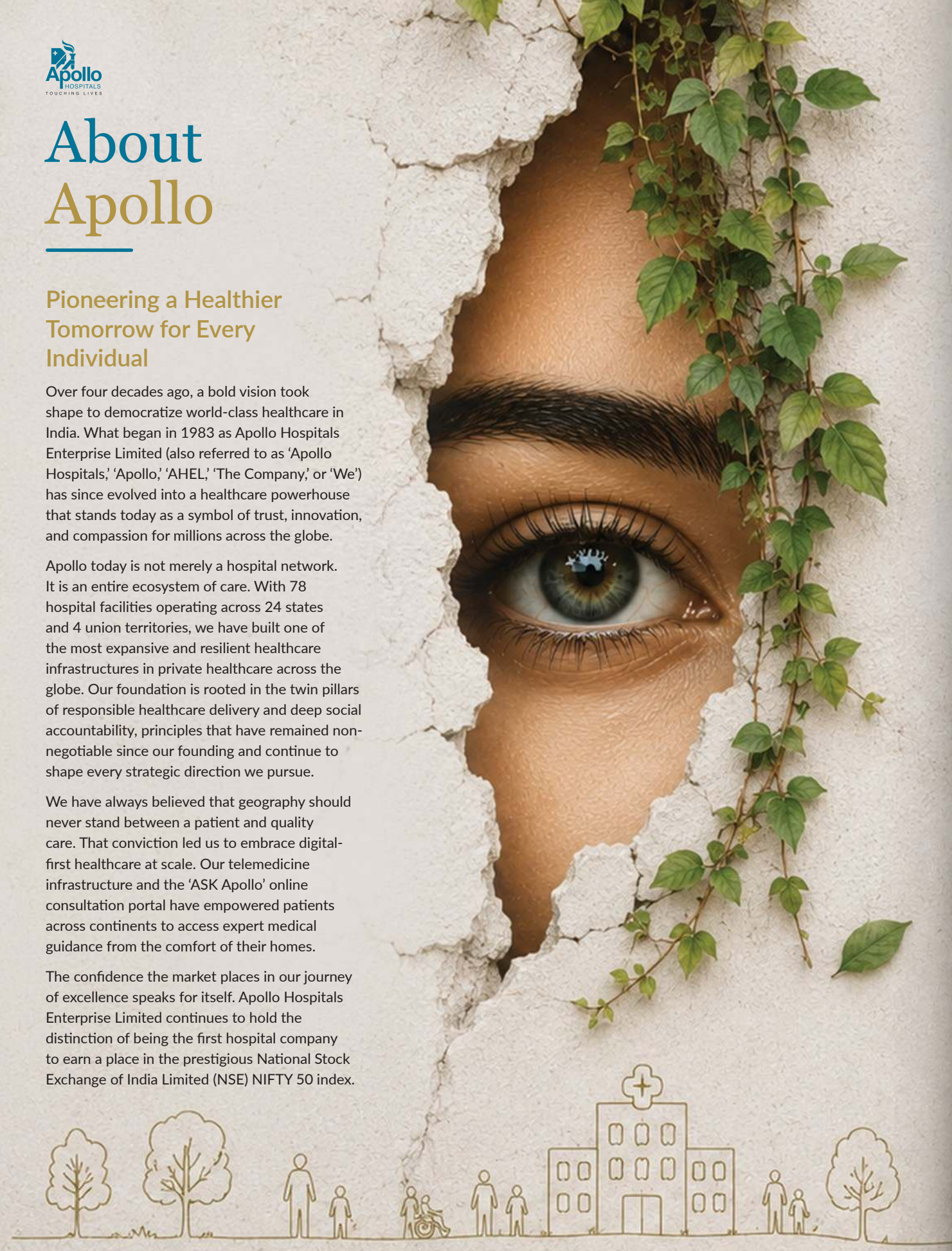
Pioneering a Healthier Tomorrow for Every Individual

Over four decades ago, a bold vision took shape to democratize world-class healthcare in India. What began in 1983 as Apollo Hospitals Enterprise Limited (also referred to as 'Apollo Hospitals,' 'Apollo,' 'AHEL,' 'The Company,' or 'We') has since evolved into a healthcare powerhouse that stands today as a symbol of trust, innovation, and compassion for millions across the globe.

Apollo today is not merely a hospital network. It is an entire ecosystem of care. With 78 hospital facilities operating across 24 states and 4 union territories, we have built one of the most expansive and resilient healthcare infrastructures in private healthcare across the globe. Our foundation is rooted in the twin pillars of responsible healthcare delivery and deep social accountability, principles that have remained non-negotiable since our founding and continue to shape every strategic direction we pursue.

We have always believed that geography should never stand between a patient and quality care. That conviction led us to embrace digital-first healthcare at scale. Our telemedicine infrastructure and the 'ASK Apollo' online consultation portal have empowered patients across continents to access expert medical guidance from the comfort of their homes.

The confidence the market places in our journey of excellence speaks for itself. Apollo Hospitals Enterprise Limited continues to hold the distinction of being the first hospital company to earn a place in the prestigious National Stock Exchange of India Limited (NSE) NIFTY 50 index.



Our Vision

To 'Touch a Billion Lives.'

Our Mission

To bring healthcare of international standards within the reach of every individual. We are committed to the achievement and maintenance of excellence in education, research, and healthcare for the benefit of humanity.

The Values That Define Us

At Apollo, values are not words on a wall; they are the living, breathing essence of who we are. They shape our character, bind us together as a family, and fuel our collective pursuit of a shared purpose. Whether we are navigating complexity, celebrating breakthroughs, or standing beside patients in their most vulnerable moments, our values remain our compass. They are the foundation upon which Apollo Hospitals has built its distinguished reputation as a premier global healthcare institution.

The Principles That Guide Every Action

Innovative Mindset

We champion a culture of pioneering thinking, relentlessly innovating to elevate patient well-being and create lasting impact on society.

Proactive Engagement

We go beyond expectations. Every interaction, every initiative, every decision is driven by a proactive desire to add meaningful value.

Pursuit of Excellence

We hold ourselves to the highest global benchmarks, across clinical outcomes, financial stewardship, operational efficiency, service quality, and talent management, never settling for anything less than world-class.

Dependable Integrity

We are a beacon of trust and hope. Our patients' best interests are paramount, and we honour every commitment we make without exception.

Empathetic Care

We believe in healing that goes beyond medicine. Through compassionate, human-centred care rooted in the philosophy of Tender Loving Care (TLC), we touch lives and enrich the patient experience at every touchpoint.

Our Business at a Glance

Apollo stands unrivalled as Asia's most comprehensive integrated healthcare services provider, a global leader whose presence spans the entire healthcare value chain. From preventive wellness and advanced diagnostics to curative care, retail pharmacy, telemedicine, home healthcare, medical education, and skill development, we are redefining what it means to be a truly end-to-end healthcare institution.

Scale and Reach: FY 2025-26 Snapshot

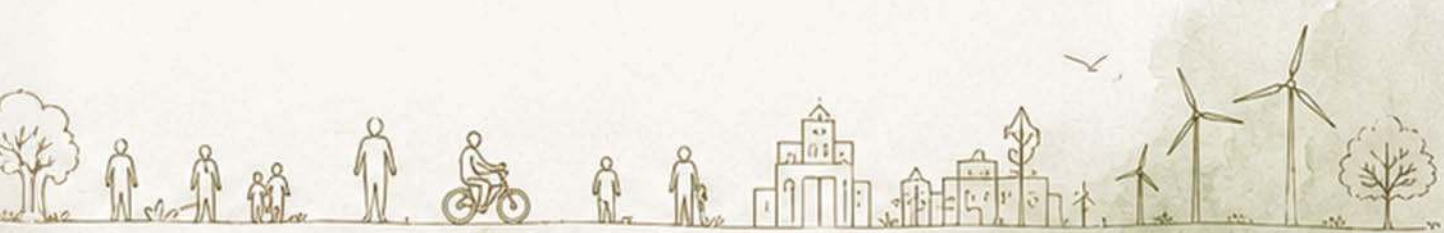
Pillar		Impact
	India's Largest Hospital Network	78 hospitals, 10,970 beds, 10,000+ doctors, and 30 million health checks conducted
	India's Premier Retail Healthcare Ecosystem	318 primary clinics, 280 dental clinics, 78 sugar clinics, 34 birthing centres, 167 dialysis centres, 23 surgery centers, 2,501 diagnostic collection centres
	Cardiovascular Sciences Leader	India's largest private tertiary care institution for cardiovascular sciences
	Trusted by the World	Delivering world-class care to patients from multiple nations across North & South America, Africa and Asia

Sustainability Performance Highlights and ESG Targets

Our ESG Targets translate strategy and materiality into measurable outcomes. They combine perspectives, KPIs, and priorities into clear, time bound goals that align with our mission and purpose.

Given the business significance of our recent demerger from our pharmacies business, we have been taking active steps to undertake a comprehensive review of our current ESG targets and align them with the refreshed Apollo Hospitals network vision. We shall be releasing a more comprehensive set of targets in the forthcoming fiscal year aligned with our current business impact and future growth strategy.

Theme	Target	FY 2025-26 Outcomes
Environment	Continuous increase in renewable energy sourcing	Renewables (solar and wind energy) now meet 25% of our total energy consumption
	Reporting on 3 categories of Scope 3 emissions	We now report on 5 categories of Scope 3 emissions
	10% reduction in energy and water consumption from the baseline year, FY 2021-22.*	Target to be restructured due to demerger and subsequent material impact on energy and water consumption figures between FY 2021-22 and FY 2025-26
Social	Net Promoter Score from patients of 84 for OP & IP	84 NPS across OP & IP in FY 2025-26
	Formulate targets for Diversity and Inclusion in the Company by FY 2024-25	51% women in workforce 60% board gender diversity; revision of target slated for the upcoming fiscal year
	25% annualised attrition rate for all staff	Overall turnover dropped to 21.6% from 27% in FY 2024-25
Governance	100% reaccreditation for all hospitals undergoing NABH surveys	47% of our hospitals are NABH accredited, and 100% of our hospitals with NABH accreditations were reaccredited
	Increase number of hospitals with JCI accreditation	8 of our hospitals now hold JCI certifications signifying over 10% of our hospital footprint



Our ESG Performance FY 2025-26

Sustainability performance highlights FY 2025-26

Access

- 156,728 (up 7%) inpatients admissions
- 23,908 outpatient visits/day (measured in footfall/day)
- 260,000+ Radiotherapy Fractions
- 47 million+ registrations on Apollo 24/7

Patient Safety

- An average ACE 3.0 Score of 79 for Group A*, B*, and C* Hospitals
- 89.6 average Safe@Six score across the fiscal year

Water Management

- Water withdrawal increased by 9.3%, far below the 27% rise in consumption, demonstrating improved water efficiency despite capacity expansion and higher patient volumes

Waste

- We recovered 43.7% of our total generated waste through recycling and reuse initiatives
- Waste intensity fell by 16.2%

Energy

- Energy intensity per rupee of turnover showcased a ~9.5% YoY improvement
- Renewable energy consumption rose by 18.3% this year and sits at 26% of our total energy consumption for FY 2025-26
- 1,282.78 Lac kWh of electricity conserved through Project Virya

GHG Emissions

- Expanded scope 3 reporting to 5 categories in FY 2025-26, adding Purchased Goods and Services (148,040.94 tCO_2e) and Capital Goods (42,717.42 tCO_2e).
- Project Virya avoided ~1.1 lakh tonnes of CO_2 emissions cumulatively and delivered ₹105 Crores in cost savings across 324 energy conservation measures

Social

- 51% employees are women
- ₹277 million dedicated towards Corporate Social Responsibility (CSR) initiatives
- 2 million+ lives positively impacted through our CSR initiatives
- Recorded zero fatalities, zero high-consequence work-related injuries or ill health and zero LTIFR in FY 2025-26
- 0 leaks of sensitive patient data or breaches through cyber attacks

Stakeholder Engagement

Conversations That Shape the Future of Care

In FY 2025-26, as the healthcare landscape continues to evolve through technological disruption, regulatory transformation, and shifting patient expectations, our engagement philosophy has grown stronger and more intentional. We have moved beyond transactional dialogue to building enduring partnerships, where listening is as critical as leading, and where every interaction translates into measurable value.

A Structured Approach to Listening and Acting

Our stakeholder engagement framework is anchored in a three-stage cycle that ensures purposeful dialogue, sharper prioritisation, and continuous improvement.

Mapping & Identification

Comprehensive mapping of our operations and value chain to identify every stakeholder group and classify them as internal or external based on the nature of their relationship with Apollo.

Prioritisation

Each group is evaluated across two dimensions: the influence they exert on our business and the degree to which our operations impact them. This calibration helps us deploy engagement resources where they create the most value.

Feedback & Evaluation

Continuous feedback channels capture stakeholder expectations, concerns, and aspirations, feeding directly into strategic decision-making and reinforcing long-term trust.



Knowing Our Stakeholders

Each stakeholder group brings a distinct perspective to our value creation story. The table below captures how we connect, communicate, and collaborate with them across diverse touchpoints.

Stakeholder Group	Mode of Communication	Frequency
Government and Regulators	Audits, regulatory filings, policy consultations, and compliance reviews	Periodic
Suppliers	Supplier visits, audits, Supplier Code of Conduct, grievance mechanisms	Needs-based, prior to contracting, and periodic
Investors	Quarterly investor meetings, press releases, AGMs, corporate website, annual and quarterly financial reports, ESG roadshows, and one-on-one engagements	Frequent
Patients and Families	Patient care campaigns, helplines, digital platforms, patient feedback programmes, and Patient and Family Education (PFE) material	Frequent and ongoing
Employees	Town halls, engagement surveys, performance appraisals, recognition programmes, and grievance redressal channels	Frequent and ongoing
Healthcare Professionals	Clinical conferences, webinars, CMEs, and field engagements	Frequent and ongoing
Business Partners	Meetings, mailers, news bulletins, events, and social media	Periodic
Local Communities	CSR programmes, site visits, community projects, digital outreach, and social media	Frequent



Materiality Assessment

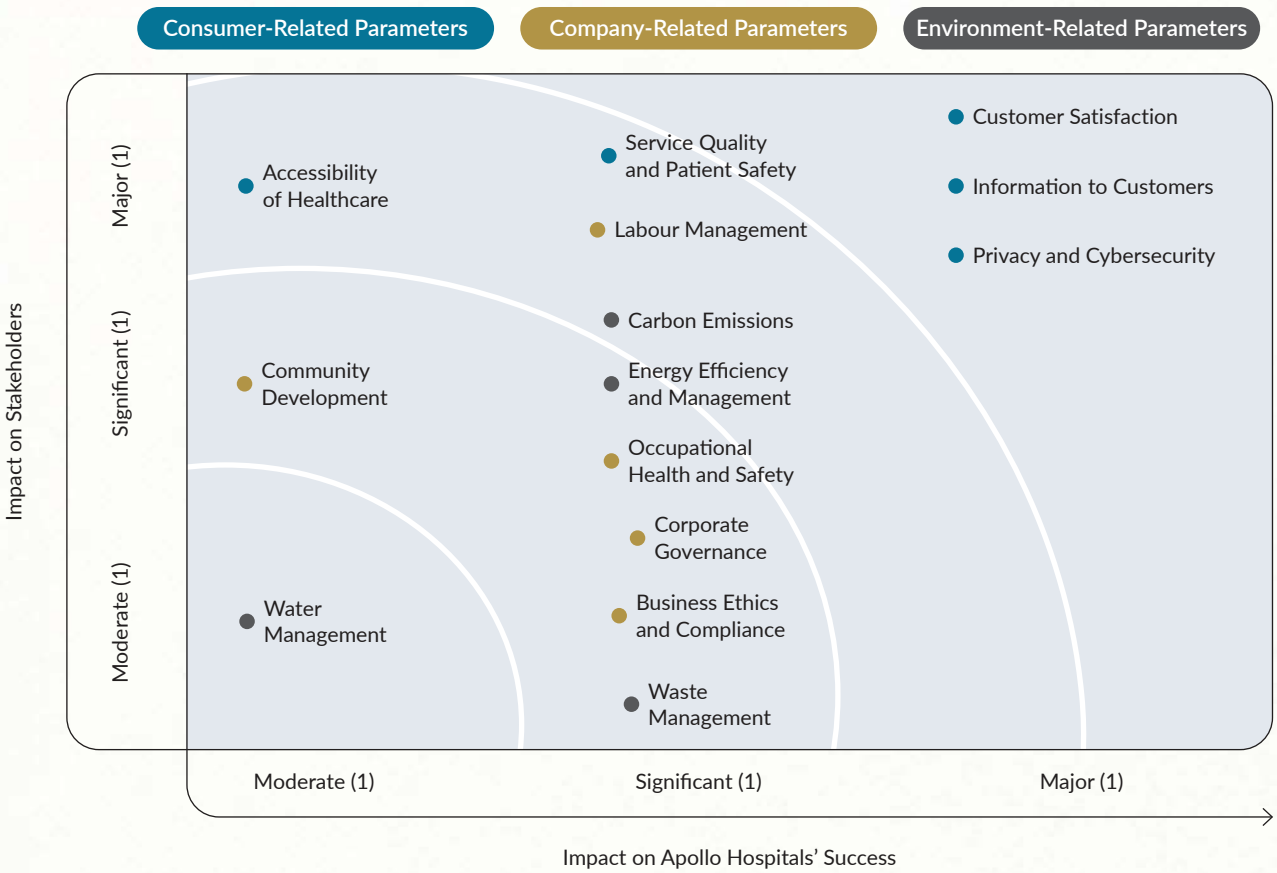
Anchoring Strategy in What Truly Matters

The intelligence gathered through stakeholder engagement flows directly into our materiality assessment, which acts as the strategic compass for our ESG agenda. Our process layers external perspectives with internal business judgement, balancing stakeholder concerns with operational and strategic relevance.

We engage employees, patients, suppliers, investors, regulators, and community representatives through workshops, surveys, focus group discussions, and structured interviews. These insights are then evaluated through a rigorous internal review and a comprehensive risk and opportunity analysis led by senior management, ensuring that each material topic is grounded in both stakeholder reality and enterprise relevance. In FY 2025-26, in light of our recent demerger of the pharmacy business and the evolving geopolitical and normative shifts within the healthcare sector, we have refreshed our materiality lens to align with our renewed structure and direction.

This exercise sets the foundation for our business strategy, guiding us in identifying potential risks and opportunities that have a significant impact on revenues and our stakeholders. The matrix below outlines our 14 material topics that are embedded in our value creation process and drive the decision making towards our 6 ESG Priority Areas.

Materiality Matrix[3]



Six Priorities, One Vision

Our 14 material topics converge into six ESG priority areas that define the contours of our sustainability roadmap.

ESG Priority	Description	Relevant Material Topics
Accountability and Transparency	Embedding governance practices benchmarked against international best standards while upholding the highest ethical conduct	Information to Customers; Privacy and Cybersecurity; Corporate Governance; Business Ethics and Compliance
Healing Our Patients	Delivering clinical excellence and an enriched patient experience that touches every life we serve	Customer Satisfaction; Service Quality and Patient Safety; Accessibility of Healthcare
Empowering People and Communities	Building a workplace and ecosystem rooted in dignity, growth, and inclusion	Labour Management; Community Development; Occupational Health and Safety
Nurturing Our Planet	Driving climate action and embedding environmental stewardship across operations	Waste Management; Carbon Emissions; Energy Efficiency and Management
Our Partners	Partnering responsibly with our suppliers, vendors, and distributors to grow sustainably together	Service Quality and Patient Safety; Accessibility of Healthcare
Social Impact	Strengthening community health outcomes through collaboration, outreach, and institutional partnerships	Accessibility of Healthcare; Community Development

Management of Material Issues for Enterprise Value Creation

From Material Topics to Measurable Outcomes

Articulating material topics is only the beginning. The true test lies in translating them into business strategies, measurable targets, and tangible progress. For each material issue, we define the business case, link it to clear strategic goals, and track performance year on year.

Material Issues for Internal Stakeholders

Parameter	Service Quality and Patient Safety	Accessibility to Healthcare	Labour Management
Business Case	Clinical excellence is the cornerstone of trust and growth. Investments in staff training, process redesign, and emerging technologies deliver compounding returns: stronger patient loyalty, higher volumes, fewer adverse events and malpractice exposures, sharper operational efficiency, and a brand that commands respect across markets.	Expanding access transforms both lives and balance sheets. Investments in telehealth, mobile clinics, community partnerships, and flexible payment frameworks open new patient cohorts, strengthen financial resilience, and reduce the downstream cost of acute care through early intervention and prevention.	A motivated workforce is the engine of healthcare delivery. Strategic investments in workforce planning, flexible scheduling, competitive rewards, and continuous learning optimise staffing economics, contain attrition costs, and elevate the quality of care, directly influencing patient outcomes and satisfaction.
Business Strategies	The Apollo Quality Programme (AQP) remains the bedrock of our patient safety and quality framework, spanning Effective Communication, Surgical Safety, Medication Safety, Blood Transfusion Safety, and Standardisation of Medical Records. Aligned with the Six International Patient Safety Goals of JCI, AQP performance is directly linked to executive incentives, embedding accountability from leadership downward.	Apollo continues to extend care to every patient segment through differential bed categories, clinical pathway development across Centres of Excellence, and pioneering platforms such as Sapien, one of Asia's leading Bio Banks. Cost horizons, estimation desks, and partnerships with insurers and government schemes make treatment financing predictable and inclusive.	Apollo's reputation as a preferred healthcare employer is reinforced through robust career progression frameworks, continuous upskilling, and signature initiatives such as the Apollo Young Leaders Programme and our Diversity & Inclusion (D&I) interventions, designed to nurture talent at every stage of the career arc.
Linked Target /Goal	NPS score of 84 for OP and IP	Number of teleconsultations conducted in the fiscal year	25% annualised attrition rate for all staff
Target Year	2026	2026	2026
Business Impact	Revenue	Cost	Risk

Material Issues for External Stakeholders

Parameter	Carbon Emissions	Community Development
Cause of Impact	Operations; Products/Services; Supply Chain	Operations; Supply Chain
Business Activity Coverage	>50% of business activity	>50% of business activity
Relevance to External Stakeholders	Emissions are inseparable from public health outcomes. Rising emissions expose Apollo to regulatory tightening, financial penalties, and reputational scrutiny, while also straining the communities we serve. Investors, patients, and partners increasingly assess hospitals on supply chain resilience, transparency, and verifiable climate progress, making decarbonisation both a moral and commercial imperative.	Investments in community well-being yield outcomes that ripple far beyond our hospital walls. Health screenings, education programmes, and institutional partnerships uplift local health, ease the pressure on emergency services, and strengthen Apollo's reputation as a trusted neighbour. These efforts also help attract clinical talent and socially responsible capital, reinforcing long-term sustainability.
Impact Valuation	Reduction of GHG emissions	Strengthening community health and well-being
Impact Metric	Social cost of carbon	Reduction in healthcare emergencies within local communities
Output Metric	CO_2 emissions abated	Affordable healthcare access enabled

Our Sustainability Strategy

A Blueprint Built on Purpose

Our ESG strategy draws its essence from Apollo's founding mission: 'Bringing quality healthcare within the reach of every individual and to touch a billion lives.' It is anchored in strong governance, transparent disclosures, and active stakeholder engagement, and is aligned with globally recognised frameworks including SASB, GRI Standards, BRSR, and the UN Sustainable Development Goals.

This strategy translates purpose into action through three strategic pillars, each enabled by clear objectives and measurable value creation metrics.

Strategic Architecture

Purpose

Bringing quality healthcare within the reach of every individual and to touch a billion lives

Pillars

- Healing Our Patients
- Empowering Our People and Partners
- Nurturing Our Planet

Foundation

- Governance
- Transparent Reporting
- Stakeholder Engagement

Reporting Alignment

- UN SDGs
- BRSR
- SASB
- GRI



Pillar 1 Healing Our Patients

Enabler	Objective	Value Creation Metrics
Access to Healthcare	Expand access to affordable healthcare by deepening reach in semi-urban and rural India	Patients in semi-urban and rural locales; patients from economically weaker sections; patient reach through teleconsultations; patients provided with subsidised treatment
Patient-Centric Care	Deliver world-class patient care with an unmatched experience, validated through external accreditations	Patient satisfaction scores; improvement in ACE scores; AAHPP Seal; improvement in TASCC; patient-centric programmes launched
Business Compliance and Ethics	Earn trust through transparent and ethical business conduct	Data breaches and cyber incidents; Code of Conduct and Cyber Security training coverage; accreditations and certifications; cybersecurity tests conducted

Pillar 2 Empowering Our People and Partners

Enabler	Objective	Value Creation Metrics
Empowering Employees	Build an inclusive and empowered workplace that supports personal and professional growth	Employee satisfaction and engagement scores; gender pay ratio; attrition and turnover rates; percentage of females in leadership; budget allocated to training
Purposeful Partnerships	Partner responsibly with stakeholders to advance sustainability and healthcare outcomes	Suppliers screened on ESG parameters; suppliers trained on ESG; partnerships with academic, medical research institutions, and technology providers

Pillar 3 Nurturing Our Planet

Enabler	Objective	Value Creation Metrics
Climate Action	Architect a decarbonisation roadmap and climate resilience plan	Reduction in carbon intensity (Scope 1 and 2); increase in share of renewable energy
Resource Management	Optimise resource efficiency, minimise waste, and promote sustainable water use	Reduction in freshwater consumption, increase in waste recycled and diverted from landfills

As we step deeper into FY 2025-26 and beyond, our ESG journey is defined by sharper ambition and broader collaboration. Every metric we track, every partnership we nurture, and every patient we treat brings us closer to our vision of touching a billion lives. The pages that follow detail the progress we have made across each pillar and the commitments we are renewing for the years ahead.

Governance: Embedding Sustainability into Decision Making

At AHEL, governance is the structural backbone that translates our purpose of healing into measurable, accountable, and sustainable action. In FY 2025-26, we deepened that commitment by hard-wiring ESG outcomes directly into executive accountability, ensuring that every clinical, operational, and capital decision is tested against environmental stewardship, social value, and ethical conduct.



10%
Directors on the Board

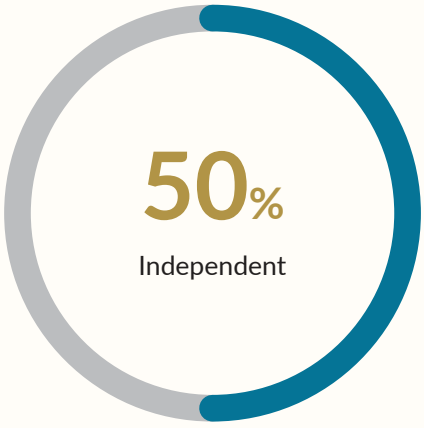
50%
Independent Directors

60%
Women on the Board

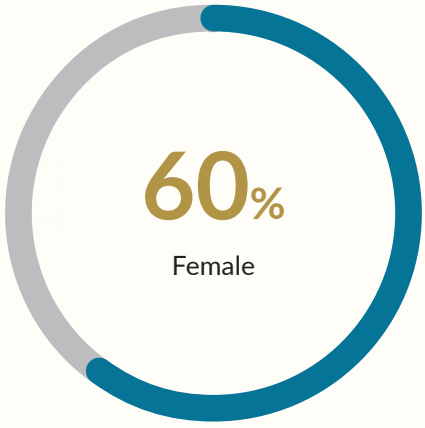
Board Composition and Independence

Our Board is the apex custodian of long-term value. As of March 31, 2026, AHEL's ten-member Board reflects a deliberate balance of executive leadership, independent oversight, and gender diversity, supported by deep tenure and sectoral expertise.

Board Independence



Gender Diversity

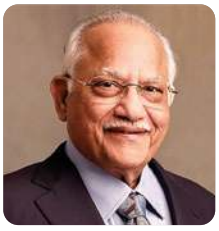


All Independent Directors have affirmed compliance with the independence criteria laid down under Section 149(6) of the Companies Act, 2013 and Regulation 16(1)(b) of the SEBI Listing Regulations, reinforcing impartiality at the highest level of decision-making.

17	8	0
Year Average Board Tenure	Board Committees	Confirmed Compliance Breaches in FY 2025-26

Our Board

Executive Directors



Dr. Prathap C. Reddy
Founder, Chairman



Dr. Preetha Reddy
Executive Vice Chairperson



Ms. Suneeta Reddy
Managing Director



Dr. Sangita Reddy
Joint Managing Director

Non-Executive Directors (NEDs)



Mr. M. B. N. Rao**
Independent Director



Mr. Som Mittal*
Independent Director



Ms. V. Kavitha Dutt*
Independent Director



Dr. Murali Doraiswamy*
Independent Director



Ms. Rama Bijapurkar*
Independent Director



Ms. Shobana Kamineni
Promoter Director

** Independent Directors*
*** Lead Independent Director*

Board Committees: Specialised Oversight in Action

The Board operates through eight specialised committees, each chartered with a defined mandate. Three of these committees are composed entirely of Independent Directors, reinforcing objective scrutiny over audit, talent, and clinical innovation matters.

Committee	Mandates	Independent Committee[1]
Audit Committee	Financial integrity, internal controls, statutory audit	✓
Nomination and Remuneration Committee (NRC)	Board appointments, KMP and Senior Management remuneration	✓
Innovation and Quality Committee	Clinical excellence, innovation pipeline, patient outcomes	✓
Risk Management Committee	Enterprise risk identification, mitigation, ESG risk integration	✗
CSR and Sustainability Committee	ESG strategy, CSR deployment, climate and social goals	✗
Stakeholders' Relationship Committee	Investor and shareholder grievance redressal	✗
Investment Committee	Capital allocation, treasury, strategic investments	✗
Share Transfer/ Allotment Committee	Securities administration	✗

✓ Yes
✗ No

Leadership Remuneration

The NRC determines remuneration levels and composition for Directors, Key Managerial Personnel, and Senior Management. Pay is benchmarked to comparable healthcare and listed-company peers and structured to balance:

- **Fixed pay,** reflecting role, experience, and market parity
- **Short-term variable pay,** linked to annual financial, operational, clinical, and (for hospital CEOs) ESG performance
- **Long-term incentives,** designed to align leadership with multi-year value creation

This architecture ensures that decision-making horizons inside AHEL match the long-cycle nature of healthcare infrastructure and sustainability transitions.

AHEL Sustainability Governance Architecture

Sustainability governance at AHEL is structured as a three-tier cascade that connects boardroom strategy to bedside execution. This design ensures that ESG ambition is neither isolated at the top nor diluted at the operational layer.

Tier 1

The Corporate Social Responsibility and Sustainability (CSRS) Committee, constituted at the Board level, sets the ESG strategy, approves policies, reviews material risks and opportunities, and tracks progress against long-term sustainability objectives.



Tier 2

The corporate sustainability function, led by the Group Vice President, Sustainability and Corporate Affairs, translates Board-approved strategy into enterprise-wide programmes, metrics, and reporting standards. This office is the bridge between governance intent and on-ground delivery.



Tier 3

Each hospital CEO serves as the designated Sustainability Champion for their facility, accountable for energy, water, waste, emissions, and community outcomes within their unit and translates this accountability across their departments. Hospital CEOs report performance to the Group VP biannually, creating a closed feedback loop with the Board.



ESG-Linked Executive Compensation

In FY 2025-26, AHEL transitioned from referencing ESG indicators in performance reviews to embedding quantitative ESG targets directly into the variable compensation structure of every hospital CEO across the network. The variable pay component for all AHEL Hospital CEOs is now tied to two measurable, year-on-year environmental performance thresholds:

5%

year-on-year reduction in water consumption at the unit level

5%

year-on-year reduction in operational emissions at the unit level

These targets sit alongside traditional KPIs, ensuring that environmental stewardship is treated with the same rigour as commercial performance. Achievement is verified through unit-level data collated biannually and reported to the Board of Directors to maintain accountability from the top down. The data is validated by the corporate sustainability office, the Senior Vice President of Corporate Sustainability, and the NRC before payout.



Ethics, Integrity, and Compliance

Ethical conduct is a baseline expectation at AHEL, not an aspiration. Our governance ecosystem is reinforced by a comprehensive policy framework that codifies the standards of behaviour required of every Director, employee, contractor, and supplier. Our policies are approved by the Board, owned by designated functional heads, reviewed at defined intervals, and communicated through structured onboarding, annual refresher training, and mandatory acknowledgement protocols as per international healthcare gold standards.

Compliance is monitored through a combination of internal audits, independent assurance reviews, and a confidential whistle-blower mechanism that allows any stakeholder to report suspected misconduct without fear of retaliation. All reported concerns are investigated under the oversight of the Audit Committee, with outcomes and remedial actions placed before the Board on a periodic basis. This closed-loop system ensures that ethical lapses, were they to occur, are detected early, addressed transparently, and used to strengthen controls across the network. We reinforce these commitments by training our employees annually and during onboarding on key policies listed below.

Policy backbone

- **Code of Conduct for Board Members and Senior Management Personnel**
- **Anti-Bribery and Anti-Corruption Policy**
- **SEBI Insider Trading Policy and Code for Fair Disclosure**
- **Whistle-blower mechanism with retaliation safeguards and confidentiality protections**
- **Sexual Harassment Redressal Policy**
- **Supplier Code of Conduct**
- **Diversity and Inclusion Policy**
- **Related Party Transactions Policy**

For more information on our policies, please refer to our corporate policy microsite.

FY 2025-26 compliance outcomes

	Indicator	FY 2025-26
1	Confirmed incidents of corruption or bribery	0
2	Material breaches of regulatory or statutory law	0
3	Fines or non-monetary sanctions for non-compliance	0
4	Whistle-blower complaints unresolved at year end	0
5	Data privacy breaches affecting personally identifiable information	0

Conflict of Interest and Board-Level Safeguards

The Code of Conduct mandates that all Directors and senior management personnel disclose any transaction that may pose a conflict of interest with the Company's business. Such transactions require pre-approval from the Audit Committee. Examples include investments in suppliers, competitors, or customers; concurrent directorships in competing companies; and concurrent employment with suppliers or competitors. In FY 2025-26, no conflict-of-interest complaints were received against any Director or KMP.

Enterprise Risk Management

Healthcare operates at the intersection of human life, regulation, technology, and ecology. As AHEL has scaled, the risks bearing on our business have grown in number and in interdependence. They span clinical safety, cybersecurity, climate, regulation, reputation, and the social licence we hold within the communities we serve. Our response is structural: risk is governed at the Board level, owned at the unit level, and reviewed continuously across both.

The most consequential evolution of our framework in FY 2025-26 is the formal integration of ESG risks into the Enterprise Risk Management register. Sustainability-linked risks now sit alongside clinical, financial, and operational risks in the same governance cycle, are scored on the same severity-and-likelihood scale and are reviewed by the same Risk Management Committee. This shift signals a clear conviction. Non-financial risks have become financially material to healthcare, and they will be managed accordingly.

Risk Governance Architecture

Our Risk Management Policy applies at the group level and is benchmarked against Joint Commission International and National Accreditation Board for Hospitals standards. Oversight runs through five tiers, beginning with the Board of Directors as the ultimate custodian of risk appetite, supported by the Risk Management Committee at the policy level, the Risk Management Steering Committee at the execution level, the Divisional Risk Management Committee at the verification level, and Risk Champions and Risk Owners at the unit level. The Digital Subcommittee of the Risk Management function, working alongside the Audit Committee, holds dedicated oversight of data privacy, cybersecurity, and digital risk. Mitigation across the framework is anchored in the Four-T discipline: Terminate, Transfer, Treat, and Tolerate.

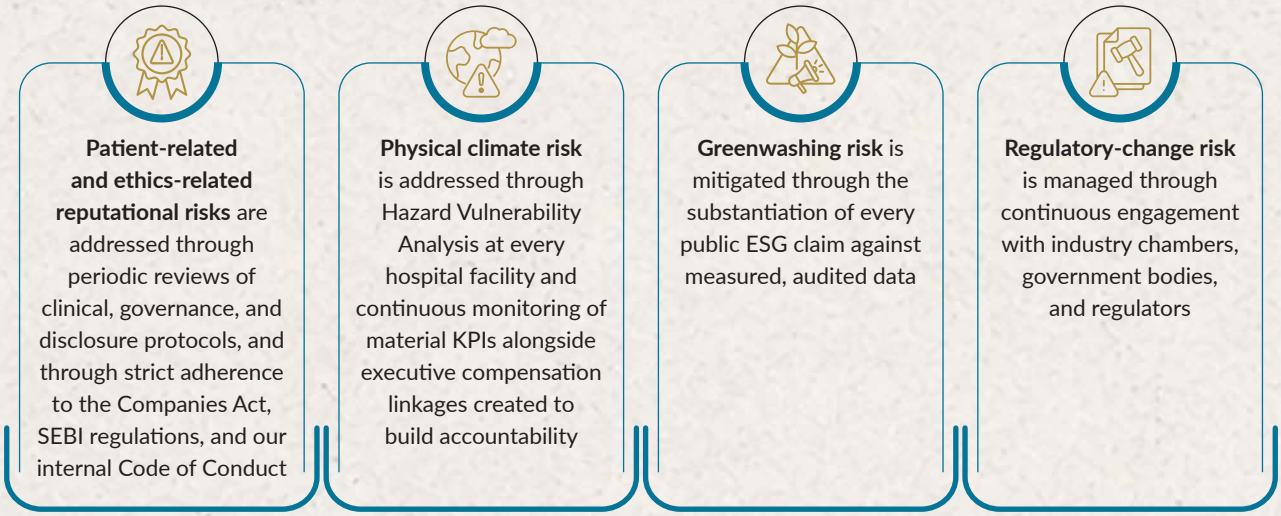




ESG Risks Inside the Register

ESG risks were previously tracked through our materiality matrix, benchmarked against the GRI and SASB Healthcare frameworks. From this year, they are also formally inscribed in the enterprise risk register, scored, owned, and reviewed on the same cadence as every other enterprise risk. Five ESG risks have been classified as Critical in the FY 2025-26 register: reputational risk arising from patient-related incidents; regulatory and reputational risk from greenwashing allegations; risk from changes in regulatory disclosure protocols; reputational risk from adverse reportage on governance or ethics; and climate-related physical risk to hospital facilities.

Each of our identified risks is backed by a defined mitigation approach:



Bringing these risks inside the ERM framework has changed three things in practice. They are now reported to the Risk Management Committee and the Board on the same schedule as every other enterprise risk. Their mitigation budgets pass through the same capital-allocation cycle as operational risk mitigation. Risk Owners at the unit level are personally accountable for ESG risk closure, not only for environmental KPI achievement.

Identification, Assessment, and Mitigation

Risk identification begins with functional heads documenting potential exposures across clinical, operational, regulatory, financial, technology, strategic, environmental, and social areas. The Chief Risk Officer reviews these inputs, assesses emerging risks, and consolidates them into the enterprise risk register, which is reviewed twice annually by the Divisional Risk Management Committee. Risks are evaluated based on likelihood and impact, informing Board reporting requirements and mitigation actions. Functional Risk Owners implement mitigation plans, while progress, residual risks, and new exposures are tracked through annual Risk Status Reports.

During the year, 387 scenario-based fire drills were conducted across facilities, resulting in the identification of 1,496 high-risk observations, of which 61% were addressed through corrective actions. Disaster risk assessments were completed at all hospitals, a Blue Book for crisis and wartime readiness was introduced, and an updated Fire Safety Manual with standardized equipment maintenance SOPs was implemented across the network. Additionally, 100% of plants and offices were assessed for occupational health, safety, and working conditions.

Climate and Physical Resilience

Climate-related physical risk is now a Critical ESG risk in the register and is managed through Hazard Vulnerability Analysis at every hospital. Annual site-specific risk assessments cover earthquakes, floods, fires, climate hazards, and chemical spills. Each Apollo hospital maintains comprehensive emergency response protocols covering evacuation, triage, communications, and external coordination, with regular simulation exercises to test readiness. The National Network of Emergency Services provides continuity of care during disaster events, supported by 24-hour emergency and trauma capability across the network.

IT, Cybersecurity, and Digital Excellence at Apollo Hospitals

In healthcare today, trust is built as much in code as it is in care. At Apollo Hospitals, technology and cybersecurity are not support functions; they are the foundations of patient confidence, clinical excellence, and operational continuity.

Building on the digital foundation of FY 2024-25, this year has been one of deepening, expanding, and embedding. We have strengthened every layer of our cyber defences, broadened our policies and certifications, and engineered privacy by design into the very fabric of how we deliver healthcare.



Conversations That Shape the Future of Care

The Five Pillars of Apollo's Digital Trust Agenda

1 Enterprise-Wide Data Protection

We have unified our data protection policy across every business line and subsidiary, bringing hospitals, digital platforms, pharmacies, diagnostics, and corporate functions under a single, consistent standard of privacy that protects every patient, partner, and stakeholder.

2 Privacy by Design in Every Product

Privacy is no longer an add-on but an architectural principle. Privacy-enhancing technologies and data protection safeguards are now engineered into every stage of our product and service development lifecycle, from design and development to deployment and operation.

3 Stronger Supplier Accountability

Our cyber resilience extends beyond our walls. A formal third-party data protection program now governs every vendor, partner, and supplier, supported by contractual safeguards, structured onboarding, and periodic compliance inspections to verify their alignment with Apollo's standards.

4 Universal Cyber Training

Every individual associated with Apollo, including permanent employees, part-time staff, contractors, and on-site partners, is now part of our cybersecurity training ecosystem, building a workforce of vigilant, informed, and accountable cyber defenders across the organisation.

5 Responsible AI

As AI transforms clinical care, we ensure it is deployed responsibly. Data protection safeguards, bias testing, explainability, and clinical validation are embedded into every stage of our AI model lifecycle, from data ingestion to inference, across our entire clinical AI portfolio.

Our FY 2025-26 digital trust agenda rests on five interconnected pillars. Strengthen one, and you strengthen them all.

Together, these pillars protect what matters most: the trust of every patient who walks through our doors, and every individual who connects with us digitally.

Building a Trust-First Digital Healthcare Ecosystem

The trust patients place in Apollo when they share their most sensitive information is a responsibility we carry into every line of code, every clinical workflow, and every governance review. In FY 2025-26, we have advanced from a strong baseline to a more enterprise wide and holistic posture on data protection.

One Apollo, One Standard of Privacy

Where our data protection framework was historically anchored around our digital touchpoints, we have during the year worked to extend the scope of our data protection policy across all relevant business lines and subsidiaries. This brings hospitals, digital health platforms, diagnostics, and corporate functions under a unified umbrella of data governance. Such harmonisation ensures that patients, customers, and partners experience the same standard of privacy protection, regardless of which Apollo touchpoint they engage with.



Putting Patients in Command of Their Data

In line with evolving global best practices and the expectations of the Digital Personal Data Protection (DPDP) Act, we have enhanced the rights extended to data principals. Stronger mechanisms now support access, rectification, and the right to erasure of personal information. Consent management has been further reinforced, with stricter controls on how personal data may be used for any purpose beyond the delivery of the service the patient originally sought, ensuring that personal data is not rented, sold, or provided to third parties for purposes other than completing transactions or services.



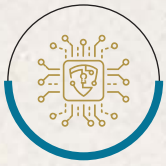
Engineering Privacy into Every Innovation

A defining advancement this year has been the **deliberate integration of privacy enhancing technologies and data protection safeguards directly into the product and service development lifecycle**. From our digital health applications to our clinical AI tools, privacy considerations are now embedded at the design stage. This includes data minimisation, anonymisation, pseudonymisation, encryption by default, and secure development practices. The shift moves Apollo from compliance led protection to engineered, architectural privacy.



Resilience Through Prevention and Response

Building on our existing proactive defences, we have strengthened the reactive arm of our breach response framework, ensuring both proactive and reactive measures are in place to address data breaches. Formalised incident playbooks, clearer notification protocols, root cause analytics, and post incident learning loops now work in tandem to ensure that, in the rare event of an incident, our response is swift, coordinated, transparent, and aligned with regulatory expectations. This dual track approach of prevention and response sits at the heart of our resilience strategy.



Extending Cyber Resilience Beyond Our Walls

Cybersecurity in modern healthcare cannot stop at the enterprise perimeter. Apollo's ecosystem extends across vendors, technology partners, aggregators, OEMs, digital platform providers, and clinical suppliers, each representing a potential surface that must be governed.

In FY 2025-26, we have formalised a third party data protection programme that covers our suppliers and business partners, with inspections conducted to verify their compliance. Contractual data protection clauses are now embedded across vendor agreements, supplier due diligence and onboarding assessments focus on information security maturity, and periodic inspections verify partner compliance. Vendor risk tiering ensures that critical data suppliers undergo deeper, more frequent scrutiny. This evolution reflects our belief that patient trust is only as strong as the weakest link in the chain, and we are committed to ensuring every link meets Apollo's standards.

From Pockets of Excellence to Enterprise-Wide Assurance

Our Information Security Management System (ISMS), certified to ISO/IEC 27001:2022 standards, continues to anchor our cybersecurity strategy. During the year, we completed a structured initiative to expand the scope of certification across all our owned operations, resulting in 100% of our own operations being certified to widely accepted standards. This effort has moved us from certified pockets of excellence to enterprise-wide certified assurance, supported by independent external audits conducted at regular intervals to ensure that our controls remain aligned with global standards and that improvements are continuously identified and addressed.

Our Seven-Layer Security Architecture has been further hardened with next generation endpoint protection, zero trust network principles, and enhanced identity and access management.



Data

Encryption, classification, and access protection of sensitive patient information



Application

Secure software development and continuous vulnerability testing



Host

Endpoint protection through advanced threat detection and response



Internal Network

Firewalls, segmentation, and intrusion prevention across internal systems



Boundary

Perimeter defence through continuous monitoring and access control



Physical

Surveillance, access logs, and on-site security across all facilities



Policies & Procedures

Governance, training, and organisation-wide security accountability



Cybersecurity at the Boardroom Table

Cybersecurity at Apollo continues to be governed at the highest level. Responsibility for privacy and data security rests with the Audit Committee that reviews controls and security relating to the Company's critical IT applications, the internal and control assurance audit reports of all major divisions and profit centres and deviations from the code of business principles, if any.

Under the leadership of our Chief Information Officer (CIO) and the Risk Management Committee, we have advanced Cyber Security Vision 2.0, translating board-level intent into operational programmes around AI driven threat detection, security operations centres, managed detection and response, and continuous compliance monitoring.

Cybersecurity Vision 2.0 in Action

Our security operations are now augmented with AI/ML driven analytics that continuously learn from telemetry, prioritise alerts, and accelerate response times. Managed Detection and Response (MDR) and Threat Intelligence Services, established last year, are now in steady state and provide round-the-clock vigilance. The Security Assessment Framework for Enterprises (SAFE) continues to deepen, aggregating intelligence across internal tools, partners, and the broader threat landscape, and using Bayesian breach prediction models to forecast and pre-empt vulnerabilities.

Continuous evaluation remains central to our assurance cycle. Regular security simulations, semi-annual mock phishing assessments, and annual penetration testing collectively ensure that each finding feeds directly into remediation roadmaps.

Scaling AI in Medicine, the Responsible Way

Apollo's clinical AI portfolio, including Prediabetes AI, Liver Fibrosis AI-LF, EARS, AICOPD, AI-EWS, and AICVD, continues to expand both in scope and adoption. In FY 2025-26, we have placed deliberate emphasis on the responsible deployment of AI. Data protection safeguards are integrated into every AI model lifecycle, from data ingestion to inference. Bias testing, explainability, and clinical validation are embedded into our model governance. Patient consent and data stewardship are upheld across all training and deployment pipelines.

This portfolio is being further advanced through Apollo HealthAxis, the Group's global technology and healthcare services arm, which combines Apollo's clinical depth with digital platforms, telehealth, enterprise healthcare services, and scalable clinical AI capabilities. Built by providers, for providers, Apollo HealthAxis strengthens our ability to deliver secure, outcomes led innovation at scale.

Its technology backbone includes hospital information systems, EMR Studio, Care Console, and a Clinical Intelligence Engine with more than 30 interoperable clinical AI APIs, enabling real time clinical visibility, care coordination, and decision support across outpatient, inpatient, and virtual care settings.

This responsible AI posture extends to our flagship platforms such as Ask Apollo, Apollo 24|7, and Apollo HealthAxis, where AI is leveraged to enhance personalisation, accessibility, and clinical decision support, all within a privacy first architecture.

Apollo's broader clinical AI development pipeline now spans cardiovascular disease, COPD, chronic kidney disease, early warning systems, metabolic risk, liver failure, pre anaesthesia assessment, and empirical antibiotic recommendation. These solutions are trained on over 15 million longitudinal clinical records and governed through a robust AI framework spanning anonymisation, bias testing, clinician validation, and production deployment. More than five patents are currently in the innovation pipeline.

Our responsible AI approach is further guided by the EASE Framework, which helps ensure that clinical AI solutions are transparent, fair, clinically relevant, and built to deliver measurable value while reducing alert fatigue and enabling earlier intervention.

Clinical AI Development

Design and implement novel AI solutions that address unique organisational needs and drive strategic advantage

Throughput Optimisation

Remove bottlenecks, enhance process flows, and boost overall efficiency with AI-powered automation and resource allocation

Generative AI Approaches

Unlock the value of unstructured data, turning it into actionable insights for informed decision-making

Advanced ACAI-NLP Capabilities

Standardise text and enhance data quality to facilitate seamless integration and analysis through Apollo Clinical AI-NLP models

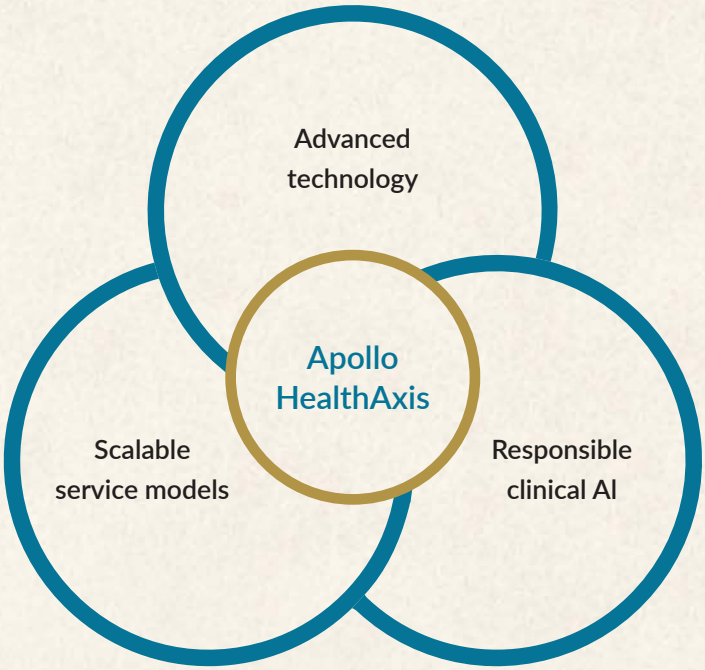
Every Apolloite as a Cyber Defender

People remain our first line of defence. In FY 2025-26, we broadened the scope of our privacy and cybersecurity training to cover all employees, including contractors. This means every individual working with Apollo data, including permanent employees, part time staff, contractors, and on-site partners, is now within our training programme.

Our learning ecosystem now includes mandatory annual cybersecurity training for all employees and contractors, role based deep dive modules for clinicians, IT teams, customer service staff, and leadership, phishing simulations and behavioural nudges that build instinctive cyber hygiene, and awareness campaigns woven into Apollo's broader culture of vigilance. This wider scope ensures that everyone who touches patient data, regardless of employment status, operates with the same standard of awareness and accountability.

Secure by Design, Seamless by Experience

Cybersecurity and digital trust are inseparable from the everyday experience of care. This year, our Operations and Service Excellence agenda has translated that belief into technology enabled, secure patient journeys.



Patient Navigator V1.0 has streamlined admissions through secure, digitally orchestrated workflows. The OT Scheduler and OT Consumption Declaration modules have digitised clinical operations across pilot units with embedded data protection. Real time discharge tracking, powered by Aldun and Mediassist, has accelerated turnaround times while safeguarding patient confidentiality.

The My Apollo platform has evolved with secure CRM systems, voice-based feedback, and AI-enabled voice-to-text tools. In-room digital experience applications, patient navigation tools, and preference-capturing platforms have been expanded across hospitals, each governed by privacy by design principles. E-Visitor and ICU pass systems digitise physical access, blending cyber and physical security into a single protection layer.

These care journeys are increasingly supported by Apollo HealthAxis' broader digital backbone, which enables real time care visibility, coordinated clinical workflows, and virtual care delivery across settings. The platform today supports large scale operations spanning more than 2,500 beds, 15,000 teleconsultations per day, and over 3.1 million preventive health checks annually.

Apollo HealthAxis also operates one of the region's largest virtual care footprints, including 500 plus telemedicine centres, 2,500 plus Tele ICU beds, and 2,000 plus additional monitored beds. Over the last two years, more than 320,000 patients have been remotely monitored, while over 300,000 fall detection alerts have been triaged through virtual command centres, contributing to improved patient safety, reduced length of stay, and better specialist utilisation.

Anchoring it all is robust safety governance: scenario-based fire drills, the Blue Book for emergency preparedness, the Fire Safety Manual, and the second edition of Safety Olympics. Together, they reflect Apollo's integrated view of safety, where physical, digital, and emotional security work in harmony.

Listening, Learning, and Acting on Patient Voice

Digital transformation at Apollo is ultimately measured by the quality of patient experience it enables. Strengthened CRM platforms across multiple hospitals, recalibrated audit mechanisms with external partners, and structured grievance redressal systems have been integrated with secure data handling protocols. Patient interaction audits, mystery audits, and periodic operational reviews are supported by digital dashboards and performance scorecards that uphold confidentiality while enabling actionable insight.

This emphasis on digital service excellence is reinforced by Apollo HealthAxis' enterprise capabilities across revenue cycle management, virtual nursing, care coordination, analytics, and IT services, where standardised workflows and strong clinical and compliance oversight are helping improve documentation accuracy, turnaround times, and cost efficiency across care environments.

Cross functional process improvement projects, collaborative best practice sessions, and the evaluation of advanced navigation, analytics, and Voice of Customer technology partners are systematically advancing the digital maturity of our service excellence agenda, all within Apollo's privacy and cybersecurity framework.

BEKIND: Where Compassion Meets Code

Even as we strengthen our digital and cyber capabilities, Apollo's spirit remains profoundly human. The BEKIND movement, launched this year with its own brand identity and the 10 Commandments of BEKIND, weaves compassion into the operational fabric of our hospitals. It is supported by AI driven assessment tools, experiential workshops for leaders and clinicians, and specialised in person and online training modules that ensure secure, scalable delivery of empathy training across our workforce. Behavioural audits and governance mechanisms further reinforce this culture. Our digital systems exist to amplify, not replace, the warmth of human care.

A Year of Recognition, A Continuum of Excellence

Apollo's leadership in healthcare IT continues to be externally validated through prestigious recognitions and certifications:

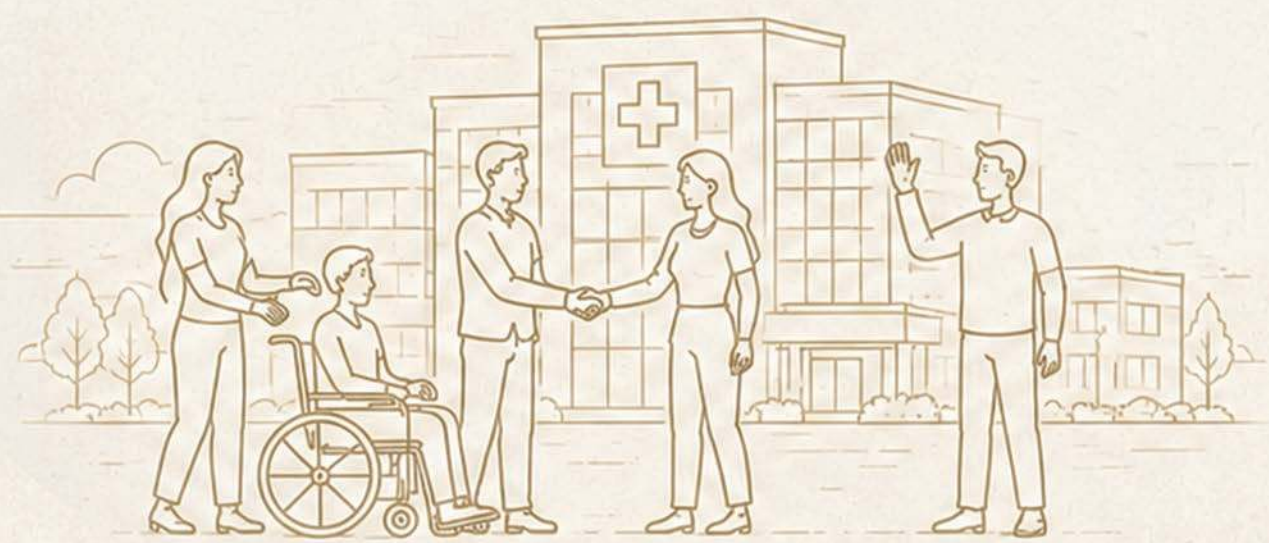
- **CHIME Most Wired Award**
- **HIMSS Asia Pacific:** DIAM, O-EMRAM, INFRAM, Stage 6 DIAM
- **NIST and HIPAA aligned controls**

These accolades are not endpoints. They are markers along a continuum of maturity we are committed to advancing year after year.

The Road to a Safer Digital Tomorrow

Our path forward is clear. To remain India's most trusted digital healthcare ecosystem, we will continue to:

- Deepen enterprise wide privacy governance
- Expand certification across every owned operation
- Embed privacy enhancing technologies in every product
- Strengthen third party and supply chain resilience
- Universalise cybersecurity training across the Apollo family
- Advance responsible AI as a hallmark of clinical innovation



The People Behind the Care

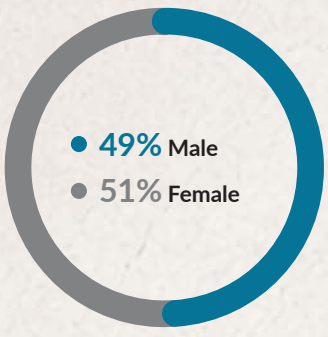
At Apollo Hospitals, our people remain central to our ability to deliver accessible, high-quality, and patient-centric healthcare services. As one of India's leading healthcare providers, we recognise that a skilled, motivated, and inclusive workforce is critical to strengthening healthcare outcomes and sustaining long-term organisational growth.

During FY 2025-26, Apollo Hospitals continued to focus on building a workplace culture that promotes learning, collaboration, inclusion, wellbeing, and professional growth. Our people strategy is aligned with the organisation's broader purpose of delivering quality healthcare while fostering a safe, equitable and engaging work environment for employees across all hospitals, clinics, pharmacies, diagnostics centres, corporate offices, and digital healthcare platforms.

We are powered by over 44,000 dedicated professionals who bring diverse skills and perspectives to our organisation. Our workforce comprises healthcare professionals, clinicians, nursing staff, allied healthcare personnel, administrative employees, operational staff, and support teams working together to strengthen healthcare delivery across urban, semi-urban, and rural geographies.

Empowering People Through Inclusion

Gender Representation of our Workforce



Diversity, equity and inclusion (DEI) are embedded within our organisation's culture, people and practices. We are committed to creating a workplace where employees feel valued, respected, and empowered irrespective of gender, age, background, or role.

In FY 2025-26, Apollo Hospitals continued to maintain a diverse workforce supported by inclusive hiring and people management practices.

We believe that diversity in gender, experience, culture, and professional backgrounds strengthens innovation, enhances patient care, and enables balanced decision-making. With 51% representation, women make up over half of our workforce, placing us among the few large healthcare organisations in India where women form the majority.

In FY 2025-26, gross wages paid to females constituted **40.5%** of total wages

To us, inclusion extends beyond gender. We employ 34 differently abled colleagues, equally represented by men and women, reinforcing our commitment to accessibility and respect. Diversity is also visible at our leadership level as women hold six of ten Board positions, representing 60% of the Board of Directors. Our diversity metrics don't stop at the baseline of our operations, but stem from the very top.

Ethics & Compliance Snapshot

1 POSH compliance training was extended to both on-roll and outsourced members, and a centralised governance model for POSH was established.

2 No complaints were received in relation to discrimination, child labour, forced labour, or wage practices.

We also remain committed to maintaining a workplace free from discrimination, harassment, and unfair treatment. Policies relating to equal opportunity, prevention of sexual harassment, employee conduct, and grievance redressal guide our workplace practices and reinforce accountability across the organisation.

Talent Acquisition and Retention

We continue to invest in attracting, developing, and retaining skilled talent across clinical and non-clinical functions. Given the dynamic nature of the healthcare sector, building a resilient and future-ready workforce remains a strategic priority for the organisation.

In FY 2025-26, we made meaningful progress in reducing attrition. Our overall turnover rate for permanent employees dropped to 21.6%, compared to 27% in FY 2024-25 and 35% in FY 2023-24. This steady improvement reflects the impact of our efforts to strengthen employee engagement, enhance career development opportunities, and invest in wellbeing initiatives.

This reduction has been driven by targeted interventions across the talent lifecycle. During the year, we onboarded approximately 1,000 apprentices through community driven Rozgar Melas, generating savings of about ₹81.6 million while creating a pipeline for permanent hiring in the future. These efforts directly support the Government of India's focus on employability and skill development, aligning with national programmes such as Skill India and the Apprenticeship Act, which encourage industry participation in workforce readiness.

We also revised our internal job posting guidelines to promote lateral mobility, enabling employees to explore new roles and build long-term careers within the organisation in any department where their skills fit in. In parallel, employer branding initiatives launched on LinkedIn strengthened our external talent pipeline, complementing national objectives to expand opportunities for youth and enhance workforce participation. Together, these measures reinforce our commitment to building a resilient organisation while contributing to broader socio economic goals.

To complement these efforts, we introduced the Apollo Employee Stock Option Plan 2024, designed to enhance retention and engagement by offering employees the opportunity to participate in and benefit from the long-term value creation they are generating for not only our investors but also for themselves. By aligning employee interests with organisational growth, the ESOP reinforces our commitment to building a motivated workforce and sustaining a strong talent pipeline.

Building Future Capabilities

Continuous learning and professional development are integral to delivering quality healthcare and driving operational excellence at Apollo. Through a robust learning and development framework, we equip employees with the technical, behavioural, managerial, and leadership capabilities needed to provide exceptional patient care. Structured internal training programmes are available to all employees, complemented by selected external learning opportunities supported through financial and non-financial assistance. Annual refresher programmes reinforce awareness of critical compliance topics, including anti-bribery and anti-corruption, business ethics, POSH, and cybersecurity, while specialised training addresses the needs of specific employee groups. Through these sustained investments in capability building, we ensure our workforce remains future-ready and equipped to deliver outstanding patient experiences.

1

C.O.R.E. Train-the-Trainer

Standardised training excellence across the network, certifying 27 trainers to deliver consistent, high-quality learning.

2

Apollo Young Leaders Programme

First cohort of 30 leaders completed in partnership with the Indian School of Business (ISB). The 21-month programme covered healthcare entrepreneurship, digital transformation, analytics, and financial value creation.

3

First Line Manager (FLM) Training

Rolled out in Pune, Hyderabad Financial District, Chennai Main, and Madurai to strengthen managerial capability at the frontline.

4

Patient Interaction Experience (PIE)

Introduced to enhance communication and empathy in patient interactions, reinforcing trust and care quality.



We view continuous learning as inseparable from the delivery of quality healthcare. In FY 2025-26, we recorded a total of 937,403 training hours across the organisation. Employees participated in structured training programmes covering clinical protocols, patient care practices, digital systems, leadership development, quality standards, compliance requirements, and workplace safety.

Performance Appraisal and Career Development

Apollo Hospitals continues to foster a high-performance, growth-oriented culture through structured performance management and career development processes. Our approach is designed to support employee growth, recognise contributions, align individual objectives with organisational priorities, and strengthen capabilities across clinical and non-clinical functions.

Employees participate in periodic performance evaluations based on defined goals, role-specific competencies, behavioural expectations, and development objectives. The process facilitates meaningful feedback and development conversations between employees and managers, enabling the identification of strengths, areas for improvement, and future growth opportunities.

In FY 2025-26, 100% of employees received formal performance and career development reviews, reflecting our commitment to a fair, transparent, and inclusive evaluation process. During the year, we implemented several enhancements to strengthen the effectiveness and consistency of our performance management framework.

1. **Online mid-year reviews** for managers to enable timely feedback and support performance improvement
2. **Performance management system (PMS)** training for employees and managers to strengthen capability and consistency in evaluation practices
3. **Simplified the probation confirmation process** to improve efficiency and enhance employee experience
4. **Introduced standardised goal-setting** for Nursing and Paramedical staff, promoting greater fairness, transparency, and alignment in performance assessments

These initiatives reinforce a culture of continuous feedback, accountability, and development, ensuring employees are supported in achieving their full potential while contributing to organisational success.

Employee Engagement and Well-being

We recognise that employee well-being is fundamental to workforce resilience, productivity, and the delivery of quality patient care. We are committed to fostering a supportive and engaging workplace that promotes employees' physical, mental, emotional, and professional well-being. During the year, we strengthened employee engagement through initiatives that enhanced leadership accessibility, celebrated meaningful contributions, and reinforced our culture of care.

We conduct annual employee satisfaction surveys to better understand employee experiences and identify opportunities for improvement. In FY 2025-26, this included the Employee and Nurses Hostel Satisfaction Survey, which gathered feedback on living conditions, facilities, and support services across hostel locations. Insights from the survey were used to drive targeted improvements in infrastructure and service delivery.

Beyond formal surveys, we maintain multiple channels to encourage continuous dialogue and feedback. Leadership Townhalls were standardised across all units, providing employees with regular updates on organisational developments and opportunities to engage directly with senior leaders. Employee recognition was further strengthened through the Apollo Value Champion Awards, which celebrate individuals who exemplify Apollo's values in their daily work. We also launched Healers' Circle, an alumni network designed to foster lasting connections with former employees and keep them engaged with the Apollo community.

Our commitment to employee support was further demonstrated through HR on Wheels, a proactive initiative that brings HR teams directly onto hospital floors. By maintaining a visible on-ground presence, HR teams were able to address employee concerns in real time, conduct wellbeing check-ins, promote awareness of key workplace practices, and enhance access to support mechanisms. The initiative strengthened trust, improved responsiveness, and reinforced a culture of care across our facilities.

Together, these initiatives reflect our belief that an engaged, supported, and empowered workforce is essential to delivering exceptional patient care and building long-term organisational resilience.

BEKIND: A Culture of Compassion

In FY 2025-26, we launched BEKIND as a cultural flagship initiative across the Apollo network. BEKIND is our organisation-wide movement to strengthen empathy, compassionate communication, and patient-centric behaviors at every level.

During the year, we established the BEKIND brand identity, introduced the '10 Commandments of BEKIND,' and integrated behavioural audits and governance mechanisms into daily operations. Over 10,429 employees were trained through in-person sessions and an additional 13,617 through online modules. The programme was reinforced through BEKIND Champions at each unit, RAG-based (Red-Amber-Green) evaluations, and on-ground coaching.

We also introduced AI-driven assessment tools and experiential workshops for leaders and clinicians, and ran specialised training programmes for doctors, Resident Medical Officers (RMOs), and Nursing Care Coordinator (NCC) teams. The initiative was supported by live-action empathy videos, BEKIND podcasts by senior leaders, and a BEKIND Coffee Table Book.

The Path Ahead

We are building on this year's gains with a clear roadmap for the future. Our focus remains on strengthening the foundations of a workplace that cares, for its patients and for its people. Continued investments in leadership development will ensure that our next generation of leaders is equipped to navigate a rapidly evolving healthcare landscape with confidence and empathy.

Cultural programmes such as BEKIND will deepen our commitment to compassion and respect, reinforcing the values that define Apollo Hospitals. At the same time, we are expanding our occupational safety infrastructure to safeguard employees across all units, recognising that a safe workforce is essential to delivering safe care.

Together, these initiatives reflect our vision of sustainable growth: an organisation that not only advances healthcare but also nurtures its people, aligns with national priorities, and builds long term trust with stakeholders.

Occupational Health and Safety

At Apollo Hospitals, occupational health and safety (OHS) is a critical component of our commitment to employee well-being and responsible healthcare delivery. Given the nature of healthcare operations, we recognise the importance of maintaining safe workplaces that protect employees, clinicians, patients, and visitors from occupational risks.

Our OHS management approach focuses on identifying workplace hazards, strengthening preventive controls, building employee awareness, and fostering a strong safety culture across all operations.

Our Approach to Health and Safety



Our OHS Management System

We have implemented a comprehensive OHS management system across all our facilities, covering staff, patients, visitors, and contractors. Our OHS policy reflects our responsibility to safeguard every member of the Apollo workforce. We are committed to creating a safe and supportive environment by adhering to all applicable safety regulations, proactively identifying potential hazards, and implementing effective risk management controls. Beyond compliance, our approach is designed to anticipate risks, protect employees, and reinforce a culture where safety is inseparable from care. Our Apollo Proton Cancer Centre holds ISO 45001 certification for occupational health and safety management.



Hazard Identification and Incident Reporting

We use the Automated Incident Reporting System (AIRS) as our primary mechanism for identifying and reporting work-related hazards. Any employee can submit an incident report anonymously through AIRS. Each incident is assessed using a Severity Assessment Code (SAC) matrix, and high-severity incidents trigger a formal Root Cause Analysis (RCA) to identify systemic corrective actions.



Ensuring Safety through Training

We invest in comprehensive OHS training programmes that go beyond compliance to build confidence and capability among our workforce. These programmes cover critical areas such as emergency response readiness, safe equipment handling, and hazard awareness. By equipping employees with practical skills and knowledge, we empower them to protect themselves and those around them, fostering a culture where safety is embedded in everyday practice.



Collaborative Safety Culture

Dedicated safety committees are at the heart of our OHS approach. These forums create space for employees to actively share ideas, raise concerns, and provide feedback that directly shapes our practices and protocols. By involving the workforce in decision making, we foster a culture where safety is not imposed but co-created, strengthening ownership, accountability, and continuous improvement across all units.



Tracking Safety Metrics

We maintain a rigorous approach to monitoring OHS across all our facilities. Critical metrics such as incident rates and compliance levels are tracked consistently, providing us with clear insights into performance and areas for improvement. This disciplined measurement framework ensures that safety standards are not only upheld but continuously strengthened, reinforcing our commitment to a workplace where risks are managed proactively and employees feel protected.

Safety Performance and Initiatives

In FY 2025-26, Apollo Hospitals delivered strong safety outcomes, underscoring our commitment to protecting employees and patients. We recorded ***zero lost time injuries, zero fatalities, zero total recordable work-related injuries, and zero high-consequence work-related injuries or ill health.***

As part of industry-specific monitoring, we tracked 355 needle stick injuries during the year. While these did not result in days away from work, they are closely monitored given the infectious disease exposure risks inherent to healthcare settings. Importantly, ***100% of our plants and offices were assessed for health and safety practices, with zero complaints received from employees.***

Emergency preparedness was significantly strengthened through the release of the Blue Book, a comprehensive crisis manual for wartime readiness, alongside 387 scenario based fire drills across all units. ***We also published a new Fire Safety Manual (Volume 1) and standardised SOPs for fire equipment maintenance.*** Risk monitoring identified 1,496 high-risk observations, of which 61% (916) were closed through corrective actions.

Security measures were reinforced through mystery audits and drills, achieving 57% compliance with the new E-Visitor pass system and 83% compliance with ICU pass controls. Engagement initiatives such as the ***Safety Olympics*** built awareness and competitive participation around safety protocols, while infrastructure improvements included MRI safety audits and the standardisation of five engineering processes. Together, these measures reflect a holistic approach to safety, combining performance monitoring, preparedness, employee engagement, and infrastructure upgrades to ensure a resilient and secure workplace.

Clinical Safety Governance

Volume without safety is meaningless, and Apollo's clinical safety governance architecture ensures that every interaction is a safe one. Patient safety is monitored through Safe@ Six, a dashboard launched in 2025 covering the six highest-risk domains of care, which recorded a group score of 90. High-alert medication errors were held between 0.03% and 0.18%, and key infection rates tracked at or below US National Healthcare Safety Network benchmarks.

This discipline is anchored in our 'Journey to Zero Harm' philosophy and our Patient Safety Commandments, ensuring accountability extends from the bedside to the boardroom. Safety, at Apollo, is not an aspiration but a measured, audited daily practice.

Apollo Standards of Clinical Care (ACE 3.0)

The challenge of any large network is consistency: ensuring care in one hospital matches the best in another. The Apollo Clinical Excellence scorecard, ACE 3.0, answers this by measuring 42 reporting hospitals against 30 clinical parameters, each benchmarked to the Cleveland Clinic, Mayo Clinic, Johns Hopkins, and the NHSN.

ACE 3.0 Band	Average Score 2025
Group A	73
Group B	78
Group C	83
Group Average	79 (up from 72 in 2010)

The pattern is telling: our most established hospitals score highest, and as newer units mature along the same curve, network-wide quality continues to rise.

Safe@Six

Launched in April 2025, Safe@Six is Apollo Hospitals' patient safety outcomes dashboard, established to standardise and strengthen patient safety practices across the network. The framework monitors four essential themes of clinical safety: Anaesthesia and Sedation Safety, Medication Safety, Blood Transfusion Safety, and Critical Care Safety. Through continuous measurement of compliance across these parameters, Safe@Six provides a consistent, group-wide view of patient safety performance. In 2025, the dashboard recorded an average score of 90 at the group level, reflecting a high and sustained standard of safety across our hospitals.

89.6

Average Safe@Six score across the fiscal year, highlighting our consistent delivery of high safety standards network-wide

Patient Safety in Action: Enhanced Connected Care

The problem ECC solves is timeless: in a busy ward, early signs of deterioration can be missed. Apollo's Enhanced Connected Care programme uses continuous monitoring and AI early-warning scores across 2,081 beds in 39 hospitals, having monitored 2.4 Lac patients.

The impact is measured in lives protected:

50% to 80%
Reduction in
Code Blue Calls

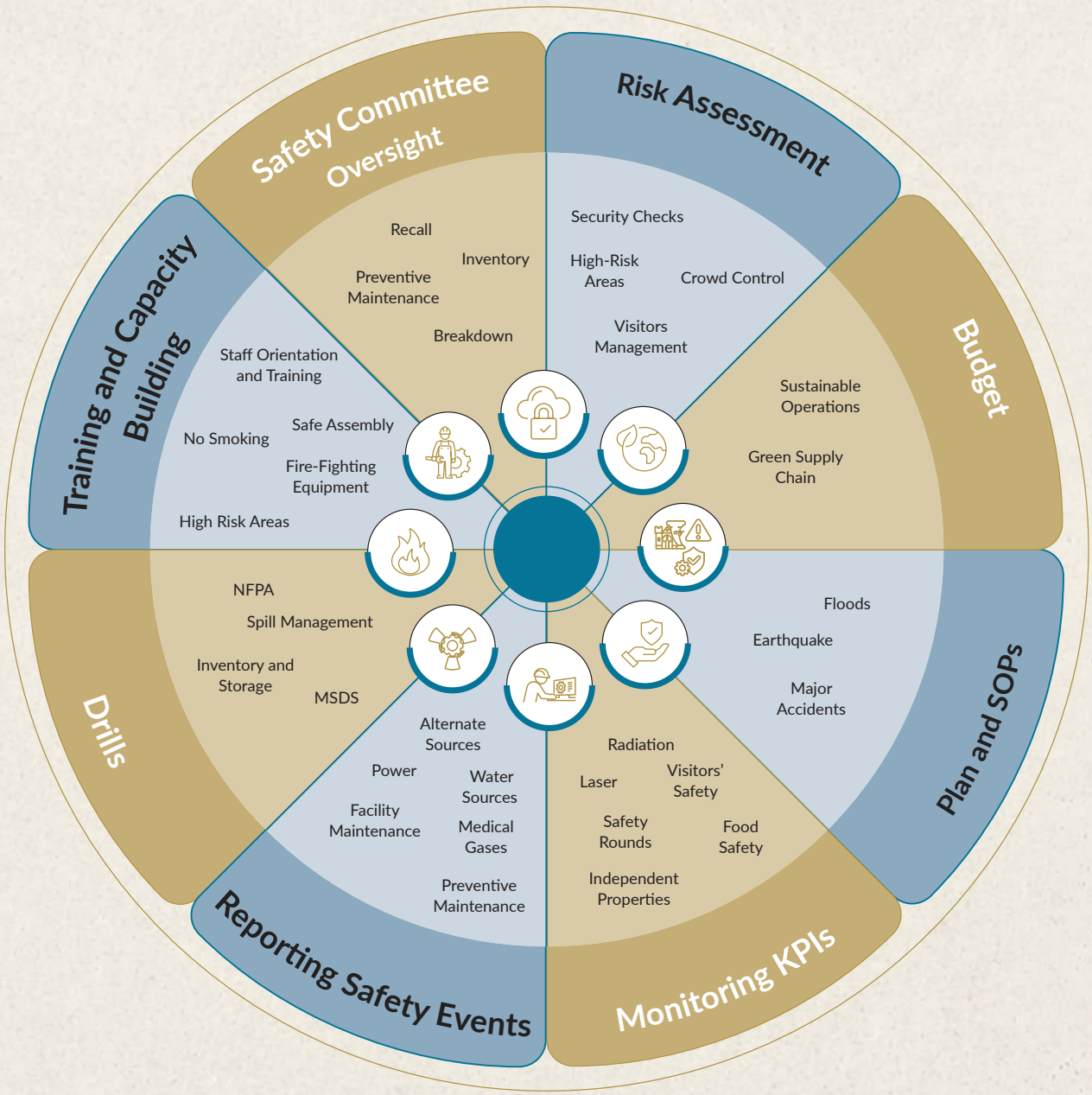
~40%
Reduction in
ICU Re-admissions

Vitals
Monitoring Time Reduced From
60 to 10
Minutes Per Patient Per Day

Every avoided Code Blue is a patient whose crisis was caught in time, and this is the truest measure of patient safety and the importance placed on the patient experience at Apollo.



Our Comprehensive OHS Management System



Safety | Security | Equipment Safety | HAZMAT | Utility Management | Fire Safety | Disaster Management | Sustainability

Accessible and Sustainable Healing

For Apollo Hospitals, access to healthcare is not a programme but the premise on which the entire organisation is built, and it remains the heart of our mission to touch a billion lives. Each year, we deepen this commitment through sustained investment, stronger governing policies, and the steady expansion of our network into the communities that need care most. Our direction is consistent: to lower risk, improve outcomes, and widen the path to a healthier future. By placing patient safety, accessibility, and innovation at the core of our practice, we continue to raise the standard of care and honour our legacy as guardians of health.

156,728 (Δ7%)

Inpatients Admissions

23,908

Out-patient Visits/Day (Measured in Footfall/day)

Health of the Nation Report 2026: Decoding India's Early and Unseen Health Risks

Apollo Hospitals' annual Health of the Nation Report serves as our barometer for India's public health trajectory, translating large-scale screening data into a clear reading of where the nation stands. The sixth edition, drawn from over three million preventive health assessments conducted in 2025, maps a quiet but significant shift. Health risks in India are arriving earlier, staying hidden longer, and too often being missed by conventional screening. The report makes the case for a move away from reactive, symptom-led treatment towards care that is proactive, predictive, and personalised.

The central finding is the early onset of Non-Communicable Disease risk, with two in three young adults already vulnerable. Among the working population, with an average age of 38, nearly half are living with prediabetes or diabetes, one in four have high blood pressure, and eight in ten are overweight. These figures point to a deepening of the trend observed in earlier editions, where roughly a quarter of those screened showed undiagnosed diabetes or hypertension. The pressure is visible even among those under 30, where more than half are obese and a comparable share carry abnormal cholesterol, alongside widespread Vitamin D and B12 deficiencies and declining physical fitness.

The report also draws attention to women's health as a national priority, noting distinct risk patterns and an earlier onset of breast cancer in India, with a mean detection age of 51, nearly a decade earlier than in Western populations. Equally important is its emphasis on the limits of routine testing. A majority of fatty liver cases were found in individuals with normal liver enzyme levels, and a significant share of asymptomatic individuals showed early signs of cardiovascular risk, underlining the value of imaging and advanced diagnostics in catching disease before it surfaces.

Reaching a Billion Lives: Accessibility @ Apollo

Access is the measure of our mission. Apollo's distributed model carries care to where patients are, dismantling the barriers of distance, cost, and time.

Apollo Remote Healthcare has delivered over 3.4 million teleconsultations to 3.3 million beneficiaries through more than 300 digital dispensaries and 200-plus e-UPHCs, positively impacting over 29 million lives. Apollo 24|7 now serves over 46 million registered users with more than 15,000 consultations and 50,000 medicine orders every day. In a single demonstration of reach, Apollo Pharmacy set a world record by completing 167,000 health screenings in 11.5 hours.

29 million+

lives positively impacted through remote healthcare alone

Apollo HomeCare

For many patients, the safest and most dignified place to recover is home. Apollo HomeCare marked ten years of service in 2025, having reached over one million patients and delivered more than 20 million hours of nursing care. A new Palliative Care at Home Programme now supports patients with advanced illness, and complex procedures such as home hemodialysis are delivered safely outside hospital walls.

Its 2025 scorecard proves quality travels with the patient: a risk-adjusted mortality rate of 0.41% against a 2% benchmark, and a hospitalisation rate of 1.01% against a 4% benchmark, delivering hospital-grade safety and care at home.

Centres of Excellence

Our Centres of Excellence remain the clinical heart of Apollo, where the most complex conditions meet the deepest expertise. Led by more than 13,000 clinicians across our network, our Centres reached patients from 150 nations in FY 2025-26, sustaining Apollo's place at the frontier of specialised care in India. Behind the scale lies a record few institutions anywhere can claim: over 4 million cancer patients treated, more than 250,000 cardiac surgeries, and 27,200+ solid organ transplants, the busiest such programme in Asia.

The depth of this experience is itself a form of patient safety. In transplantation, where outcomes improve with volume, Apollo performs five solid organ transplants every day across 27 centres in 15 states, and one-year kidney graft survival routinely touches 100% against a global benchmark of 96.52%. Each milestone is a life extended, and each procedure sharpens the capability that protects the next patient.

Apollo HOSPITALS — INSTITUTES OF TRANSPLANT

- **27,200+** Solid Organ Transplants
- Busiest Solid Organ Transplant Centre in Asia

Apollo HOSPITALS — HEART INSTITUTES

- **250,000+** Cardiac Surgeries
- **325,000+** Coronary Angioplasties

Apollo HOSPITALS — INSTITUTES OF ONCOLOGY

- **26** Comprehensive Cancer Centres
- **4 million+** Cancer Patients
- **3,900+** Bone Marrow Transplants

Apollo HOSPITALS — INSTITUTES OF NEUROSCIENCES

- **250,000** Neuro Surgeries

Apollo HOSPITALS — INSTITUTES OF ORTHOPAEDICS

- **508,000+** Ortho Surgeries

- **3,000,000** Health Checks in a Year

Apollo HOSPITALS — INSTITUTES OF ROBOTIC SURGERY

- **25,000** Robotic Surgeries in 22 Specialties
- Advanced surgical robots present in **20 Locations** across the Country

Apollo HOSPITALS — 24 Hours EMERGENCY

- Dial **1066**
- Pan India network
- Air Ambulance Service
- 5G-Enabled Road Ambulance

Ethical Marketing Commitment

Apollo Hospitals follows a robust framework of ethical marketing principles that guide all brand communications and patient engagement activities across the organisation.

Our marketing practices are built on the following core principles:



Patient First

Every communication is designed to educate, inform, and empower patients to make informed healthcare decisions. Patient welfare always takes precedence over commercial considerations.



Truthful and Evidence-Based Communication

All marketing claims are supported by credible clinical evidence and medical validation. Information disseminated through advertisements, digital platforms, social media, and public relations is expected to be accurate, balanced, and scientifically substantiated.



Transparency

Apollo avoids misleading claims, exaggerated treatment outcomes, and unsubstantiated promises. Risks, limitations, and eligibility criteria for treatments are clearly communicated wherever applicable.



Regulatory Compliance

Marketing activities are undertaken in compliance with applicable laws and regulations, including:

- Drugs and Magic Remedies (Objectionable Advertisements) Act
- Information Technology Act
- Applicable Advertising Standards issued by the Advertising Standards Council of India
- Data privacy and patient confidentiality requirements



Respect for Patient Privacy

Patient information is not used in marketing communications without obtaining appropriate informed consent and ensuring compliance with privacy regulations.



Responsible Digital Marketing

Digital campaigns are designed to provide authentic health information while avoiding misinformation, sensationalism, and fear-based messaging.

Access Through Innovation

The challenge in modern healthcare is precision: treating disease accurately without harming the patient in the process. Apollo's technology investments answer that challenge directly.

Initiative	Description and Patient Impact
ZAP-X Gyroscopic Radiosurgery	South Asia's first self-shielded system; non-invasive brain tumour treatment with same-day discharge and 95%+ long-term control at ten years
Apollo Proton Cancer Centre	South-East Asia's first proton centre; over 2,500 patients treated from 147 countries, sparing healthy tissue
NexCAR19 CAR-T Therapy	India's own cell therapy; delivered remission for patients who had exhausted conventional options
CyberKnife S7	Sub-millimetre, body-wide precision radiotherapy, paired with a training academy
Apollo Clinician Copilot	AI-assisted clinical decision support, built with Microsoft, placing intelligence at the bedside

Apollo Research and Innovations has conducted over 1,500 clinical studies with 150 trials ongoing, ensuring that what is pioneered is also proven. The result is a steady widening of what is possible: conditions once considered untreatable are becoming routine across the network.

Robotics

The growth of robotic surgery at Apollo has been exponential. Since the programme began, Apollo Hospitals has performed 25,389 robotic surgeries across 22 specialties, offering patients the benefits of greater precision, smaller incisions, less pain, and faster recovery. With robotic platforms now deployed across 19 locations, this capability has moved from a flagship offering to a network-wide standard.

The breadth of systems in use reflects the breadth of conditions Apollo treats: the Da Vinci system for minimally invasive urology, gynaecology, cardiac, gastrointestinal, bariatric, and paediatric surgery; NAVIO and Mako for orthopaedic and joint replacement procedures; Renaissance and ExcelsiusGPS for high-precision spine surgery; and the CorPath GRX system for vascular interventions.

The impact for patients is tangible: each robotic procedure widens access to safer, less invasive treatment, and the depth of experience built across 25,389 surgeries continues to sharpen the outcomes delivered to every new patient.

Prediabetes Risk Tool

Apollo's proprietary Prediabetes Risk Tool is a patented, AI-based system that estimates an individual's likelihood of developing prediabetes within the next three years. Now publicly available via the Apollo website, it is built on a machine-learning model trained on over 100,000 Indian patient records collected since 2013, making it specifically attuned to the Indian population.

The tool integrates key demographic, lifestyle, clinical, and metabolic factors, including age, height, weight, family and medical history, diet, and physical activity, to deliver a comprehensive, personalised risk assessment. Continuously refined through real-world use, it serves as a clinical decision-support tool, helping physicians identify early risk, guide further investigation, and enable timely preventive and lifestyle interventions.

Apollo Health and Lifestyle Limited

Through Apollo Health & Lifestyle Limited (AHLL), the Group extends tertiary-grade clinical capability into neighbourhood and community settings, narrowing India's access gap while delivering measurable improvements in patient safety, clinical outcomes, and care continuity.

Performance Highlights FY 2025-26

Apollo Dialysis

Patient Safety at Scale

Project Zero Sero Conversion, a Group-wide quality initiative, achieved a 27.4% reduction in blood-borne seroconversions (Hepatitis B and C, and HIV) across the dialysis network. Access was further expanded through two new SISH clinics and two Public-private Partnership centres, including a facility commissioned with the Greater Chennai Corporation.

Prioritisation

Sustained Leadership in Women's Health

Ranked National No. 1 in OBGYN in the All India Critical Care Hospital Ranking Survey 2025 (The Times of India) for the third consecutive year, reflecting consistent clinical performance in maternal and neonatal care.

Apollo Fertility

Six Years of Category Leadership

Ranked No. 1 in the Fertility segment in the All India Lifestyle Hospital and Clinic Survey 2025 for the sixth consecutive year, reinforcing both clinical credibility and patient trust.

Apollo Diagnostics

Globally Benchmarked Quality

The Global Reference Laboratory secured CAP accreditation, complemented by NABL accreditation across the Chennai, Hyderabad, and Kolkata facilities. The network recorded a 98% score in External Quality Assurance programmes (Biorad, AIIMS, CAP), introduced 85 new specialty and rare tests, and completed full digitalisation of records.

Apollo Spectra

Expanding Surgical Access

Recognised as *India's Leading Network of Multispecialty Short-Stay Surgical Hospitals 2025* and ranked across **32 categories** in the Outlook Best Hospitals Survey. A new Robotic Surgery Programme was commissioned across orthopaedics, general surgery, gynaecology, and urology.

AHLL's neighbourhood-led model advances three priorities central to the Group's sustainability agenda: **equitable access** to quality care, **measurable improvement** in clinical and safety outcomes, and **institutional governance** validated by international accreditation. Sustained category leadership across maternal care, fertility, diagnostics, and surgical services demonstrates the durability of Apollo's clinical standards as the network scales into underserved geographies.

Outcomes Summary

Indicator	FY 2026 Performance
Reduction in dialysis seroconversions	27.4%
OBGYN national ranking (TOI Survey)	No. 1, third consecutive year
Fertility segment ranking	No. 1, sixth consecutive year
External Quality Assurance score	98%
New specialty and rare tests introduced	85
New PPP and SISH dialysis centres commissioned	4

Apollo AyurVAID

Apollo AyurVAID Hospitals advances the Group's commitment to whole-person care by mainstreaming protocol-driven, evidence-based Ayurveda. Focused on chronic disease reversal, rehabilitation, and sustained well-being, AyurVAID extends Apollo's clinical and governance standards into an integrative care continuum that broadens patient choice and improves long-term health outcomes.

Patient Trust and Reach

AyurVAID has served over **400,000 patients to date** and recorded a **Patient Delight Score of 98.6%,** reflecting consistent quality of experience across the network. Care delivery is anchored in structured assessments, individualised Personal Health Plans (PHPs), and end-to-end clinical outcome monitoring through in-process control charts.

Quality Governance and Accreditation

AyurVAID remains the first NABH-accredited Ayurveda hospital in India and the first to receive NABH accreditation for Ayurveda para-surgery. The network also holds QAI accreditation for its integrative Transition Care Centres and is the first and only Ayurveda institution to receive the **QCI D.L. Shah National Quality Award.** The organisation contributed to the development of **Standard Treatment Guidelines for 289 diseases** under the Ministry of Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy (AYUSH), Government of India.

AyurVAID as a model has been quietly expanding with four new centres commissioned during the year, materially expanding access:

- **A Precision Ayurveda centre at Parsik Hills, Navi Mumbai**
- **A 35-bedded flagship facility at Greams Road, Chennai, focused on complex non-communicable diseases and post-acute rehabilitation**
- **An Integrative Rehabilitation Centre at Somajiguda, Hyderabad**
- **A clinic and pharmacy at Almora, Uttarakhand, extending the Kalmatia hospital's reach**

Clinical Scope and Digital Enablement

AyurVAID delivers preventive, curative, rehabilitative, and promotive care across musculoskeletal and neurological conditions, gastrointestinal disorders, oncology support, metabolic disease, dermatology, respiratory health, gynaecology, and mental health. Clinical outcomes are tracked using disease-specific biomarkers such as HbA1c and Serum Creatinine, alongside internationally validated instruments including the Karnofsky Performance Status and Health-Related Quality of Life (HR-QoL) scales, ensuring that every care pathway is measurable, comparable, and continuously refined.

Extending this clinical rigour into the digital domain, AyurVAID has strengthened patient engagement and access through **AyurVAID Mitra, an AI-powered engagement platform,** and AyurVAID D-RISK, a machine-learning-based digital therapeutic for the early detection of undiagnosed diabetes. Together, these tools translate protocol-driven care into proactive, technology-enabled outreach, reflected in over **150,000 monthly website visits, 83,000+ YouTube subscribers, and 32,000+ LinkedIn followers** across the network's digital channels.

Ayurvedic Product Safety

The 'Tested Safe' range of classical Ayurveda medicines was introduced, offering **QR-code-accessible quality reports** covering heavy metals, aflatoxins, and microbial load, setting a new benchmark for transparency in Ayurveda pharmaceuticals.

Strategic Collaborations

Memoranda of Understanding were signed with Vivekananda Yoga University (VaYU) (United States) for academic and research collaboration, and with the Dementia India Alliance for integrative dementia care. The network continues to collaborate with Monash University (Australia), University College Cork (Ireland), and Indian industry bodies including CII, FICCI, and ASSOCHAM.

Industry Advocacy & Knowledge Sharing

Apollo convenes the healthcare community to raise standards for everyone. The 12th International Patient Safety Conference and the International Conference on Transforming Healthcare with IT, held at Bharat Mandapam, New Delhi,

brought clinicians and technologists together to advance safety and innovation across the sector. Leadership, for Apollo, means lifting the standard of care for the nation, not only for its own network.

From the most complex transplant to a screening in a remote village, Apollo's purpose holds constant: to bring the best of healthcare within reach of every patient who needs it. This year, that purpose reached patients in hospitals, in their homes, on their phones, and increasingly before disease took hold. Care was made safer through connected technology, more precise through innovation, and more accessible through partnership. Measured not in facilities but in lives touched, the journey continues toward a single horizon, the mission to touch a billion lives.

Expanding Reach, Revitalising Access

Apollo continues to extend advanced care into communities that have historically lacked it, with a deliberate focus on Tier-II and Tier-III India. New hospitals commissioned in FY 2025-26 bring tertiary capability closer to home for thousands of families, while the Apollo Genomics Institute expanded from a single Delhi centre to fourteen centres nationwide, widening access to precision medicine. Access is not only about reaching more patients, but reaching them closer to where they live.

Partnerships for Access: Academic and Global Collaborations

Apollo treats the strengthening of health systems, at home and abroad, as part of its mission. In a landmark partnership with the Ministry of Health, Guyana, Apollo delivered over 300 online courses to a first cohort of 165 nurses and doctors, supporting the commissioning of six new hospitals. The AI Revolution in Healthcare Summit in Dubai reached 1,320 delegates from 23 countries and a digital audience of 7.83 million across 110 countries.

Within India, Apollo offers 696 DNB and FNB seats and trained 1,433 trainees across 31 hospitals, while the Apollo Knowledge Series delivered 610 sessions to over 31,000 doctors. By training the wider healthcare community, Apollo multiplies its impact far beyond its own patients.

Apollo Knowledge Series

The Apollo Knowledge Series (AKS) guides healthcare professionals toward excellence in an era of rapid clinical advancement. By offering clinicians evidence-based insights, innovative treatment approaches, and expert knowledge drawn from Apollo's extensive clinical network, AKS strengthens competence and confidence across an ever-evolving healthcare landscape.

AKS is anchored in the belief that knowledge is the most powerful catalyst for better care. Through expertly curated educational experiences, it empowers clinicians to drive paradigm shifts in treatment, ultimately leading to superior patient outcomes.

Format	Focus
MediNew (Illuminating the Future of Medicine)	Distils contemporary medical and surgical advancements into crisp, insightful sessions, presenting the newest breakthroughs, emerging technologies, and evolving clinical approaches to keep practitioners aligned with global progress.
MediVance (Deep Expertise for Super Specialty Excellence)	Offers immersive, deep-dive explorations into super-specialty domains, featuring authoritative discussions on the innovations shaping the frontiers of medical science, for clinicians seeking depth and precision.

AKS in FY 2025-26: A Landmark Year

The year marked a defining chapter for AKS, combining scale with structure:

Metric	FY 2026
AKS sessions conducted	610
Doctors engaged across India	31,000+
MediNew sessions	270
MediVance sessions	340
Apollo Hospitals contributing super-specialists	22+
Clinical disciplines covered	15+

In 2025, AKS also introduced a Codification Framework, a uniform, trackable coding system for all CME conferences across Apollo Hospitals. By standardising workflows, improving tracking, and enhancing visibility, the framework elevates academic rigour and ensures consistency across every AKS initiative.

The impact of AKS extends beyond learning: participants consistently translate insights into improved patient outcomes, evidenced by a growing body of case studies published in reputed medical journals worldwide.

Academic Collaborations

We have continued expanding our partnerships in Academia, government and the private sector to expand our reach and scope to deliver healthcare outcomes. We drive innovation and the discovery of speciality solutions alongside our healthcare peers across the world. **Here are some insights into the partnerships that have been secured in the fiscal year:**

Initiative	Description
Australia's Monash University and Apollo Hospitals to train AI algorithms on life threatening diseases	Australia's Monash University and Apollo Hospitals have tied up to train AI algorithms to identify and diagnose diseases such as cancer, heart disease and diabetes. Under the partnership, Monash University will gain access to Apollo's extensive, de-identified patient data from over 200 million patient interactions.
The Apollo University (TAU) and University of Leicester launched the Centre for Digital Health and Precision Medicine (CDHPM)	In 2025, TAU and the University of Leicester moved beyond the initial programme partnership to jointly launch the Centre for Digital Health and Precision Medicine (CDHPM) at Chittoor, inaugurated by Dr. Prathap C. Reddy. The Centre integrates AI-driven analytics, digital health, and precision medicine, is backed by 45 million+ patient records and global research partnerships, and focuses on cardiovascular diseases, acute and emergency medicine, and multimorbidity, positioning Chittoor and Andhra Pradesh as emerging hubs for digital health research.
Apollo Institute of Medical Sciences and Research (AIMSR), Hyderabad signs MoU with Phan Chau Trinh University, Vietnam	AIMSR, Hyderabad, and Phan Chau Trinh University (PCTU), Da Nang, Vietnam, entered a strategic partnership through a Memorandum of Understanding aimed at enhancing academic, clinical, and research collaboration, marking a new era of international engagement for AIMSR.
Apollo MedSkills partners with Sumeet SSG to train Emergency Medical Technicians	Apollo MedSkills, the skilling and training arm of the Apollo Hospitals Group, partnered with Sumeet SSG to train over 4,000 Emergency Medical Technicians (EMTs), who will be deployed across 108 ambulances in Maharashtra, significantly enhancing the state's emergency healthcare response system.
Apollo Hospitals strengthens Karnataka's transplant ecosystem with a dedicated Heart and Lung Unit	Apollo Hospitals launched a dedicated Heart & Lung Transplantation and Mechanical Circulatory Support (MCS) Unit at Seshadripuram in December of 2025, strengthening Karnataka's transplant ecosystem and expanding access to advanced cardiac and pulmonary transplant care.

Apollo Clinical Excellence Awards 2025

The Apollo Clinical Excellence Awards honour consultants who have achieved path-breaking clinical, academic, and research success. In 2025, nominations were invited from consultants across all locations and judged by an esteemed panel across seven categories, celebrating the people behind Apollo's standards of care.

Lifetime Achievement Award

Dr. Rajesh Malhotra, Senior Consultant, Orthopaedics, Indraprastha Apollo Hospitals, New Delhi

Young Clinician

Dr. Debmalya Bhattacharyya, Consultant, Haematology and Oncology, Apollo Multispeciality Hospitals, Kolkata

Dr. Venkat K, Consultant, Neurosurgery, Apollo Speciality Hospitals, Nellore

Best Clinical Administrator of the Year

Dr. Ajaya Kumar, DMS, Critical Care, Emergency and Internal Medicine, Apollo Hospitals, Lucknow

Young Academician/ Researcher

Dr. Dhanya Dharmapalan, Senior Consultant, Paediatrics, Apollo Hospitals, Navi Mumbai

Dr. Adhithyan R, Consultant, Neuroradiology, Apollo Proton Cancer Centre, Chennai

Distinguished Clinician

Dr. Jyoti Wadhwa, Senior Consultant, Oncology, Apollo Athenaa, Defence Colony, New Delhi

Dr. Rajashekhar KT, Senior Consultant, Orthopaedics and Joint Replacement Surgery, Apollo Hospitals, BG Road, Bengaluru

Distinguished Academician/ Researcher

Dr. Anjan Bhattacharya, Senior Consultant, Paediatrics, Apollo Multispeciality Hospitals, Kolkata

Dr. Suchitra R, Senior Consultant, PICU, Apollo Children's Hospitals, Chennai

Clinical Trailblazer Award

Dr. Rajesh Malhotra, Senior Consultant, Orthopaedics, Indraprastha Apollo Hospitals, New Delhi

Dr. Dhanunjaya Rao Ginjupally, Senior Consultant, Neurosurgery, Apollo Hospitals, Jubilee Hills, Hyderabad

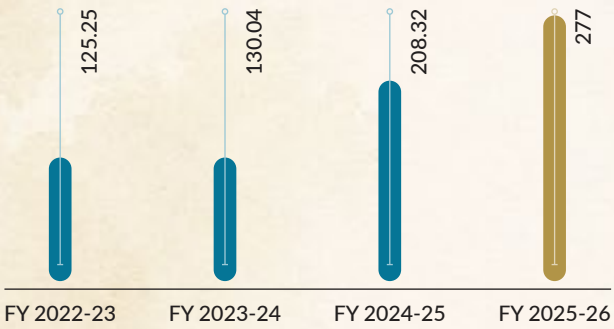
The recognition reflects a simple principle: clinical excellence is sustained by the clinicians who deliver it, and celebrating their achievement reinforces the culture of quality that benefits every patient.

Building Healthier Communities

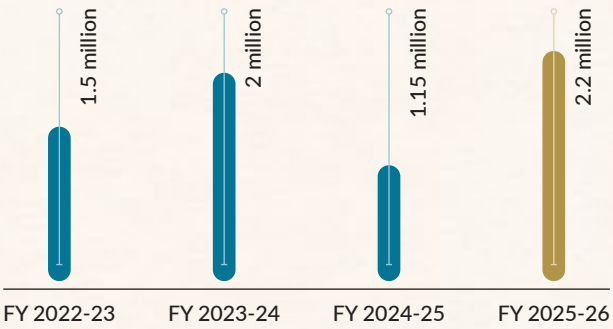
At Apollo, our commitment to healthcare extends beyond the hospital setting to the broader communities we serve. We recognise that health is shaped by many interconnected factors such as access to clean water, maternal care, opportunities for dignified livelihoods, and support for the elderly. Understanding these interdependencies, our community development initiatives are designed to address the wider determinants of well being and to create a supportive environment for all.

Our community development work is anchored in a clear vision: an India that thrives with health of body, mind, and spirit. We pursue this through a mission to address the full spectrum of factors that shape individual and community well-being, across the lifecycle, from antenatal care through to geriatric support.

Spend (in ₹ million)



Lives Impacted



We channel our CSR investments through two flagship programmes, each with a distinct geography, population focus, and delivery model:

Apollo Foundation - Total Health (established 2013):

Operates in rural and tribal India across Andhra Pradesh, Telangana, Tripura, Meghalaya, Assam, and Arunachal Pradesh. Delivers integrated community healthcare spanning preventive and curative care, nutrition, mental well-being, water and sanitation, livelihood development, and education.

Billion Hearts Beating Foundation (BHB) (established 2010):

Focuses on healthcare access for underserved populations in urban and peri-urban India, particularly the elderly in institutional care, communities requiring emergency response skills, and marginalised groups including LGBTQ+ individuals.

Together, our projects are organised under three strategic pillars

Pillar 1 Health & Hygiene

Pillar 2 Community Engagement

Pillar 3 Alternate Livelihoods

Apollo Foundation FY 2025-26 Highlights

3,478,948
Litres of Safe Drinking Water were Provided

250,092
People were Provided with Health Awareness

102,509
Nutritious Meals Served for the Elderly

286,654
Jute Bags were Produced and Sold

6,425
Lab Investigations were Done for the People

1,940
Kilograms of Leafy Greens and Vegetables were Grown

Alignment with National Policy and Global Frameworks

Our CSR programmes are designed to converge with India's national development architecture. We actively align our interventions with Ayushman Bharat (healthcare access for economically weaker households), Swachh Bharat Mission (sanitation and hygiene behavior change), Skill India Mission (vocational training and employment), the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS), the National Programme for Healthcare of the Elderly, TB Mukt Bharat Abhiyan, and Khelo India (sports and community engagement).

At the global level, our work contributes to the Universal Health Coverage agenda and maps directly to the United Nations Sustainable Development Goals. **The table below provides project-level SDG mapping:**

SDG	How We Address It
No Poverty	Livelihood creation for BPL households; income generation for women and tribal communities
Zero Hunger	Daily nutrition for destitute elderly; TB patient ration support; community kitchen gardens
Good Health & Well-being	Primary healthcare delivery, NCD screening, maternal care, cancer and eye screening, telemedicine, BLS training, elderly medicine access
Quality Education	Early childhood development, school upgrades, hygiene education, digital classrooms
Gender Equality	Women's employment, skill training, financial independence; inclusive healthcare for women
Clean & Water Sanitation	Community drinking water plants, school WASH programmes, hygiene behaviour change
Decent Work & Economic Growth	Vocational training with placement outcomes; self-employment pathways
Reduced Inequalities	Healthcare for tribal communities, LGBTQ+ individuals, abandoned elderly, forest frontline workers

Flagship Programme I: Total Health

Total Health was initiated in 2013 in Aragonda, Chittoor District, Andhra Pradesh, and has since expanded to include Amarabad in Telangana and, during FY 2025-26, new geographies in Tripura, Meghalaya, Assam, and Arunachal Pradesh. The programme operates through a continuous cycle of screening, early diagnosis, treatment, education, and empowerment. Its delivery infrastructure includes satellite clinics, mobile medical units, community health workers, telemedicine links to Apollo Hospitals, and village-level camps.

Improving Healthcare Accessibility through Outreach Infrastructure

This section presents a consolidated overview of different initiatives carried out under Total Health in FY 2025-26 to collectively strengthen last-mile healthcare delivery. These initiatives span telemedicine services, Mobile Medical Units (MMUs), satellite clinics and Forest Digital Clinics, each playing a complementary role in improving access to preventive, promotive and primary healthcare.

Mobile Medical Units

In November 2025, six MMUs were deployed across underserved villages in collaboration with TTAADC and Altius. Services include general physician consultations, point-of-care diagnostics, essential medicines, NCD screening, and specialised camps for eye care, ear health, breast cancer, cardiopulmonary wellness, and women's health. The initiative reached 35,300+ beneficiaries served through 440+ medical camps. The target population included tribal women, children, aged, and pregnant women in a region where anaemia, malnutrition, hypertension, and near-zero cancer screening rates underscore the need for accessible community healthcare.

Telemedicine

Telemedicine services now connect the forest villages of Amarabad, enabling Chenchu tribal communities to access specialised teleconsultations with Apollo Hospitals doctors. In FY 2025-26, the NCD-PERT Project was launched as a fully digital rollout, expanding to 7,000 households with integrated diagnostics.

Forest Community Helath Programmes

> In FY 2025-26, Apollo Hospitals partnered with the Apollo Institute of Medical Sciences and Research (AIMSR) to provide antenatal and postnatal care across Total Health touchpoints, **strengthening maternal and child healthcare access in underserved communities.**

A newly renovated, digitally enabled Forest Digital Clinic has been established in the forested regions of Amarabad to provide the Chenchu tribal communities with free medical consultations, medicines, and treatment. In addition, nutritional support for TB patients in Amarabad has been formally sanctioned by the District TB Officer.

In partnership with WWF India and Blue Star, **Apollo Hospitals extended critical healthcare support to frontline forest personnel and rural communities.** Life saving care was provided to ***11 forest staff injured in human wildlife conflict,*** while preventive health camps brought essential screenings and medicines to remote forest regions. Additionally, large-scale community outreach in Assam enabled ***1,064 women to access vital health checks and medical advice,*** strengthening preventive care and awareness at the grassroots level.

Enhancing Hygiene Education

In collaboration with Reckitt, the Dettol Banega Swasth India (DBSI) Programme has been advanced to focus on early hygiene education, the programme operates in schools across Hyderabad, Chittoor, and Nagarkurnool. Interventions include Soap Banks, Hygiene Play Parks, puppet shows, mural painting, formation of Hygiene Clubs, installation of Hygiene Corners, interactive digital sessions, and special day celebrations.

> **The programme reached 205,649 students and teachers across three districts (Hyderabad, Chittoor, and Nagarkurnool)**

Alternative Livelihoods: Building Resilience Through Opportunity

This vertical of Total Health strengthens socio economic resilience by equipping communities with skills, market linkages, and participatory frameworks that create sustainable livelihoods. ***Since inception, more than 7,500 individuals have benefited from these initiatives.***

At the **Apparel and Jute Skilling Centre (AVT),** women in Aragonda and Amarabad have transformed training into tangible opportunity, ***producing 2.8+ Lac jute bags and 95,000 clothing pieces, generating revenues of ₹2.74 Crores with potential to scale further.*** The model follows a clear pathway of procurement, employability, and empowerment, and new centres in Chevella and Amarabad are expanding this impact.

Meanwhile, the **Blue Star Air Conditioning & Refrigeration (RAC) Course** offers structured vocational training that blends technical expertise with computer literacy and personality development. ***In FY 2025-26 alone, six batches graduated, with over 60 students securing placements at salaries up to ₹18,000 per month,*** opening doors to dignified employment and long term stability.

Education and Child Development: Investing in the Next Generation

Our education initiatives are designed to strengthen early childhood development and create holistic learning environments that nurture children, caregivers, and communities alike.

At Pithapuram, the **Model Anganwadi Project** is redefining early learning. One flagship centre is under construction, while 108 existing centres are being upgraded to international standards. These spaces integrate digital curricula, modern teaching methods, and nature inspired design to make learning immersive and engaging. ***The initiative already reaches over 15,000 caregivers and 30,000 children under six, including 4,077 mothers with infants, ultimately touching the lives of nearly 94,000 people across the community.*** By combining education with wellness, the project is laying a strong foundation for lifelong growth.

In Meghalaya, the **Rural Integrated Community Development (RICD) Project** adopts a community centric 'model village' approach, weaving together education, healthcare, nutrition, WASH practices, and awareness. ***The programme has benefited 700 students while supporting 400 households.*** With a potential reach of 40,000 people, this initiative demonstrates how integrated development can transform both learning and living conditions.

Flagship Programme II: Billion Hearts Beating

Established in 2010, projects under Billion Hearts Beating (BHB) address healthcare needs among populations that face distinct systemic barriers; whether due to age, emergency response gaps, or social stigma in traditional healthcare settings. ***The Foundation operates across 15 states through three main initiatives*** that together strengthen resilience, promote dignity, and expand access to healthcare for diverse groups across India.

An impact assessment of the BHB initiatives has demonstrated that the programme's efficacy remains strong and relevant, reinforcing its value as a sustained community health intervention.

Project Elderly Well-being

The Elderly Well-being initiative continued to strengthen access to preventive and primary healthcare services for senior citizens residing in care homes across India. ***The programme was implemented across 15 states and 313 care homes reaching a total of 132, 589 elderly/senior citizen beneficiaries*** to deliver free prescription medicines, regular health camps, and health awareness interventions to elderly beneficiaries.

Project Elderly Well-being demonstrated tangible impact across communities, reflecting its commitment to accessible healthcare and social engagement.

The initiative showcased strong continuity of care, with 100% beneficiaries from states like Andhra Pradesh and Tamil Nadu reporting regular monthly access to medicines. Beneficiaries also reported improvements in their overall health condition due to regular medicine supply and preventive healthcare support through health camps.



Medicine Access

Over 107,797 medicine requests were supplied, ensuring timely support for those in need.



Health Awareness

More than ***8,961 individuals*** benefited from awareness sessions, including focused programmes on medication use and preventive health.



Senior Engagement

The Weekend Warrior Volunteer Programme brought joy and connection to ***2,018 seniors,*** reinforcing Apollo's role in community well-being.

Basic Life Support Training

This project focused on ***strengthening community-level emergency preparedness by equipping participants with essential life-saving skills.*** The programme engaged students, frontline workers, healthcare professionals, uniformed personnel, and members of the public across multiple states.

The training modules covered CPR techniques, AED usage, choking management, first aid response, and emergency response protocols. Feedback from participants indicated strong relevance and practical applicability of the programme in both professional and day-to-day settings. Beneficiaries also expressed high confidence in applying the skills acquired through the programme.

A total of ***20,661 beneficiaries*** were trained in Basic Life Support (BLS), CPR, and First Aid. This effort builds on a sustained commitment that has already reached ***78,757+ individuals across 150+ institutions pan India.***

Project Community Care Initiative

This project was implemented to improve access to healthcare services among underserved and vulnerable communities through Free Apollo Clinics, OPD consultations, nutritional support, and community health camps across ***14 states. The initiative catered to urban slum communities, rural populations, pilgrims and other marginalised groups*** with limited access to quality health services. Independent impact assessment revealed that the programme delivered strong operational consistency, with respondents reporting reliable delivery of clinic services over extended periods.

The initiative reached ***1,019,159 individuals,*** delivering meaningful healthcare support across diverse communities. Preventive health checks benefited ***816,328 people,*** strengthening early detection and wellness. Free clinics across eight locations treated ***186,569 individuals,*** while ***11,372 beneficiaries*** received free medicines and nutritional support. In addition, ***4,890 participants*** engaged in awareness drives on cancer, hygiene, and nutrition, reinforcing the importance of preventive care and healthy living.

By delivering preventive and primary healthcare services closer to communities, the initiative continued to strengthen healthcare accessibility, improve continuity of care, and support underserved population across India, reinforcing Apollo's commitment to delivering compassionate care.

Together, these three pillars of BHB embody Apollo's vision of healthcare that is accessible, inclusive, and deeply rooted in community well being.

Awards and Recognition

In FY 2025-26, Apollo Foundation -Total Health was acknowledged by leading institutions for its contributions to community health, conservation, and education.

Apollo Foundation Team receiving multiple accolades by IHW Council





At the 9th CSR Health Impact Awards by India Health & Wellness (IHW Council), the Foundation received distinctions for Best Nutrition and Preventive Health Projects for Rural Areas

Apollo Foundation's conservation efforts were also recognised through the Wild Warrior Award on International Tiger Day, conferred by the Principal Chief Conservator of Forests, Telangana, under the category Best NGO

Beyond awards, the Foundation earned multiple certificates of appreciation that reflect the breadth of its impact.

- The Ministry of Health and Family Welfare, Government of India, formally recognised Apollo Foundation as a Nikshay Mitra under the Pradhan Mantri TB Mukt Bharat Abhiyan for its work toward a TB Free India
- The Principal Chief Conservator of Forests, Telangana, commended its dedicated service in tiger conservation and wildlife protection
- The foundation also received a certificate of appreciation from SV Aravind Eye Hospital, Tirupati, for conducting 16 eye health camps benefiting more than 550 patients
- Additionally, the Department of Education and Literacy, Government of Telangana, through its Mandal Education Officers, issued appreciation letters for comprehensive hygiene sessions conducted in schools across Pentlavalli, Bijanapally, Balmoor, Achampet, and Charakonda under the Dettol Banega Swasth India (DBSI) programme

Together, these awards and recognitions highlight Apollo Foundation's integrated approach to CSR, advancing healthcare, promoting education, supporting conservation, and strengthening community well-being through initiatives that deliver measurable and lasting impact.

Responsible Supply Chains

The Backbone of Care

A hospital does not function in isolation. Every surgery depends on sterile instruments arriving on time. Every patient room requires linen, consumables, and functioning equipment. Our supply chain, spanning medical devices, pharmaceuticals, logistics, technology, and facility services, is the invisible backbone behind every procedure we perform. Managing it responsibly is not optional; it directly affects patient safety, environmental impact, and the working conditions of thousands beyond our payroll.

Our supply chain is therefore a direct extension of our commitment to quality, safety, and responsible business practice. By embedding sustainability and human rights requirements into how we source, we ensure that responsibility flows through every transaction, not just at Apollo's doors.

How We Source

In FY 2025-26, Apollo sourced 100% of input materials from within India, strengthening domestic supply chains and reducing the environmental footprint of long-distance logistics. By keeping procurement local, we not only support national industry but also contribute to supply chain resilience and sustainability.

Of our total procurement, spanning input materials, capital expenditure, services, and operating expenses, 8% came directly from MSMEs and small producers, down from 10.77% in FY 2024-25. This focus on inclusive growth empowers local communities, creates opportunities for small enterprises, and drives innovation and employment at the grassroots level.

Our supply network spans medical equipment and pharmaceuticals sourced directly from Original equipment manufacturers (OEMs) with established offices in India, to facility services, food and beverage, housekeeping, and security managed through outsourced vendors. We do not purchase through trading houses; equipment and devices are procured directly from manufacturers, ensuring transparency, quality control, and direct accountability.

Sourcing Metric	FY 2025-26	FY 2024-25
% of inputs from within India	100%	100%
% of inputs from MSME/small producers	8%	10.77%

The reduction in MSME procurement reflects evolving market conditions and supplier landscape changes. However, our commitment to inclusive growth remains steadfast, and we continue to actively source from small and local producers where quality and compliance standards are met.

The Supplier Code of Conduct

Our supplier relationships are contractually grounded in a mandatory Supplier Code of Conduct, integrated into every vendor evaluation, onboarding, and annual review process. The Code is not optional guidance; it is a binding prerequisite for all key business partners, including suppliers, service providers, and outsourced personnel.

The Code establishes clear expectations across four critical pillars:

Pillar 1

Human Rights and Labour Standards: Fair labour practices, non-discrimination, freedom of association, safe working conditions, and the prohibition of forced and child labour.

Pillar 2

Environmental Stewardship: Sustainable resource management, emissions control, energy efficiency, and waste management in line with applicable environmental regulations.

Pillar 3

Ethical Business Conduct: Anti-corruption, anti-bribery, data protection, cybersecurity, and confidentiality safeguards.

Pillar 4

Operational Safety: Occupational health and safety compliance, statutory adherence, and adherence to Indian law.

These requirements reflect our alignment with applicable Indian law and international principles of responsible business practice.

Bringing Vendors Onboard

Our onboarding process balances thoroughness with efficiency. We collect essential statutory documentation, PAN, GST registration, Incorporation Certificate, and drug licences where applicable, alongside the signed Supplier Code of Conduct.

All documentation now flows through our Newgen portal, where vendors self-register, upload documents, and submit an electronically signed Code of Conduct.

Digitising this process has achieved two outcomes: First, it has shortened onboarding timelines and reduced friction. Second, it has created a complete, auditable record for every supplier, useful not only for our compliance checks, but also for external auditors and rating agencies seeking evidence of our screening rigour.

Once onboarded, we train all our vendors. These trainings are facilitated during onboarding and offered on a rotational basis every three years. **Topics are curated around four core areas:**

Apollo's operational policies and expectations	**Our Supplier Code of Conduct which covers topics such as Human Rights, Labour, Health, Safety, Environmental Sustainability, Quality assurance for goods and services, and Business Integrity, among others**	**Data security protocols and patient confidentiality**	**Sustainability practices and environmental standards**

The intent is not one-way compliance enforcement. It is to build a shared understanding of why these standards exist, so adherence comes from alignment rather than policing.

How We Evaluate and Monitor

Vendor selection is multi-dimensional. We assess capabilities and service quality, financial stability, regulatory adherence including labour rights, governance structures, statutory compliance, market reputation, and client track record. Environmental standards as outlined in our Supplier Code are a standing selection criterion, not a bonus.

We monitor suppliers through a vendor rating system that integrates ESG factors alongside traditional performance metrics such as delivery, quality, and cost. Regular audits, including on-site visits, form a core part of our compliance and risk mitigation strategy. When non-compliance is identified, corrective action is initiated immediately.

For our outsourced workforce partners, compliance monitoring is especially rigorous. Vendors are required to submit monthly reports with proof that statutory dues such as Provident Fund (PF), Employee State Insurance (ESI), and other statutory contributions have been deducted and deposited for their employees. Any deviations are flagged immediately, corrective actions are documented, and repeated non-compliance results in punitive fines or contract termination.

Because outsourced workers operate inside our hospitals every day and interact directly with patients and visitors, their welfare is integral to our responsibility. Ensuring compliance safeguards not only their rights but also the integrity of Apollo's workplace environment.

Engaging Suppliers on Sustainability

Our Central Procurement function conducts structured awareness programmes with key value chain partners. These sessions focus on **ethical business conduct, patient safety standards, data privacy and confidentiality, occupational health and safety practices, and strict compliance with all applicable statutory and regulatory requirements.**

To ensure accountability, these principles are formally embedded into our vendor evaluation, onboarding, and annual review processes. This integration strengthens partner alignment with Apollo's standards and reinforces our commitment to responsible and compliant operations across the value chain.

We engage with suppliers on a half-yearly basis through a combination of annual meetings, face-to-face correspondence, and digital interactions. The agenda covers open issue resolution, performance assessment, recognition, and discussions specifically on sustainability parameters. Over time, these conversations are shifting from information sharing to accountability. In earlier years, discussions on sustainability were largely educational. This transition is gradual, especially for smaller vendors, but the direction is clear: **sustainability performance is becoming a measurable and integral part of our value chain partnerships.**

Grievance Mechanisms for Suppliers

We maintain a dedicated grievance redressal mechanism for suppliers. Any individual, worker, employee, or representative can submit grievances related to intellectual property concerns, human rights violations, third-party representation issues, insider trading, corruption, bribery, or kickbacks. Submissions can be made individually or collectively.

We also require that suppliers maintain their own internal reporting channels for such issues within their operations.

The intent is to create accountability not just at the Apollo-supplier interface, but within the supplier's own organisation. A transparent supply chain requires transparency at every node, not just the ones we directly control.

Looking Ahead

As Apollo continues to grow, responsible supply chain management will remain foundational to our operations. **Our priorities for the coming years are clear:**

Expand partnerships with local and small enterprises, particularly in underserved regions, to deepen inclusive growth and build resilience into our supply base.

Scale adoption of sustainable alternatives across all procurement categories, moving beyond packaging to energy-efficient equipment, renewable-sourced materials, and circular-economy products.

Deepen accountability on ESG performance across vendors through strengthened monitoring, transparent reporting, and continuous improvement partnerships.

Integrate supply chain sustainability into our long-term climate and environmental goals ensuring Scope 3 emissions and environmental impacts are managed in concert with our suppliers.

By aligning supply chain practices with Apollo's broader ESG commitments, we aim to build a value chain that not only supports operational excellence but also contributes positively to patients, employees, communities, and the environment.

Environmental Stewardship @ Apollo

At Apollo Hospitals, environmental stewardship is integral to clinical resilience, operational efficiency, and long-term value creation. As climate change increasingly affects public health, resource availability, and healthcare delivery, we are strengthening our ability to provide high-quality care while reducing our environmental footprint. Through the Apollo Sustainability Action Plan, we continue to advance renewable energy adoption, energy efficiency, water circularity, waste reduction, digital ESG data systems, and climate-resilient infrastructure across our network. In FY 2025-26, our progress reflected measurable gains in renewable energy use, emissions intensity, water recycling, waste management, and telemedicine-enabled access, reinforcing our commitment to building a more sustainable, efficient, and future-ready healthcare system.

FY 2025-26 Highlights

- **25% of total energy consumption now** from renewable sources up from 21.6% in FY 2024-25
- **Solar energy consumption has increased 71.6% YoY**, complementing 177,375.32 GJ of wind energy procured through long-term PPAs
- **Scope 3 disclosure expanded from 3 to 5 categories**, now including purchased and capital goods
- **Sharp reduction in air emissions**: NO_x −85.1%, PM −64.2%, SO_x −6.5% YoY
- **Recycled water share more than doubled** to 32.15% of total withdrawal, supported by ZLD operations at six sites
- **100% of biomedical waste segregated at source** and treated through CPCB-authorised channels, with reported plastic waste at zero MT
- **16.5 million+ teleconsultations** delivered cumulatively, avoiding patient travel, expanding rural specialist access, and lowering Scope 3 emissions
- Apollo **Madurai recognised** as an **'Energy Efficient Unit'** at the 26th CII National Award for Excellence in Energy Management 2025

As one of Asia's largest integrated healthcare providers, Apollo Hospitals operates at the critical intersection of human and planetary health. The climate crisis is increasingly a public health crisis. Rising temperatures are contributing to heat-related illnesses, shifting disease patterns are expanding the geographic reach of infectious diseases, and deteriorating air quality is increasing the incidence of respiratory and cardiovascular conditions. For a healthcare organisation, climate action is therefore not a peripheral responsibility but an integral part of delivering quality care.

Guided by our commitment to 'heal without harm,' we recognise that environmental stewardship is inseparable from clinical excellence and long-term health outcomes. This philosophy shapes our approach to environmental sustainability and drives action across four key priorities:

- Reducing carbon emissions and overall carbon intensity across operations.
- Improving resource efficiency through the adoption of low-carbon technologies and operational enhancements.
- Conserving water by increasing recycling and reuse, expanding rainwater harvesting, and improving equipment efficiency.
- Increasing the use of renewable energy across our facilities.

In FY 2025-26, we continued to advance these priorities through the Apollo Sustainability Action Plan (ASAP), our Group-wide framework for embedding climate resilience, resource efficiency, and circularity across facilities, services, and supply chain operations. Our approach extends beyond regulatory compliance, with a focus on continuously improving environmental performance and operational resilience.

All major hospitals continue to operate under ISO 14001:2015-certified Environmental Management Systems, supported by periodic surveillance audits that help ensure robust environmental governance and drive continual improvement in sustainability performance.

Climate Governance

At Apollo Hospitals, social responsibility and sustainability sit at the heart of our governance framework. Sustainability targets and outcomes shape decision-making, operations and stakeholder engagement, with our CSR Policy and Environmental Policy guiding day-to-day execution against our stated targets and outcomes. This integration ensures that climate and environmental considerations are not treated as a parallel agenda, but as a core dimension of how we run a clinically excellent, patient-centred hospital network.

Sustainability and climate change are governed at the Board level through a dedicated CSRS Committee, which is responsible for shaping Apollo's strategy, updating policies and objectives related to CSR and sustainability, and guiding and monitoring their implementation across the organisation. Operational responsibility flows down to a corporate team headed by the Group Vice President, Sustainability and Corporate Affairs, who in turn channels hospital-level responsibilities to the respective hospital CEOs. These hospital CEOs act as sustainability champions and report back to the Group VP periodically, ensuring that climate and environmental action is owned and executed at the unit level.

Digital ESG Data Management Infrastructure

Credible environmental disclosure begins with credible data. For a multi-facility hospital network operating across diverse geographies, building vintages, climatic zones and patient-volume profiles, capturing accurate, timely and auditable environmental data is itself an operational discipline, we have invested in deliberately. Apollo's environmental performance is underpinned by a layered digital data architecture that combines real-time site-level instrumentation along with a centralised enterprise ESG data-management system that consolidates information across the network for disclosure, assurance and decision-making.

At the site level, every major Apollo hospital operates an Energy Management System (EMS) and Building Management System (BMS) that monitor real-time energy usage across the building. Electrical panels are fitted with RS-485-enabled energy meters that feed continuous consumption data into the EMS, allowing site engineering teams to track usage by feeder, identify anomalies, and act on energy-saving opportunities as they emerge. The BMS provides centralised control of chillers, AHUs and HVAC equipment, and integrates plant managers that automatically cut off chillers under no-load conditions, while medical gas pipeline systems (MGPS) are also monitored through the BMS to flag unexpected usage.

A defining feature of our digital infrastructure is the DeJoule platform, deployed under Project Vīrya in partnership with Smart Joules. DeJoule moves Apollo from manual energy-management to a fully digitalised, machine-learning-driven optimisation environment. The platform delivers high-side optimisation of chillers, chilled-water pumps, condenser pumps, cooling towers and heat pumps; and low-side optimisation through VFDs, two-way valves with actuators, thermostats, temperature sensors and pressure-independent control valves (PICVs). DeJoule does not only monitor, but it also actively optimises: the platform performs chiller tonnage injection, dynamic VFD frequency modulation on chilled-water pumps using reinforcement learning, dynamic fan-motor speed optimisation for cooling towers using reinforcement learning, and AHU VFD frequency modulation through 'Joule Recipes'. To ensure these tools translate into

action, 108 personnel across 16 Apollo sites have been trained on the DeJoule platform in FY 2025-26, building digital fluency directly within our facilities engineering teams.

The next phase of digitalisation, currently under design, will further extend these capabilities. Smart Joules is rolling out an improved DeJoule dashboard with customisable widgets and a unified AHU algorithm for combined actuator and VFD optimisation. We are also implementing a Chiller Plant Optimiser (CPO+), which enables dynamic setpoint control using custom deep-learning models and is designed to achieve real-time optimisation of plant performance across our largest sites. Together, these upgrades position Apollo at the leading edge of digital energy management in the Indian hospital sector.

Additionally, 100% of Apollo's inpatient records are Electronic Health Records (EHR) meeting 'meaningful use' requirements, eliminating paper records, reducing physical storage, and enabling digital radiology, tele-radiology and tele-consultation. Beyond energy, our digital data discipline extends to water and waste. To bring this distributed, multi-site, multi-parameter information together into a single, decision-ready view, Apollo has deployed a dedicated enterprise ESG data-management platform that serves as the central repository for environmental, social and governance data across the network.

This system replaces fragmented spreadsheets with a controlled, auditable workflow, strengthening data quality, accelerating internal reporting cycles, and creating a clear audit trail for external assurance. It also enables hospital senior leaders across the organisation to track performance against ESG targets in near real-time, reinforcing ESG-linked accountability.

Energy Management

Hospitals and healthcare facilities require significant amounts of uninterrupted energy to support critical medical equipment, lighting, HVAC systems, diagnostics, and patient care. Air-conditioning alone accounts for approximately 45% of hospital energy demand, while medical and diagnostic equipment contribute a further 35%. Temperature-controlled environments required for infection control, together with energy-intensive clinical operations, place a continuous load on hospital infrastructure, particularly in regions with extreme climatic conditions.

Apollo's GHG are primarily attributable to electricity consumption, backup power generation, vehicle fleets, healthcare-specific gases and anaesthetics, and air-conditioning systems. Recognising this profile, our energy and emissions strategy is built around four mutually reinforcing priorities:

- Reducing energy demand through efficiency upgrades and intelligent automation
- Decarbonising electricity supply through renewable energy procurement and on-site solar installations
- Electrifying thermal loads through the deployment of heat pumps
- Phasing out high-impact refrigerants and anaesthetic gases

To support these priorities, we continue to implement network-wide interventions, including:

Energy efficiency

High-efficiency chillers, variable-speed pumps, low-approach cooling towers, automated condenser tube-cleaning systems, LED lighting, BLDC fans, and advanced HVAC optimisation technologies.

Thermal electrification

Heat pumps for hot-water generation and upgraded laundry systems that reduce dependence on diesel- and gas-based heating.

Refrigerant management

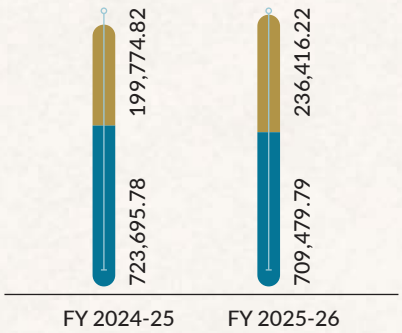
Elimination of ozone-depleting substances (ODS) in HVAC systems through the adoption of ODS-free refrigerants.

Cleaner mobility and fuels

A vehicle fleet substantially aligned with Bharat IV and V emission standards, cleaner fuels such as CNG and LPG for steam and hot-water generation, and employee transportation programmes through which more than 40% of employees utilise hospital-operated bus services and shared transportation arrangements.

Together, these initiatives support Apollo's efforts to reduce emissions, improve resource efficiency, and strengthen climate resilience while maintaining the highest standards of patient care.

Energy Consumption Y-o-Y



Parameter	FY 2024-25	FY 2025-26
Energy Intensity (GJ/ Million INR)	4.20	3.72

Reliable and affordable energy is fundamental to patient safety, clinical continuity, and the quality of care we deliver. Energy is among our most significant operating costs and a core focus of our sustainability agenda, making the transition to cleaner sources both a clinical-resilience priority and a value-protection measure.

In FY 2025-26, our renewable electricity consumption rose to 236,416.22 GJ, up from 199,774.82 GJ in FY 2024-25, an 18% year-on-year increase that outpaced the growth in our overall energy footprint. Renewables now meet 25% of our total energy consumption, advancing our ESG commitment to continuously increase renewable sourcing while reducing our exposure to grid-tariff volatility and carbon-related costs, savings that ultimately support more affordable and sustainable care delivery.

Total energy consumption for the year stood at 945,896.01 GJ, comprising 236,416.22 GJ from renewable sources and 709,479.79 GJ from non-renewable sources. Within non-renewables, grid electricity accounted for 555,960.58 GJ and direct fuel consumption, covering LPG, PNG/ CNG, diesel, and petrol, accounted for 153,519.20 GJ.

This progress was achieved while improving efficiency across an expanding care network. Despite the commissioning of new hospital capacity and higher patient throughput, our energy intensity improved to 0.0000038 GJ per rupee of turnover, down nearly 10% from 0.0000042 GJ/₹ in FY 2024-25. This shows that as we treat more patients and add new facilities, we are delivering each unit of care with less energy, strengthening cost resilience, supporting margins, and advancing our decarbonisation trajectory in step with growth.

Renewable electricity purchase

Transition to renewable power remains the single largest lever in our journey to reduce our carbon impact. Apollo Hospitals continues to source wind-based electricity through long-term Power Purchase Agreements (PPAs) at our Tamil Nadu cluster, where state open-access regulations and a mature wind corridor make third-party renewable sourcing both technically reliable and commercially attractive for round-the-clock hospital operations. Additionally, Apollo is also increasing its solar energy consumption gradually. Our total renewable energy consumption for FY2026 is 236,416.22 GJ, which is an 18% increase as compared to 199,774.82 GJ last financial year.

In FY 2025-26, our hospitals consumed 177,375.32 GJ of wind energy, marking a continued strengthening of our long-term PPA-backed renewable mix and building on the 23,644 GJ of wind energy consumed in FY 2024-25. Additionally, our solar energy consumption for the reporting year is 59,040 GJ.

Project Virya

Project Vīrya, initiated in September 2021, is Apollo Hospitals' flagship energy-efficiency programme executed in partnership with Smart Joules. The programme was originally launched with the aim of saving 235 million kWh of energy and avoiding 290,000 tonnes of CO_2 emissions over a 10-year horizon, targeting a ~20% reduction in energy consumption and carbon footprint across 18 of Apollo's largest hospital facilities in India.

In FY 2025-26, the cumulative impact of Project Vīrya has expanded significantly. So far, 324 Energy Conservation Measures (ECMs) have been implemented delivering:

1,282.78 Lac kWh
of electricity conserved

14.5 Lac litres
of diesel saved

₹ 105 Crores
in cumulative energy cost savings

~110,000 tonnes
of CO_2 emissions avoided in Y5 of Virya

8 Lac SCM (Standard Cubic Metres)
of PNG saved

The top three sites in terms of reduction in energy consumption were Apollo Vanagaram (33.3%), Apollo Madurai (32.9%), and Apollo Teynampet (29%). Top performers by absolute MCal saved include Apollo Jubilee Hills, Apollo Main Chennai, and Apollo Kolkata. To sustain these gains, 108 personnel across 16 sites have been trained on the DeJoule digital energy-management platform.

Apollo Main Chennai
32.8 Lac MCal

Apollo Jubilee Hills
32.9 Lac MCal

Apollo Kolkata
30.7 Lac MCal

Site-specific initiatives

1 Apollo Vanagaram (33.3% savings):

- Improved chiller condenser approach through proper chemical treatment
- Fixed timers for CSUs, split AC units, and borewell pumps to reduce energy consumption
- Throttled low-side AHU valves to reduce overall chiller load
- Avoided operations of the additional aircooled chiller by optimising the existing system load

2 Apollo Madurai (32.9% savings):

- Cooling tower overhauling, softener plant maintenance, and blowdown optimisation were carried out to improve efficiency, reliability, water quality, and TDS control
- Proper functioning of high-side and lowside using DeJoule was ensured for energy-efficient operation

3 Apollo Teynampet (29% savings):

- Implemented low-side optimisation measures such as actuator improvements and closing CHW valves for non-operational AHUs
- Conducted daily site rounds to identify and implement energy-saving opportunities
- Carried out regular cooling tower maintenance to improve overall performance and efficiency

These savings have been delivered through a deliberate combination of ECM implementation, machine-learning-driven optimisation, and digitalisation through DeJoule. Specific ECM categories deployed across sites include continuous improvements such as VFDs on AHUs, installation of softener plants, natural cooling, pump installations, indirect direct evaporative cooling, cooling tower retrofits, installation of air curtains, ceiling-suspended unit (CSU) adoption and progressive coil replacement.
On the optimisation side, machine learning is now embedded across chiller tonnage injection, dynamic VFD frequency modulation on chilled-water pumps using reinforcement learning, dynamic fan-motor speed optimisation for cooling towers using reinforcement learning, and AHU VFD frequency modulation with Joule Recipes.

The next phase of Vīrya, currently under design, deepens both the engineering and the digital sophistication of the programme. Planned high-impact ECMs include the deployment of a new energy-efficient chiller at Apollo Kolkata; fresh-air system optimisation through CSU integrations at Apollo Nellore and Apollo Navi Mumbai; replacement of old CHW secondary pumps at Apollo Bhubaneswar; installation of additional VFDs on AHUs; additional two-way valves with actuators; further AHU integrations on DeJoule; cooling-tower retrofits; and additional tertiary pumps.

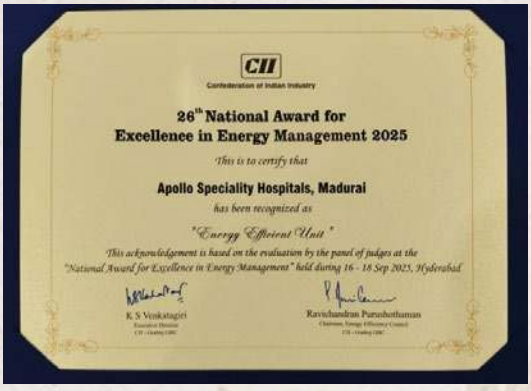
On the digital side, Smart Joules is rolling out an improved DeJoule dashboard with customisable widgets and a unified AHU algorithm for combined actuator and VFD optimisation. Most ambitiously, we are deploying a Chiller Plant Optimiser (CPO+) with dynamic setpoint control using custom deep-learning models to achieve real-time optimisation of plant performance. Water-quality improvements complement these measures, including enhancements to STP-treated water quality, optimised chemical dosing strategies, and consistent cooling-tower water quality for improved plant performance and reliability.

Case Study - Apollo Gurugram and Apollo Madurai Spotlight

Apollo Gurugram has been conceived as an 'energy-smart hospital' that addresses this challenge end-to-end. The facility integrates a Building Management System (BMS) for centralised control of chillers, AHUs, and Heating, Ventilation, and Air Conditioning (HVAC) equipment, alongside an EMS with RS-485-enabled meters across all electrical panels for real-time monitoring. Hybrid AHUs that combine chilled-water and direct expansion (DX) systems serve operating theatres and diagnostic blocks, switching modes based on operating hours to optimise both clean-room compliance and energy use. The hospital deploys VFDs on motors, LED lighting with motion sensors and timers, plant managers that automatically cut off chillers under no-load conditions, and heat pumps and solar thermal systems for hot-water generation in place of conventional boilers, yielding 15% fuel savings on hot water alone.

Water-conserving devices such as tap restrictors, infrared controllers and shower regulators reduce water demand by 15-20% while simultaneously lowering infection-spread risk. EV charging plug points at car parks and renewable-energy integration round out the design. Compared to a conventional 500-bed hospital with a maximum demand of 2,350 KVA (≈ ₹418,550/day in electricity costs), these interventions are projected to deliver 30% energy savings, equivalent to approximately ₹4.52 Crores in annual savings, while measurably reducing the hospital's carbon footprint.

Apollo Madurai was recognised as an Energy Efficient Unit at the 26th CII National Award for Excellence in Energy Management 2025, while Smart Joules received the India Business Leader Award 2026 for outstanding contribution to climate consciousness.


CII
Confederation of Indian Industry
26th National Award for
Excellence in Energy Management 2025
This is to certify that
Apollo Speciality Hospitals, Madurai
has been recognized as
"Energy Efficient Unit"
This acknowledgement is based on the evaluation by the panel of judges at the "National Award for Excellence in Energy Management" held during 16 - 18 Sep 2025, Hyderabad
K S Venkatagiri
Ravichandran Purushothaman

GHG Emissions

Scope 1 and Scope 2 Emissions

In FY 2025-26, our combined Scope 1 and Scope 2 emissions stood at 122,815.68 tCO_2e, comprising Scope 1 (direct) emissions of 13,167.90 tCO_2e and Scope 2 (indirect) emissions of 109,647.78 tCO_2e.
The corresponding GHG emissions intensity improved to 0.00000048 tCO_2e per rupee of turnover, compared with 0.00000057 tCO_2e/INR in FY 2024-25, representing a ~14% year-on-year reduction in carbon intensity.

The marginal increase in Scope 1 emissions reflects the increase in business operations within the reporting boundary, while the reduction in Scope 2 emissions has been driven by our growing renewable-energy share and measures such as conversion of diesel and gas-based heating systems to electric heat pumps, the revamping of laundry systems with efficient electrical heating, the phase-out of ozone-depleting refrigerants in HVAC systems, and the progressive transition of the transport fleet to cleaner alternatives. For hot water and steam generation in kitchens and laundries, cleaner fuels such as CNG and LPG continue to be used in place of higher-emission alternatives, while most transport vehicles owned by the company are now compliant with the latest pollution norms.

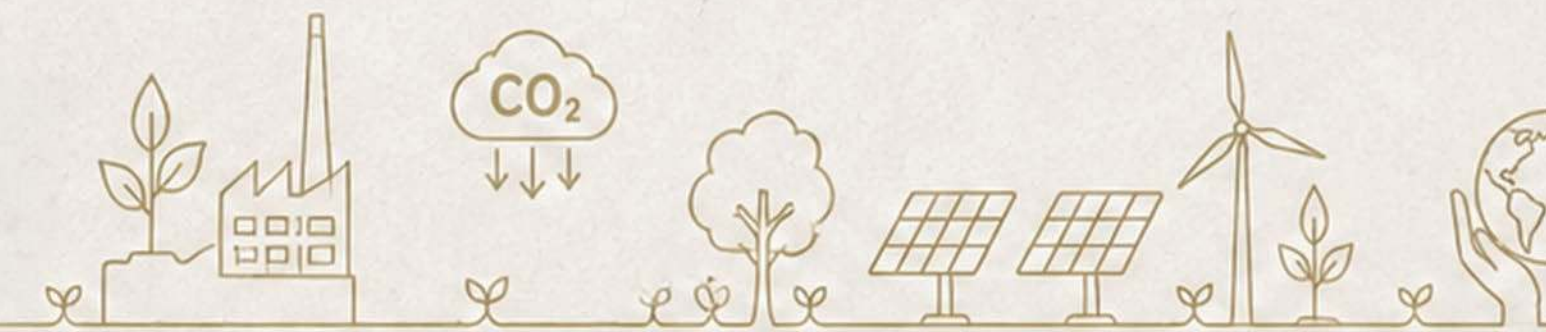
Scope 3 Emissions

The healthcare industry contributes roughly 7% of global emissions, and the majority of any hospital network's climate footprint lies not in its own operations but across its value chain. Capturing these emissions is therefore essential to understanding and addressing our full impact. In FY 2024-25, Apollo became one of the first hospital networks in India to disclose three categories of Scope 3 emissions, covering Fuel and Energy Related Activities, Waste Generated in Operations, and Business Travel.

In FY 2025-26, we have expanded this disclosure to five categories, adding Purchased Goods and Services and Capital Goods to our reported inventory. This is a meaningful advance in the maturity of our climate accounting. For a hospital network, these two categories capture the emissions embedded in the medical equipment, pharmaceuticals, consumables, and infrastructure that enable our clinical care, typically the largest and most complex part of a healthcare provider's footprint.

By bringing these emissions within our boundary of accountability, we move them from being unmeasured to being visible, where they can be tracked, engaged with suppliers, and ultimately reduced. It also strengthens our readiness for evolving disclosure expectations and positions us to manage supply-chain climate risk with greater foresight, an increasingly important consideration for our stakeholders and partners.

Scope 3 Category	FY 2025-26 Emissions (tCO_2e)
Purchased Goods and Services	148,040.94
Capital Goods	42,717.42
Fuel and Energy Related Activities	55,638.26
Business Travel	1,083.22
Waste Generated in Operations	827.95
Total Scope 3 Emissions	248,307.78
Scope 3 Intensity (tCO2e/ INR million)	0.226



Decoding Upstream Emissions

Our five-category Scope 3 inventory provides greater visibility into the indirect emissions associated with our value chain, helping us better understand the climate impacts linked to procurement, energy consumption and capital investment. This enhanced disclosure supports the integration of climate considerations into sourcing decisions, supplier engagement, energy management and long-term business planning.

Purchased Goods and Services is the largest contributor to our Scope 3 footprint, accounting for nearly 60% of total value-chain emissions. As a leading healthcare provider, Apollo Hospitals relies on pharmaceuticals, medical consumables, diagnostic inputs, food products, linen, packaging materials and technology services, all of which carry emissions embedded within upstream supply chains. The significance of this category highlights the importance of sustainable procurement and supplier engagement in our decarbonisation journey. Initiatives such as our Plastic-Free Water Initiative, the Sandhya Project, sustainable packaging interventions and our Supplier Code of Conduct support efforts to improve environmental performance across the supply chain. Over time, greater supplier transparency and product-level emissions disclosure will further strengthen lower-carbon procurement decisions.

Fuel and Energy Related Activities represent approximately 22% of total Scope 3 emissions and reflect upstream impacts associated with fuel production and purchased energy. The prominence of this category reinforces the importance of our renewable energy transition and energy-efficiency initiatives. As renewable energy adoption increases across our operations, we expect to reduce both operational emissions and the associated upstream impacts captured within this category.

Capital Goods account for approximately 17% of total Scope 3 emissions and capture the embodied carbon associated with hospital infrastructure, medical and diagnostic equipment, imaging systems and digital technology investments. These emissions reflect the resources required to expand clinical capacity and strengthen healthcare delivery across our network. Disclosure of this category enables us to incorporate climate considerations into capital allocation decisions while engaging manufacturers and infrastructure partners on opportunities to reduce embodied carbon.

The remaining categories, Business Travel and Waste Generated in Operations, together contribute less than 1% of total Scope 3 emissions. Although relatively small, both categories remain important areas of operational focus. Our teleconsultation and digital health ecosystem continue to reduce travel requirements, while ongoing waste reduction, segregation, recycling and responsible disposal practices support efficient resource use across our facilities.

Together, these disclosures demonstrate that the majority of our value-chain emissions are concentrated within procurement activities, upstream energy impacts and capital investments. This insight enables a more focused approach to climate action by directing efforts towards responsible sourcing, renewable energy adoption, sustainable infrastructure development and stronger supplier engagement, supporting Apollo Hospitals' long-term sustainability ambition.



Air Quality Management

Air quality is an important environmental parameter, and it is also an important clinical parameter, particularly in respiratory, cardiac, oncology and pediatric care, where ambient pollution loads directly influence patient outcomes and length of stay. Apollo conducts comprehensive ambient air-quality surveys across our hospitals, with 24-hour monitoring of SO_2, NO_x, particulate matter, O_3, Pb, CO and NH_3, annual averages documented, and stricter norms adopted for residential and sensitive zones around our facilities.

To minimise the impact on air quality, several steps have been taken by the organisation. These include the phasing-out of ozone-depleting refrigerants in HVAC systems and switch to ODS-free alternatives, the transition from diesel- and gas-based heating to electric heat pumps, the revamping of laundry systems with efficient electrical heating. Additionally, there are measures such as the growing share of renewable electricity (25% of total energy consumption in FY 2025-26, with solar consumption up +71.6% YoY) and the alignment of most transport vehicles with the latest emission norms and increased focus on electric mobility. This is complemented by a carpooling programme that already serves over 40% of employees with hospital-owned buses; and the use of cleaner fuels (CNG and LPG) for hot water and steam generation in kitchens and laundries.

At Indraprastha Apollo Hospitals, Delhi, an anti-smog gun has been installed to reduce particulate matter (PM2.5) by binding airborne pollutants and bringing them to ground level, which is a direct, visible intervention against the ambient air-pollution burden faced by patients, visitors and staff in NCR. Across all facilities, low or no-VOC paints are used to minimise indoor air-quality impact, particularly important in clinical zones, recovery wards and paediatric units where occupants are most sensitive to volatile organic compounds.

Parameter	Unit	FY 2026	FY 2025
NOx	MT	26,765.77	179,086.15
SOx	MT	12,468.91	13,335.59
Particulate matter (PM)	MT	12,702.55	35,451.92

Note: For further details regarding variations in No_x data, please refer to our ESG Scorecard, where we have provided a detailed explanation

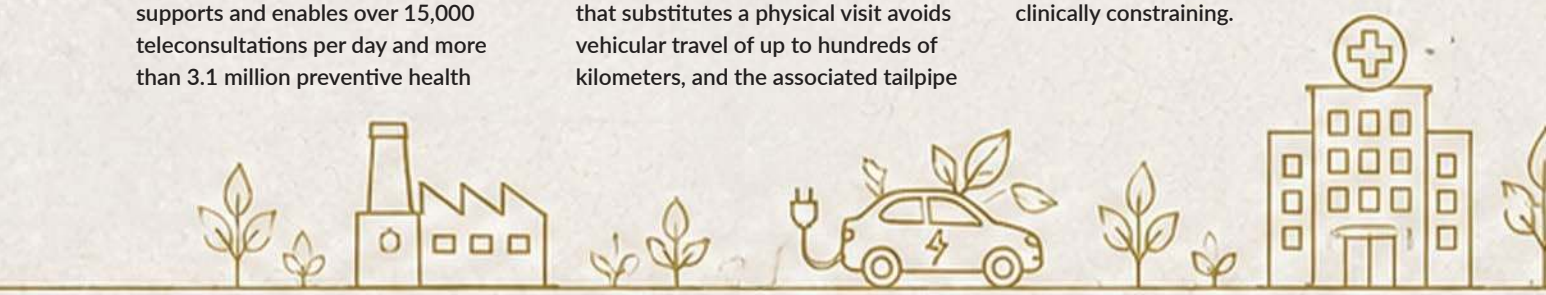
Teleconsultation

Telemedicine sits at a powerful intersection of Apollo's environmental missions: it democratises specialist access for patients in remote and underserved geographies, while simultaneously avoiding the GHG emissions, traffic congestion and out-of-pocket costs associated with patient and caregiver travel. Apollo Remote Healthcare, South Asia's largest multispecialty telemedicine network, has been a global pioneer for over 24 years, delivering integrated services spanning Teleconsultations, Tele-Radiology, Tele-Cardiology, Tele-ICU and Tele-Condition Management.

Apollo's HealthAxis platform supports and enables over 15,000 teleconsultations per day and more than 3.1 million preventive health checks annually. Digital Dispensaries have been set-up across the states of Odisha, Meghalaya, Jharkhand and Uttar Pradesh, and each of these Digital Dispensary serves 7,500+ beneficiaries annually. So far, more than 3.4 million consultations have been delivered to 3.3 million beneficiaries through digital dispensaries and e-UPHCs across the country. Today, Apollo facilitates more than 20,000 telemedicine transactions daily, providing quality healthcare across the country.

Beyond access, teleconsultation is one of the most effective Scope 3 mitigation levers available to a hospital network. Each remote consultation that substitutes a physical visit avoids vehicular travel of up to hundreds of kilometers, and the associated tailpipe emissions, fuel consumption and infrastructure demand.

Although individual consultation-level avoided emissions are modest, the aggregate climate dividend at Apollo's scale, which is hundreds of thousands of consultations per month across India, is significant. Teleconsultation is, in effect, a climate-mitigation lever that pays for itself in patient outcomes, equity and clinician productivity before any environmental benefit is counted. As Scope 3 disclosure expands across the healthcare sector, telemedicine will increasingly be recognised as one of the few mitigation interventions that is clinically additive rather than clinically constraining.



Telemedicine in Action

Two flagship initiatives illustrate how Apollo's telemedicine model simultaneously expands access and avoids emissions. In Keonjhar District of Odisha, which is a tribal region with limited specialist availability, Apollo has collaborated with the Chief District Medical and Public Health Officer, and the District Mineral Foundation, and established and operationalized 66 digital dispensaries integrating teleconsultations, laboratory and diagnostic services and pharmacy access. The programme has benefitted 440,979 individuals, replacing what would otherwise have required long-distance travel to district or tertiary hospitals.

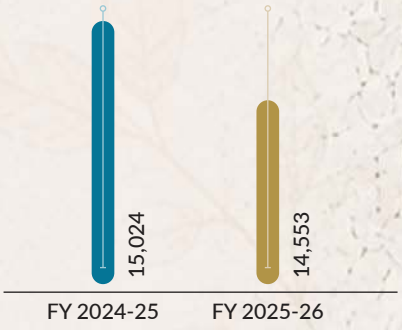
Similarly, Apollo has partnered with the developer of the Khadva Hybrid Renewable Power Project in Gujarat, to deliver onsite primary care, specialist teleconsultations, visiting OPD camps, laboratory and pharmacy services, and 24×7 tele-emergency services for the project workforce. Together, these models showcase telemedicine as a scalable, low-carbon vehicle for universal health coverage.

Waste Management

Healthcare waste management is one of the most material environmental and public-health responsibilities for any hospital network. At Apollo, we manage multiple streams of waste (biomedical, hazardous, non-hazardous, e-waste, battery and radioactive), in strict compliance with India's Bio-Medical Waste Management Rules, the Hazardous and Other Wastes Rules, and ISO 14001 environmental management standards. Our approach combines source segregation, authorised treatment and disposal, Extended Producer Responsibility (EPR) for batteries, packaging and electronic equipment, and a deliberate shift towards circularity through reusable, recycled and bio-based alternatives. Additionally, 100% of our biomedical waste continues to be segregated at source and treated through authorised channels in line with Central Pollution Control Board (CPCB) and State Pollution Control Board norms.

In FY 2025-26, our hospitals generated 14,553.50 MT of total waste, a 3.1% reduction over the 15,024.18 MT generated in FY 2024-25, even as we expanded our network footprint and patient volumes. Of this, biomedical waste was 4,076.98 MT, non-hazardous waste was 9,646.66 MT, construction and demolition (C&D) waste was 745.27 MT, e-waste was 23.06 MT, battery waste was 30.95 MT, other hazardous waste was 30.47 MT, and radioactive waste was 0.11 MT. Our waste intensity per rupee of turnover improved to 0.000000058 MT/₹ from 0.000000068 MT/ ₹ in FY 2024-25, representing a ~15% decrease in one financial year.

Waste Generated (MT)



Radiology Film Replacement

Conventional radiology generates a continuous stream of silver-halide-based X-ray films and chemical processing effluents, which are both hazardous waste streams and a significant source of heavy-metal contamination if discharged untreated.

Across our hospital network, we have transitioned the vast majority of our radiology departments from film-based to fully digital imaging using Picture Archiving and Communication Systems (PACS), Computed Radiography (CR) and Direct Digital Radiography (DR).

The shift complements our broader paper-reduction agenda in clinical workflows, including digital prescriptions, electronic health records (100% of inpatient records are EHR meeting 'meaningful use' criteria) and digital discharge summaries.

No Single-Use Plastic Hospitals

Single-use plastic represents a disproportionate share of healthcare waste by volume and is amongst the hardest streams to recycle owing to contamination risk. Apollo has set itself the ambition of becoming a single-use-plastic-free hospital network, and the FY 2025-26 numbers reflect tangible progress.

Our reported plastic waste stream stands at zero, with all in-scope plastic flows now diverted through authorised recyclers under EPR or incinerated as part of the bio-medical waste. We have phased out single-use plastic carry bags in pharmacies in favour of vegetable-oil-based bio-bags, replaced conventional disposable cutlery and food packaging in cafeterias and patient pantries with compostable cornstarch alternatives, and switched our biomedical waste collection bags to 100% recycled-plastic liners.

Most prominently, our Plastic-Free Water Initiative is eliminating plastic water bottles from patient rooms, conference areas and visitor zones across the network. Drinking water is now provided in glass bottles, supported by a structured collection, washing and recycling system that ensures hygiene standards are maintained without reverting to single-use plastic. Beyond the headline of plastic reduction, this initiative changes the everyday material experience of being a patient or visitor at an Apollo hospital, replacing the disposable with the dignified, and signalling a hospital culture in which environmental and clinical excellence are inseparable.

Green Operating Theatres

Operating Theatres (OTs) are amongst the most resource-intensive zones in any hospital, accounting for a disproportionately high share of energy consumption (HVAC, lighting and equipment running 24×7), anaesthetic-gas emissions (a potent Scope 1 contributor with global warming potentials hundreds to thousands of times that of CO_2), single-use surgical consumables, and biomedical waste. Apollo's Green OT programme reimagines this footprint without compromising clinical sterility or patient safety.

Sandhya Project: Sustainable Linen at Apollo

Hospital linen processing is a water, energy and chemical-intensive support function. Research benchmarks indicate water use of 7 to 15 L/kg in efficient systems and 14 to 50 L/kg in washer extractors, equal to about 500 to 5,000 kL/month for a 500-bed operation. Detergent use is typically 0.3 to 1.0 tonnes/month, rising above 1 to 2 tonnes in larger operations.

Under the Sandhya Project, Apollo has procured a new generation of internationally certified hospital linen engineered for higher durability, faster drying and significantly lower wash-cycle requirements. The new linen requires fewer washes per use-cycle, uses less detergent per wash, and tolerates lower wash temperatures, translating into measurable reductions in water consumption, detergent and chemical use, energy load on hot-water systems, and the volume of laundry effluent reaching our STPs.

The Sandhya Project complements our broader linen-circularity efforts, including the use of reusable surgical textiles in Green OTs and the procurement of cotton aprons and jute bags from local Self-Help Groups (SHGs), which combines waste reduction with rural livelihood generation.

Aprons and Jute Bags from Self-Help Groups

Embedding circularity into the supply chain requires partners as much as policies. Apollo has partnered with women-led SHGs in the geographies surrounding our hospitals to source cotton aprons and jute bags for use across patient services, pharmacy retail and corporate functions. These products replace single-use plastic and synthetic alternatives, are biodegradable at end-of-life, and create a meaningful livelihood opportunity for rural and peri-urban women, directly linking our environmental agenda with our community-development and women-empowerment commitments under the CSR programme.

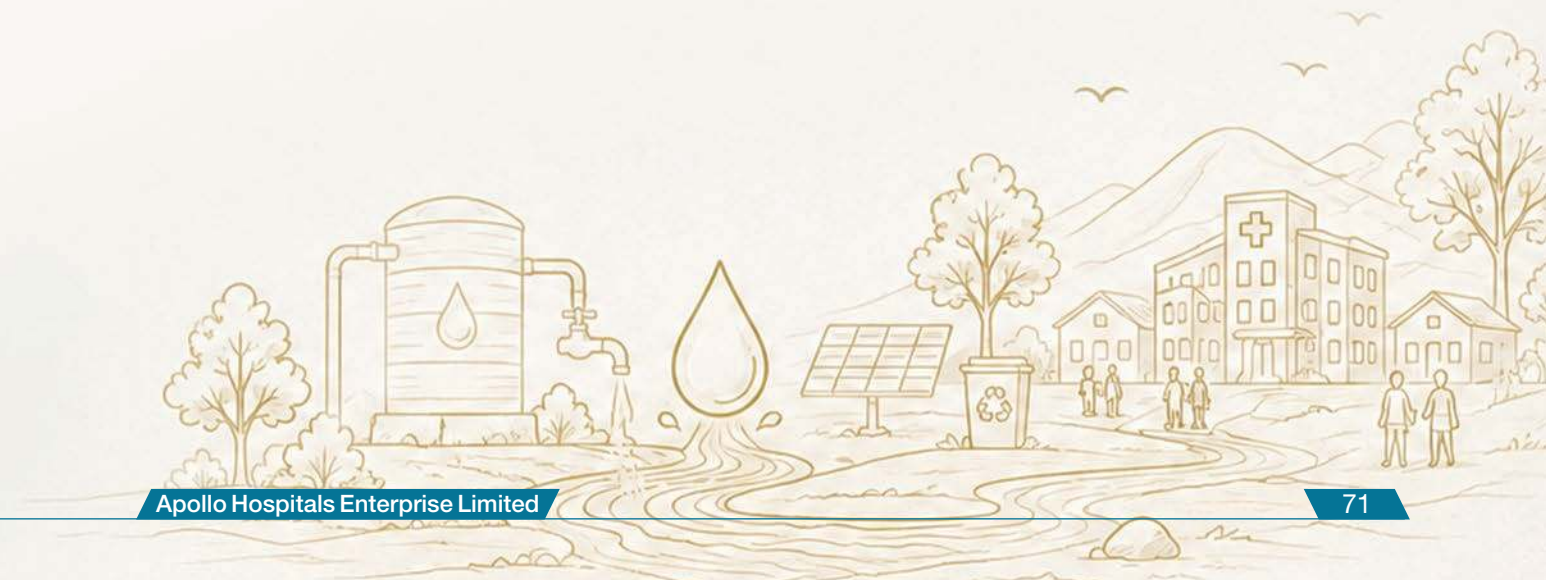
Water Management

Water is mission-critical to hospital operations, underpinning sanitation, patient care, sterilisation, dialysis, surgeries, and dental procedures, as well as HVAC and chiller systems, boilers, fire-safety systems, laundry, food preparation, landscaping, and housekeeping. As a healthcare provider operating across geographies that range from coastal Chennai to the water-stressed pockets of southern and western India, we view sustainable water stewardship as both an operational imperative that protects business continuity and a responsibility we owe to the communities we serve.

In FY 2025-26, our total water withdrawal stood at 4,336,592.16 KL, an increase of approximately 9.3% over FY 2024-25. Significantly, this withdrawal grew at less than half the pace of our consumption, which rose 27%, evidence that capacity expansion and rising patient throughput are being met with progressively greater water efficiency per unit of care delivered. The increase reflects the commissioning of new hospital units and higher patient footfall, and remains fully aligned with our internal projections, underscoring the predictability of our resource planning.

Our withdrawal mix reflects a deliberate, low-risk sourcing strategy: groundwater accounted for 60.7% and third-party sources contributed the balance, while surface water and seawater/desalinated water withdrawals remained at zero, limiting our exposure to high-cost and carbon-intensive water sources. All balance water was treated and discharged in full compliance with regulatory norms, applying primary, secondary, and tertiary (where required) treatment, reinforcing our zero-tolerance approach to compliance risk.

Water intensity stood at 0.000011 KL per rupee of turnover, a marginal increase from 0.000010 KL/₹ in FY 2024-25. This near-flat intensity, achieved during a period of unit additions and higher patient volumes, demonstrates that growth is being decoupled from proportionate increases in water risk, a key marker of resilient, capital-efficient operations.



Water Conservation and Recycling Initiatives

Water recycling is central to our water-management strategy and to our broader commitment to circular resource use. All sourced water is pre-treated through filtration, disinfection, and pH adjustment to meet healthcare-grade quality standards, while wastewater is processed through a multi-stage treatment train comprising primary, secondary, and tertiary stages, deploying Membrane Bioreactors (MBR), Moving Bed Biofilm Reactors (MBBR), Ultrafiltration (UF), and Reverse Osmosis (RO). The treated output is then recovered for laundry, landscaping, horticulture, and HVAC makeup, displacing freshwater that would otherwise be drawn from increasingly stressed sources.

Across the network, recycled water meets approximately 20% of total hospital water demand, directly reducing both our freshwater dependency and our exposure to water-cost and water-scarcity risk.

Six Apollo facilities also operate on a ZLD system, and wastewater treatment plants are installed at every hospital in our network, reinforcing full operational control over our effluent and a consistent compliance posture. Our southern hospitals, located in some of the most water-stressed catchments we serve, source approximately 2,500 KL daily from a balanced mix of private tankers, borewells, and government supplies, while recharging at least 250 KLD, roughly 10%, through rainwater harvesting structures that are now standard at every JCI- and NABH-accredited site. Site-wise comparative tracking of borewell withdrawal against rainwater harvested is maintained to ensure granular monitoring, accountability, and continuous improvement.

Water stewardship in design

Water-efficient design is being embedded at the conception stage of new hospital projects rather than retrofitted later. At Apollo Gurugram, water-conserving plumbing fixtures have been specified across washrooms, patient rooms and clinical zones, including tap restrictors (which reduce water flow by ~15%), shower regulators and water-efficient showerheads (~20% reduction), and infrared-controlled taps and toilet flush mechanisms (which provide water only when required, switch off automatically, save ~15% per tap per year, and additionally reduce the opportunity for the spread of infection). The hospital's hot-water generation has shifted from conventional boilers to solar and heat pump systems, reducing fuel consumption and associated water losses from boiler operations.

Across our new hospital projects, we have also adopted biophilic design with native plant species sourced in collaboration with the Heartfulness Foundation. These species are suited to the local environment, require lower irrigation, and form a core part of our biophilic design approach, supporting both ecological balance and patient well-being.

Closing the Loop: Water Circularity at Apollo Proton Cancer Centre, Chennai

The Apollo Proton Cancer Centre (APCC), Chennai, runs a near-closed-loop water system built to maximise reuse and minimise discharge, lowering its freshwater dependency and water-cost risk while sustaining critical clinical and HVAC operations. Its treatment infrastructure includes a 2,000-KLD wastewater plant, a modernised 1,000 KLD plant using Moving Bed Biofilm Reactor (MBBR) technology, a 201 KLD STP with UF and RO, and a 9 KLD Effluent Treatment Plant that feeds back into the STP.

Reuse drives the system. Treated RO water supplies the cooling tower serving a 1,500-TR chiller plant, which uses about 60 to 90 KLD. Of the 130 to 150 KLD pumped daily to the STP, 70 to 90 KLD is recovered and reused, while backwash water is recirculated to ensure zero discharge. RO reject streams are fully reused for gardening rather than wasted.

Efficiency and resilience are reinforced through:

- Automated tube-cleaning and flow-control systems that optimise chiller water use
- Seasonal rainwater harvesting, with surplus water sent to a sump linked to 18 recharge pits and drawn back into the system when demand rises
- A peak-summer arrangement to source borewell water from the adjacent Apollo Cancer Hospitals, backed by additional reject-water storage and pumping infrastructure

Together, these measures make APCC a benchmark for water circularity in healthcare, demonstrating how operational sustainability and business resilience reinforce each other.

Climate Change Impacts on Human Health and Infrastructure

As a leading healthcare provider, Apollo recognises climate change as both a public-health threat and a material operational risk, and this shapes how we design our facilities, plan our service mix, and prepare our people. Extreme weather events such as heatwaves, floods, cyclones, and intensified monsoons can cause direct injuries, surge emergency caseloads, and disrupt clinical continuity. At the same time, gradual shifts in temperature, humidity, and air quality are widening the footprint of vector-borne diseases, respiratory and cardiovascular illness, and water-borne outbreaks, with marginalised communities bearing a disproportionate share and intensifying demand for accessible, climate-resilient care.

We have embedded climate resilience into our enterprise risk management and disaster-preparedness frameworks. Site-specific multi-hazard risk assessments are conducted annually across our hospitals, covering floods, fires, cyclones, earthquakes, and chemical spills, with disaster-response plans reviewed against the WHO Hospital Emergency Response Checklist across its four pillars of Command and Control, Contingency Planning, Staff Preparedness, and Operational Continuity. Our hospitals maintain redundant infrastructure for power, water, and medical gases alongside 24×7 emergency and trauma capabilities, regular mock drills, and simulation training. Our National Network of Emergency Services ensures uniform quality of emergency care nationwide, while initiatives such as Alert VoICE train citizen-volunteers in CPR and emergency response to act as frontline responders before an ambulance arrives.

Resilience is also engineered into our newer assets at the design stage through biophilic landscaping with native species, high-performance building envelopes, and IGBC-certified green-building facilities. At sites such as Apollo Gurugram, water-conserving fixtures reduce both water demand and infection-spread risk, while heat pumps and solar thermal systems for hot-water generation deliver around 15% fuel savings and reduce reliance on fossil-based boilers. A network-wide rollout of heat pumps, efficient chillers, and ML-driven HVAC optimisation further reduces thermal load and improves operational reliability under hotter conditions. Together, these measures lower both the climate footprint of our operations and their vulnerability to climate-driven stress.

On the morbidity side, our preventive-health platforms, Apollo ProHealth, AHC on Wheels, and the annual Health of the Nation report, generate data-driven insights into emerging climate-sensitive disease burdens, enabling early screening, public awareness, and targeted interventions for vulnerable populations.



ESG Scorecard FY 2025-26

Environment

Energy consumption within the organisation (GRI 302-1, 302-3) (SASB, HC-DY-130a.1.)

Category	Unit	FY 2023-24	FY 2024-25	FY 2025-26
Direct				
LPG	GJ	38,913.49	50,611.87	49,766.88
Coal	GJ	-	3.26	-
LNG/PNG/CNG	GJ	12,821,247.19	23,857.92	40,243.91
Diesel	GJ	29,131.06	76,673.86	51,517.73
Petrol	GJ	-*	4,538.13	4,725.59
Total Direct Energy	GJ	12,889,290.75	155,685.04	146,254.11
Indirect				
Grid Electricity	GJ	519,155.67	568,010.75	555,960.58
Solar Energy	GJ	17,146.42	34,395.60	59,040.90
Wind Energy	GJ	183,945.58	165,379.20	177,375.32
Renewable Sources (Solar + Wind)	GJ	201,092.00	199,774.82	236,416.21
Total Indirect Energy	GJ	720,247.67	767,785.57	792,376.79
Total Energy Consumption (Direct + Indirect)**	GJ	13,609,538.42	923,470.59	938,630.90
% Renewable Grid Electricity	%	28	26.01%	29.8%
Energy Intensity per Rupee of Turnover	GJ/ INR	0.000071	0.0000042	0.0000038

- The above data is only for AHEL and AHLL for FY 2025-26. Data relating to other group entities has been excluded. The same is expected to be reported from the next financial year onwards.
- The variations in this disclosure compared to the previous year are attributable to changes in monitoring and data recording practices.
- Given the diversified nature of operations of the Company, the intensity of environmental indicators based on physical output is not reported.

GHG emissions (GRI 305-1, 305-2, 305-4)

Category	Unit	FY 2023-24	FY 2024-25	FY 2025-26
Scope 1: Direct emissions*	tCO_2e	731,918.85	13,065.00	13,167.90
Scope 2: Indirect emissions	tCO_2e	102,389.03	112,024.30	109,647.78
Total GHG emissions**	tCO_2e	834,307.88	125,089.3	122,815.68
GHG emission intensity (Scope 1 and Scope 2)	tCO_2e/ INR	0.0000044	0.00000057	0.00000048

**The above data is only for AHEL and AHLL for FY 2025-26. Data relating to other group entities has been excluded. The same is expected to be reported from the next financial year onwards.*
The variations in this disclosure compared to the previous year are attributable to changes in monitoring and data recording practices.

GHG saving initiatives (GRI 305-5)

Category	Unit	FY 2023-24	FY 2024-25	FY 2025-26
Renewable energy (solar, wind)	tCO_2e avoided	39,659.81	40,336.74	46,626.53

Water Sourcing and Discharge (GRI 303-3, 303-4, 303-5)

Category	Unit	FY 2023-24	FY 2024-25	FY 2025-26
Municipal water supplies (or from other water utilities)	KL	1,620,064.69	1,686,227.07	1,702,616.97
Fresh surface water (lakes, rivers, etc.)	KL	908	-	-
Fresh groundwater	KL	2,161,819.25	2,220,510.29	2,633,975.19
Total withdrawal	KL	3,782,791.94	3,968,775.36	4,336,592.16
Water discharged	KL	1,652,131.18	1,794,314.12	1,558,171.55
Water recycled and reused	KL	535,826	-	-
Total water consumption*	KL	2,130,660.77	2,230,426.24	2,829,631.02
Water intensity	KL/ INR	0.000011	0.000010	0.000011

- The above data is only for AHEL and AHLL for FY 2025-26. Data relating to other group entities has been excluded. The same is expected to be reported from the next financial year onwards.
- All the water discharged is treated through primary, secondary and tertiary levels to meet the norms specified.
- The variations in this disclosure compared to the previous year are attributable to changes in monitoring and data recording practices.
- The increase in water withdrawal can be attributed to increase in business, the addition of new hospitals, and enhanced data recording in this fiscal year compared to the previous year.

Waste Generation (GRI 306-3), (SASB, HC-DY-150a.2)

Waste Generation	Unit	FY 2023-24	FY 2024-25	FY 2025-26
Plastic waste	MT	87.84	-	-
E-waste	MT	61.09	88.54	23.06
Bio-medical waste	MT	3,366.46	3,815.65	4,076.98
Battery waste	MT	9.60	17.75	30.95
Hazardous waste	MT	16.67	854.33	775.85
Non-hazardous waste	MT	4,106.51	10,247.91	9,646.66
Total waste generation*	MT	8,078.78	15,024.18	14,553.50
Waste intensity	MT/INR	0.000000042	0.000000068	0.000000057

(GRI 306-3, 306-4, 306-5) (SASB, HC-DY-150a.2)

Mode of disposal/diversion	Unit	FY 2023-24	FY 2024-25	FY 2025-26
Recycled	MT	3,161.88	3,057.58	6,663.00
Reused	MT	-	322.00	421.12
Incinerated	MT	1,472.93	6,378.02	6,192.83
Landfill	MT	897.41	1,867.25	1,276.54
Other recovery option	MT	1,711.86	239.18	-
Other disposal option	MT	924.70	3,160.15	-
Total waste disposed/diverted*	**MT**	**8,078.78**	**15,024.18**	**14,553.49**

- The above data is only for AHEL and AHLL for FY 2025-26. Data relating to other group entities has been excluded. The same is expected to be reported from the next financial year onwards.
- Variations in waste generated values from last year have resulted from changes in scope, monitoring/data recording practices
- For the purposes of reporting under waste indicators, the Company has reported information pertinent to AHEL alone for FY 2023-24.

Air Emissions (GRI 305-6)

The difference in NOx data for the reported year is due to the following factors:

Reporting Scope:

- The scope of reporting for FY 2023-24 was only Apollo Hospitals Enterprise Limited (AHEL), whereas in FY 2024-25, we added 3 entities, whom we continue to report for across our sustainability reporting (i.e. AHEL, Apollo Health and Lifestyle Limited, AyurVAID Hospitals Private Limited, and Apollo HealthCo Limited).

Differing Calculation Factor:

- In FY 2024-25, within AHEL operations, the Chennai Apollo Proton Cancer Centre (APCC) unit was undergoing expansions and had also used a different factor to report their air emissions, thereby causing a spike for their particular unit. Owing to the ongoing upgrades, this discrepancy could not be rectified and hence we are unable to update values to stabilized values that showcase actual emissions.
- In FY 2025-26 we were able to rectify this issue within the Chennai APCC unit prior to our assurance. Hence, there has been a normalisation of values and we shall continue to follow this approach.

Category	Unit	FY 2023-24	FY 2024-25	FY 2025-26
NOx	MT	5,104.00	179,086.15	26,765.77
SOx	MT	1,228.00	13,335.59	12,468.91
PM	MT	2,410.00	35,451.92	12,702.55

Social

Employee diversity (GRI 102-8) (SASB, HC-DY-330a.1)

Employment	Category	Unit	FY 2023-24	FY 2024-25	FY 2025-26
Permanent	Male	No.	51,707	20,699	21,497
	Female	No.	31,079	21,798	22,511
Total permanent		No.	**82,786**	**42,497**	**44,008**
Contractual	Male	No.	-	-	-
	Female	No.	-	-	-
Total contractual		No.	-	-	-
Empanelled	Male	No.	-	-	-
	Female	No.	-	-	-
Total empanelled		No.	-	-	-
Differently abled*	Male	No.	6	6	17
	Female	No.	3	2	17
Total differently abled		No.	**9**	**8**	**34**
Total employees	Male	No.	51,707	20,699	21,497
	Female	No.	31,079	21,798	22,511
Grand total		No.	**82,786**	**42,497**	**44,008**

**The count for differently abled employees is included in the Permanent employee count and has not been added to the Total to avoid double counting*
Note: This data only consists of AHEL and AHLL Permanent Employees, Pharmacy data is excluded

New employee hires (GRI 401-1)

New Hires FY 2025-26	AHEL	AHLL	Total
Male	3,233	1,308	4,541
Female	4,693	1,338	6,031
Total	7,926	2,646	10,572

Note: This data only consists of AHEL and AHLL Permanent Employees, Pharmacy data is excluded

Employee turnover rate (GRI 401-1)

Employment	Category	Unit	FY 2023-24	FY 2024-25	FY 2025-26
Permanent	Male	%	33%	30%	20%
	Female	%	38%	32%	23.2%
	Total Permanent	%	35%	27%	21.6%

Note: This table only contains data for Permanent employees for AHEL and AHLL & Data related to Pharmacy has been excluded for FY 2025-26 and FY 2024-25. In FY 2023-24, we have included Pharmacies along with AHLL and AHEL.

Parental leave (GRI 401-3)

Category	Unit	Male	Female
Employees entitled for parental leave	No.	-	22,511
Employees that took parental leave	No.	-	657
Employees that returned to work in the reporting period after parental leave ended	No.	-	632
Employees that returned to work after parental leave ended that were still employed 12 months after their return to work	No.	-	329
Rate of Return to work that took parental leave	%	-	96%
Retention rates of employees that took parental leave	%	-	87.2%

**This data is only for AHLL and AHEL. The data related to Pharmacy has been excluded.*

Average training hours (GRI 404-1)

Total employees	44,008
Total training hours	937,403
Average training hours per employee	21.30

**This table includes training data for AHEL and AHLL. Data related to Pharmacy has been excluded.*

Governance

Economic value generated (GRI 201-1)

Category	Unit	FY 2023-24	FY 2024-25	FY 2025-26
Total revenue	INR Millions	190,592	217,940	252,285
EBITDA	INR Millions	23,907	30,219	37,693
Profit After Tax (PAT)	INR Millions	8,986	14,459	19,417

CSR and other contributions (GRI 415-1)

Category	Unit	FY 2023-24	FY 2024-25	FY 2025-26
CSR expense	INR Millions	130.04	208.32	277.0
Political contributions	INR Millions	0	0	0

Fines/Settlements/Complaints (GRI 206-1) (SASB, HC-DY-230a.2)

Category	Unit	FY 2023-24	FY2024-25	FY 2025-26
Confirmed cases of Corruption and Bribery	No.	0	0	0
Current involvement in any ongoing corruption and bribery cases	No.	0	0	0
Contributions to and spending on political campaigns, political organisations, lobbying, trade associations, tax-exempt entities	INR millions	0	0	0
Complaints concerning breaches of customer privacy and losses of customer data	No.	0	0	0
Number of incidents of non-compliance associated with environment-related, standards, and regulations	No.	0	0	0
No. of cases of breach of confidentiality	No.	0	0	0
No. of conflict-of-interest cases	No.	0	0	0
No. of money laundering and insider trading cases	No.	0	0	0
No. of incidents related to anti-competitive practices, anti-trust and monopoly practices	No.	0	0	0
No. of complaints from associated communities	No.	0	0	0
No. of complaints from shareholders and investors	No.	254	170	363
No. of complaints related to discrimination and sexual harassment	No.	18	31	39
No. of complaints from customers	No.	4,100	3,079	3,266
No. of complaints from value chain partners	No.	0	0	0

GRI Index

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GRI 201: Economic Performance 2016	201-1 Direct economic value generated and distributed	Annual Report	
	201-2 Financial implications and other risks and opportunities due to climate change	Not Reported	
	201-3 Defined benefit plan obligations and other retirement plans	BRSR: Principle 3	24
	201-4 Financial assistance received from the government	Annual Report	
GRI 202: Market Presence 2016	202-1 Ratios of standard entry level wage by gender compared to local minimum wage	BRSR: Principle 5	30
	202-2 Proportion of senior management hired from the local community	Not reported	
GRI 203: Indirect Economic Impacts 2016	203-1 Infrastructure investments and services supported	Building Healthier Communities: Flagship Programme I & II	50-55
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GRI 205: Anti-corruption 2016	205-1 Operations assessed for risks related to corruption	BRSR: Principle 1	19-21
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	302-4 Reduction of energy consumption	Environmental Stewardship @ Apollo: Our footprint	62-63
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	303-3 Water withdrawal	BRSR – Principle 6	34-35
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GRI 304: Biodiversity 2016	304-1 Operational sites owned, leased, managed in, or adjacent to, protected areas and areas of high biodiversity value outside protected areas	Apollo does not report on this information as it does not own or operate assets that are located in ecologically sensitive areas.	
	304-2 Significant impacts of activities, products and services on biodiversity		
	304-3 Habitats protected or restored		
	304-4 IUCN Red List species and national conservation list species with habitats in areas affected by operations		
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	305-6 Emissions of ozone-depleting substances (ODS)	Environmental Stewardship @ Apollo: GHG Emissions	66-67
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GRI 306: Waste 2020	306-1 Waste generation and significant waste-related impacts	Environmental Stewardship @ Apollo: Waste Management	69-71
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	401-2 Benefits provided to full-time employees that are not provided to temporary or part-time employees	The People Behind the Care: Employee Engagement and Wellbeing	37
	401-3 Parental leave	BRSR: Principle 3 ESG Scorecard: Social	23-24; 78
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GRI 403: Occupational Health and Safety 2018	403-1 Occupational health and safety management system	The People Behind the Care: Occupational Health and Safety	38-41
	403-2 Hazard identification, risk assessment, and incident investigation	The People Behind the Care: Occupational Health and Safety	38
	403-3 Occupational health services	The People Behind the Care: Occupational Health and Safety	39
	403-4 Worker participation, consultation, and communication on occupational health and safety	Not Reported	
	403-5 Worker training on occupational health and safety	The People Behind the Care: Occupational Health and Safety	39
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	403-7 Prevention and mitigation of occupational health and safety impacts directly linked by business relationships	The People Behind the Care: Occupational Health and Safety	38
	403-8 Workers covered by an occupational health and safety management system	The People Behind the Care: Occupational Health and Safety	38
	403-9 Work-related injuries	BRSR: Principle 3 The People Behind the Care: Occupational Health and Safety	26; 39
	403-10 Work-related ill health	Not Reported	
GRI 404: Training and Education 2016	404-1 Average hours of training per year per employee	The People Behind the Care: Talent Acquisition and Retention	36
	404-2 Programmes for upgrading employee skills and transition assistance programmes	The People Behind the Care: Building Future Capabilitie	35
	404-3 Percentage of employees receiving regular performance and career development reviews	The People Behind the Care: Performance Appraisal and Career Development	36
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GRI 407: Freedom of Association and Collective Bargaining 2016	407-1 Operations and suppliers in which the right to freedom of association and collective bargaining may be at risk	Not Reported	
GRI 408: Child Labor 2016	408-1 Operations and suppliers at significant risk for incidents of child labor	Responsible Supply Chain: Supplier Code of Conduct	57
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GRI 410: Security Practices 2016	410-1 Security personnel trained in human rights policies or procedures	Not reported	
GRI 411: Rights of Indigenous Peoples 2016	411-1 Incidents of violations involving rights of indigenous peoples	Not reported	
GRI 413: Local Communities 2016	413-1 Operations with local community engagement, impact assessments, and development programmes	Building Healthier Communities: Total Health	53
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	416-2 Incidents of non-compliance concerning the health and safety impacts of products and services	Not Reported	
GRI 417: Marketing and Labeling 2016	417-1 Requirements for product and service information and labeling		
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	417-3 Incidents of non-compliance concerning marketing communications		
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SASB Index

Theme	SASB Indicator	Disclosure	Section/Sub-Section Title
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Waste Management	HC-DY-150a.1	Total amount of medical waste, percentage (a) incinerated, (b) recycled or treated, and (c) landfilled	
	HC-DY-150a.2	Total amount of: (1) hazardous and (2) non-hazardous pharmaceutical waste, percentage (a) incinerated, (b) recycled or treated, and (c) landfilled	
Patient Privacy and Electronic Records	HC-DY-230a.1	Percentage of patient records that are Electronic Health Records (EHR) that meet 'meaningful use' requirements	Note: 100% of inpatient records are Electronic Records that meet 'meaningful use' requirements
	HC-DY-230a.2	Description of policies and practices to secure customers' protected health information (PHI) records and other personally identifiable information (PII)	Advancing IT and Cybersecurity at Apollo Hospitals: Governance and Management Oversight
	HC-DY-230a.3	(1) Number of data breaches, (2) percentage involving (a) personally identifiable information (PII) only and (b) protected health information (PHI), (3) number of customers affected in each category, (a) PII only and (b) PHI	ESG Scorecard - Governance: Fines/ Settlements/Complaints
	HC-DY-230a.4	Total amount of monetary losses as a result of legal proceedings associated with data security and privacy	ESG Scorecard - Governance: Fines/ Settlements/Complaints
Access for Low-Income Patients	HC-DY-240a.2	Amount of Medicare Disproportionate Share Hospital (DSH) adjustment payments received	Not reported as it is not applicable to AHEL. The US government provides funding to hospitals that treat indigent patients through the Disproportionate Share Hospital programmes, under which facilities are able to receive at least partial compensation.
Quality of Care and Patient Satisfaction	HC-DY-250a.1	Average Hospital Value-Based Purchasing Total Performance Score and domain score, across all facilities	Not reported as it is not applicable to AHEL. In the healthcare industry, pay for performance (P4P), also known as 'value-based purchasing', is a payment model that offers financial incentives to physicians, hospitals, medical groups, and other healthcare providers for meeting certain performance measures.
	HC-DY-250a.2	Number of Serious Reportable Events (SREs) as defined by the National Quality Forum (NQF)	Not reported as it is not applicable to AHEL. National Quality Forum is a US-based non-profit membership organisation that promotes patient protections and healthcare quality through measurement and public reporting.
	HC-DY-250a.3	Hospital-Acquired Condition (HAC) Score per hospital	Not reported as it is not applicable to AHEL. A designation used by Medicare/Medicaid in the US, hospital-acquired condition (HAC) is an undesirable situation or condition that affects a patient and that arose during a stay in a hospital or medical facility.
	HC-DY-250a.4	Excess readmission ratio per hospital	Not Reported

Theme	SASB Indicator	Disclosure	Section/Sub-Section Title
	HC-DY-250a.5	Magnitude of readmissions payment adjustment as part of the Hospital Readmissions Reduction Programme (HRRP)	Not Reported
Management of Controlled Substances	HC-DY-260a.1	Description of policies and practices to manage the number of prescriptions issued for controlled substances	Not Reported
	HC-DY-260a.2	Percentage of controlled substance prescriptions written for which a prescription drug monitoring programme (PDMP) database was queried	Not reported as it is not applicable to AHEL. In the US, prescription monitoring programmes or PDMP are state-run programmes which collect and distribute data about the prescription and dispensation of federally controlled substances and, depending on state requirements, other potentially abusable prescription drugs.
Pricing and Billing Transparency	HC-DY-270a.1	Description of policies or initiatives to ensure that patients are adequately informed about price before undergoing a procedure	Information on 35 procedures publicly available; pricing available at all hospital billing and estimate desks. Pricing for cardiac stents & implants displayed in hospitals
	HC-DY-270a.2	Discussion of how pricing information for services is made publicly available	Information on 35 procedures publicly available; pricing available at all hospital billing and estimate desks. Pricing for cardiac stents and implants displayed in hospitals
	HC-DY-270a.3	Number of the entity's 25 most common services for which pricing information is publicly available, percentage of total services performed (by volume) that these represent	Information on 35 procedures publicly available; pricing available at all hospital billing and estimate desks. Pricing for cardiac stents and implants displayed in hospitals
Employee Health and Safety	HC-DY-320a.1	(1) Total recordable incident rate (TRIR) and (2) days away, restricted, or transferred (DART) rate	BRSR: Principle 3
Employee Recruitment, Development and Retention	HC-DY-330a.1	(1) Voluntary and (2) involuntary turnover rate for: (a) physicians, (b) non-physician health care practitioners, and (c) all other employees	ESG Scorecard - Social: Employee Turnover
	HC-DY-330a.2	Description of talent recruitment and retention efforts for health care practitioners	The People Behind the Care: Performance Appraisal and Career Development
Climate Change Impacts on Human Health and Infrastructure	HC-DY-450a.1	Description of policies and practices to address: (1) the physical risks due to an increased frequency and intensity of extreme weather events and (2) changes in the morbidity and mortality rates of illnesses and diseases, associated with climate change	Environmental Stewardship @ Apollo: Climate change impacts on human health and infrastructure
	HC-DY-450a.2	Percentage of health care facilities that comply with the Centres for Medicare and Medicaid Services (CMS) Emergency Preparedness Rule	Not reported as it is not applicable to AHEL. The CMS Emergency Preparedness Rule is a US scheme for Medicare/Medicaid participating providers.
Fraud and Unnecessary Procedures	HC-DY-510a.1	Total amount of monetary losses as a result of legal proceedings associated with Medicare and Medicaid fraud under the False Claims Act	Not reported as it is not applicable to AHEL. The False Claims Act is an American federal law that imposes liability on persons and companies who defraud governmental programmes.
	HC-DY-000.A	Number of (1) facilities and (2) beds, by type	About Apollo: Our Business at a Glance
	HC-DY-000.B	Number of (1) inpatient admissions and (2) outpatient visits	Accessible and Sustainable Healing

List of Abbreviations

Abbreviation	Definition
AAHRPP	Association for Accreditation of Human Research Protection Programmes
ABC	Anti-Bribery and Corruption
AI	Artificial Intelligence
AMR	Antimicrobial Resistance
AOP	Annual Operating Plan
API	Application Programming Interface
BRM	Business Risk Management
BSI	British Standards Institution
CABG	Coronary Artery Bypass Graft
CDP	(previously) Carbon Disclosure Project
CIE	Clinical Intelligence Engine
CO2	Carbon Dioxide
CoE	Centers of Excellence
CRM	Customer Relationship Management
CSR	Corporate Social Responsibility
CSRS	Corporate Social Responsibility and Sustainability
DIAM	Digital Imaging Adoption Model
EASE	Ethics Adoption Sustainability and Explainability
ERM	Enterprise Risk Management
ESG	Environmental, Social and Governance
ESS	Employee Self-Service
ETP	Effluent Treatment Plant
FHIR	Fast Healthcare Interoperability Resources
FICCI	Federation of Indian Chambers of Commerce & Industry
GHG	Greenhouse Gas
GJ	Giga Joules
GRI	Global Reporting Initiative
HbA1c	Glycated Haemoglobin
HCM	Human Capital Management
HFCs	HydroFluoroCarbons
HIMSS	Healthcare Information and Management Systems Society
HIPAA	Health Insurance Portability and Accountability Act
HIS	Hospital Information System
HL7	Health Level Seven
HVAC	Heating Ventilation and Air Conditioning
IBM	International Business Machines
ICD-10	International Classification of Diseases, Tenth Revision
ILO	International Labour Organisation
INFRAM	Infrastructure Adoption Model
IPSG	International Patient Safety Goals
ISMS	Information Security Management System

Abbreviation	Definition
JCI	Joint Commission International
KL	Kilolitres
KMP	Key Management Personnel
KPIs	Key Performance Indicators
KRA	Key Result Areas
LED	Light Emitting Diode
LOINC	Logical Observation Identifiers Names and Codes
MSDE	Ministry of Skill Development and Entrepreneurship
MT	Metric Tonne
NABH	National Accreditation Board for Hospitals and Healthcare Providers
NABL	National Accreditation Board for Testing and Calibration Laboratories
NCDs	Non-communicable Diseases
NGOs	Non-governmental Organisations
NIST	National Institute of Standards and Technology
NLP	Natural Language Processing
NPS	Net Promoter Score
NRC	Nomination and Remuneration Committee
NSDC	National Skill Development Corporation
O-EMRAM	Outpatient Electronic Medical Record Adoption Model
PACS	Picture Archiving and Communication System
PHC	Primary Health Centres
PHR	Personal Health Record
PIVCC	Peripheral Intra Venous Catheter Care and Complications
POSH	Prevention of Sexual Harassment
PPP	Public-Private Partnerships
PTCA	Percutaneous Transluminal Coronary Angioplasty
R&AC	Refrigeration & Air Conditioning
RO	Reverse Osmosis
RPT	Related Party Transactions
SASB	Sustainability Accounting Standards Board
SDGs	Sustainable Development Goals
SEBI	Securities and Exchange Board of India
SNOMED	Systematised Nomenclature of Medicine
SPOC	Single Point of Contact
TCFD	Taskforce on Climate-related Financial Disclosures
THR	Total Hip Replacement
TKR	Total Knee Replacement
TURP	Transurethral Resection of the Prostate
UHID	Universal Health ID
UKG	Ultimate Kronos Group



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