

DHULIKHEL MEDI-CITY PROJECT



SALIENT FEATURES

| SN | FEATURES | CHARACTERISTICS |
|----------------|---------------------|---------------------------------|
| GENERAL | | |
| 1 | Name of the Project | Dhulikhel Medi-City Project |
| 2 | Sector | Health |
| 3 | Type | Purpose-built medical town/area |

PROJECT LOCATION

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| 1 | Province | Province 3 |
| 2 | Project location | Dhulikhel Municipality (Location Map) |

PROJECT COMPONENT

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| 1 | School of Medical Sciences with Teaching Hospital | School of Medical Sciences with 300-bed university hospital with aim to provide unique health care value across diagnosis, consultation, prescription and tertiary care with optimal combination of technology and professional services delivered by experienced faculty and trained graduates. The school would also have strong research component, especially in the areas of biomedical research and public health. |
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| 2 | Specialised Centre of Excellence for Non-Communicable Diseases | The medi-city would host an interdisciplinary centre of excellence that aims to address non-communicable diseases such as diabetes, cancers, cardiovascular diseases and chronic respiratory diseases through interdisciplinary, innovative and intensive research. The Diabetic Centre would provide one-stop comprehensive approach to the treatment of diabetes and other endocrine disorders. The Cancer Care Centre would use multi-speciality approach focused on cancer prevention, diagnosis, treatment and improving the lives of cancer survivors. With high-end technologies such as CyberKnife VSI Robotic Radiosurgery, VMAT, IGRT, Tomotherapy and other high-end diagnostic and imaging equipment, patient would be treated in a holistic and the best possible way. The Centre for Cardiovascular Diseases would employ comprehensive and holistic approaches and provide services to conditions ranging from prevention and early detection to diagnosis, treatment, heart surgery and rehabilitation. The Centre for Chronic Respiratory Diseases would offer specialised full range of treatment for variety of chronic lung diseases as well as other respiratory problems |
| 3 | Trauma Centre | The centre would provide specialized medical services to patient suffering from traumatic injuries like accidents, gun-shot wounds, major burns, brain injuries etc. |
| 4 | Research and Development Centre | The Centre would bring together researchers from the basic sciences, medical and health sciences, and social sciences, among others to provide leadership in medical education, discovery and healthcare. |
| 5 | Wellness, yoga, Ayurveda and meditation centre | Wellness Centre offering an integrated selection of holistic wellness and spiritually enriching programs and products |
| 6 | Supporting infrastructure | Supporting infrastructure would be built to truly convert the development into a medi-city. Retail mall and spaces would be built to provide one-stop shopping experience for healthcare and more. Infrastructure would also include restaurants, coffee shops, bank, and so on. To cater to the accommodation needs, guest houses, apartments (including serviced), and hotels would be built. Guest houses would cater to those patients who visit for a short period and seek cheap accommodation option. Apartments with cooking and laundry facilities would be less expensive than hotels and cater to those staying for a long period. Hotel would be targeted to those medical tourists who seek high-end facilities and hospitality services. |

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MARKET ASSESSMENT

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| 1 | Demand | Nearly 55% of Nepal's healthcare expenditures are direct outlays by households, as compared to the global average of only 18%. One of the reasons for high rate of "out of the pocket" expenditures can be attributed to rising disposable incomes (due to remittances) and the consuming population's increased awareness about health and well-being. In addition, with increased disposable income, there has also been a rise of Nepali going abroad for the purpose of receiving health services. Globally, long patient waiting list, increasing healthcare cost, limitation on available treatment, complimented with comfort of travel has meant that health care consumers' demand for high quality health services at affordable price has increased. |
| 2 | Supply | With only 0.36 doctors, 1.17 nurses and 0.9 hospitals bed per 1,000 people, the demand supply gap can only be reduced with the addition of more health care facilities. here are significant opportunities for international healthcare providers to meet Nepal's domestic demand. Other possibility lies in the way of joint ventures between national and international hospitals offering advanced technologies and health care facilities. |
| 3 | Opportunity | The global medical tourism market was valued at approximately USD 15.5 billion in 2017 and is expected to generate revenue of around USD 28.0 billion by the end of 2024, growing at a CAGR (compound annual growth rate) of around 8.8% between 2018 and 2024. Nepal has an immense potential to be developed as a global hub for specialised medical tourism services, with areas such ophthalmology already receiving tremendous success. With consideration that Dhulikhel is close to Kathmandu and already has a well-developed and successful medical ecosystem, it could be developed into an area of global medical excellence. This would also be supported by the availability of experienced and qualified Nepali medical professionals with excellent world-class training. Planned development of certain area in Dhulikhel into a medi-city would be particularly rewarding. |

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| DEVELOPMENT MODALITY | | |
| 1 | Development modality | Public Private Partnership |
| 2 | Role of the Government of Nepal | <ul style="list-style-type: none"> ■ Provision of government land, land acquisition, facilitation and project security ■ Facilitating legal approvals/permits ■ Review & monitoring |
| 3 | Role of the Private Sector | <ul style="list-style-type: none"> ■ Plan, design, build, finance and operate the facilities during the Concession Period ■ Collection of revenues from the project during the Concession Period ■ Handover to the Government after the Concession Period |
| 4 | Development Period | <ul style="list-style-type: none"> a. Pre-Construction Period: 6 months b. Financial Closure: 6 months c. Construction Period: 3 years d. Concession Period: 30 years |

INDICATIVE FINANCIALS

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| 1 | Total Project Cost (including Interest During Construction) | ~ USD 74 Million |
| 2 | Interest Rate (including hedging cost) | 12.00% |
| 3 | Project IRR | 16.05% |
| 4 | Equity IRR | 18.28% |