

Bupa Arabia Q3 2021 – Earnings Conference Call & Webcast

December 6th, 2021

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Strategic Framework

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We consistently strive to reflect what we stand for in everything we do



Bupa Arabia's Strategic Framework

Purpose | Helping people live longer, healthier, happier lives

Vision To be the most trusted health insurer in the Kingdom of Saudi Arabia

Our Pillars

People Make the Difference

- Attracting, developing and retaining outstanding people and leaders
- Taking responsibility and accountability
- Creating safe and healthy workplaces
- Celebrating diversity and inclusion

Passionate About Our Customers

- Cementing our partnerships with key customers
- Pursuing breakthrough differentiation and innovation in product and service offerings
- Harnessing digitalization in customer service,
 claims management and operational efficiencies
- Developing new distribution channels while delivering on a seamless customer experience

Strong and Sustainable Performance

- Driving net customer growth, revenue and profit
- Protecting and growing our core customer base
- Enhancing robust risk management and controls
- Embedding corporate responsibility and sustainability to create shared value
- Keeping data safe

















Passionate



Extraordinary

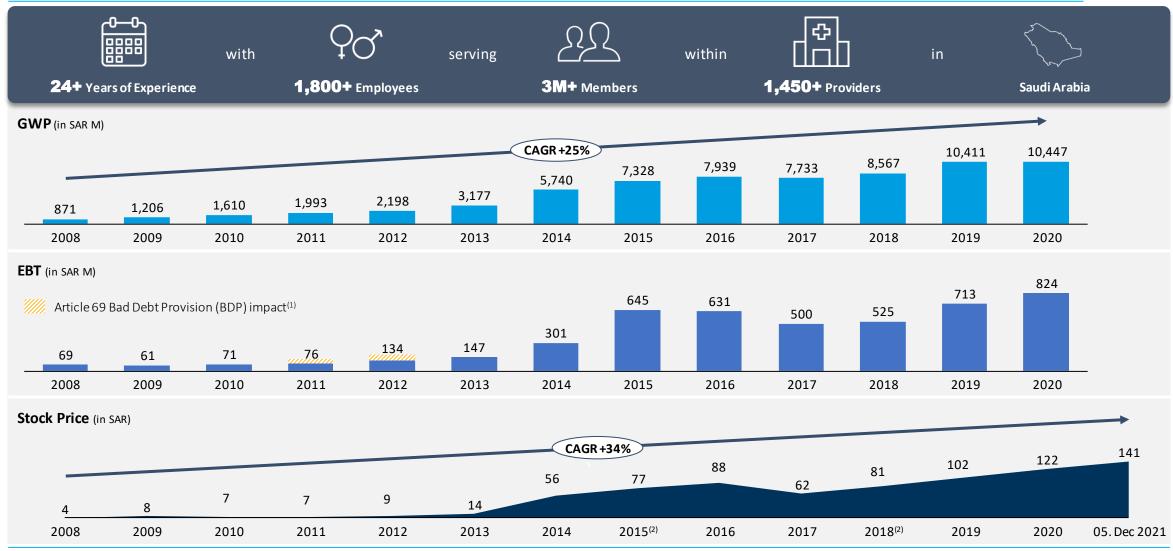


Financial Performance

Bupa Arabia at a Glance



Robust profitability growth & significant value creation for shareholders

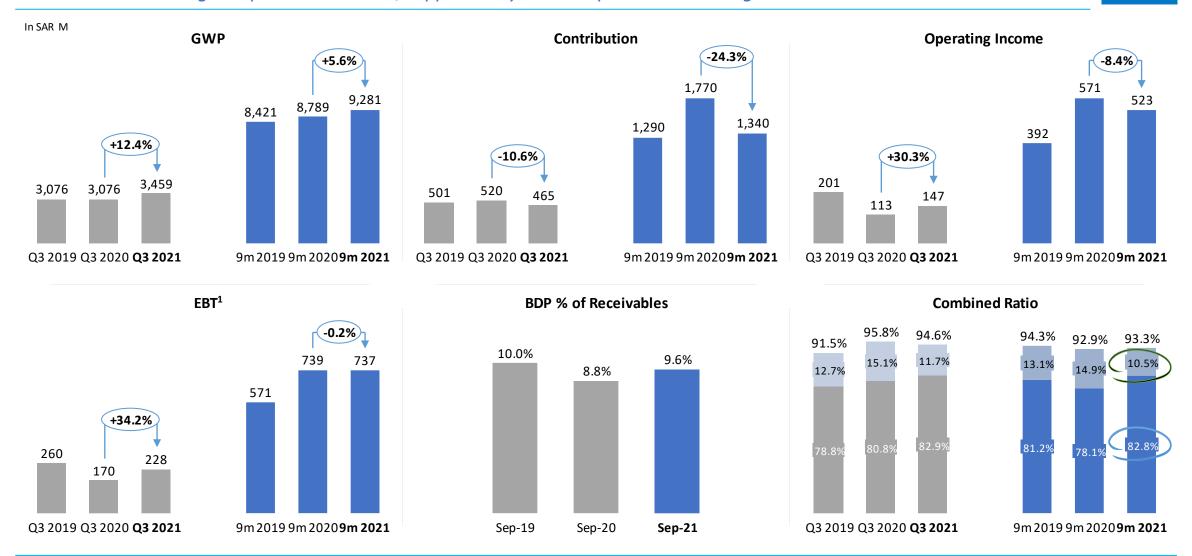


Note(s): (1) Profit fluctuation in 2011 and 2012 is due to BDP treatment in line with interpretation of Article 69, where a BDP provision of SAR 34M was taken in 2011 and BDP recovery of SAR 20M was made in 2012. (2) Impact of increase in capital, by SAR 400M in 2015 and 2018, on the stock price have been reflected retrospectively.

KPI



Flat 9m 2021 earnings despite increased LR, supported by lower expenses and strong investment income results



Note(s): (1) Earnings before taxes and zakat, or EBT, represents net income attributed to the shareholders.

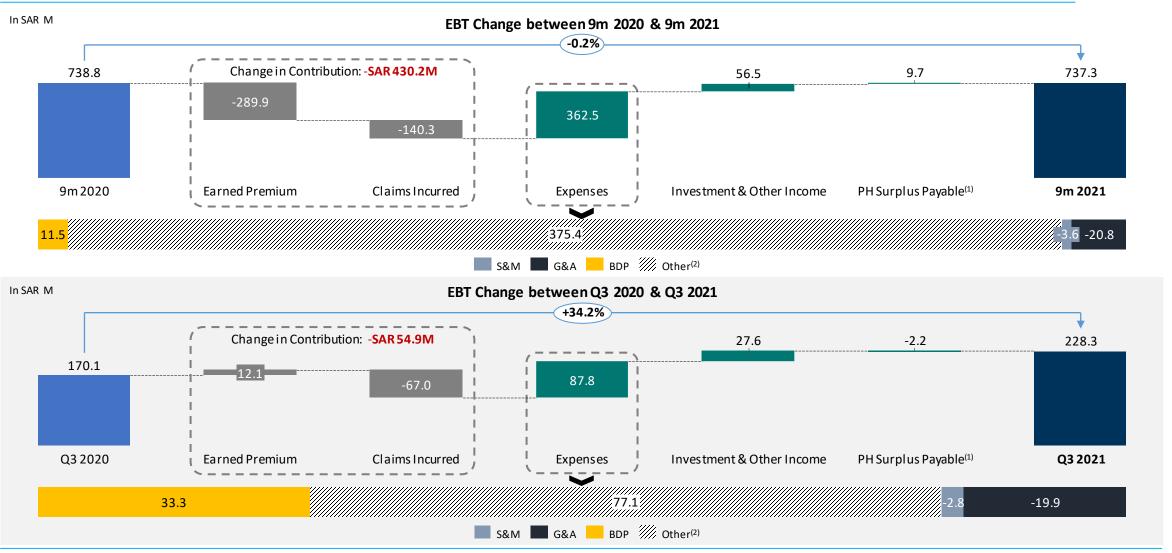




EBT



Flat 9m 2021 EBT as a result of lower expenses and higher investment income

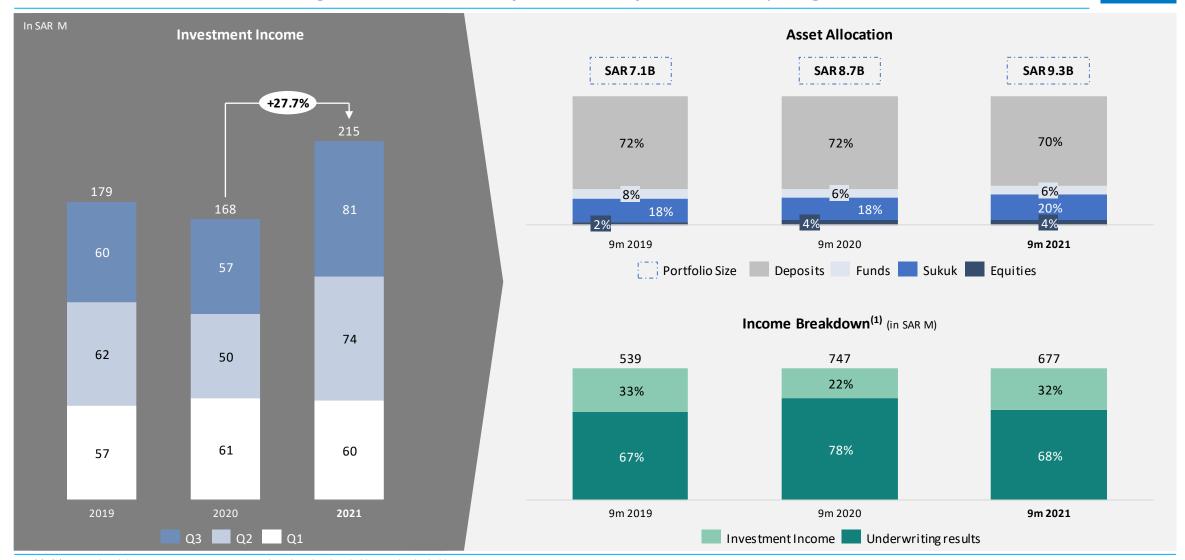


Note(s): (1) PH: Policyholders' share of surplus from insurance operation. (2) Other represents policy acquisition cost (internal & external commission).

Investment Portfolio and Results



Resilient investment income through increased duration, further diversification, and capital gains

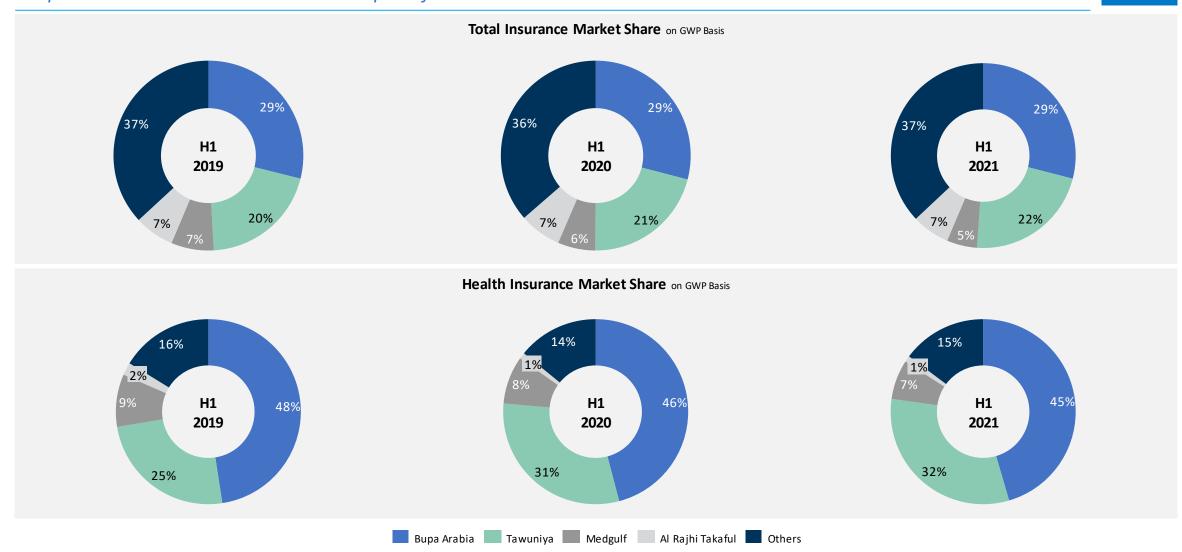


Note(s): (1) Income breakdown represents net income attributed to the shareholders and policyholders.

Market Share & Positioning



Bupa Arabia maintains market leadership as of 9m 2021

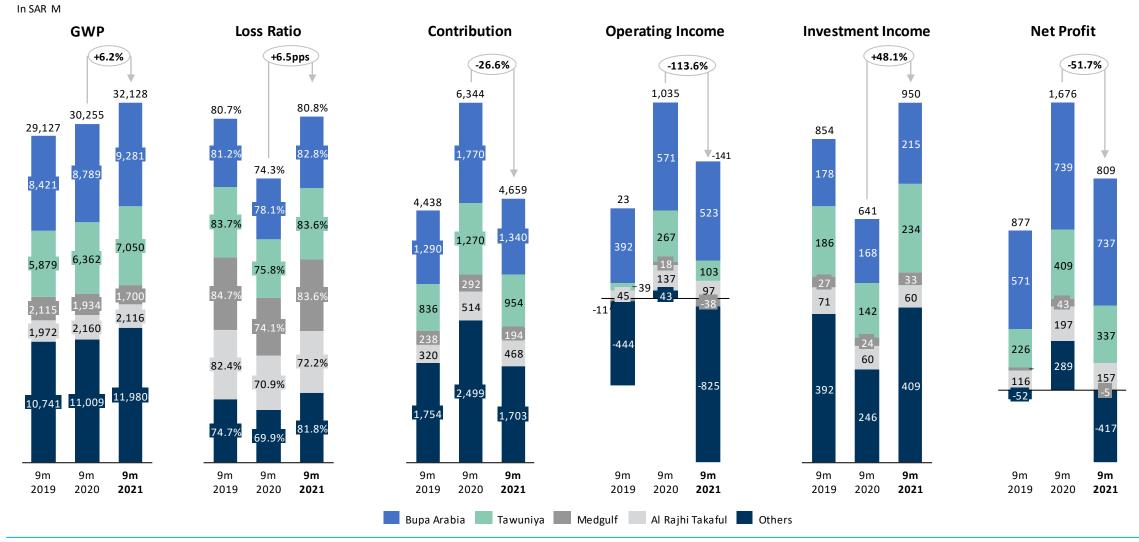


Source(s): Respective insurance companies' filings; Others based on estimates.

Total Insurance Market



Lower profitability due to deteriorated Contribution levels despite significant growth in investment returns & lower expenses

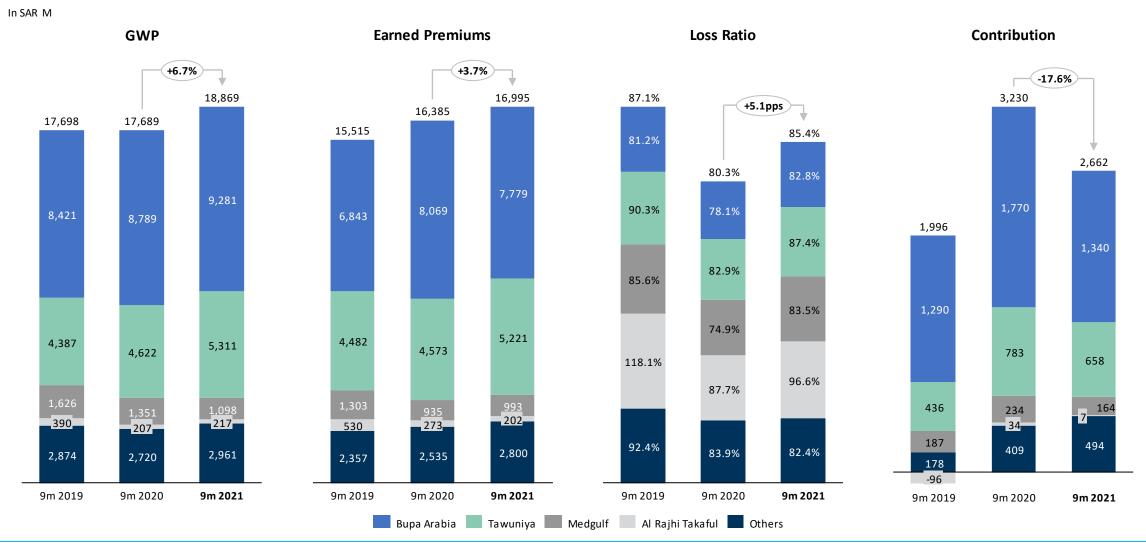


Source(s): Respective insurance companies' filings; Others based on estimates.

Health Insurance Market



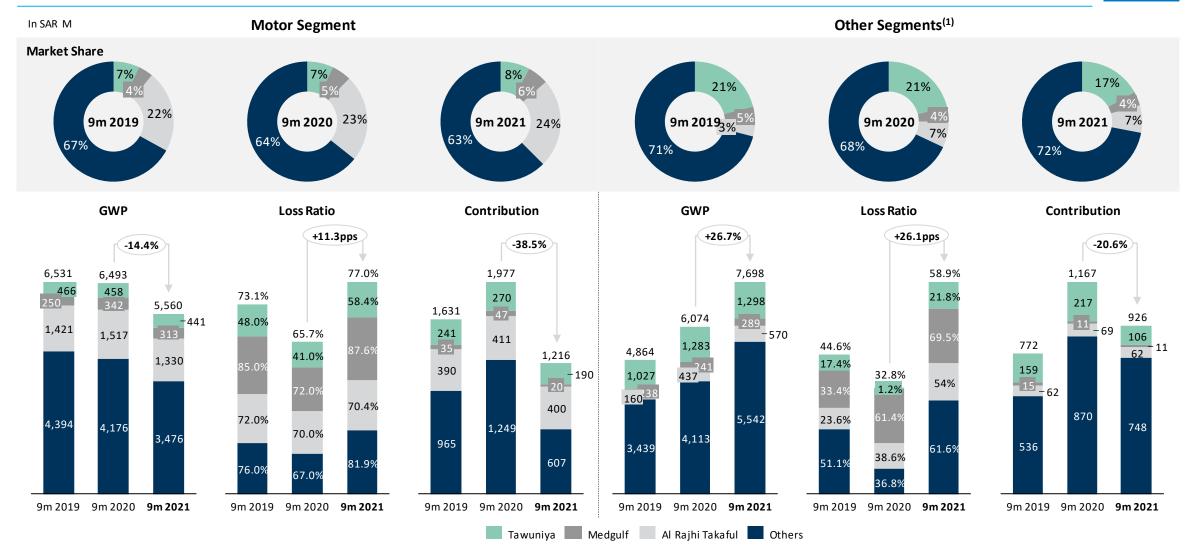
LR deterioration due to claims deferral and price increase challenges, resulting in lower Contribution



Non-health Insurance Market



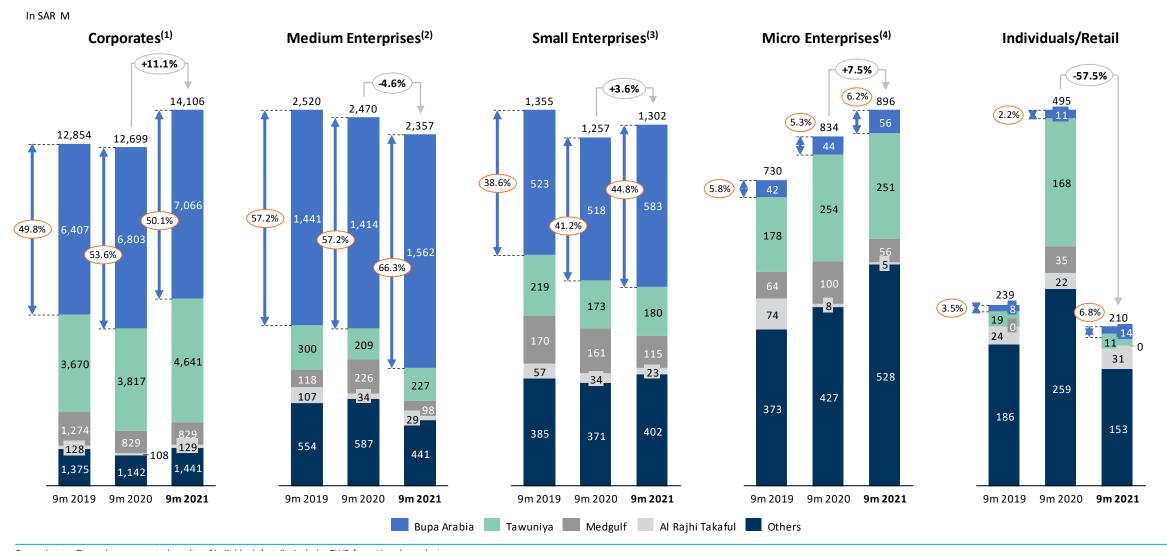
Increased LR in both motor and other segments resulted in significant drop in Contribution



Health Insurance Market – GWP Segmentation



Bupa Arabia continues to be the preferred health insurer for corporates and SMEs



Loss Ratio & Technical Reserves



Bupa Arabia continues to report healthy LR and consistent reserves ratio



Note(s): (1) Outstanding claims represent claims received from hospitals but not settled yet

Source(s): Respective insurance companies' filings

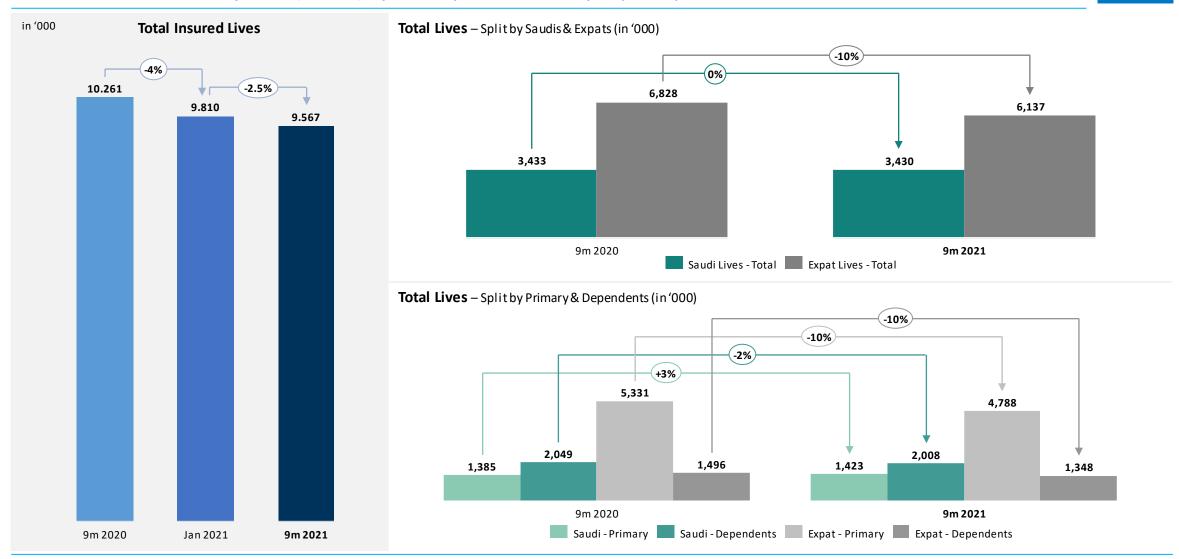


Market Outlook

Saudi Health Insurance Market Trends (1/2)



Insured lives decreased by 2.5% (c.243K) by January 2021 driven by expat departures



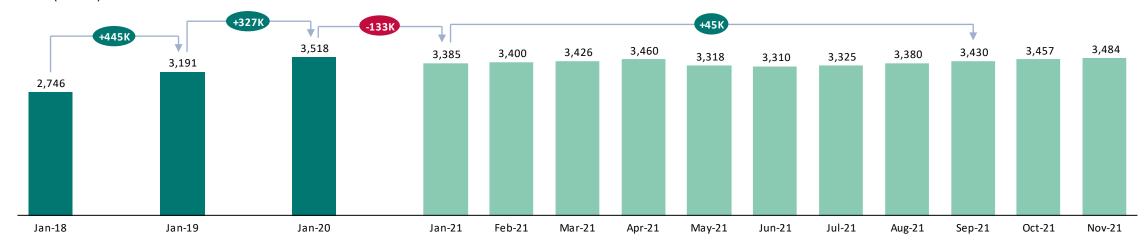
Source(s): GSTAT; GOSI; MoL; CCHI; Bupa Arabia estimates

Saudi Health Insurance Market Trends (2/2)

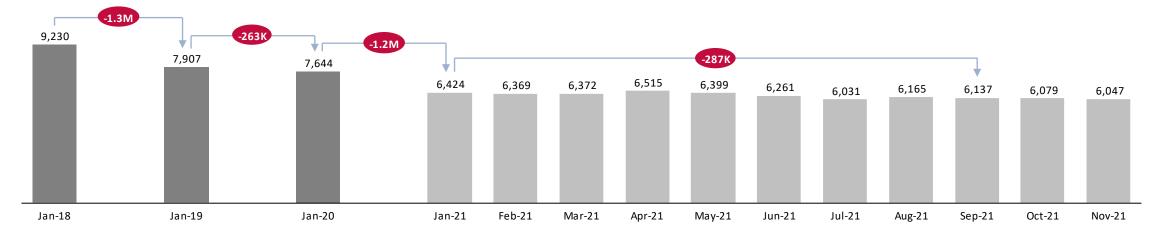


Expat departure slowed down in 2021 coupled with soft Saudi employment

Saudis (in '000)



Expats (in '000)

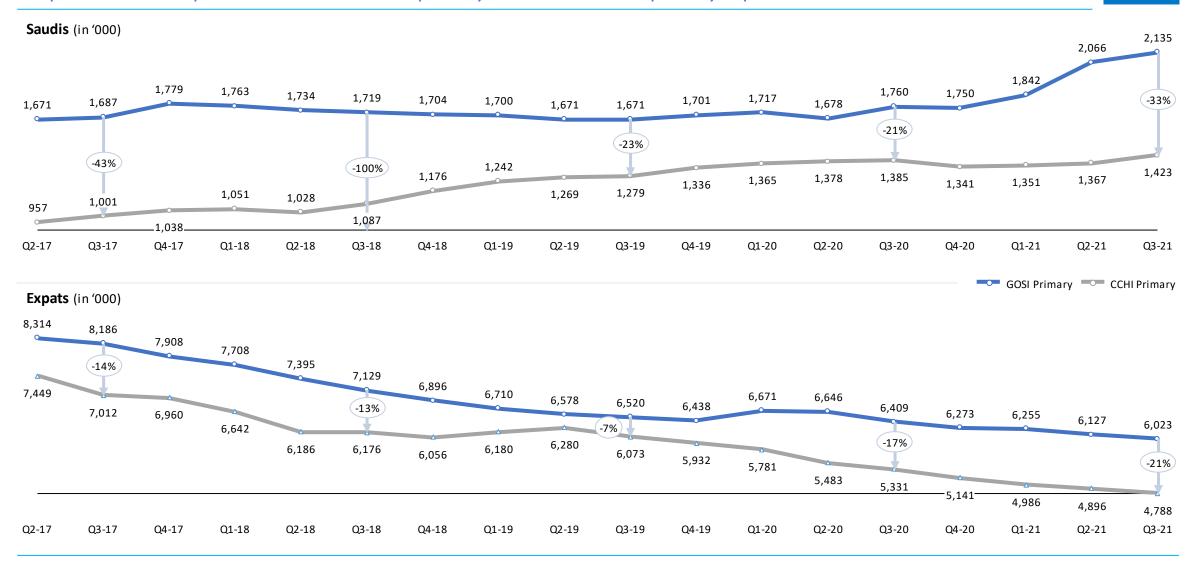


Source(s): CCHI

Gap & Enforcement Explained



Gaps remain in the private sector with ~712K primary Saudis and ~1.2M primary Expats without PMI

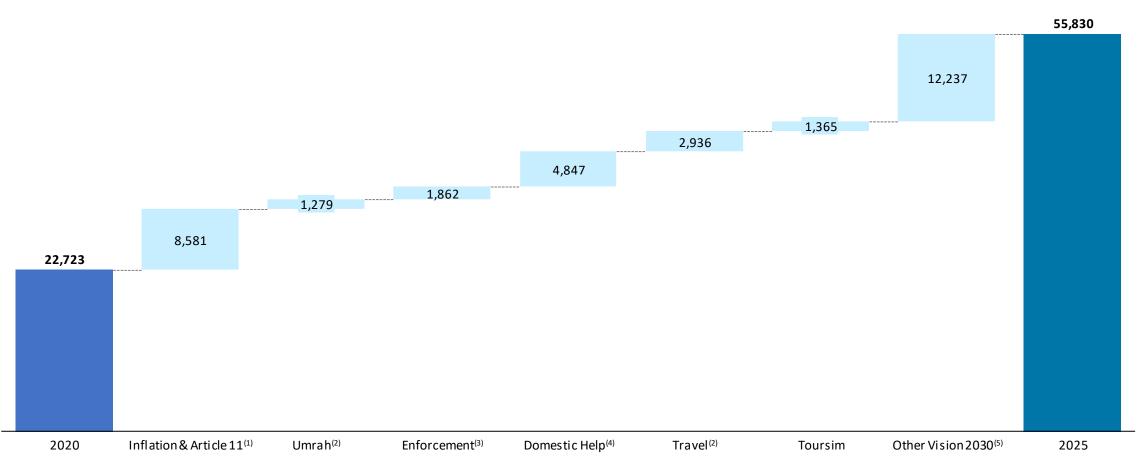


Future Growth Opportunities in Health Insurance



Potential addition of ~SAR 33B in GWP by 2025 mainly due to Inflation & Article 11 impact, and Vision 2030 assumptions





Note(s): (1) Inflation & Article 11 are calculated based on 8.5%, 6% and 5.5% for 2021, 2022 and 2023 respectively and 5% for 2024-25 of annual GWP baseline. (2) Umrah and Travel products are led by Tawuniya. (3) Enforcement refers to the mandatory medical coverage of GOSI Primary and dependents. (4) Domestic Help not currently mandated. (5) Other Vision 2030 is based on two assumptions (i) Growth in the population by a CAGR of 1.8% based on FY20(A) and FY30(F) and (ii) Growth in the % of insurable market from 3 0% in FY20 to 40% in FY25 given the Vision 2030 programs Source(s): CCHI; Bupa Arabia estimates



Other Highlights

PMI Market Challenges



Current PMI market realities and changing regulatory landscape with unprecedented cost implications

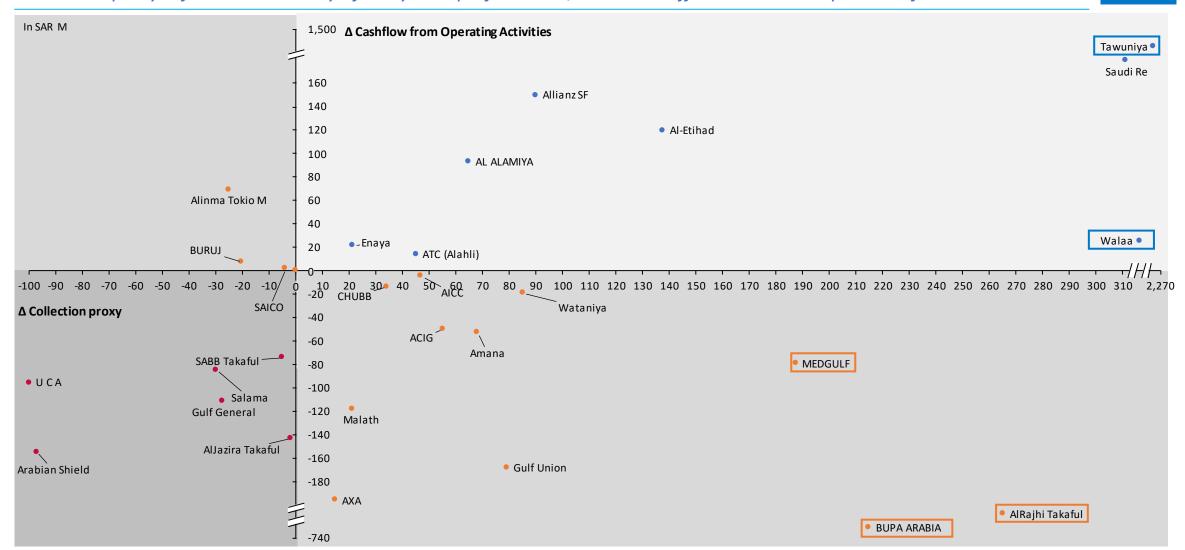


Source(s): Middle East Insurance Review; Respective Companies' Filings; Bupa Arabia Analysis

Insurance Sector's Collection & Cashflow Analysis



Collection proxy reflects abnormality of last year's performance, while one-off transactions impact cashflow



Note(s): (1) Cashflow from operating activities as of 2021 - cashflow from operating activities as of 2020. (2) Collection proxy as of 2021 - Collection proxy as of 2020. Source(s): Bupa Arabia Financials; Respective insurance companies' filings; Others based on estimates

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Business & Regulatory Highlights



Many reforms are being undertaken by the Kingdom that support the insurance sector and is in line with it's 2030 vision



Bupa Arabia announces it has received the no objection of the Saudi Central Bank to establish ("Bupa Arabia Ventures"), to participate and investinenabling and a ctivating the HealthTech and InsurTechs ectors to benefit from the digital transformation supported by Vision 2030 and the Saudi Financial Sector Development Program.



Bupa Arabia and Okadoc announces a strategic partnership to enhance digital healthcare customer offerings as part of our overall digital transformation strategy.



SAMA invites the public, specialists and interested individuals to provide their views and observations on the draft of Insurtech rules within (30) days, noting that all views and observations will be under consideration for adopting the final version of these rules. The draft rules aims to enable Insurtech companies to execute their work in accordance with a regulatory framework that featured flexibility of commitment, inclusiveness of organizational fundamentals and innovation



The Saudi Central Bank (SAMA) has issued regulations for forming and managing health insurance risk pools through brokers. In a statement carried by the Saudi Press Agency, the central bank said that rules aim to regulate and develop the mechanism of forming and managing health insurance risk pools and providing access to suitable insurance coverage at low costs.



The Council of Health Insurance and the National Health Information Center, in cooperation with the Ministry of Health, launched NPHIES platform to facilitate the exchange of health information for patients. As an interest of the Council of Health Insurance to ensure the importance for the entities to follow the integration and release plan, the Council of Health Insurance obliges the entities of the first wave to comply, starting from the beginning of September 2021.



The Council of Health Insurance and the General Organization for Social Insurance have signed a cooperation agreement for the exchange of data to reach a viable sector motivated by quality and digital transformation. This Convention is part of the strengthening of the obligation in social and health insurance through the preservation of the rights of the beneficiary and provides the tools to facilitate dealings, thus contributing to enabling the parties to the insurance relationship to obtain their rights from full care and protection of high quality and efficiency.



The Health Insurance Council launches the (Dhaman Fund), whose approval was issued earlier by the Council Board of Directors. The establishment of the Dhaman Fund aims to cover expenses that exceed SAR 500,000 the insurance coverage specified under the health insurance policy for the specified facilities in accordance with specific procedures and controls in coordination between the Council and the Central Bank of Saudi Arabia.

Achievements & Awards



Bupa Arabia has been recognized with multiple awards in 2021, including the LinkedIn Talent Awards for MENA region





Q&A

Speakers:



Nader Ashoor Chief Financial Officer



Ali Sheneamer
Chief Business Development Officer



Ahmed Bajunaid
Director
Asset Management & Business Advisory



Mohsen Jawhar
Head
Business Advisory & Investor Relations

Thank you





Appendix



Board of Directors & Chief Executive Team

Board of Directors





Engr. Loay Hisham Nazer Chairman



David Martin Fletcher Vice-Chairman



Martin Houston Board Member



Dr. Abdulla Elyas Board Member - Independent



Huda M. Bin GhosonBoard Member - Independent



Ziad AlgwaizBoard Member - Independent



Nigel SullivanBoard Member



Tal Hisham Nazer Board Member



Nader Ashoor Board Member

Chief Executive Team





Tal Hisham Nazer Chief Executive Officer



Nader Ashoor
Chief Financial Officer



Ali Sheneamer Chief Business Development Officer



Tariq AlamoudiChief Human Resources Officer



Mohamed El Missaoui Chief Operations Officer



Atef Mufti Chief Sales Officer



Accounting Standards

Premium Deficiency Reserve & Deferred Acquisition Cost Accounting Standards



PDR is a regulatory requirement (US GAAP and other regulations) set to cover the additional emerging losses when the Unearned Premium Reserve (UPR) is deemed not sufficient to cover the unexpired policies' reserve runoff.

Reference: ASC 944-60-25-4 (formerly FAS 60 – Par. 33) "A premium deficiency shall be recognized if the sum of expected claim costs and claim adjustment expenses, expected dividends to policyholders, unamortized acquisition costs, and maintenance costs exceeds related unearned premiums."

DAC corresponds to the acquisition costs related to the insurers' written premiums which are expended over the term of the policy as premiums are earned. The unearned portion of DAC is capitalized and recognized as an asset on the insurer's balance sheet.

Below are sample calculations:

Balance sheet impact (GAAP)

Scenario	Unearned premiums	PV total expected costs	DAC	Expected profit/(loss)	Premium deficiency
Α	\$10,000	\$7,391	\$2,500	\$109	\$0
В	\$10,000	\$9,701	\$2,500	(\$2,201)	\$2,201
С	\$10,000	\$12,010	\$2,500	(\$4,510)	\$4,510

■ PDR = Unearned premiums - PV expected costs - DAC; when loss is expected on a particular policy

Calculating premium deficiency (GAAP)

Scenario	DAC balance	Premium deficiency	New DAC balance	PDR liability
Α	\$2,500	\$0	\$2,500	-
В	\$2,500	\$2,201	\$299	-
С	\$2,500	\$4,510	-	\$2,010

- If DAC balance > Premium deficiency, then New DAC = DAC balance Premium deficiency
- If DAC balance < Premium deficiency, then PDR liability = Premium deficiency—DAC



Abbreviations & Glossary

Abbreviations



BDP Bad Debt Provision

CCHI Council Of Cooperative Health Insurance

CIPD Chartered Institute of Personnel Development

CMA Capital Market Authority
CMT Crisis Management Team
CR Commercial Registration
EBT Earnings Before Tax

G&A General And Administrative Expenses
GAZT General Authority for Zakat and Tax
GOSI General Organization for Social Insurance

GWP Gross Written Premium

IFM International Finance Magazine
KPI Key Performance Indicator
MoC Ministry of Commerce
MOE Ministry of Education

MoH Ministry of Health
MOL Ministry of Labor
NEP Net Earned Premiums

NHIC National Center for Health Information

OCP Outstanding Claims Provision (Known As Technical Reserve)

PMI Performance Market Indicator

PPS Percentage Points

Q Quarter

SAMA Saudi Arabian Monetary Agency
S&M Selling And Marketing Expenses
SME Small & Medium Enterprises
TTM Trailing Twelve Months

YoY Year on Year 9m Nine Months



<u>Understanding our Financial Statements</u>

A customer buys a one-year medical insurance policy for SR 5,000 on July 1, 2020. The coverage ends on June 30, 2021. The annual reporting period for the business in this example is for the year ended December 31, 2020.

Α	Gross written premium (GWP)	5,000		When a customer buys a health insurance policy on July 1, the total premium for the duration of the contract assuming no additions or deletion is SR 5,000. This amount is classified as Gross Written Premium (GWP). Market share is measured using GWP.
В	Premiums ceded to reinsurers	-50	A*Reinsurance rate	The portion of risk that is transferred to a reinsurance company in exchange for a stated premium. In this case the reinsurer has been paid SR 50 and will be responsible for a specified risk according to the agreement with the reinsurer (reinsurance is mandatory per SAMA regulations)
С	Net written premium (NWP)	4950	A-B	The total value of the written premium that will be earned by the insurer during the duration of the contract (12 months) between July 1, 2020, and June 30, 2021
D	Unearned premium (UEP)	2475	C*50%	The portion of the premium that has not been earned in the reporting period and is recorded as a liability on the insurer's balance sheet. Since the contract was written on 1 July 2020, only half of the premium is earned in 2020
E	Net earned premium (NEP)	2475	C*50%	The net earned portion represents the expired i.e., completed amount of the net written premium; The portion of the total premium that was exposed to a potential claim loss during the completed period. If a customer is enrolled mid-year, as is the case in this example, then half of the exposure will be in the year he enrolled (2020) and half will be reflected in the year after (2021)



F	Gross claims paid	1825		The actual amount of all paid claims on behalf of the customers. There are two types of claims; 1. Provider claims on direct billing and to be refunded to the customer 2. Reimbursement claims requested by the member A claim is a request for payment received by the insurer to pay for services that were provided by a health care professional to an insured member. A claim may be sent by a medical provider at which the treatment was offered as a provider claim, or directly submitted by the insured member as a reimbursement claim.
G	Reinsurance share	-25	F*%	The portion of claims the reinsurers are responsible for in exchange for certain premium (as mentioned in Reinsurance ceded -B)
Н	Net claims paid	1800	F-G	Net amounts paid for claims requests after deducting the reinsurer's share
I	Outstanding claims provision (OCP)	200	Based on actuarial estimates	The outstanding claims provision incudes the "Incurred But Not Reported" claims (IBNR), which is defined as all claims that have taken place but have not been reported yet, either because the claim was not yet received by the insurer, or it has been received but not yet processed or paid by the insurer. This is also referred to as an insurer's claims reserve and is recorded as a liability on the insurer's balance sheet. Before final payment to providers, the insurer adjudicates the claims. This is the process by which the claim is compared to the patient's health plan benefits to verify that the required information is available to process the claim, that the claim is not a duplicate, that the insurer's rules and procedures have been followed, and that the procedures performed, or the services provided are for covered benefits



J	Net claims incurred	2000	H+I	All payment requests received from hospitals or members to pay for a certain service or projected to be received for the duration of the earned portion of the contract (July 1, 2020, to Dec 31, 2020)
K	Underwriting result (Contribution)	475	E-J	The surplus of net earned premium less net claims incurred is the contribution. It measures profitability of the policy before accounting for overhead costs.
L	Costs and expenses	250		Includes selling & marketing, general & administration expenses, and regulatory levies, etc.
М	Underlying trading results	725	K-L (excluding non-recurring item)	·
N	Surplus from insurance operations	225	K-L	The excess amounts from the earned premium less the medical costs and all expenses (including non-recurring items) plus other income (i.e., insurance operations, investment income and all other sundry income)
0	Distribution of surplus (Cooperative Distribution)	22.5	N*10%	The SAMA regulatory required surplus to be distributed to policyholders is 10% of the surplus from insurance operations and the full surplus is distributed as follows: Transfer to Policyholders' payables 10% Transfer to Shareholders' operation 90%
Ratios	Loss ratio (LR)	81%	J/E	The net claims incurred divided by the net earned premium. It measures the % of medical claims cost versus the earned portion of all policyholders
	Expense ratio Combined ratio	10% 91%	L/E (J+L)/E	The operating expenses divided by the net earned premium The loss ratio plus the expense ratio. It is a proxy for the surplus from insurance operations



Understanding Bupa Arabia's Balance Sheet

Goodwill Goodwill represents the intangible asset which resulted from the Bupa Arabia purchase of the Saudi Health insurance portfolio from Bupa

Middle East Limited E.C. in accordance with the assessment by SAMA and the prescribed SAMA guidelines of 2008. The insurance portfolio

transfer agreement was completed during 2009

Fixed Assets Fixed assets include the company's investment in new retail outlets, IT, and fixtures, equipment, machinery, etc.

Cash & Investments All cash in the banks, investments, and statutory deposits

Working Capital The working capital represents the operating liquidity available to the organization. The current assets include the receivables, net of bad

debt provision, deferred acquisition costs, and other pre-paid expenses. The current liabilities include the technical reserves of outstanding claims provision (OCP) and unearned premium (UEP) and other accrued liabilities. Unlike many businesses, working capital is not favourable

in an insurance business. This is because the premium is usually received before the claim's liabilities are incurred and ultimately paid

Equity Shareholders' equity represents the paid-up capital, plus retained earnings, statutory reserve, and is net of accumulated Zakat/Income tax

charges since inception

Borrowings Generally speaking, insurance companies do not need the support of bank borrowings due to the favourable funding of working capital by

customers

