

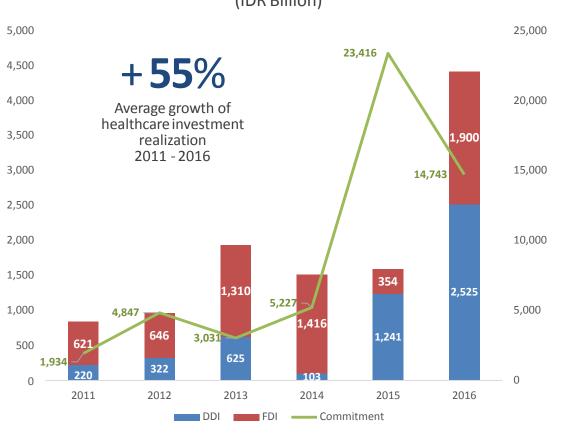


Investment Opportunity in Healthcare Sectors



Growing fast

Healthcare Investment Commitment & Realization (IDR Billion)

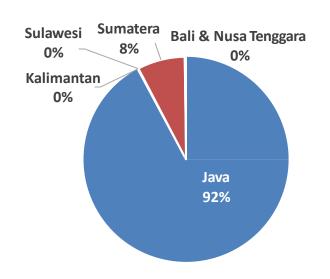


	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016
Growth	15%	100%	-21%	5%	177%



Healthcare Investment Realization Location Spread

2011 - 2016

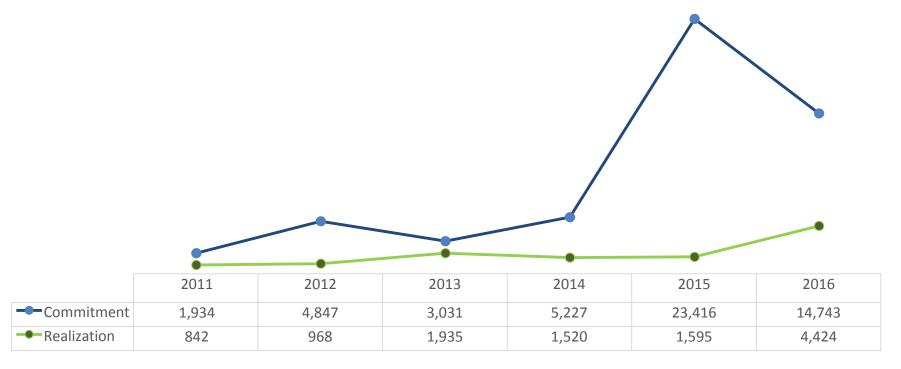


The Investment Coordinating Board of the Republic of Indonesia



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Investment Commitment and Realization (2011-2016)



Investment Commitment (IDR Billion)

	2011	2012	2013	2014	2015	2016
DDI	482	3,365	1,747	3,986	22,020	13,877
FDI	1,453	1,482	1,284	1,240	1,397	866
Total	1,934	4,847	3,031	5,227	23,416	14,743

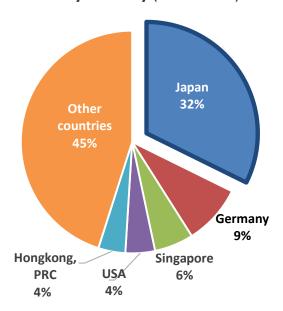
Investment Realization (IDR Billion)

	2011	2012	2013	2014	2015	2016
DDI	220	322	625	103	1,241	2,525
FDI	621	646	1,310	1,416	354	1,900
Total	842	968	1,935	1,520	1,595	4,424

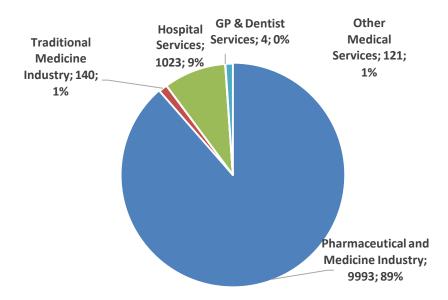


Investment Commitment and Realization (2011-2016)

Healthcare Investment Realization by Country (IDR Billion)



Healthcare Investment Realization by Sector (IDR Billion)





Top Healthcare Companies in Indonesia (2011-2016)

No	Company Name	Country	Sector	Investment Value (USD Thousand)
1	KAO INDONESIA	Japan	Household Supplies	86,537
2	MEIJI INDONESIA PHARMACEUTICAL INDUSTRIES	Japan	Pharmaceutical Industry	66,712
3	HISAMITSU PHARMA INDONESIA	Japan	Pharmaceutical Industry	23,380
4	ETHICA INDUSTRI FARMASI	Germany	Pharmaceutical Industry	21,891
5	OTSUKA INDONESIA	Japan	Pharmaceutical Industry	21,478
6	MERCK SHARP DOHME PHARMA Tbk	USA	Pharmaceutical Industry	19,821
7	BAYER INDONESIA	Germany	Pharmaceutical Industry	17,529
8	BOEHRINGER INGELHEIM INDONESIA	Germany	Pharmaceutical Industry	17,002
9	ROHTO LABORATORIES INDONESIA	Japan	Pharmaceutical Industry	16,691



One of the Target in National Medium Term Development Plan

Healthcare Development: Implementation of *Indonesia Sehat* Program

Goals:

- 1. Improving mother and children's health status
- 2. Increasing disease control
- 3. Improving access and quality of basic healthcare service and reference especially in remote, border, or underdeveloped region
- 4. Extending the scope of universal healthcare through *Kartu Indonesia Sehat* and the quality of healthcare fund management
- 5. Fulfilling the needs of medical personnel, medicine, and vaccine
- 6. Increasing the responsiveness of healthcare system

Reformation is focused on strengthening of quality primary healthcare

Source: RPJMN Book I, Bappenas, 2014

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HealthcareinIndonesia

Key Players





Hospitals

Lippo Group (Siloam Hospitals), Mitra Keluarga Hospitals, Mayapada Hospitals, etc



Pharmaceuticals

Kalbe Farma, Indo Farma, Kimia Farma, Bayer, Pfizer, Glaxo Smith Kline



Health Insurance

BPJS Kesehatan, Allianz, Prudential, InHealth,



Healthcare Investment Opportunity



Opportunity in Healthcare Industry for Investors

Enhancing healthcare area coverage & quality



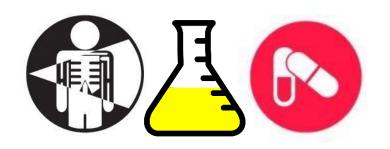
Human resource expertise in healthcare

General Practitioners, Specialist, Managers



Wide scope of healthcare sectors

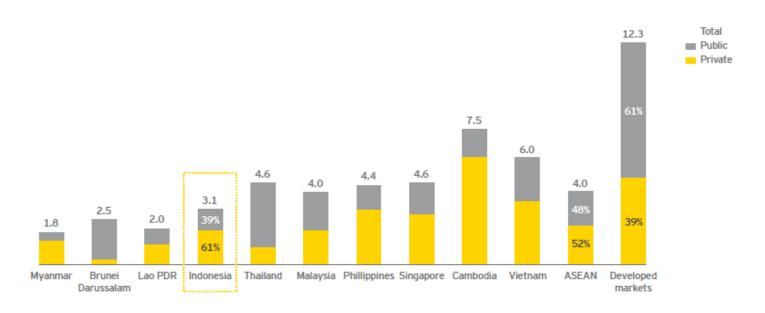
Pharmaceutical, medical equipment, laboratory





One of the lowest healthcare expenditure in ASEAN





Source: World Bank and OECD, 2013



Rise of Middle Class and Demographic Bonus

168_{million}

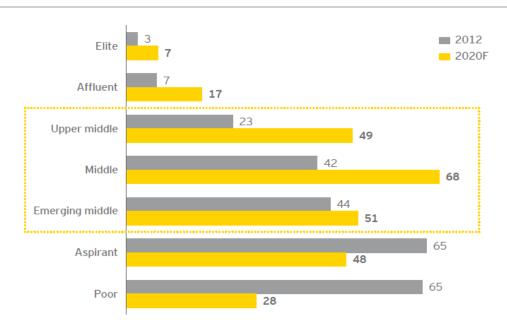
Middle class Consumer in 2020

Rising middle class will drive the demand for affordable quality healthcare

Source: BCG

Rise of the middle class as estimated by BCG (2012 and 2020F)

Chart 4

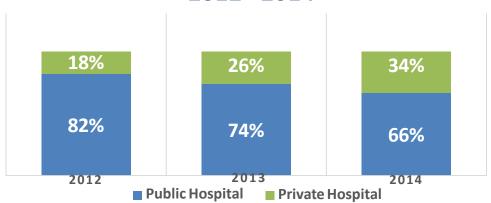


Source: BCG and Indonesian Central Bureau for Statistics (BPS); F - Forecast



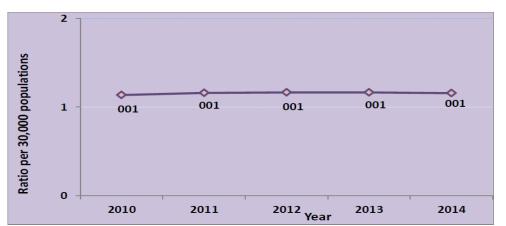
Lack of Healthcare Infrastructure

Trend on Number of Hospital by Ownership 2012 - 2014



Room for Private Investors in Hospital Ownership

Ratio of Healthcare Center per 30,000 Populations 2010-2014



Health center growth is unequal to population growth

1.16

Ratio of health center per 30,000 population

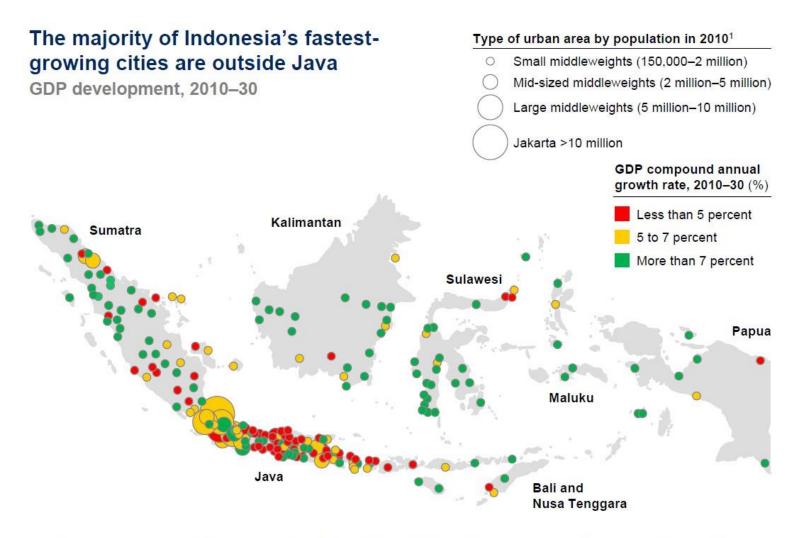
Source: Ministry of Health, 2015

Source: Ministry of Health, 2015

IndonesiaInvestment Coordinatina_Roard



Developing Healthcare Facilities in Second-tier Cities



¹ Urban areas are aggregated areas consisting of cities (kota) and districts (kapupaten) rather than specific city jurisdictions. SOURCE: 2010 Population Census, Indonesia's Central Bureau of Statistics; McKinsey Global Institute analysis



Case Study: Private Hospital in Sukabumi

PT Koi Indah Internusa

Nomor IP : No. 3021/1/IP/PMA/2016 : Aktivitas rumah sakit swasta

Lokasi : Kab. Sukabumi, Jawa Barat

Nilai Investasi : Rp 300.000.000.000

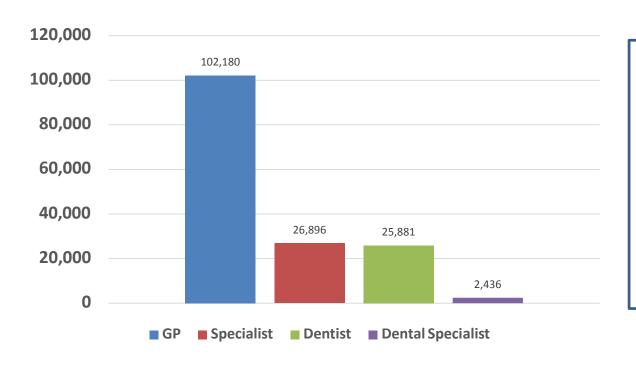
Pemegang Saham: Korea Selatan (67%), Indonesia (33%)

- Rencana pembangunan Rumah Sakit Kelas C dengan kapasitas 300 tempat tidur dengan skema pembiayaan BOT (*Build, Operate, Transfer*) melalui kontrak selama 30 tahun dengan Pemerintah Daerah Sukabumi.
- Lahan yang digunakan adalah lahan milik Pemerintah Daerah Sukabumi. Hasil dari MoU antara perusahaan dengan Pemerintah Daerah Sukabumi di Korea Selatan.
- Skema BOT tersebut merupakan salah satu bentuk Kerjasama Pemerintah dengan Badan Usaha (KPBU). Pemerintah Daerah Sukabumi telah mengajukan proposal ke Kementerian Dalam Negeri terkait adanya rencana investasi dengan skema BOT
- Akhir November 2016, perusahaan menandatangani perjanjian dengan Pemerintah Daerah Sukabumi setelah adanya surat persetujuan dari Kementerian Dalam Negeri.
- Perusahaan akan mulai melakukan pembangunan pada awal tahun 2017



Demand of Medical Personnel

General Practitioners, Specialist, Nurse, Managers



Average ratio of GP per 100.000 population in 2014

16,18

< Target 40

Source: Ministry of Health, 2015

- Ministry of Health's target ratio of GP per 100.000 population is 40.
- The largest number of health personnel in Indonesia are nurses and midwives.

IndonesiaUniversalHealthCare(UHC)



Roadmap to Universal Health Coverage

present-day to 2019

As of Jan 2014	2015	2016	2017	2018	2019
~122 Mn. under mgmt. of BPJS I	-				257.5 Mn. people covered by UHC
Private sector coverage (according to company size): - 20% large - 20% medium - 10% small - 10% micro companies	Private sector coverage (according to company size): - 50% large - 50% medium - 30% small - 25% micro Companies	All JAMKESDA members will be covered by BPJS Private sector target coverage (according to company size): -75% of large -75% medium -50% small -40% micro companies	Private sector coverage (according to company size): - 100% large - 100% medium - 70% small - 60% micro companies	Private sector coverage (according to company size): - 100% large - 100% medium - 100% small - 80% micro companies	Target 100% of Indonesia population
~15 Mn. people still covered by JAMKESDA					

Jamkesmas, operational since 2005, already has ~76 Mn. enrolled that will expand to ~122 Mn. by Jan '14 when UHC starts under BPJS I

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Note: All statements are projections and estimates as set out in the roadmap (2012-2019) document



Regulation & Incentives

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Negative Investment List – Healthcare Sectors

Presidential Regulation No.44/2016

	Business Fields	Max. FDI	Incer	ntives
			Import Duty	Tax Allowance
1	Medicinal raw material industry	100%	٧	٧
2	Medical supporting activity: - Medical equipment rental - Clinical laboratory - Medical check-up clinic	100%	٧	٧
3	Medicinal / pharmaceutical material crops and plantation (with obligation of 20% ownership for plasma plantation)	95%		
4	Patent medicine industry	85%	٧	
5	Medical equipment testing institution	67%	٧	
6	Medical supporting activity: Pest control/Fumigation service	67%	٧	
7	Medical and ambulatory evacuation service	67%	٧	
8	Hospital (Max. 70% for ASEAN investors for all capital cities in Eastern Indonesia except Makassar & Manado)	67%	٧	

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Negative Investment List – Healthcare Sectors

Presidential Regulation No.44/2016

	Business Fields	Max. FDI	Incentives	
			Import Duty	Tax Allowance
9	Basic and special medical clinics: specialized medical services clinic (CPC 9312), specialized dental service clinic (CPC 9312), nursing service with CPC 93191, other hospital service (medical rehabilitation clinic) (Max. 70% for ASEAN investors for all capital cities in Eastern Indonesia except Makassar & Manado)	67%	٧	
10	Medical equipment supplier	49%	٧	
11	Acupuncture service facility	49%	٧	
12	Medical equipment industry : Class A	33% (Special licence from Ministry of Health)	٧	
13	Medical equipment industry : Class B	Special licence	٧	
14	Medical equipment industry : Class C	from Ministry of	٧	
15	Medical equipment industry : Class D	Health -	alth V	

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Negative Investment List – Healthcare Sectors

Presidential Regulation No.44/2016

			Incentives		
	Business Fields	Max. FDI ndustry) *	Import Duty	Tax Allowance	
16	Narcotic manufacturer (pharmaceutical industry) *				
17	Narcotic pharmaceutical wholesale trade *	Special licence from Ministry of Health			
18	Bank and Laboratory of tissue and cellular		٧		

Incentives



TAX ALLOWANCE

(Government Regulation No.18/2015)

30% of investment value

Reduction of corporate
net income tax for 6 years
(5% each year).

business segments
Eligible for tax
allowance, expanded from
129 segments in the
previous regulation.

Under **certain requirements** among others: investment **value** or **export** orientation, **manpower** absorption, **local content**, and project **location** (especially outside Java island).

IMPORT DUTY FACILITY

(MoF Regulation No.176/PMK.011/2009)

Machineries, goods, materials for production

2 years import duty exemption or **4 years** for companies using locally-produced machines (min.30%).

Industries

Which produce **goods** and/or **services**, including:

- 1. Tourism and culture
- 2. Public transportation
- 3. Public health services
- 4. Mining
- 5. Construction
- 6. Telecommunication
- 7. Port