CONFÍN COMPREHENSIVE CENTER

FOR HEALTH, REHABILITATION AND LEISURE

Physical rehabilitation, medical specialties and vacation-style recovery

Project V1 | USD 116.6 million | 30 months of investment



November 2026

CONFÍN Foundation – Ecuador

CONFÍN Ecuador Infrastructure Program | Code: CONFÍN_ECUADOR_SALUD1/2026

EXECUTIVE SUMMARY

CONFÍN COMPREHENSIVE HEALTH, REHABILITATION AND LEISURE CENTER

Physical rehabilitation, medical specialties and vacation-style recovery | CONFÍN Foundation – Ecuador

A health and wellness complex with a mixed operating model and modular execution



1. Value proposition

The CONFÍN Comprehensive Health, Rehabilitation and Leisure Center is a health and wellness infrastructure project integrated into the CONFÍN Ecuador Infrastructure Program. On 10 hectares in a temperate Andean valley, it brings together a **120-bed rehabilitation and specialty hospital**, a **medical care center** and a **residential and leisure complex with 200 accommodation units**, to offer medical management and full recovery combined with rest and vacation.

The investment of **USD 116.6 million** covers the entire cycle: land, studies and designs, construction, equipment, vehicles and logistics, supervision, administration and start-up. The amount is a mobilization target whose realization depends on financing agreements and disbursements.

Two illustrative alternatives for the concept

Aspect	Option A · Terraced campus	Option B · Wellness village
Idea	Compact buildings on three terraces that take advantage of the valley slope	Courtyard-garden hospital and a hotel designed as a village of low-rise cottages
Layout	Hotel on the upper terrace, hospital on the middle one; access, medical center and lake on the lower terrace	Hospital at the back, plaza and lodge at the center, cottages around the thermal lagoon
Experience	Valley views and a clear separation between clinical and guest flows	Human scale, vacation atmosphere and barrier-free, ground-level routes
Advantages	Smaller built footprint; adapts to sloping sites	Cottages can be built in batches; natural accessibility
To consider	Earthworks and retaining walls; elevators and ramps between terraces	Requires flatter land and more site development

Both alternatives keep the same program (120 beds and 200 accommodation units) and the same budget; the choice depends on the final site. The illustrations are conceptual and do not constitute an architectural design.

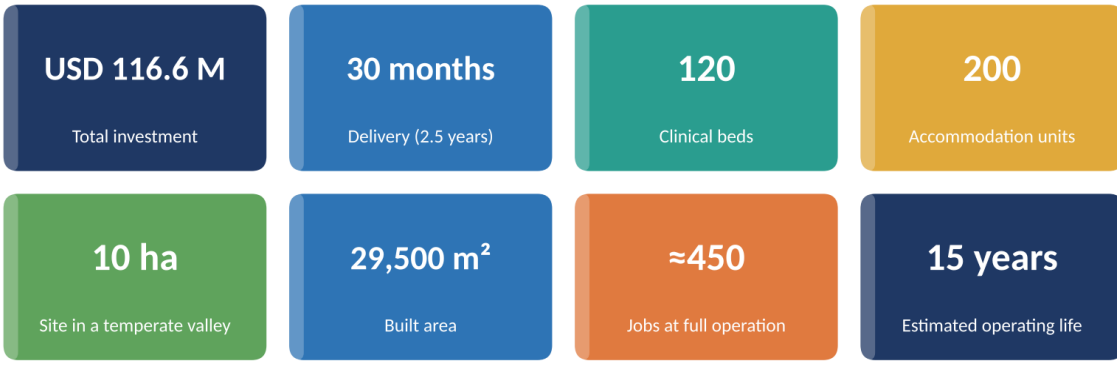


Figure 1. Key project indicators.

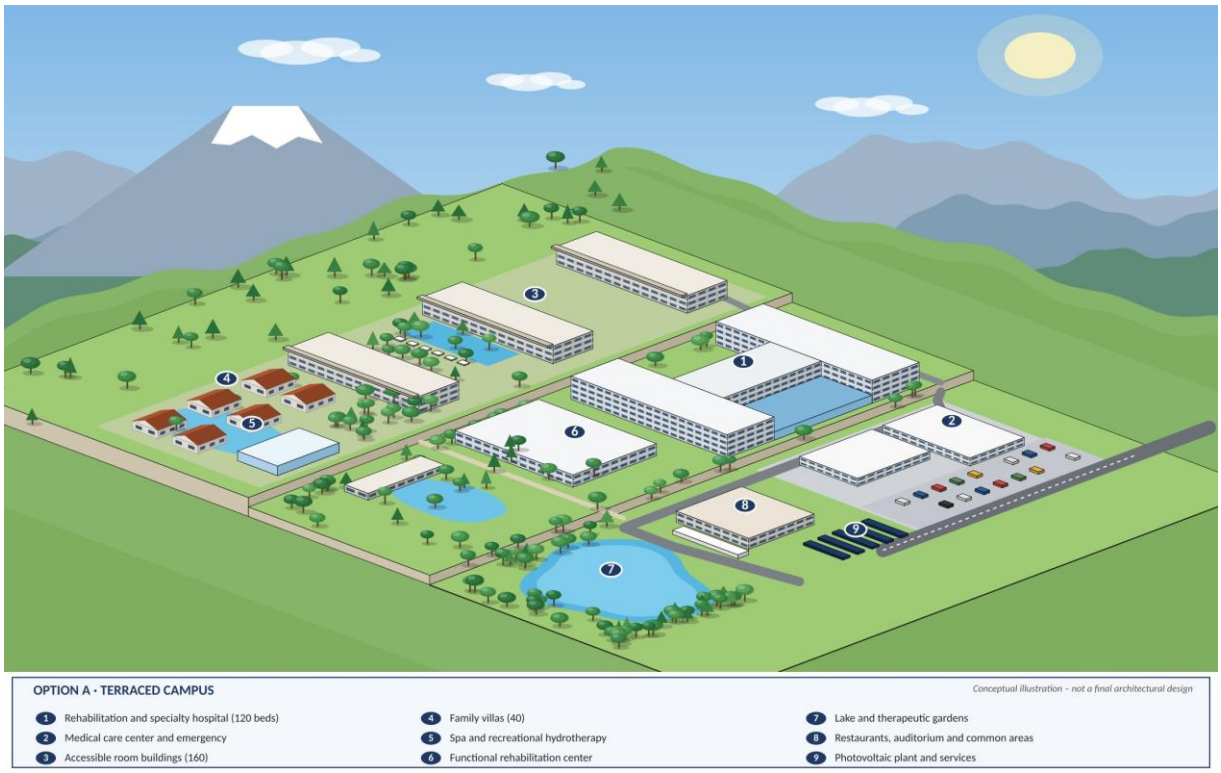


Figure 2. Option A – Terraced campus: hospital, hotel and services on three levels along the valley slope (conceptual illustration).

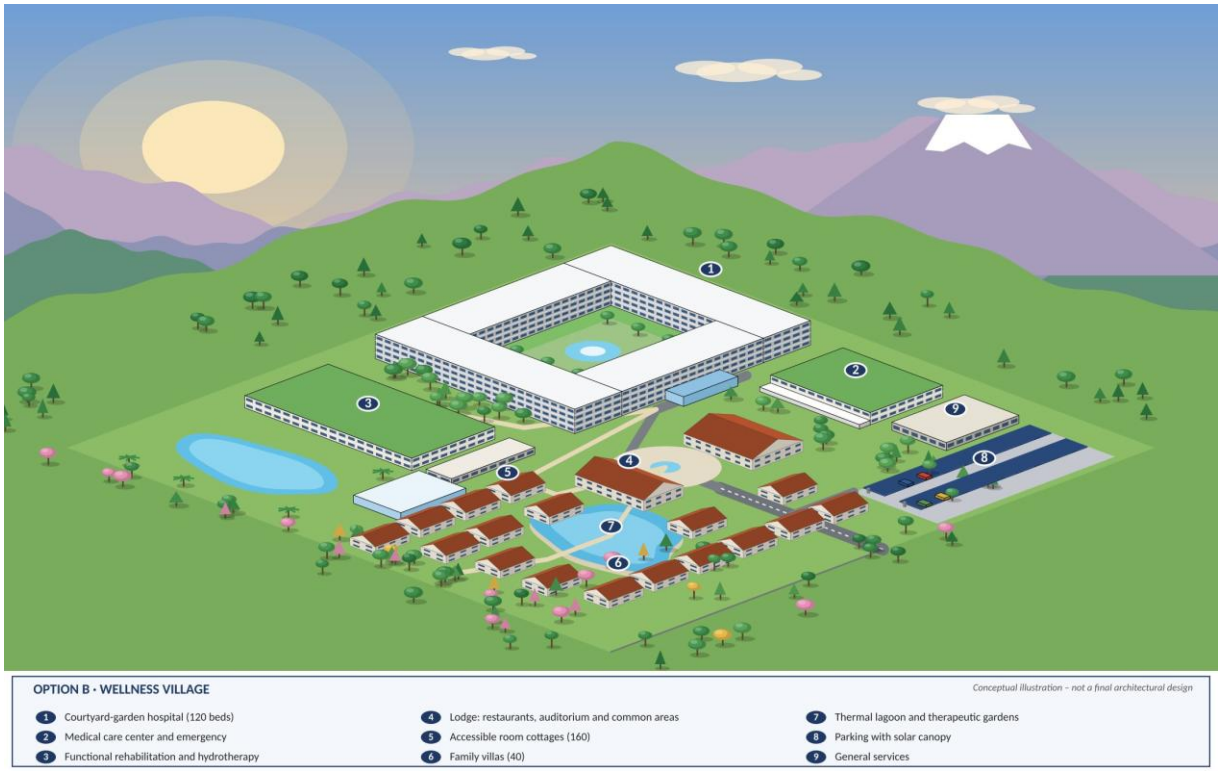


Figure 3. Option B – Wellness village: courtyard-garden hospital and cottages around a thermal lagoon (conceptual illustration).

2. Flexible financing and mixed operating model

The project has a modular structure that allows it to be financed in full, in phases or in investment packages, through partial or full disbursements (tranches) by one or several funders. Its operation combines health tourism, partnerships with the public sector and a solidarity fund that facilitates access for low-income people.

Contributions can be linked to phases, components or years (Year 1: USD 26.9 M; Year 2: USD 63.3 M; Year 3, first half: USD 26.5 M). **Phase 1 (USD 80.2 M)** includes the land, the complete designs, the medical center, the hospital with about 80% of its capacity equipped and about 100 rooms; **Phase 2 (USD 36.3 M)** completes the remaining beds, rooms, villas and spa.

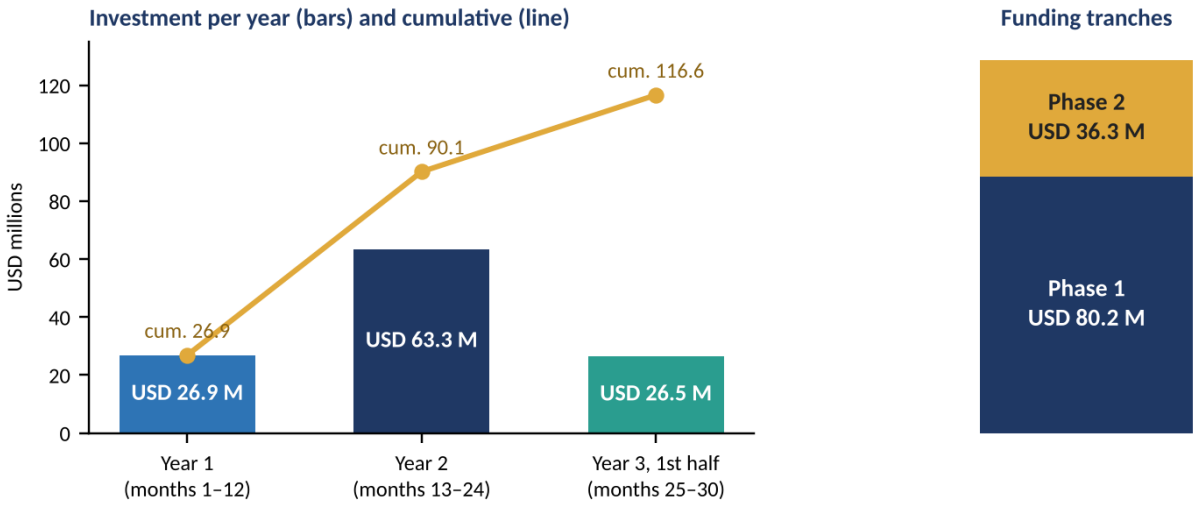


Figure 4. Investment per year and funding tranches (USD millions; values rounded to one decimal).

3. The project in figures

Total investment	USD 116,596,105 (includes VAT, administration, contingencies and start-up)
Timeline and useful life	30 months of investment (2.5 years); estimated operating life of 15 years
Clinical capacity	120 beds (80 rehabilitation, 24 specialties and post-surgical, 8 intermediate care and 8 intensive care), 4 operating rooms, 20 consulting rooms and 24-hour emergency care
Accommodation and leisure	160 accessible rooms, 40 family villas, spa and hydrotherapy, restaurants and auditorium
Area	10 ha of land and about 29,500 m² of built area
Equipment and logistics	MRI, CT scanner, rehabilitation robotics, 250 IT devices and a fleet of 10 vehicle types, with an air ambulance under contract
Location	Temperate valley in the Ecuadorian Andes (eastern Pichincha, Imbabura or Tungurahua)
Jobs and management	About 450 jobs at full operation; managed by the CONFÍN Foundation

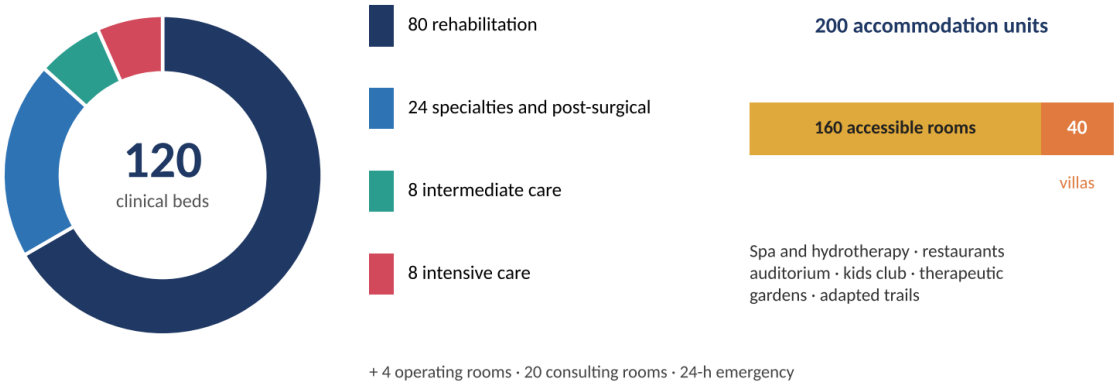


Figure 5. Clinical and accommodation capacity.

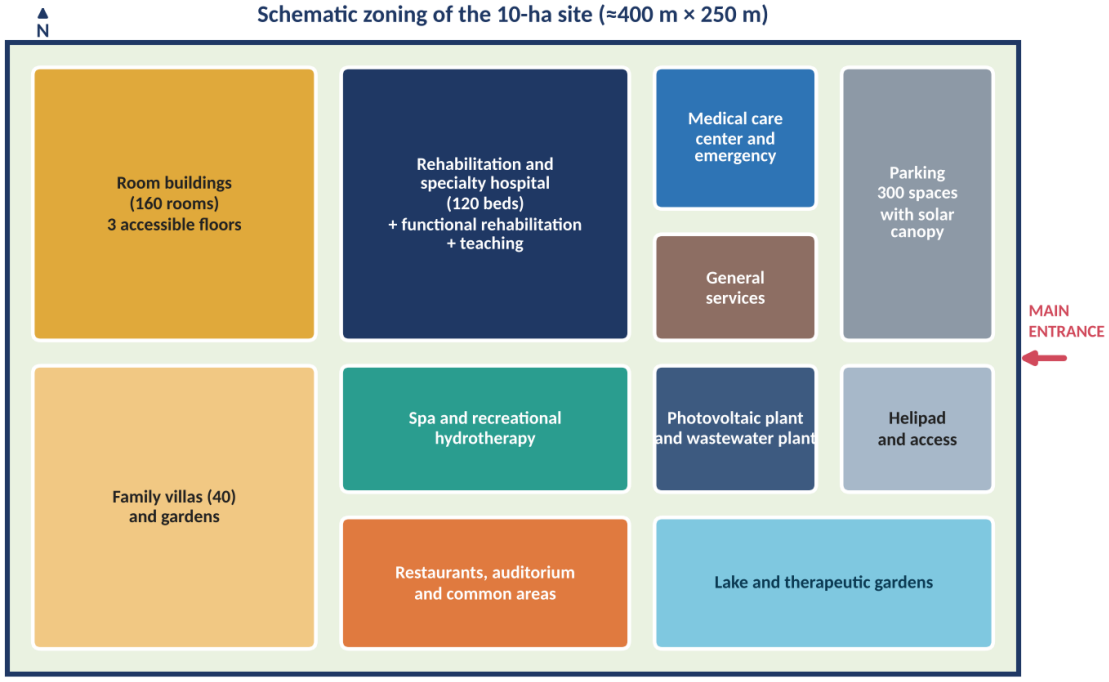


Figure 6. Schematic zoning of the 10-ha site (components and their final location are adjusted to the chosen site).

4. Ten investment components

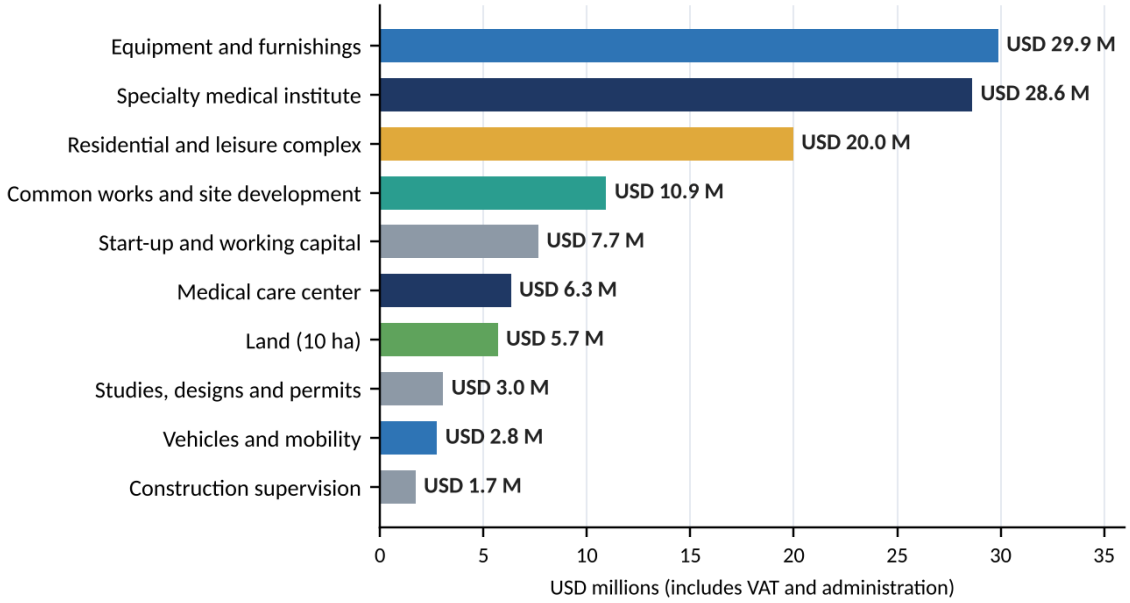


Figure 7. Total cost by component (USD millions, includes VAT and administration).

Typology	Component	Scope	Total cost (USD M)
8	Land	10 ha	5.7
10	Studies, designs and permits	Feasibility, geotechnical studies, designs and licenses	3.0
12	Specialty medical and rehabilitation institute	120 beds, 4 operating rooms, teaching	28.6
6	Medical care center	20 consulting rooms and 24-h emergency	6.3
4	Residential and leisure complex	160 rooms and 40 villas	20.0
4, 6, 12	Common works and site development	Services, roads, utilities and treatment plant	10.9
9	Equipment and furnishings	Medical, rehabilitation, hotel and ICT	29.9
9	Vehicles and mobility	10 vehicle types	2.8
11	Construction supervision	Supervision and audit	1.7
—	Start-up and working capital	Pre-operational and ramp-up	7.7
	Total		**116.6**

The components correspond to typologies 4, 6, 8, 9, 10, 11 and 12 of the program; common works are distributed among typologies 4, 6 and 12. Values include VAT and administration and are rounded to one decimal.

Direct cost (USD 93.6 M): land, studies, civil works, equipment, vehicles, supervision and start-up.

VAT (USD 12.3 M) and **administration and audit, 12.9% of civil works (USD 6.4 M).**

Contingencies (USD 2.5 M), import clearance of equipment and land transfer costs (USD 1.8 M).

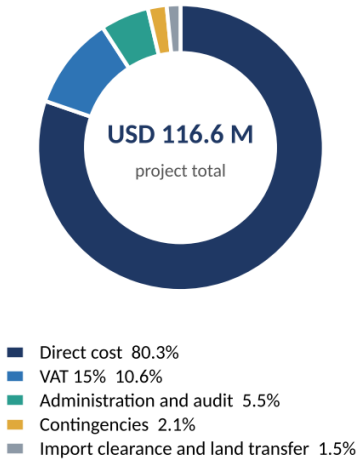


Figure 8. Composition of the project budget.

5. Versatile execution and cooperation across levels of government

The project integrates land, designs, construction, equipment, supervision and start-up into a single cycle, and can be executed by phases and by years according to each funder's capacity, with the support of the Central Government and the Decentralized Autonomous Governments (GAD).

- **Accelerated execution in 30 months:** designs, permits, works and equipment purchases overlap (fast-track), with early purchase of long-lead equipment and quarterly progress milestones.
- **Execution modalities:** those of the program (direct, with GADs, with cooperation agencies, with specialized firms and community-based).
- **Agreements:** framework or specific, with technical reports, supervision and a closing certificate.
- **Scenarios:** delayed and accelerated by ±5% per year, with the possibility of expanding the project in phases.

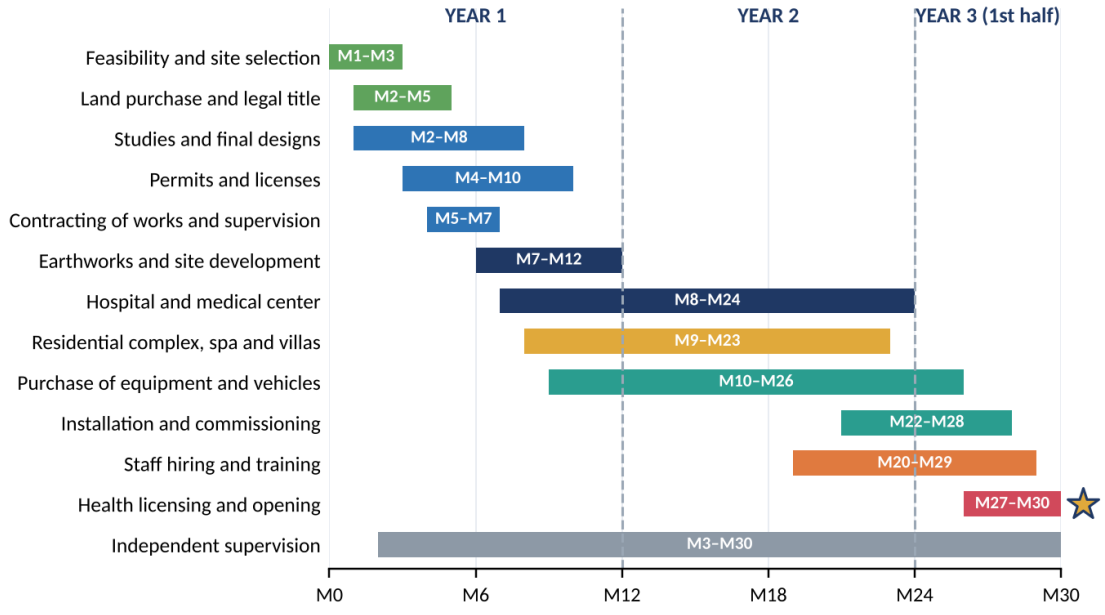


Figure 9. 30-month execution schedule (the star marks the opening).

6. Mixed operating model

- **Health tourism (main line):** rehabilitation, surgery and convalescence packages for international patients and insurers.
- **Partnerships:** referral agreements with the Ministry of Public Health (MSP), IESS, ISSFA and ISSPOL, and with GADs, universities and non-governmental organizations.
- **Solidarity fund:** subsidized treatments for vulnerable populations, financed with a percentage of profits, donations and cooperation.
- **Hospitality:** operated separately from the clinic, with a possible specialized operator under a management contract.

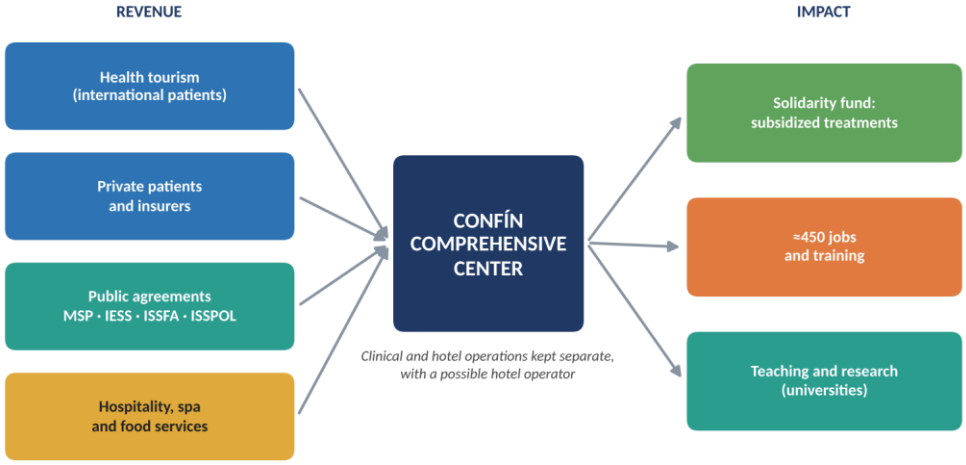


Figure 10. Mixed operating model: revenue sources and impact.

7. Verifiable results, transparency and risk control

Independent supervision of 28 months, from month 3 until opening, an external technical and financial audit, and administration with audit (12.9% of civil works) accompany the entire execution, with periodic reports to funders.

The project is aligned with quality, environmental, safety and anti-bribery standards (ISO 9001, 14001, 45001 and 37001), with international health accreditation (JCI or CARF) and with EDGE-type sustainable building certification.

The risks of licensing, soil and seismicity, prices of imported equipment, the accelerated schedule, occupancy and human talent have defined mitigation measures.

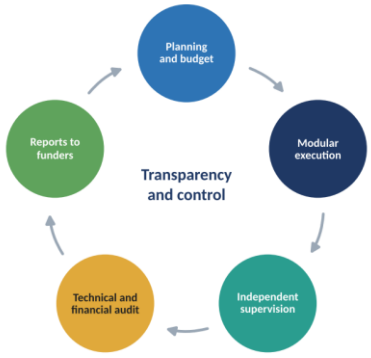


Figure 11. Project control and transparency cycle.

8. Strategic invitation to financial cooperation

We invite donors, multilateral organizations, impact investors and strategic partners to consider participating in the full project, in one phase, or in one or several investment packages. **Financing the CONFÍN Comprehensive Center means turning resources into a health, employment and wellness asset, with management coordinated across the different levels of government and backed by supervision, audit and transparency.**

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