DaVita Inc. and its representatives may from time to time make written and oral forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995 ("PSLRA"), including statements in this presentation, filings with the Securities and Exchange Commission and in meetings with investors and analysts. All such statements in or during this presentation of other meetings, other than statements of historical fact, are forward-looking statements and are intended to be covered by the safe harbor for "forward-looking statements" provided by the PSLRA. Without limiting the foregoing, any statements including the words "expect," "intend," "will," "plan," "anticipate," "believe," "forecast," "guidance," "outlook," "goals," "target" and similar expressions are intended to identify forward-looking statements.

These forward-looking statements could include but are not limited to statements that identify uncertainties or trends or discuss the possible future effects of uncertainties or trends and statements regarding our future operations, financial condition and prospects, such as our ability to complete the DMG sale and the anticipated timing of the closing of the DMG sale transaction, the expected use of proceeds from the DMG sale transaction and our anticipated liquidity following the closing of the DMG sale transaction, and how we intend to operate our business and the types of investments we might pursue after the DMG sale transaction closes, the expected impact of federal tax reform legislation, expectations regarding changes in patient charitable premium assistance and healthcare policy generally and the impact of such changes, including on our future operating income and other impacts of these policy changes, expectations for potential federal and state legislation, regulation or ballot or other initiatives, including healthcare-related and labor-related legislation, regulation or ballot or other initiatives, our anticipated advocacy costs, our expectations related to our stock repurchase program, expectations for the profitability of our international operations, expectations for home dialysis, our strategic initiatives and integrated care, anticipated cost reductions, expectations for treatment mix, treatment growth rates, revenue per treatment, expense growth, levels of the provision for uncollectible accounts receivable, operating income, adjusted operating income, cash flow, operating cash flow, free cash flow, estimated tax rates, estimated charges and accruals, capital expenditures, leverage ratios, the development of new dialysis centers and dialysis center acquisitions, government and commercial payment rates, Medicare reimbursement outlook, revenue estimating risk and the impact of our level of indebtedness on our financial performance, including earnings per share.

Our actual results could differ materially from any forward-looking statements due to numerous factors that involve substantial known and unknown risks and uncertainties. These risks and uncertainties include, among other things, and are qualified in their entirety by reference to the full text of those risk factors in our SEC filings relating to: the concentration of profits generated by higher-paying commercial payor plans for which there is continued downward pressure on average realized payment rates, and a reduction in the number of patients under such plans, including as a result of restrictions or prohibitions on the use or availability of charitable premium assistance, which may result in the loss of revenues or patients, or our making incorrect assumptions about such trends. We also face a number of other factors that may result in reduced operating margins, lower return on capital or result in losses, including, among other things, the impact of any reductions in reimbursement rates, including Medicare Advantage rates, which may be less than we anticipate; uncertainties related to our use of the proceeds from the DMG sale transaction and other closing conditions of the DMG sale transaction and continued disruption in connection with the DMG sale transaction, and as such are intended to be covered by the safe harbor for "forward-looking statements" provided by the PSLRA. Without limiting the foregoing, any statements including the words "expect," "intend," "will," "plan," "anticipate," "believe," "forecast," "guidance," "outlook," "goals," "target" and similar expressions are intended to identify forward-looking statements.

We do not provide guidance for Kidney Care consolidated operating income on a GAAP basis nor a reconciliation of the forward-looking non-GAAP financial measures to the most directly comparable GAAP financial measures on a forward-looking basis because we are unable to predict certain items contained in the GAAP measures without unreasonable efforts. The following non-GAAP financial measures do not include certain items, including goodwill and other asset impairment charges, restructuring charges, gain (loss) on ownership changes and foreign currency fluctuations.
What is the DMG Transaction Status?

• $4.34 billion purchase price

• FTC review ongoing

• Working towards Q1 2019 close

• Expect substantial OI improvement in 2019

1) Subject to certain adjustments under the purchase agreement
Summary

Industry & Company

- Essential service
- Steady growth industry
- Integrated care potential
- Strong competitive position
- Clinical & operational excellence
- Strong, consistent cash flow

Risks / Uncertainties

- Healthcare policy
- Unions
- Commercial profitability
Stable Historical Industry Growth

US dialysis patients (000s)

2000 to 2016 Industry CAGR: 3.8%

1) Source: USRDS
Stable Historical Industry Growth

US dialysis patients (000s)

2000 to 2016 Industry CAGR: 3.8%

2011 to 2016 DaVita CAGR: 5.7%

1) Source: USRDS
### 10-Year % Mortality Improvement

<table>
<thead>
<tr>
<th>Condition</th>
<th>Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHF</td>
<td>1%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>11%</td>
</tr>
<tr>
<td>Cancer</td>
<td>14%</td>
</tr>
<tr>
<td>Dialysis</td>
<td>21%</td>
</tr>
</tbody>
</table>

### 10-Year % Cost Improvement

<table>
<thead>
<tr>
<th>Condition</th>
<th>Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHF</td>
<td>4%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>(3)%</td>
</tr>
<tr>
<td>Cancer</td>
<td>7%</td>
</tr>
<tr>
<td>Dialysis</td>
<td>12%</td>
</tr>
</tbody>
</table>

Source: USRDS 2017 report; adjusted mortality (deaths per 1,000 patient-years) among ESRD patients and comorbidity-specific Medicare populations aged 65 & older; per capita cost of care adjusted by National Health Expenditure inflation

2) Source: Milliman 2016 report for cancer cost of care; cost trend available for 2004-2014
Typical Dialysis Center

- 80 patients
- 17 teammates
  - 5 nurses
  - 8 techs
  - 4 other
- Medical Director
- 18 machines & chairs
- $4M revenue
Kidney Care at a Glance

- Facilities\(^1\): 2,876
- Treatments\(^2\): 31.9M
- Kidney Care Net Revenue\(^2\): $11.4B
- 2018 Adjusted OI Guidance\(^3\): $1.5 - $1.525B

1) As of September 30, 2018
2) LTM as of September 30, 2018
3) Excludes certain items including: goodwill and other asset impairment charges, restructuring charges, gain/(loss) on ownership changes
What are expectations for 2019?

- OI: $1.54B - $1.64B
- CF guidance to be provided on Q4 2018 earnings call
- Capex: $800M - $840M
  - Self-development capex: ~$100M
Components of 2019 Guidance

Volume \times \frac{\text{Revenue}}{\text{Tx}} - \frac{\text{Expense}}{\text{Tx}}
2019 Volume Outlook: 3-4% Growth

• Total treatment growth: 3% - 4%

• Non-acquired growth: 2.5% - 3.5%

• Limited tuck-in acquisitions
Components of 2019 Guidance

# of Treatments × Revenue / Tx - Expense / Tx
2019 RPT Outlook: 0-1% Growth¹

• Treatment mix: +/- 5 basis points

• Commercial RPT: (1)% – 0.5%
  – Rate increases for large majority of patients
  – Offset by decline in OON and outliers

• Government RPT: 1% – 2%
  – Medicare FFS rate increase of 1.2%
  – Continued shift to higher rate MA

¹) Excludes $36M in Medicare bad debt recoveries recognized in 2018 due to implementation of new revenue accounting standards; excludes impact of calcimimetics
Components of 2019 Guidance

\[ \text{# of Treatments} \times \frac{\text{Revenue / Tx}}{\text{Expense / Tx}} \]
## 2019 CPT Outlook: 0.5-1.5% Growth

<table>
<thead>
<tr>
<th>Component</th>
<th>Outlook</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teammate costs</td>
<td>2.5% - 3.5% wage rate</td>
</tr>
<tr>
<td>Other costs</td>
<td>~Flat&lt;sup&gt;2&lt;/sup&gt;</td>
</tr>
</tbody>
</table>

1) Excludes impact of calcimimetics  
2) Excludes costs to defeat Prop 8 in 2018, or other potential ballot initiatives in subsequent years
Outlook for SEIU-UHW Initiatives

• Prop 8 victory
• UHW will persist
• Proactive legislation
• Continued focus on being a great place for teammates
# of Treatments × Revenue / Tx = Expense / Tx

3.0 - 4.0% 0.0 - 1.0%<sup>1, 2</sup> 0.5 - 1.5%<sup>2, 3</sup>

1) Excludes $36M in Medicare bad debt recoveries recognized in 2018 due to implementation of new revenue accounting standards
2) Excludes impact of calcimimetics
3) Excludes costs to defeat Prop 8 in 2018, or other potential ballot initiatives in subsequent years
Cash Flow Foundation

# of Treatments × Revenue / Tx − Expense / Tx
Private Pay Rates in Context

• 1 in 10
• Medicare eligibility regardless of age
• 30-month MSP period
• Safety net
Charitable Premium Assistance

• 20+ year equilibrium

• Intentional design

• Economic benefits to commercial payors dramatically exceed incremental cost
Innovation to Create More Aligned Ecosystem

• CKD

• Home

• Integrated Kidney Care (IKC)
Home Dialysis Growth

• Largest PD / HHD provider; growing 3-4x faster than ICHD

• PD product supply available again

• Clinical / lifestyle benefit for many patients

• Capital efficient growth
Integrated Care Opportunity

- Need for care coordination
- Opportunity to reduce non-dialysis costs
- Improved clinical outcomes

~$90k per year\(^1\)

- Hospitalization
- All other
- Dialysis

~65%

\(^1\) 2015 claims data for Medicare dialysis patients; 2017 Annual Data Report by USRDS
Closing Thoughts