



Benefit Corporation Report

FISCAL YEAR ENDED JUNE 30, 2016

Antonio Paulo Pinto
PRESIDENT & CEO
HEALTH EDUCATED, INC.
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EXECUTIVE SUMMARY

Health Educated, Inc. completed its first year as a Connecticut Benefit Corporation on June 30, 2016. This was the first year that Health Educated, Inc. operated as a health insurance agency and specifically focused on helping Connecticut residents navigate the state-based insurance exchange to obtain or maintain health insurance coverage through the exchange for themselves and their families, including assisting people with enrolling into or renewing into the Husky health insurance programs, the State Medicaid programs. The company estimates that it directly assisted over 1,000 individuals in accessing and enrolling in a health insurance plan, inclusive of exchange-based QHP plans and Husky/Medicaid plans; and that the company's community-based agent workforce provided education and guidance to 1,000s of other individuals throughout the State of CT. The company was Certified in the State of CT as a Minority Business Enterprise (MBE) and Small Business Enterprise (SBE) in 2014 and 2015. The company did not file for certification in 2016; however, the company is still eligible for the certification.

The company raised capital in 2015; converted to a CT Benefit Corporation; and began operating on a Workforce Development model focused on recruiting, training, licensing, creating and maintaining a network of community-based insurance agents throughout CT, primarily within the urban centers, where the need for assistance is the greatest. The company's workforce peaked at seventeen (17) Community-Based Agents (CBAs) during open enrollment. The workforce was comprised primarily of women and multicultural and multilingual people from diverse backgrounds, including people from different countries, and spoke over 12 languages. Unfortunately, due to unforeseen circumstances, primarily lack of support from the state-based health insurance exchange in CT; we have had to lay off all the CBAs. However, the company is currently working towards restarting full operations by next open enrollment, November 1, 2016.

The company management completed the online self-assessment tool on the B Lab website; however, the company did not complete the process of becoming a Certified B Corp. This was the company's first year as a CT Benefit Corporation; and the company is not currently in a position to complete the B Corp certification process. The management believes that the company would qualify as a Certified B Corp, based on an uncertified total score of 150 on the self-assessment, out of a possible 200. The minimum requirement to become a Certified B Corp by B Lab is a score of 80, out of a possible 200. The company scored high on Governance, Workforce Development, Local Investment, and Economic Empowerment for the Underserved. The areas of weakness were that the company did not offer a benefits package to its employees; and that the company did not have responses for the questions related to Environmental Impact.

Uncertified B Corp Score = 150.8 Tabulated using the online B Lab Assessment Tool

At this time, the company is very hopeful for the future; and the company management is working diligently to address open issues, raise new capital, and launch new products and services by moving towards operating as a fee-based Consulting Firm. The company has recently launched a Discount Card program; and continues to evaluate other compatible products and services to offer, with the hopes of re-hiring many of the agents that were recently laid off.

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ABOUT THE COMPANY

Mission Statement

Health Educated develops and maintains a diverse network of people as a community based resource for assisting and educating people in navigating the health insurance marketplace and the health care system.

Vision Statement

Health Educated focuses on recruiting, training and maintaining a diverse network of Community-Based Agents able to assist people in navigating the health care system from the point of enrolling people in the proper health insurance coverage to educating people on how to navigate the health care system for maintaining their health and living healthy lives.

Business Model

Health Educated, Inc. was re-opened in 2015 as a start-up insurance agency specifically focused on operating within the new health insurance marketplace in CT, that was created with the implementation of health care reform. The company was Certified in the State of CT as a Minority Business Enterprise (MBE) and Small Business Enterprise (SBE) in 2014 and 2015; however, the 2016 certification renewal was not filed. The company focused on developing a community-based network of health insurance agents following a Workforce Development model, in order to create a year-round Community Resource for individuals, families and organizations that need assistance navigating the health insurance marketplace, and to address health insurance literacy. Workforce Development is the foundation of the business model due to a significant shortage of insurance agents within the insurance industry, including agents from diverse ethnic groups, and agents that speak languages other than English.

The company launched with a three-year plan to be able to operate in a marketplace that no longer paid insurance agents on a commission basis for selling people health insurance policies. With all the changes that came with health care reform, the roll of the agent in the individual health insurance marketplace has changed to being an enroller, as all policies are now similar and are guaranteed issue during open enrollment and special enrollment periods. The business model planned on operating on commissions in 2016, half on commissions in 2017, and without commissions in 2018. The way in which the company planned to migrate to a non-commission environment was through the launching a series of products that would generate alternative revenue streams while supporting the same client base. The company has launched or plans to launch Educational products, Training programs, a Community Magazine, a Discount Card program, and mobile applications, while continuing to evaluate other compatible products. Health Educated, Inc. is currently in the process of converting to a fee-based Consulting model; and operating under the agency's existing Consulting License.

GOVERNANCE

BOARD OF DIRECTORS

Antonio Paulo Pinto, President & CEO, Director, Chairman of the Board

Antonio Paulo Pinto is the agency principal and has over 15 years of experience in the insurance business, since 2001, as both a licensed Insurance Producer and Certified Insurance Consultant, specializing in health insurance program design and implementation strategies for individuals, small businesses, and mid-size companies.

Mr. Pinto is an advocate for health care reform and is a Board member of the non-profit advocacy group Small Business for Healthy CT, with whom he partnered with to release the Obamacare411 iPhone app in March 2013. He has been a member of the "SHOP" Advisory Committee to access health CT, CT's health insurance exchange, since its inception in March 2012.

Mr. Pinto was born and raised in Waterbury, CT; is a 1st generation American citizen of immigrant parents from Portugal. He graduated from Rensselaer Polytechnic Institute in Troy, NY, with an MBA in Entrepreneurship, and a Bachelor of Science Degree in Chemical Engineering. For over 12 years, he served in the United States Army National Guard and the United States Army Reserve as an Enlisted person and as a Commissioned Officer, during which time he was awarded two Army Achievement Medals. He received an Honorable Discharge in January 2001; and was once selected as the Soldier of the Year for Company B 1-102d Infantry in Waterbury, CT.

He has served on the Board of Alderman and Board of Education in the City of Waterbury; and is active in several advocacy and business groups, volunteers for charitable organizations and community service groups, and has served as a Trustee for the Connecticut Community Foundation; an official on the Waterbury Democratic Town Committee, the Board of the CT Chapter of the American Red Cross, and as President of the Portuguese Sport Club in Waterbury (2010). In 2006, he was selected by New Haven Business Times magazine as a recipient of the 13th Annual "Forty under 40" award; a list of up and coming young professionals in the Greater New Haven Region that serve their communities.

William C. Spencer, Esq., Director

William C. Spencer is an Attorney, admitted in NY and CT, with extensive experience in environmental, corporate and commercial law. William is active as a town commissioner in Southbury, CT, and on committees of the Connecticut Community Foundation.

Kevin Galvin, Benefit Director

Kevin is the recently appointed Benefits Director for the company. He has been a Connecticut Small Businessman for over thirty-five years. Kevin owns and operates Connecticut Commercial Maintenance, a Hartford based service business that currently employs four people.

Kevin Galvin is the founding chair of the Small Business for a Healthy Connecticut; and is best known for his efforts as an advocate for the interests of small business for reforming the health care systems.

Along with being a leader in the advocacy movement here in Connecticut, Kevin has participated in meetings at The White House, Congress, The Department of the Treasury, and The Small Business Administration discussing Health Care Reform at a National level, and advocating for Connecticut's Small Businesses.

Kevin continues to advocate for locally for Small Business:

- Founding Chair, Small Business For A Healthy Connecticut
- Kevin is a member of three of the four Advisory Committees to "access health CT"
- Co-Chair of "access health CT" Consumer Advisory Committee
- Member of the Consumer Advisory Board of SIM (State Innovation Model)
- Past Board Secretary of HealthyCT, Connecticut new non-profit health insurance carrier.
- Connecticut Health Foundation Health Equity Fellow
- Board member at Hartford's EcoSpace 224

Corporate Accountability

The company operates with a Board of Directors that oversees the CEO, who manages all of the business operations. The Board experienced several changes during this first year as a start-up insurance agency; and Benefit Corporation. The changes were primarily related to the highly volatile health care reform marketplace; combined with limited funding for the operations. The By-Laws require a minimum of three (3) Board members; and the organization has maintained at least three Board members, throughout the entire year. At the beginning of the fiscal year, the company had four (4) Board members, comprised of all four Shareholders at the time. During the course of the year, two (2) of those Board members stepped down from the Board, primarily due to other commitments; and a Board member was appointed from the local Advocacy community to fill a Board position. The newest Board member, Kevin Galvin, appointed in May 2016, is not a shareholder in the company and is not compensated by the company. Kevin Galvin is the company's Benefits Director.

The Board of Directors met on a regular basis during the first months of operations, at least on a monthly basis. After open enrollment concluded, at the end of January 2016, the Board has met at least bimonthly. The Board has sole authority to authorize the compensation package for all Executives that work for the company, including Shareholders.

The company is a start-up and employees were very aware of the limited funds available for operations, which limited the hours we were able to allocate to them during any work week. If any financial issues arose, they were regularly communicated to employees. All employees were also aware that all employees received the hourly pay rate of \$15/hr. If employees asked for more specific financial information, it was shared with them upon request. The goal was to make sure everyone understood the limits of the company resources; and help in stretching out those limited resources. Once the company's CPA completes the financials for the company for the fiscal year that ended June 30, 2016, the company will make them available, upon request.

IMPACT ASSESSMENT

Workforce Development

Health Educated, Inc. had limited incentives to offer people during the recruiting process, as the company was a start-up, and could make no long-term employment promises to the people that were being recruited. The company was not offering any benefits to employees due to the limited resources available to the company for operations. Therefore, the company took a very proactive approach to recruiting; and asked community partners to assist in the company's recruiting efforts. The end result was a very strong candidate pool, several of whom were long-term unemployed individuals that were looking for an opportunity to get back to work. The most successful recruiting method for the company was partnering with non-profit organizations that assisted the company in reaching out to people that were active in their communities; and that had completed a Community Health Worker Certificate program at a community college.

The greatest challenge for the individuals that were recruited was that they had to pass a State Health Insurance Licensing Exam in order to be able to work as Insurance Agents. In 2014, when the company was a staffing service for insurance agents, the company enrolled recruits into an online self-study pre-licensing course. The end result was far from ideal and is compared below to the approach that the company employed in 2015. In 2015, the company contracted with The Cape School, Inc. to provide a series of four (4) classroom-based study sessions and a classroom-based pre-licensing exam, as an integral part of the self-study program. The newly recruited individuals were expected to complete the program and the expectation was incorporated into the interview and recruitment process as a mandatory requirement for all recruits. The company paid a flat \$300 stipend for all those recruits that completed the program, regardless if they continued on with the company or failed to pass the licensing exam. The company provided morning and afternoon coffee and snacks during the classroom sessions for individuals; and in addition, provided individuals with a \$10 stipend for lunch. The end results were astounding; and are detailed below in the chart, comparing 2014 to 2015.

Health Insurance Pre-Licensing Self-Study Course Results

	No Classroom	Percent	Classroom	Percent
	2014		2015	
Enrolled	40		21	
Completed	8*	20.0%	19	90.5%
Licensed	5	12.5%	14	66.7%

* estimate

The company made a significant investment in training for the individuals that were recruited into the pre-licensing program. The company offered an incentive package for passing the exam on the first two tries, in order to reduce the pressure on individuals. The individuals were fully aware they would be provided with up-to three opportunities to pass the state licensing exam,

at no cost to them. The company offered a \$100 Bonus for passing the exam on the first try; and a \$50 Bonus for passing the exam on the second try. The majority of the recruits had to take the exam at least two times; and many took it three times before passing the exam. The incentive of being able to earn a bonus excited many of the individuals; and they worked hard to earn the Bonus. The end result was that the company was able to recruit, license and train all the agents within a 30-to-90 window from when they were interviewed. This positioned the company with a ready workforce for the first day of open enrollment, November 1, 2015. This was a great outcome for both the company and the individuals recruited; and many were able to begin working on a part-time that very first week of November, considering interviews began in late August, with a course start date of September 22, 2015.

The most significant result for 2015, highlighted in the table above, is the fact that all but one (1) of the fourteen (14) individuals passed the state licensing exam within 15-to-30 days from the pre-licensing course completion date. In 2014, only one (1) individual became licensed within the same time period; and only five (5) became licensed within 90 days of the course enrollment date. The individuals were made aware prior to the pre-licensing course that company would pay for every individual's State Health Insurance License, regardless of whether or not the company offered them employment, in both 2014 and 2015.

Pre-Licensing Investment Per New Licensee

	2014	2015
Pre-licensing Course(s)	\$ 2,950	\$ 13,900
State Exam	\$ 1,160	\$ 2,000
Total Pre-licensing Costs	\$ 4,110	\$ 15,900
Per New Licensee	\$ 820	\$ 1,140
CT State Health License	\$ 145	\$ 145
Total Per New Licensee	\$ 965	\$ 1,285
Total Licensing Investment	\$ 5,075	\$ 17,185

** dollar amounts are rounded*

The table above provides an overview of the investment in Workforce Development made by the company. The per licensee cost is higher in 2015; however, the end result was significantly better in that there were fourteen (14) licensed individuals able to work within 30 days of completing the pre-licensing program in 2015, compared to five (5) licensed individuals, after 90 days, in 2014. The company invested an additional, \$300 per licensee for insurance carrier appointment fees, which would have been \$755 per licensee; but thankfully, Anthem and ConnectiCare waived their appointment fees in order to support our Workforce Development Program.

The company had all employee's complete online assessments; and attend a series of classes, specific to working with individuals in a culturally sensitive manner, through the Sandler Sales Institute, an additional investment of approximately \$7,000, excluding Payroll expenses.

Employees

Health Educated, Inc. is a start-up health insurance agency with limited funding; and as a result, has not been able to offer employee benefits, including health insurance. However, the company was able to offer the below listed basic benefits.

- 8 Paid Holidays
- 1 Hour of Paid Personal Time Off (PTO) for every 40 Hours Worked
- 1 Hour of Paid Sick Time for every 30 Hours Worked
- Flexible Work Schedule
- The Ability to Work from Home

The company paid all employees a starting pay rate of \$15 per hour, which is atypical for new health insurance agents at an insurance agency. Incentives were offered to employees; however, the company did not pay out any incentives this past year.

In 2015, the company re-hired four (4) licensed agents that had completed the 2014 licensing program; twelve (12) of the newly licensed agents that completed the 2015 licensing program; and one (1) agent that already had a license for the previous five years. Of the fourteen individuals that became newly licensed through the 2015 licensing program, two (2) decided to become independent agents; and started their own business. The company hired four (4) individuals that had been long-term unemployed; eight (8) individuals that were unemployed; and five (5) individuals that had other part-time positions in 2015. One of the individuals that was hired was eligible to be hired through the State of CT, STEP-UP program, which provided some extra financial support for the company.

The company prepared the new agents for assisting people in enrolling in health insurance plans available through the state-based insurance exchange in CT by providing a considerable amount of product training and resources. The average agent attended over 40 combined hours of training provided by Sandler Sales Institute; by representatives from each of the four (4) health insurance carriers on the state-based exchange in CT; and for completing the certification course for the state-based insurance exchange. The company provided agents with additional one-to-one training and coaching, training materials, and reference materials for use when working with clients. The company paid agents for their training time; and estimates that at least \$12,000 of Payroll was a result of all the additional training provided to our agents. In addition, the CEO of the company invested over 100 hours of time into coaching agents on how to work with clients and how to interact with other community partners.

Unfortunately, due to unforeseen circumstances, the company has had to restructure and lay off all of our agents, as of the end of April 2016. From the beginning of November 2015 through the end of February 2016, the company had all the agents working at least part-time, with four (4) agents averaging 35 or more hours per week, resulting in an average Full-Time Equivalent (FTE) payroll of ten (10) agents working per month for those four (4) months.

Community

In this first year as a health insurance agency start-up, the company brought fourteen (14) new agents into the health insurance workforce. The company employment peaked at seventeen (17) agents working the equivalent of twelve (12) full-time employees, with four (4) of the agents working over 35 hours per week for a four-month period. The majority of the agents were unemployed prior to beginning employment at the company, eight (8) of them. Of the eight (8), four (4) were considered long-term unemployed. Unfortunately, due to unforeseen circumstances, and financial challenges, the company began laying agents off at the end of February; and the last of the agents were laid off at the end of April. At peak employment, the agents that were working for the company were comprised primarily of women and multicultural and multilingual people, from diverse backgrounds, located primarily in urban centers, included people from several different countries, and spoke over 12 languages.

Health Educated, Inc. has been maintaining a community presence and supporting community partners throughout the State of CT. The company understands the importance of working with a wide variety of organizations; and has been active with many organizations during this initial start-up year, even with limited funding. The value of partnering with and being active with well-established organizations can not be understated; because those organizations provide an opportunity to learn about and understand the needs of their members and their communities. The company became a member of several Chambers of Commerce within CT; and management was proactive with many advocacy groups, within and outside of CT.

There are many organizations that have provided guidance to the company's management on how to make a difference throughout the State of CT. The company's management has been very grateful and appreciative of the guidance provided by many of these organizations. It is impossible for a single organization to know everything about every community within the State of CT; and the company management can not thank them enough for their guidance and time.

The company worked closely with our agents to find the best ways in which to partner with organizations located in the high needs urban centers located throughout CT; and within their own community groups. The agents were from many places in CT; and from a variety of immigrant communities, including non-English speaking communities. One of the most prominent outreach efforts that the company was able to accomplish was that, through an existing agent relationship, the company was able to maintain a presence in the Bridgeport School District from the middle of November 2015 through the end of April 2016. The company's agents maintained a regular presence throughout all the schools in the school district by being present at parent-teacher meeting days; and participating at the district's Three King's Day event in January. One agent was directly assigned to manage the relationship with the school district; and either be present at the meetings, or have another agent present at the meetings. The company allocated the agent an average of 20 hours per week, of paid time, to manage the relationship with the Bridgeport school district.

Health Educated, Inc. focused on working with local vendors within our community and within the State of CT. The company was able to secure most of the required services through vendors based in CT. The core services that were subcontracted to local CT vendors were the website design and development, the marketing design, the production of the company magazine, the production of marketing pieces, the IT infrastructure and management services, social media support, legal services, accounting and bookkeeping services, and employee evaluation and training services. The value of working with local vendors was key to the company being able to have a successful launch on a very short timeline, a timeline of less than 90 days. The payments for services to local vendors exceeded \$60,000 in this fiscal year.

The other organization the company worked closely with was the CT health insurance exchange, access health CT. For the open enrollment period that began November 2, 2015 and ended January 31, 2016, the company was selected as a partner to provide a licensed agent at four (4) of their five (5) Community Enrollment Partner sites located throughout CT, at the company's own expense, in exchange for being able to collect commissions on clients enrolled at the sites. The company provided a language specific person to assist at their New Britain Enrollment Center for the majority of the open enrollment period; and the company maintained two (2) company locations. All told, during open enrollment, the company either supported or maintained seven (7) locations between the exchange CEP sites and our own sites, while also maintaining a regular presence in the Bridgeport School District.

The following is a summary of most of the organizations with whom we worked closely with over the past year, including the Chambers of Commerce we are members of at this time. *We apologize in advance to any community partners we may have forgotten to include in the list, as we interacted with many agencies and organizations throughout this past year; and it is likely that some community partner organizations are not on the list.*

Chambers of Commerce

Bridgeport Regional Business Council
Eastern Connecticut
Farmington (Central Connecticut)
Greater New Haven
Metro Hartford Alliance
Midstate (Meriden)
Northwest Connecticut
Waterbury Regional

State of Connecticut Organizations

African American Affairs Commission
Asian Pacific American Affairs Commission
Department of Labor
Department of Social Services
North Central Regional Mental Health Board
Office of the Healthcare Advocate

Organizations

Area Health Education Center (AHEC)
City of Bridgeport – Bridgeport Public Schools
Community Catalyst
Connecticut Health Foundation
Connecticut Voices for Children
City of Waterbury & Department of Public Health
Health Disparities Institute (UCONN Health)
Madre Latina, Inc. (Waterbury)
Our Lady of Fatima Church (Hartford & Waterbury)
The Portuguese Foundation, Inc. (Hartford)
Small Business for a Healthy Connecticut
Southeast Asian American Health Coalition
Texas Health Institute
Universal Healthcare Foundation

Clients

Health Educated, Inc. serves clients in Connecticut that sign up for either Qualified Health Plans (QHPs) or the state Medicaid health insurance plans (Husky), through Connecticut's state-based insurance exchange. As a start-up, the company did not have enough resources to track every single interaction with the clients that were assisted by the company's agents. However, based on daily reports that we were required to submit to the state-based exchange, while supporting their locations during open enrollment; and estimates provided by company agents working out in the field with clients, the management feels we can provide a realistic picture of the outreach work done by our community-based agents.

The company estimates that our community-based agents assisted in enrolling over 800 people into QHPs available on the state-based insurance exchange during the 2015-2016 open enrollment period. The company also estimates that agents assisted over 200 people in enrolling into Husky (Medicaid) health plans during the same open enrollment period; and there is no compensation for enrolling individuals into Husky programs, which was planned and anticipated pro-bono work. These numbers are estimated by reviewing the Daily Reports our agents provided to management, and that management was required to submit to the exchange on a daily basis, during the open enrollment period; as well as the community outreach efforts of our community-based agents throughout the State of CT. This number does not include any educational or community outreach events.

With regard to educational and community outreach events, the company estimates that 1,000s of Connecticut resident received guidance from our community-based agents; since the date that the company launched operations, November 2nd, 2015. The company's management and community-based agents participated in several Chamber of Commerce events and expo's, several health care access and disparities forum's, and many of our community-based agents held office hours within their own communities, at local community sites. The single most significant impact of our outreach efforts was in the Bridgeport School District, where our community-based agents educated and assisted 1,000s of parents about health insurance options available to them and their children. Agents directed people to local community-based health care centers, sometimes on an urgent basis; and the company had both management and community-based agents participate at the district's annual Three King's Day event, one of the largest events held in the school district every year.

CHALLENGES

The health reform and health insurance marketplace is still experiencing significant volatility; and while some challenges can be anticipated, others, mainly federal guidance, legal rulings, and changes to the law, can only be addressed after they are announced or implemented. In moving forward into the next fiscal year, the two greatest challenges to the company are financial challenges due to the changing compensation structure, an environment of zero commissions; and a very strained relationship with the state-based insurance exchange in Connecticut.

The company raised start-up funding to cover the costs of the Workforce Development program; and cover payroll and operational expenses for the 2015-2016 open enrollment period. The plan was to adjust the staffing level in line with commission revenue that would start being paid in February of 2016, based on the number of clients enrolled into QHPs, primarily on the state-based insurance exchange. Unfortunately, the company is only receiving about half the expected revenue for the work that was done by our community-based agents, which led to internal financial issues requiring a complete restructuring of the company; and a very strained relationship with the state-based insurance exchange in CT, as they hold sole authority over authorizing commission payments to insurance agents in CT for QHPs sold on the exchange.

The financial challenges were very frustrating for management, the Board and the Shareholders; and two (2) of the Board members stepped down from the Board during this past fiscal year. One of the Board members, a funding investor and co-founder, that stepped down from the Board, decided to exit the company through a share liquidation and a debt write-down, as the co-founder was presented with other personal and financial opportunities that were more exciting, were community-focused, and showed promise for addressing community health issues.

The situation with the state-based exchange in Connecticut has been the most unexpected and frustrating situation that management faced over the last year; and the situation is far from resolved at this time. In fact, the management of the exchange appears to have no interest in helping the company resolve any financial issues, or in having the company participate in any outreach activities in the future. The management of the company feels that unless the Board of Directors, of the exchange, steps in to help resolve the ongoing issues; the company will find it very difficult to operate in an environment where it is not a welcome partner in the community.

At this time, the company is very hopeful for the future; and the company management is working diligently to address open issues, raise new capital, and launch new products and services to address the changing compensation structure in the State of CT. The company is moving towards operating as a fee-based Consulting Firm; has launched a Discount Card program; and continues to evaluate other compatible products and services, with the hopes of re-hiring many of the agents that were recently laid off.

BENEFIT DIRECTOR STATEMENT

I am proud to be a Board Member of Health Educated, Inc. I believe Health Educated, Inc. is a well thought out and well executed entrepreneurial business model. CEO, Antonio Paulo Pinto saw the need to change the typical social and the economic make up of Heath Care Broker workforce to meet the needs of Connecticut's underserved population.

The result of Mr. Pinto's efforts was Health Educated, Inc. trained and fielded a 17 member multi-cultural and multi-lingual broker workforce working daily in the communities of need. The business model is successful, to a point. Sustainability of Health Educated, Inc. is nearly completely reliant on close collaboration with Connecticut's Health Insurance Exchange.

In my opinion, Connecticut's Health Insurance Exchange lacked the vision to allow a private enterprise like Health Educated, Inc. to thrive and succeed. By not working in concert with Health Educated, Inc., an opportunity was missed to give a higher level of service to our underserved residents; as well as, the opportunity to expand this new broker workforce may be lost.

As Benefit Director for Health Educated, Inc., I hereby affirm that the benefit corporation acted in accordance with its general public benefit purpose.

Kevin Galvin
Benefit Director
Health Educated, Inc.