

STATE OF VERMONT

HUMAN SERVICES BOARD

In re) Fair Hearing No. H-09/20-608
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Appeal of)
)

INTRODUCTION

Petitioner appeals the denial by the Department of Vermont Health Access ("Department") of her request to include the title "Dr." in front of her name in written communications (principally by U.S. Mail). The following facts are based upon a hearing held November 19, 2020 and documents submitted by the Department.

FINDINGS OF FACT

1. Petitioner was receiving health coverage in 2020, with federal subsidies to defray the cost of her premium, through insurance purchased on Vermont's health insurance exchange (Vermont Health Connect or "VHC"). Since the filing of her appeal, petitioner has chosen to leave the exchange and purchase insurance directly through her insurer (as of December 1, 2020).

2. At some point during her period of coverage, petitioner requested that the title "Dr." be included in

front of her name for notices and other written communications. VHC denied this request because it would have created problems with their verification process - specifically, because "Dr." is not in petitioner's legal name, this would create verification mismatches between her social security number (and, it is presumed, potentially other information) and the name on her account. At hearing, the Department credibly represented that this issue was a legitimate operational concern.

3. At hearing, petitioner indicated that if "Dr." is not included in front of her name, her mail is or would be misplaced at the post office (petitioner has a PO box). When asked whether the post office could verify this claim, petitioner indicated that the post office would never admit that they were mixing her mail up with other people's mail, so she declined the opportunity to supplement the record in that respect. Petitioner further indicated that she was highly concerned about the commission of fraud against her and her family, and that she had a long history as a victim of fraud.

4. Petitioner clearly indicated that she no longer wishes to purchase insurance through VHC, which is why she had decided to purchase insurance directly from her insurer

(apparently her insurer has honored her request to include "Dr." in front of her name).

5. The Department indicates that if petitioner were to purchase insurance through the exchange but decline to take tax subsidies in advance - in other words pay the entire premium amount and then recover any tax subsidies when she files her taxes in the following year - VHC may be able to accommodate her request to place "Dr." in front of her name. However, VHC is not able to do so if petitioner elects to accept tax subsidies during the plan year i.e., defray the premium costs at the time the premium is owed.¹

6. Petitioner is in the process of trying to change her legal name to include "Dr."

ORDER

The Department's decision is affirmed.

REASONS

Review of the Department's determination is de novo. The Department has the burden of proof at hearing if terminating or reducing existing benefits; otherwise the

¹ According to the Department, petitioner is not eligible to claim the tax credit if purchasing insurance directly through the insurer.

petitioner bears the burden. See Fair Hearing Rule 1000.3.0.4.

The record does not establish that petitioner has suffered any harm by the Department's denial of her request to include "Dr." in front of her name, nor is there any known rule or law which requires the Department or VHC to do so. In contrast, the Department has established legitimate operational concerns for their denial of petitioner's request. The record also establishes that petitioner has an alternative (purchasing insurance through the exchange but declining the tax subsidy in advance) which may enable VHC to accommodate her request; this would appear to be a viable option, given that petitioner has decided to purchase insurance directly from her insurer and is therefore incurring the full monthly cost of her premium, anyway.²

Seeing as petitioner has not established any actual injury as a result of the Department's decision, the Department has articulated a legitimate operational concern in denying petitioner's request, and that decision is otherwise consistent with the applicable rules, it must be

² It should be emphasized that the current annual open enrollment period for petitioner to enroll in 2021 insurance ends as of December 15, 2020. After that date, petitioner would require a special enrollment period to enroll in 2021 insurance through VHC.

affirmed. See 3 V.S.A. § 3091(d), Fair Hearing Rule No.
1000.4D.

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