

Proposed Electricity Information Exchange Protocol – EIEP4A: Medically Dependent Consumer Information

Consultation paper

10 December 2024

Executive summary

The Electricity Authority Te Mana Hiko (Authority) is proposing a new Electricity Information Exchange Protocol (EIEP) to support retailers' upcoming obligations under the Consumer Care Obligations (Obligations) to share information with distributors about medically dependent consumers on their networks.

Consultation on the [proposed Obligations](#) highlighted industry concerns that the existing EIEP4: Customer information (EIEP4), which is currently voluntary, is not fit for this purpose because of:

- inconsistent application across the sector
- delayed or outdated data, with some retailers providing insufficiently frequent updates
- incomplete or irrelevant data that does not align with privacy requirements or operational needs
- a lack of data standards for accuracy, frequency and privacy safeguards.

The Authority proposes a new 'EIEP4A: Medically Dependent Consumer Information'

To address the challenges highlighted during consultation, the Authority proposes introducing a new, regulated protocol: EIEP4A: Medically Dependent Consumer Information (EIEP4A).

The proposed EIEP4A aims to ensure consistent, reliable and timely exchange of medically dependent consumer information between retailers and distributors, while safeguarding consumer privacy and data security. The protocol would ensure distributors have visibility of medically dependent consumers at an ICP level on their network, enabling them to use this information when planning and undertaking work on the network. This information will also be able to be utilised by those distributors who are responsible for notifying consumers of outages.

The introduction of the proposed EIEP4A to support the Obligations further underscores the Authority's commitment to improving consumer outcomes in a way that is transparent and sustainable. The requirement to share information about medically dependent consumers comes into effect on April 1, 2025.

Next steps

The Authority seeks feedback on the proposed EIEP4A. Consultation is open until 28 January 2025, with a final decision expected in mid-February 2025. The Authority thanks stakeholders for their continued engagement on the Consumer Care Obligations work.

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1. What you need to know to make a submission

What this consultation is about

- 1.1. The purpose of this paper is to seek stakeholder feedback on the proposed Electricity Information Exchange Protocol 4A: Medically Dependent Consumer Information (EIEP4A). This protocol is intended to regulate the exchange of information about medically dependent consumers between retailers and distributors under the Electricity Industry Participation Code 2010 (Code).
- 1.2. The proposal addresses the limitations of the current voluntary EIEP4: Customer Information protocol, which is used inconsistently across the industry to share information about medically dependent consumers.
- 1.3. The proposed EIEP4A aims to ensure consistent, reliable and timely industry information-sharing practices while safeguarding consumer privacy and data security.

How to make a submission

- 1.4. The Authority's preference is to receive submissions in electronic format (Microsoft Word) in the format shown in **Appendix B**. Submissions in electronic form should be emailed to ccc@ea.govt.nz with "Consultation Paper—" in the subject line.
- 1.5. If you cannot send your submission electronically, please contact the Authority (ccc@ea.govt.nz or 04 460 8860) to discuss alternative arrangements.
- 1.6. Please note the Authority intends to publish all submissions it receives. If you consider that the Authority should not publish any part of your submission, please:
 - (a) indicate which part should not be published,
 - (b) explain why you consider we should not publish that part, and
 - (c) provide a version of your submission that the Authority can publish (if we agree not to publish your full submission).
- 1.7. If you indicate part of your submission should not be published, the Authority will discuss this with you before deciding whether to not publish that part of your submission.
- 1.8. However, please note that all submissions received by the Authority, including any parts that the Authority does not publish, can be requested under the Official Information Act 1982. This means the Authority would be required to release material not published unless good reason existed under the Official Information Act to withhold it. The Authority would normally consult with you before releasing any material that you said should not be published.

When to make a submission

- 1.9. Please deliver your submission by 5pm on Tuesday 28 January 2025
- 1.10. Authority staff will acknowledge receipt of all submissions electronically. Please contact the Authority at ccc@ea.govt.nz or on 04 460 8860 if you do not receive electronic acknowledgement of your submission within two business days.

2. The Consumer Care Guidelines will become the Consumer Care Obligations

- 2.1. Earlier this month, the Authority announced its decision to mandate the Consumer Care Guidelines (Guidelines), now called the Consumer Care Obligations (Obligations). These Obligations will create enforceable requirements for retailers and distributors to protect vulnerable consumers, including those medically dependent on electricity. The Obligations will be found in Schedule 11A of the Code.

The Obligations will require retailers to share information with distributors

- 2.2. Under the Guidelines, retailers were recommended to advise the relevant distributor of an application for medically dependent consumer status at the time of receipt and at the time of approval, using 'standard electricity industry protocols'.¹
- 2.3. This recommended action has been mandated under the Obligations. Under clause 51 of the Obligations, from 1 April 2025:
- (a) retailers who are traders² will be required to share information about medically dependent consumers with distributors
 - (b) other retailers will be required to share information about medically dependent consumers with the trader responsible for the relevant ICP (who then shares information with the distributor under (a)).
- 2.4. The intent of clause 51 is to ensure distributors have visibility of medically dependent consumers at an ICP level on their network, enabling them to use this information when planning and undertaking work on their network. This information will also be able to be utilised by those distributors who are responsible for notifying consumers of outages.

The Authority proposes to introduce a new regulated EIEP4A

- 2.5. Under clause 52 of the Obligations, the Authority must prescribe and publish the protocol with which retailers must comply when sharing information about medically dependent consumers under clause 51 of the Obligations.
- 2.6. The [August consultation on the proposed Obligations](#)³ proposed that retailers use 'the relevant EIEP' to share information about medically dependent consumers. The relevant EIEP is EIEP4: Customer Information, which is an unregulated (voluntary) EIEP. However, feedback indicated that EIEP4 is unsuitable for this purpose, because of:⁴
- (a) inconsistent application across the sector

¹ [Consumer Care Guidelines](#), paragraph 91(iv).

² A retailer is the trader if they purchase electricity directly from the clearing manager, and are recorded in the electricity registry as being responsible for the relevant ICP. Some retailers instead purchase electricity from a trader, and they won't be recorded in the registry as being responsible for the relevant ICP.

³ In August, the Authority consulted on a proposed set of Obligations, which preceded the finalised Obligations announced earlier this month.

⁴ A more detailed summary of submissions and the Authority's response can be found in [Appendix B](#) of the Decision Paper on Introducing the Consumer Care Obligations.

- (b) delayed or outdated data, with some retailers providing insufficiently frequent updates
 - (c) incomplete or irrelevant data that does not align with privacy requirements or operational needs
 - (d) a lack of data standards for accuracy, frequency and privacy safeguards.
- 2.7. In response to this feedback, we propose introducing EIEP4A, a new, regulated EIEP tailored specifically for sharing information about medically dependent consumers.

What is EIEP4A?

- 2.8. EIEP4A is a proposed new protocol that would:
- (a) standardise how medically dependent consumer information is shared
 - (b) only require sharing essential data, such as the Installation Control Point (ICP) identifier, to protect consumer privacy
 - (c) ensure real-time or frequent updates to better meet operational needs
 - (d) align with the requirements of clause 51 of the Obligations.
- 2.9. The proposed EIEP4A does not include customer names and contact details, or names and contact details of medically dependent consumers (if not the customer). This information is unnecessary as not all distributors have responsibilities to notify consumers of network outages. Those distributors who do make notifications will already have customer contact information. We expect that they would be able to integrate their existing customer data with the information provided under EIEP4A, as EIEP4A uses the same data format as EIEP4. This would enable distributors to design tailored notification processes for premises at which medically dependent consumers reside, should they wish to do so.
- 2.10. Excluding names and contact details from EIEP4A will therefore mitigate the risk to privacy by limiting the personal information that is exchanged while enabling distributors and retailers to meet their responsibilities effectively. However, we welcome feedback on this aspect of the proposed EIEP4A.
- 2.11. We recommend the proposed EIEP4A form be delivered using the EIEP transfer hub (in the electricity registry). However, the information can also be delivered by email, on agreement between the sender and recipient. If email is used, the file must be securely delivered and password protected.
- 2.12. The proposed EIEP4A is included in **Appendix A**.

Q1. Do you agree that introducing a regulated EIEP4A will address the issues with EIEP4 described above in 2.6?

Q2. If you are a retailer or distributor, does limiting the data provided in the proposed EIEP4A to only medically dependant status at the ICP level meet your operational needs? If not, what additional data would you suggest?

Q3. Should the use of the EIEP transfer hub be mandatory?

3. Regulatory Statement for the proposed EIEP4A form

- 3.1. The proposed introduction of a new EIEP does not require an amendment to the Code. However, the Authority considers it is prudent to have regard to the objectives, benefits, and costs of the proposal.

Objective of the EIEP4A form

- 3.2. The objective of regulating the proposed EIEP4A is to ensure the consistent, reliable and timely exchange of information about medically dependent consumers as required under the Obligations.
- 3.3. This will ensure distributors have visibility of medically dependent consumers at an ICP level on their network, enabling them to use this information when planning and undertaking work on the network. This information will also be able to be utilised by those distributors who are responsible for notifying consumers of outages. This furthers the purpose of Part 8 of the Obligations, which includes ensuring that medically dependent consumers receive appropriate care and consideration in relation to planned and unplanned outages.⁵

Q4. Do you agree with the objective of the proposed form? If not, why not?

The benefits of the proposed EIEP4A are expected to outweigh the costs

- 3.4. The Authority's assessment concludes that the benefits of the new proposed EIEP4A will outweigh its costs.
- 3.5. The primary benefits of the proposed EIEP4A relate to improved efficiency in the electricity industry for the long-term benefit of consumers, which in turn better supports the Obligations and the protection of medically dependent consumers. Benefits of EIEP4A to share medically dependent consumer information include:
- (a) **Consistent information handling:** retailers and distributors will have consistent information handling when exchanging medically dependent consumer information.
 - (b) **Enhanced data quality:** mandating the recording, storage and exchange of specific data fields ensures more accurate, relevant and up-to-date data, addressing issues raised about the existing EIEP4 template.
 - (c) **Privacy risk mitigation:** the form limits shared information to ICP identifiers, excluding personal details to reduce the potential for privacy breaches.
 - (d) **Administrative efficiency:** reducing ambiguities and streamlining data sharing. The proposed form specifies frequency of updates, mandatory data fields, and clear responsibilities for retailers and distributors.
- 3.6. The costs associated with the proposed amendment include:
- (a) **Initial set up and compliance costs:** Retailers and distributors will need to update their systems and processes to comply with the EIEP4A requirements.

⁵ Clause 46(1)(b) of Schedule 11A.1: Consumer Care Obligations.

- (b) **Non-compliance risks:** As retailers will be required to use EIEP4A under clause 51 of the Obligations, internal processes will be needed to ensure compliance.
- 3.7. These increased compliance requirements are expected to be offset by:
- (a) improved clarity of how retailers meet their obligations under clause 51 of the Obligations
 - (b) adoption in EIEP4A of the same standardised data format in EIEP4 and other protocols, which participants will already be familiar with
 - (c) simplification of data requirements in EIEP4A compared to the broader EIEP4 form.
- 3.8. As participants become familiar with the Obligations and the EIEP4A framework, net benefits are expected to increase over time, contributing to long-term operational efficiency and improved consumer outcomes.

Q5. Have we identified all the main costs and benefits? If not, what are we missing?

Q6. Do you agree the benefits of the proposed amendment outweigh its costs?

The proposed amendment addresses privacy concerns raised by stakeholders

- 3.9. The proposed EIEP4A incorporates privacy safeguards while enabling data-sharing between retailers and distributors. Key measures include:
- (a) **Excluding personal information:** Only the ICP identifier is shared, ensuring only relevant information is shared and minimising risks of privacy breaches in relation to sensitive consumer data.
 - (b) **Operational transparency:** The ICP acts as a non-identifiable reference point, ensuring essential data is exchanged securely and effectively.

Q7. Does the proposal adequately address privacy concerns? If not, what additional safeguards should be included?

Q8. Do you foresee any practical or technical challenges with implementing ICP-only data exchanges? If so, what mitigations would you propose?

The proposed amendment is preferred to other options

- 3.10. The alternative to the proposed EIEP4A is to require retailers to share medically dependent consumer information using the existing voluntary EIEP4. The Authority has assessed this option considering recent feedback [received via the August consultation](#) and has formed the view this option is not suitable.
- 3.11. This proposed EIEP4A intends to ensure retailers are collecting and exchanging medically dependent consumer information in a consistent manner that can be effectively used by distributors. A consistent collection and exchange of information underscores Part 8 of the Obligations⁶ purpose which includes ensuring that

⁶ Page 23 https://www.ea.govt.nz/documents/6121/Appendix_A_Final_Code_amendment.pdf

medically dependent consumers receive appropriate care and consideration in relation to planned and unplanned outages.

Q9. Do you agree the proposed amendment is preferable to the other options? If you disagree, please explain your preferred option in terms consistent with the Authority's statutory objective in section 15 of the Electricity Industry Act 2010.

Appendix A Draft EIEP4A: Medically Dependent Consumer Information

Electricity Information Exchange Protocols (EIEP)

EIEP4A: Medically Dependent Consumer Information

Regulated

Effective from [1 April 2025]

DRAFT FOR CONSULTATION

EIEP4A: Medically Dependent Consumer Information

Title:	EIEP4A: Medically dependent consumer information
Version:	1.0
Application:	This protocol applies to all: a) traders to provide information about medically dependent consumers to distributors at an ICP level, and b) retailers to provide information about medically dependent consumers to the trader responsible for the relevant ICP.
Participants:	Retailer/Trader/Distributor
Code reference:	Clause 51 of Schedule 11A.1
Dependencies:	The use of system agreement between the distributor and the trader may also set out requirements relating to the provision of customer information that the distributor and/or the trader must comply with, such as obligations under the Privacy Act and the terms and conditions of customer contracts, restrictions on the purposes for which the customer information may be used, and the obligation to treat the customer information as confidential information.

Description of when this protocol applies

This protocol is used to provide distributors and traders with information about medically dependent consumers at an ICP level (typically daily). This will ensure distributors have visibility of medically dependent consumers at an ICP level on their network, to enable distributors to use this information when planning and undertaking work on the network. This information will also be able to be utilised by those distributors who are responsible for notifying consumers of outages. Distributors will use this information to verify or update their records.

Business requirements

1. The sender and recipient must agree on the file transport mechanism by which the sender will provide information and the destination address. Non-manual interfaces use electronic file transfer either via File Transfer Protocol (FTP) or Secure File Transfer Protocol (SFTP) connectivity. In the case of FTP a security mechanism must be used to protect confidentiality. Whatever method is agreed that method must be in a format approved and published by the Authority.
2. The Authority strongly recommends using the electronic file transport mechanism commonly used for EIEP files – the registry EIEP transfer hub (via the registry EIEP SFTP server).
3. Where information is required to be transferred using email, the contents must be delivered in a secure manner and password protected.
4. This protocol must be used whenever a retailer or trader is required to notify the responsible trader or distributor of a new application for medically dependent consumer status or any subsequent change in medically dependent consumer status, but no more than once a day.
5. An agent may provide data on behalf of the relevant retailer or trader, in which case the header for EIEP4A will identify the trader/retailer. The appointment of an agent must be a permission function of the responsible trader/retailer and receiving traders/distributors must allow for agents in their systems.
6. A trader/retailer must use codes that are:
 - (a) stipulated in this document, or

Business requirements

- (b) approved and published by the Electricity Authority; or
 - (c) determined in the registry and reconciliation functional specifications.
7. Information provided in the file will be consistent with the terminology used in the Glossary of Standard Terms published by the Authority.
 8. The file must contain all mandatory information, failure to provide the required information will result in the file being deemed as incomplete.
 9. Information is to be provided in accordance with the following status codes unless otherwise specified:
 - O Optional
 - M Mandatory
 - C Conditional - Mandatory if available, otherwise Null (also refer to validation rules)
 10. The initial EIEP4A file must be provided by all traders to distributors on or before 2 April 2025, and must be a 'snapshot' file that provides medically dependent consumer information for all ICPs with a customer contract as at 1 April 2025. The Initial file type should be denoted as file type I. Parties will need to agree whether subsequent files are to be:
 - (a) an updated replacement 'snapshot' file whenever any medically dependent consumer information changes, that provides complete and up to date information for all medically dependent consumers at an ICP with a customer contract. Replacement files should be denoted as file type R; or
 - (b) an 'incremental' file that only provides new or amended medically dependent consumer information for ICPs with a customer contract since the last incremental or snapshot version was provided. Incremental files should be denoted as file type X.
 11. If a party becomes aware of a format error or the file is incomplete, that party must advise the other party as soon as practical after becoming aware of the issue.
 12. If no agreement can be reached as to whether the file is to be a partial (incremental) or full replacement for the correction of the error as noted above, then a full replacement file is required.
 13. Recipients of EIEP4A files must be capable of receiving I (initial), R (complete replacement) and X (partial replacement) files.

General requirements

1. If there are any conflicts between this document and the Code, the Code takes precedence.
2. In general, all participants must provide the recipient with accurate information for all ICPs at which they are recorded in the registry as being responsible for, or for which they have a customer contract.
3. A number of data transfers are required between participants in order for the EIEP process to take place. These data flows if not previously agreed between participants are to be those recommended by the Authority. At all times they must take place in a secure and predictable manner.
4. It is the responsibility of participants to comply with their obligations under the Privacy Act and the terms and conditions of customer contracts when exchanging customer information.

Data inputs

Event data	Format	Trader to Distributor, Retailer to Trader: Mandatory/Optional/Conditional	Validation rules
<i>Header record type</i>	Char 3	M	HDR – indicates the row is a header record type
<i>File type</i>	Char 7	M	Customer Medically Dependent Consumer Information Listing - CUSMDC
<i>Version of EIEP</i>	Num 3.1	M	Version of EIEP protocol that is being used for this file.
<i>Sender</i>	Char 20	M	Name of sending party. Participant identifier to be used if the sender is a participant.
<i>Sent on behalf of participant identifier</i>	Char 4	C	Participant identifier of party on whose behalf data is provided. Mandatory if sender not the participant.
<i>Recipient participant identifier</i>	Char 4	M	Valid recipient participant identifier
<i>Report run date</i>	DD/MM/YYYY	M	Date the report is run
<i>Report run time</i>	HH:MM:SS	M	Time the report is run
<i>Unique File identifier</i>	Char 15	M	Number that uniquely identifies the file
<i>Number of detail records</i>	NUM 8	M	Total number of DET records in report
<i>File status</i>	Char 1	M	I = Initial or R = Replacement or X = Replace only those ICPs contained in this replacement file, also used for each incremental file

Event data	Format	Trader to Distributor, Retailer to Trader: Mandatory/Optional/Conditional	Validation rules
<i>Detail record type</i>	Char 3	M	DET – indicates the row is a detail record.
<i>ICP identifier</i>	Char 15	M	Unique identifier for an ICP created by a distributor in accordance with clause 1 of Schedule 11.1

Event data	Format	Trader to Distributor, Retailer to Trader: Mandatory/Optional/Conditional	Validation rules
<i>Disconnection restriction</i>	Char 1	M	<p>“Y” for Yes or “N” for No for medically dependent consumer(s) at the ICP.</p> <p>Use “N” if a previous report for this ICP was “Y” and application for medically dependent consumer status has subsequently been declined, or retailer no longer records a medically dependent consumer residing at the premises.</p>
<i>Medical restriction type</i>	Char 3	C	<p>MDA if trader has received or is advised of an application for medically dependent consumer status.</p> <p>MDR if medically dependent consumer is recorded by the trader or retailer.</p> <p>Mandatory if disconnection restriction is recorded as “Y”, otherwise Null.</p>
<i>Finalled date</i>	DD/MM/YY YY	C	<p>In relation to an ICP, means the date on which an arrangement between a customer and a retailer for the supply of electricity at the ICP was terminated. For use in incremental files only.</p> <p>Mandatory if incremental file and customer contract finalled.</p>

Protocol specifications
<p>5. The information is to be provided as a comma delimited text file. Commas are therefore prohibited within fields.</p> <p>6. Each formatted file will consist of one or more records, with each record being a single line of text as</p> <ul style="list-style-type: none"> (a) a carriage return character and a line feed character combination (ASCII characters 13 and 10) commonly used in Windows based programs, or (b) a line feed character (ASCII character 10) commonly used in Unix based programs, or (c) a carriage return character (ASCII character 13) commonly used in Mac based programs. <p>7. Data fields within files are defined using the attributes in the table following these specifications.</p> <p>8. Matching of file names, code list values, etc, are to be case insensitive.</p> <p>9. Each data file will contain only one header but may contain any number of detail records.</p> <p>10. The first record of a file contains ‘Header’ information followed by zero or more detail lines.</p> <p>11. The following file naming convention is to be used with this file:</p> <p>Sender + Recipient + File Type + Report Run Date + UniqueID# (e.g. hhmm run time, or ICP but limited to Char(60)) with an extension of .TXT and with the components concatenated using the underscore character, to assist readability.</p> <p>e.g. TRUS_ UNET_ CUSIN_20000802_1232.TXT</p> <p>[Char4_ Char4_ Char7_ yyyyymmdd_UniqueID.TXT]</p>

Data outputs

Table of codes used in EIEP4A

Table 1 List of attributes to define data fields used in EIEP4A

Logical format	Data type	Rules	Example
INT (n)	Integer	<p>ASCII representation of an integer number (ie no decimals), no leading zeros, no spaces, a leading "-" if negative (no sign if positive), with 1 to n digits.</p> <p>Numbers only: ASCII characters 48 to 57, and 45 where applicable.</p>	<p>INT (4)</p> <p>12</p> <p>-1234</p>
NUM (n.d)	Decimal	<p>ASCII representation of a decimal number (ie a rational number), no spaces, a leading "-" if negative (no sign if positive), with up n digits including up to (n minus d) digits to the left of the decimal place, and up to d digits to the right of the decimal place.</p> <p>For integers, the decimal point is not required.</p> <p>A decimal point on its own must not be used to represent zero (use "0")</p> <p>Trailing zeros are optional.</p> <p>No leading zeros other than when the number starts with "0."</p> <p>Numbers only: ASCII characters 48 to 57, and 45/46 where applicable.</p>	<p>NUM (6.2)</p> <p>123.45</p> <p>1234.0</p> <p>-12.32</p> <p>NUM (6.3)</p> <p>-0.123</p> <p>23.987</p> <p>987.000</p> <p>8</p>
CHAR (n)	Text	<p>Up to n characters (ASCII characters 32 to 43 and 45 to 126 only).</p> <p>As commas (ASCII character 44) are used as field separators, they must not be used within the field data (it is recommended that any commas found in source data be changed to a semi-colon (ASCII character 59) when files are created.</p> <p>Fields must not contain any leading or trailing spaces.</p>	The quick brown fox
DATE	Date	<p>ASCII format with: Year represented as:</p> <p>— YYYY for century and year</p> <p>Month represented as:</p> <p>— MM to display leading zero</p> <p>Day represented as</p> <p>— DD to display leading zero</p> <p>ASCII format for any separators used</p>	<p>YYYYMMDD e.g.</p> <p>20050216</p> <p>DD/MM/YYYY e.g.</p> <p>16/02/2005</p>

Logical format	Data type	Rules	Example
TIME	Time	ASCII in 24 hour format Hour represented as HH with leading zeros Minutes represented as MM with leading zeros Seconds represented as SS with leading zeros ASCII format for any separators used Note: both NZST and NZDT will be used and will be indicated as necessary	HH:MM:SS e.g. 13:15:01 HH:MM e.g. 13:15
DATETIME	Date/Time	ASCII format with same rules as both Date and Time Data Types	YYYYMMDDHHMMSS e.g. 20050216131501
NULL	Null	Field contains no data	

Table 2 ASCII character set for use within fields of EIEP4A

Character	ASCII	Character	ASCII	Character	ASCII
32	Space	64	@	97	a
33	!	65	A	98	b
34	"	66	B	99	c
35	#	67	C	100	d
36	\$	68	D	101	e
37	%	69	E	102	f
38	&	70	F	103	g
39	'	71	G	104	h
40	(72	H	105	i
41)	73	I	106	j
42	*	74	J	107	k
43	+	75	K	108	l
		76	L	109	m
45	-	77	M	110	n
		78	N	111	o
46	.	79	O	112	p
47	/	80	P	113	q
48	0	81	Q	114	r
49	1	82	R	115	s
50	2	83	S	116	t
51	3	84	T	117	u

Character	ASCII
52	4
53	5
54	6
55	7
56	8
57	9
58	:
59	;
60	<
61	=
62	>
63	?

Character	ASCII
85	U
86	V
87	W
88	X
89	Y
90	Z
91	[
92	\
93]
94	^
95	_
96	Z

Character	ASCII
118	v
119	w
120	x
121	y
122	z
123	{
124	
125	}
126	~

Appendix B Format for submissions

Submitter	
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Questions	Comments
Q1. Do you agree that introducing a regulated EIEP4A will address the issues with EIEP4 described above in 2.6?	
Q2. If you are a retailer or distributor, does limiting the data provided in the proposed EIEP4A to only medically dependant status at the ICP level meet your operational needs? If not, what additional data would you suggest?	
Q3. Should the use of the EIEP transfer hub be mandatory?	
Q4. Do you agree with the objective of the proposed form? If not, why not?	
Q5. Have we identified all the main costs and benefits? If not, what are we missing?	
Q6. Do you agree the benefits of the proposed amendment outweigh its costs?	
Q7. Does the proposal adequately address privacy concerns? If not, what additional safeguards should be included?	
Q8. Do you foresee any practical or technical challenges with implementing ICP-only data exchanges? If so, what mitigations would you propose?	

Q9. Do you agree the proposed amendment is preferable to the other options? If you disagree, please explain your preferred option in terms consistent with the Authority's statutory objective in section 15 of the Electricity Industry Act 2010.