

13 January 2025

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Proposed EIEP4A (Medically Dependent Consumer Information)

Thank you for the opportunity to submit on the proposed Electricity Information Exchange Protocol – EIEP4A: Medically Dependent Consumer Information. Digital Stock is a software development company based in Invercargill. Our flagship product ARC is an operations system for distributors that allows them, among other functions, to fulfil their regulatory obligations to ensure that ICPs within the Electricity Registry are up to date.

ARC is therefore responsible for storing a copy of Registry data and providing an interface that allows distributors to view, manage, and utilise data for a range of purposes, including outage event management where this data is extremely important.

Our response will focus primarily on the technical/data related aspects of the proposal, as opposed to rationale for introducing the new protocol. As such, we have not answered specific questions based on the template but have instead included some points below detailing our feedback:

1. Potential Conflicts with EIEP4

Currently, the (unregulated) EIEP4 specification contains disconnection restriction/type information which we expect will be replaced by the introduction of the (regulated) EIEP4A file. However, we have identified some areas we believe could cause conflicts between the two files:

- **Duplication of data:** one potential issue is conflicts in the data across the EIEP4 and EIEP4A files. We expect to implement a function that will have an 'order of precedence' which prioritises the (regulated) EIEP4A information. However, since we have multiple data sources which are for (almost) the same information, there is the potential for a conflict.
- **Conflicting definition:** we note in the EIEP4A specification there is a difference in description and validation rules compared to EIEP4 for 'Disconnection restriction' and 'Medication restriction type'. This includes different restriction type values e.g. 'MDA/MDR' in EIEP4A and 'MDN/MDV' in EIEP4. For 'disconnection restriction', the EIEP4A doesn't mention 'other critical' consumers which we commonly see used for commercial ICPs, or a consumer flagged for financial hardship. These are not directly medically restricted but there is still a disconnection restriction in place.

2. Delivery Mechanism

We strongly support the utilisation of the EIEP transfer hub for delivery of these files via SFTP. It is our opinion that the ad-hoc delivery of (any) EIEP files typically introduces a higher potential for issues, and usually requires the creation of additional functions, validation, and checks in order to support files delivered outside this method (e.g. email).

3. Privacy Considerations

Consumer data privacy is, of course, an exceptionally important consideration in handling of personal information. While looking at a stand-alone file in isolation, the EIEP4A file reduces the amount of directly identifiable personal information. However, looking holistically, this is a sub-set of data which is only one of many sources; all typically brought together and linked to the ICP. As such, robust, granular data-access policies and controls should be used in conjunction to help meaningfully protect personal information.

Our Recommendations

As the specification stands currently it is workable for us, and we are able to implement the EIEP4A specification for utilisation in our systems. We understand the intent is to meet consumer care obligations for individuals, however, we believe the introduction adds a level of ambiguity between EIEP4/EIEP4A files with differing sources for *almost* the same disconnection information, specifically around non-medical disconnection restrictions (e.g. for commercial ICPs).

To align with our goal of contributing to continuous improvement we have outlined some potential recommendations below, in attempt to simplify data and help assist with potential source of truth/integrity issues using one of the options below.

It is worth noting these would require more changes and have an implementation effort/cost which may be higher for participants using legacy systems, and therefore may not be appropriate in the initial EIEP4A implementation:

- **Alignment of field definitions**
With the specification as proposed we would be introducing a new source of disconnection restriction information between EIEP4 and EIEP4A files. This introduces two separate data sources to check and utilise for operational purposes. By aligning these definitions (e.g. updating the EIEP4 specification). We could reduce complexity (although we are still duplicating a data source); or
- **Deprecation of disconnection restriction information from EIEP4**
While this approach may have a larger implementation impact (which could be mitigated with versioning) we believe that if EIEP4A is to go forward, this information should eventually be removed entirely from the EIEP4 file. This would definite a single, regulated, source of truth for this vital information (as well as separation of bill payer and disconnection restriction information).