

28 January 2025

Electricity Authority | Te Mana Hiko
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Tēnā koutou

SUBMISSION ON PROPOSED ELECTRICITY INFORMATION EXCHANGE PROTOCOL – EIEP4A: MEDICALLY DEPENDENT CONSUMER INFORMATION CONSULTATION PAPER

Unison Networks Limited (**Unison**) is an electricity distribution business operating in Hawke's Bay, Taupō and Rotorua. Centralines Limited (**Centralines**) is a distributor operating in Central Hawke's Bay.

We thank the Electricity Authority for inviting feedback on the proposed new Electricity Information Exchange Protocol (EIEP) to support retailers' upcoming obligations under the Consumer Care Obligations (Obligations).

We acknowledge the Authority's objective to:

- Address the medically dependent customer (MDC) information challenges highlighted during Customer Care consultation in August/ September 2024;
- Ensure distributors have visibility of medically dependent consumers at an ICP level.

Summary

Unison and Centralines are supportive of the proposal and welcome the proposed solution to a problem highlighted in the September submissions.

The EIEP4A requires distributors to be capable of receiving initial, complete replacement, and partial replacement files. Distributors must ensure their systems can handle these different file types. Due to operational reasons, including a changeover of the billing and registry management system, Unison and Centralines request at least a **six-month transition period** to implement the required system changes effectively.

The Consumer Care Obligations Decision Paper does not introduce new obligations for most distributors. This is primarily because:

- Most distributors do not directly invoice residential consumers for distribution services and, therefore, would not disconnect for non-payment.
- Distributors already notify all consumers about planned outages, either directly or through retailers via EIEP5A.

However, the Decision Paper uses the term "best endeavours" concerning practices that could adversely impact medically dependent customers. Unison and Centralines request further clarity from the Authority on how medically dependent consumer information should be used in this context.

The Decision Paper states that "best endeavours" involve distributors taking proactive measures to prevent the disconnection of medically dependent consumers by effectively using information provided by retailers. For distributors who directly invoice residential consumers for distribution services, systems must be in place to receive and act on information via EIEP4A to avoid disconnecting medically dependent customers. However, for distributors who do not directly invoice residential consumers, is there an expectation to refrain from disconnecting a medically dependent residential customer even if instructed to do so by the retailer?

The concept of “best endeavours” also introduces uncertainty regarding emergency disconnections and uncontracted premises. Are distributors still expected to notify customers of emergency outages under the default distributor agreements, even though this obligation has been removed? Furthermore, when disconnection is necessary, the retailer is obligated to ensure it is carried out in a manner that does not endanger medically dependent consumers. Does this obligation extend to distributors providing logistical support for disconnections, requiring them to also ensure the safety and well-being of medically dependent consumers?

It is important to note that while Customer Care Obligations involve recording MDC status and sharing it with distributors, medically dependent consumers must be aware of the potential for supply interruptions and have plans ready to respond to electrical interruptions. As submitted previously, distributor operations regarding planned outages or restorations cannot guarantee that medically dependent customers will not be impacted. Therefore, the “best endeavours” expectation cannot apply to distributor operations in these scenarios.

Only in cases of electrical disconnections of individual sites for reasons other than safety can distributors implement processes to use “best endeavours” to prevent disconnection where MDC status is recorded at an ICP.

Finally, there is concern about a potential disconnect between EIEP4 customer data and EIEP4A medically dependent consumer information. For instance, if a new medically dependent consumer moves into a premises, a distributor may lack accurate contact details to notify the consumer directly about an unplanned emergency disconnection. This issue arises because providing customer contact information under EIEP4 is voluntary for retailers, potentially leaving distributors without the necessary data to fulfil their obligations effectively.

Further engagement or consultation with distributors may assist

No part of this submission is confidential, we acknowledge it will be published. Please do not hesitate to contact us for further information including on operational requirements.

Nā māua noa, nā

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Appendix: Response to questions

Questions	Comments
Q1. Do you agree that introducing a regulated EIEP4A will address the issues with EIEP4 described above in 2.6?	Yes, we believe that a regulated and mandatory information exchange protocol will provide consistent, regular and reliable data on medically dependent consumers.
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?	<p>Providing distributor do not need to contact the medically dependent consumers directly, the MDC status contained in the proposed EIEP4A is sufficient to meet our operational needs.</p> <p>Inclusion of consumer’s preferred contact details would future-proof the ability of distributors to exercise best endeavour and notify last minute changes to planned outages or emergency disconnections.</p>
Q3. Should the use of the EIEP transfer hub be mandatory?	Yes, making the transfer hub mandatory limits errors and reduces the probability that MDC status update is not received by distributors.
Q4. Do you agree with the objective of the proposed form? If not, why not?	Partially agree. The form does not contain contact information to be used by those distributors responsible for notifying consumers of outages directly. While these distributors might have this information via direct relationship with the consumer or via EIEP4, this decoupling could lead to a wrong contact detail for the medically dependant consumer.
Q5. Have we identified all the main costs and benefits? If not, what are we missing?	Yes. The main costs are initial set up costs to comply with the Code requirement.

Q6. Do you agree the benefits of the proposed amendment outweigh its costs?	Agree, the benefits outweigh the costs.
Q7. Does the proposal adequately address privacy concerns? If not, what additional safeguards should be included?	Privacy concerns have been well addressed. Contact information for medically dependent consumer at the address could be added to the EIEP4A form to allow distributors notification of last-minute changes to planned outages or emergency disconnections when possible. This would not still offer a high degree of privacy protection.
Q8. Do you foresee any practical or technical challenges with implementing ICP-only data exchanges? If so, what mitigations would you propose?	Implementation will require distributors to have a system capable of receiving initial, complete replacement and partial replacement files. Due to operational reasons, including a changeover of the billing and registry management system, Unison and Centralines request at least a six-month transition period to implement the required system changes effectively.
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.	Agree with the proposed amendment as a preferred option.