

NSW Social Programs for Energy Code

Low Income Household Rebate
Life Support Rebate
Medical Energy Rebate
Family Energy Rebate
Energy Accounts Payment Assistance (EAPA) Scheme

Effective Date: 1 July 2013
Version: 1.0

Contents

| | | |
|---------------|---|-----------|
| PART A | | 4 |
| A1 | DICTIONARY | 4 |
| A2 | PURPOSE | 5 |
| A3 | OVERVIEW OF SOCIAL PROGRAMS FOR ENERGY | 5 |
| A4 | RETAILER OBLIGATIONS | 6 |
| A5 | GENERAL INFORMATION - REBATES ONLY | 6 |
| A5.1 | APPLICATION OF THIS SECTION | 6 |
| A5.2 | INFORMATION TO CUSTOMERS | 6 |
| A5.3 | VERIFICATION OF NEW CUSTOMER WITH THE COMMONWEALTH DEPARTMENT OF HUMAN SERVICES (DHS)/DEPARTMENT OF VETERANS' AFFAIRS (DVA) | 7 |
| A5.4 | NOTIFYING INELIGIBLE CUSTOMERS | 7 |
| A5.5 | DATE OF COMMENCEMENT | 7 |
| A5.6 | ENSURING ELIGIBLE CUSTOMERS CONTINUE TO RECEIVE THE REBATE | 7 |
| A5.7 | ARRANGEMENTS FOR RETAILER PAYMENT | 8 |
| A5.8 | CREDIT BALANCE | 8 |
| A5.9 | CUSTOMER REQUIRED TO NOTIFY THEIR RETAILER | 9 |
| A5.10 | COMPLIANCE | 9 |
| A5.11 | ELIGIBILITY OF RESIDENTIAL PARK RESIDENTS | 9 |
| A5.12 | CALCULATION OF THE REBATE | 9 |
| A5.13 | CONFIDENTIALITY | 10 |
| PART B | | 11 |
| B1 | LOW INCOME HOUSEHOLD REBATE | 11 |
| B1.1 | ELIGIBILITY CRITERIA | 11 |
| B1.2 | APPLICATION PROCESS | 11 |
| B1.3 | ONGOING VERIFICATION TO ASCERTAIN CONTINUED ELIGIBILITY OF CUSTOMERS | 12 |
| B1.4 | REBATE INDEXATION | 12 |
| | APPENDIX B1.1 – ACQUITTAL STATEMENT | 13 |
| B2 | LIFE SUPPORT REBATE | 14 |
| B2.1 | ELIGIBILITY CRITERIA | 14 |
| B2.2 | APPLICATION PROCESS | 14 |
| | APPENDIX B2.1 – ACQUITTAL STATEMENT | 16 |
| | APPENDIX B2.2 – APPLICATION FORM | 17 |
| | APPENDIX B2.3 – APPROVED EQUIPMENT LIST | 19 |
| B3 | MEDICAL ENERGY REBATE | 20 |
| B3.1 | ELIGIBILITY CRITERIA | 20 |
| B3.2 | APPLICATION PROCESS | 21 |
| B3.3 | ONGOING VERIFICATION TO ASCERTAIN CONTINUED ELIGIBILITY OF CUSTOMERS | 21 |
| B3.4 | REBATE INDEXATION | 22 |
| | APPENDIX B3.1 – ACQUITTAL STATEMENT | 23 |
| | APPENDIX B3.2 – APPLICATION FORM | 24 |
| B4 | FAMILY ENERGY REBATE (FER) | 26 |
| B4.1 | ELIGIBILITY CRITERIA | 26 |
| B4.2 | APPLICATION PROCESS | 26 |
| B4.3 | ONGOING ELIGIBILITY | 26 |
| B4.4 | APPLICATION OF THE REBATE | 26 |
| | APPENDIX B4.1 – ACQUITTAL STATEMENT | 28 |
| PART C | | 29 |
| C1 | ENERGY ACCOUNTS PAYMENT ASSISTANCE (EAPA) | 29 |
| C1.1 | OVERVIEW | 29 |
| C1.2 | DELIVERY OF EAPA BY CWOS | 29 |
| C1.3 | ACCEPTANCE OF EAPA BY RETAILERS | 30 |
| C1.4 | CIRCUMSTANCES WHERE EAPA IS NOT TO BE USED | 30 |
| C1.5 | RETAILERS ASSISTING CWOS | 30 |
| C1.6 | PROHIBITION ON DISCONNECTION DURING EAPA ASSESSMENT | 31 |
| C1.7 | FINANCIAL YEAR EXPIRY | 31 |
| C1.8 | RESIDENTIAL ELECTRICITY AND GAS CONSUMPTION ONLY | 32 |
| C1.9 | VOUCHER VALIDITY | 32 |
| C1.10 | EAPA VOUCHERS ISSUED BY TWO OR MORE CWOS | 32 |
| C1.11 | FRAUD OR MISREPRESENTATION | 33 |
| C1.12 | VOUCHER STORAGE | 33 |

C1.13 LOSS OR THEFT 33
C1.14 INVALID OR REJECTED VOUCHERS..... 33
C1.15 RECORDING EAPA USAGE 33
C1.16 REIMBURSEMENT STATEMENT AND ELECTRONIC REPORTING 33

NSW Social Programs for Energy Code

Electricity Supply Act 1995

Gas Supply Act 1996

PART A

A1. Dictionary

- A1.1 **administration fee** means:
- (a) for **rebates** (other than the Family Energy Rebate) \$0.80/365 multiplied by the total number of **eligible customers** as at the end of the month and multiplied by the number of days in the month; or
 - (b) for the Family Energy Rebate, \$0.80 multiplied by the total number of **eligible customers** paid by the **retailer** as at the end of the month.
- A1.2 **approved life support equipment** are the items listed at Appendix B2.3.
- A1.3 **acquittal statement** means the relevant statement for each **rebate** contained at Appendix B1.1, Appendix B2.1, Appendix B3.1 and Appendix B4.1.
- A1.4 **department** means NSW Trade & Investment.
- A1.5 **eligible customer(s)** is as defined for each **rebate** at clauses B1.1, B2.1, B3.1 and B4.1.
- A1.6 **residential customer** means a customer who purchases energy principally for personal, household or domestic use at premises.
- A1.7 **social program for energy** means a program to ensure that energy services (including connection services and electricity supply) are available to those who are in need, including those who suffer financial hardship and those who live in remote areas, and includes:
- (a) any program for electricity and gas bills payment assistance, and
 - (b) any program for rebates to eligible pensioners, and
 - (c) any program for rebates with respect to electricity used for life support systems.
- A1.8 **rebate(s)** refers to any or all of the Low Income Household Rebate, Life Support Rebate, Medical Energy Rebate and Family Energy Rebate, as relevant.
- A1.9 **regulated offer retailer** is a **retailer** nominated by the *National Energy Retail Law (Adoption) Regulation 2013* as a regulated offer **retailer**.
- A1.10 **retailer(s)** means the holder of a retailer authorisation.
- A1.11 **retailer payment** means the sum of the **administration fee** and the total value of rebates paid each month.
- A1.12 **residential park** means:
- A1.12.1 a caravan park (that is, land, including a camping ground, on which caravans, or caravans and other moveable dwellings, have been, are or are to be placed, installed or erected); or

- A1.12.2 a manufactured home estate (that is, land on which manufactured homes have been, are or are to be placed), whether or not the caravan park or manufactured home estate is the subject of an approval under the [Local Government Act 1993](#).

A2. Purpose

- A2.1 This social programs for energy code (the Code) has been adopted in accordance with clause 73 of the *Electricity Supply (General) Regulation 2001* and clause 15 of the *Gas Supply (General) Regulation 2001* for the purpose of facilitating the delivery of the following **social programs for energy**:
- A2.1.1 Low Income Household Rebate;
 - A2.1.2 Life Support Rebate;
 - A2.1.3 Medical Energy Rebate;
 - A2.1.4 Family Energy Rebate; and
 - A2.1.5 Energy Accounts Payment Assistance (EAPA) Scheme.
- A2.2 The Code takes effect from the date of gazettal.
- A2.3 The Code replaces the previous Ministerial Direction for Social Programs and Guidelines in relation to the Low Income Household Rebate, Medical Energy Rebate, Life Support Rebate, Family Energy Rebate and the EAPA Guideline for Energy Retailers.
- A2.4 The Code consists of three parts:
- A2.4.1 Part A outlines the requirements applicable to all **rebates**;
 - A2.4.2 Part B outlines additional requirements that are specific to individual **rebates**; and
 - A2.4.3 Part C outlines the requirements for the EAPA Scheme.
- A2.5 Parts A, B and C apply to all electricity **retailers**.
- A2.6 Parts A, B and C apply to Ergon Energy Queensland Pty Ltd (CAN 121 177 802), as an exempt person under clause 73(2) of the *Electricity Supply (General) Regulation 2001*, in relation to eligible NSW customers connected to the distribution system of Ergon Energy Corporation Limited (CAN 087 646 062).
- A2.7 Part C applies to gas **retailers**.

A3. Overview of social programs for energy

- A3.1 The Low Income Household Rebate is designed to provide assistance in relation to a **residential customer's** energy expenses.
- A3.2 The Life Support Rebate is designed to provide assistance where **approved life support equipment** that is essential to support life is used by the **residential customer** or another person who lives at the same address as the **residential customer**. This rebate is not means tested and depends on the type of machine in use, and in some cases, the frequency of such use.
- A3.3 The Medical Energy Rebate is designed to provide assistance where a **residential customer** or a person who lives at the same address as the **residential customer** has an inability to self-regulate body temperature and the **residential customer**

holds one of the required concession cards. An inability to self-regulate body temperature may be associated with certain medical conditions.

- A3.4 The Family Energy Rebate is designed to assist families to manage their energy costs. It is only available to **residential customers** who receive the Commonwealth Government's Family Tax Benefit A or B
- A3.5 Each of the **rebates** set out in A3.1-A3.4 are applied to a **residential customer's** electricity bill.
- A3.6 For eligible residential park residents, the Family Energy Rebate will be deposited via EFT into the customer's nominated bank account by the **department**.
- A3.7 The EAPA Scheme is designed to assist **residential customers** who are experiencing difficulty in paying their gas and/or electricity bill owing to a crisis or emergency situation.

A4. Retailer obligations

- A4.1 A **retailer** must:
 - A4.1.1 as soon as practicable after an election is made by any person who is or may be a **residential customer**, for the provision of energy supply, inform that person of the availability of the **social programs for energy** and provide an application form, if requested;
 - A4.1.2 include information on the availability of **social programs for energy** in all bills issued to **residential customers**;
 - A4.1.3 include information relating to the availability of **social programs for energy** on its website; and
 - A4.1.4 acknowledge that the relevant **social program for energy** is funded by the NSW Government in any promotional material that refers to the **social program for energy**.
- A4.2 **Retailers** may promote the **social programs for energy** together with their own products as part of their overall marketing strategy but must, at all times, comply with clause A4.1.

A5. General Information – Rebates only

A5.1 Application of this section

- A5.1.1 This section applies to the Low Income Household Rebate, Life Support Rebate, Medical Energy Rebate and Family Energy Rebate (**rebate** or **rebates**, depending on the context).

A5.2 Information to customers

- A5.2.1 A **residential customer** may receive one or more **rebates** concurrently or more than one payment under the Life Support Rebate, subject to meeting the eligibility requirements for each particular **rebate**.
- A5.2.2 Where one or more **rebates** are payable, **retailers** must identify each **rebate** as a separate credit amount on the **eligible customer's** bill.
- A5.2.3 A **retailer** must use the following descriptions (as relevant) for each separate credit amount on the bill:

- A5.2.3.1 “NSW Gvt Household rebate” or “NSW Low Income Household Rebate”; and
- A5.2.3.2 “NSW Government Life Support Rebate” or “NSW Government Rebate for the [insert specific machine type]”; and
- A5.2.3.3 “NSW Medical Energy Rebate”; and
- A5.2.3.4 “NSW Family Energy Rebate”.

A5.3 Verification of new customers with the Commonwealth Department of Human Services (DHS)/Department of Veterans’ Affairs (DVA)

- A5.3.1 Where required under the eligibility criteria for each **rebate**, a **retailer** must verify the Pensioner Concession Card, DHS Health Care Card or DVA Gold Card status of each new customer with DHS before a **rebate** is applied to that customer’s bill.
- A5.3.2 Despite clause A5.3.1, if a **retailer** verifies the eligibility of new customers with DHS in weekly or monthly batches, rather than using a single enquiry to verify a customer individually, reasonable attempts must be made by that **retailer** to ensure eligibility is verified before the **rebate** is applied to a customer’s bill.

Note: To avoid errors in entering the Pensioner Concession Card, DHS Health Care Card or DVA Gold Card number in the system, **retailers** are encouraged to use the DHS algorithm which verifies whether the DHS customer reference number/DVA file number is genuine and prevents the system accepting incorrect numbers. To gain access to the DHS algorithm, **retailers** must apply directly to DHS.

A5.4 Notifying ineligible customers

- A5.4.1 A **retailer** must notify a customer who applies, but is found to be ineligible to receive the **rebate** applied for, of their ineligibility as soon as practicable.
- A5.4.2 The notification given by the **retailer** must include the reason(s) for declining the application.
- A5.4.3 This clause does not apply to the Family Energy Rebate.

A5.5 Date of commencement

- A5.5.1 Once a customer is assessed as eligible to receive a **rebate**, the **retailer** must pay the **rebate** from the date on which the application was made by the customer.
- A5.5.2 Subject to clause A5.6, **rebates** must not be back-dated prior to the date on which a customer’s application is made.
- A5.5.3 Where a customer changes **retailer**, the date the customer’s supply commences with the new **retailer** will be deemed to be the date the customer applied for the **rebate**. This will ensure that the **rebate** is continuously paid to the customer during the transfer from one **retailer** to another.

A5.6 Ensuring eligible customers continue to receive the Rebate

- A5.6.1 **Retailers** must ensure that **eligible customers** continue to receive the **rebate** without interruption (provided there is no change to their

circumstances that would render the customer ineligible) in the following circumstances:

- A5.6.1.1 after changing contracts;
- A5.6.1.2 after changing **retailer**;
- A5.6.1.3 after moving residence; or
- A5.6.1.4 during the annual verification process.

A5.6.2 If a customer's **rebate** payments cease under any of the circumstances listed in A5.6.1, or as a result of **retailer** error, the **retailer** must reimburse the customer for the period they would have otherwise been entitled to receive the rebate.

A5.6.3 This clause does not apply to the Family Energy Rebate.

A5.7 Arrangements for retailer payment

A5.7.1 A **retailer payment** will be provided to **retailers** each month.

A5.7.2 The **retailer payment** for **rebates** (other than the Family Energy Rebate) must include:

A5.7.2.1 the total value of the **rebates** paid to **eligible customers** during the month; and

A5.7.2.2 the **administration fee**.

A5.7.3 The **retailer payment** for the Family Energy Rebate must include:

A5.7.3.1 the total value of **rebates** paid to **eligible customers** calculated on the basis of the dataset provided by the **department** to the **retailer**, and

A5.7.3.2 the **administration fee**.

A5.7.4 The **retailer** must record the total value of the **rebates** paid by the **retailer**, the **administration fee** claimed by the **retailer** and the number of **eligible customers** based on the figures contained in the **retailer's** system records.

A5.7.5 Each **retailer** must submit the following documents to the **department** by the 10th business day of each month:

A5.7.5.1 a certified **acquittal statement** in the form provided by the **department**;

A5.7.5.2 a tax invoice for the **retailer payment**; and

A5.7.5.3 a copy of the summary of the system records referred to in clause A5.7.4.

A5.8 Credit balance

A5.8.1 If the total of a customer's bill is less than the **rebate** amount, the difference is to be applied as a credit to the customer's account and is to be carried forward to the next billing cycle.

A5.8.2 Where a customer with a **rebate** credit elects to change his or her **retailer** or close their electricity account with a **retailer**, that **retailer** must refund to the customer the credit amount at the date of transfer to the new **retailer** or the date that the customer closed the account with that **retailer**.

A5.9 Customers required to notify their retailer

- A5.9.1 A **retailer** must advise customers that they are required to notify their **retailer**, as soon as possible, of any changes in their circumstances that would affect their pending application or continued eligibility for a **rebate**.

A5.10 Compliance

- A5.10.1 **Retailers** must establish and maintain accounting procedures and records to enable periodic reports to be prepared to substantiate compliance with the Code.
- A5.10.2 **Retailers** must, upon request, provide such reports to the Minister, the **department** or any auditor appointed by the **department**.
- A5.10.3 **Retailers** must maintain records to substantiate compliance with the Code for a period of seven years.

A5.11 Eligibility of residential park residents

- A5.11.1 A **regulated offer retailer** must provide **rebates** to eligible long term residents of **residential parks**.
- A5.11.2 The **regulated offer retailer** must include an additional 10% with the **rebate** paid to **eligible customers** to cover GST charged by the **residential park** operator.
- A5.11.3 The **regulated offer retailer** must pay the **rebate** periodically, directly to **eligible customers** by cheque or electronic funds transfer (EFT).
- A5.11.4 Each **rebate** for eligible **residential park** residents must be calculated on a daily rate basis (e.g. \$236.50/365 days) which is applied to the number of days in each payment cycle, with a payment cycle at least once every six months.
- A5.11.5 Long term residents of **residential parks** must apply to their **regulated offer retailer** (even if the **residential park** owner is supplied by another **retailer**) for **rebates** (other than the Family Energy Rebate).
- A5.11.6 **Regulated offer retailers** must ensure that applications from long term residents of **residential parks** include a written statement from the **residential park** owner certifying that the applicant is a long term resident at the address of the **residential park**.
- A5.11.7 For the Family Energy Rebate, long term residents of **residential parks** must apply directly to the **department** by submitting a completed application form. **Eligible customers** will be paid the relevant **rebate** amount by the **department**.

A5.12 Calculation of the rebate

- A5.12.1 The Low Income Household Rebate and the Medical Energy Rebate must be calculated on the applicable daily rate basis (e.g. \$215/365 days) which is multiplied by the number of days in each billing cycle (e.g. for quarterly bills, 92 days) and offset against the gross amount of the bill before GST is applied.
- A5.12.2 The Life Support Rebate must be calculated on the applicable daily rate (24 hour or less than 24 hour) which is multiplied to the number of days in

each billing cycle and offset against the gross amount of the bill before GST is applied.

A5.12.3 This clause does not apply to the Family Energy Rebate.

A5.13 Confidentiality

A5.13.1 **Retailers** are required to protect the confidentiality of **eligible customers** to ensure that their records are not used for any purpose other than the delivery of the **rebate** or as stipulated in this Code for audit purposes.

PART B

B1. Low Income Household Rebate

B1.1 Eligibility criteria

- B1.1.1 To be eligible for the Low Income Household Rebate a person must:
 - B1.1.1.1 be resident in New South Wales; and
 - B1.1.1.2 be a customer of the retail supplier, or a long term resident of a **residential park**, and whose name appears on the electricity account for supply to his or her principal place of residence; and
 - B1.1.1.3 hold either a:
 - B1.1.1.3.1 Pensioner Concession Card issued by the DHS/DVA; or
 - B1.1.1.3.2 DHS Health Care Card; or
 - B1.1.1.3.3 DVA Gold Card marked with either:
 - B1.1.1.3.3.1 War Widow or War Widower Pension; or
 - B1.1.1.3.3.2 Totally and Permanently Incapacitated (TPI); or
 - B1.1.1.3.3.3 Disability Pension (EDA).

B1.2 Application process

- B1.2.1 A person may apply for the Low Income Household Rebate in person, in writing or by telephone.
- B1.2.2 A **retailer** must establish a standard pro-forma application that requires an applicant to provide the following information:
 - B1.2.2.1 the full name of the applicant;
 - B1.2.2.2 the applicant's address;
 - B1.2.2.3 the name and number of the concession card that makes the customer eligible for the Low Income Household Rebate;
 - B1.2.2.4 the date of grant or expiry of the concession card; and
 - B1.2.2.5 the date of application for the Low Income Household Rebate.
- B1.2.3 The pro-forma application must include a statement to the following effect:
 - B1.2.3.1 the eligibility details provided by the customer in their application will be used to check their Pensioner Concession Card/Health Care Card/Gold Card status with the DHS/DVA;
 - B1.2.3.2 the customer has the right to revoke their consent to the eligibility check at any time in writing; and
 - B1.2.3.3 if the customer refuses to give consent, they will no longer receive the Low Income Household Rebate unless they can provide written verification of their continuing eligibility from the DHS/DVA.
- B1.2.4 When an application is made in writing or in person, the customer must sign the application form.
- B1.2.5 When an application is made by telephone, the officer receiving the application must:
 - B1.2.5.1 inform the applicant of the statements set out in clause B1.2.3;
 - B1.2.5.2 request the applicant's consent to check their Pensioner Concession Card/Health Care Card/Gold Card status with the DHS /DVA; and

B1.2.5.3 record the applicant's consent/refusal.

B1.3 Ongoing verification to ascertain continued eligibility of customers

- B1.3.1 A **retailer** must verify the details of all **rebate** recipients who hold a DHS Health Care Card for continued eligibility with the DHS at least once every three months.
- B1.3.2 A **retailer** must verify the details of all other **rebate** recipients for continued eligibility with the DHS or DVA at least once a year.
- B1.3.3 If a customer fails a verification check, the **retailer** must inform the customer as soon as practicable.
- B1.3.4 The results of the above verification checks must be provided by the **retailer** to the **department** each year. The results must include the following information:
 - B1.3.4.1 the number of eligible Pensioner Concession Card, Health Care Card and Gold Card holders in each category;
 - B1.3.4.2 the total number of initial mismatches; and
 - B1.3.4.3 the total number of customers determined as ineligible from the verification process.
- B1.3.5 All **retailers** must have a contractual arrangement with the DHS before verifying customers' details with the DHS.

B1.4 Rebate indexation

- B1.4.1 For **eligible customers**, the rebate will be:
 - B1.4.1.1 \$225 per annum between 1 July 2013 and 30 June 2014; and
 - B1.4.1.2 \$235 per annum between 1 July 2014 and 30 June 2015.
- B1.4.2 For eligible long term residents of **residential parks**, the rebate will be:
 - B1.4.2.1 \$247.50 per annum between 1 July 2013 and 30 June 2014; and
 - B1.4.2.2 \$258.50 per annum between 1 July 2014 and 30 June 2015.

Appendix B1.1 – Acquittal Statement

LOW INCOME HOUSEHOLD REBATE ACQUITTAL STATEMENT FOR THE MONTH OF [INSERT]

| | | |
|----|---|----------|
| 1 | Rebate amount confirmation and standard billing information The per annum equivalent of the individual rebate amount granted was: The daily rate equivalent of the individual rebate amount granted was: | \$ \$ |
| 2 | All eligible customers in receipt of the Rebate (3 + 4 + 5) Number of all eligible customers in receipt of the Rebate during this period was: | |
| 3 | The total number of all eligible Health Care Card holders in receipt of the Rebate during this period was: | |
| 4 | The total number of all eligible Pensioner Concession Card holders in receipt of the Rebate during this period was: | |
| 5 | The total number of all eligible DVA Gold Card holders in receipt of the Rebate during this period was: | |
| 6 | Total Rebate amount claimed Total amount paid as Low Income Household Rebates during this period was: | \$ |
| 7 | Average amount paid per customer Average amount paid per customer this period was: | \$ |
| 8 | Eligible customers number The total number of eligible customers as at xx/xx/xxxx was: | |
| 9 | Administrative component amount claimed Total amount due for administrative component this period was: (Number of days this period multiplied by daily rate by total number of Eligible Customers) | \$ |
| 10 | TOTAL AMOUNT CLAIMED (6 + 9) | \$ |
| 11 | <p>I CERTIFY that:</p> <ul style="list-style-type: none"> This invoice is a true and accurate reflection of the actual Low Income Household Rebates paid to Eligible Customers. The verification procedures set out in the Code issued by the Minister have been complied with. Each Eligible Customer was, to the best of my knowledge, eligible for the Rebate at the date that it was granted. Each Eligible Customer to whom a Rebate has been granted has claimed in a written or verbal application to be the person solely liable or a person jointly liable in respect of the charge for energy shown on an account issued by this organisation. This claim is supported by a system-based record identifying the: <ul style="list-style-type: none"> customer's name, address, pensioner number and health care card number, date of grant of the card or date of expiry of the card; date of grant of the Rebate; account number; and amount of Rebate granted. Attached to this document is a system generated summary identifying the number of rebate recipients by eligibility criteria (for example, the number of the Department of Human Services Pensioner Concession Card holders). These records are available for audit purposes, if required. | |

(Signed) _____
(Chief Finance Officer or appropriate delegate)
(Name) _____

B2. Life Support Rebate

B2.1 Eligibility criteria

B2.1.1 To be eligible for the Life Support Rebate a person must:

B2.1.1.1 be resident in New South Wales; and

B2.1.1.2 be a customer of the retail supplier, or a long term resident of a **residential park**, and whose name appears on the electricity account for supply to his or her principal place of residence where **approved equipment** (see approved list in Appendix B2.3) is used by the customer or another person who lives at the same address; and

B2.1.1.3 submit a valid application form (see appendix B2.2) duly signed by a registered medical practitioner to verify that the use of the **approved life support equipment** is required at his or her principal place of residence.

B2.2 Application process

B2.2.1 Applications must be made in writing using the application form at Appendix B2.2. Relevant parts of the application form must be completed and signed by both the applicant and a medical practitioner.

B2.2.2 Applicants must send their signed application form to their **retailer**. **Residential park** residents must send their signed application form to their **regulated offer retailer**.

B2.2.3 Before applying the **rebate** to a customer's account, **retailers** must verify that the application form is properly completed and signed by both the applicant and a registered medical practitioner. Certificates from equipment manufacturers or from sleep clinics (without the signature of a registered medical practitioner) are not acceptable.

B2.2.4 In the event that an applicant lives in remote or regional NSW and is being treated by the Royal Flying Doctor Service (RFDS), the application form may be signed by any medical practitioner under the RFDS.

B2.2.5 The customer must re-apply for the **rebate** every two years.

B2.2.6 At the time of application, in order to confirm the applicant's continued eligibility for the **rebate**, the **retailer** must bring to the attention of the applicant that an updated application form will be required every two years from the date of the initial approval for the **rebate**.

B2.2.7 Customers who are currently receiving the **rebate** are not required to submit a fresh application form until they are due for their two yearly verification.

B2.2.8 In order to ensure continuity of the **rebate** where a customer changes his or her **retailer**, the date the customer's supply commences with the new **retailer** will be deemed to be the date the customer applied for the **rebate**. However, the customer must complete and submit an application to the new **retailer** before the **rebate** can be applied by the new **retailer**. Note that this may cause some inconvenience to the customer but the

retailer requires the relevant information in order to ensure ongoing priority of supply for the customer.

- B2.2.9 **Retailers** must conduct a verification audit of the **rebate** every two years to confirm it is only being provided to **eligible customers** and provide the results of the audit to the **department**, or its auditor, on request.
- B2.2.10 The amount of the **rebate** for each item of **approved life support equipment** is set out at Appendix B2.3.

Appendix B2.1 – Acquittal Statement

LIFE SUPPORT REBATE ACQUITTAL STATEMENT - MONTH OF *[Insert]*

| No | Life Support Equipment type | Examples of brand names (indicative only – not an exhaustive list) | Daily Rate (less than 24 hour rate or 24 hour rate) | | Total number of recipients | Number of recipients this period | Rebate Amount granted this period | Total Administrative component claimed | Total claimed This period |
|----|--|---|---|--------|----------------------------|----------------------------------|-----------------------------------|--|---------------------------|
| | | | | | | | | | |
| 1 | Positive Airways Pressure (PAP) Device | Continuous Positive Airways Pressure (CPAP), Bilevel or Variable Positive Airways Pressure (BiPAP or V-PAP) etc | Daily | \$0.16 | | | \$ | \$ | \$ |
| | | | 24 hour | \$0.32 | | | \$ | \$ | \$ |
| 2 | Enteral feeding pump | Kangaroo pump, Companion-Abbott, Flexiflow patrol pump | Daily | \$0.20 | | | \$ | \$ | \$ |
| 3 | Phototherapy equipment | Blue light therapy | Daily | \$1.66 | | | \$ | \$ | \$ |
| 4 | Home dialysis | Haemodialysis or Peritoneal automated cyclers machines – Brand names include: Fresenius, Gambro, Baxter | Daily | \$0.69 | | | \$ | \$ | \$ |
| 5 | Ventilators | LTV series, Breas, PLV-100 etc, Iron Lung | Daily | \$1.66 | | | \$ | \$ | \$ |
| 6 | Oxygen concentrators | Devilbiss etc | Daily | \$0.83 | | | \$ | \$ | \$ |
| | | | 24 hour | \$1.40 | | | \$ | \$ | \$ |
| 7 | Total Parenteral Nutrition (TPN) pump | Volumatic pump, Flowguard pump | Daily | \$0.38 | | | \$ | \$ | \$ |
| 8 | External heart pump | Left Ventricular Assist Device | Daily | \$0.05 | | | \$ | \$ | \$ |

I CERTIFY that:

- This invoice is a true and accurate reflection of the actual Life Support Rebates paid to eligible customers.
- The two yearly verification procedures set out in the Code issued by the Minister have been complied with.
- Each recipient was, to the best of my knowledge, eligible for the Life Support Rebate at the date that it was granted.
- Each eligible customer to whom a Life Support Rebate has been granted has submitted a written Application Form duly signed by a registered medical practitioner verifying the use of an approved item of life-support equipment required to be used at his or her principal place of residence.
- This claim is supported by a system-based record identifying:
 - customer's name, address and equipment type; and
 - account number, amount of rebate and date of grant of the rebate.
- Attached to this document is a system generated summary identifying the number of rebate recipients by eligibility criteria (for example, the number of the Department of Human Services Pensioner Concession Card holders).
- These records are available for audit purposes, if required.

(Signed) _____
(Chief Finance Officer or appropriate delegate)

(Name) _____

Date: __/__/__

Application for the NSW Government Life Support Rebate

To be eligible for the Life Support Rebate, the customer must be responsible for the payment of the electricity account for his/her principal place of residence where the customer or another person living at the same address relies on electricity to operate approved Life Support Equipment.

PLEASE SUBMIT THIS COMPLETED FORM TO YOUR RETAILER AS SOON AS POSSIBLE.
THE REBATE WILL BE APPLIED FROM THE DATE YOU SUBMIT THIS FORM.
YOU WILL NEED TO REAPPLY FOR THIS REBATE EVERY TWO YEARS.

Name of Patient who uses Life Support Equipment:

| | | |
|------------------------------|----------|----------------|
| Title (<i>Mr, Mrs, Ms</i>) | Surname: | Given Name(s): |
|------------------------------|----------|----------------|

Patient’s contact details:

| | | |
|--------------|--------|-----------|
| Address: | | |
| Suburb/Town: | State: | Postcode: |
| Home phone: | | |

List the approved Life Support Equipment prescribed for the Patient

See over page for the List of Approved Life Support Equipment

| |
|-----------------------------|
| Name of approved equipment: |
| |

IMPORTANT: For oxygen concentrators and PAP devices, please specify if the machine is used 24 hr a day.

Medical practitioner (GP/Specialist) details and support for the use of Life Support Equipment:

| | |
|---|-----------------------------|
| Practitioner Surname: | Practitioner Given Name(s): |
| Provider number: | |
| Name of the hospital/clinic/practice where the client was reviewed: | |
| Phone number of the hospital/clinic/practice where the client was reviewed: | |

Medical declaration:

I certify that the above patient requires the use of the above mentioned life support equipment.

| | |
|------------------------------------|-------|
| Signature of medical practitioner: | Date: |
|------------------------------------|-------|

Electricity Account Holder’s authorisation and declaration:

- All particulars on this form are, to the best of my knowledge and belief, true and accurate.
- The electricity supply address for my electricity account is the primary place of residence for the above Patient (if Patient is different from the Account Holder).
- I will notify my electricity supplier in writing if my circumstances change including the validity of this application or my entitlements to the Life Support Rebate.
- I understand that this application is only valid for 24 months and will need to be renewed and validated by a medical practitioner (my GP/Specialist) after this time.
- I understand that to ensure priority of supply for the life support machine, my electricity supplier will need to provide my application details to the relevant electricity distributor.

| | |
|----------------------------------|-----------------|
| Name of the account holder: | Account number: |
| Signature of the Account Holder: | Date: |

FOR MEDICAL PRACTITIONER'S USE
List of Approved Life Support Equipment

| Equipment | Examples of brand names | Daily rate |
|---|---|--|
| Positive Airways Pressure (PAP) Device | Continuous Positive Airways Pressure (CPAP), Bilevel or Variable Positive Airways Pressure (BiPAP or V-PAP) etc | \$0.16 for less than 24 hour usage \$0.32 for 24 hour usage |
| Enteral feeding pump | Kangaroo pump Companion-Abbott Flexiflow patrol pump | \$0.20 |
| Phototherapy equipment | Blue light therapy | \$1.66 |
| Home dialysis | Haemodialysis or Peritoneal automated cyclers machines – Brand names include: Fresenius, Gambro, Baxter | \$0.69 |
| Ventilators | LTV series, Breas, PLV-100 etc, Iron Lung | \$1.66 |
| Oxygen concentrators | Devilbiss etc | \$0.83 for less than 24 hour usage \$1.40 for 24 hour usage |
| Total Parenteral Nutrition (TPN) pump | Volumatic pump Flowguard pump | \$0.38 |
| External heart pump | Left Ventricular Assist Device | \$0.05 |

PLEASE SUBMIT THIS COMPLETED FORM TO YOUR RETAILER AS SOON AS POSSIBLE.
THE REBATE WILL BE APPLIED FROM THE DATE YOU SUBMIT THIS FORM.
YOU WILL NEED TO APPLY FOR THIS REBATE EVERY TWO YEARS.

Appendix B2.3 – Approved Equipment List

| List of Approved Life Support Equipment | | |
|--|---|--|
| Equipment | Examples of brand names* | Daily rate |
| Positive Airways Pressure (PAP) Device | Continuous Positive Airways Pressure (CPAP), Bilevel or Variable Positive Airways Pressure (BiPAP or V-PAP) etc | \$0.16 for less than 24 hour usage \$0.32 for 24 hour usage |
| Enteral feeding pump | Kangaroo pump Companion-Abbott Flexiflow patrol pump | \$0.20 |
| Phototherapy equipment | Blue light therapy | \$1.66 |
| Home dialysis | Haemodialysis or Peritoneal automated cyclers machines – Brand names include: Fresenius, Gambro, Baxter | \$0.69 |
| Ventilators | LTV series, Breas, PLV-100 etc, Iron Lung | \$1.66 |
| Oxygen concentrators | Devilbiss etc | \$0.83 for less than 24 hour usage \$1.40 for 24 hour usage |
| Total Parenteral Nutrition (TPN) pump | Volumatic pump Flowguard pump | \$0.38 |
| External heart pump | Left Ventricular Assist Device | \$0.05 |

NOTE: List of brand names against each piece of equipment has been included for information only, and is not exhaustive.

B3. Medical Energy Rebate

B3.1 Eligibility criteria

- B3.1.1 To be eligible for the Medical Energy Rebate a person must:
- B3.1.1.1 be resident in New South Wales; and
 - B3.1.1.2 be a customer of the retail supplier, or a long term resident of a **residential park**, and whose name appears on the electricity account for supply to his or her principal place of residence; and
 - B3.1.1.3 submit a valid application form (see Appendix B3.2) duly signed by a registered medical practitioner to verify that either the customer named on the bill or anyone residing at the residence has an inability to self-regulate body temperature as defined at B3.1.2 below; and
 - B3.1.1.4 hold either a:
 - B3.1.1.4.1 Pensioner Concession Card issued by the DHS/DVA; or
 - B3.1.1.4.2 DHS Health Care Card; or
 - B3.1.1.4.3 DVA Gold Card.
- B3.1.2 For the purpose of this **rebate**, an **eligible customer** has an inability to self-regulate body temperature where the **eligible customer** (or someone living at the supply address of the **eligible customer**) has been assessed by a registered treating medical practitioner who has been treating them for at least three months as meeting one of the following four primary qualifying conditions and one of the three secondary qualifying conditions:
- B3.1.2.1 Primary qualifying conditions:
- B3.1.2.1.1 autonomic system dysfunction (Medical conditions in which the autonomic system has been damaged eg severe spinal cord injury, stroke, brain injury and neurodegenerative disorders);
 - B3.1.2.1.2 loss of skin integrity or loss of sweating capacity (for example, significant burns greater than 20%, severe inflammatory skin conditions and some rare forms of disordered sweating);
 - B3.1.2.1.3 objective reduction of physiological functioning at extremes of environmental temperatures (for example, advanced multiple sclerosis); and
 - B3.1.2.1.4 hypersensitivity to extremes of environmental temperature leading to increased pain or other discomfort or an increased risk of complications (for example, complex regional pain syndrome and advanced peripheral vascular disease).
- B3.1.2.2 Secondary qualifying conditions:
- B3.1.2.2.1 severe immobility (for example, such as occurs with Quadriplegia or high level Paraplegia, particularly above mid thoracic level (T7) resulting in problems with self regulation of body temperature due to loss of sympathetic nervous system control);
 - B3.1.2.2.2 demonstrated significant loss of autonomic regulation of sweating, heart rate or blood pressure; and
 - B3.1.2.2.3 demonstrated loss of physiological function or significant aggravation of clinical condition at extremes of environmental temperature.

B3.2 Application process

- B3.2.1 An applicant must apply in writing using the application form at Appendix B3.2. Relevant parts of the application form must be completed and signed by both the applicant and a medical practitioner who has been treating the patient for at least three months.
- B3.2.2 An applicant must send the signed application form to their **retailer**. **Residential park** residents must send their signed application form to their **regulated offer retailer**.
- B3.2.3 Before applying the **rebate** to the customer's account, a **retailer** must verify that the application form is properly completed and signed by both the customer and a registered medical practitioner.
- B3.2.4 In the event that a customer lives in remote or regional NSW and is being treated by the Royal Flying Doctor Service (RFDS), the application form may be signed by any medical practitioner under the RFDS if the customer has been treated by the RFDS for at least three months.
- B3.2.5 The **retailer** must verify each new customer's Pensioner Concession Card, DHS Health Care Card or DVA Gold Card status with the DHS before the **rebate** may be applied to a customer's bill.
- B3.2.6 If the customer named on the bill is claiming the **rebate** for another person who is living at the same address as the customer named on the bill, the **retailer** must check that the application form states that the address of the patient is the same as that of the customer.
- B3.2.7 In order to ensure continuity of the **rebate** where a customer changes his or her **retailer**, the date the customer's supply commences with the new **retailer** will be deemed to be the date the customer applied for the **rebate**. However, the customer must complete and submit an application to the new **retailer** before the **rebate** can be applied by the new **retailer**. Note that this may cause some inconvenience to the customer but the **retailer** requires the relevant information in order to ensure ongoing eligibility for the **rebate**.

B3.3 Ongoing verification to ascertain continued eligibility of customers

- B3.3.1 A **retailer** must verify the details of all **rebate** recipients who hold a DHS Health Care Card for continued eligibility with the DHS at least once every three months.
- B3.3.2 A **retailer** must verify the details of all other **rebate** recipients for continued eligibility with the DHS or DVA at least once a year.
- B3.3.3 The results of the above verification checks must be provided by the **retailer** to the **department** each year. The results must include the following information:
 - B3.3.3.1 the number of eligible Pensioner Concession Card holders, the DHS Health Care Card and Gold Card holders in each category;
 - B3.3.3.2 the total number of initial mismatches; and
 - B3.3.3.3 the total number of customers determined as ineligible from the verification process.

B3.3.4 All **retailers** must have a contractual arrangement with the DHS before verifying customers' details with the DHS.

B3.4 Rebate indexation

B3.4.1 For **eligible customers**, the rebate will be:

B3.4.1.1 \$225 per annum between 1 July 2013 and 30 June 2014; and

B3.4.1.2 \$235 per annum between 1 July 2014 and 30 June 2015.

B3.4.2 For eligible long term residents of **residential parks**, the rebate will be:

B3.4.2.1 \$247.50 per annum between 1 July 2013 and 30 June 2014; and

B3.4.2.2 \$258.50 per annum between 1 July 2014 and 30 June 2015.

Appendix B3.1 – Acquittal Statement

MEDICAL ENERGY REBATE ACQUITTAL STATEMENT FOR THE MONTH OF *[insert]*

| | | |
|---|---|----|
| 1 | Rebate amount confirmation and standard billing information | |
| | The per annum equivalent of the individual rebate amount granted was: | \$ |
| | The daily rate equivalent of the individual rebate amount granted was: | \$ |
| 2 | Eligible Customers in receipt of the Rebate Number of eligible customers in receipt of the Rebate during this period was: | |
| 3 | Rebate amount claimed Total amount paid as Medical Energy Rebates during this period was: | \$ |
| 4 | Average amount paid per customer Average amount paid per customer this period was: | \$ |
| 5 | Eligible customers number The total number of eligible customers as at xx/xx/xxxx was: | |
| 6 | Administrative component amount claimed Total amount due for administrative component this period was: (Number of days this period multiplied by daily rate by total number of eligible customers) | \$ |
| 7 | TOTAL AMOUNT CLAIMED (3 + 6) | \$ |
| 8 | <p>I CERTIFY that:</p> <ul style="list-style-type: none"> • This invoice is a true and accurate reflection of the actual Medical Energy Rebates paid to eligible customers. • The verification procedures set out in the Code issued by the Minister have been complied with. • Each recipient was, to the best of my knowledge, eligible for the Medical Energy Rebate at the date that it was granted. • Each eligible customer to whom a Medical Energy Rebate has been granted has submitted a completed Application Form duly signed by their doctor. • This claim is supported by a system-based record identifying: <ul style="list-style-type: none"> • customer's name, address, concession card number and Application Form duly signed by the customer's Doctor; and • account number, amount of rebate and date of grant of the rebate. • Attached to this document is a system generated summary identifying the number of rebate recipients by eligibility criteria (for example, the number of Department of Human Services Pensioner Concession Card holders). • These records are available for audit purposes, if required. | |

(Signed) _____
(Chief Finance Officer or appropriate delegate)

(Name) _____

(Date) ____/____/____

Appendix B3.2 – Application Form

Application for the NSW Medical Energy Rebate

The NSW Medical Energy Rebate is for customers who are unable to self-regulate their body temperature. It may be associated with certain medical conditions. To be eligible for the Medical Energy Rebate:

- either you as the electricity account holder or someone residing at your residence must have an inability to self-regulate body temperature. This requires the completion of this signed form by a medical practitioner or a medical practitioner (GP/Specialist) treating the patient who has been under the care of the Royal Flying Doctor Service for remote and regional areas, who has been treating the patient for more than three months; and
- you as the account holder must have one of the eligible concession cards listed below*.

PLEASE SUBMIT THIS COMPLETED FORM TO YOUR RETAILER AS SOON AS POSSIBLE.
THE REBATE WILL BE APPLIED FROM THE DATE YOU SUBMIT THIS FORM.

Note for long term residential park residents: You should complete this form as if you were a direct electricity account holder and submit it to the regulated offer electricity supplier for your district, along with a statement from your caravan park owner to certify that you are a long term resident at the specified address of the caravan park. For more information go to www.trade.nsw.gov.au/energy

Electricity Account holder's details:

| | | | |
|---|----------|---|-----------|
| Title (<i>Mr, Mrs, Ms</i>) | Surname: | Given Name(s): | |
| Address: | | | |
| | | State: | Postcode: |
| Home phone: | | | |
| Account Number: | | | |
| I hold an eligible concession card issued either by the Department of Human Services (formerly Centrelink) or the Department of Veterans' Affairs: YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |
| * Department of Human Services Cards (please tick) <ul style="list-style-type: none"> • Pensioner Concession Card <input type="checkbox"/> • Health Care Card <input type="checkbox"/> Customer Reference Number (CRN) Expiry Date | | * Veterans' Affairs Cards (please tick): <ul style="list-style-type: none"> • Pensioner Concession Card <input type="checkbox"/> • Gold Repatriation Card <input type="checkbox"/> Card Number Expiry Date | |

ELECTRICITY ACCOUNT HOLDER'S AUTHORISATION AND DECLARATION

- All particulars on this form are, to the best of my knowledge and belief, true and accurate.
- The electricity supply address for my electricity account is my primary place of residence or that of the patient who has an inability to self-regulate body temperature (if the person is different from the Account Holder).
- I currently hold one of the eligible cards listed above.
- I give consent to the information on this form to be verified with the Department of Human Services or Department of Veterans' Affairs to assess my eligibility for the Rebate, and will not be used for any other purpose without my consent.
- I will notify my electricity retailer in writing if the patient ceases to reside with me or if my circumstances change including the validity of this application or my entitlements to the Medical Energy Rebate.
- I note that if I change my electricity retailer I will need to provide a new application form to my new electricity retailer if I wish to continue to receive the Rebate.

| | |
|---------------------------------|-------|
| Name of the Account Holder | |
| Signature of the Account Holder | Date: |

Patient:

I consent to the release of my medical records relevant to this application to the Department of Trade and Investment, Regional Infrastructure and Services if required as part of its responsibility in administering this Rebate.

| | | | |
|------------------------------|----------|----------------|--|
| Title (<i>Mr, Mrs, Ms</i>) | Surname: | Given Name(s): | |
| Signature of patient | | Date: | |

FOR MEDICAL PRACTITIONER'S USE

A medical practitioner (GP/Specialist) who has been treating the patient for at least three months or a medical practitioner (GP/Specialist) treating the patient who has been under the care of the Royal Flying Doctor Service for remote and regional areas for at least three months:

| | |
|--|-----------------------------|
| Practitioner Surname: | Practitioner Given Name(s): |
| Provider number: | |
| Name of patient: | |
| Address of patient: | |
| Name of the hospital/clinic/practice where the patient was reviewed: | |
| Phone number of the hospital/clinic/practice where the patient was reviewed: | |

Medical declaration:

I certify that the patient has an inability to self-regulate body temperature. I have been treating the above patient for at least three months/this patient has been treated by the Royal Flying Doctor Service in remote and regional NSW for at least three months and they meet at least one primary and one secondary qualifying condition (tick the relevant boxes below):

| Primary Qualifying Conditions (tick at least one condition) | Please tick |
|--|--------------------------|
| 1. Autonomic system dysfunction (Medical conditions in which the autonomic system has been damaged eg severe spinal cord injury, stroke, brain injury and neurodegenerative disorders) | <input type="checkbox"/> |
| 2. Loss of skin integrity or loss of sweating capacity (eg significant burns greater than 20%, severe inflammatory skin conditions and some rare forms of disordered sweating) | <input type="checkbox"/> |
| 3. Objective reduction of physiological functioning at extremes of environmental temperatures (eg Advanced multiple sclerosis) | <input type="checkbox"/> |
| 4. Hypersensitivity to extremes of environmental temperature leading to increased pain or other discomfort or an increased risk of complications (eg complex regional pain syndrome and advanced peripheral vascular disease). | <input type="checkbox"/> |

| Secondary Qualifying criteria (tick at least one condition) | Please tick |
|---|--------------------------|
| a) Severe immobility (eg such as occurs with Quadriplegia or high level paraplegia, particularly above mid thoracic level (T7) resulting in problems with self regulation of body temperature due to loss of sympathetic nervous system control.) | <input type="checkbox"/> |
| b) Demonstrated significant loss of autonomic regulation of sweating, heart rate or blood pressure | <input type="checkbox"/> |
| c) Demonstrated loss of physiological function or significant aggravation of clinical condition at extremes of environmental temperature | <input type="checkbox"/> |

Privacy Statement

I note that the Department of Trade and Investment, Regional Infrastructure and Services, as part of its responsibility for the administration of this Rebate, may request the release of medical records in support of this application. Medical records pertaining to this application will be maintained for future regular audit of the rebate recipients and the program to be conducted by the Division.

| | |
|------------------------------------|-------|
| Signature of medical practitioner: | Date: |
|------------------------------------|-------|

B4. Family Energy Rebate (FER)

B4.1 Eligibility criteria

- B4.1.1 To be eligible for the Family Energy Rebate in a given financial year a person must:
- B4.1.1.1 be resident in New South Wales; and
 - B4.1.1.2 be a customer of the retail supplier, or a long term resident of a **residential park**, and whose name appears on the electricity account for supply to his or her principal place of residence; and
 - B4.1.1.3 have been assessed by the Federal DHS as being eligible for the Family Tax Benefit (FTB) A or B at any time during the financial year immediately preceding the financial year in which an application for the FER is made **and** have received a payment of FTB in respect of that eligibility.

B4.2 Application process

- B4.2.1 An applicant must apply in writing to the **department** for the **rebate** using either the digital application form available from the **department's** website or a paper application form available from the **department's** website, or from electricity **retailers**.
- B4.2.2 **Retailers** must, on request by a customer, provide an application form to the customer to complete and submit to the **department**.

B4.3 Ongoing eligibility

- B4.3.1 An **eligible customer** who completes a valid application form and receives confirmation of eligibility from the **department**, will be paid the **rebate** once per financial year.
- B4.3.2 Customers must reapply for the **rebate** each year.

B4.4 Application of the rebate

- B4.4.1 **Retailers** must apply the **rebate** to customers' electricity accounts in accordance with a confidential data set provided by the **department** each calendar month through a dedicated secure website. The data set will contain the following information:
- B4.4.1.1 FER Application ID (labelled "FER Reference Number");
 - B4.4.1.2 First Name (labelled "Family Tax Benefit Recipient First Name");
 - B4.4.1.3 Last Name (labelled "Family Tax Benefit Recipient Last Name");
 - B4.4.1.4 Electricity Account Number (labelled "Electricity Account Number");
 - B4.4.1.5 Meter Identifier (labelled "NMI (National Meter Identifier);
 - B4.4.1.6 Rebate Amount (labelled "Rebate Amount (\$)"); and
 - B4.4.1.7 Rebate Applied Flag (labelled "Rebate Credit Applied to Electricity Account"). No data is supplied in this column by the **department**
- B4.4.2 **Retailers** must verify the relevant data set against the information for each customer in the **retailer's** billing system and pay the relevant amount to each customer if the following conditions are met:
- B4.4.2.1 Family Tax Benefit Recipient Last Name, Electricity Account Number and NMI match a valid account.

- B4.4.3 **Retailers** must apply the **rebate** to **eligible customers'** next available electricity bill after the date the **retailer** receives the confidential data set from the **department** and to offset it against the gross amount of the bill before GST is applied.
- B4.4.4 **Retailers** must supply a confidential data set to the **department** using the dedicated, secure website containing the following information:
- B4.4.4.1 FER Application ID (labelled "FER Reference Number");
 - B4.4.4.2 First Name (labelled "Family Tax Benefit Recipient First Name");
 - B4.4.4.3 Last Name (labelled "Family Tax Benefit Recipient Last Name");
 - B4.4.4.4 Electricity Account Number (labelled "Electricity Account Number");
 - B4.4.4.5 Meter Identifier (labelled "NMI (National Meter Identifier);
 - B4.4.4.6 Rebate Amount (labelled "Rebate Amount (\$)"); and
 - B4.4.4.7 Rebate Applied Flag (labelled "Rebate Credit Applied to Electricity Account"). **Retailer to supply only ONE of the following data options: Y or N or leave the cell blank.**

Appendix B4.1 – Acquittal Statement

**FAMILY ENERGY REBATE - ACQUITTAL STATEMENT FOR THE MONTH OF
[insert]**

| | A | B | C | D |
|---|--|---|---|---|
| | Total amount of rebates credited (\$) | Number of Eligible Customers credited the rebate | Total Administrative Component claimed (calculated at \$0.80 per rebate) | Total amount claimed this period (\$) D =(A + C) |
| Lower rebate rate (e.g. \$35 in 2012-13) | | | | |
| Higher rebate rate (e.g. \$75 in 2012-13) | | | | |
| | | | Total | \$ |
| <p>I CERTIFY that:</p> <ul style="list-style-type: none"> • This invoice is a true and accurate reflection of the actual Rebates credited to Eligible Customers. • The <i>Social Programs for Energy Code</i> issued by the Minister for Resources and Energy with effect from 1 July 2013 has been complied with. • Each eligible customer to whom the Rebate has been credited has been approved as eligible by the Department according to the data set it provided to the retail supplier. | | | | |

(Signed) _____
(Chief Finance Officer or appropriate delegate)

(Name) _____

(Date) ____ / ____ / ____

PART C

C1. Energy Accounts Payment Assistance (EAPA)

C1.1 Overview

- C1.1.1 EAPA is a NSW Government scheme designed to help residential energy customers who are financially disadvantaged and experience difficulty paying their residential gas and/or electricity bill owing to a crisis or emergency situation. The EAPA Scheme is administered by the **department** and is aimed at helping these people stay connected to essential energy services.
- C1.1.2 The EAPA Scheme is a crisis program and is not intended to offer ongoing income support, nor is EAPA intended to relieve **retailers** of their obligations to manage their customers' debts in a fair and equitable manner. A person who is experiencing genuine difficulty paying their residential gas and/or electricity bill should first contact their **retailer** to see if alternative payment arrangements can be negotiated, such as deferred payment, pay-as-you-go plans/Centrepay and budget management services.
- C1.1.3 Community Welfare Organisations (CWOs) apply the "EAPA Delivery Guidelines" when undertaking an assessment interview with an EAPA applicant.
- C1.1.4 It is important that **retailers** are aware of this Guideline and how it interacts with the **retailers'** hardship program. This is because, where a significant exception to the Guideline is made, it may indicate that the **retailer's** assistance is required to address on-going hardship with regard to access to electricity and natural gas, in accordance with their obligations under the relevant legislative and policy framework.
- C1.1.5 **Retailers** are not to use EAPA to meet their obligations to assist customers in financial hardship to manage their bills.
- C1.1.6 A **residential customer** may receive EAPA, concurrently with any **rebates**, subject to meeting the eligibility requirements for each particular **social program for energy**.

C1.2 Delivery of EAPA by CWOs

- C1.2.1 EAPA assistance is generally issued by CWOs and one particular energy **retailer's** hardship team, in the form of \$50 vouchers. These vouchers must either be attached by a customer to their original energy bill, taken or sent to the customer's **retailer** or presented via a **retailer's** authorised payment agent, as a contribution towards the customer's energy bills.
- C1.2.2 Rules and procedures for the administration of EAPA by CWOs are outlined in the EAPA Delivery Guidelines (the Guidelines) issued by the **department**. These Guidelines cover matters such as validity of vouchers (for example, whether EAPA can be used to put an account into credit and how vouchers must be completed).

- C1.2.3 To provide guidance to **retailers** as to the validity of vouchers, a copy of these Guidelines is available from the **department**.
- C1.2.4 **Retailers** must not inform customers that they will receive a certain amount of EAPA. The amount of EAPA provided to a customer is determined by the CWO.
- C1.2.5 **Retailers** must also make all attempts to assist CWOs in complying with the Guidelines (for example, by providing direct, dedicated, free call numbers to **retailer** hardship units and working cooperatively to resolve issues concerning customers).

C1.3 Acceptance of EAPA by retailers

- C1.3.1 **Retailers** must accept all valid EAPA vouchers offered in payment of an account (except in any of the circumstances in clause C1.4).
- C1.3.2 **Retailers** must take steps to ensure that customers can make payments using EAPA vouchers at Australia Post outlets and by other over-the-counter methods.
- C1.3.3 **Retailers** must also keep the **department** informed of all payment options for EAPA, including addresses for posting EAPA vouchers.

C1.4 Circumstances where EAPA is not to be used

- C1.4.1 EAPA vouchers must not be accepted where this will place a customer's account into credit. In these cases, a **retailer** must reject as many vouchers as required to ensure the account is not placed into credit and inform the **department each month using the electronic reporting system**. The **retailer** must notify the customer of any voucher cancellation, and the effect upon the customer's account balance.
- C1.4.2 EAPA must not be relied upon by a **retailer** to address on-going hardship for a specific customer, to manage bad debts or as an alternative to managing customer hardship in accordance with any relevant legislation or internal policies.
- C1.4.3 EAPA must not be used for non-consumption related charges (for example, late fees, disconnection and reconnection fees).

C1.5 Retailers assisting CWOs

- C1.5.1 Each **retailer** must have in place a direct dedicated, telephone enquiry number for CWOs to contact that **retailer** to confirm the details of a customer seeking EAPA assistance. Calls to this line must be answered or call backs made as soon as reasonably practicable, as an inability to contact a **retailer** may cause difficulties for the CWO in assessing the customer for EAPA.
- C1.5.2 These contact details must be provided to the **department** by each **retailer** and any changes must be notified to the **department** immediately.
- C1.5.3 Current contact listings for CWOs that are able to assess customers for EAPA assistance are on the **department's** website at www.energy.nsw.gov.au.
- C1.5.4 **Retailers** are required to provide to their customers information on Government funded rebates and programs, including EAPA. This means

a **retailer** can refer a customer to one or more CWOs only if the assistance provided to a customer by the **retailer** is not sufficient to help a customer resolve their difficulty paying an energy bill or where additional assistance may be appropriate. CWOs will assess customers under the Guidelines and it is at the discretion of the CWO whether or not EAPA will be granted to a customer.

- C1.5.5 **Retailers** can also assist their customers to be assessed for EAPA vouchers by implementing an appropriate payment plan or making other appropriate referrals, for instance, to a financial counsellor.
- C1.5.6 Where a **retailer** refers a customer to a CWO, the **retailer** must also inform the customer of the requirement to take their original bill when they attend an EAPA assessment interview.
- C1.5.7 The “original bill” refers to the first issued bill for the current payment period, for which the customer is seeking EAPA assistance. A copy of an original bill supplied by a **retailer** may be considered an original bill.
- C1.5.8 **Retailers** may be required to assist a CWO to establish the details of a customer seeking EAPA assistance (for example, where a customer does not have an original bill). If a customer does not have their original bill or receives their bill via email, the CWO will be required to contact the **retailer** to confirm the customer’s account details.
- C1.5.9 **Retailers** must be aware that not all customers who seek EAPA assistance will receive EAPA vouchers. Suitability for assistance is determined following an assessment conducted by the CWO, and vouchers are granted based on availability. A **retailer** must explain this to a customer when making a referral to assist in managing the customer’s expectations.
- C1.5.10 It is generally not appropriate to refer customers with large debts that have been allowed to accumulate over a long period of time to a CWO without adequate consideration of other options and attempts to assist the customer in accordance with laws and internal policy and without discussing the matter with the CWO. In many cases, a CWO will not be equipped to handle such cases and other types of referrals may be more appropriate (for example, to a financial counsellor).

C1.6 Prohibition on disconnection during EAPA assessment

- C1.6.1 If a customer is awaiting assessment for EAPA assistance, the **retailer** is required to defer electricity or natural gas disconnection until a CWO has assessed the customer.

C1.7 Financial year expiry

- C1.7.1 EAPA vouchers remain current for one financial year. They become invalid and cannot be accepted by **retailers** after 14 July in the next financial year. That is, **retailers** may accept EAPA vouchers issued on or before 30 June if they are presented as payment within 14 days of issue. Each voucher is printed with the date to which it will remain valid.
- C1.7.2 To identify vouchers from different financial years, vouchers are colour coded and have a unique prefix identifier.

C1.8 Residential electricity and gas consumption only

- C1.8.1 Vouchers may only be presented as payment towards electricity and natural gas consumption supplied under a residential tariff, and only on behalf of the person/s named on the account.
- C1.8.2 If a customer presents a voucher for non-consumption charges, the **retailer** must advise the customer that the vouchers have not been applied to their account because EAPA can only be used for electricity and/or natural gas consumed and that the vouchers have been cancelled. These vouchers must be rejected/cancelled and reported to the **department** each month using the electronic reporting system.
- C1.8.3 EAPA can only be issued to customers residing in NSW, regardless of their **retailer**.

C1.9 Voucher validity

- C1.9.1 **Retailers** are required to assess the vouchers for validity before applying them to a customer's account. Vouchers are valid if they comply with the requirements set out in the CWO EAPA Delivery Guidelines. All vouchers must be:
 - a. completed with the required information;
 - b. signed and stamped with the stamp of the issuing CWO.
- C1.9.2 Vouchers are only valid for the financial year in which they are distributed by the **department**.
- C1.9.3 Vouchers are only valid for the number of days from the date of issue as stated on the voucher.

C1.10 EAPA vouchers issued by two or more CWOs

- C1.10.1 If vouchers from two or more CWOs are presented at the same time for payment of a bill, voucher(s) from only one organisation will be accepted unless the tick boxes at the right-hand side of the voucher(s) has been ticked and signed. **Retailers** must check that this has been done to ensure the second issue of vouchers is valid.
- C1.10.2 If the tick box has not been signed, a **retailer** must phone the second issuing CWO and find out if they are aware of the first issue of vouchers. If the CWO is aware and confirms the validity of the second issue of vouchers, the **retailer** must accept all the vouchers as payment on the account.
- C1.10.3 If the second issue of vouchers cannot be validated by the CWO, **retailers** must forward the vouchers to the **department** with an explanation. The **retailer** must tell the customer that these vouchers cannot be credited to their account. The customer should be sent a written acknowledgement stating the number of vouchers retained.
- C1.10.4 The **department** will then contact the issuing CWO with an explanation of why they have been invalidated.

C1.11 Fraud or misrepresentation

- C1.11.1 If a **retailer** suspects or has evidence that either CWO or customers fraud or misrepresentation has occurred, the **retailer** must contact the **department** immediately and then confirm the suspicion in writing, either by letter or email.

C1.12 Voucher storage

- C1.12.1 **Retailers** must retain EAPA vouchers for a minimum of seven years from the date of redemption and make these available for audits by the **department**, or an agent of the **department**, upon request.

C1.13 Loss or theft

- C1.13.1 Occasionally EAPA vouchers are reported to the **department** as lost or stolen.
- C1.13.2 The **department** will track if these vouchers have been presented to a **retailer** via the **retailer's** monthly usage reports. The **department** will then notify the **retailer** of the course of action to be taken. For example, if vouchers are stolen and presented, the account to which the vouchers were applied will be reversed (to the extent of the EAPA voucher value).

C1.14 Invalid or rejected vouchers

- C1.14.1 All invalid or rejected EAPA vouchers are to be reported by the **retailer** (who received them) to the **department** each month using the electronic reporting system.

C1.15 Recording EAPA usage

- C1.15.1 For an account where EAPA has been received, the **retailer** must reference a customer's use of EAPA, the amount, and the date they were presented for payment. This assists CWOs in assessing if EAPA is being used for on-going income support.
- C1.15.2 An example of how EAPA voucher usage would be recorded on a customer's bill is at C1.15.3 where it would indicate that \$200 worth of EAPA vouchers were applied to the customer's account on 12 July 2013.
- C1.15.3 Payment History: "EAPA VOUCHER 12/07/2013 \$200".

C1.16 Reimbursement statement and electronic reporting

- C1.16.1 Reimbursement is made by the **department** for valid EAPA voucher(s) presented by customers to the **retailer**, during the previous month.
- C1.16.2 Retailers should submit to the Department each month, using the Department's electronic reporting system, a record of all valid EAPA voucher transactions in the previous four weeks. These reports will include information such as voucher serial numbers, pre and post EAPA balances for customer accounts and customer supply addresses.
- C1.16.3 **Retailers** must separately provide the Department with a tax invoice and a reimbursement statement corresponding to each monthly report uploaded to the Department's electronic reporting system. The reimbursement statement is to state the amount for which the **retailer** is

seeking reimbursement. Monthly reimbursement for administration costs must also be claimed at this time.

- C1.16.4 Administration costs are to be calculated based on \$0.80 per bill (per customer account) regardless of how many vouchers are presented in a transaction.
- C1.16.5 The reimbursement statement must be signed by the **retailer's** Chief Auditor or Senior Finance Executive and certify that the statement provides a true and accurate record of transactions during the relevant four week period.
- C1.16.6 Retailers must retain records of EAPA transactions including voucher serial numbers of the vouchers, pre and post EAPA balances for customer accounts and customer supply addresses. This also includes voucher serial numbers for those of which have been cancelled or rejected.