ATTACHMENT 1

stakeholder feedback template

The template below has been developed to enable stakeholders to provide their feedback on the questions posed in this paper and any other issues that they would like to provide feedback on. The AEMC encourages stakeholders to use this template to assist it to consider the views expressed by stakeholders on each issue. Stakeholders should not feel obliged to answer each question, but rather address those issues of particular interest or concern. Further context for the questions can be found in the consultation paper. Stakeholders are also encouraged to provide evidence to support claims where possible.

SUBMITTER DETAILS

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| **ORGANISATION:** |       |
| **CONTACT NAME:** |       |
| **EMAIL:** |       |
| **PHONE:** |       |

**CHAPTER 5** – sECTION 5.1 – ISSUE IDENTIFIED BY EWON

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|  1. Do stakeholders agree that requirements for medical confirmation to be resubmitted deter life support customers from changing premises or retailer? If so, what are the main barriers or costs that may deter switching activity by life support customers?
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| 1. What is the appropriate allocation of responsibility between life support customers and businesses with respect to the resubmission of medical confirmation?
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| 1. How do retailers and DNSPs record, share, use and maintain life support information in practice?
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| 1. Are there any other obligations imposed on retailers, DNSPs or customers relating to life support outside of the NERR (for example under jurisdictional concession schemes)? If so, what are those obligations and how do they interact with the obligations under the NERR?
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| 1. Do stakeholders agree with the Commission's description of scenarios where life support customers may be required to resubmit medical confirmation? Should additional scenarios be contemplated?
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| 1. What are the costs and benefits of rule 125(14) relating to life support deregistration? Are there risks that life support customers will be deregistered inadvertently?
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**CHAPTER 5** – sECTION 5.2. – ISSUE MATERIALITY

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| 1. What are the short and long term impacts (financial and other) on life support customers of higher barriers for engagement in the retail market?
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| 1. What are stakeholder views with respect to the difficulty and costs of customers securing medical confirmation when they change premises or retailer?
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| 1. What quantitative or qualitative evidence do stakeholders have with respect to the issue raised by EWON that may clarify its materiality?
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| 1. Do stakeholders think there are any risks that customers may be incorrectly deregistered with switching or moving? What processes are in place to reduce any risks?
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**CHAPTER 5** – sECTION 5.3 – PROPOSED SOLUTIONS

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| 1. What are stakeholder views on sharing of medical confirmation forms between businesses as proposed by EWON? Would this solution address the issue raised by EWON?
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| 1. What are the costs and benefits of the solution proposed by EWON?
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| 1. What life support information should be shared between businesses as part of EWON's solution? How could this information be most efficiently shared?
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| 1. What are stakeholder views on the two alternative pathways proposed by EWON? Would these address the issue raised by EWON?
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| 1. Are there additional solutions that the Commission should consider to in order to address the issue?
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**CHAPTER 5** – sECTION 5.4 – IMPLEmentation

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| 1. What are the system and policy changes required for each of EWON's proposed solutions to be implemented? What are the potential costs and benefits of these changes?
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| 1. What are the potential privacy issues related to EWON's proposed solution? How could those privacy issues be overcome?
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| 1. What are stakeholder views on the compatibility of forms currently used by retailers and distributors between other retailers and distributors ? Would these forms be mutually acceptable to businesses?
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| 1. Are there any other issues the Commission should consider in relation to sharing life support information?
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| 1. Should medical confirmation provided to the RPO "expire" after a certain period? What are the costs and benefits of this approach, particularly if new medical confirmation was not required when a customer changes premise or retailer?
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