

**PENNSYLVANIA PUBLIC UTILITY COMMISSION
HARRISBURG, PENNSYLVANIA 17105-3265**

**Rulemaking to Amend the Provisions
Of 52 Pa. Code, Chapter 56 To Comply
With the Provisions of 66 Pa. C.S.,
Chapter 14; General Review of Regulations**

**PUBLIC MEETING
February 24, 2011
1202907-BCS
Docket No. L-00060182**

**PARTIAL DISSENTING STATEMENT OF
COMMISSIONER JOHN F. COLEMAN, JR.**

I am voting to dissent in part from the Motion, as I am in agreement with the Final Rulemaking Order prepared by Commission staff. I recognize that the medical certificate option has been abused by some customers to avoid the timely payment of their bills in full, which in turn leads to higher arrearages and more uncollectible debt. Through this rulemaking process staff has proposed a number of modifications to reduce this practice, including:

- When termination of service has been delayed based on the claim that a medical condition exists, and no certification is produced by the customer within 3 days, the termination process may be resumed at the point it was suspended.
- It has been made express that a utility does not have to honor a third medical certificate renewal request when the current undisputed bills remain unpaid, and the utility does not have to seek Commission permission to terminate service at that point.

The Commission has concluded rightfully that medical certificates are available to customers whose service has been terminated, and who are applying to have service restored. This conclusion is supported by the language in Chapter 14, which makes clear that medical certificates are available to “applicants.” Section 1407(b) uses the word “applicant” in the context of describing those eligible for reconnection, and subsection 1407(b)(1) expressly provides that service must be restored on the receipt of a valid medical certificate.

However, I disagree with the conclusion that the phrase “all applicable conditions” in Section 1407 (b) allows a public utility to burden the medical certificate process with the conditions laid out in Section 1407(c), which include payment of reconnection fees and sometimes payment of all outstanding balances in certain circumstances. Reconnection fees, which utilities can require to be paid in advance of service restoration, can exceed \$100, particularly in instances where the utility must send a service representative to the address to restore service (e.g., service cannot be remotely

connected or disconnected), or excavation is required. Requiring the payment of reconnection fees or the entire arrearage may effectively nullify the legislature's expressed preference for the rapid restoration of service when a valid emergency medical condition exists.

Accordingly, I would vote to adopt the staff recommendation, without the modification proposed in regards to medical certification process.

February 24, 2011

Date

JOHN F. COLEMAN, JR., COMMISSIONER