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Independent Regulatory Review Commission  
333 Market Street, 14th Floor  
Harrisburg, PA 17101

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IRRC

2011 MAY 17 A 9 24

RE: PUC Docket #L-0060182 and IRRC #2743

Dear Mr. Lutkewitte,

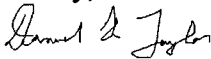
I am writing to oppose the Public Utility Commission's (PUC) proposed regulation changes under Chapter 14 of the Public Utility Code. Specifically, the proposed changes to the rules regarding Medical Certification and utility shutoffs will impose a burden on low-income customers or household members with medical conditions who are particularly dependent on utility service to operate medical equipment or maintain climate control for their health and safety.

For over 30 years, medical certifications have been available to suspend utility shut offs and reconnect recently shut off service, without upfront payments, for households whose doctors certify that a serious illness or medical condition would be aggravated by the shut off of their utilities. The changes proposed by PUC in their Final Rulemaking Order to 56 Pa.Code § 56.111 will provide less protection and assistance to the most vulnerable of utility customers. The clear intent of 56 Pa.Code Section 56.111 is to protect customers with medical conditions whose health will be imperiled by the shutoff of their utilities, allowing them to avert a shutoff or have their utility service reinstated by obtaining a letter from a medical professional. PUC's proposed changes to 56 Pa.Code 56.191(b) and (c) will now require that an applicant with a medical certification, or the customer in their household, pay restoration fees before having their service restored. This is an untenable result.

The proposed PUC regulations would create unaffordable payment requirements for immediate reconnection. For low-income households and households in short-term economic crisis, the PUC has essentially eliminated the option to use medical certifications to reconnect utility service. If the PUC's proposed restrictions on medical certifications to reconnect utility service become final, hospitals may be forced to keep low-income patients in the hospital for additional days or risk sending vulnerable patients to homes without utility service necessary for health and safety.

For many of my patients, these changes would be a severe hardship. I am writing to ask you not to approve the changes affecting medical certification proposed by PUC because, rather than punishing people who are committing fraud or attempting to bilk utility companies, these regulations make it more difficult for to low-income customers with medical conditions to maintain their health and safety.

Sincerely,



Daniel R. Taylor, D.O., FAAP  
Director Community Pediatrics and Child Advocacy  
St. Christopher's Hospital for Children