

4 September 2025

Mr Rudy Zverina
Australian Energy Markets Commission (AEMC)
Level 15, 60 Castlereagh St
Sydney NSW 2000

Dear Mr Zverina

Consultation paper – Improving life support processes (RRC0064)

Endeavour Energy appreciates the opportunity to respond to the AEMC's [Improving life support processes consultation paper](#). The paper discusses proposed amendments to the life support framework to enable retailers and distributors a better opportunity to offer a higher level of service and range of targeted support to life support customers whose health and welfare is most at risk from a supply interruption.

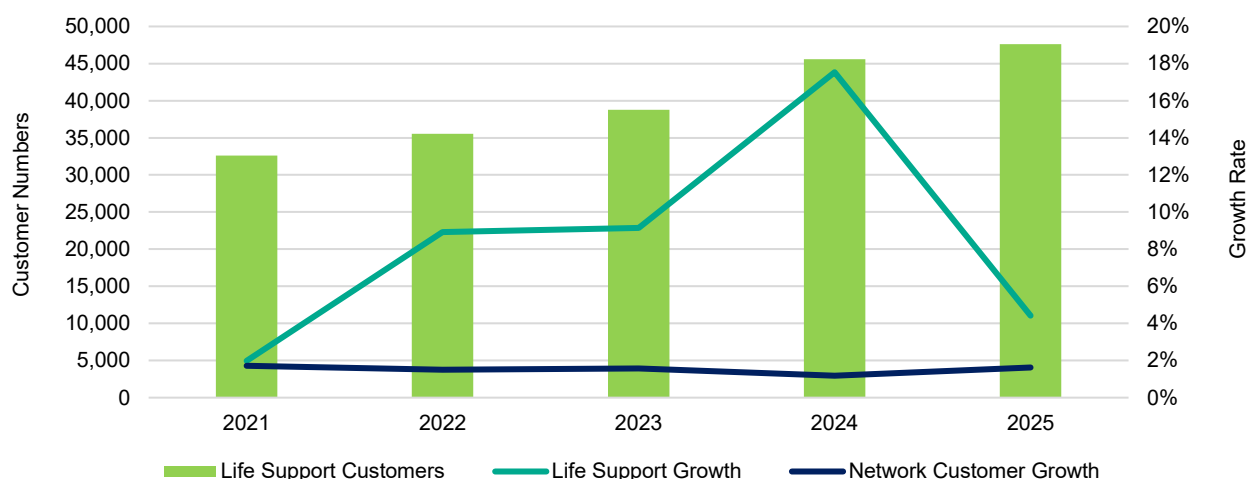
As highlighted in the paper, the rule change proposal was developed as part of the Energy Charter's extensive #BetterTogether initiative. As active participants in this initiative from its commencement, we are pleased that our ongoing input and feedback has played a meaningful role in shaping the proposed changes which will better support our most vulnerable customers during, or ahead of, a power outage.

New definitions to distinguish life support users will better equip us to offer enhanced services and support to the most vulnerable life support customers

In recent years, we have observed a substantial increase in the number of registered life support customers (now comprising 48,000 customers, or 4.2% of our customer base compared to 1.8% in 2014). This trend is likely driven by several factors, including heightened community awareness of life support protections, increased customer sensitivity to more frequent or prolonged supply interruptions, and a growing preference for receiving hospital or specialist care at home. The AEMC's 2017 [Strengthening protections for customers requiring life support equipment final rule determination](#) has also contributed to this increase, noting that approximately 35% of our registered life support customers have not provided medical confirmation of their life support needs.

The growth in the number of registered life support customers is depicted in Figure 1 below.

Figure 1: Endeavour Energy life support customers



This growth has also led to greater diversity in the medical conditions requiring energy-dependent equipment. As a result, the criticality of life support needs now spans a broad spectrum — from customers requiring assistive support for mild or temporary conditions to those with severe, permanent conditions who rely on uninterrupted electricity supply to sustain life.

Accordingly, it is increasingly evident that a “one-size-fits-all” approach to life support protections does not deliver optimal outcomes for customers with critical needs, given that such customers would likely benefit from support and safeguards beyond those currently mandated under the National Energy Retail Rules (NERR). However, our ability to provide targeted and enhanced support is constrained by the limited information available to us to identify these customers.

The provision of enhanced services is contingent upon a life support register that accurately reflects customers with the most critical energy supply needs. We support the proposed introduction of definitions to distinguish between users of critical and assistive life support equipment. Importantly, customers classified as assistive life support users will not be disadvantaged and will continue to receive the protections to which they are currently entitled.

While recognising the importance of supporting critical life support customers, it is equally important to acknowledge the operational limitations during large-scale unplanned outages. In such circumstances, network constraints may prevent timely or targeted responses to all eligible customers. Therefore, we consider it appropriate to retain the current obligations pertaining to unplanned outages mandated under the NERR, noting that increasing service standards would likely impose significant and unsustainable costs on distributors.

Improving the registration and deregistration processes is key to ensuring life support registers remain accurate and up to date

Given our rapidly growing life support register, it has become increasingly challenging to maintain compliance with life support obligations and delivering innovative and tailored services to customers with critical needs. These challenges are compounded by inaccuracies within the register, which is increasingly capturing customers who do not genuinely rely on life support equipment. Examples of customers registered, but in relation to whom the protections in the NERR are not intended to apply, include:

- new occupants of premises previously flagged for life support, where the original life support customer has vacated;
- customers who no longer require life support equipment;
- commercial and other non-residential premises; and
- customers who have not provided the required medical confirmation.

These inaccuracies are partly attributable to the greater discretion afforded under the NERR for deregistering life support customers compared to registering them. In particular, the absence of a mandatory requirement to remove a property¹ from the register allows the deregistration process to be bypassed and, in some cases, has influenced retailers to avoid developing deregistration procedures altogether, effectively shifting the responsibility for deregistration to distributors. In addition, poor and inconsistent application of the process has contributed to a prolonged negative experience for customers requesting to be removed from the register, with several instances of customers giving up seeking deregistration in frustration.

To address this issue, we support the introduction of mandatory obligations to deregister a premise when:

- requested by the customer;
- notified by the relevant distributor or retailer; or

¹ Life support customers are typically flagged in systems according to the National Meter Identifier (NMI) of their property and do not automatically “follow” customer movements from the property.

- medical confirmation has not been received from the customer.²

In our view, a simple amendment to the NERR to address the current imbalance between registration and deregistration obligations would involve replacing the discretionary term “may” with the directive “must”. This change would also ensure that deregistration requests are not overridden, thereby improving the accuracy and consistency of life support registers.

An additional key measure to maintain register accuracy would be to require life support customers to provide updated medical confirmation every four years. This would allow the life support status of all registered premises to be periodically verified and updated; given that it would be likely that customers would meet with an authorised medical practitioner at least once within four years, this confirmation could be obtained (without additional cost) as part of a standard medical consultation. Such a requirement aligns with the requirement in NSW that eligible customers obtain a declaration from their medical practitioner every four years to access the [life support rebate](#) offered by the NSW Government, and therefore would not seem inappropriate or excessively burdensome.

Furthermore, we consider it essential that life support protections are safeguarded against potential misuse. Although infrequent, misuse primarily occurs because prohibiting disconnection due to non-payment offers a significant and immediate relief that is not generally available under retailer financial hardship policies or elsewhere within the National Energy Customer Framework (NECF).

Additional vigilance is needed to instil confidence in the accuracy and integrity of life support registers and ensure only eligible customers are accessing this key protection. Accordingly, it is appropriate to require customers who have twice previously failed to provide medical confirmation (and subsequently mandatorily deregistered as proposed) to substantiate their eligibility upfront prior to the application of life support protections.

We also consider there is merit in allocating to retailers all responsibility for managing life support registration and deregistration process which, in keeping with their customer facing role, could leverage the regular interactions and interfaces used to communicate with their customers. In contrast, very few customers routinely engage with distributors, as reflected in the small portion of life support customers that are typically registered by the distributor.³

We encourage the AEMC to consider this alternative to the current arrangements, noting the benefits of a more streamlined, simple and efficient registration process undertaken exclusively by retailers needs to be weighed up against the benefits of consumer convenience and choice in who they wish to manage their life support registration.

Allowing customers to nominate their preferred communication method and a second contact supports timely and effective notification of interruptions

We support enabling life support customers to nominate an additional contact person to receive notifications of supply interruptions. This measure would provide an effective safety net, allowing customers to be supported by a known and trusted individual during critical events. Accordingly, we consider it appropriate to expand the existing planned interruption notification obligations under the NERR to include the nominated contact person, where such details are provided and subject to their acceptance.

This obligation would be distinct from notifying the nominated contact during unplanned interruptions, which would serve to alert that person that their dependent’s life support equipment back-up plan should be activated. Such notifications would represent a targeted service enhancement that retailers and distributors would aim to deliver on a best endeavours basis.

² Only after being issued two confirmation reminder notices, an extension to provide confirmation if requested, a deregistration notice and reasonable attempts made by the retailer or distributor to directly contact them.

³ We are the registration process owner (RPO) for approximately 6.1% of our life support customers.

In preparation for offering this service, we have commenced collecting nominated contact information from our life support customers.⁴ Our experience to date indicates that the vast majority of these customers prefer to receive notifications via SMS or email. However, as noted in the rule change request, there remains ambiguity regarding whether these electronic communication methods satisfy the “written notice” requirements under the NERR. This has led to inconsistent interpretations among retailers and distributors, resulting in variability in how notifications are delivered.⁵

Beyond being the preferred communication channels, SMS and email are also more cost-effective and support automation, enabling timely and efficient notification delivery. On this basis, we support amendments that clarify life support customers and their nominated contacts may be notified using their preferred communication method.⁶ While potentially outside the scope of this consultation, we also consider there is merit in extending this flexibility to non-life support customers.

Our detailed responses to the questions in the AEMC’s consultation paper are provided in Appendix A. If you would like to discuss any aspect of this submission, please contact Dillon Monahan, Social Programs Lead at Endeavour Energy via email at dillon.monahan@endeavourenergy.com.au.

Yours sincerely



Emma Ringland
Head of Regulation & Investments

⁴ Where Endeavour Energy is the RPO.

⁵ We have generally taken “written notice” to mean postal notification, with email and SMS limited to instances where the NERR explicitly provides for electronic means of contact (e.g. NERR 125(5) - Deregistration where medical confirmation not provided).

⁶ Notifications to nominated contacts should be limited to their preferred electronic communication method as postal notices will not be conducive to a timely safety alert and response.

Appendix A – Detailed responses to consultation paper questions

Question 1: What is your view of the proposed definitions and whether they should be included in the NERR?

We support the proposed definitions which would introduce two tiers of life support customers and provide the visibility required to more effectively triage customers with critical needs, particularly during prolonged outages where prioritising their supply restoration may be possible.

We also support the greater specificity in an expanded list of life support equipment. For equipment not specified, the ability for medical practitioners to include these in “other medical equipment” is retained. However, we expect the new life support equipment definitions (explicitly included in the medical confirmation form) in conjunction with a continuous engagement and education with the medical sector would help guide medical practitioners on appropriate inclusions and ensure a more consistent interpretation of life support equipment, insofar as it limits the inclusion of appliances or devices that may provide comfort aside from medical needs.

Distinguishing critical and assistive needs by equipment type can better guide medical practitioners; however, we recognise that there may be instances where a device could be prescribed for assistive and critical support and, ultimately, should be determined by the relevant medical practitioner.

In relation to gas equipment, customers who are unable to self-regulate body temperature due to an underlying condition may depend on gas for heating. However, we understand that life customers are typically much less sensitive to gas supply interruptions relative to electricity supply.

Question 2: What is your view of the proposed amendments to civil penalty provisions for breaches relating to notification and deregistration - based on proposed changes to definitions as outlined in section 2.1.1 above?

Whilst our commitment to complying with our life support obligations will continue unaffected by the proposed changes, we believe civil penalties should be commensurate with the risk of harm to consumers. Accordingly, we agree in principle that higher civil penalties should be applied to breaches of provisions impacting critical life support users.

However, in relation to planned interruption notifications for assistive life support customers, a downgrade to Tier 2 would mean that customers would receive a lower level of civil penalty protection than for the equivalent provisions which apply to non-life support customers who are protected by Tier 1 protections. Notwithstanding that the AEMC does not prescribe civil penalties within the NERR, unless the provisions were also adjusted for non-life support customers, we consider that such a change would result in misaligned penalties, which would seem to be an unintended consequence.

In relation to breaching mandatory deregistration provisions, we agree the failure to deregister a premises will not directly or seriously impact life support customers and therefore should not be classified a Tier 1 provision.

We also support the proposed changes to half-year reporting of non-critical breaches. Noting that reporting obligations are determined by the AER, we suggest that the rules should also require the AER to review their Compliance Procedures and Guidelines to ensure proportionate reporting obligations.

Question 3: Is there confusion around who may deregister a premise when there is a change in the customer’s circumstances?

Whilst Endeavour Energy is clear on the deregistration process, we understand that there is confusion among customers and other market participants. Accordingly, we are supportive of clarifications (including in the AER’s Life Support Registration Guide) to ensure that the deregistration process is widely understood customers can approach either their retailer or distributor to complete a deregistration, irrespective of which party initially registered their life support. We consider that clarifying roles for retailers and distributor would enhance confidence in designing deregistration processes without disrupting current practices.

We strongly support mandatory deregistration as a measure to improve the accuracy of life support registers and enhancing the customer experience. In the case of the latter, we note premises often remain registered for life support equipment and continue receiving related notifications long after requesting removal, leading to a poor customer experience and perception of the energy industry's commitment to satisfaction. Notifications referencing deregistration dates without follow-through further confuse and frustrate customers.

Question 4: Do you have any views on requesting an updated medical certificate every four years?

Customers having to reconfirm their life support needs at least every four years would not be burdensome (noting that this could be obtained as part of a standard medical consultation) and would be conducive to maintaining better visibility of customer needs and accuracy of life support registers.

If critical customers (where permanent life support equipment needs had been flagged by the medical practitioner) were exempt from this requirement, retailers and distributors should be able to reach out to these customers – possibly as a targeted enhanced service, to check whether their life support needs and status required updating. However, we note that the medical confirmation template does not prevent post-consultation alterations, and a permanent registration may not be sufficiently dynamic to account for unexpected changes in a customer's medical circumstances.

Similarly, we consider mandatory deregistration obligations are critical to ensuring registers are accurate and reflect current life support needs and therefore should apply irrespective of whether or not a customer has previously confirmed their medical requirements.

We agree there is a greater need for medical practitioners to be involved in the registration process, and that they are likely to be best placed to discuss medical devices with customers (for example, how to operate and maintain them and contingencies/alternatives where supply renders them inoperable for a period of time (back-up planning)). However, retailers may be better placed to share information on available rebates and concessions, which would align more closely with their existing role.

Question 5: Do you have any views on introducing a cap on registration attempts without medical confirmation?

We support introducing a cap on registrations without medical confirmation and do not foresee any adverse impacts from imposing the proposed limitations. We note that customers already have 100+ business days (and opportunities to seek an extension) to provide medical confirmation, which we consider to be a sufficient and, indeed, generous amount of time to confirm registration prior to a deregistration notice being issued.

The suite of changes proposed will require additional resources, processes and system upgrades. For this particular change, new checks will need to occur at the time of registration that involve accessing the history of failed medical confirmation attempts by the customer across all potential RPOs.

Following a second deregistration for not providing medical confirmation, it might be appropriate to inform customers at that time that life support protections from any future registration will not take effect until a valid medical confirmation is received.

Question 6: Is there currently an inconsistency in how life support is assessed between different retailers and DNSPs?

Customers remain accountable for back up planning and their plans should be developed and regularly reviewed in collaboration with their medical practitioner, household and people in their support network.

However, effective preparations are hindered by inconsistency in the level of detail included in medical confirmation forms and a lack of awareness and guidance on how to develop back-up plans. We consider standardised medical confirmation and back-up plan templates can improve data quality and support

effective assessment of life support customers and deliver an uplift in awareness so that customers know what to do during a power outage.

The proposed templates, designed in partnership with the LMAG and Lived Experience Panel, reflect the minimum level of information required to give effect to the rule change, with individual RPO entities permitted the flexibility to request optional information that may help them to develop customer-specific supports.

We consider that a standardised medical confirmation template (published by the AER akin to their [Better Bills](#) example template) would enhance the clarity and consistency of the medical confirmation process and establish a more structured approach to back-up planning. We also consider that provision of the customer's phone number and/or email address should be mandatory to facilitate efficient communications between customers, their nominated contact, retailers and DNSPs.

Question 7: Would adding a nominated contact person improve the safety and experience of life support users?

We consider that nominating a second contact would improve customer safety and wellbeing by having an alternative person to relay and act upon outage notifications if the life support customer is not able to effectively do so. To optimise the value of this safety net measure, notifying the nominated contact person via their preferred electronic method (rather than physical mail) should be mandated for planned outage notifications.

For unplanned outages, we consider that best efforts should be made to notify all nominated contact people via their preferred electronic method. As different distributors have different levels of real-time visibility of their low-voltage network, this means that their ability to promptly notify customers will differ; we note also that there is an existing expectation that distributors will promptly notify customers when they become aware of an unplanned outage.

Effectively communicating with nominated persons requires their contact details to be accurate and routinely checked. Noting we are the RPO for a small portion of registered life support customers, this additional notification requirement is highly dependent on the quality of the details provided to us by retailers. This includes awareness of any change or removal of the nominated contact so we do not end up issuing notifications to parties that are unable to provide back-up support.

Implementing the suite of proposed changes will require system uplift and duplication; we consider that a cost-effective and efficient manner of doing so would be to require a single participant (most likely the retailer) acted as the RPO.

Question 8: Should customers' electronic contact details be captured in the medical registration form?

Electronic contact details should be recorded in the medical confirmation form, and supported by a mechanism or process that allows retailers or DNSPs (or both) to update this information whenever a customer notifies them of a change without needing to resubmit medical confirmation. This process should apply to the details of the life support customers and their nominated contact and allow a life support customer to be notified where a nominated contact changes their details or opts out of the role.

Question 9: Should the rules be updated to explicitly clarify that SMS/email notification of planned outages to life support customers is permitted?

Postal notification is a slow, costly and in many cases not the preferred method of communication for customers. In contrast, SMS communication offers a more convenient and reliable channel for notifying customers of planned outages (i.e. more timely and accessible notices; reduces risks associated with lost mail, etc.). This can also enable customers to spend more time enacting their backup plan.

Given this, allowing life support customers to select their preferred communication method is a practical improvement to the framework, and should be coupled with an easy way for them to manage their details

for the duration of their registration. Notifications should be defaulted to postal mail where preferred or a preference is not stated.

We understand there is confusion around whether electronic communications complies with the “written notice” obligations in the NERR. We consider clarifications would increase the adoption of this preferred method, noting that Section 8 of the Electronic Transactions Act 2000 (NSW) indicates written notice can be provided electronically if the recipient consents.

Question 10: Noting a central database for storing medical confirmations is outside the scope of this rule change process, are there recommendations that could be made to progress the issue?

Although it would not be necessary to enact the rule change, a centralised repository providing customers, retailers and DNSPs a means to access life support information and medical confirmation documents potentially offers a smoother life support registration and retailer churn experience. We note, however, that privacy and consent considerations (given the sensitivity of the personal information being stored/exchanged) and the interactions and accountabilities of all participants (including any third-party custodian of the database) would require careful assessment to ensure the administrative burden and costs involved are more than offset by any customer benefit.

In addition, there would also need to be consideration of how the proposed changes might be applied to embedded networks to maintain parity in protections.

Further to the above, driven by the mandated smart meter rollout, we expect metering will become an increasingly common source of planned and unplanned interruptions as retailers undertake greater volumes of remote disconnections and encounter more smart meter failures. Therefore, there will be instances where retailers are better able to diagnose, respond and rectify unplanned outages at a life support premises relative to distributors (e.g. remote disconnection made in error) who do not have real-time site-level visibility and capabilities to promptly identify issues and restore supply. Potentially, this trend may necessitate that retailers be required to maintain a 24/7 customer support number to ensure life support customers are protected in the event of a premise-specific outage and not only network outages.