

March 2, 2015

Rosemary Chiavetta
Secretary, Public Utility Commission
400 North Street, Keystone Bldg.
Harrisburg, PA 17120

Re: Chapter 14 Implementation, Docket No. M-2014-2448824

Dear Secretary Chiavetta,

This letter is submitted jointly on behalf of the Disability Rights Network of Pennsylvania, MidPenn Legal Services, Neighborhood Legal Services, the Pennsylvania Health Law Project, and the thousands of Pennsylvanians we serve. A statement of interest from each of our respective organizations is attached to this letter as Appendix A.

We join together to answer the Public Utility Commission's (PUC) call for comment regarding changes under Chapter 14 of the Public Utility Code to medical certifications. In particular, we respond to address the Commission's question about the "form" that a medical certification should take. We assert in response to this question that the medical certification process – and the form in which the necessary information is to be provided – must be simple and minimally burdensome to provide effective relief to vulnerable Pennsylvanians.

Our clients and constituencies, and the individuals who access our services, often face serious short-term and/or long-term, chronic health conditions or disabilities for which utility service is an essential component to treatment. At the same time, many of our clients face significant financial obstacles as direct or indirect result of their illness, condition, or disability. Unfortunately, these financial obstacles can work to exacerbate the illness, and can create significant barriers to accessing assistance and/or relief. **A simple process for medical certifications – which imposes minimal burden on both clients and certifying professionals – is therefore critical to ensure that utility service to the individual is not interrupted or terminated.**

First, the medical certification process must be simple to adopt and implement. In other words, healthcare providers should be able to easily integrate the certification process into their existing record and/or case management system with minimal effort and/or expense to the provider or the patient / customer. Such an approach ensures that ill individuals and individuals with a disability or condition are able to contact their healthcare provider and access the relief to which they are entitled without incurring additional expenses and/or processing delays. For some healthcare providers, particularly those with small offices and few patients, it may be simple to adopt and integrate a medical certification document in a form provided by the Commission. However, for other healthcare providers, such a form may not be compatible with existing case management or medical record systems and, as such, may not be easily integrated into the providers' internal operations. For these providers, it is critical that the Commission continue to accept a letter or other correspondence which the medical provider has created for this purpose.

In assisting our clients and constituencies in navigating the medical certification process, we have encountered both types of providers: Those who prefer to use a previously developed form and those who are unable to integrate a form that is not compatible with their internal systems. In light of such varied experiences, we recommend that the Commission create a *medical certification form that is widely accessible to healthcare providers, but at the same time* urge the Commission to continue accepting alternative forms and/or letters. As the Commission aptly noted in its Tentative Order, such an approach is in line with the letter of the law, in that Act 155 requires medical certifications to be “in a form approved by the commission”, and not “on a form approved by the commission.” (See Tentative Order at 4). By allowing health care providers to choose the method most convenient for the particular office, the Commission allows providers to adapt to dynamic and emergency health care situations, without imposing unnecessary expense or burden on the patient/customer or the provider. This practice has been beneficial for patients and easy for providers and it should continue.

Second, the medical certification process should only require certifying professionals to provide information necessary to authenticate the certification. The purpose of requiring written certification is to verify that a customer is entitled to the protection, and that utilities must defer to the health care provider's professional opinion about whether the customer/patient requires the continuation of service to treat the medical condition. (66 Pa. C.S. § 1406(f); 52 Pa. Code §

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56.113). In addition to ensuring that unqualified utility employees are not making decisions that could affect the health and welfare of extremely vulnerable Pennsylvanians, these explicit legal parameters for medical certification ensure that the certification process does not unnecessarily expose sensitive medical records, which are subject to complex federal and state confidentiality laws.

The Commission explicitly requested comments on the sufficiency of information currently required for medical certification in title 52, section 56.113 of the Pennsylvania Code. For the reasons explained above, we assert that the requirements in section 56.113 are sufficient to comply with the changes contained in Act 155. In fact, we believe that the information required in this section exceeds the information necessary to allow full compliance with the law. As explained above, the information required to be included on a medical certification should be limited to the information necessary for the utility to verify the authenticity of the certification. However, the current regulation requires public disclosure of the nature of an individual's illness, condition, or disability. By asking for this information, the regulations unnecessarily expose sensitive medical record information to disclosure. Current regulations also ask for the specific reasons for which utility service is necessary for treatment. This is an inquiry that goes beyond the limited information necessary, burdens medical practitioners unnecessarily, and presents the possibility that a utility may substitute its judgment for that of the certifying professional. To comply with the law, all that is needed is an attestation of a certifying professional, along with the respective contact information of the utility customer, the individual with the illness, condition, or disability, and the certifying professional. The additional information currently required in the Pennsylvania Code creates an unnecessary burden on the certifying professional and the vulnerable Pennsylvanian, and should therefore be eliminated.

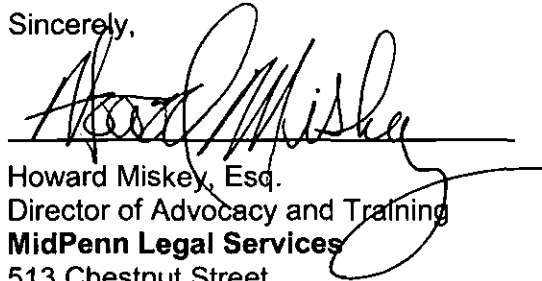
By ensuring that the medical certification process is simple and easily integrated, the Commission will guarantee that vulnerable Pennsylvanians are able to access the relief to which they are entitled without exposing busy healthcare providers – and the populations which they serve – to unnecessarily burdensome procedural obstacles. That will, in turn, make it easier for at-risk patients with medical conditions to maintain health and safety.

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We thank the Commission for extending this opportunity to provide comment on this important topic, and look forward to providing additional input in the months that follow as the Commission works toward full implementation of the changes adopted in Act 155.

Sincerely,



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APPENDIX A – Statements of Interest

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU**The Disability Rights Network of Pennsylvania (DRN)**

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The Disability Rights Network of Pennsylvania (DRN) is a non-profit corporation designated under federal law to provide protection and advocacy services for persons with disabilities. DRN's mission is to advance, protect, and advocate for the human, civil, and legal rights of Pennsylvanians with disabilities. Our vision is that all Pennsylvanians with disabilities are empowered with opportunities and choices, are valued members of their communities fully included in all aspects of community life having access to quality education, employment opportunities, and housing options living free from abuse, neglect and discrimination.

DRN has an interest in the proposed rulemaking by the Public Utility Commission to ensure that persons with disabilities can continue to live independently in the community. Barriers to community living, such as a cumbersome medical certification process to avoid disruption in critical, often lifesaving, utility services for medical needs, is of great concern to DRN.

MidPenn Legal Services

Administrative Office
213 North Front Street
Harrisburg, PA 17101
717-232-0581

MidPenn Legal Services is a non-profit, public-interest law firm dedicated to providing equal access to justice and high quality civil legal services to low-income residents and survivors of domestic violence in 18 counties in Central Pennsylvania. MidPenn attorneys and paralegals represent thousands of low income persons each year in a variety of civil legal problems, including persons whose utility service has been threatened with termination or which has been terminated and where the ratepayer or a person in the household is seriously ill or has a medical condition which requires the continuation of utility service to treat the condition. Our advocates have dealt with a variety of medical providers and utility company representatives across our service area in helping clients who meet the medical certification criteria to avoid service termination or to get service restored, and we submit these comments based on our experience in these matters.

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Neighborhood Legal Services

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Pittsburgh, PA 15222
412-255-6700

Beaver County
Stone Point Landing, Ste. 204A
500 Market Street
Bridgewater, PA 15009
724-378-0595

Lawrence County
125 East North Street
Suite 329 – Temple Building
New Castle, PA 16101
724-658-2677

Neighborhood Legal Services Association (NLSA) was established in 1966 as a non-profit, public interest law firm to provide civil legal assistance to poor and vulnerable residents of Allegheny (and later) Beaver, Butler, and Lawrence Counties. The mission of NLSA is to meet the civil legal needs of the poor and vulnerable in our community through effective legal representation and education.

All of the cases that NLSA handles have reached a crisis stage that threatens the fundamental safety and security of low-income individuals living in our community. These issues involve the basic essentials of life such as: the ability to maintain housing, including the maintenance of stable and affordable utility service; obtaining or maintaining essential benefits to the disabled and children; employment practices; child custody and visitation issues; and protection from abuse and neglect.

Although NLSA typically works case by case, its positive impact is cumulative. Generally, legal assistance for one person improves the lives of entire families. When families live in adequate housing, with essential benefits intact, predatory lenders at bay, and fear of domestic violence reduced or eliminated, communities are stabilized, benefitting our entire region.

The Pennsylvania Health Law Project

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The Pennsylvania Health Law Project is a non-profit public interest law center representing low income Pennsylvanians and persons with disabilities seeking coverage of health care and in-home support services. As such, the overwhelming majority of our clients are facing significant health problems or have disabilities. Our organization has a direct interest in the medical certification process because the termination of utilities frequently adversely affects in-home health and supportive services needed by the individuals we represent.

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