

# Residential Service Medical Equipment Discount Program

## **I. Applicability**

To customers receiving service under residential rates who meet the eligibility requirements listed below.

## **II. Qualification**

An application must be completed along with certification from a qualified health professional stating that a medical need exists. A current definition of “qualified health professional” is posted on [www.smud.org](http://www.smud.org).

## **III. Discount**

A maximum discount of \$15 per month will be applied to the electricity usage portion of the bill.

## **IV. Medical Equipment Device**

A medical equipment device, for purposes of these rates, is defined as a qualifying medical device requiring utility-supplied electricity for its operation that is regularly required for mobility or to sustain the life of a person residing in a residential dwelling. Qualified devices change frequently as technology changes. A current list of qualified devices and medical conditions is posted on [www.smud.org](http://www.smud.org).

## **V. Medical Equipment Discount and Energy Assistance Program Rate**

Qualified residential customers on both the Medical Equipment Discount and the Energy Assistance Program Rate receive both discounts: a \$15 MED discount and the EAPR discount as detailed in tariff sheet 1-EAPR-1-3. The system infrastructure fixed charge is \$4.50.

## **VI. Eligibility**

To qualify for the medical equipment discount the customer must certify in writing that the customer or a full-time resident in the customer's home:

- Is dependent on a qualifying medical equipment device used in the home or
- Has a medical condition with special electric space heating needs or air conditioning needs.

## **VII. Application**

The Medical Equipment Discount Program option will be effective commencing with the beginning of the billing period in which the request is received and approved. Return to another rate option will be effective commencing with the beginning of the billing period in which the request is received or the cancellation date, if enrollment in the Medical Equipment Discount Program is terminated.

## **VIII. Request for Additional Discount**

If this discount does not meet a household's medical-electricity needs, customers may contact SMUD to discuss additional assistance.

*(End)*