



Economic Regulation Authority

Draft decision

Amendments to the Code of Conduct for the Supply of Electricity to Small Use Customers 2022

5 May 2025

Acknowledgement of Country

At the ERA we value our cultural diversity and respect the Traditional Custodians of the land and waters on which we live and work.

We acknowledge their continuing connection to culture and community, their traditions and stories. We commit to listening, continuously improving our performance and building a brighter future together.

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Public consultation

Submissions are due by 4 pm, 23 May 2025 (AWST)

The Economic Regulation Authority is facilitating consultation on its proposed amendments to the *Code of Conduct for the Supply of Electricity to Small Use Customers 2022*.

The Electricity Code Consultative Committee will consider comments provided in public submissions when preparing its final advice for the ERA.

We would prefer to receive comments via our online submission form:
<https://www.erawa.com.au/consultation>

You can also send comments by:

Email: eccc@erawa.com.au

Post: Level 4, Albert Facey House, 469 Wellington Street, Perth WA 6000

Please note that submissions provided electronically do not need to be provided separately in hard copy.

All submissions will be made available on our website unless arrangements are made in advance between the author and the ERA. This is because it is preferable that all submissions be publicly available to facilitate an informed and transparent consultative process. Parties wishing to submit confidential information are requested to contact us at eccc@erawa.com.au

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1. Overview

The Economic Regulation Authority proposes to amend the *Code of Conduct for the Supply of Electricity to Small Use Customers 2022* (Code), which regulates the conduct of retailers and distributors who supply electricity to small use customers.

Our proposed amendments are intended to enhance existing customer protections and reduce administration. The proposals reflect recommendations from the Electricity Code Consultative Committee (ECCC), which conducts an independent review of the code every two years.

The ERA has accepted the ECCC's recommendations to improve the code and proposes further improvements to standardise confirmation requirements between regional and metropolitan customers requiring Life Support Equipment (LSE).

Customers requiring LSE can register with their retailer to ensure their power is not disconnected for non-payment. The ECCC's review highlighted the difficulty and expense for customers to maintain their ongoing LSE registration. The committee recommended expanding the options for regional customer to obtain the three-yearly confirmation of ongoing LSE need. The ERA further proposes to allow Perth metropolitan customers to seek initial registration and three-yearly confirmation of ongoing LSE need from the same type of medical or healthcare practitioners as provided for in the regions (Section 3.1).

In February 2023, we introduced new protections requiring retailers to place customers experiencing family violence on a disconnection moratorium, to prevent them from being disconnected for non-payment. After considering the views of advocates, the ECCC recommended allowing vulnerable customers to opt-out of the disconnection moratorium and the choice to opt back in at any time (Section 3.2).

Our draft decision also includes changes to make some processes easier to understand, follow, or apply (Section 3.3):

- Requiring retailers to notify customers annually of available tariffs, products and plans.
- Prohibiting charges for paper bills to certain customers, consistent with residential gas and water customers.
- Allowing customers choice on including future bills in a payment plan and on how they receive certain refunds from their retailer.
- Updating complaints management to the relevant Australian Standard.
- Increasing service standard payments by inflation.
- Reducing reporting for business customers operating facilities such as nursing homes with more than one person requiring LSE.

The ECCC will consider public submissions on this draft decision when preparing its final advice to the ERA. We intend to publish a final decision on the amendments in mid-2025.

2. Background

The ERA is Western Australia's independent regulator for electricity, gas, water, and rail.

Our functions include administering codes of conduct to protect the interests of small use customers across retail electricity, gas, and water services.

2.1 What is the Code

The Code provides minimum standards of conduct for retailers and distributors who supply electricity to small use customers, that is, residential and small business customers using less than 160 megawatt hours (MWh) of electricity per year.¹

The Code includes issues such as billing or payment, connections or disconnections, and complaints and dispute resolution management. We administer the Code using our powers in the *Electricity Industry Act 2004*.

The current Code commenced in February 2023 following a comprehensive review and the ERA's acceptance of all 115 of the ECCC's recommendations.

2.2 Retail electricity in Western Australia

The ERA administers the electricity licensing scheme in Western Australia.² Under the Act, anyone operating a distribution network or selling electricity to small use customers must obtain the relevant retail licence and comply with the Code as a condition of that licence.

Western Power is the electricity distribution network operator within the South West Interconnected System (SWIS), which spans from Kalbarri to Albany and Kalgoorlie. Synergy is both a generator and retailer of electricity in the SWIS. Horizon Power is the vertically integrated retailer and distributor operating outside the SWIS, covering most of the remote and regional areas of Western Australia.

Customers who consume less than 50 MWh of electricity per year, known as non-contestable customers, comprise almost all residential customers, along with some small businesses. Only Synergy is allowed to sell electricity to non-contestable customers in the SWIS. Horizon Power supplies all small use customers outside the SWIS, and the vast majority of the approximately 1,400 pre-payment meter customers.

Contestable small use customers consume over 50 MWh and less than 160 MWh of electricity per year and may choose their electricity retailer. In the SWIS, Synergy is one of nine retailers licenced to supply contestable small use customers – typically small businesses and the few households that exceed the 50 MWh per year threshold.

¹ ERA, 21 February 2023, [Code of Conduct for the Supply of Electricity to Small Use Customers 2022](#) (online), [accessed 24 February 2025]

² ERA, 31 January 2025, Electricity Licensing, ([online](#)), [accessed 3 February 2025].

2.3 What is the Electricity Code Consultative Committee?

The ECCC is a statutory committee we establish to advise us on the Code's suitability. The ECCC must review the Code every two years and includes members from consumer groups, industry, and government.³ The ECCC advises the ERA during and after each review. We carefully consider the ECCC's advice and refer any additional changes back before formally amending the Code.

2.4 Current review

On 5 March 2024, we appointed 10 members to the ECCC for a two-year term and members submitted issues to consider during the review.

On 30 September 2024, the ECCC published a draft review report, making 13 recommendations to amend the Code.⁴ The ECCC offered individuals and organisations an opportunity to comment on its draft recommendations through a public consultation process and received eight submissions.

The ECCC considered each submission and updated the recommendations before publishing its final review report on 4 December 2024.⁵ The final review has informed the ERA's draft decision, which is open for public comment until 23 May 2025.

The ERA will consider any submissions or final advice from the ECCC before publishing our final decision in mid-2025. Amendments to the Code will be published on the Western Australian legislation website and are expected to commence at least two months after the final decision is published.

2.5 ECCC recommendations

In its final review report the ECCC made 13 recommendations (summarised at Table 4) that sought three types of changes to the Code:

1. New customer protections to prohibit paper billing charges for certain customers and require retailers to be proactive in providing information about plans or products.
2. Strengthening existing customer protections to improve access for LSE customers, increase compensation payments by inflation, make the disconnection moratorium for vulnerable customers optional, and allow customers to roll future bills into a payment plan.
3. Streamlining the Code by reducing duplication, updating standards and simplifying processes.

³ The Code was repealed and replaced in February 2023. Section. 88 of the Act requires a review at the first anniversary of it coming into effect. The next review will commence as soon as practicable after 20 February 2026 (i.e. two years after the first anniversary review).

⁴ ECCC, 30 September 2024, Draft Review Report, ([online](#)), [accessed 3 February 2025]

⁵ ECCC, 4 December 2024, Final Review Report, ([online](#)), [accessed 3 February 2025]

2.6 ERA response

We are proposing amendments in response to 12 of the ECCC's 13 recommendations. In addition, we propose to expand the ECCC's recommendations for regional LSE provisions across the State, to standardise the approach for customers and retailers regardless of location.

This draft decision proposes no change in response to ECCC recommendation four which deals with how retailers label a bill containing estimated data from an interval meter following replacement of an accumulation meter. The state government's program to replace accumulation meters with interval (smart) meters is on track to end in 2027.

In making this draft decision, as required by clause 87 of the *Electricity Industry Act 2004*, we will refer the proposed amendments to the ECCC to undertake consultation and provide us with advice. We will have regard for the advice before announcing the final decision. When exercising the power to amend the Code under clause 79 of the *Electricity Industry Act 2004*, the ERA will consider matters in clause 26 of the *Economic Regulation Authority Act 2003*.

3. Reasons for draft decision

This section explains our proposed changes for LSE customers, introducing choice for customers experiencing family violence, and the administrative amendments. The changes are proposed in support of the Code's objective to define minimum standards of conduct for electricity retailers.

The ECCC's recommendations to the Code were aimed at improving existing protections and reducing the administrative burden associated with the current Code. Our draft decision builds on the recommendations by identifying opportunities to standardise or further reduce some administrative requirements.

3.1 Life Support Equipment

It is vital for people using medical equipment such as a dialysis machine or an oxygen concentrator to remain connected to the power supply. Medically dependent people may be living at a residential supply address or in a facility such as a nursing home. Once registered with a retailer, a customer with LSE equipment may not be disconnected for non-payment and must receive earlier notification of planned outages and priority reconnection after outages.

The Code requires customers to provide medical evidence from an appropriately qualified medical practitioner when registering as an LSE user, as well as a periodic review of the ongoing need for LSE. Retailers have established their own processes for implementing the LSE provisions, made available on their websites.^{6,7} The Code permits retailers to remove a supply address from its LSE list if the customer does not provide adequate evidence at the three-yearly confirmation.

The periodic review requires customers to provide self-confirmation following the first and second years of their registration, by advising the retailer in writing that LSE is still required at the supply address. Every third year, the customer must provide evidence from an appropriately qualified medical practitioner that LSE is still required.

Perth metropolitan LSE customers

In the Perth metropolitan area, a specialist medical practitioner (including a specialist in private practice, a doctor at a hospice or in a specialist department of a hospital) is required to confirm the initial registration and the three-yearly confirmation of ongoing LSE need.

ECCC recommendation seven proposes to allow a general practitioner in the Perth metropolitan area to confirm ongoing LSE need, as currently permitted in regional areas. This recommendation aligns with the State Government's 2023 update to the LSE Energy Subsidy, with many registered LSE customers also receiving the subsidy.⁸

Regional LSE customers

Outside of the Perth metropolitan area, a customer can also obtain evidence for the initial LSE registration and/or the three-yearly confirmation from a doctor or general practitioner registered with the local hospital or rural health service.

⁶ Synergy, 'Register for Life Support' ([online](#)) [accessed 3 February 2025].

⁷ Horizon Power, ([online](#)), [accessed 3 February 2025].

⁸ Dept. of Finance, Apply for Life Support Equipment Energy Subsidy ([online](#)), [accessed 17 March 2025].

ECCC recommendation six allows “nurses and other medical professionals” to provide three-yearly confirmation of LSE need for customers outside the Perth metropolitan area.

Proposed amendments

The ERA proposes to remove the different requirements for metropolitan and regional customers at the initial registration and for the three-yearly confirmation. The changes would simplify registration and confirmation for all LSE users and retailers, and particularly for Synergy that has customers in and out of the Perth metropolitan area. Customers would still be required to have evidence of a specialist diagnosis to register an LSE supply address.

Figure.1 illustrates the changes proposed to LSE registration and confirmation requirements, with a comparison of the current state (top row) to the ECCC's recommendations (middle row) and the ERA's proposal to expand the ECCC's recommendations for regional customers to all customers across the State (last row). The illustration is supported by the explanations provided at Table 1. The proposed amendments are detailed by clause at section 4 with additional supporting information at Appendix 3.

Healthcare accessibility challenges in regional Western Australia occur due to the size of the State.⁹ While there have been improvements in health accessibility and outcomes over time, discrepancies between regional centres compared to rural areas persist, with reduced accessibility in the metropolitan areas emerging.

The ECCC's recommendations aim to make it easier for people to maintain their registration. This means allowing regional customers to seek the three-yearly confirmation from other healthcare practitioners, such as nurses, pharmacists, and other suitably qualified and registered individuals. For Perth metropolitan customers, this means also allowing the three-yearly confirmation by a general practitioner, with a specialist report.

Given the unequal access to general practitioners across regional, rural and remote areas alongside reduced metropolitan accessibility, our proposal expands the protection recommended by the ECCC. This means instead of requiring an appointment with a medical specialist to confirm the ongoing need for LSE, all Western Australians can seek confirmation from a healthcare practitioner involved in their day-to-day care. For example, a customer could have the confirmation provided by the:

- Nurse delivering in-home care, such as dialysis support.
- Pharmacist dispensing the medication required for a ventilator.
- Occupational therapist assisting with independent living arrangements, like helping carers with the use of suction pumps.
- Physiotherapist supporting respiratory health, such as treatments accompanying the use of an oxygen concentrator.

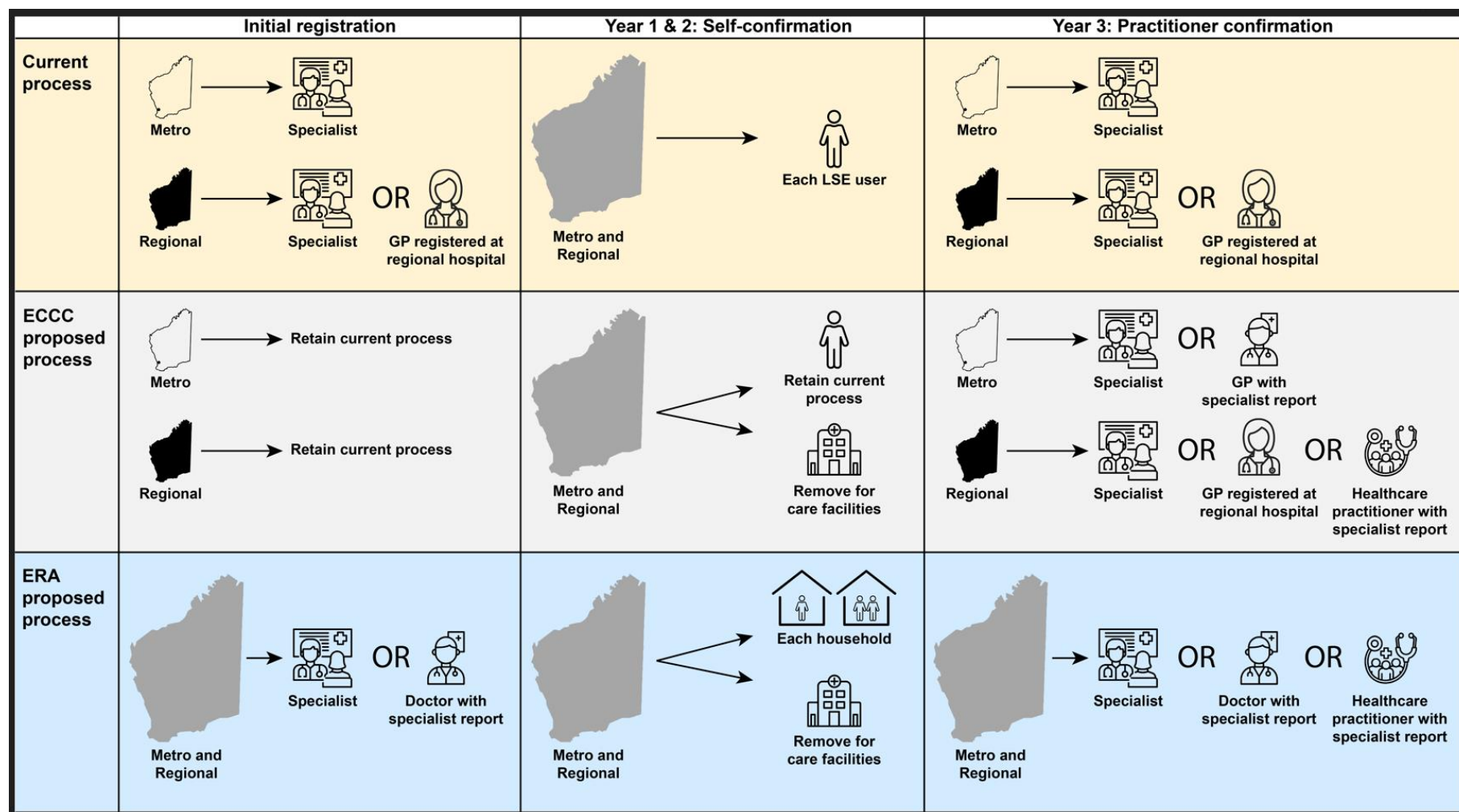
This will reduce the out-of-pocket costs incurred and remove the need to attend an extra appointment.

⁹ WA Country Health Service, 21 February 2025, ([online](#)), [accessed 27 March 2025].

Table 1 Explanation of the terms used to describe medical and healthcare practitioners

Term	Explanation	Amended Code Clause
Specialist (Current Process)	Appropriately qualified medical practitioner in the Perth metropolitan area. <ul style="list-style-type: none"> • a specialist medical practitioner; or • a hospice doctor; or • a medical practitioner working in a specialist department of a hospital. 	3
GP registered at regional hospital	Appropriately qualified medical practitioner outside the Perth metropolitan area who is a doctor or general practitioner who works at a local hospital or rural health service. This entitlement for customers outside the Perth metropolitan area will be unchanged in the Amended Code.	3
Specialist (In Amended Code)	<ul style="list-style-type: none"> • A medical practitioner, other than a specialist general practitioner, who holds specialist registration in a recognised specialty in the medical profession under the <i>Health Practitioner Regulation National Law (WA)</i>. • A medical practitioner working in — <ul style="list-style-type: none"> – a hospice; or – a specialist department of a hospital; or – a local hospital or rural health service (where the relevant supply address is outside the Perth metropolitan area). 	82(1A) (a) (b)
Doctor	An individual registered under the <i>Health Practitioner Regulation National Law (WA)</i> to practise the medical profession.	82(1A) (c)
Healthcare practitioner	An individual registered under the <i>Health Practitioner Regulation National Law (WA)</i> to practise a health profession, including the medical profession. This includes a nurse, pharmacist or other professional engaged in the care of the customer.	85(1)
Specialist report	A written diagnosis or medical report provided by a specialist.	82(1A), 85(1)

Figure.1 Comparison of current and proposed LSE registration and periodic review in Western Australia



3.2 Choice for vulnerable customers

For people affected by family violence, the Code provides mandatory protection from disconnection for non-payment of bills. These protections commenced in February 2023.

The ECCC received feedback from customer advocates on possible unintended consequences of this mandatory protections including:

- Alerting the perpetrator that the retailer is aware of the family violence situation, because the power remains connected when household bills have not been paid.
- Victim-survivors holding the incorrect assumption that information about family violence could be shared with other government agencies, possibly affecting child custody arrangements.
- Encouraging offenders to remain at home for access to power, where a perpetrator may have voluntarily moved on if it had been disconnected.

We understand that informed choice (not prescribed protection) is key for people experiencing family violence. We agree with the ECCC's recommendation nine to make the disconnection moratorium protection optional and allow customers to opt back in if they choose. We propose to amend the Code so vulnerable customers can opt-out of the mandatory disconnection, once the retailer obtains their verified and informed consent.

The ECCC recommendation nine seeks to provide clarity to retailers on the obligation to extend the family violence protections to customers, when the retailer has not been advised directly by the customer. Currently, retailers that become aware that a customer is vulnerable, (for example via a third-party) are obliged to implement the Code's family violence protection. The proposed changes, detailed by clause at section 4, require a retailer to make "reasonable endeavours" to confirm a customer's vulnerable status. If a retailer is unable to confirm after making reasonable attempts, the retailer is not obliged to extend the protections.

3.3 Administrative changes

The ECCC identified inefficient or ineffective practices and opportunities to boost protections afforded to customers. Problems the ECCC aimed to address were:

- Inconsistencies between other utility codes of conduct, by prohibiting charges for paper bills to customers experiencing hardship, family violence or receiving concessions.
- Decreased value of service payments that have not been recalculated, by increasing the payments by the Consumer Price Index (CPI) since 2010.¹⁰
- Superseded reference to a complaints management Standard, by removing the requirement for retailers to respond to the same customer with two different timeframes.
- Limited customer awareness of products and packages available from the retailer, by requiring pro-active communication by the retailer.
- Unwelcome communications to frequently disconnected pre-payment meter customers about hardship supports, by removing the need for retailers to do so.
- Administrative burdens for business customers with multiple LSE users (for example, small hospices or nursing homes), by removing the self-confirmation requirement.

¹⁰ According to the Australian Bureau of Statistics, CPI is defined as "a general measure of inflation based on the change in prices of goods and services purchased by Australian households". Frequently Asked Questions about CPI, ([online](#)), [accessed 27 March 2025].

The ECCC's recommendations focussed on a range of incremental changes that would result in better information or protections being provided to customers. The proposed administrative amendments to the Code are limited to improving existing protections, reflecting the extensive changes and new protections introduced in February 2023.

The ERA considered that amending the Code in respect of recommendation four could risk reducing customers' right to request an explanation of estimates and would deliver limited benefit to retailers that already have adequate methods for managing billing periods with estimated data.

4. Proposed changes

This section explains the purpose of and reasons for each change proposed in the Amending Code (Attachment 1. *Code of Conduct for Supply of Electricity to Small Use Customers Amendment Code 2025*).

Throughout this section (excepting preliminaries), the clause/s listed first corresponds to the section of the Code being changed. The text in brackets identifies the clause/s in the Amending Code drafted to achieve the proposed change. We then provide a brief summary of the change followed by supporting reasons.

To see the amendments as they will appear in the Code, please refer to the marked-up version (Attachment 2. Consultation Draft of the amended *Code of Conduct for Supply of Electricity to Small Use Customers 2022*).

Citation (Amending Code clause 1)

Change summary

Provides the title of the Amending Instrument: *Code of Conduct for Supply of Electricity to Small Use Customers Amendment Code 2025*.

Commencement (Amending Code clause 2)

Change summary

Provides when the amendments become effective.

Reason

The title and commencement provisions become effective when they are published on the Western Australian legislation website.

The rest of the amendments are expected to become effective on 1 January 2026, giving licensees time from the publication of the ERA's final decision to update systems and processes.

Code amended (Amending Code clause 3)

Change summary

Provides that the Amendment Code amends the *Code of Conduct for the Supply of Electricity to Small Use Electricity Customers 2022*.

Reason

Amending the Code instead of repealing and replacing it is a more efficient way to administer and review legislation.

Amending the Code makes it easier for stakeholders to track iterations on the Western Australian legislation website over time.

Clause 3 Definitions (Amending Code clause 4)

Change summary

Amends definitions in cl. 3 to ensure consistency with other instruments and for accuracy within the Code.

Table 2 Changes to defined terms

Defined term	Explanation of change
Appropriately qualified medical practitioner	Removed, with new terminology inserted at cl. 82 and cl. 85.
Complaint	Changes description from “an organisation” to “a person” to align with AS/NZS, <i>Interpretation Act 1984</i> , Water Code 2024.
National Interpreter Symbol	Display the symbol as a visual representation that is easier for people to understand. Aligns with Gas Compendium.
Overcharging / Undercharging	Clarifies this does not apply to bill smoothing arrangements, for consistency with defined terms.

Clause 28 Energy data checking (Amending Code clause 5)

Change summary

Amend cl. 28 to change the obligation on a retailer, if a check of energy data shows a customer needs to be refunded.

Reason

The proposed change gives customers a choice between a refund or a bill credit, rather than only making a refund available.

The amendment models the existing protection at cl. 30, which gives a consumer a choice of refund or bill credit. In other words, this change means a retailer would follow similar steps as they already do when a customer is overcharged.

This amendment reflects recommendation three.

Clause 32A Prohibit paper billing fees for disadvantaged customers (Amending Code clause 6)

Change summary

Inserts new cl. 32A after Division 8, prohibiting retailers from charging disadvantaged customers for a paper bill.

Reason

The proposed change applies to customers who are identified as experiencing family violence, receiving concessions, or in financial hardship.

This provision recognises both the financial and accessibility challenges faced by some people. Charging people with limited digital literacy or internet access for a paper bill creates additional hardship. It is more helpful to have a hard copy of the bill when seeking support from a third party, for example a financial counsellor.

It standardises protections applied by all retailers (for example, some make this voluntarily available) and aligns with protections afforded to gas and water customers.

This amendment reflects recommendation one.

Clause 43 Including future bills in a payment plan (Amending Code clause 7)

Change summary

Amend cl. 43 to allow a customer to agree to vary a payment plan so that amounts for future bills can roll in to the payment plan, provided these amounts are incurred no more than six months from the original payment plan being established.

Reason

Customers acting in good faith to arrange a payment plan under cl. 4 of the Code may be repeatedly contacted by the retailer about future payment plans for new bills, because under cl. 43 an existing payment plan can only be varied by agreement as each bill is incurred. This adds both administrative burden and inconvenience to both parties, who may be happy to mutually agree in advance to other arrangements.

The proposed change allows customers to make an informed choice and mutually agree upfront about varying the payment plan, so that if needed the retailer can add future amounts to the payment plan without having to repeatedly contact the customer.

This amendment reflects recommendation five.

Clause 59 Consequential (Amending Code clause 8)

Change summary

Consequential amendment to cl. 59 after changes are made to cl. 82.

Clause 66 Streamlining information for frequent pre-payment meter disconnections (Amending Code clause 9)

Change summary

Delete cl. 66(1)(b) so the provision only requires a retailer to contact a customer in financial hardship and no longer requires a retailer to contact the customer if a pre-payment meter is disconnected for certain periods of time. Consequently, delete cl. 66(4) as this relates to cl. 66(1)(b).

Reason

Retailers are required to provide information about meter types, concessions and financial counselling services to pre-payment meter customers that are disconnected two or more times in a month, or for 120 minutes in any one month. The ECCC heard that frequent disconnection is not necessarily a sign of financial hardship as some pre-payment meter customers use the

disconnection as a prompt to top up their account. Due to the widespread use of online payments and smart meters, customers are re-energised promptly after making payment.

This amendment reflects recommendation 12.

Clause 69 Advising customers of available tariff options and products (Amending Code clause 10)

Change summary

Amends the obligation on the retailer to provide information to non-contestable customers.

Reason

The retailer is currently required to make certain information about tariffs, fees and charges available on request. Retailers may also have other options available (for example, plans, products or add-on packages) but a customer may not know about them to prompt a search of the retailer's website for details.

By pro-actively providing the information annually to customers, they can make informed choice to suit their changing needs. For example, Synergy released an Electric Vehicle (EV) Add-on package for customers with smart meters, offering heavily discounted tariffs for overnight consumption – which is when many people charge their EVs.

This amendment reflects recommendation two.

Clause 82 Increasing LSE protections for initial registration (Amending Code clause 11)

Change summary

The new term “medical practitioner confirmation” at cl. 82 uses more precise terminology and means all suitably qualified and registered practitioners can authorise the application provided there is an accompanying specialist medical diagnosis.

Removes the different confirmation processes for Perth metropolitan and regional customers.

Reason

Because the ECCC recommended changes to the periodic review process (recommendations six and seven), we wanted to ensure the initial registration process was suitably aligned to the amendment. As a result, we propose two changes to the initial registration process, to make it easier and fairer across the State.

Firstly, the description of “medical practitioner” has been clarified and expanded, to differentiate by the type of registration (specialist or otherwise). This means a qualified non-specialist medical practitioner (in everyday meaning, a “doctor” including a general practitioner) can confirm the initial registration (provided there is a specialist report). Secondly, the distinction between which medical practitioner can confirm the registration in the Perth metropolitan area or otherwise has been removed.

This means it is easier for consumers to complete the necessary paperwork. For example, the customer may find out about the LSE scheme after the specialist visit. They can then take the application to their general practitioner rather than arranging another specialist visit.

It also means medically dependent people are not further disadvantaged by their location. For example, people living on the outer-metropolitan fringe may face long trips to attend a specialist medical visit where people in inner-regional areas may visit their general practitioner.

Clause 84 Clarifying requirements where more than one person requiring LSE resides at a supply address (Amending Code clause 12)

Change summary

Amend cl. 84 and make clear the description of who the distributor is obligated to contact in the event of a planned interruption of supply.

Reason

By specifying “the customer or nominated person” consistently in this clause, it removes the uncertainty of needing to contact “someone else residing at the address” in some situations.

This amendment reflects recommendation eight.

Clause 85 Increasing LSE protections for ongoing confirmation (Amending Code clause 13)

Change summary

The new term “healthcare practitioner confirmation” at cl. 85 introduces precise terminology to allow for other suitably qualified and registered practitioners (as well as medical practitioners) who can confirm the ongoing registration.

Removes the different confirmation processes for Perth metropolitan and regional customers.

Reduces administrative requirements for residential and business customers, with different reporting obligations according to consumption type.

Reasons

The current periodic review requires the retailer to seek annual confirmation from all customers that a person/s living at the address continues to require LSE. On the first and second years, the confirmation is provided by the customer (that is, self-confirmation) but on the third year it must be confirmed by a specialist medical practitioner. Outside the Perth metropolitan area, confirmation by a doctor or general practitioner registered with the local hospital or rural health service is allowed.

The ECCC recommended changes to the periodic review process (recommendations six and seven) to make it easier for consumers in and out of the Perth metropolitan area to keep their LSE supply address registered. Our proposal will expand the recommended regional provisions to also apply to the Perth metropolitan area, standardising the approach across the State.

Healthcare practitioner

First, we propose to introduce a description of which healthcare practitioner can confirm ongoing need for LSE. This means in addition to the same medical practitioners (“doctors”)

who can confirm the initial registration, other suitably qualified and registered healthcare practitioners (provided there is a specialist report) may confirm the ongoing need.

This means a person's care team can confirm the ongoing need for LSE, which makes it easier for the customer by avoiding medically unnecessary travel or out-of-pocket costs.

Confirmation process

Second, we propose to remove the different confirmation process between the Perth metropolitan and regional areas.

- The ECCC's reasoning for healthcare practitioner confirmation in the regions was prompted by concerns about general practitioner availability.
- The ECCC also recommended in certain circumstances that general practitioners be allowed to confirm in the Perth metropolitan area, to align with the LSE Energy Subsidy.
- We recognise constrained general practitioner accessibility may apply to Perth metropolitan customers, and that all consumers would benefit by having a healthcare practitioner able to complete the third-year confirmation.

This means a standardised process across the State, because healthcare practitioners can confirm the ongoing need for LSE regardless of the customer's location.

The current entitlement for customers outside the Perth metropolitan area to obtain their registration and ongoing confirmation from a medical practitioner at a local hospital or rural health service will remain unchanged. We also retain the ability for medical practitioners at a hospice or in a specialist department of a hospital to authorise in lieu of the specialist practitioner.

Reporting obligations

Finally, we propose to reduce the reporting obligations as follows.

- Business customers will no longer receive the self-confirmation in the first and second year.
 - Business customers continue to receive the third-year healthcare practitioner confirmation, that a person at the address still needs LSE.
 - Residential customers will continue to receive the self-confirmation.

This means places like nursing homes with several medically dependent people registered at the customer's address have reduced reporting obligations to free up time for patient care.

- Residential customers will receive only one request per year for self-confirmation.
 - In the first and second year, the retailer requests and receives a self-confirmation for one person registered for LSE at a residential supply address.
 - The retailer will not be required to request a self-confirmation for other people registered for LSE at the same address for 12 months.
 - In other words, the customer's confirmation for the first person provides adequate assurance that the retailer's systems are up-to-date.
 - Residential customers continue to receive a healthcare practitioner confirmation for each person at the address every third year.

For example, this means a customer who is a parent with two medically dependent children at home would receive one form in a year, instead of receiving the same form twice each year.

Clause 86 Increasing LSE protections (consequential) (Amending Code clause 14)

Change summary

Consequential amendment to cl. 86 due to numbering changes at cl. 85.

Clauses 87, 88 Removing inconsistent complaint acknowledgement times (Amending Code clauses 15, 16)

Change summary

Amend the Australian Standard referenced at cl. 87 and consequentially to cl. 88.

Reason

Reflects the revised Australian Standard AS/NZS 10002:2022. While the Standard is referenced in cl. 87(3), some words and timeframes from the Standard are included in the Code at cl. 88 to ensure customers clearly understand their rights.

This amendment reflects recommendation 11.

Clause 91 Respecting vulnerable customer's choices (Amending Code clause 17)

Change summary

Amends cl. 91(2) to require the retailer to use “reasonable endeavours” when attempting to contact a customer, if the retailer “becomes aware” that person may be experiencing family violence.

Reason

If the retailer “becomes aware” of a customer’s vulnerable status, the Code requires the retailer to apply the protection available under cl. 92. If a third party, such as a contractor, visits a home and advises the retailer that customer appears to be experiencing family violence, the retailer will contact the customer to advise of the nine-month disconnection moratorium.

Failing to act to would result in a breach of the Code, yet the Code does not specify the number of times the retailer is required to attempt contact. Retailers are understandably concerned they will breach the requirement if they are unable to reach the customer, but repeated calls can be intrusive to a customer who does not wish to be contacted.

Instead, reflecting recommendation nine, the retailer would be required to establish in their family violence policy how they would make “reasonable endeavours” to contact a customer.

Clause 92 Respecting vulnerable customer's choices (Amending Code clause 18)

Change summary

Amend cl. 92(3) to ensure customers experiencing family violence can opt out of the disconnection protection at cl. 92(1).

Reason

Family violence advocates and social service providers informed the ECCC's view on the importance of providing customers with choice (recommendation nine).

The proposed change requires a retailer to obtain a vulnerable customer's verifiable consent when the customer is opting out of the disconnection moratorium. Importantly, a customer can opt back in to this protection in cl. 92(1) at any time by contacting the retailer.

Clauses 94 to 99 Higher compensation payments for customers (Amending Code clauses 19 to 23)

Change summary

The amounts have been increased by CPI since 2010 as value has declined over time.

This amendment reflects recommendation 10 and the associated changed timeframes at recommendation 11.

Table 3 Changes to service payments

Clause	Service payment	Current \$/day (max \$)	Proposed \$/day (max \$)
94	Reconnections	60 (up to 300)	84 (up to 420)
95, 97	Wrongful disconnections	100	140
96, 98	Customer service (written complaints)	20	28

Various references to National Interpreter Symbol (Amending Code clause 24)

Change summary

Consequentially introduces the National Interpreter Symbol consistently throughout the Code at cl.:

- 9(2)(g)(i)
- 10(3)(f)(i)
- 46(2)(g)(i)
- 57(2)(k)
- 78(2)(a)
- 91(2)(k)(i)

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Appendix 2 Summary of the ECCC recommendations

Table 4 Summary of the ECCC recommendations

ECCC recommendation summary
1. Prohibit paper billing charges to customers receiving concessions, experiencing financial hardship or family violence.
2. Introduce a new obligation to advise non-contestable customers annually, that the retailer has other tariff plans available.
3. Allow customers to choose a bill credit rather than a refund for any charges paid, where the meter is tested and found defective.
4. Where an accumulation meter has been exchanged for an interval meter, allow a bill estimate to be based on the longest available data series.
5. Allow a customer with a payment plan to nominate up to three future bills (i.e. over six months) to be incorporated in their payment plan.
6. In regional areas, allow healthcare practitioners such as pharmacists and nurses to provide confirmation of a person's ongoing LSE requirement, for the three-yearly periodic review.
7. For customers with LSE: <ul style="list-style-type: none">a. Allow triennial reconfirmation from a general practitioner that a person in the Perth metropolitan area continues to require LSE.b. Remove the requirement of annual confirmation for nursing homes and similar facilities and require these customers to confirm every three years that LSE is still in use.
8. Where multiple persons require LSE at one supply address, clarify the licensee is only obligated to notify the customer or other nominated person.
9. Amend family violence protections to: <ul style="list-style-type: none">a. Exempt a retailer from providing the nine-month disconnection protection to a customer when the customer expressly declines the protection. The retailer must obtain the customer's verifiable and informed consent.b. Require a retailer to confirm a customer's status with either the customer or authorised contact, once they 'become aware' that the customer is experiencing family violence, and to use 'reasonable endeavours' to do so.
10. Increase the service standard payment amounts by CPI since 2010.
11. Update the complaint acknowledgement processes (for example, times, service payments) to reflect the new Australian Standards (AS/NZS).
12. For pre-payment meter customers, remove the requirement to proactively provide information about financial assistance to customers who frequently disconnect.
13. Update the Code for minor amendments.

Appendix 3 Healthcare terminology and access

Terms used

To meet the intent of the ECCC's recommendations and provide clarity to LSE users, we propose to clarify the differences between a "medical practitioner" and a "healthcare practitioner" to cl. 82 and cl. 85.

A "medical practitioner" is a doctor, or more precisely, an individual who is qualified and registered with the Medical Board of Australia. A specialist medical practitioner has undertaken further qualifications and registration with their professional body which includes specialist general practitioners.

"Healthcare practitioner" covers a broader range of individuals who hold qualifications in a health-related field and who are registered by their professional body. Examples include individuals practicing as a nurse, pharmacist, or physiotherapist.

In summary:

- A doctor is a medical practitioner AND a healthcare practitioner.
- A physiotherapist is a healthcare practitioner but NOT a medical practitioner.

Accessibility across Western Australia

The general practitioners' full time equivalent (GPFTE) provides a measure of accessibility to primary healthcare.¹¹ One GPFTE equates to 40 hours per week for 46 weeks per year. In Australia in 2023-24, the GPFTE per 100,000 people was 131.0. The GPFTE ratio for a range of modelled areas is presented in Table 5.¹²

Table 5 GPFTE per 100,000 people in Western Australia 2023-24

Modelled areas	GPFTE per 100,000
All of Western Australia	95.4
Metropolitan centres	97.5
Regional centres	110.2
Large rural towns	108.3
Medium rural towns	100.9
Small rural towns	75.2
Remote communities	58.4
Very remote communities	60.1

¹¹ Australian Government, February 2023, Method Paper: GPFTE – Workforce, ([online](#)), [accessed 27 March 2025].

¹² Australian Government, December 2024, Primary Care GP statistics by financial year, ([online](#)), [accessed 27 March 2025].

FINANCIAL ACCESSIBILITY

A survey and report by the Health Consumers Forum of Australia in 2019 identified financial barriers due to high out-of-pocket costs for specialist medical practitioners, especially for:

- Those on low incomes, reduced incomes, or with chronic conditions.
- People in different geographical areas, with a wide variation of fees and costs including the gap between fees charged in the city compared to the country.
- People treated in the community rather than a hospital setting.

Additionally, Table 6 shows Western Australians are far more likely to incur out-of-pocket costs compared to other States in Australia, and those costs are significantly higher.^{13 14}

Table 6 Comparison of specialist fees and costs in some jurisdictions in 2019

	NSW	VIC	QLD	WA
Consultations with no out-of-pocket costs (%)	23	26	32	8
Typical fees (general specialist practitioner) (\$)	200	250	200	273
Typically paid by patient out-of-pocket (\$)	122	172	122	195

¹³ Health Consumer Forum of Australia, Out-of-pocket Pain Report, ([online](#)), [accessed 19 March 2025].

¹⁴ Consumers Health Forum, 8 February 2019, Specialist Fees and Performance Transparency – Potential for Improvement, ([online](#)), [accessed 27 March 2025].