

May 1, 2007

VIA OVERNIGHT DELIVERY

Mr. Sean Gallagher Director - Energy Division California Public Utilities Commission 505 Van Ness Avenue San Francisco, CA 94102-3298

Re:

Southern California Edison Company's (U 338-E) Annual Progress

Report for the California Alternate Rates for Energy (CARE)

Program for the Period January - December 2006

Dear Mr. Gallagher:

Southern California Edison Company (SCE) hereby submits is Annual Progress Report for the California Alternate Rates for Energy (CARE) Program for the period January through December 2006.

If you have any questions regarding this Report, please contact SCE's Low-Income Programs Manager, Jack Parkhill at (626) 633-3056.

Very truly yours,

Stacie Schaffer

cc: Terri J. Tannehill, CPUC
Sarita Sarvate, CPUC
Hazlyn Fortune, CPUC
Jeannine Elzey, CPUC
Sarvijit Randhawa, CPUC
Michaela Pangilinan, CPUC
Zaida Amaya, CPUC
Thomas Thompson, DRA
Mariana Campbell, DRA



SOUTHERN CALIFORNIA EDISON COMPANY'S (U-338 E) ANNUAL PROGRESS REPORT FOR THE CALIFORNIA ALTERNATE RATES FOR ENERGY PROGRAM FOR THE PERIOD JANUARY - DECEMBER 2006

May 1, 2007

SOUTHERN CALIFORNIA EDISON COMPANY'S ANNUAL PROGRESS REPORT FOR CALIFORNIA ALTERNATE RATES FOR ENERGY RESIDENTIAL AND EXPANDED PROGRAMS

January 1, 2006 through December 31, 2006

CARE RESIDENTIAL PROGRAM

This section covers individual and sub-metered participants (tenants of qualifying master-meter customers).

I. Participant Information

A. Provide the total number of residential CARE customers, including submetered tenants, by month, by energy source, for the reporting period.

ANS. See Table 1.

TABLE 1							
Residential CARE Program Customers by Month ¹ (electric usage)							
2006	2006 CARE Percentage Customers Change						
January	1,000,753	2.9%					
February	1,016,316	1.6%					
March	1,029,898	1.3%					
April	April 1,028,333 -0.2						
May	1,039,720	1.1%					
June	1,044,366	0.4%					
July	1,047,882	0.3%					
August	1,053,493	0.5%					
September							
October	· ' '						
November	1,063,590	0.0%					
December	1,056,061	-0.7%					

Notes:

1. Total individually-metered and sub metered.

1. Explain any monthly variance of 5% or more in the number of participants.

ANS. No monthly variance exceeded 2.9%.

- B. Describe the methodology, sources of data, and key computations used to estimate the utility's CARE penetration rates by energy source.
 - ANS. SCE used the joint energy utility methodology adopted by the Commission in D.01-03-028 for developing quarterly penetration estimates for March, June, September, and December 2006. Current-year (2006) vendor data was used to provide household size and income information. This methodology estimates a demographic eligibility rate by county for customers, based on an income limitation of 200% of the federal poverty guideline as directed in D.05-10-044. The demographic eligibility rate is applied to (multiplied by) the total number of technically eligible customers (those having an eligible meter or sub-meter) to determine the total number of eligible households. The total number of participating households is divided by the number of eligible households to estimate the CARE penetration rate. The penetration rates for March, June, September, and December are reported in Table 2 below.
 - 1. Describe how the estimates of current demographic CARE-eligibility rates, by energy source for the pre-June 1st and post-June 1st periods, were derived.
 - ANS. The joint energy utility methodology, as described in the response to Ouestion I.B. above was used throughout 2006.
 - 2. Describe how the estimates of current CARE-eligible meters were derived. Explain how total residential meters were adjusted to reflect CARE-eligible meters (including sub-metered tenants) and CARE-ineligible meters (i.e., master meters that are not sub-metered or other residential meter configurations that do not provide residential service.)
 - ANS. See SCE's response above to Question I.B., discussing the methodology used to estimate CARE penetration rates. Based on this methodology, households that meet CARE eligibility requirements and that have an individual meter or sub-meter are included in the estimated total of CARE-eligible households. In this case, households and meters have the same meaning. No adjustment to total residential meters was made, as only residential customers on CARE-eligible rates are counted.

- 3. Discuss how the estimates of current CARE-eligible households were developed.
 - ANS. See SCE's response above to Question I.B., discussing the methodology used to estimate CARE penetration rates. Based on this methodology, households that meet CARE eligibility requirements and that have an individual meter or sub-meter are included in the estimated total of CARE-eligible households.
- 4. Describe how current CARE customers were counted.
 - ANS. Individually metered or sub-metered residential customers who are on the CARE rate are counted as CARE participating households.
- 5. Discuss how the elements above were used to derive the utility's CARE participation rates by energy source.
 - ANS. CARE-participating residential households were divided by the estimated number of CARE-eligible households to calculate a penetration rate.
- C. Provide the total number of CARE residential customers, CARE-eligible households, and CARE penetration rates, by energy source, by quarter.

ANS. See Table 2.

TABLE 2							
CARE Residential Penetration Rate Households (electric usage)							
2006 CARE Residential CARE-Eligible CARE Household Quarter Ending Households Households Penetration Rate							
March 31	1,029,898	1,329,734	77%				
June 30	1,044,366	1,339,509	78%				
September 31	1,060,474	1,350,657	79%				
December 31	1,056,061	1,354,892	78%				

- D. Provide the estimates of current demographic CARE-eligibility rates by energy source at year-end.
 - ANS. SCE estimates that approximately 32% of SCE's 4,248,869 residential customers, or 1,354,892 customers, were eligible for the CARE discount rate as of December 31, 2006.
- E. Provide the estimates of current CARE-eligible sub-metered tenants of master-metered customers by energy source at year-end.
 - ANS. SCE estimates that 38,817 sub-metered tenants were eligible for CARE at year-end 2006.
- F. Provide the current CARE sub-metered tenant counts by energy source at year-end.
 - ANS. As of December 31, 2006, there were 19,389 sub-metered tenants participating in CARE.
- G. Provide the current CARE sub-metered penetration rates by energy source at year-end.
 - ANS. As of December 31, 2006, 50% of the estimated CARE-eligible submetered tenants were participating in CARE.
- H. Discuss any problems encountered during the reporting period administering the CARE program for sub-metered tenants and/or master-meter customers.
 - ANS. Anecdotal information from customers indicates there may be reluctance on the part of some mobile home park owners and/or managers to administer CARE. SCE contacted mobile home owners and managers to confirm that addresses are correct to which materials for the annual reapplication of tenants are mailed. These materials contain information on what obligation California law places on master-metered customers with respect to offering rate options and billing to their tenants.

SCE also encounters problems administering CARE for master-metered customers with sub-metered tenants when more than one master-meter serves an apartment complex or mobile home park. The sub-metered tenant must be placed on the correct master-meter for SCE to apply the CARE discount correctly and enable landlords to pass the discount on to the correct sub-metered tenant. If SCE is provided incorrect information

on the sub-metered tenant application, delays result in placing the sub-metered tenant on CARE until the correct master-meter is determined.

Each June, SCE mails a package of material to the mobile home park owners/managers to request that they provide a current application to their sub-metered tenants in order to re-enroll all who are eligible for the program.

SCE is in the process of transitioning to direct contact with sub-metered tenants to expedite the recertification of CARE and FERA. Implementation of the change is scheduled to in effect by 12-31-07 in order to comply with AB2194. The mailing will be performed each June beginning in 2008.

II. Usage and Bill Information

A. Provide a comparison of CARE and non-CARE residential usage by tier (Baseline and Non-Baseline), excluding usage of residential master-meter customers, by energy source.

ANS. See Table 3.

	TABLE 3							
	Average Monthly Gas / Electric Usage Residential Non-CARE vs. CARE Customers ¹							
Customer ²	Customer ² Gas Therms Gas Therms Tier 1* Total							
Non-CARE	111	9	120					
CARE	17	2	19					
Customer	Electric KWh Tier 1	Electric KWh Tier 2	Total					
Non-CARE	331	290	621					
CARE	328	162	490					

Notes:

- 1. Excludes master-meter usage for both non-CARE and CARE customers.
- 2. SCE provides gas service only to customers on Santa Catalina Island.
- * Baseline
- ** Non-Baseline

B. Provide a comparison of the average monthly bill for CARE and non-CARE residential customers, excluding bills of master-meter residential customers, by energy source.

ANS. See Table 4.

TABLE 4						
Average Monthly Gas / Electric Bill Residential Non-CARE vs. CARE Customers ¹ (Dollars per Customer)						
Customer	Customer Gas ³ Electric					
Non-CARE 51.17 106.43						
CARE ²	39.38	51.41				

Notes:

- 1. Excludes master-meter usage for both non-CARE and CARE customers.
- 2. After CARE discount.
- 3. SCE provides gas service only to customers on Santa Catalina Island.

III. Program Costs

A. Discount Cost

1. State the average monthly CARE discount received, in dollars per CARE customer, by energy source.

ANS. The average discount per CARE customer was \$17.02 per month. Note: Does not include commercial care or D-CARE-E customers or their discount.

- 2. State the annual subsidy (discount) for all CARE customers by energy source.
 - ANS. The annual subsidy (discount) for all CARE Residential Program customers was \$211,318,424.82.

Note: Does not include commercial care or D-CARE-E customers or their discount.

B. Administrative Cost

1. Show the CARE Residential Program's administrative cost by category.

ANS. See Table 5. Total Program Costs for the Residential Program are 99.5% of total costs as 0.5% of the total costs have been allocated to the Expansion Program. Subsidies and Benefits are actual costs.

Table 5						
CARE P Administrative Costs by (-	nohonoo				
Category -	Category and Su	Cost				
- Cavogozi	Residential	Expansion	Total			
Outreach	\$2,331,390	\$11,716	\$2,343,106			
Processing, Certification, and Verification	\$793,347	\$3,987	\$797,334			
Information Technology /Programming	\$263,823	\$1,326	\$265,149			
Pilots – 2006 Cool Centers	\$94,525	\$475	\$95,000			
Measurement & Evaluation \$46,835 \$235						
Regulatory Compliance	\$61,472	\$309	\$61,781			
General Administration	\$517,034	\$2,598	\$519,632			
LIOB Funding	\$0	\$0	\$0			
CPUC Energy Division Staff Funding	\$87,852	\$441	\$88,293			
TOTAL PROGRAM COSTS ¹	\$4,196,278	\$21,087	\$4,217,365			
CARE Discount	\$211,318,425	\$1,045,188	\$212,363,613			
TOTAL PROGRAM COSTS & CUSTOMER DISCOUNTS	\$215,514,703	\$1,066,275	\$216,580,978			

Notes:

 Total does not include indirect costs consisting of employee pensions and benefits equal to \$406,837, which are not part of SCE's CARE administrative budget.

2. Explain what is included in each administrative cost category.

ANS. See table below.

Category	Description
Outreach	Includes: Bill inserts, advertising, applications (printing and mailing), posters, brochures, flyers, postage, sub-meter, non-profit, and agricultural housing outreach, information technology (technical support and software licensing), staff labor, out-bound dialing, 800#, outreach pilot, and Capitation Fee Project.
Processing, Certification, and Verification	Includes: Staff labor, information technology (technical support and software licensing), application processing, training, programming labor, and sub-meter certification.
Information Technology/Programming	Includes: Programming and labor costs associated with system enhancements and maintenance of existing processes.
Pilots	Includes: 2006 Cool Centers
Measurement & Evaluation	Includes: Needs assessment study and customer satisfaction survey.
Regulatory Compliance	Includes: Applications, advice filings, comments and reply comments, hearings, reports and studies, working group meetings, public input meetings, and tariff revisions.
General Administration	Includes: Office supplies, market research, program management labor (including pensions and benefits), and information technology (technical support and software licensing).
LIOB Funding	Includes: Low Income Oversight Board (LIOB) reimbursed expenditures.
CPUC Energy Division Staff Funding	Includes: CPUC Energy Division Staff expenditures.
Subsidies and Benefits	Includes: Rate discounts.

C. Provide the year-end December 31 balance for the CARE balancing account.

ANS. In D.02-09-021, the Commission required SCE to establish the CARE balancing account (CBA), effective January 1, 2002. The balance in the CBA as of December 31, 2006 was \$3.6 million.

D. Describe which cost categories are recorded to the CARE balancing account and which are included in base rates.

ANS. SCE does not recover CARE-related costs in base rates. In D.97-08-056, the Commission allocated SCE's administration costs associated with the CARE Program to SCE's Public Purpose Programs rate component. D.02-09-021 required SCE to establish a CARE balancing account to record the following on a monthly basis: (1) CBA-related revenue, (2) the difference between CARE discounts provided to CARE-eligible customers and CARE surcharges billed to non-CARE customers, (3) the difference between the authorized CARE administration amounts and actual incurred CARE administration expenses, (4) costs associated with the CARE automatic enrollment program, and (5) costs associated with the Energy Division's audit of the CBA.

E. Provide a table showing, by customer class, the CARE surcharge paid, the average bill paid, the percentage of CARE surcharge paid relative to the average bill, the total CARE surcharge collected, and the percentage of total CARE revenues paid.

ANS. See Table 6.

TABLE 6									
	CARE Surcharge and Revenue Collected by Customer Class								
Customer Class	Average Monthly CARE Surcharge	Percentage of Total Annual CARE Surcharge Revenue Collected ²							
Residential	\$5,419,345	\$395,265,52 2	1.4%	\$65,032,137	30.0%				
Commercial	\$9,114,872	\$445,483,35 1	2.0%	\$109,378,461	50.5%				
Industrial	\$2,034,990	\$81,797,678	2.5%	\$24,419,874	11.3%				
Agricultural	\$252,965	\$11,978,135	2.1%	\$3,035,586	1.4%				
Public Authority	\$1,221,962	\$54,771,733	2.2%	\$14,663,541	6.8%				
Railroads	\$14,216	\$729,526	1.9%	\$170,595	0.1%				
Interdepartment ¹	\$0	\$31,677	0.0%	\$0	0.0%				
Totals	\$18,058,34 9	\$990,057,62 2	1.8%	\$216,700,193	100.0%				

Notes:

- 1. SCE operations.
- 2. Revenue billed.

IV. Outreach

- A. Discuss utility outreach activities and those undertaken by third parties on the utility's behalf.
 - ANS. SCE's goal is to enroll as many eligible customers who are willing to participate on CARE. CARE enrollment increased from 972,488 on December 31, 2005, to 1,056,061 on December 31, 2006 which represents a net gain of 83,573.

The following provides an overview of SCE's outreach initiatives.

• SCE's Consumer Affairs organization administers the Energy Assistance Fund (EAF) which provided assistance to customers with paying energy bills. Applicants are enrolled in CARE when they enroll

in EAF. As part of the Partners for Hope Program, Consumer Affairs trains local hospital staff and social service agencies to assist low-income customers to complete CARE applications. In addition, Consumer Affairs has partnered with the American Red Cross to distribute CARE program information to senior residents participating in local "Meals on Wheels" programs.

- SCE's CARE Capitation Fee Project, established under SBX1 5 Rapid Deployment, continued using outside organizations to assist customers in completing a CARE application. 2,014 customers were enrolled through this effort and SCE paid out \$24,092 in incentives to a total of 53 participating organizations.
- Contractors who perform Energy Management Assistance (EMA) assessment services complete an application that includes enrollment in CARE, if qualified. 2,371 customers were enrolled through this effort.
- SCE's Credit and Collections organization referred customers with a "senior" or "disabled" profile to our Consumer Affairs organization prior to disconnection for nonpayment. As a part of this follow-up, Consumer Affairs provides these customers information on enrolling in CARE as part of a plan to reduce electric bills.
- SCE's Public Affairs worked extensively with community based organizations, city councils and staff, chambers of commerce, small businesses, senior centers, and legislative offices. Public Affairs effectively promoted the CARE Capitation Fee Project to organizations through community group presentations. Public Affairs also successfully organized exhibit booths at numerous gatherings (e.g., shows, festivals, etc.) and mobilized volunteers, including bilingual-speaking volunteers, for ethnic-specific (hard-to-reach communities) activities.
- SCE's Equal Opportunity/Supplier Diversity department was very effective in promoting CARE to faith-based and non-profit organizations and getting these entities to participate in enrollment events.
- Customers were made aware of the CARE program when calling in to SCE's phone centers.

- Customers are able to obtain CARE information and download a CARE application they can mail in from SCE's website sce.com.
- CARE information was provided at authorized bill payment agencies which can be frequented by potential CARE-eligible customers.
- Quarterly bill messages informed customers about the availability of CARE.
- In June, two months prior to its high demand season, SCE conducted its annual solicitation for CARE participation by mailing a CARE application to all non-CARE residential customers with their electric bills.
- SCE's success in enrolling its customers on CARE continues to be greatly enhanced by the efforts of employee affinity group volunteers who specifically support community events and promote CARE.
- SCE conducted marketing to increase awareness and enrollment of the CARE program as described below:

Marketing

Multilingual media outreach for the CARE Program generated newspaper readership, television viewership, and a radio listening audience of more than 8.7 million people. A media release developed by SCE entitled "SCE Calls on Remaining Eligible Low-Income Customers to Enroll in Program Offering Discount Electricity Rates" resulted in 34 media placements reaching African American, Chinese, Filipino, Korean, Middle Eastern, Vietnamese, and Hispanic communities. Coverage to SCE-territory communities included the Eastern (Riverside County), Metro (Los Angeles County), Southern (Orange County) and Northern (Oxnard) regions. The release, which was written in English, Chinese, Korean, Vietnamese, Cambodian and Spanish, included statistics for eligible customers, conveying that there were many customers who had not taken advantage of the CARE Program.

Ethnic media outlets are continually interested in providing information to their audiences that raise awareness about money-saving programs. Not surprisingly, programs such as CARE garner significant media attention because it provides a tangible benefit to their audiences.

Currently SCE provides the CARE enrollment application in Spanish, Chinese, Vietnamese, Korean and Cambodian languages. Additionally, to encourage recertification and continued receipt of the discounted rate, efforts are continually

made to provide re-certification notices and other communications to these customers in the same language in which their applications were completed.

Earned Media (PR and Outreach):

Hispanic Community

Information about the CARE Program was conveyed in 8 Hispanic publications throughout SCE territory; Also, these publications placed stories on their Web sites reaching an estimated readership of more than 4,287,500.

African-American Community

Black Voice News provided the African-American community with information about the CARE Program, reaching an estimated readership of more than 45,000.

<u>Asian-American (Cambodian, Filipino, Indian, Pakistani, Vietnamese) and Middle Eastern Communities</u>

From September through November 2006, Asian (Cambodian, Filipino, Indian, Pakistani, and Vietnamese) and Middle Eastern (Arab and Iranian) readers of such publications as India Journal, Javanan International, Pakistan Link, Nguoi Viet Daily, Arab American Business Magazine, Angkor Borei News, and Filipinas Magazine were provided information about the CARE Program, reaching an estimated readership of more than 1,275,840.

TV

Hispanic Community

Television stations KUNA-TV and KVER-TV in Palm Desert included the media release on both their 6:00 p.m. and 11:00 p.m. newscasts on July 6, reaching audiences of up to 1,260,000. Additionally KAZA TV Azteca reached 770,000.

African-American Communities

Cable television station airing "The Wright Place" and "Inside the Inland Valley" in the Eastern region covered the media release, conveying the information about SCE's CARE Program. Additionally CNN Headline News broadcasts to all regions and reported on CARE. Through all three stations, the CARE message reached more than 1,130,000 of their viewers.

Radio

Hispanic Community

SCE's CARE Program was included in programming on radio stations, KUNA Telemundo Network –Palm Desert and Radio Campesina - Fresno in July and December reaching audiences up to 3,997,000.

African American Market

Radio station KTYM's radio show "On the Positive Side" included information about the CARE Program in September, November and December.

Paid Media (Advertising):

Between December 2006 and March 2007, SCE launched an advertising campaign to promote CARE to Hispanic, Asian (Chinese, Korean and Vietnamese) and African American audiences.

Hispanic:

SCE's campaign utilized radio and print advertising. Specifically, radio ads aired over a three week period on KLVE/KSCA and print ads (including free standing CARE applications) were inserted in La Opinion during back-to-back weeks in March.

Asian:

SCE's campaign utilized radio, running advertisements on Chinese stations KAZN, KWRM, KUSC and KMRB; Korean stations KIAP and KHZ and Vietnamese stations KALI, KNAR, KALI and VNCR.

African American:

SCE's campaign utilized radio and print, featuring advertisements on radio stations KJLH and KDAY and in print outlets ACC Church News, the LA Watts Times, California Crusader, LA Sentinel, Black Voice News, Our Weekly, and the Compton Bulletin

Direct Mail

General Market

In 2006, SCE's goal was to develop outreach campaigns that would take advantage of a variety of channels using a coordinated mix of communications vehicles that would deliver the most effective and efficient outreach across our culturally diverse service territory. These efforts, described in greater detail below, included targeted bilingual direct mail efforts in April, July and November, bilingual CARE applications included in SCE's New Residential Customer Welcome Kit, a shared mailer program, a new recertification program, and inclusion of bilingual CARE applications.

April 2006 brought the first direct solicitation to enroll new CARE customers to SCE. Approximately 275,000 bilingual (English and Spanish) direct mail pieces were sent to targeted customers in SCE's low-penetration ZIP codes, where there was a high low-income population, but a low enrollment rate. These "hard to reach" areas typically have an expected lower response rate, but SCE continues to market to them to encourage enrollment in the program. Through December 31, 4,718 applications were returned – a moderate 1.72% response rate, which would be expected from this audience. More than 3,800 new customers (81% conversion rate) were enrolled in the CARE Program.

In July, the second CARE enrollment direct mail offer was sent to approximately 300,000 income-qualified customers in the warm climate areas. With the extreme heat that Southern California faced, and the accompanying high bills, SCE targeted these customers to encourage them to enroll in the CARE program to receive the 20% or more discount. More than 17,000 customers responded to this offer (5.67% response rate), with 13,390 new CARE customers (79% conversion rate) enrolled in the program.

The final acquisition mailing was sent at the end of 2006. In November, approximately 250,000 bilingual letters and accompanying applications were sent to income-qualified customers who did not receive a CARE solicitation in April or July. Through the end of 2006, applications continued to be received from this effort.

In addition to the final acquisition mailing, approximately 25,000 customers who dropped from the CARE rate between April 30, 2006 and September 30, 2006 due to non-response to multiple recertification requests were sent a solicitation encouraging them to re-enroll in the program. Through February 2007, more than 4,100 applications were received, and over 2,100 have been enrolled in the CARE program.

CARE applications are also distributed to new or transferring SCE customers through the Residential Welcome Kit In 2006, 41,900 new customers were enrolled in the CARE Program as a result of the welcome kit.

In addition to the annual solicitation CARE application bill insert that is included in June, outreach efforts continued through the "shared-mailer". This outreach was a zip-code targeted mailer that included money-saving coupons from a variety of area companies, organizations, and restaurants. In August and September, 2 million CARE enrollment applications were included into the ValPak shared mailer in continuing efforts to raise awareness and outreach for prospective CARE

customers. Through these two efforts, over 31,000 customers have been enrolled in the CARE Program.

In September, SCE produced the Low Income Savings Kit. This bilingual (English/Spanish) direct mail packet, similar to the Winter Savings Kit developed for the 2005 Winter Initiative, included a personalized letter providing information about ways that SCE can help lower their energy bills, and a comprehensive brochure describing each of the programs, Energy Management Assistance, CARE/FERA, Level Pay Plan, Energy Assistance Fund, and Medical Baseline, with a direct phone number for customers to call for more information. These kits were mailed to approximately 1.6 million residential customers, including all CARE/FERA customers, with a household income of \$50,000 or less. For approximately 625,000 income-qualified customers identified as non-CARE/FERA, an application to enroll in the program was also included in their Savings Kit.

SCE's recertification efforts in 2006 included (1) mailing recertification letters and pre-filled applications one month prior to their 2-year CARE anniversary date; (2) mailing letters and applications to customers who fell off the CARE rate in 2006 due to failure to respond to previous recertification communications; (3) mailing Spanish recertification letters who were enrolled through a Spanish-only application; (4) recertification by phone using an automated voice-response unit; and (5) telephone operator-assisted enrollment and recertification.

Overall response rates to customer solicitations remain strong. Direct mail efforts targeted to customers most likely to qualify for CARE resulted in a 2.5% response rate and a conversion rate of approximately 76%, enrolling 24,000 new CARE customers. Non-targeted communications enrolled 31,355 new CARE customers into the program.

B. Discuss each of the following:

- 1. Most effective outreach method, including a discussion of how success is measured.
 - ANS. Using the percentage of approved applications by volume from various outreach methods, SCE considers two outreach methods to be about equally effective: Call Center requests for applications and direct mail, which includes the annual solicitation as well as targeted mailings based on demographics and under-penetrated geographic areas.

 Although some of the data exchanges produce a higher percentage approved applications, the volumes is quite small in comparison, and,

therefore, are not considered most effective. Results are shown in the following table:

Comparison of Enrollment Percent between SCE and Third Parties							
Enrollment Activity Received Approved							
SCE							
SCE Call Center Requests	163,127	109,681	67%				
SCE Direct Mail	169,646	117,878	69%				
PG&E Data Exchange	397	304	77%				
SWG Data Exchange	1,485	1,386	93%				
SoCalGas Data Exchange	86,804	34,193	39%				
DCSD Automatic Enrollment ²	0	0	0				
Third Parties							
Capitation Fee Project EMA Contractors	3,409 2,550	2,014 2,371	59% 93%				

Notes:

1. For PG&E, SWG, and DCSD, "Received" counts are those records that were active customer account matches with SCE's database after "scrubbing" all records received for non-matches, closed accounts, ineligible rates, and existing accounts on CARE.

For SoCalGas, "Received" counts are those records that were active customer account matches with SCE's database after "scrubbing" all records received for non-matches, closed accounts, and ineligible rates. However, existing accounts on CARE are included in the "Received" count because these accounts are automatically recertified in the data exchange.

- 2. No records from DCSD were received in 2006
- 2. How CARE customer data and other relevant program information is shared by the utility with other utilities sharing its service territory.
 - ANS. SCE continued collaborating with Southern California Gas Company and Southwest Gas Company to electronically share CARE participant data to assist customers to enroll in each utility's program. In 2006, 34,193 and 1,386 customers were added to SCE's CARE rate through the SoCalGas and Southwest Gas exchanges, respectively. The electronic data exchange with PG&E garnered 304 enrollments in 2006

- 3. How CARE customer data and other relevant program information is shared within the utility, for example, between its LIEE and other appropriate low-income programs.
 - ANS. Contractors who perform LIEE (for SCE, this is known as EMA) assessment services complete an application that includes enrollment in CARE, if qualified. In 2006, 2,371 customers were enrolled through this effort.
- 4. Attach a copy of the utility's agreement with CSD. Describe the process for cross-referral of low-income customers between the utility and CSD. Describe how the utility's CARE customer discount information is provided to CSD for inclusion in its federal funds leveraging application.
 - ANS. A copy of SCE's ongoing agreement with CSD was filed in 2001 with SCE's 2000 CARE Annual Report. SCE includes the following language on its individually-metered customer CARE application for cross-referral of low-income customers to CSD:
 - "Other Programs and Services You May Qualify For: LIHEAP (Low Income Home Energy Assistance Program) provides bill payment assistance, emergency bill assistance, and weatherization services. Call the Department of Community Services and Development at 1-800-433-4327 for more information. For other Edison assistance programs, call 1-800-736-4777."

SCE's agreement with CSD provides that, upon request by CSD, SCE will provide CSD (1) the total number of households receiving CARE and Energy Assistance Fund (EAF) assistance and (2) the total dollar amount of CARE and EAF assistance received by all participating households from October of the previous year through September of the current year. This information is to be provided to CSD for inclusion in its federal funds leveraging application.

- 5. Discuss barriers to participation encountered during the reporting period and steps taken to mitigate them.
 - ANS. Although no formal study has been conducted by SCE to identify barriers to participation, it is believed, through anecdotal information and experience that some barriers to participation do exist. These include lack of knowledge about the availability of CARE, language and cultural barriers, geographical barriers to reach potentially-eligible customers, and a certain segment of the eligible population that does not wish to participate.

As described in this report, SCE uses a multifaceted outreach approach to reaching its potentially CARE-eligible customers and believes it continues to make progress in overcoming barriers to enrollment. As described elsewhere in this report, CARE marketing and correspondence has been designed to reach increasing numbers of ethnicities and under-penetrated geographic areas. And process improvements, such as the use of telephonic contacts to make it easier to enroll and recertify work toward eliminating barriers.

It is expected that there will be a better understanding of the reasons some individuals are not willing to participate in CARE when the results of the statewide low-income needs assessment, conducted by the CPUC, are finalized.

C. Discuss any recommendations to improve cost-effectiveness, processing of applications, or program delivery. Discuss methods investigated or implemented by the utility or third parties under contract to the utility to improve outreach and enrollment services to non-participating households in the prior year. Provide cost-effectiveness assessments, if available.

ANS. SCE implemented the following improvements in 2006:

- SCE enhanced its Source Code tracking system for incoming applications by adding 20 new source codes. This expands SCE's capability to track the sources of applications.
- SCE initiated a new process in December 2006 whereby duplicate applications received for existing CARE customers serve as a recertification for that customer.
- SCE's internal verification reports were enhanced to break out the number of verifications by type, ie. random, for cause, and by usage.

- In 2005, when a customer closed an SCE CARE account, the CARE status would follow that customer as long as another SCE account was established within 30 days. This process has been enhanced so that the CARE account status follows the customers for up to 90 days.
- SCE implemented its new Recertification Sign and Mail Application in June 2006 which streamlined the recertification process for existing CARE customers.
- SCE implemented providing the key recertification and verification letters provided to CARE customers in the Asian Languages supported by SCE, ie. Chinese, Vietnamese, Korean, and Cambodian. This was an enhancement to the existing English and Spanish letters already provided for recertification and verification letters. Now, these letters are provided in all the languages supported by SCE.
- SCE implemented providing large font CARE applications online in all languages supported by SCE.
- As part of the Winter Initiative, SCE initiated a telephone representative-assisted enrollment and recertification process. A number of customers submitted signed new CARE applications or recertification applications with missing income and/or number in household information. These customers are contacted by a SCE representative via telephone, and are given the option of providing the missing information to the SCE representative over the phone in order to complete the application process. SCE continues to offer this service. In 2006, information was successfully collected for 7,396 enrollments or recertifications.
- Also as part of the Winter Initiative, SCE implemented a process by
 which a customer can call into a Voice Response Unit (VRU) in order
 to respond to recertification request for CARE, instead of having to
 complete and mail to SCE a recertification application. SCE continues
 to offer this VRU option. In 2006, a total of 13,824 recertifications
 were automatically processed by the VRU.
- SCE implemented the capability to personalize the outgoing recertification forms with each CARE customer's name, service address and service account number, along with a bar-code encoding the service account and a transaction code. Previous targeted outreach efforts have shown that personalization increases response rate. Bar-

coding has decreased the amount of time it takes to process a recertification. In addition, scanning of the barcodes immediately upon receipt from the post office has enabled SCE to inform inquiring customers if and when their recertification forms have been received.

V. Processing CARE Applications

- A. Processing Self-Certification and Self-Recertification Applications (individual and sub-metered customers)
 - 1. Provide the total number of third-party CARE applications received, approved, denied, pending/never completed, or duplicates in the reporting period)
 - ANS. See Table 7 for the results of the CARE Capitation Fee Project. Entities participating in this Project are not listed if they submitted no applications in 2006.

TABLE 7							
CARE Capitation Fee Project							
		CAI	RE Applicati	ons Submitted			
Entity	Receive	d ¹ Ap	proved D		g/Never Duplicate oleted ² s		
ACCESS CALIFORNIA SERVICES	4	3	0	0	· 1		
APAC SERVICE CENTER	374	276	13	0	85		
ASIAN AMERICAN RESOURCE CENTER	. 7	3	2	0	2		
ASIAN PAC. HLTH CARE VENTURE	3	2	0	0	1		
ATLANTIC COMM ECON DEV CORP	14	7	0	0	7		
BALDWIN PARK CHAMB OF COMMERCE	2	2	0.	0	0		
BOYS&GIRLS CLUB OF SAN GABRIEL	1	1	0	0	0		
CAP OF SAN BERNARDINO CTY	1152	779	67	0	306		
CATHOLIC CHARITIES OF LA INC	, 82	25	14	0	43		
CATHOLIC CHARITIES OF OC	9	6	1	0	2		
COMM ACTION PARTNERSHIP OF OC	253	180	19	0	54		
COMMISSION ON HUMAN CONCERNS	20	15	0	0	5		
COMMUNITY ENHANCEMENT SVCS	1	0	0	0	1		
COMMUNITY PANTRY	42	16	5	0	21		
CRISIS MINISTRY CHURCH OF VLY	13	9	2	0	2		
DISABLED RESOURCES CTR, INC	2	2	0	0	0		
ECCLESIAS ECON-COMM DEV COLLAB	49	11	38	0	0		
EL CONCILIO DEL CONDADO	3	0	0	0	3		
HOSANNA COMMUNITY CHURCH	95	32	16	0	47		
HOUSING WITH HEART INC	29	7	2	0	20		
HUMAN SERVICES ASSOCIATION	1	0	0	0	1		
KINGS CO HOUSING AUTHORITY	6	3	1	0	2		
KINGS CTY COMMISSION ON AGING	2	0	0	0	2		
KNIGHTS OF COLUMBUS - 12834	206	65	11	. 0	130		
LITTLE TOKYO SERVICE CENTER	1	1	0	0	0		
LONG BCH CONSULTING GROUP	3	2	1	0	0		
LUTHERAN SOCIAL SVCS OF SO CA	65	21	9	0	35		
MEALS ON WHEELS WEST	2	0	1	0	1		
MOORPARK SENIOR CITIZENS INC	1	1	0	0	0		
NEW HOPE VILLAGE, INC	1	1	0	0	0		
OCCC, INC.	22	14	5	. 0	` 3		
OPERATION GRACE	9	2	2	0	5		
OUR LADY OF HOPE CATH COMM INC	10	1	1	0	8		
PACIFIC ASIAN CONSORTIUM EMPLOY	1	1	0	0	0		
PEOPLE FOR PEOPLE	1	0	0	0	1		
PROTEUS, INC.	153	95	14	0	44		

TABLE 7							
CARE Capitation Fee Project							
		CAI	RE Applica	tions Su		_	
Entity	Receive	d ¹ Ap	proved	Denied	Pending Comp	/Never Duplicate leted ² s	
REACH OUT 29	3	2			0	0	
RIVERSIDE DEPT COMM ACTION	194	97	4()	0	57	
RSVP OF SOUTH BAY	1	0	()	0	1	
SAN GABRIEL MISSION	52	22		3	0	27	
SANTA CLARITA VLY COMM AGING	1	. 0	()	0	1	
SO. ANTELOPE VLY EMERGENCY SVC	46	22	15	5	0	9	
ST FRANCIS MEDICAL CTR HLTH	4	2	()	0	. 2	
ST JOSEPH CHURCH	2	1	()	0	1	
ST POLYCORP FAMILY SUPPORT CTR	2	0			0	1	
STA BARBARA NGHBORHD CLINICS	1	1	()	0	0	
TODEC LEGAL CENTER, INC.	1	0	() [0	1	
TRI CITY MENTAL HEALTH CENTER	1	0]		0	0	
VENTURA CITY HOUSING AUTHORITY	1	0	(0	. 1	
VETERANS IN COMMUNITY SERVICE	455	281	49		0	125	
WEST ANGELES COMM DEV CORP	2	1	(0	. 1	
WINNING OUR WORLD	1	0	1		0	. 0	
YWCA INTERVALE SENIOR SERVICES	3	2	(0	1	
Total	3,409	2,014	335		0	1,060	
Percentage	100%	59%	10%		0%	31%	

- Percentage calculation based on the total number of applications received.
 Enrollment applications are not placed in a pending/never completed status.

B. Provide the number of utility CARE self-certification and self-recertification applications provided, received, approved, denied, pending/never completed, or duplicates for the reporting period.

ANS. See Table 8.

	TABLE 8							
2 (2 (N)	CARE Self-Certification and Self-Recertification Applications ¹							
$egin{array}{ c c c c c c c c c c c c c c c c c c c$								
Self Certification ²	4,329,520	431,637	270,999	59,012	0	101,626		
Recertification	333,923	247,305	245,508	59,306	29,109	0		
Total	4,663,443	678,942	516,507	118,318	29,109	101,626		
Percentage	Note5 .	100%	76%	17%	4%	15%		

Notes:

- 1. Includes sub-metered customers.
- 2. Includes number of applications SCE provided for all direct mailing campaigns, customer calls made to the call center, and other outreach methods. Because there are other means by which customers obtain applications which are not counted, this number is only an approximation.
- 3. Includes customers who no longer qualified for the program and those that dropped due to non-response.
- 4. Includes cancelled recertification requests and closed accounts.
- 5. Percentage calculations are based on the total number of applications received.

3. Provide a table showing the number of customers removed from CARE by month due to the recertification process.

ANS. See Table 9.

TABLE 9							
]	Residential CARE Program Customers ¹ Removed by Month through Recertification and Post-Enrollment Verification						
2006 Recertification Post-Enrollment Verification Total							
January	175	9	184				
February	261	13	274				
March	161	16	177				
April	105	506	611				
May	186	610	796				
June	4,626	605	5,231				
July	6,141	560	6,701				
August	21,489	679	22,168				
September	6,562	618	7,180				
October	7,						
November							
December	7,785	7	7,792				
Total	59,306	4,162	63,468				

Notes:

- 1 Total individually-metered and sub-metered.
- 4. Describe the utility's process for recertifying sub-metered tenants of master-meter customers.
 - ANS. Annually, SCE mails a package of sub-metered tenant CARE applications to master-meter customers to distribute to their sub-metered tenants to recertify (reapply) for CARE. The master-metered customer is responsible for providing account and master-meter information to permit sub-metered tenants to complete the CARE application to mail to SCE.
- **B.** Processing Random Post-Enrollment Verification Applications
 - 1. Provide the total number of applications mailed, received, approved, denied, pending/never completed, or duplicates, for the reporting period.

ANS. See Table 10.

TABLE 10						
CARE Random Post-Enrollment Verification Applications						
	Mailed	Received	Approved	Denied ²	Pending/Never Completed ³	Duplicates
Total ¹	8,707	1,480	1,317	4,162	3,228	0
Percentage ⁴	100%	17%	15%	48%	37%	0%

Notes:

- 1. Sum of "Received," "Approved", "Denied", and "Pending/Never Completed" is greater than total "Mailed" due to verification requests initiated in 2005 which were received and processed in 2006.
- 2. "Denied" includes customers who no longer qualified for the program and those who were dropped due to nonresponse.
- 3. Includes cancelled verification requests and closed accounts
- 4. Percentage calculation based on verifications mailed (requested).
- 2. Provide a table showing the number of customers removed from CARE by month due to the verification process.

ANS. See Table 9 in V.A.3. above.

- C. Describe any contracts the utility has with third parties to conduct certification, recertification and/or verification on the utility's behalf. Describe how these third-party efforts compare to the utility's efforts in comparable customer segments, such as hard-to-reach or under-served. Include comparisons of effectiveness and cost-effectiveness of comparable customer segments, if available.
 - ANS. SCE has agreements under the CARE Capitation Fee Project (Project) to conduct certification of new applicants for CARE. SCE did not have any contracts with third parties to conduct recertification and/or verification on its behalf.

The Project was authorized by the CPUC in Decision 01-05-033, dated May 7, 2001. Its purpose is to take advantage of the opportunity to enroll eligible customers in CARE while they are receiving other services from entities that assist low-income clients. This Project is centered on providing outreach and enrollment services, not recertification or verification services.

Under the Project, SCE pays a capitation fee to entities for each new customer they help to enroll in SCE's CARE program. The capitation fee

is to reimburse entities for the incremental amount associated with assisting customers in completing an SCE CARE application, generally while the customer is receiving other low-income services and/or information from that entity.

In 2006, 53 organizations submitted applications to SCE that were approved, the results of which are presented in Table 7.

Comparison of Efforts, Cost, and Effectiveness between Utility and Third Parties

SCE's outreach methods are described in V.A. above, and all are considered effective in their own way because each uniquely reaches SCE's customers and results in enrollments in CARE. Third-party outreach and enrollments for SCE occur primarily through organizations participating in the Capitation Fee Project and Energy Management Assistance (EMA) contractors. The Project was intended to provide valuable outreach services for the CARE program by assisting clients in filling out CARE applications as an adjunct to the organization's other daily activities.

As an improvement over the 2005 process of EMA assessment services completing an application with customers who are eligible for CARE, SCE currently automatically enrolls customers who have received an EMA service onto CARE.

SCE can make a comparison of outreach cost per enrollment. The following table shows that SCE's enrollment cost is about 20% of that for the Capitation Fee Project.

Comparison of Cost per Enrollment between SCE and Third Parties						
	Enrolled	Outreach Cost	Cost per Enrollment			
SCE	268,985	\$2,257,164	\$8.39			
Capitation Fee Project ¹	2,014	85,942	\$42.67			

Notes:

- 1. Includes all costs including capitation fees.
- 2. Does not include enrollments from EMA contractors as they do not have an unbundled fee for a CARE enrollment.

In addition, SCE can make a comparison to effectiveness. The following table compares the approval percentages among SCE enrollment activities and the third-party Capitation Fee Project/EMA contractors. Here, SCE enrollment activities generally generate higher volumes of enrollment.

The approval percentage for capitation activity is lower than that for enrollment through EMA due to the fact that many of the applications received via capitation agencies have been duplicate applications. However, in December 2006, SCE implemented a new process whereby the duplicate applications received via the capitation agencies are used to recertify existing customers' eligibility for the CARE rate.

Within the process of automatically enrolling EMA customers onto CARE, any existing CARE customers on the EMA participant list are scrubbed from the list prior to submitting the list for enrollment processing. Because existing participants are scrubbed from the enrollment file prior to enrollment processing, those customers selected from the EMA participant list have a high probability of becoming a new CARE enrollment. Subsequently, EMA's enrollment percentage is higher than that of third parties.

In addition, SCE can make a comparison to effectiveness. The following table compares the approval percentages among SCE enrollment activities and the third-party Capitation Fee Project/EMA contractors. Here, SCE enrollment activities generally generate higher volumes of enrollment and higher approval rates.

Comparison of Enrollment Percent between SCE and Third Parties						
Enrollment Activity	Received ¹	Approved	Percent			
SCE						
SCE Call Center Requests	163,157	109,681	67%			
SCE Direct Mail	169,646	117,878	69%			
PG&E Data Exchange	397	304	77%			
SWG Data Exchange	1,485	1,386	93%			
SoCalGas Data Exchange	86,804	34,193	39%			
DCSD Automatic Enrollment ²	0	0	0%			
Third Parties						
Capitation Fee Project	3,409	2,014	59%			
EMA Contractors	163,157	109,681	67%			

1. For PG&E, SWG, and DCSD "Received" counts are those records that were active customer account matches with SCE's database after "scrubbing" all records received for non-matches, closed accounts, ineligible rates, and existing accounts on CARE.

2. For SoCalGas, "Received" count are those records that were active customer account matches with SCE's database after "scrubbing" all records received for non-matches, closed accounts, and ineligible rates. However, existing accounts on CARE are included in order to use these to automatically recertify these accounts for participation.

VI. Program Management

A. Discuss issues and/or events that significantly affected program management in the reporting period and how these were addressed.

ANS.

- SCE provides electric, gas, and water services to customers on Santa Catalina Island. In 2006, a CARE rate was established for gas customers. A communications plan was implemented. Customers already on electric-CARE were sent a letter informing them that they would be placed on gas-CARE automatically. Electric customers with gas service not on CARE were sent a letter informing them about CARE and provided an application to enroll for both electric and gas simultaneously. Gas-only customers were sent a letter and an application to enroll for gas-CARE.
- In Decision 05-10-044, dated October 27, 2005, the CPUC formalized input taken from utilities and interested parties to address the impact of anticipated increases in natural gas prices on the low-income population and the means to assist these customers during the winter period between November 1, 2005 and April 30, 2006. This effort was identified as the "Winter Initiative". SCE implemented several processes to assist its customers during the this period. The CARE processes developed were (1) allowing customers to recertify their CARE eligibility by calling in to a Voice Response Unit (VRU); (2) allowing customers submitting signed, but incomplete (missing information) applications to provide the needed information to compete them over the phone; and (3) suspending CARE customers from being removed from the rate for failing to respond to a recertification and/or verification request. In addition, Decision 05-10-044, increased the CARE income guidelines from 175% to 200% of Federal Poverty Guidelines on November 1, 2005, increasing the pool of customers eligible to enroll on CARE requiring the updating and reprinting of CARE applications.

Following the Winter Initiative Period, the CPUC maintained the alignment of the LIEE and CARE income guidelines, thereby making the income guideline increase to 200% of Federal Poverty Guidelines permanent.

CARE EXPANSION PROGRAM

This section covers the non-profit homeless shelters and group living facilities, migrant and farm worker housing centers, qualified privately-owned employee housing, and qualified non-profit housing for agricultural employees.

I. Participant Information

A. Provide the total number of residential and/or commercial facilities by month, by energy source for the reporting period.

ANS. See Table 11.

	TABLE 11							
	CARE Expansion Program Participating Facilities by Month							
2006 CARE Residential CARE Commercial Facilities Facilities Total								
January	331	171	502					
February	325	171	496					
March	323	174	497					
April	324	173	497					
May	326	142	468					
June	337	143 ·	480					
July	345	140	485					
August	305	116	421					
September	307	118	425					
October	305	122	427					
November	303	121	424					
December	303	123	426					

- B. State the total number of residents (excluding caregivers) for residential facilities, and for commercial facilities, by energy source, at year-end.
 - ANS. The total number of residents (excluding caregivers) at the end of 2006 was:

Residential: 11,055 Commercial: 6,671

II. Usage Information

A. Provide the average monthly usage by energy source per residential facility and per commercial facility.

ANS. See Table 12.

TABLE 12						
CARE Expansion Program Average Monthly Gas / Electric Usage ¹						
Customer	Gas Therms	Electric KWh				
Residential Facilities	N/A	956				
Commercial Facilities	N/A	12,208				

Notes:

1. Excludes master meter usage.

III. Program Costs

A. Administrative Cost

1. Show the CARE Expansion Program's administrative cost by category.

ANS. The information is provided in Table 5 above.

B. Discount Information

1. State the average annual CARE discount received per residential facility by energy source.

ANS. \$726.51 (electric usage)

2. State the average annual CARE discount received per commercial facility by energy source.

ANS. \$5,696.42 (electric usage)

IV. Outreach

- A. Discuss utility outreach activities and those undertaken by third parties on the utility's behalf.
 - ANS. Potentially-eligible customers may become aware of the CARE Expansion Program through SCE's phone centers. SCE also conducts consumer outreach public awareness initiatives which include presentations to community groups and contacts with community agencies though which customers may become aware of the Program. Organizations participating in the CARE Capitation Fee Project may assist a customer who is eligible to complete a CARE application for the Expansion Program.

B. Discuss each of the following:

- 1. Most effective outreach method, including a discussion of how success is measured.
 - Customers who would qualify under the Expansion Program, ANS. primarily group living facilities, which can be residential or commercial customers, cannot be identified using SCE's customer database to enable SCE to selectively contact them.. SCE's most effective outreach method to domestic customers is direct mailing based on demographic data. This would probably be the best method for the Expansion Program if potentially-eligible customers could be identified. Domestic customers receive information throughout the year about CARE. Therefore, if a group living facility is on a domestic rate, they would at least receive information and could inquire to enroll. If a customer operating a group living facility is a corporation, the rate would typically be commercial. To most effectively reach commercial customers, SCE would use a bill message or bill insert to provide information about CARE.
- 2. How the CARE facility data and relevant program information is shared by the utility with other utilities sharing its service territory.
 - ANS. SCE collaborates with SoCalGas, Southwest Gas, and PG&E to share CARE participant data electronically to enroll qualified customers in each utility's program. These exchanges have only matched individually-metered customers.

- 3. Barriers to participation encountered in the prior year and steps taken to mitigate these, if feasible, or not, if infeasible.
 - ANS. See SCE's response to Question IV.B.1. discussing outreach activities.
- C. Discuss any recommendations to improve the cost-effectiveness, processing of applications, or program delivery. Discuss methods investigated or implemented by the utility or third parties on the utility's behalf to improve outreach and enrollment services to non-participating facilities in the prior year. Provide cost-effectiveness assessments, if available.

ANS. See SCE's response to Question IV.B.1. discussing outreach activities.

V. Processing CARE Applications

- A. Processing Self-Certification and Self-Recertification Applications
 - 1. Provide the total number of third-party CARE Expansion program applications received, approved, denied, pending/never completed, or duplicates.

ANS. See Table 13.

2. Provide the total number of utility CARE Expansion program applications received, approved, denied, pending/never completed, or duplicates for the reporting period.

ANS. See Table 13.

Т	Δ	R	r J	FC.	1	3

CARE Expansion Program CARE Capitation Fee Project, Other Outreach, and Utility CARE Applications

Entity	Received	Approved	Denied	Pending/Never Completed	Duplicates
CARE Capitation Fee Project	0	. 0	0	0	0
Other Outreach	0	0	0	0	0
Utility	1258	428	44	0	48
Total	1258	428	44	0	48
Percentage	Note 1	82%	8%	0%	9%

Notes:

- 1. Percentage calculation based on the total of "Approved", "Denied", and "Duplicates" of 520 because the Received count includes applications that were returned to customers to complete and which were subsequently received again and processed.
- B. Describe any contracts the utility has with third parties to conduct certification, recertification and/or verification on the utility's behalf. Describe how these third-party efforts compare to the utility's efforts in comparable customer segments such as hard-to-reach or under-served. Include comparisons of effectiveness and cost-effectiveness of comparable customer segments, if available.
 - ANS. SCE did not specifically contract with third parties to outreach and enroll (certify), recertify, or verify eligibility of customers participating in the CARE Expansion Program, although Capitation Fee Project contractors may assist a customer who is eligible to complete a CARE application for the Expansion Program.

VI. Program Management

- A. Discuss issues and/or events that significantly affected program management in the reporting period, and how these were addressed.
 - ANS. There were no issues or events that significantly affected program management. As discussed in IV.B.1 above, SCE would like to have an effective means to selectively outreach to potential Expansion Program customers. It appears that a non-selective, mass notification is the most practical way to outreach.