



A Semptra Energy<sup>®</sup> company

**BEFORE THE PUBLIC UTILITIES COMMISSION OF  
THE STATE OF CALIFORNIA**

Investigation on the Commission's	)	
own motion to comply with Senate Bill	)	I.88-07-009
987 and realign residential rates,	)	
including baseline rates, of	)	
California's energy utilities.	)	
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**FILING OF SAN DIEGO GAS & ELECTRIC COMPANY (U-902-E)  
IN COMPLIANCE WITH COMMISSION DECISIONS  
D.89-07-062 AND D.01-03-028**

**TWELFTH ANNUAL PROGRESS REPORT ON  
THE CALIFORNIA ALTERNATE RATES  
FOR ENERGY PROGRAM  
JANUARY 2000 - DECEMBER 2000**

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**May 1, 2001**

***TWELFTH ANNUAL  
CARE PROGRESS REPORT***

**Prepared by:**  
**San Diego Gas & Electric Company**  
**May 1, 2001**

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## **CARE PROGRESS REPORT RESIDENTIAL AND EXPANDED PROGRAMS**

**January 1, 2000 through December 31, 2000**

### **CARE Residential Program**

#### **Individual and Submetered Participants (Tenants of Qualifying Master-Metered 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. See Table 1.1 and 1.2.**

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

Program participation, as calculated by electric participants<sup>1</sup>, increased by 18.4% between January 1, 2000, and December 31, 2000. It is probable that this significant increase is due to multiple factors, but some of the most important are:

- Dramatic electric price increases occurred in July and August 2000. Although the rate freeze was lifted for SDG&E in 1999, electric prices did not begin to fluctuate very much until the electric supply decreased in midsummer 2000. Media attention to increasing prices included information about the CARE discount and customer requests for CARE applications almost doubled in both July and August.
- SDG&E proactively mailed letters with CARE applications to 115,000 customers in July, using socioeconomic data to determine that these customers, while not participating in CARE, were likely to qualify. Approximately 20,000 of these customers returned CARE applications.

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<sup>1</sup> SDG&E normally uses electric meters for this calculation to avoid double-counting since accounts receiving both gas and electric service are billed as a single premise.

TABLE 1.1				
Residential CARE Program				
Gas Customers by Month				
Month	Individually Metered	Submetered	Total CARE Participants	Percentage Change
Jan-00	74,620	5,706	80,326	-0.59%
Feb-00	74,401	5,770	80,171	-0.19%
Mar-00	74,326	5,886	80,212	0.05%
Apr-00	73,713	6,025	79,738	-0.59%
May-00	73,509	6,138	79,647	-0.11%
Jun-00	75,002	6,163	81,165	1.91%
Jul-00	76,387	6,344	82,731	1.93%
Aug-00	82,845	6,460	89,305	7.95%
Sep-00	85,299	6,401	91,700	2.68%
Oct-00	86,234	6,816	93,050	1.47%
Nov-00	85,744	6,953	92,697	-0.38%
Dec-00	85,283	7,136	92,419	-0.30%

TABLE 1.2				
Residential CARE Program				
Electric Customers by Month				
Month	Individually Metered	Submetered	Total CARE Participants	Percentage Change
Jan-00	123,041	5,912	128,953	4.72%
Feb-00	123,356	6,006	129,362	0.32%
Mar-00	123,725	6,119	129,844	0.37%
Apr-00	121,538	6,269	127,807	-1.57%
May-00	121,422	6,419	127,841	0.03%
Jun-00	121,352	6,452	127,804	-0.03%
Jul-00	126,386	6,698	133,084	4.13%
Aug-00	138,242	6,885	145,127	9.05%
Sep-00	139,410	6,908	146,318	0.82%
Oct-00	143,228	7,337	150,565	2.90%
Nov-00	141,435	7,470	148,905	-1.10%
Dec-00	138,068	7,696	145,764	-2.11%

**B. Describe the methodology, sources of data, and key computations used to estimate the utility's CARE penetration rates by energy source.**

- 1. Describe how the estimates of current demographic CARE-eligibility rates, by energy source for the pre-June 1<sup>st</sup> and post-June 1<sup>st</sup> periods, were derived.**

Since data for this report transitions from the original reporting criteria as defined in Decisions D.94-12-049, D.95-10-047, D.99-07-016 and Resolution E-3586, CARE-eligibility rates were calculated for the entire year (PY2000) utilizing SDG&E-specific methodology as described in the answer to Question 3 below. Beginning June 1, 2001, and reported in the Annual Report for PY2001, CARE eligibility rates will be calculated pursuant to the RRM methodology approved in D.01-03-028.

- 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 submetered tenants) and CARE-ineligible meters (i.e., master meters that are not submetered or other residential meter configurations that do not provide residential service.)**

Each month, the estimate of current CARE-eligible meters was derived from the total number of active electric and gas meters billed on residential rates, minus the number of active residential electric and gas meters billed on residential rates that are not eligible for CARE participation plus the number of electric and gas submetered residential units. Total participation rate is reported quarterly to the Energy Division for electric meters only.

- 3. Discuss how the estimates of current CARE-eligible households were developed.**

SDG&E's 1998 Home Energy Survey (MIRACLE XIII)<sup>2</sup> database was used to calculate the percentage of residential customers falling into each income level and each number-in-household level. These percentages were multiplied by the total population count to obtain the marginal distributions. Income was updated using the San Diego County Consumer Price Index. The iterative proportional fitting procedure was used for the calculation.

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<sup>2</sup> San Diego Gas & Electric 1998 Home Energy Survey (MIRACLE XIII – Marketing Information Research and Customer Load Estimates) Report.

Data sources for the estimate of eligible CARE participants were the SDG&E Customer Master File and the MIRACLE XIII database. Percentages from MIRACLE XIII were used to develop the marginal distributions. No adjustments were made to the data to account for non-response biases that may exist in the MIRACLE XIII sample, although efforts were made in the sampling methodology to minimize biases.

This calculation produces a percentage of residential customers (households) estimated to be eligible for CARE. This percentage, multiplied by the total number of CARE-eligible residential electric customers and the total number of CARE-eligible active gas customers, equals the number of estimated eligible households by energy source.

**4. Describe how current CARE customers were counted.**

Current CARE customers were counted by tallying the number of customers billed each month on the CARE rate plus the number of submetered tenants designated as CARE participants on residential master-metered accounts.<sup>3</sup>

**5. Discuss how the elements above were used to derive the utility's CARE participation rates by energy source.**

On a monthly basis, the number of CARE participants is divided by the number of estimated eligible households to calculate the CARE participation rate. This calculation is applied to both gas and electric estimated households to derive the CARE participation rate by energy source.

**C. Provide the total number of CARE residential customers, CARE-eligible households, and CARE participation rates, by energy source, by quarter. See Tables 2.1 and 2.2.**

<b>TABLE 2.1</b>			
<b>CARE Residential Penetration Rate</b>			
<b>Electric</b>			
<b>2000 Quarter Ending</b>	<b>CARE Residential Households</b>	<b>CARE-Eligible Households</b>	<b>CARE Penetration Rate</b>
March 31	129,844	226,111	57%
June 30	127,804	225,991	57%
September 30	146,318	228,352	64%
December 31	145,764	225,862	65%

<sup>3</sup> Source: San Diego Gas & Electric Customer Master File, December 2000.



TABLE 2.2			
CARE Residential Penetration Rate Gas			
2000 Quarter Ending	CARE Residential Households	CARE-Eligible Households	CARE Penetration Rate
March 31	80,212	157,331	51%
June 30	81,165	157,834	51%
September 30	91,700	158,961	58%
December 31	92,419	159,569	58%

**CARE Submetered Participants (Tenants of Qualifying Master-Meter Customers)**

- D. Provide the estimates of current demographic CARE-eligibility rates by energy source at year-end.**

SDG&E estimates that 21.8% of residential customers are eligible for CARE for both gas and electric service.

- E. Provide the estimates of current CARE-eligible submetered tenants of master-meter customers by energy source at year-end.**

Estimated eligible submetered units: Gas – 7,521

Estimated eligible submetered units: Electric – 9,318

- F. Provide the current CARE submetered tenant counts by energy source at year-end.**

Submetered gas units: 34,498

Submetered electric units: 42,744

- G. Provide the current CARE submetered penetration rates by energy source at year-end.**

CARE submetered participants – gas: 7,136 Penetration rate: 95%

CARE submetered participants – electric: 7,696 Penetration rate: 83%

- H. Discuss any problems encountered during the reporting period administering the CARE program for submetered tenants and/or master-meter customers.**

SDG&E continues to experience few problems with the submetered program. Most complex owners and managers cooperate with the annual recertification of their tenants who are participating in CARE. As complexes changed managers or managing companies during the year, the CARE staff worked with new parties to inform them about the CARE program, how it can help their low-income tenants, and what the responsibilities of the complex owner or manager are.

In PY2000, SDG&E experienced major billing changes for electricity. These changes were caused by unforeseen increased wholesale electric prices beginning in July. An interim methodology to provide a full 15% discount to CARE participants was implemented in August followed by a legislated price cap (AB265) that was applied retroactively in September. These adjustments were sometimes difficult for complex owners or managers to understand and apply to their tenants' bills. However, SDG&E worked with both managers and their billing services to provide support and information to help with their billing and adjustment processes.

The 2000 annual recertification for submetered CARE participants began in July and concluded in September. SDG&E sent CARE applications and posters for managers to post in their complexes advising enrolled tenants about the recertification process. The posters also advised new tenants about the availability of CARE and requirements for participation. Posters were made available to managers in both English and Spanish. Most managers and owners were cooperative in making recertification notices and applications available to their tenants. SDG&E continues to work closely with all managers and billing services to ensure that tenants qualified for CARE receive program benefits.

## **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. See Table 3.**

TABLE 3			
Average Monthly Gas/Electric Usage Residential Non-CARE vs. CARE Customers			
Customer	Gas Therms Tier 1	Gas Therms Tier 2	Total
Non-CARE	22	9	31
CARE	19	5	24
Customer	Electric kWhr Tier 1	Electric kWhr Tier 2	Total
Non-CARE	236	230	466
CARE	230	87	317

- 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. See Table 4.

TABLE 4		
Average Monthly Gas/Electric Bill Residential Non-CARE vs. CARE Customers (Dollars per Customer)		
Customer	Gas	Electric
Non-CARE	\$26.64	\$65.26
CARE	\$22.10	\$50.04

### III. Program Costs

#### A. Discount Cost

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

Average gas discount: \$4.00

Average electric discount: \$8.97

2. State the annual subsidy (discount) for all CARE customers by energy source.

	<u>Electric</u>	<u>Gas</u>
PY2000 Annual CARE Discount	\$8,231,615	\$3,158,187

**B. Administrative Cost**

1. Show the CARE Residential Program's administrative cost by category. See Table 5.1 and 5.2

Table 5.1 reflects the reporting data approved in the Reporting Requirements Manual (RRM) in Decision D.01-03-028, dated March 15, 2001. However, since this decision was not in place for data collection in the actual year of 2000, SDG&E is also including data as it was collected and reported to the Energy Division for the 2000 program year in Table 5.2.

<b>TABLE 5.1</b>	
<b>CARE Residential Program</b>	
<b>CARE Costs and Reporting Classifications</b>	
<b>Category</b>	<b>Cost</b>
Outreach	\$920,623
Processing, Certification and Verification	N/A
Billing System/Programming	N/A
Measurement and Evaluation	N/A
Regulatory Compliance	N/A
General Administration	N/A
LIAB Funding	\$49,474
CPUC Energy Division Staff Funding	\$44,059
<b>Total Program Costs</b>	<b>\$1,014,156</b>
Subsidies and Benefits	\$11,589,802
<b>TOTAL PROGRAM COSTS AND CUSTOMER DISCOUNTS</b>	<b>\$12,603,958</b>

TABLE 5.2 CARE Residential Program	
CARE Costs and Reporting Classifications (Pre-RRM)	
Category	Cost
Outreach, Operations, Processing	\$857,813
LIGB Start Up Costs	\$47,832
LIGB Budget 2000	\$1,642
Energy Division Support Staff	\$44,059
Outreach Pilot	\$62,810
<b>Total Administrative Costs</b>	<b>\$1,014,156</b>
CARE Subsidy	\$11,389.802
Merger Credit Refund Adjustment	\$200,000
<b>Total Subsidy and Credits</b>	<b>\$11,589.802</b>
<b>TOTAL PROGRAM COSTS</b>	<b>\$12,603,958</b>

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

**Outreach:** Costs included in outreach include bill inserts; advertising; the printing and mailing of applications; posters; brochures; flyers; postage; submeter, non-profit and agricultural housing outreach; information technology (technical support and software licensing); Call Center labor; staff labor; out-bound dialing; toll-free customer call number; and the Outreach and Enrollment pilots.

**Processing, Certification and Verification:** Costs included in this category include staff labor; information technology (technical support and software licensing); application processing; training; programming labor; and submeter certification.

**Billing System/Programming:** These costs include manual rebilling; and programming and billing labor.

**Measurement and Evaluation:** Costs for measurement and evaluation include expenses for the Needs Assessment Study and customer satisfaction survey.

**Regulatory Compliance:** These costs include the preparation and filing of Program Applications, Advice Filings; Comments and Reply Comments, and Tariff Revisions; preparing reports and studies; attending

working group meetings, public input meetings and other CPUC hearings or meetings.

**General Administration:** General costs include office supplies; market research; program management labor; and information technology (technical support and software licensing).

**LIAB Funding:** These costs are both amortized LIAB start-up costs and current year support.

**CPUC Energy Division Staff Funding:** This category of expenses covers the program management and staff support provided by the Energy Division for low-income program implementation.

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

As of December 31, 2000, the following were the cumulative balances in the respective CARE balancing accounts:

**GAS** – overcollection of \$76,323. The cumulative amount in the balancing account has decreased significantly approaching a zero balance from the same time period in the previous year (December 31, 1999 overcollection of \$995,338). This was due to an increase in costs for procuring natural gas.

**ELECTRIC** – overcollection of \$2,936,618. The cumulative amount in the balancing account has decreased slightly from the same period in the previous year (December 31, 1999 overcollection of \$3,392,148). A decrease in the account balance should continue to occur with the provisions set forth for the implementation of Assembly Bill 265.

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

All costs associated with the CARE program are recorded in the CARE balancing accounts, including CARE administrative and subsidy (discount) expenses. For electricity, the Public Goods Charge recovers a percentage of the CARE administrative costs and the electric subsidy. For gas, the CARE surcharge recovers a portion of the CARE administrative costs and the gas subsidy. The cost recovery mechanism is a separate rate component from base rates.

- 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. See Tables 6.1 and 6.2.

TABLE 6.1					
CARE Surcharge and Revenue Collected by Customer Class - GAS					
Customer Class	Average Monthly CARE Surcharge	Average Monthly Bill	CARE Surcharge as Percent of Bill	Total CARE Surcharge Revenue Collected	Percentage of CARE Surcharge Revenue Collected
Residential					
-Individually Metered	\$0.16	\$28.17	0.57%	\$1,219,626	47.5%
-Master Metered	\$1.36	\$229.32	0.59%	\$289,127	11.3%
Commercial	\$1.86	\$294.88	0.63%	\$618,343	24.1%
Industrial	\$35.82	\$36,497.23	0.95%	\$288,065	11.2%
Transportation Only	\$6.03	\$300.64	2.00%	\$152,685	5.9%
<b>Total</b>				<b>\$2,567,846</b>	<b>100.0%</b>

TABLE 6.2					
CARE Surcharge and Revenue Collected by Customer Class - ELECTRIC					
Customer Class	Average Monthly CARE Surcharge	Average Monthly Bill	CARE Surcharge as Percent of Bill	Total CARE Surcharge Revenue Collected	Percentage of CARE Surcharge Revenue Collected
Residential					
-Individually Metered	\$0.29	\$59.64	0.49%	\$3,312,620	37.0%
-Master Metered	\$2.10	\$377.89	0.56%	\$127,316	1.4%
Commercial	\$2.73	\$551.97	0.50%	\$3,932,536	44.0%
Industrial	\$239.34	\$55,307.32	0.43%	\$1,437,461	16.1%
Agricultural	\$2.87	\$630.87	0.46%	\$133,877	1.5%
<b>Total</b>				<b>\$8,943,810</b>	<b>100.0%</b>

#### **IV. Outreach**

##### **A. Discuss utility outreach activities and those undertaken by third parties on the utility's behalf.**

#### **UTILITY OUTREACH ACTIVITY**

**2000 Annual Notification** - SDG&E's annual notification period for 2000 occurred between June 14 and July 13, 2000. Inclusion of CARE applications with customer bills continues to be an effective outreach method for this program. Of approximately 980,000 applications distributed in the annual notification, 42,850 were returned to SDG&E. Accompanying the applications, SDG&E's monthly newsletter, Energy Notes, featured an article in English and Spanish alerting customers about the program and the new income guidelines.

**Customer Contact Employees** - Utilizing customer contact employees in the telephone center, offices and field services area has also proved to be a very effective method of outreach. Customer Service Representatives (CSRs) advise customers of the CARE program on all requests for service and other calls or contacts (such as delinquent or credit inquiries and high bill inquiries), as appropriate. In PY2000, CSRs requested that 111,387 applications be mailed to potentially qualifying customers. Customers returned 31,736 of these applications.

Both Energy Service Advisors (ESAs) visiting customers' homes to perform energy audits and field collection personnel advise customers about CARE. These field employees often provide applications during such visits to customers' homes.

**Interactive Voice Response (IVR)** - Customers who call SDG&E are given the option to select recorded information about CARE and may also request an application in this manner.

**Information on Hold** - The messages to customers waiting for help on telephone inquiries provide information about the CARE program in both English and Spanish.

**Bilingual Employees** - SDG&E's Customer Service Telephone Center and most company business offices are staffed with bilingual CSRs to ensure that all customers have access to information about utility services, including the CARE program. During this reporting period, Spanish-speaking customers made approximately 10 % of the application requests through the telephone center and company offices. The telephone center is also staffed with CSRs fluent in Vietnamese. In an emergency, bilingual employees throughout the



company may be called upon for translation in several other languages, including Russian, Samoan, Arabic, and Persian.

**Direct Mail Project** – In July, when deregulated electric commodity prices began increasing dramatically, SDG&E mailed letters and CARE applications to 115,000 non-participating customers that we identified through MicroVision software as likely to qualify for the program. About 20,000 customers returned completed applications through this effort.

**Energy Speakers Corps** - SDG&E employees provided information on utility services and programs, including CARE, to approximately 7,800 customers at community group presentations between January and December, 2000.

**Other Community Events** - During this reporting period, SDG&E participated in other community events such as the Del Mar Fair, Health and Safety Fairs for Seniors and others, a Single Parents' workshop, a community housing fair, the Council on Minority Aging Ethnic Festival, and Mock City events for foster children about to leave foster care and establish their own homes.

**Submetered Apartments and Mobile Home Parks** - SDG&E utilized rate change and time change notification mailings to submetered complex owners and managers to remind them about the CARE program and to encourage them to have their tenants apply. These letters were mailed to more than 5,600 owners and managers who provide housing to over 41,000 potentially eligible tenants.

**Customer Brochures** – SDG&E includes information about the CARE program in several of its energy conservation and customer service brochures. SDG&E customers requested the following brochures providing CARE information during the reporting period:

<u>Brochure</u>	<u>Requests</u>
"New Customer Handbook"	
English	82,716
Spanish	3,305
"Medical Baseline Application	5,159

**Other Community Involvement** -- In 2000, SDG&E continued to support The Eldercare Directory, published by ReVisions Resources of San Diego. This guide to helpful services, available for Seniors in San Diego County, includes information about the CARE program. For the past four years, SDG&E has helped subsidize the publication and distribution of this

comprehensive guide to senior services. A website for this resource guide was also developed in 2000.

**Mail-In Energy Audit** – In 2000, the Mail-In Energy Audit continued to include information about the CARE program and give customers an opportunity to request a CARE application as part of this service. Two thousand eighty-five (2,085) customers took advantage of this opportunity and requested information about the program. Of this number, 1,094 were sent CARE applications, 902 were already participating in CARE, 45 had moved without reconnecting service at a new address, and 44 were ineligible.

### **THIRD PARTY OUTREACH ACTIVITY**

**Energy Education for Low Income Program (EELI)** - This program, administered for SDG&E by Richard Heath and Associates, Inc., educates low income customers about energy conservation and other programs and services, including CARE. Classroom education is provided through a network of local community-based organizations. CARE applications are made available at all classes.

During the reporting period, the EELI Program reached 26,575 low-income customers, working with twenty-two Social Service Agencies at various San Diego locations. Agencies participating in the EELI Program were: Adult Protective Services, Alliance for African Assistance, Alpha of San Diego, Apostolic Assembly, Casa Familiar, Catholic Charities, Center for Employment Training, Chicano Federation, Comprehensive Training Systems, Consumer Credit Counselors of San Diego and Imperial Counties, La Mesa Senior Adult Center, Metropolitan Area Advisory Committee (MAAC) Project, Mid-City Christian Service Agency, National City Senior Nutrition Center, Occupational Training Services, Refugee Assistance Center, San Diego American Indian Health Center, San Marcos Joslyn Senior Center, South Bay Community Services, St. Didacus Catholic Parish, and United Way/Labor Participation, and Vista Community Clinic.

The EELI Program provided energy education to low-income customers in the following languages:

<u>Language</u>	<u>Customers</u>
African	358
Arabic	61
Asian	23
Eastern European	104
English	22,932

Laotian	30
Middle Eastern	88
Russian	48
Spanish	2,696
Vietnamese	235

**Direct Assistance Program** - This low-income weatherization program provides recipients of weatherization measures with in-home energy education, including CARE information and an application. In 2000, 9,893 low-income households received weatherization services and 4,000 additional households were educated about CARE and energy-saving practices through DAP. Conducting this education in various languages, DAP representatives also helped customers complete 1,374 CARE applications and returned them directly to SDG&E.

**Community Requests for Applications** - During this reporting period, the following organizations were supplied with CARE applications for distribution to their clients or members: The City of San Diego (neighborhood storefronts), Cuyamaca College Single Parents' Program, San Diego Legal Aid Society, Alliance for African Assistance, Bayside Settlement House, Catholic Charities, Crisis House, Heartland Human Relations, House of Help, Indian Human Resource Center, Labor Participation (AFL-CIO), Lutheran Social Services, Metropolitan Area Advisory Council (MAAC), Mid-City Christian Services, Neighborhood House Association, North Coastal Service Center, North County Interfaith Council, North County Community Housing Association, Presbyterian Crisis Center, Safe Harbor Ministries, and the Salvation Army. Over 17,000 CARE applications were provided to these organizations.

**Outreach and Enrollment Pilot** - Three community based organizations (CBOs) were awarded contracts and began work on various outreach and enrollment activities in June 2000. From June through December, 2,462 applications were submitted to SDG&E by the Outreach and Enrollment Consultants. A final report covering the various outreach activities utilized and the results of the pilot is scheduled to be completed after the end of the pilot, which runs through May 31, 2001.

**CalWORKS Welfare to Work** - SDG&E has been working with San Diego County's Health and Human Services Agency (HHS) to enable them to advise CalWORKs participants and new applicants about CARE. In addition to information provided to eligibility workers in their handbooks, SDG&E speakers visited CalWORKs classes in 2000, to help participants fill out CARE applications. Presentations also included energy conservation and bill payment assistance information. The HHS staff handles over 132,000 cases per year.

**B. Discuss each of the following:**

**1. Most effective outreach method, including a discussion of how success is measured.**

When measured by the percentage of applications returned as compared to the number distributed, the most effective outreach method for SDG&E's CARE program in 2000 was through the Customer Service Telephone Center calls for service initiation, credit or billing and SDG&E's CSRs sending an application if the customer requests one. In PY2000, 111,387 CARE applications were requested in this way, and 31,736 were returned, equating to a 28.5% return rate.

Third party outreach had only a slightly lower return rate. All forms of third party outreach resulted in 12,750 applications being returned to SDG&E of the 52,000 distributed, which equates to a 24.5% return rate.

When measured by the total applications returned through a single outreach methodology, the most effective outreach was the Annual Notification, which resulted in 42,850 applications being returned from 980,000 distributed in customer bills. (4.4% return rate)

**2. How CARE customer data and other relevant program information is shared by the utility with other utilities sharing its service territory.**

SDG&E has only a small overlap of customers with Southern California Gas Company in southern Orange County. In PY2000, CARE applications were not shared between SDG&E and SoCal Gas.

**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.**

**CARE Customer Information** – In September 2000, a list of CARE participants was released to SDG&E's LIEE contractor to be used to offer weatherization services to CARE customers whose homes had not previously received such services. Permission to release CARE information, subject to conditions to ensure confidentiality of customer-specific information, was granted in Decision 00-07-020 (July 12, 2000).

**LIHEAP Follow-up** – SDG&E utilized LIHEAP energy assistance payment lists to mail CARE applications to LIHEAP recipients who were not participating in CARE since the qualifications for this program are similar to those of CARE.

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. (Note: These agreements are limited to sharing 1-800 phone numbers with customers and providing CARE benefit information for the federal fiscal year, October 1 of the current year through September 30 of the subsequent year. There are no tracking mechanisms in place to determine how many customers contact the other programs or actually become enrolled in other program(s) as a result of these agreements.) See Attachment A.**

Pursuant to SDG&E's agreement with the CSD signed June 16, 2000, SDG&E developed an insert referring low-income customers to the CSD for LIHEAP energy bill payment assistance information. This insert is provided to customers with every CARE application. See Attachment B.

SDG&E provided a report to the CSD on October 2, 2000 that detailed by month, the number of CARE participants and the total discount provided. See Attachment C.

5. **Discuss barriers to participation encountered during the reporting period and steps taken to mitigate them.**

**Language** – Customers who do not speak English as their primary language may have difficulty with many types of American social interaction and business dealings. SDG&E's CARE application is fully translated into Spanish, which approximately 16% of residents in SDG&E's service territory speak as their primary language. Energy Notes articles, including any information about CARE and other low income or bill assistance programs, are always translated into Spanish. SDG&E's Call Center is staffed with bilingual representatives who speak Spanish and Vietnamese.

While not in place for 2000, SDG&E has also formed a partnership with United Pan Asian Communities (UPAC) to help market low income and energy efficiency programs through radio and print media targeted to Asian audiences.

**Trust** – While usually thought of in terms of recent immigrants, trust is also an issue of many other customers. Some customers are reluctant to share personal information about their household even though SDG&E's customer records are confidential. The most effective way to overcome or mitigate this barrier appears to be one-on-one contact, in person. This is accomplished in SDG&E offices, by the Outreach and Enrollment

consultants, the community agencies participating in the EELI Program and the contractors providing low-income weatherization services.

**Pride** – This barrier particularly affects persons who have always paid their way and have never asked for assistance, and is probably the most difficult barrier to overcome. Since qualifying customers have a choice about whether to participate or not, this barrier may never be overcome even with personal one-on-one contact. However, one avenue that has some success is working with other family members, for example, in the case of a senior who refuses “charity” but may be encouraged to complete a CARE application by a relative or friend.

**Lack of a Sense of Value** – SDG&E was the first electric utility in California to experience deregulated market prices for electricity in the Summer of 2000. When electric commodity prices began to increase in July and August, requests for CARE applications increased by 40-55%. This time frame immediately followed the Annual Notification that occurred from mid-June to mid-July during which almost every one of these customers had already received a CARE application in their SDG&E bill. When the rate cap was implemented in September, requests immediately decreased to their normal level. This phenomenon appears to indicate that low-income customers are as sensitive to price signals as any other customer, and this barrier may be one indicator of why it is difficult to increase the CARE penetration rate, even though substantial additional ratepayer funds are spent for outreach.

- 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.**

SDG&E has worked very hard to keep CARE administrative costs reasonable while at the same time, using many avenues to help eligible customers participate in CARE. SDG&E's application processing system works very well and qualified applicants are placed on CARE usually within a week to 10 days of the receipt of the application. The discount is applied to the customer's bill for the full billing cycle in which the application is received.

One of the most successful third party outreach efforts during PY2000 was establishing a relationship with senior housing projects and other affordable housing projects. Site visits to enroll qualified tenants and encourage managers to make CARE applications available to new tenants worked well for this contractor. No cost effectiveness analysis is available for types of

third party outreach performed as part of the Outreach and Enrollment because contractors are paid a flat fee.

SDG&E also implemented a targeted outreach campaign to customers identified as likely to be eligible for CARE but were not participating. This campaign consisted of a direct mail outreach to 115,000 customers in July 2000. The information provided included a letter in English and Spanish explaining the discount, a CARE application, and a fact sheet of no-cost, simple to implement energy conservation tips. The fact sheet also referred customers to bill payment assistance programs and SDG&E's level pay plan.

SDG&E has not conducted cost-effectiveness assessments that compare various types of outreach. In prior years, utilities were asked to provide an estimated cost per customer by dividing the total administrative costs by the number of participating customers at reporting year end. However, this simplified methodology seems to be only one of many tools needed to evaluate and compare various types of outreach and their success rate. Assessing the cost effectiveness of the outreach process appears to be far more complex than simply comparing costs per application submitted. For example, if a qualified customer is "hard-to-reach" and only applies for CARE after multiple and varied outreach opportunities are provided, obviously the cost of that application is higher than one that was submitted by a customer who received an application in their utility bill. Clearly, evaluation tools to measure the value of CARE outreach, enrollment and processing need to be developed with input from the Commission, the utilities, and all interested parties before standards, by which utilities' CARE programs and efforts can be measured, are implemented.

## **V. Processing CARE Applications**

### **A. Processing Self-Certification and Self-Recertification Applications (Individual and Submetered Customers)**

- 1. Provide the total number of third-party CARE applications received, approved, denied, pending/never completed, or duplicates in the reporting period. See Table 7. (Note: Pursuant to Res. E-3601, a report will be submitted to the Commission discussing the results of the CARE Outreach Pilot at its conclusion. The CARE Outreach Pilot runs from June 1, 2000, through May 31, 2001.)**

<b>TABLE 7</b>					
<b>CARE Outreach Pilot</b>					
<b>June 1, 2000 through December 31, 2000</b>					
<b>CARE Applications Submitted</b>					
<b>Entity</b>	<b>Received</b>	<b>Approved</b>	<b>Denied</b>	<b>Pending/Never Completed</b>	<b>Duplicates</b>
ECS	399	204	28	27	140
LCSA	1480	756	103	81	540
VCC	583	416	26	32	109
<b>Total</b>	<b>2462</b>	<b>1376</b>	<b>157</b>	<b>140</b>	<b>789</b>
<b>Percentage</b>	<b>100%</b>	<b>56%</b>	<b>6%</b>	<b>6%</b>	<b>32%</b>

2. 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. See Table 8.

<b>TABLE 8</b>						
<b>CARE Self-Certification and Self-Recertification Applications</b>						
	<b>Provided</b>	<b>Received</b>	<b>Approved</b>	<b>Denied</b>	<b>Pending/Never Completed</b>	<b>Duplicates</b>
<b>Total</b>	1,493,712	122,852	90,281	4,566	7,861	20,144
<b>Percentage</b>	100%	8%	73%	4%	6%	16%

3. Provide a table showing the number of customers removed from CARE by month due to the recertification process. (NOTE: Customers may be removed due to a variety of reasons including non-response to a request to recertify, failure to complete the application process, ineligibility, or by customer request due to changed eligibility status.) See Table 9.

SDG&E's Customer Master File does not track customers who are removed from CARE in the process of recertification or post-enrollment verification separately. The CARE status of all customers removed from CARE for any reason is the same. The only types or data tracked for removals are those who are automatically removed for non-response, and removals due to ineligibility or customer request (manual).



<b>TABLE 9</b>			
<b>Residential CARE Program</b>			
<b>Customers Removed by Month through Recertification and Post-Enrollment Verification</b>			
<b>2000</b>	<b>Removed Ineligible</b>	<b>Removed Non- Response</b>	<b>Total</b>
January	127	1062	1189
February	98	827	925
March	118	729	847
April	126	588	714
May	74	688	762
June	77	568	645
July	63	410	473
August	175	568	743
September	126	778	904
October	129	1474	1603
November	124	991	1115
December	106	1005	1111
<b>Total</b>	<b>1343</b>	<b>9688</b>	<b>11031</b>

**4. Describe the utility's process for recertifying submetered tenants of master-meter customers.**

Pursuant to Decision D. 89-07-062, SDG&E recertifies submetered tenants of master-meter customers on an annual basis. This project begins on July 1<sup>st</sup>, with a notification sent to the complex manager at the service address (or mailing address if requested) of the complex. The notification packet contains a letter advising the manager that the recertification process has begun, posters in English and Spanish for the manager to post to notify the tenants, submetered CARE applications, and a large postage-paid return envelope for the manager to return completed applications to SDG&E. Tenants also have the option of returning their applications directly to SDG&E. SDG&E also provides a complex information form by which the manager can update the complex information and request more applications or posters.

The letter and poster advise current CARE participants that they need to recertify and invites all other tenants who qualify to apply for the discount. Applications are due back to SDG&E by August 15<sup>th</sup>. Submetered tenants of master-metered customers are notified by letter when they are approved for the CARE program. The complex manager and any other parties

designated by the complex such as billing services are notified by letter about tenants who were approved for CARE.

Submetered tenants may apply for CARE anytime during the year, not just during the recertification period. All participating submetered tenants must recertify in order to continue to receive the discount.

**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. See Table 10.

TABLE 10						
CARE Random Post-Enrollment Verification Applications						
	Mailed	Received	Approved	Denied	Pending/Never Completed	Duplicates
Total	2467	2277	1753	524	N/A	N/A
Percentage	100%	92%	77%	23%	N/A	N/A

2. Provide a table showing the number of customers removed from CARE by month due to the verification process. (NOTE: Customers may be removed due to a variety of reasons including non-response to a request to verify income, failure to complete the verification process, ineligibility, or by customer request due to changed eligibility status.) See Table 9.

See Table 9.

- 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.

SDG&E had four contracts in place in PY2000 with third parties to perform various activities for the CARE program. The Low Income Energy Efficiency (LIEE) contract with Richard Heath and Associates (RHA) enabled weatherization assessment specialists to provide CARE outreach and enrollment assistance with weatherization and in-home energy education services. RHA also provides CARE outreach services through SDG&E's Energy Education for Low Income (EELI) program.

SDG&E is also participating with three community agencies that are conducting the CARE Outreach and Enrollment Pilot. These agencies are Episcopal Community Services, Labor's Community Service Agency and the Vista Community Clinic. (The pilot term is one calendar year from June 1, 2000 through May 31, 2001.)

The outreach efforts of third party contractors accounted for 14.6% of all residential CARE applications submitted and 80% of the new Expanded CARE applications submitted in PY2000.

## **VI. Program Management**

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

In PY2000, the electric CARE discount was provided to participants in the form of a rate or tariff that imbedded a discount in all elements of the cost per kilowatt hour. Due to fluctuations in the electric commodity price last year, the CARE discount provided on the bill could vary whereby customers would sometimes receive greater or less than the 15% discount.

On July 27, 2000, SDG&E filed Advice Letter 1241-E to request a CARE Rate Interim Methodology Adjustment which would effectively provide customers with a full 15% discount to accommodate fluctuating commodity prices. The CPUC approved this methodology adjustment in Resolution E-3699 on August 3, 2000.

## **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. See Table 11.**

<b>TABLE 11</b>						
<b>CARE Expansion Program</b>						
<b>Participating Facilities by Month</b>						
<b>2000</b>	<b>Residential Facilities - Gas</b>	<b>Commercial Facilities - Gas</b>	<b>Total Gas Facilities</b>	<b>Residential Facilities - Electric</b>	<b>Commercial Facilities - Electric</b>	<b>Total Electric Facilities</b>
January	262	80	342	365	142	507
February	261	80	341	363	142	505
March	275	85	360	381	148	529
April	275	85	360	382	147	529
May	277	85	362	390	149	539
June	276	84	360	390	149	539
July	284	92	376	398	160	558
August	327	94	421	441	160	601
September	350	106	456	451	167	618
October	361	109	470	458	170	628
November	403	109	512	503	174	677
December	404	109	513	560	174	734

- 1. State the total number of residents (excluding caregivers) for residential facilities, and for commercial facilities, by energy source, at year-end.**

Residential Facilities: Gas – 5,992    Electric – 4,229  
Commercial Facilities: Gas – 3,080    Electric – 5,582

### **II. Usage Information**

- A. Provide the average monthly usage by energy source per residential facility and per commercial facility. See Table 12.**

TABLE 12		
CARE Expansion Program		
Average Monthly Gas/Electric Usage		
Type of Facility	Gas Therms	Electric kWhr
Residential Facilities	325	2,748
Commercial Facilities	1,319	16,034

### III. Program Costs

#### A. Administrative Cost

1. Show the CARE Expansion Program's administrative cost by category. See Table 5, Standardized CARE Administrative Cost Reporting Categories.

Costs for Expanded CARE are included in Table 5. As a subset of Table 5, the following represent Expanded CARE costs for PY2000:

**Outreach** – \$2,148

**Processing, Certification and Verification** – \$8,537

**Billing System/Programming** – N/A

**Measurement and Evaluation** – N/A

**Regulatory Compliance** – N/A

**General Administration** – \$18,568

**LIAB Funding** – N/A

**CPUC Energy Division Staff Funding** -- N/A

#### B. Discount Information

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

Gas - \$412

Electric - \$547

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

Gas - \$1,545

Electric - \$3,426

#### **IV. Outreach**

##### **A. Discuss utility outreach activities and those undertaken by third parties on the utility's behalf.**

SDG&E undertook selected direct mail outreach for Expanded CARE in PY2000. Information about new facilities was obtained from a variety of sources, including newspaper coverage, customer contact personnel and a project to provide outage information to intermediate care facilities licensed by the State of California.

Each of the Outreach and Enrollment consultants performed Expanded CARE outreach as part of their contractual agreements with SDG&E. One of the consultants provides group home housing, and learned that a few of their own facilities were so slow to respond to SDG&E's request for recertification that they had been removed from the program. This consultant requested that the managers of these facilities reapply for Expanded CARE and instituted internal procedures to follow-up with all their group home managers about recertification in the future.

Another consultant discovered through contacts in their other programs that a non-profit group had recently converted some facilities to group homes and visited sites to ensure that the new facilities were eligible for Expanded CARE. This visit also produced referrals to additional agencies with facilities that were potentially eligible.

##### **B. Discuss each of the following:**

###### **1. Most effective outreach method, including a discussion of how success is measured.**

In PY2000, the most effective outreach method for Expanded CARE was information sharing by one of the Outreach and Enrollment Consultants within that consultant's network of programs and services. As described in their proposal, the management of this organization values information sharing at all levels of the agency and among all programs and aggressively facilitates such exchanges. This is one of the reasons this agency was awarded the outreach and enrollment contract.

If measured by the number of Expanded CARE facilities added to the program, this consultant submitted applications covering 161 accounts.

###### **2. How the CARE facility data and relevant program information is shared by the utility with other utilities sharing its service territory.**

Information about Expanded CARE accounts is not currently shared with SoCal Gas, the only utility with which SDG&E shares overlapping service.

**3. Barriers to participation encountered in the prior year and steps taken to mitigate these, if feasible, or not, if infeasible.**

The biggest barrier to Expanded CARE participation is that non-profit providers often don't advise SDG&E if they add facilities. However, since Expanded CARE customers are required to recertify their eligibility every year, these are usually added at that time. Part of the problem appears to be that agency personnel are moved about among programs and the chain of communication can be lost.

One other problem is that facilities may neglect to recertify in a timely manner. SDG&E notifies all participants at least twice by mail with a follow-up telephone call if no response is received from the participant. These steps usually result in most organizations eventually returning the recertification application.

**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.**

Expanded CARE, on the whole, operates quite well, and the administration costs of this component are only 3% of the total program administrative expenditures. Cross referral among agencies and within different agencies' programs was effective during this reporting year, as noted above. The cost-effectiveness of third party outreach has not yet been assessed, and this may prove difficult since the agencies, so far, have not reported any associated costs for outreach. This data may be available in their final reports and will be provided in SDG&E's report on the CARE Outreach and Enrollment Pilot.

**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. See Table 13. (Note: Pursuant to Resolution. E-3601, a report will be submitted to the Commission discussing the results of**

the CARE Outreach Pilot at its conclusion. The CARE Outreach Pilot runs from June 1, 2000 through May 31, 2001.

TABLE 13					
CARE Expansion Program					
CARE Outreach Pilot, Other Outreach, and Utility					
Entity	Received	Approved	Denied	Pending/Never Completed	Duplicates
ECS	27	26	0	0	1
LCSA	161	117	3	41	0
VCC	5	5	0	0	0
SDG&E	116	109	6	0	1
<b>Total</b>	<b>309</b>	<b>257</b>	<b>9</b>	<b>41</b>	<b>2</b>
<b>Percentage</b>	<b>100%</b>	<b>83.17%</b>	<b>2.91%</b>	<b>13.27%</b>	<b>0.65%</b>

2. Provide the total number of utility CARE Expansion program applications received, approved, denied, pending/never completed, or duplicates for the reporting period. See Table 13.

See Table 13.

- 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.

In PY2000, third party Expanded CARE certification was performed solely by the Outreach and Enrollment consultants as described in section IV. A. above. Third party involvement in Expanded CARE proved to be quite successful. Entities managing group homes or homeless shelters probably cannot be described as "hard-to-reach" since those who operate such facilities are normally well-connected to other community agencies and services. Neither the agencies nor SDG&E were able to enroll any more customers in the Agricultural/Employee Housing segment of Expanded CARE in PY2000.

No third parties conducted recertification and/or verification on SDG&E's behalf for Expanded CARE in PY2000.




## **VI. Program Management**

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

The Outreach and Enrollment Consultants faced some difficulty with Expanded CARE due to the variety of metering conditions at some of the commercial facilities they sought to enroll in Expanded CARE. SDG&E's CARE staff worked with the consultants and the affected customers to ensure that CARE qualifications were well understood. In some cases, the CARE staff also worked with SDG&E's Rate Support Department to identify whether the customer was on the correct rate to qualify for Expanded CARE. Rate support performed analyses for customers to find the best rate, whether that be commercial time-of-use or regular commercial rates to determine how customers could save the most on their monthly energy bills.

## Attachment A



A  Sempra Energy™ company

May 23, 2000

This Letter of Agreement is entered into by the Department of Community Services and Development (CSD) and San Diego Gas & Electric (SDG&E) for the purpose of ensuring integration and coordination of resources and benefits between CSD's Home Energy Assistance Program (HEAP), and SDG&E's California Alternate Rates for Energy (CARE) Program. The existence of this Agreement places CSD within compliance of the Department of Health and Human Services' LIHEAP Leveraging Incentive Program requirements and enables California to claim the CARE discount as a leveraged resource. Both programs provide a form of energy assistance to low-income customers. It is mutually agreed that both parties will assist in the referral of their customers to the other energy assistance program through written and/or verbal advertising of the program.

The eligibility criteria for both programs is based solely on income eligibility and the guidelines are specific to each program. HEAP income guidelines are set at 60% of the State Median Income; CARE guidelines are set at 150% of the Federal Income Poverty Guidelines, adjusted annually by a formula based on changes in the Consumer Price Index. Assistance for either program is limited to eligible low-income households

The levels of assistance for each program vary according to the respective program. The amount of Federal funding; the number of persons in the household; the applicant's geographical location; and the household's income determine HEAP assistance levels. The CARE program offers a 15% reduction off the applicant's monthly gas/electric costs or charges.

Both programs are operated year round. HEAP provides one-time assistance, per household, per program year (January through December). Applicants must reapply annually. CARE provides a continuous rate reduction throughout the year with the applicant re-certifying biennially.

Both programs are integrated/coordinated through the written/verbal referral of applicants/customers to the opposite program. Both programs provide the name and telephone number of the other program with their respective applications and have included cross-references to the other program in their marketing materials.

A report on the number of households assisted and the total amount of assistance will be provided to the HEAP Program annually.

## Attachment A

SDG&E shall make available to the CSD or its representative all appropriate nonprivileged documents, papers and records pertinent to the referral process and leveraged amounts for examination, copying or mechanical reproduction for a period of three years from the date the information is submitted to CSD. Specifically, SDG&E will provide CSD with data necessary for completion of California's annual Leveraging Application. The data will be requested each October and will cover the preceding October through September timeframe. The information requested includes: 1) the total number of households currently receiving the reduced rate; and 2) the total discount received by all participating households.

AGREED TO:

[signed: Tim Dayonot]

\_\_\_\_\_  
Director  
Department of Community  
Services and Development

[dated: 6/16/00]

\_\_\_\_\_  
Date

[signed: Yvette M. Vazquez]

\_\_\_\_\_  
Manager, Residential Energy Programs  
San Diego Gas & Electric

[dated: 5/24/00]

\_\_\_\_\_  
Date

[Executed document on file at SDG&E]

## ATTACHMENT B

### English Side

#### PROGRAMS AND SERVICES TO HELP YOU PAY YOUR ENERGY BILL



A Sempra Energy company

- **HEAP - Home Energy Assistance Program**, provides once-a-year assistance for income-eligible customers. Call the California Department of Community Services and Development at 1-800-433-4327 for more information.
- **MEDICAL BASELINE** - Provides energy service at the lowest rates for customers with documented health needs. Contact SDG&E at 1-800-411-7343 or [info@sdge.com](mailto:info@sdge.com) for information and an application.
- **LEVEL PAY PLAN** - Evens out the highs and lows of your monthly energy bills by averaging them. This plan helps you budget and takes the surprise out of changes in bills. Contact SDG&E at 1-800-411-7343 or [info@sdge.com](mailto:info@sdge.com) for more information. You can also visit our Web site at [www.sdge.com](http://www.sdge.com) and enroll online.

Keep energy prices in check - With electric energy prices driven by supply and demand - it's a good idea to use energy efficiently, especially during peak hours of 11 a.m. to 6 p.m. Everyone's contributions, even if a little, can add up to a lot.

### Spanish Side

#### PROGRAMAS Y SERVICIOS PARA AYUDARLE A PAGAR SU FACTURA DE ENERGÍA



A Sempra Energy company

- **PROGRAMA HEAP** - Programa de ayuda para energía en el hogar, provee ayuda una vez al año a clientes que reúnen requisitos de ingresos. Llame al Departamento de Servicios y Desarrollo de la Comunidad al 1-800-433-4327 para mayor información.
- **BASELINE MÉDICO** - Provee servicio de energía con tarifas más bajas para clientes con necesidades documentadas de salud. Comuníquese a SDG&E al 1-800-411-7343 o a [info@sdge.com](mailto:info@sdge.com) para información y una solicitud.
- **PLAN DE PAGO NIVELADO** - Empareja las altas y bajas de sus facturas mensuales de energía al promediarlas. Este plan ayuda a su presupuesto y evita las sorpresas por cambios en las facturas. Comuníquese a SDG&E al 1-800-411-7343 o a [info@sdge.com](mailto:info@sdge.com) para mayor información.

Controle los precios de la energía - Con los precios de la energía regidos por la oferta y la demanda - es buena idea usar la energía con eficiencia, especialmente durante las horas pico de 11 A.M. a 6 P.M. Las contribuciones de todos, aunque sean pequeñas, pueden llegar a sumar mucho.

# ATTACHMENT C

## San Diego Gas & Electric Company Residential CARE Participation and Discounts

Month	Gas Discount	Electric Discount	Total Discount	Total Participants
Oct-99	\$149,661	\$662,727	\$833,535	125,441
Nov-99	\$170,808	\$639,950	\$810,758	123,920
Dec-99	\$298,717	\$670,749	\$969,466	123,137
Jan-00	\$338,512	\$634,662	\$973,174	128,953
Feb-00	\$280,669	\$665,547	\$946,216	129,362
Mar-00	\$294,767	\$630,448	\$925,215	129,844
Apr-00	\$219,664	\$660,533	\$880,197	127,807
May-00	\$185,246	\$556,994	\$742,240	127,841
Jun-00	\$169,935	\$649,029	\$818,964	127,804
Jul-00	\$180,881	\$674,885	\$855,766	133,084
Aug-00	\$161,533	\$659,306	\$820,839	145,127
Sep-00	\$177,742	\$652,040	\$829,782	146,318
<b>Grand Total</b>	<b>\$2,628,135</b>	<b>\$7,756,870</b>	<b>\$10,406,152</b>	

\*The September 2000 figure is reported as the total number of CARE participants.