

**PREPARED TESTIMONY OF NICOLIE BOLSTER ADDRESSING THE CONCERNS OF THE  
DISABILITY COMMUNITY REGARDING SOUTHERN CALIFORNIA EDISON'S PROPOSALS  
FOR RESIDENTIAL RATE DESIGN**

**SUBMITTED ON BEHALF OF THE CENTER FOR ACCESSIBLE TECHNOLOGY**

**CENTER FOR ACCESSIBLE TECHNOLOGY**

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## **I. Introduction**

1. This testimony is presented on behalf of the Center for Accessible Technology (CforAT) by Nicolie Bolster of the Disability Rights Education and Defense Fund (DREDF). Ms. Bolster's qualifications are set forth as Appendix A to this testimony. CforAT represents the interests of residential households in Southern California Edison's (SCE's) service territory, many of whom are low income, and all of whom will be subject to residential energy rates as determined in this proceeding.

## **II. Overview**

2. In my work at DREDF, I see general information about people with disabilities, and I am aware of the needs of this community. People with disabilities, including many elderly people, often live on fixed incomes and are disproportionately low-income. At the same time, many people with disabilities consume greater than average levels of energy due to their disability, and also bear a disproportionately heavy energy burden. I am aware of the Medical Baseline program, which can reduce the energy cost burden on some individuals with disabilities by providing greater amounts of energy at lower tier costs. However, not all people with disabilities qualify for, or are aware of, the Medical Baseline program.
3. In addition, even for those on Medical Baseline, the fact that it keeps program participants in the lower tiers means that these customers will be substantially affected by a rate design that increases the burden on lower tier energy consumption. Similarly, customers, including many CARE customers, who already minimize their energy usage and thus have little or no higher-tier energy consumption will be

strongly impacted by a rate design that increases costs for lower-tier energy use in order to reduce costs for customers who use enough energy to reach the higher tiers.

4. In preparing this testimony, I conducted direct outreach to organizations that serve the disability community, such as Independent Living Centers, as well as other organizations. I also spoke directly to a number of individuals with disabilities who are SCE customers, or received voice messages or emails from such individuals, most of whom responded to outreach flyers provided through various channels to reach people with disabilities or their caregivers. Through this outreach, I confirmed that many people with disabilities and others on low or fixed incomes are barely able to pay their utility bills now, and many are forced to juggle any combination of vital living expenses such as: rent, energy utility payments, other utility bills, medicine, transportation to doctors, and food.
5. I understand that CforAT's role in this proceeding is to advocate on behalf of vulnerable populations who would suffer harm and face a disproportionate burden if SCE's proposed rate design were adopted. The purpose of this testimony is to describe the potential harms and to relay the fears and sentiments expressed by low-income individuals with disabilities that would result if SCE's proposed rate design were adopted.

### **III. Nature of Outreach**

6. In order to understand the disability community's concerns about SCE's rate design proposals, I reached out to disability-oriented CBOs, including Independent Living Centers and other organizations to collect information from their staff regarding the

needs of their clients.<sup>1</sup> I also reached out to membership organizations such as Californians for Disability Rights, and I asked them to invite their membership to provide information to me directly about their experiences with SCE. A copy of the notice sent directly to CBOs is attached to this testimony as Appendix B. A copy of the notice distributed to members of the disability community through CBO mailing lists, newsletters and direct postings is attached to this testimony as Appendix C. I also reviewed direct public input from both Phase 1 of SCE's general rate case (A.10-11-005) and this Phase 2, including testimony from the Public Participation Hearings held in conjunction with Phase 1 and emails sent to the Commission about these proceedings, as provided by the Commission's Office of the Public Advisor.

#### **IV. Concerns of the Disability Community**

7. In all of the forums through which public input in general or input from the disability community in particular was gathered, similar themes have emerged that show the concerns of the disability community about rising rates and changes in rate design that will affect low-income customers. Throughout the disability community, and in particular for low-income disabled households, energy rate increases and rate design impacts would cause significant hardship for households that are already struggling to get by. People with disabilities and the elderly, as well as other low-income groups,

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<sup>1</sup> The specific organizations that I contacted include the Independent Living Center of Southern California (in Van Nuys, with a satellite office in Lancaster); the Service Center for Independent Living (in Claremont, with a satellite office in West Covina); the Community Access Center (in Riverside, with satellite offices in Palm Desert, Banning/Beaumont, and Desert Hot Springs; no information provided in response); the Independent Living Resource Center (in Santa Barbara, with a satellite office in Ventura; no information provided in response); Rolling Start, Inc. (in San Bernardino, with a satellite office in Victorville serving the counties of Inyo and Mono); Southern California Rehabilitation Services (in Downey); Disabled Resource Center (in Long Beach; no information provided in response); and the Dayle McIntosh Center (in Garden Grove).

have expressed anxiety and despair about rate increases and rate design impacts in every arena.

8. Most notably, through direct outreach to individuals and organizations within the disability community, people with disabilities and those who work with them have told stories of the harm that rate increases and rate design that disproportionately impacts low-income or low use households will cause.<sup>2</sup>
9. A prevalent theme that emerged in all of the consumer comments regarding SCE's proposed rate design is that people with disabilities are already struggling to pay for energy while also paying for other necessities such as rent, food, and medical care. Consequently, many households are forced to juggle payments to their utilities to ensure that they can meet other needs. Some people are already forced to make extreme and difficult choices; this will only get worse if these consumers are asked to pay more for energy.
10. Stories collected through representatives of Independent Living Centers and other organizations illustrate the hardships people currently face in paying for necessary basics. The level of need is striking. For example, Patty Hattar, an Independent Living Specialist at the Victorville office of Rolling Start, Inc. reported that a senior with diabetes who called with concerns about her utility bill stated that "cat food tastes pretty good."

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<sup>2</sup> Specific information and experiences collected from ILCs and their clients are set forth in detail in a table attached hereto as Appendix D. Organizations that I contacted but which did not provide any information are not included in the table, but are identified in footnote 1, above. Information from individuals who responded to outreach efforts through membership organizations or other efforts is set forth in detail in a table attached hereto as Appendix E.

11. Ms. Hattar further indicated that over half of the calls that come into her office concern utility bills, and that her clients report sacrificing food, transportation and medicine to pay for their utilities.
12. Another client of the Victorville office of Rolling Start, Inc. is a 71 year old woman who lives on her SSI (no food stamps) and cares for two grandsons. She was provided a list of food banks, but was struggling with the cost of gas to travel for food. Her older grandson is in school, and she cannot spare money for gas to allow him to come home on weekends to assist her with his brother, who has autism. Another client in Newberry Springs was forced out of her rented home because she could not afford utility service; fortunately, her church helped her locate a home with lower rent. Yet another client with Lupus, Fibromyalgia, asthma and third-stage kidney disorder is raising her granddaughter. She has gone without food to pay rent and utility bills, and she has lost multiple teeth, but she cannot afford to go to a dentist. Yet another blind client cannot afford to buy a white cane or feed his service dog. He eats from food pantries.
13. Terrence Henson, a Systems Change Coordinator with Southern California Rehabilitation Services in Downey reported that an elderly couple in Long Beach who both rely heavily on electricity to keep medical equipment (including oxygen tanks) functioning, eat free food donated through churches so that they can pay their electric bill. Because of the low quality of their diet, which has them living off of canned food that is high in preservatives, the client's health has suffered. The wife of the couple has fallen multiple times and been hospitalized because of her poor nutrition. She

reported having to eat soup for days on end, and feeling helpless and out of control because she cannot afford anything else.

14. Another client of Southern California Rehabilitation Services reports that he has had to choose between paying utility bills and buying medication. When Medi-Cal doesn't cover a medication, he just goes without it. His bills cause him to become depressed; he has been prescribed medication for his depression, but he cannot afford it, which causes the cycle of depression to continue. He recently had a bill of \$160 from SCE that he could not afford to pay; he obtained assistance from SCE, but was informed that such assistance is only available one time.
15. Another client of Southern California Rehabilitation Services is a 57 year old woman who is blind and diabetic, and who has high blood pressure. This woman lives alone on SSI. She has to maintain a constant temperature due to her diabetes, and she uses medical equipment that cannot be shut off. However, she has been forced to choose to pay for medication or doctor's visits over utility bills and she has been threatened with having her power shut off multiple times. She is frightened of losing power, because she has a friend who used to live in her same building who didn't use her air conditioning during the summer, and subsequently overheated and went into a coma. The friend has been in a coma for three years, and the client worries that the same thing will happen to her.
16. Julie Williams, a Systems Change Advocate at the main office of Rolling Start, Inc. in San Bernardino, described a woman with Lupes and asthma who lives in Highland and survives on her SSI fixed income. She uses a nebulizer daily, and she struggles to pay her utility bills; she has gone without medication and especially without

transportation to pay her SCE bill. One time when she was unable to pay her bill, her friend gave her money for it, but such help embarrasses her and she does not feel that she can rely on it.

17. Another client of Rolling Start, Inc. has diabetes and multiple other conditions. She has received assistance paying her utility bills from HEAP, and this has allowed her to improve her diet and bring her diabetes under control. She is worried that increasing energy costs will force her to choose between paying for utilities or for healthier food, and she risks aggravating her diabetes.
18. Representatives of other ILCs did not provide individual stories, but reported that they receive many requests for help from people who report difficulty paying for utility bills. They report that callers have no money for food, that homelessness is increasing and they need help trying to obtain necessary benefits. Summaries of the information provided by these ILCs are set out in the table attached to this testimony as Appendix D.
19. In addition to the information collected from CBOs, individuals reported stories of hardship. These stories are set forth in a table attached hereto as Appendix E. For example, a wheelchair user in Long Beach described juggling bills to pay for energy, food and medication. He cannot use food banks because none of the food banks near him are wheelchair accessible and he needs assistance to be able to leave his home so he often cannot arrive at the early times required to receive assistance. He indicated that “this month [he was] paying medicine before gas.”
20. A disabled woman who also lives in Long Beach said that she had to ask SCE for an extension on the due date for her bill in January, and that she is running out of food.



She has also delayed necessary dental care for herself and her son because Medi-Cal has increased the patient contribution and she cannot afford to pay it. This woman lives with her mother who is 91, blind (since age 32) and who has Alzheimer's, as well as her 20 year-old son with autism. She herself has traumatic brain injury from a car accident and fibromyalgia. She does not know what she will do when her mother passes and they lose her income.

21. A blind man from Goleta (near Santa Barbara) lives on a fixed income with his developmentally disabled brother. He describes turning off their electric water heater every day to limit energy costs, and only turning it on for half an hour to heat water for a shower.
22. A man from Monrovia is a quadriplegic who juggles bills and says that every penny counts. He notes via email that a rate increase for energy could mean not getting an extra can of soup or not being able to travel to a monthly doctor visit.
23. A retired school teacher in Santa Barbara was forced to work part-time to supplement his income to pay for necessities including electric heating in his home. He is now disabled and has had hip replacement surgery; he is concerned about paying his winter heating bills if he is not able to return to work.
24. A married couple in Covina are both disabled and they live on a fixed income. They have had to pay utility bills with credit, and the husband has gone without mental health care to afford their utility bills.
25. Multiple other SCE customers who are disabled, who have a disabled family member, or who care for a person with a disability, left messages or sent emails to report that they already suffer hardship in order to pay their utility bills, that they already make

difficult choices, and that any rate increase or change in rate design that would require them to pay more will make their situation yet worse. More information about such calls and messages is included in the table attached to this Testimony as Appendix E.

## **V. Additional Public Input**

26. In addition to the feedback I received from organizations and individuals in response to my outreach, I have reviewed the testimony provided by members of the public at the Public Participation Hearings held in Phase I of SCE's general rate case. A summary of the testimony provided at the PPHs is attached hereto as Appendix F.

27. Overall, 129 witnesses gave testimony concerning SCE at the six PPHs for which transcripts are available. Of these, 83 expressed concern about rate increases that will impact low-income households, including households containing seniors and people with disabilities.

28. The final form of public input related to SCE's general rate case, including Phase 1 and Phase 2, is information provided by members of the public to the Commission through the Office of the Public Advisor, which was provided to CforAT upon request.

29. I have reviewed the emails forwarded by the Office of the Public Advisor. The Office of the Public Advisor forwarded approximately 262 emails, from throughout SCE's service territory. They are primarily form emails concerned about rates increases. These emails are available in the public file for these proceedings, and have been circulated among the Commissioners' offices.

## **VI. Conclusion**

30. Low income households, including disabled households, are already struggling to pay their utility bills, and are already facing difficult and harmful choices between housing, food, medical care, transportation, and utility service. The people in these households are afraid of what will become of them if their SCE rates increase, and these fears are well-founded. The hardships that these households are currently experiencing are severe, and they will become worse if energy rates for low income and low use households are approved.