

Health-related programs and protections

PSEG Long Island works every day to deliver reliable power to every customer, 24/7. We recognize the particular importance of power to those who rely on life support equipment or face a serious health crisis. Please review these programs and protections to determine the best way that we can help you and your family.

Critical Care Program

For those who rely on life support equipment

If you or a member of your household relies on life support equipment, PSEG Long Island will continue to provide electric service as long as the customer provides a medical certificate from a doctor, local Board of Health, nurse practitioner or physician assistant. This protection will remain in effect only as long as the life support equipment is in use, as verified annually by a medical provider and the customer has demonstrated an inability to pay bills.

In anticipation of severe weather, PSEG Long Island will call the customer as a reminder to make advance preparations, with additional outreach during major events. Please be aware that **PSEG Long Island cannot guarantee priority power restoration**. Each customer is responsible for making alternative arrangements for any medical needs in the event of a power outage.

Medical Emergencies

A medical emergency applies when you or a member of your household has a serious illness or medical condition that severely affects his or her well-being and which would be aggravated by the absence of utility service. PSEG Long Island will continue electric service for 30 days as long as the customer provides a medical certificate from a doctor, local Board of Health, nurse practitioner, or physician assistant. This program **does not guarantee priority power restoration**.

Protection can be renewed for 30 days (acute condition) or 60 days (chronic condition) by providing additional medical certification and financial information that demonstrates an inability to pay current and past due charges. While a certification of medical emergency remains in effect, the customer remains liable for and must make a reasonable effort to pay utility charges.

Preparation is key

It is always our goal to prevent power outages, but that's not always possible. We encourage you to:

- Consider having a licensed electrician install a standby generator at your home.
- Establish a contact with your local fire and police departments and inform them of your health situation. Find out what assistance (transportation or first aid) they can offer during a power outage.
- Develop a network of friends, relatives and neighbors you can rely on for help during an extended outage.
- Let us know immediately if you change your telephone number or prefer that we contact you at a different number.

How can we help your family?

Our Critical Care and Medical Emergency protections are similar, but there are important differences in enrollment and renewal requirements. Medical Emergency protection is typically for short-term conditions and requires renewal every 30 to 60 days. Critical Care protects those with a long-term reliance on life support equipment, which the customer must verify annually. Only Critical Care offers the additional benefit of outreach from PSEG Long Island before and during major weather events.

However, neither program provides a guarantee of priority power restoration. All customers have a responsibility to arrange for medical needs during an emergency and remain liable for and must make a reasonable effort to pay utility charges.

Critical Care protection is for households where life support equipment is in use, the loss of power would result in *immediate hospitalization or jeopardize life* and the customer has demonstrated an inability to pay bills.

Requirements:

1. Completed enrollment form, including certification of reliance on life support equipment from a doctor, local Board of Health, nurse practitioner, or physician assistant on the provider's stationery.
2. Completed Determination of Consumer Resources (DCR) form, for account in arrears.

Qualifying life support devices include:

- Apnea monitor for infants
- Cuirass respirator
- Hemodialysis machine
- IV feeding machine
- IV medical infusion machine
- Oxygen concentrator
- Positive pressure respirator
- Respirator/Ventilator
- Rocking bed respirator
- Suction machine
- Tank type respirator

Medical Emergency protection is for households where a resident has a serious illness or medical condition that would be aggravated by the absence of utility service. Initial protection is for 30 days. Renewals last for 30 days, or in the case of a chronic condition, 60 days.

Requirements:

1. You may make an initial request by calling us at 1-800-490-0025.
2. Within five business days of a telephone request, you must submit a completed enrollment form and certification from a doctor, local Board of Health, nurse practitioner, or physician assistant on the provider's stationery that a medical emergency exists. If the account is in arrears, you must also submit a completed Determination of Consumer Resources (DCR) form.
3. Before the 30-day expiration, you can renew it by submitting:
 - a. Another certification from the medical professional stating the expected duration of the medical emergency and an explanation of either the nature of the medical emergency or the reason why the absence of utility service would aggravate the medical emergency, and
 - b. A Determination of Consumer Resources (DCR) form that demonstrates an inability to pay utility charges.

Please call us at **1-800-490-0025** for more information about these services or complete and return the attached form to PSEG Long Island.

Life Support Equipment (Critical Care) or Medical Emergency Enrollment Form



Customer/Patient Information (All fields required)

Name of Account Holder _____ PSEG Long Island Account Number _____

Patient Name _____ Date of Birth _____ Illness/Condition _____ Relationship to Account Holder _____

Service Address Street _____ City, State _____ ZIP Code _____

Contact Phone Number _____ Emergency Contact Name _____ Emergency Contact Phone Number _____

The New York State Department of Public Service requires that PSEG Long Island maintain accurate contact information, including a phone number, in the event of a power outage. By providing a telephone number you are giving consent to be contacted at that number about matters that are closely related to the utility service.

Is there an alternate power supply (generator) available at this location? YES NO

If yes, please specify equipment type: _____

Medical Certification

Provide a signed certification letter on the stationery of a medical doctor, nurse practitioner, physician's assistant or local board of health official. The medical provider must include the following information:

- ✓ Name, address and phone number of the medical provider.
- ✓ State registration number (doctors only).
- ✓ Name, address, medical condition of the patient, and, if applicable, the type of life-support equipment in use.
- ✓ Affirmation that the illness or condition exists or will be aggravated by the absence of utility service and its duration.

Life Support Equipment* (Critical Care program only)

The type of equipment* in use by the customer or household member, not the condition or diagnosis, determines eligibility. Please indicate the type of life support medical equipment used:

- | | | |
|--|---|---|
| <input type="checkbox"/> Apnea monitor for infants | <input type="checkbox"/> IV medical infusion machine | <input type="checkbox"/> Rocking bed respirator |
| <input type="checkbox"/> Cuirass respirator | <input type="checkbox"/> Oxygen concentrator | <input type="checkbox"/> Suction machine |
| <input type="checkbox"/> Hemodialysis machine | <input type="checkbox"/> Positive pressure respirator | <input type="checkbox"/> Tank type respirator |
| <input type="checkbox"/> IV feeding machine | <input type="checkbox"/> Respirator/Ventilator | <input type="checkbox"/> Other _____ |

*The following are generally not considered life support equipment: Oxygen PRN, sleep apnea machines for patients over 6 months of age (CPAP, BiPAP, APAP, VPAP), nebulizer, ICD, AED, pacemaker, spinal cord stimulator, life alert, air conditioning, refrigerated medication, electric bed, electric air mattress, electric lift, electric wheelchair/lift.

Please return this completed form and medical certification letter using one of the methods below to:

PSEG Long Island
Attn: Customer Safeguard Solutions

Mail: 15 Park Drive, Melville, NY 11747

Fax: 631-844-3635

Email: MEDICALNOTES@PSEG.com

Customer Signature _____ Date _____