

IL EE Stakeholder Advisory Group

Large Group Meeting

Monday, February 25, 2019

10:30 am – 4:00 pm

Midwest Energy Efficiency Alliance (MEEA)

20 N. Wacker Drive, Suite 1301, Chicago, IL

Attendee List and Meeting Notes

Attendees (in-person)

Celia Johnson, SAG Facilitator

Nick Hromalik, Midwest Energy Efficiency Alliance (MEEA), Meeting Support

Amanda Gramigna, Elevate Energy

Rachel Scheu, Elevate Energy

Will Klein, Green and Healthy Homes Initiative (GHHI)

Will Baker, Google

Amy Jewel, City of Chicago (Institute for Market Transformation)

Karen Lussion, IL Attorney General's Office

Kristol Simms, Ameren Illinois

Shelita Wellmaker, Ameren Illinois

Mike Brandt, ComEd

Julie Hollensbe, ComEd

Noel Corral, ComEd

Teri Lewand, ComEd

Jim Fay, ComEd

Mark Milby, ComEd

Julie Drennen, Center for Energy and Environment

Chris Vaughn, Nicor Gas

Randy Opdyke, Nicor Gas

Mark Szygiel, Nicor Gas

Christina Pagnusat, Peoples Gas & North Shore Gas

Omayra Garcia, Peoples Gas & North Shore Gas

Anthony Santarelli, SEDAC

Stefano Galiasso, Energy Resources Center, UIC

Briana Parker, Elevate Energy

Theo Okiro, Future Energy Enterprises

Michael D'Argo, GDS Associates

Anthony Tortomasi, CMC Energy Services

Tom McEntire, CMC Energy Services

Attendees (by phone)

Josh Arnold, Navigant

Dan Bailey, AECOM

Andrew Braatz, Nexant

Ben Campbell, UIC

James Carlton, People for Community Recovery

Ian Champ, CLEAResult

Jane Colby, Cadmus Group

Andrew Cottrell, Applied Energy Group

Allison Cross, Navigant
Jonathan Cullar, Power Takeoff
Ryan Curry, 360 Energy Group
Tim Cycyota, CLEAResult
Kegan Daugherty, Resource Innovations
Eric DeBellis, IL Attorney General's Office
Leanne DeMar, Nicor Gas
Shaun Dentice, CLEAResult
Kevin Dick, Delta Institute
Allen Dusault, Franklin Energy
Wael El-Sharif, 360 Energy Group
Julia Friedman, Oracle
Margie Gardner, Resource Innovations
Kevin Grabner, Navigant
Andrey Gribovich, DNV-GL
Mary Ellen Guest, Chicago Bungalow Association
Courtney Hanson, *No Company Provided*
Jan Harris, Navigant
Travis Hinck, GDS Associates
Hannah Howard, Opinion Dynamics
Cheryl Jenkins, VEIC (IL-TRM Administrator)
Jim Jerozal, Nicor Gas
Chester Kolodziej, Northern Illinois Building Summit
Larry Kotewa, Elevate Energy
Ryan Kroll, Michaels Energy
Chelsea Lamar, Navigant
Michael Li, U.S. Department of Energy
Thomas Manjarres, Franklin Energy
Keith Martin, Ameren Illinois
Anna McCreery, Elevate Energy
Jessica Minor-Baetens, Navigant
Jennifer Moore, Ameren Illinois
Jennifer Morris, ICC Staff
Phil Mosenthal, Optimal Energy, on behalf of IL Attorney General's Office
Victoria Nielsen, Applied Energy Group
Maria Onesto Moran, Green Home Experts
Deborah Philbrick, Elevate Energy
Patricia Plympton, Navigant
Zach Ross, Opinion Dynamics
Sam Mueller, Nexant
Elena Savona, Elevate Energy
Hardik Shah, Gas Technology Institute
Jordana Temlock, Bidgely
Harsh Thakkar, Franklin Energy
Evan Tincknell, Opinion Dynamics
Brian Tomkins, Metropolitan Mayors Caucus
Andy Vaughn, Leidos
Ted Weaver, First Tracks Consulting, on behalf of Nicor Gas
Peter Widmer, Power Takeoff
Ken Woolcutt, Ameren Illinois
Vince Gutierrez, ComEd

Michael Marks, Applied Energy Group
Laura Agapay-Read, Navigant
Atticus Doman, Resource Innovations
Fernando Morales, Ameren Illinois
Eric Robertson, Leuders, Robertson & Konzen
Emma Salustro, ComEd
Bryan Serinese, VEIC (IL-TRM Administrator)
Maged Kafafy, DNV-GL

Meeting Notes

Next steps/action items are indicated in red. Questions that require follow-up are indicated in yellow.

Opening and Introductions

Celia Johnson, SAG Facilitator

- This meeting includes a morning session on health and energy efficiency, as one follow-up to the equity and energy efficiency discussion during the September 2018 large group SAG meeting.

Health and Energy Efficiency Presentation

Will Klein, Green and Healthy Homes Initiative (GHHI)

- Elevate Energy: Brief intro of GHHI.
- Original GHHI focus and work was removing lead piping in Baltimore, MD. GHHI has expanded its work to address how to make connections with health care funding.
- Example Partners: ComEd, NRDC, Elevate Energy, Energy Foundation, National Housing Trust, Energy Efficiency for All (EEFA).

Unhealthy housing issues:

- 30 million families live in unhealthy homes
- 32% of families report energy insecurity

Family case study:

- Child with asthma keeps going to hospital but nothing is done to fix home problems.
- GHHI will identify multiple funding streams (for example HUD and WAP) to improve the home. This case study example resulted in \$48,000 saved from avoided medical costs.
- GHHI teams are cross-trained (not just electrician, but also person who knows how to improve windows or insulation).

Health impacts of EE:

- Direct impacts: electricity, air, water, hazards
- Other impacts: Electric baseload, HVAC, building envelope, plumbing (such as reduced moisture and mold).
- What we are trying to track is if improving the home then improves the likelihood of people staying in the home long term.
- Hospital community benefits: hospitals are required to serve anyone that comes through their doors, so they have a pool of funds from other work/services to use to cover “charity care” (i.e. uninsured patients). There is a push for hospitals to use this same pot of money to do more community programs.
- Example – Medicaid and CHIP State Plan: Michigan used these dollars to remediate lead hazards.

- Medicaid Managed Care Organizations: convince insurance companies to make improvements in homes to prevent health costs. Insurance can use money for this work, but convincing them is a challenge.
- Medicaid Demonstration Waivers: Home modification dollars provide flexibility in ways to keep seniors in their homes; GHHI thinks this could go to EE related improvements.
- Medicare Advantage: Similar to the demonstration waivers.

Benefits to EE:

- Achieving the whole home: shared resources, dollars that can cover things that EE dollars cannot.
 - NYSERDA example: Use ratepayer dollars to fund in-home education and health home repairs. NY requires Medicaid to develop value-based contracts vs fee-for-service. This could allow for funding for home improvements.
- Address health and safety barriers:
 - CT Dept of Public Health reallocating dollars to align and coordinate services across state agencies.
- Get credit for non-energy benefits
 - What is the Medicaid impact of a weatherization program? Performed study to assess child asthma costs. Additional \$2,400 is savings by having a home visit and upgrade.
- ComEd Call for Ideas Pilot example:
 - Looking to see if there are clusters of asthma kids with healthcare data.
 - Looking for a coordinated service delivery model that achieves the same savings
 - Phase I: all last year (Dec 2017 to Sept 2018)
 - Phase II: March 2019 to March 2020
 - Eligibility: had to be admitted to hospital without insurance
 - Noticed a lot of HVAC and lighting work that needed to be fixed so partnered with ComEd to do follow up via their multifamily program.

Q: When you map out the health conditions are you looking individual or community wide?

- A: We are starting with individuals, since we get our info from healthcare. But we are starting to look for clusters of individuals, including starting to target by zip code.

Q: Where do local efforts at the municipal level fit into this discussion?

- A: Some cities are working on this, for example Cincinnati.

Q: Did GHHI encounter any barriers when you tried to complete the intervention in Baltimore?

- A: Funding is always an issue. Coordinating a holistic approach is important. Sometimes you need to prioritize when you don't have enough funds for all fixes. We prioritize the family's needs, which sometimes creates tension (want to fix mold but don't have funding to fix roof, i.e. source of water damage).

Q: Do you partner with community-based organizations to overcome barriers of trust?

- A: Yes. We only do service delivery in Baltimore, all the other projects in the country are driven from the community and the local hospitals we partner with.

Q: How often are health and safety fixes too large to overcome?

- A: Sometimes mold and asbestos are such large issues that we cannot do weatherization. No larger statistic at this time.

- Elevate Energy Response: In single family homes we see major health and safety issues ~50% of the time.

Q: Do you focus on low income?

- A: We work almost exclusively with low-income communities.

Q; If a customer is facing disconnection do you still service the home or do you move on to a different home?

- Not sure if we receive that information ahead of time.

Discussion

1. ***What are the potential benefits of weaving together health and energy efficiency work in Illinois?***

- Could drive down the cost of acquisition. But more importantly could open up new customers to programs. There is an R&D aspect but that is less concrete.
- This would work well under Green New Deal and Medicare for All proposal.
- Lowered transaction costs.
- Customers may be more willing to take on more EE programs when they see the program through a health lens.
- Holistic approach to tackling low-income and poverty problems.

2. ***Do you see any potential barriers to a health and energy efficiency initiative in Illinois?***

- There are significant up-front costs.
- Stakeholder alignment especially around types of education.
- Data needs and privacy.
- Where do you draw the line on the health and safety dollars?
- Is there enough funding from the health sector as costs continue to rise?

3. ***Are there any additional opportunities for combining health and energy efficiency?***

- Schools could be another access point for both health and EE benefits.
- Partner with local community groups that are already working in targeted areas.

Written Responses to Health and Energy Efficiency Discussion Questions

- Participants were asked to answer three questions prior to open discussion. Responses were collected and redistributed – participants read someone else’s response out loud. All written responses are listed below.

Written Responses to Question 1: *What are the potential benefits of weaving together health and energy efficiency work in Illinois?*

- Connecting health and EE work could help incentivize people to take better care of their health because of “more tangible” savings of EE.
- Increased services for customers through existing EE weatherization.
- Higher health and safety could lead to decreased walk away rate.
- Additional funding sources could expand total budget, increasing the number of customers that could be served.
- This would work well under a Green New Deal along with Medicare for All. In general, this would reduce costs and improve quality of life.
- Providing a new / verified value stream to EE by way of health.
- Reduced costs for utilities to deliver EE to customers in need.

- Repairing health concerns in homes can lead to more EE work being completed. Contractors walk away from homes with major health and safety issues.
- This would benefit customers in need. Greater coordination of benefits could always help. Could be resource intensive.
- Brings together resources to save lives and provides more information about EE communities.
- Improved indoor air quality.
- Improved asthma and other respiratory outcomes.
- Improved housing stock that has multiple benefits: helps middle income households stay in homes; reduces turnover in multi-family; allows seniors to age in place; reduces energy costs; adds value to homes; improves neighborhood building stock; helps keep results affordable; climate and resiliency benefits.
- Three benefits:
 - The first clear benefit is the potential for broad, diverse funding streams, which allows the program(s) to be run cost-effectively for ratepayers and the utility.
 - The second benefit is there could be better targeting for low income EE projects, or at least a new way to identify priority neighborhoods and sites.
 - Third, health and EE is a great equation for improving community relationships and customer satisfaction.
- New way to partner with communities on achieving shared values and benefits.
- Lowered \$/kWh or \$/therm or EE programs.
- Ability to serve customers with EE who would have been able to participate due to health and safety issues.
- Stacked value and lower transaction costs.
- Leverage onsite contractor resources to minimize disruption and trips.
- Customer involvement in need.
- Educating customers on the energy market – commodity / distribution / energy efficiency.
- Other funding streams to partner and do more – healthcare, Medicaid.
- There are a myriad of benefits, the primary benefit being the breakdown of key barriers to EE and expanding both types of programs to previously untreated segments of the population. Quantification of benefits to ensure cost-effective delivery of EE into the future is a huge opportunity.
- Increasing access to EE programs for IQ customers.
- Public health benefits (long term) – indoor air quality and asthmatic patience.
- Bill assistance.
- Holistic approach to tackling income inequality and institutionalized poverty – health comes before labor force participation and educational achievement. Stabilizes people's energy costs with income stability.
- Future Energy Jobs Act; Green and healthy homes; connection to mold / asthma and weatherization remediation to support prevention.
- Healthier population leads to lower healthcare costs overall. Pairing health with EE is a good entryway to customers and leads to better education on the benefits of both.
- To work with a greater pool of residents to bring them to a healthy, safe and energy efficient home.
- I think it leads to a more comprehensive improvement of living and working spaces that diminishes ALL future costs in life and increases the quality of life as well.
- For EE, health can offer a new avenue to reach customers and a stronger value proportion to increase participation.

- Completing more projects for the community with a larger pool of funds.
- Additional opportunities to claim savings and improve the quality of life in our communities.
- Improved health, generally, for a large portion of IL homes.
- Reduced healthcare costs.
- Improved “efficiencies” for EE and healthcare.
- Simultaneously addressing energy insecurity and mitigating negative impacts of substantial housing and increased medical needs.
- Expanding supportive network of impacted and interested stakeholders to include hospitals, insurance companies, etc.
- The benefits seem obvious – if we have more funding sources, there will be a larger pool of dollars to fund more weatherization.

Written Responses to Question 2: *Do you see any potential barriers to a health and energy efficiency initiative in Illinois?*

- There could be backlash from people who think we are trying to meddle in their lives by combining two arguably separate programs and having it all branded as one initiative.
- Navigating different eligibility / funding requirements of different programs.
- Up front acceptance by multiple providers, allowing for participation of full group of targeted customers.
- Tracking and reporting outcomes might be difficult. Healthcare costs are separate and a whole other system from energy.
- Complexity of partnerships, associated contracts, braiding, etc.
- Costs and funding; availability of utility funding.
- High cost of health and safety repairs can lead to a barrier of EE. Often times homes need repairs above the budget allocated.
- Yes, there would need to be support from utilities and stakeholders that would enable the expansion of utility programs in a way that adds value to the utility EE programs (e.g. low cost / measure; fair attribution for savings; expanded savings opportunities).
- Fear that EE doesn't really get to the root cause.
- Health and healthcare are people-based. EE is building-based. However, improving the building stock will encourage and incentivize people to remain in homes.
- Aligning trade professionals / auditors / assessors can be difficult (i.e. not many assessors or energy auditors are exposed to or would voluntarily opt into a mold or lead certification program). Additional funding and staff time would be needed to get all the right people on board.
- If available health industry funds are not enough to cover what is needed before EE can step in.
- High upfront / coordination costs and barrier to entry.
- Checking all the boxes and attribution issues.
- Vary largely from home to home on the health and safety issues – roof leaks, mold, broken windows, heating equipment not working.
- Trust of the program and education.
- Time to implement.
- Customer satisfaction.
- Codes and compliance.
- Some studies have shown that there is an active population of educated consumers of programs and a larger untapped segment that has yet to engage in support programs.

From an equity standpoint delivery services to ALL in need, without bias, may pose a challenge.

- Lack of coordination or buy-in with relevant entities (utilities, community-based organizations, hospitals, non-profits).
- Lack of education on the link between health or EE for customers and other entities.
- Will there be enough funding from the healthcare side as costs continue to rise?
- Data needs / privacy issues.
- Ongoing uncertainty with Affordable Care Act, other health legislation at the federal level.
- Education and awareness downstream and upstream.
- Funding would likely be the largest barriers.
- Health / healthcare is individual; energy efficiency is building wide.
- The laws / policies do not allow for such a targeted initiative unless there is demonstrable evidence that such improvements are quantifiable.
- Sharing of medical information (privacy acts).
- If customers participate because of health benefits and EE benefits secondarily, is NTG an issue?
- Evaluation concerns – should utilities be able to claim savings for such a broad topic? Can / will EM&V be able to justify a high enough NTG savings that will allow for these programs / initiatives to continue?
- Funding; resources; stakeholder alignment.
- State legislators, federal regulators, health care insurance.
- Inadequate funding for addressing health and safety fixes.
- Lack of data and clear methodology for assessing health-related NEBs for cost-effectiveness purposes.

Written Responses to Question 3: *Are there any additional opportunities for combining health and energy efficiency?*

- Offering door-to-door service by providing EE products and family health.
- Are there other funding sources (development grants?) that could also participate if health and EE upgrades are able to show increased tenant retention or property value increases?
- Work with partners that are looking to reduce health costs. Lurie Children's Hospital is looking to make targeted investments to reduce ER visits due to asthma attacks; this would go well with an EE initiative.
- Customers often use supplemental heat to heat the home due to inoperative primary heat. Using electric ovens / heaters can cause an electric bill to increase.
- I think you will miss opportunities by not engaging organizations that are already in the community. Seems like school, health-related information would be helpful.
- Continue to address/find health and safety, structural issues, roof issues. Engage home insurance as well.
- EE gains might not be as great as health benefits. Consider EVs and insulation programs too.
- More holistically serve customers.
- Create industry partnership models that could be carried over to new industry such as finance, water, etc. New opportunities to braid together funding streams.
- Mostly indoor air quality, but potentially LEDs and elder care.
- Positive impact to the customer.
- Improved awareness of safety related to gas and electricity.

- Education on equipment and safety in case of a power outage.
- There may be an opportunity to introduce new technology options that were previously not considered cost-effective due to updates to cost-effectiveness testing that stem from a health and safety collaboration.
- Simultaneously addressing in-home repairs and EE needs for IQ customers.
- Creating partnerships with entities not typically engaged for EE or energy needs (hospitals, schools, foundations).
- Are there opportunities on the commercial side as well as residential?
- Can these issues be addressed in schools or other places where children and other potentially vulnerable populations spend long hours?
- Beyond low income audience:
 - Partnerships with American Lung Association, insurance companies.
 - Incorporate into employee health and wellness programs.
- More robust programs with higher funding to target specific populations and more flexibility to partner with healthcare providers on grants or other opportunities.
- Interest in helping / working with the same population.
- Interest in improving housing.
- These initiatives can be implemented at a local level and serve as a pipeline to integrate income qualified communities into the EE sector and construction sector.
- Possible partnership with environmental groups (EPA, etc.)
- More in-depth education about preventative healthcare benefits. This could lead to more funding sources to want to participate.
- Referrals from local health service entities for potential EE home assessments.
- Expanding EE in Illinois.
- Focus on more Chicago Housing Authority pilot s/ programs.
- Focus on more multifamily EE in Illinois.
- Integrating health impacts of EE into Illinois TRC test.
- Both health and energy efficiency will be improved if the weatherization effort ensures the resident has a path to more affordable energy bills. The utilities' EE departments should work with their revenue collection departments to assist the customer in all ways possible with affordability issues. The utility, for example, could do a bill review with that customer. Questions to be asked –
 - Is the customer paying exorbitant rates through an alt. energy supplier?
 - Has the customer taken advantage of available LIHEAP / PIPP benefits?
 - Does the customer need an affordable, more flexible deferred payment arrangement?
 - Does the customer need a medical certificate, thereby preventing disconnections?

Health and Energy Efficiency Follow-Up:

- A follow-up teleconference webinar will be scheduled for GHHI to present more information on healthcare funding sources.
- SAG Facilitator question: Should this topic be further addressed in SAG? If so, what are you interested in discussing? Thoughts and feedback are welcomed. Please send feedback to Celia@CeliaJohnsonConsulting.com by April 1.

ComEd Quarterly Summary Presentation (Q4 2018)

Julie Hollensbe, ComEd

- The ComEd presentation includes results from 2018, not only Q4.

- Overall about 10% over the savings goal and close to the budget amount for 2018.
- Business offerings:
 - 7,900 small business projects completed.
 - Approved five CHP feasibility studies, building the pipeline for 2019 and beyond.
 - Voltage Optimization: 40 substations for controlling voltage were completed.
- Residential offerings:
 - Steady participation across all programs
 - 235,000 rebates, recycled over 53,000 appliances, purchased over 11 million discounted LED bulbs.
 - New Instant coupon tools, over 9,000 thermostat transaction with a reservation to redemption rate over 50%.
 - Switched to one implementer on multi-family which is helpful especially in the joint Nicor Gas service territory.
- 2018 Income Eligible Results:
 - There was a significant ramp up in the second half of the year.
 - Achieved 153% of filed energy savings goal and 88% of average annual spend goal of \$42 million serving over 44,000 households.
 - Home energy upgrades: 1,900 homes weatherized. Expansion of Chicago Bungalow program into south suburbs.
 - Multifamily energy upgrades: 5,200 tenant units and 388 building projects
 - Public Housing: 2,500 tenant units, 90 building projects.
 - Affordable housing new construction: 9 projects completed, but expecting more in the future.
 - Food pantry LED distribution: 1.7 million LEDs distributed.
 - In 2019 all of the above programs will continue. We will include Nest E for Multifamily in 2019.
- New offerings in 2019:
 - Third party programs will include two new Manufactured Housing offerings.
- Krisol Simms, Ameren IL Q: How does ComEd's public housing program differ from what DCEO offered?
 - Julie Hollensbe will follow-up with Molly Lunn.

ComEd Research and Development Initiatives Presentation

Mark Milby, ComEd and CMC Energy Services

- ComEd Emerging Tech is our program for R&D.
- FEJA expanded the scope and funding for this program.
- 2018 Successes:
 - We have scaled dramatically: 3 staff, (from 1), \$13 million per year budget, the number of projects and partnerships have also scaled up (EPRI, LBNL). A new website will roll out soon with information about R&D projects and the RFP process.
 - Convened successful advisory group in 2017-18 to create vision, objectives, project selection criteria for R&D.
 - Onboarded a new contractor support team that allows us to have more projects occurring at once, and through subcontracting to have more projects approved.
 - 40 pilots are in progress to date.
 - Several new IL-TRM measures.

Ductless Heat Pump Pilot

- An air conditioner in reverse. This pilot will evaluate performance of ductless heat pumps in cold climates.
- Installed 80 heat pumps in 7 low-rise multifamily buildings.
- Focused on individual tenant education, but also used temperature lock-out in half the locations to determine if education would be sufficient with a larger rollout.
- Limitations: did not look at high-rises due to safety issues. Also did not look at mid-rise but will use pilot data to build simulations to forecast potential savings.
- Data security and integrity is important, we stripped the data of all personal identifying information.
- Used Ecobee thermostat for this pilot: Easy to use for customer and provides data.
- During polar vortex we had 15 of the 80 customers call with complaints. Used the situation to do additional education and remind customer of how the equipment works.

Q: How well did the system do vs what the manufacturer said it would do?

- A: System performance was what we expected.

Q: Any pushback on the install from tenant to building manager?

- A: This was a challenge, but the property managers were generally supportive, especially smaller companies.

Q: Did CMC do the education?

- A: Yes, we would circle back with each customer after the install. All education was done individually.

Q: Will there be longer monitoring to assess what happens as there is tenant turn over?

- A: We do quarterly surveys, and that will trigger a realization of a tenant change, and if so then can do re-education.

Q: Common areas an issue?

- A: Not really an issue, pumps were all installed in individual space.

Additional ComEd R&D Information

- Passive House Project:
 - Partnered with Slipstream and LUCHA.
 - Passive house is a much higher level of EE performance than ENERGY STAR: Triple paned glass windows, insulation, very tight building envelope, ductless heat pumps.
 - There is a control building and a treatment building to assess Passive House vs. ENERGY STAR.
- enVerid Adsorbent Air Cleaner:
 - Filters, cleans and recirculates air, minimizing the amount of cold outdoor air that you need to bring in.
 - Pilot includes 21 units installed in a downtown Chicago commercial tower.
- Income Eligible Seniors:
 - Direct installs and education pilot.
 - Pilot for 500 income eligible residential customers aged 55 or older.
 - This came about via subcontract through CLEAResult as a way to meet ComEd's computer security requirements that smaller contractors have a harder time meeting.

- 2019 Strategic Focus Areas for R&D:
 - Smart home energy management systems.
 - Smart commercial building control systems.
 - Energy/water nexus.
 - Midstream/upstream program design.
 - Industrial emerging technologies.
- Brief Overview of 2018 Income Eligible Call for Ideas:
 - 109 new ideas responses in Q2 2018. High quality responses; many new entities submitted ideas.
 - A ComEd webinar within the next month will provide additional information on selected initiatives; SAG Facilitator to distribute information to SAG.
- ComEd is interested in presenting more information about their unique partnership with the National Renewable Energy Lab at a future SAG meeting. SAG Facilitator to add to the tracking list for consideration.

Ameren Illinois 3rd Party Programs

Kristol Simms, Ameren Illinois

- \$8.35 million budget per year. FEJA requires 3rd party programs for electric utilities.
- 3rd party was approved by the Commission. Cadmus administered the RFP process.
- Goal to ensure 3rd party programs do not disrupt current offerings.
- Received feedback from stakeholders which resulted in some changes to the RFP.
- Received several bids including several school kit programs and one retail kit program.
- Selected two of the recommended programs: residential retail products program and school kits program.
- The Retail Products Program was not included in the original EE Plan, Ameren IL decided to include it in the 3rd party RFP.
- Q from PowerTakeoff: Interested in feedback on response to RFP, is that an option?
 - A: Ameren IL will check with Cadmus and their procurement teams on what can be provided.

ComEd 3rd Party Programs

Teri Lewand, ComEd

- FEJA requires ComEd spend no less than \$25 million per year on 3rd Party, and to have an independent evaluator.
- ComEd is also committed to spend \$6 million on income eligible from 3rd Party.
 - Received 45 bids, 6 were for kits. 15 were excluded due to minimum requirements that were not met.
- **Business programs:**
 - Public disadvantaged communities, new program to the portfolio
 - Grocery stores: software that optimizes refrigerant and lighting controls
 - Nonprofit orgs: direct service providers that have smaller than 400kW (i.e. those that need assistance the most) for direct install and project management and assessments.
 - Agricultural/Farm: provide assessments and incentives for dairies, hogs, etc., indoor ag facilities.
 - Small business kits: three different types of kits, primarily focused on rural but offered to entire service territory. Install of products
 - Telecommunications: lots of accounts under this code, focus on facilities with telecom equipment, HVAC and custom measures.
- **Income Eligible programs:**

- Food pantry distribution: LED bulbs for self-install.
- Community Action Agency kit distribution: distribution channel beyond just the CAA but also way to access income eligible community. LED bulbs and other product installs.
- New Manufactured Homes: upstream program, provides incentives to install above code measures in their new homes. Expensive program but think could have significant impact over three-year period.
- Existing manufactured Homes: weatherization, lighting, plumbing, plug loads, very comprehensive program.
- **Residential:**
 - Elementary Education Kits: free EE kits via elementary school curriculum and for self-install at home via kits.
- **2018 challenges:**
 - There were a large number of bids, which used a lot of staff time to evaluate.
 - Resources will be stretched with 11 new programs to manage.
- Q: What was the reason that so many 3rd party bids were not accepted?
 - A: There was a lot of duplication. Outside of outreach, there were a number of programs that were not new or innovative. Some programs also did not meet the \$2 million threshold. Other programs were behavior-based, which ComEd excluded from the RFP.

Other 2019 Initiatives

Upstream Food Service Pilot Presentation

Jim Fay, ComEd; Christina Pagusat, Peoples Gas & North Shore Gas; Randy Opdyke, Nicor Gas

- Pilot will test the market to see if this program works on a larger scale.
- Northern IL utilities are working with Frontier Energy (they operate the Food Service Technology Center) and the Gas Technology Institute.
- Pilot will allow enough time to build awareness and to align with capital purchasing and budgeting schedules (apx. 18 months for timing on being able to test effect in food service industry).
- This is our first pilot in the upstream market.
- Restaurants are 5 times more energy intensive than hotels and 7 times more energy intensive than retail. The pilot will focus on independent restaurants.
- Groups to focus on: Independent restaurants, restaurant chains, and non-commercial groups. Each of these groups have different decision-making structures in the supply chain.
- Market barriers:
 - Used equipment is common in the market.
 - Perception of higher first costs.
 - Getting owners to focus on the savings (they have many other competing demands).
 - Language barrier is an issue, especially in Chicago.
- Pilot will include working with equipment dealers and equipment manufacturers with direct-to-customer sales channels, as well as kitchen equipment suppliers
- Strategically intervening in the market to increase the use of this equipment, so we need to look at long term impacts.
- Planning to launch pilot in spring 2019.
- Working with Navigant on an evaluation approach.

- Using a market transformation lens, we need to have a baseline of the market before we intervene with the pilot.
- Long term planning for potential 2022-25 EE Plan cycle RFP offering (Phase III Implementation).

Nicor Emerging Technology Update Presentation

Randy Opdyke, Nicor Gas

- Nicor Gas has a standardized process for receiving submissions for emerging technology ideas. We use a Stage Gate Process (scoring and evaluation system).
- Since 2011 we have had 109 applications that have been submitted, with 9 active projects. 22 pilots completed to date.
- All savings behind these pilots are placed in reports and published online for transparency.
- Example: EcoFurn
 - Product claims to reduce energy bill by 20%.
 - Connects into your furnace, turns single-stage residential heating into two-stage with simple add-on device. (i.e. for your least efficient furnaces).
 - Not a fully scaled product yet, but only costs \$600 compared to replacing a whole furnace.
 - Assessing in the labs if it does what it says it does. As of now it is not learning about customer behaviors as good as the product stated it tracks/learns
 - This product will likely need to make additional changes or enhancements before it could be rolled out in the market.
- Example: Venturi Steam Traps
 - Solves process problems that occur.
 - No moving parts so the parts do not get locked up.
- Example: Unit Ventilator Room Air Diffuser
 - Sits on top of the unit ventilators, can easily self-install, improves air distribution in rooms.
 - Testing in 12 school classrooms in Downers Grove.
 - TRMv8 workpaper is being developed.
- Example: LowE Interior Storm Windows
 - Saves both gas and electricity, fits into the window frame, reduces drafts
- Example: Chemical Boiler Descaler
 - Dissolves water, increases efficiency
- Example: Boiler Array
 - Modular technology, demand response heating
 - Instead of two large boilers you have smaller boilers in an array.
 - Reduced gas consumption and ensures full efficiency by having a smaller boiler.
 - Reduced start-up costs, reduced standby losses
 - Demand response in less than 5 minutes
- Example: Commercial On Demand Hot Water
 - Tankless water heater array
 - Constant supply, reduces standby losses, saves natural gas
 - It is scalable, you can make an array to adjust to demand/needs.
- Example: Smaller Radiator Valves
 - Controls radiator heating for both hot water and steam radiators.

Closing and Next Steps

Celia Johnson, SAG Facilitator

- The next large group SAG meeting will be held on Tuesday, May 14th in Springfield.
- Upcoming meetings:
 - Market Transformation Savings Group on Monday, March 11 (teleconf.)
 - Non-Energy Impacts Working Group on Friday, March 22 (teleconf.)
 - Policy Manual Subcommittee on Wed., March 27
 - IL-TRM NTG Working Group kicks off in March for the IL-TRM Version 8.0 update