# Market Participant Impact Assessment

|  |  |  |
| --- | --- | --- |
| Type and number | **MDD Circular 00820** |  |
| Date and time | **17/01/2024** |  | Purpose | **For Review** |
| To | **Market Participants** |  | From | **MDD Co-ordinator** |

## Market Participant Impact Assessment (MP IA)

Please find attached the following MDD Change Requests (CR) that require an impact assessment by your organisation:

|  |  |  |
| --- | --- | --- |
| MDD CR Number | Party Raised By | Details of Change Request |
| M4443 | Elexon | Inclusion of Consolidated Charge Codes*Effective From Date: 21/02/24* |
| M4444 | STRK | Creation of new Embedded Distributor, new MTC in PES areas, new LLFCs and new NHH and HH Combinations*Effective From Date: 21/02/24* |
| M4445 | VATT | Creation of new HH Combinations*Effective From Date: 01/04/24 (These will be processed in MDD V344 with a Publish Date of 21/02/24)* |

A zip folder containing the change request forms can be found with this Circular at: <http://www.elexon.co.uk/news-events/mdd-circulars>.

The above changes will be submitted to the Supplier Volume Allocation Group (SVG) meeting SVG276 on 6 February 2024 for approval. Please return any comments you have on the attached forms by **17.00 on Wednesday 24 January 2024**. Please note that if no response is received, I will assume that you are in agreement with the proposed changes.

If approved, the changes will be published in **MDD Version 344**. You will be advised formally of this publication by another MDD Circular, after the SVG meeting.

**For more information, please contact Allan Toule on** mddc@elexon.co.uk

**Allan Toule**

**Digital Operations**

## Attachments:

Attachment A – Change Requests for MDD Version 344

Attachment B – UMS Charge Code Documentation for MDD Version 344

## Please return by 17.00 on Wednesday 24 January 2024

To: Allan Toule

Tel: 0370 010 6950 (BSC Service Desk)

Email: mddc@elexon.co.uk

### MDD Change Requests for Impact Assessment

* I agree/disagree\* with the changes proposed in M4443
* I agree/disagree\* with the changes proposed in M4444
* I agree/disagree\* with the changes proposed in M4445

Please delete as appropriate

## If you disagree with any of the changes proposed, please give details below:

## Name……………………………………………

##  Organisation………………………………………