Ameren Services Company (Ameren) – NCR01175

NERC Violation ID	Reliability Standard	Req.	Violation Risk Factor	Violation Severity Level	Violation Start Date	Violation End Date	Method of Discovery	Mitigation Completion Date	Date Regional Entity Verified Completion of Mitigation		
SERC2017018437	FAC-009-1	R1	Medium	High	6/18/2007 (when the Standard became mandatory and enforceable)	12/14/2018 (when Ameren corrected its last incorrect element Rating)	Compliance Audit	8/1/2019	TBD		
Description of the Violation (For purposes of this document, each violation at issue is described as a "violation," regardless of its procedural posture and whether it was a possible, or confirmed violation.)			During a Compliance Audit conducted from June 13, 2017 to October 3, 2017, SERC determined that Ameren, as a Transmission Owner, was in violation of FAC-008-3 R6. SERC determined that the violation started under FAC-009-1 R1 and ended under FAC-008-3 R6. Ameren did not have Facility Ratings that were consistent with its Facility Ratings methodology (FRM). During the on-site audit, the SERC audit team conducted facility walk-downs. SERC identified discrepancies between the FRM and the established element Ratings in the database for the Big River								
			one-line drawings. After the the accuracy of the physic Element (MLE), and estable review, Ameren identified to the Facility Ratings, whis facilities (all of the facilities there were 62 exceedance). This noncompliance started	the audit, and in response to cal components against the lished the correct Facility Ra incorrect element Ratings ich resulted in 29 Facility Ra es were derated) experience es during this time period. ed on June 18, 2007, when to was management oversigh	ek facility, neither of which impacted of a request for additional information current system drawings. Ameren reating. Ameren reviewed the Facility For 2,816 of 27,330 (10.3%) element ating decreases (with a range from .0 and exceedances of the correct Facility the Standard became mandatory and the for failing to implement a change of	n to determine the complete scope eviewed each element Rating to ensemble and complete scope in operations and complete sat 56 of 297 transmission Facilities (12% to 37.2%) and 27 Facility Rating Ratings. The number of exceedang denforceable, and ended on December of exceeding the complete states and ended on December of exceeding the complete states and ended on December of exceeding the complete states are to determine the complete scope and ended on December 2015.	of the discrepancies, Am fure they were consistent pared it with the Rating of s, 6 of which had both up increases (with a range fuces at the facilities range aber 14, 2018, when Ame	eren conducted a system with its FRM, identified the MLE for each Facinaries and de-rates. Are from 2.5% to 119.2%). It defends a content of the from one to 36 in a content of the from corrected its last in the from c	em walk-down to review d the Most Limiting lity. As a result of this meren made corrections Also, five of the 56 one year period. Overall, incorrect element Rating.		
Risk Assessment			This violation posed a moderate risk and did not pose a serious or substantial risk to the reliability of the bulk power system (BPS). Ameren's failure to establish Facility Ratings that were consistent with its FRM could have resulted in erroneous outage planning, violations of System Operating Limits, damage to Facilities, and incorrect coordination with interconnecting systems. However, the risk to the BPS was mitigated because all five facilities that exceeded the Facility Rating were limited to lower voltage, 138 kV transmission facilities. No harm is known to have occurred.								
Mitigation			To mitigate this violation,	Ameren:							
			 a. The change man b. The change man c. The change man 2) communicated the new 3) hired two independen 4) communicated the res 	nagement process for planr nagement process of unplant nagement process is an aution w process to the appropriate t consulting firms to compla	ete the walk-downs of Ameren's 297 ns to SERC staff on a quarterly basis	erifications on the design, the rating int verification on the components i cronic approval of the tasks and veri substation Facilities to identify any	s database accuracy and installed and the ratings of ifications prior to placing	to verify the construct database entry; and planned projects in-se	ed facilities are correct;		
Other Factors					m and considered it to be a neutral fa	actor in the penalty determination.					
			SERC awarded mitigating credit for Ameren's cooperation and settlement of the enforcement action.								
			SERC considered Ameren's	s compliance history and de	etermined that there were no releva	nt instances of noncompliance.					

Ameren Missouri (AUE) – NCR10248

NERC Violation ID	Reliability Standard	Req.	Violation Risk Factor	Violation Severity Level	Violation Start Date	Violation End Date	Method of Discovery	Mitigation Completion Date	Date Regional Entity Verified Completion of Mitigation		
SERC2017018436	FAC-009-	1 R1	Medium	Severe	6/18/2007 (when the Standard became mandatory and enforceable)	12/11/2018 (when AUE completed the Facility Rating changes)	Compliance Audit	12/13/2018	TBD		
Description of the Violation (For purposes of this document, each violation at issue is described as a "violation," regardless of its procedural posture and			During a Compliance Audit conducted from June 13, 2017 to October 3, 2017, SERC determined that AUE, as a Generator Owner, was in violation of FAC-008-3 R6. SERC determined that the violation started under FAC-009-1 R1 and ended under FAC-008-3 R6. AUE did not have Facility Ratings that were consistent with its Facility Ratings methodology (FRM). During the on-site audit, the SERC audit team conducted a facility walk-down of the Peno Creek and Pinckneyville facilities, and identified discrepancies between the FRM and the established								
whether it was a possib	oie, or confir	med violation.)	element Ratings at both walk-down of all AUE get with its FRM, identified to compared it with the Ratfacilities. AUE made correspond facilities, all of which we the number of exceedar. This noncompliance stars	generating facilities. After the nerating facilities to review to the Most Limiting Element (Noting of the MLE for each Facilities to the Facility Rating are derated, experienced exceptions at the facilities ranged from the facilities ranged from was management oversighted.	the audit and in response to a Request the accuracy of the physical compone MLE), and established the correct Facility. As a result of this review, AUE dies, which resulted in 15 Facility Rating eedances of the correct Facility Rating rom one to 161 during a one year per the Standard became mandatory and the for failing to implement a change of the for failing to implement a change of the standard became mandatory and the for failing to implement a change of the standard became mandatory and the for failing to implement a change of the standard became mandatory and the for failing to implement a change of the standard became mandatory and the for failing to implement a change of the standard became mandatory and the for failing to implement a change of the standard became mandatory and the for failing to implement a change of the standard became mandatory and the for failing to implement a change of the standard became mandatory and the for failing to implement a change of the standard became mandatory and the for failing to implement a change of the standard became mandatory and the for failing to implement a change of the standard became mandatory and the standard became mand	for Additional Information to determents against the current system drawifility Rating for all of its generating facts scovered that it did not establish Facts decreases (with a range from 1.8% to gs. As Osage 7 & Osage 8 share a corriod. Overall, there were 762 exceeds denoted and ended on Decemb	nine the complete scope ings. AUE reviewed each cilities. AUE reviewed the ility Ratings in accordance o 70.8%) and three Faci mmon bus, the exceedances during this time per er 11, 2018, when AUE of	e of the discrepancies, element Rating to ender Facility Rating used in the with its FRM on 18 lity Rating increases (2 nce is only on the buseriod.	AUE conducted a system asure they were consistent in operations and of its 63 generating 12.5%). Also, 10 of the 18 and not on each facility.		
Risk Assessment			This violation posed a moderate risk and did not pose a serious or substantial risk to the reliability of the bulk power system (BPS). AUE's failure to establish Facility Ratings that were consistent with its FRM could have resulted in the conductors, buses, and breakers overheating and failing, resulting in unit trips. The risk was moderate because the highest Facility Rating discrepancy at the AUE facilities was 70.8%, and five facilities had over 100 exceedances (161, 113, 110, 108, and 104). However, the risk was mitigated because AUE's total generation impacted by incorrect Facility Ratings was 1,436 MW, which was a small amount of generation in the MISO Reliability Coordinator (RC) area; therefore, the impact to the MISO RC area from AUE unit trips was small. Moreover, the 1,436 MW of impacted generation is 14.58% of AUE's total 9,849 net MWs of generation. No harm is known to have occurred.								
Mitigation			To mitigate this violation	n, AUE:							
			2) revised its FAC-008 pre3) communicated change	ogram procedure to include es to the procedure to Subjec report of all maintenance job	of its 63 generating facilities to verify a verification process to validate Fac ct Matter Experts; os created by the Energy Centers that	ility Ratings and to require an indepe	ndent reviewer to verify	accuracy of the Ratir			
			5) established a point of 6) created an internal co FAC-008-3;	reporting responsibility for a mmitment in the Ameren co	all generating units, which is docume ommitment tracking system to condu			every three years to e	nsure compliance with		
			8) completed an addition		Visio diagram changes; and meren's 63 generation facilities in Q1 ss to better defined the types of design			agrams.			
Other Factors		SERC reviewed AUE's internal compliance program and considered it to be a neutral factor in the penalty determination.									
			SERC awarded mitigating	g credit for AUE's cooperation	on and settlement of the enforcement	t action.					
			SERC considered AUE's c	compliance history and deter	mined that there were no relevant ir	nstances of noncompliance.					