Date of Hearing: April 21, 2026
Fiscal: Yes

ASSEMBLY COMMITTEE ON PRIVACY AND CONSUMER PROTECTION
Rebecca Bauer-Kahan, Chair
AB 1798 (Wilson) – As Amended April 16, 2026

SUBJECT: Genetic testing for life and disability insurance

SYNOPSIS

In 1990, the United States Department of Energy's Office of Science and the United States National Institutes of Health formally launched the Human Genome Project, an international scientific research collaboration aimed at mapping the human genome in its entirety. The fruits of this project were realized in 2003 when the project was declared complete. Since that time, there have been dramatic advancements in the ease and efficiency with which genetic data can be collected and analyzed.

As genetic sequencing becomes increasingly inexpensive and accessible, it is also becoming more ubiquitous. In addition to various medical applications, the past several years have seen the rise of a growing industry for direct-to-consumer (DTC) genetic testing products. Businesses such as 23andMe and Ancestry.com market these products as opportunities to better know oneself, based on their capacity to reveal individual traits, medical predispositions, ethnicities and nations of origin, and blood relationships to others.

A genetic test has the potential to uncover information about biological parentage and about inherited genetic traits that could reveal sensitive health conditions of parents or other relatives. Genetic data also derives particular sensitivity from the potential information that can be inferred about an individual. Already several genes associated with certain health conditions and behavioral traits have been identified, including some genotypes that have extremely high probability of leading to certain diseases later in life.

This bill seeks to protect people's genetic information by limiting the ability of life and non-health disability insurers to use genetic information for any insurance purpose other than paying benefits or for a therapeutic purpose, except under certain narrow circumstances.

This bill is sponsored by Insurance Commissioner Ricardo Lara and supported by a number of health and genetic testing organizations including the American Kidney Fund and Ancestry. It's opposed by several life and disability insurance organizations including the Association of California Life & Health Insurance Companies.

This bill was previously heard by the Insurance Committee, where it passed on an 11-5 vote.

EXISTING LAW:

1) Prohibits discrimination on the basis of genetic information under the Unruh Civil Rights Act and the Fair Employment and Housing Act (FEHA). (Civil Code § 51; Government Code § 12920 *et seq.*)

2) Prohibits, pursuant to federal law under the Genetic Information and Nondiscrimination Act (GINA), discrimination based on genetic information in group health plan coverage and employment. (Pub. Law 110-233.)

3) Subjects any person who improperly discloses genetic test results contained in a health care service plan applicant or enrollee's medical records, or pursuant to a genetic test requested by an insurer, to civil and criminal penalties. (Civ. Code Sec. 56.17; Ins. Code Sec. 10149.1.)

4) Prohibits a direct to consumer (DTC) genetic testing company from disclosing a consumer's genetic data to any entity that is responsible for administering or making decisions regarding health insurance, life insurance, long-term care insurance, disability insurance, or employment, or to any entity that provides advice to an entity that is responsible for performing those functions, except as specified. (Civ. Code § 56.181(f)(1).)

5) Prohibits a life or disability insurer from requiring a test for the presence of a genetic characteristic for the purpose of determining insurability other than for those policies that are contingent on review or testing for other diseases or medical conditions. (Ins. Code § 10148(a).)

6) Provides that, if a test is permissible and required pursuant to 6), the test be done in accordance with specified informed consent and privacy protection provisions, and the cost of the test be paid by the insurer. (Ins. Code § 10148(a) & (d).)

7) Prohibits discrimination made in the fees or commissions of agents or brokers writing or renewing a life or disability income policy on the basis of a test of that person's genetic characteristics. (Ins. Code § 10148(g).)

8) Prohibits life and disability insurers from failing or refusing to accept an application for insurance, from failing to issue insurance to an applicant, and from issuing insurance under conditions less favorable to the insured than in other comparable cases, except for reasons applicable alike to persons of every race, color, religion, sex, gender, gender identity, gender expression, national origin, ancestry, or sexual orientation; and prohibits considering race, color, religion, national origin, ancestry, and sexual orientation from, of itself, constituting a condition or risk for which a higher rate, premium, or charge may be required of the insured for that insurance, except as specified. (Ins. Code § 10140(a).)

9) Prohibits life and disability insurers from refusing to issue/sell or renew a policy, or from requiring beneficiaries to accept less than the full sum of the policy, solely because the person to be insured carries a gene which may, under some circumstances, be associated with disability in that person's offspring, but which causes no adverse effects to the carrier. (Ins. Code §. 10143.)

10) Defines "genetic characteristics" to mean any scientifically or medically identifiable gene or chromosome, or alteration thereof, that is known to be a cause of a disease or disorder, or that is determined to be associated with a statistically increased risk of development of a disease or disorder, and that is presently not associated with any symptoms of any disease or disorder. (Ins. Code § 10147(b).)

THIS BILL:

1) Prohibits an insurance institution, agent, or insurance-support organization from preparing or requesting an investigative consumer report that seeks an individual's full genome or genetic information.

2) Prohibits an insurance institution, agent, or insurance-support organization from seeking information in connection with an insurance transaction or make an adverse underwriting decision concerning an individual's full genome or genetic information except under the following circumstances:

   a. The genetic information is included in the medical record of the individual and is not sought from any other source of record.

   b. The genetic information is not derived from a direct-to-consumer (DTC) test.

   c. The insurance transaction pertains to a life or disability insurance policy requested by the individual with a face value in excess of $1.5 million.

3) Prohibits a life or disability insurer from cancelling, limiting, or denying coverage, establishing differentials in premium rates, conditions, or terms, or making an adverse underwriting decision based on genetic information unless the following is true:

   a. The genetic information is included in the medical record of the individual and is not sought from any other source of record.

   b. The genetic information is not derived from a direct-to-consumer DTC test.

   c. The insurance transaction pertains to a life or disability insurance policy requested by the individual with a face value in excess of $1.5 million.

4) Prohibits a life or disability insurer from requiring, requesting, or soliciting genetic information, using genetic test results, or considering a person's decisions or actions relating to genetic testing in any manner for an insurance purpose, except as necessary for the payment of benefits or for a therapeutic purpose.

5) Prohibits a life or disability insurer from requiring a person to undergo a test of the person's genetic characteristics to determine eligibility or insurability or for other insurance purposes unless:

   a. The genetic information is included in the medical record of the individual and is not sought from any other source of record.

   b. The genetic information is not derived from a DTC test.

   c. The insurance transaction pertains to a life or disability insurance policy requested by the individual with a face value in excess of $1.5 million.

6) Prohibits a life or disability insurer from asking a person if they or any member of their family have taken a genetic test or asking about the result of a genetic test.

7) Clarifies that the provisions of the bill do not prevent a life or disability insurer from accessing an individual's medical record as part of an application for insurance, provided the

insurer does not directly or indirectly consider or use genetic information of the individual or the individual's family, whether obtained from medical records or other sources, in underwriting or rating decisions.

8) Authorizes the Insurance Commissioner to promulgate reasonable rules and regulations and amendments and additions as necessary to administer the provisions of the bill.

9) Clarifies that an insurer does not violate the bill by receiving genetic information or the results of a genetic test, provided it does not directly or indirectly use the information or results in its underwriting or rating, and does not disclose the genetic information or genetic test in a way that violates the bill's provisions.

10) Increases the penalty for a person who either uses genetic information or genetic characteristics in a manner inconsistent with the bill's provisions, or negligently discloses genetic information or characteristics, to any third party in a manner that identifies the person to whom the test results apply from a maximum of $1,000 per violation plus court costs to a maximum of $5,000, to be paid to the subject of the test.

11) Specifies that a person who either knowingly, or with such frequency as to indicate a general business practice, commits an act specified in 12), above, shall be assessed a civil penalty in an amount not less than $1,000 and no more than $10,000 per violation.

12) In addition to the penalties specified above, it specifies that any life or disability insurer who violates the bill's provisions is liable for administrative penalties of not less than $1,500 and not more than $2,500 for the first violation, and not less than $2,500 or more than $5,000 for each subsequent violation.

13) Provides that any life or disability insurer that violates the bill's provisions with a frequency that indicates a general business practice or commits a knowing violation is liable for administrative penalties of not less than $15,000 and not more than $100,000 for each violation.

14) Specifies that an act or omission that is inadvertent and results in incorrect premium rates being charged to more than one insured shall be a single violation for the purposes of the section and provides the commissioner with the discretion to establish what constitutes an "act."

15) Provides the commissioner with the authority to assess penalties in accordance with the bill's provisions, in addition to any other fine, penalty, or remedy permitted by law, against life and disability insurers.

16) Defines "genetic information" for the purposes of the bill to mean information derived from genetic testing to determine the presence or absence of variations or mutations, including carrier status, in an individual's genetic material or genes that are scientifically or medically believed to cause a disease, disorder, or syndrome, or are associated with a statistically increased risk of developing a disease, disorder, or syndrome, which is asymptomatic at the time of testing.

COMMENTS:

1) **Author's statement**. According to the author:

> California has a responsibility to lead when it comes to protecting patients and advancing health equity. As genetic testing and biomarker screening become more widely used, we must ensure that these innovations don't deepen existing disparities or create new barriers to coverage. AB 1798 ensures that Californians are not penalized for taking proactive steps to understand their health. Genetic testing and biomarker screening should lead to better health, not to higher premiums, reduced benefits, or denial of coverage.

2) **Genetic testing.** In 1990, the United States Department of Energy's Office of Science and the United States National Institutes of Health formally launched the Human Genome Project, an international scientific research collaboration aimed at mapping the human genome in its entirety. The fruits of this project were realized in 2003 when the project was declared complete. Since that time, there have been dramatic advancements in the ease and efficiency with which genetic data can be collected and analyzed.

As genetic sequencing becomes increasingly inexpensive and accessible, it is also becoming more ubiquitous. In addition to various medical applications, the past several years have seen the rise of a growing industry for direct-to-consumer (DTC) genetic testing products. Businesses such as 23andMe and Ancestry.com market these products as opportunities to better know oneself, based on their capacity to reveal individual traits, medical predispositions, ethnicities and nations of origin, and blood relationships to others. When purchased, DTC genetic testing products provide a kit through which a sample, typically saliva, can be collected and mailed to the company for analysis. The company then provides results to the consumer, generally online, through landing pages where consumers can access their raw genetic data as well as inferences drawn from those analyses. The information that can be extrapolated or inferred from these data continues to grow each year, as the scientific understanding of genetics and genomics improves, and new uses for databases of such genetic information continue to emerge.

3) **The Genetic Information Privacy Act (GIPA).** A year before the 23andMe data breach, California enacted GIPA. Motivated by concerns about DNA testing companies sharing genetic information with third party groups including data brokers, law enforcement, and the government, the Legislature sought to establish required privacy and data security provisions for DTC genetic testing companies.[1] GIPA mandates companies receive customers' affirmative consent regarding the collection, use, maintenance, and disclosure of their genetic data; implement privacy and security practices to protect customers' DNA from hackers; and enable consumers to access and destroy their genetic data.[2] However, GIPA is specific to DTC genetic testing companies and does not account for individuals and private entities that may seek to use genetic data without the consent of the person whose genetic data is being used.

4) **Life insurance and non-health disability insurance.** Life insurance is a type of insurance product that entitles a person's beneficiaries to a financial benefit upon death. Life insurance can either be "term" life insurance or "permanent" life insurance. Term life insurance covers the individual for a specified period. Following that period, assuming the individual is still alive, the individual ceases to pay premiums, and a death benefit is no longer available. Permanent life

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[1] S.B. 41 (Umberg, 2021, *Chaptered*), Section 1. https://lis.calegis.net/LISWeb/faces/bills/billdetail.xhtml;jsessionid=yVifF7uzhe8sqpq1onLcO4D9jQdqFh9Y_SycZX0fMqhXTDmAol-R!-2067256646!-1005255573.

[2] Civ. Code, § 56.18 et seq.

insurance, on the other hand, is typically more expensive than term life insurance, and provides a guaranteed death benefit provided the individual continues to pay premiums. Unlike homeowners' insurance, auto insurance, and health insurance, life insurance is an entirely voluntary product.

Disability insurance provides a source of income if an individual can no longer work due to a disability. Private disability insurance can be used to supplement state disability insurance, which does not provide complete income replacement, especially for high earners. Like life insurance, private disability insurance is also entirely voluntary.

5) **Genetic nondiscrimination in insurance.** According to the Insurance Committee's detailed analysis, in 2008, Congress passed the Genetic Information Nondiscrimination Act (GINA), which prohibits discrimination based on genetic information in group health plan coverage and employment, but GINA does not address discrimination based on genetic information in life and non-health disability insurance.[3]

The ALS Association argues in support of the bill:

> The Genetic Information Nondiscrimination Act (GINA) was an important first step, but it leaves individuals vulnerable to discrimination in life, disability, and long-term care insurance. The American Medical Association has concluded that these gaps negatively impact clinical care and that stronger protections are necessary to support patient trust and engagement in genomic medicine.
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> Research consistently shows that fear of genetic discrimination is already harming patient care and slowing scientific progress. […] A randomized study found that 28% of individuals declined genomic research due to fear of insurance discrimination. At a population level, concern is widespread: over 60% of adults report worry that genetic test results could impact their access to life, disability, or long-term care insurance. [Citation]

In California, the Unruh Civil Rights Act prohibits discrimination on the basis of genetic information with respect to "the full and equal accommodations, advantages, facilities, privileges, or services in all business establishments of every kind whatsoever"[4], and the Fair Employment and Housing Act (FEHA) prohibits genetic discrimination in the housing and employment contexts.[5]

In the insurance context, California law prohibits life and disability insurers from refusing to issue/sell or renew a policy, or from requiring beneficiaries to accept less than the full sum of the policy, solely because the person to be insured carries a gene "which may, under some circumstances, be associated with disability in that person's offspring, but which causes no adverse effects to the carrier."[6] That provision specifically identifies genes including, but not limited to, Tay-Sachs trait, sickle cell trait, thalassemia trait, and X-linked hemophilia A. Provisions of Insurance Code also lay out specific criteria controlling the practice of underwriting on the basis of genetic characteristics for the life and disability insurance industries, with the following purpose:

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[3] Pub. Law 110-233.

[4] Civ. Code § 51(a).

[5] Gov. Code § 12921.

[6] Ins. Code § 10143.

> The purposes of this article are to establish standards regarding unfair discrimination among individuals of the same class in the underwriting of life or disability income insurance on the basis of tests of a person's genetic characteristics; to establish minimum standards for determining insurability which are sufficiently reliable to be used for life and disability income insurance risk classification and underwriting purposes; to require the maintenance of strict confidentiality of personal information obtained through a test of a person's genetic characteristics; and to require informed consent before insurers underwrite on the basis of a test of a person's genetic characteristics. […][7]

6) **Purpose.** According to the author, this bill is intended to protect consumer privacy and prevent discrimination based on a person's genetic information. The author further details:

> Existing state law allows insurers (writing life and disability income insurance products) to require genetic testing, in order to determine insurability for medically underwritten policies that are contingent on review or testing for other diseases or medical conditions. Such testing is subject to an applicant's consent and privacy protections. Existing law allows these insurers to limit benefits due to the presence of most genetic characteristics, so long as those limitations are in parity with other medical conditions presenting an increased degree of risk.[8]
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> In California, life and non-health disability insurers sometimes receive medical records that include genetic test results or biomarker results, even when the insurer did not specifically request or require testing. Because the insurer did not require or request the testing, the informed consent and similar protections in existing law do not clearly apply.[9]
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> Californians increasingly use genetic testing or biomarker results to understand their health risks. However, concerns have arisen over the use of adverse genetic test or biomarker results to deny coverage or increase premiums when an individual is not associated with any symptoms of any disease or disorder and thus has not been, and in fact may never be, diagnosed or treated for a related condition. Individuals should not be discriminated against due to their genetic traits or biomarker results. Health-conscious individuals should not be penalized because they proactively chose to undertake genetic testing.
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> Individuals should not be discouraged from obtaining genetic tests or biomarkers that could provide important health information to improve their health outcomes due concerns that insurers may require and use these tests.

7) **Analysis.** How this bill impacts insurers and the ability of consumers to obtain life and disability insurance is under the jurisdiction of the Insurance Committee. For this Committee, the question is whether the bill furthers the privacy rights of Californians. As discussed above, as genetic testing because more accessible and less expensive, more people are taking advantage of various direct to consumer tests, whether it is to determine their ancestry, obtain insight into their health and potential to develop catastrophic illnesses, or simply out of curiosity to find out what their genes can tell them.

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[7] Ins. Code § 10146.

[8] (Ins. Code §§ 10146-10149.1.

[9] Ins. Code § 10146-10149.1.

A genetic test has the potential to uncover information about biological parentage and about inherited genetic traits that could reveal sensitive health conditions of parents or other relatives. Genetic data also derives particular sensitivity from the potential information that can be inferred about an individual. Already several genes associated with certain health conditions and behavioral traits have been identified, including some genotypes that have extremely high probability of leading to certain diseases later in life. Unlike usernames, passwords, credit card numbers, and other identifying information often subject to data breaches, genetic data cannot be changed or divorced from the individual in the event it falls into the wrong hands. This immutability extends the lifespan of compromised genetic information indefinitely, increasing the scope and duration of possible exploitation, and further amplifying its already considerable sensitivity.

Taken together, the fact that genetic data is immutable, specific to an individual, revealing of sensitive information about kin and kinship, of ever-increasing informational value, and capable of revealing sensitive health information, renders this data unique even among categories of personal information in its sensitivity. Consequently, it is critical that privacy and consumer protection laws treat these data accordingly. This bill furthers that goal.

ARGUMENTS IN SUPPORT: Insurance Commissioner Ricardo Lara, sponsor of the bill, writes in support:

> The federal Genetic Information Nondiscrimination Act currently protects individuals from genetic discrimination in health insurance and employment, but does not apply similar protections to life or non-health disability insurance. California law permits insurers to utilize genetic testing with the applicant's consent and under specified privacy protections. However, when genetic or biomarker test results reach insurers inadvertently, such as through medical records, those safeguards vanish.
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> Californians are increasingly embracing genetic testing to learn about their potential health risks and make informed healthcare decisions. Yet insurers may reduce coverage or increase premiums based on these results, even for individuals who did not consent to sharing. This bill ensures that proactive, at-risk individuals are not discouraged from or punished for obtaining this important health genetic information. When consumers fear insurance consequences, they may avoid valuable genetic and biomarker tests. A 2023 Centers for Disease Control and Prevention survey indicated that 60% of respondents were concerned that results of genetic testing for higher risk of cancer would impact their life insurance. AB 1798 removes this barrier, promoting early detection, prevention, and better health outcomes.
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> Genetic information differs from traditional underwriting factors because it most often suggests a remote chance of future diseases rather than a reasonably anticipated risk. Medical experts emphasize that genetic tests cannot reliably predict if or when a disease will occur and should not be used to penalize healthy individuals.
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> Rapid changes in the field of genetic medicine, along with the ongoing development of new, genetically based treatments and preventive care, impact outcomes and underscore the unique need to protect genetic test results. Additionally, participation in whole genome sequencing is essential for research to develop treatments and therapies for genetic diseases. A 2016 study reported that 28% of individuals who declined whole genome sequencing cited insurance discrimination as their primary reason. Participants expressed that including the genetic information in a medical record was like a "ticking time bomb." AB 1798 would address

> these concerns by prohibiting insurance companies from using this information when it appears in a medical file. This protection is expected to increase participation in whole genome sequencing, supporting efforts to find cures and therapies for rare diseases.
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> The American Medical Association (AMA) and other medical organizations have long argued that genetic information requires special protections. The AMA notes that discrimination based on genetic information is particularly problematic because it targets individuals who have not manifested any symptoms, disease or disorder based solely on the possibility one might manifest in the future.
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> As more Californians use genetic testing and biomarker screenings to better understand their health, they should never have to worry that this deeply personal information will be turned against them. This bill closes a dangerous gap in our laws by banning insurers from using genetic or biomarker data to deny coverage or raise premiums.
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> Your DNA and your medical markers belong to you, not to an insurance company. Protecting consumer privacy and preventing discrimination ensures people can use the latest medical technology without putting their health, their coverage, or their most sensitive data at risk.

ARGUMENTS IN OPPOSITION: In opposition to the bill, the American Council of Life Insurers, the Association of California Life & Health Insurance Companies, and National Association of Insurance and Financial Advisors - California argues:

> At its core, life insurance works because both parties share the same material information at the time the policy is issued. Life insurance is a long-term promise. Once a policy is issued, an insurer cannot raise the premium, cannot cancel coverage so long as premiums are paid, and has only one chance to underwrite the risk.
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> That system functions because underwriting is based on complete and accurate information from both the applicant and the insurer. When both sides have the same material medical information, premiums reflect the true level of risk. This protects consumers, ensures long-term affordability, and supports the payment of claims decades into the future.
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> Restricting the ability of life and disability insurers to consider genetic test or biomarker results in underwriting goes far beyond encouraging testing. It fundamentally alters how these voluntary, individually underwritten financial products function. Under California law, insurers may not engage in unfair discrimination and may vary rates or eligibility only when supported by objective, valid, and up-to-date statistical and actuarial data. Risk classification based on medically relevant information is not discrimination. It is how life and disability insurance are priced. Removing one category of relevant medical information does not eliminate risk. It shifts that risk to other policyholders.
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> Genetic information reflects risk, not certainty. A genetic marker does not guarantee disease, timing, or severity. That is precisely why insurers do not treat it as a sole factor. It is one factor among many in a holistic underwriting evaluation that includes family history, lifestyle, medical records, and preventive care. Life and disability insurance are voluntary financial products and therefore individually underwritten and tailored to the applicant's medical profile and projected mortality or morbidity risk based on actuarially sound principles. Insurance Code Section 10140 already governs this process. If AB 1798 allows applicants to withhold material medical information, it undermines the balanced symmetry of

information these long-term contracts depend on and will force insurers to set premiums without a full and accurate picture of the risk they are insuring.

Further, the suggestion that insurers obtain genetic information without consent is misleading. Insurers cannot require genetic testing, do not ask during the underwriting process whether a consumer obtained a genetic test, do not underwrite based on commercial consumer testing, and only obtain medical records with the applicant's written authorization. Existing law, including Insurance Code Section 791, already imposes privacy protections on the collection and use of medical information. The policy consideration for AB 1798 is not unauthorized access to data. It is whether medically relevant information that already exists in an applicant's health file may be considered in underwriting.

Claims that underwriting practices deter lifesaving testing has not been supported with empirical evidence. Genetic testing has continued to expand in availability and use, as has the life and disability insurance marketplace. National research does not support the claim that life insurance is a barrier to genetic testing. Americans overwhelmingly trust physician-recommended genetic tests. Insurance concerns rank extremely low compared to issues like convenience and confidentiality. A recent article1 on genetic testing underutilization noted access to genetic counselors, eligibility, and cost as the topline deterrents to genetic testing.

Similarly, the claim that this bill closes a "loophole" in federal law fails to recognize that Congress carefully considered this issue when it enacted GINA. Congress intentionally limited GINA to health insurance and employment. Life and disability insurance were excluded from GINA because they are voluntary, long-term financial contracts that rely on accurate, upfront underwriting. That distinction was deliberate. As previously noted, life insurers get one chance to underwrite a risk that can be on the books for 50 or more years. That is why it is imperative that both the life insurer and applicant have the same information about the applicant's mortality and morbidity risk at the time of application.

Regarding the argument that AB 1798 will promote access and affordability for Californian consumers, limiting access to material risk information will likely increase adverse selection pressures over time, resulting in higher premiums and reduced availability. What may appear protective in the short term can create instability in the long-term. Even a small number of improperly priced policies can skew actuarial assumptions and create upward pressure on the cost of life insurance, potentially hurting the very people the Legislature is seeking to help.

Finally, AB 1798 appears to overlap with ongoing work under SB 354, also sponsored by the Department of Insurance, which would significantly amend Insurance Code Section 791. Stakeholders have been negotiating SB 354 for nearly a year, and concerns about the use of genetic testing in life and disability underwriting have not been raised previously. It is unclear if this proposal is intended to supplant those efforts or if it should be considered in addition to those efforts. If the latter, layering additional statutory changes onto an already complex undertaking raises serious actuarial and drafting concerns.

REGISTERED SUPPORT / OPPOSITION:

Support

Insurance Commissioner Ricardo Lara / California Department of Insurance (Sponsor)

ALS Association
American Kidney Fund
Ancestry
Angioma Alliance D/b/a Alliance to Cure Cavernous Malformation
Bleeding Disorders Council of California
California Chronic Care Coalition
California Life Sciences Association
Children's Specialty Care Coalition
Chronic Disease Coalition
Cure Mapt Ftd
Curegrn
Eb Research Partnership
Equality California
Force: Facing Our Risk of Cancer Empowered
Genedx
Genetic Als & Ftd: End the Legacy
Global Colon Cancer Association
Natera, INC.
National Urea Cycle Disorders Foundation
Oakland Privacy
Ovarian Cancer Research Alliance
Rare & Ready Coalition
Rasopathies Network
The Association for Frontotemporal Degeneration
The Everylife Foundation for Rare Diseases
The International Pemphigus and Pemphigoid Foundation
Triage Cancer
U.S. Renal Care

Opposition

American Council of Life Insurers
Association of California Life & Health Insurance Companies
National Association of Insurance and Financial Advisors - California

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