

Date of Hearing: June 30, 2026

ASSEMBLY COMMITTEE ON HEALTH
Mia Bonta, Chair
SB 869 (Weber Pierson) – As Amended June 15, 2026

SENATE VOTE: 29-4

SUBJECT: Restaurant menus: added sugar warnings.

SUMMARY: Requires, on or before January 1, 2029, a chain restaurant offering a standard menu beverage item with high added sugar content, as defined, to display on its menus an added sugar icon immediately adjacent to each standard menu beverage item with high added sugar content, as specified. Requires those chain restaurants to display at the point of sale a specified factual warning statement explaining the added sugar icon. Specifically, **this bill:**

- 1) Requires, on or before January 1, 2029, a chain restaurant offering a standard menu beverage item with high added sugar content to display both of the following:
 - a) An added sugar icon prominently, clearly, and in a conspicuous manner on its menus, immediately adjacent to each standard menu beverage item with high added sugar content, indicating that the added sugar content of this item exceeds one-half the total daily recommended limit. Requires that if a standard menu beverage item is listed or delineated by beverage size on a menu, the added sugar icon to be displayed prominently, clearly, and conspicuously adjacent to the beverage item listing and to each corresponding size with high added sugar content. Requires, if the beverage sizes are listed on a menu without the corresponding beverage item names, the added sugar icon to be displayed prominently, clearly, and conspicuously adjacent to each size for which any standard beverage offering available in that size has high added sugar content.
 - b) The following factual warning statement prominently, clearly, and conspicuously at the point of selection: “(Insert added sugar icon here) indicates that the added sugar content of this item contains or exceeds one-half of the total daily recommended limit.”
- 2) Defines the following for purposes of this bill:
 - a) “Chain restaurant” means a food facility that is both of the following:
 - i) Restaurant or similar retail food establishment including a cafe or deli that serves food for immediate consumption and that is located within another retail establishment, regardless of whether the retail establishment owns the cafe or deli;
 - ii) Part of a chain with 20 or more locations doing business under the same name and offering for sale substantially the same menu items, regardless of the type of ownership of the locations.
 - b) “High added sugar content” to mean 50% or more per serving of the daily reference value for added sugar used by the United States Food and Drug Administration (FDA) on January 1, 2026, to calculate the percent daily value for nutrition labeling of food.

- c) “Menu” to mean the primary writing, regardless of how the writing is divided, of a chain restaurant from which a customer makes an order selection, including, but not limited to, all of the following:
 - i) Drive-through menus;
 - ii) Electronic menus; and,
 - iii) Menu boards.
- d) “Point of sale” to mean a place where a customer may view menu options and make their selection when purchasing food from a chain restaurant.
- e) “Standard menu beverage item” to mean a beverage item that is prepared or poured at, and listed on a menu of, a chain restaurant and that is intended to be consumed by drinking, including a fountain drink, a blended beverage, or a variable beverage item (a beverage is listed as a single item and comes in different flavors, varieties, and combinations). Specifies that “standard menu beverage item” does not include any of the following:
 - i) Prepackaged beverage items with added sugar content labeling that are served directly to customers;
 - ii) Beverage items appearing on a menu for less than 60 days per calendar year or fewer than 90 consecutive days in order to test consumer acceptance;
 - iii) Beverage items without high added sugar content that are then modified or customized by the customer either while ordering or while at a beverage dispenser;
 - iv) Beverage items that contain alcohol; and,
 - v) Frozen dairy products that are intended to be eaten with a spoon.
- f) “Third-party platform” to mean an internet website, application, or other online platform from which consumers can access a chain restaurant’s menu.
- g) “Added sugar icon” to mean an image of a sugar cube inside a black triangle.
- h) “Beverage size” to mean a description of the volume of a beverage, including but not limited to small, medium, large and variations thereof, or the number of fluid ounces in a beverage.

EXISTING LAW:

State Law

- 1) Establishes the California Retail Food Code (CRFC) to provide for the regulation of retail food facilities. Establishes health and sanitation standards at the state level through the CRFC, while enforcement is charged to local agencies, carried out by the 58 county environmental health departments, and four city environmental health departments

(Berkeley, Long Beach, Pasadena, and Vernon). [Health and Safety Code (HSC) § 113700, *et seq.*]

- 2) Establishes misdemeanor penalties for violations of the CRFC with a fine of up to \$1,000, or up to six months in the county jail, or both, unless otherwise specified. Allows a permit to be suspended or revoked by a local enforcement officer for violations, under a specified process that includes the ability for a permit holder to request a hearing. [HSC §§ 114395 and 114405]
- 3) Defines a “food facility” as an operation that stores, prepares, packages, serves, vends, or otherwise provides food for human consumption at the retail level. Excludes various entities from the definition of a “food facility,” including a cottage food operation, a church, private club, or other nonprofit association that gives or sells food to its members and guests, and not to the general public, at an event that occurs no more than three days in any 90-day period. [HSC § 113789]
- 4) Requires a food facility, as defined in federal law as a chain restaurant with 20 or more locations, to comply with federal menu labeling requirements that provide calorie and other nutritional information. Provides for local enforcement of the menu labeling requirement, and provides for a fine of between \$50 and \$500 for a first violation, between \$100 and \$1,000 for a second violation in a five-year period, and a fine of between \$250 and \$2,500 for subsequent violations. [HSC § 114094]
- 5) Defines “restaurant” as a retail food establishment that prepares, serves, and vends food directly to the consumer. [HSC § 114094 (c)]

Federal Law

- 1) Defines “chain restaurants,” for purposes of disclosing nutritional information on menu items, as a retail food establishment that is part of a chain with 20 or more locations doing business under the same name (regardless of the type of ownership of the locations) and offering for sale substantially the same menu items. [21 United States Code § 343(q)(5)(H)]
- 2) Defines “menu or menu board,” for purposes of federal requirements regarding nutrition labeling of standard menu items in chain restaurants, as the primary writing of the restaurant from which a customer makes an order selection, including, but not limited to, breakfast, lunch, and dinner menus; dessert menus; beverage menus; children's menus; other specialty menus; electronic menus; and menus on the internet. Determining whether a writing is or is part of the primary writing of the restaurant from which a customer makes an order selection depends on a number of factors, including whether the writing lists the name of a standard menu item, and whether the writing can be used by a customer to make an order selection at the time the customer is viewing the writing. The menus may be in different forms, such as booklets, pamphlets, or single sheets of paper. Menu boards include those inside a restaurant as well as drive-through menu boards at covered establishments. [21 Code of Federal Regulations § 101.11(a)]

FISCAL EFFECT: According to the Senate Appropriations Committee, unknown potential General Fund costs for the State Department of Public Health (DPH) for state administration. Unknown ongoing costs for local health agencies for enforcement. Costs to counties for

administration would be potentially reimbursable by the state, subject to a determination by the Commission on State Mandates.

COMMENTS:

1) **PURPOSE OF THIS BILL.** The author states that as a physician, she and many others know that excessive consumption of added sugar is associated with increased risk of obesity, type 2 diabetes, heart disease, and other chronic health conditions. The author continues that sugary beverages are a significant source of added sugars in the American diet and are often consumed without a clear understanding of how much sugar they contain. The author continues that consumers frequently make purchasing decisions quickly, especially in restaurant settings, and may not have access to detailed nutrition information at the point of selection. The author states that clear, standardized labels placed directly on menus can help address this information gap. The author concludes that this bill addresses this information gap by requiring chain restaurants with 20 or more locations to display a clear and conspicuous added sugar warning icon next to beverage items that contain high levels of added sugar.

2) BACKGROUND.

a) **Daily Value for Added Sugars.** Added sugars include sugars that are added during the processing of foods (such as sucrose or dextrose), foods packaged as sweeteners (such as table sugar), sugars from syrups and honey, and sugars from concentrated fruit or vegetable juices. They do not include naturally occurring sugars that are found in milk, fruits, and vegetables.

According to the FDA's webpage titled, "*Added Sugars on the Nutrition Facts Label*", the Daily Value for added sugars is 50 grams per day based on a 2,000 calorie diet.

b) **Added Sugar Consumption.** Americans on average consume much more added sugars than recommended (more than 67 grams). Sugar occurs naturally in all foods that contain carbohydrates, such as fruits, vegetables, grains, and dairy. Common sources of added sugar are flavored yogurts, ready-to-eat cereals, cookies, cakes, candy, most processed foods, and sugar sweetened beverages. Sugar is also present in items such as soup, bread, cured meat, and ketchup. Generally, sugar sweetened beverages are the largest source of added sugars, including carbonated and noncarbonated soft drinks, fruit drinks, and sports and energy drinks. For example, a 20-ounce bottle of popular sodas, energy drinks, and ice teas can contain more than 60 grams of added sugars. A 2020 study found that more than 20% of fast-food or quick-service restaurant customers purchased sugary drinks containing at least 200 calories (50 grams of added sugars) during their visit.

c) **Impacts of excess sugar intake.** A 2023 study published in the *British Medical Journal* titled "Dietary sugar consumption and health: umbrella review" found that dietary sugar consumption had harmful associations with health outcomes, including obesity, type 2 diabetes, cardiovascular disease, overall cancer mortality and all cause mortality. Excess consumption of sugar, especially in sugary beverages, also contributes to weight gain by tricking the body into turning off its appetite-control system. Liquid calories are not as satisfying as calories from solid foods, so it is easier for people to consume extra calories when drinking sugary beverages.

- d) New York City’s (NYC) Warning Icon for Added Sugars.** According to a press release issued by the NYC Health Department titled “New Added Sugars Warning Rule Goes Into Effect,” in October 2025, the NYC Health Department implemented a rule requiring chain restaurants to identify menu items high in added sugars. NYC chain restaurants must now post an icon on their menus next to any prepackaged food or drink or non-packaged equivalent that contains 50 grams or more of added sugars, the daily recommended limit for a 2,000 calorie diet. The rule also requires chain restaurants to warn consumers of the health dangers associated with eating and drinking too many added sugars over time, such as an increased risk of type 2 diabetes, weight gain, and tooth decay. The law applies to almost 4,000 restaurants in NYC that are part of chains that have 15 or more locations nationwide.

NYC is the first in the nation to implement a warning icon for added sugars. Calorie information and sodium warnings are already found on menus and menu boards across NYC chain restaurants, and initial studies show that added sugars icons and health warnings improve consumers’ ability to recognize high-sugar items and may reduce the amount of added sugars ordered. The added sugars warning icon allows consumers to quickly identify pre-packaged and non-packaged equivalent products that exceed nationally recommended limits for daily added sugars consumption. The aim is to help consumers make more informed choices about the foods and beverages they are purchasing. Most added sugars consumed in U.S. diets come from processed and packaged foods.

- e) Menu Labeling Requirements for Chain Restaurants.** Federal menu labeling requirements requires chain restaurants with 20 or more locations operating under the same business name with substantially the same menu, and “other similar” eating establishments, to provide nutrition information related to standard menu items.

Covered establishments must disclose the number of calories contained in standard items on menus and menu boards. For self-service foods and foods on display, calories must be listed in close proximity and clearly associated with the standard menu item. Businesses must also provide, upon request, the following written nutrition information for standard menu items: total calories; total fat; saturated fat; trans fat; cholesterol; sodium; total carbohydrates; sugars; fiber; and protein. In addition, two statements must be displayed—one indicating this written information is available upon request, and the other about daily calorie intake, indicating that 2,000 calories a day is used for general nutrition advice, but calorie needs vary.

- f) Impact of Warning Labels.** In late March 2020, Mexico announced front-of-pack warning labels (FOP-WLs) on packaged foods and beverages to address diet-related non-communicable diseases. According to a research article published in the journal *Social Science & Medicine* titled, “Changes in sales of packaged food and beverages, energy and nutrients after the implementation of front-of-pack warning labels in Mexico,” this policy, implemented in October 2020, aims to inform consumers about the excessive content of calories and health-harming nutrients (added sugars, sodium, and saturated fats) while encouraging producers to reformulate their products to reduce the number of FOP-WLs on these products. FOP-WLs provide nutritional information using black octagons to indicate “excess” calories, added sugars, sodium, saturated fat, and trans-fatty acids when these exceed predefined thresholds. The article highlights that although

overall sales volume remained stable, reductions in calories, added sugars, saturated fats, and sodium were observed after the policy implementation. The article states that this pattern is likely evidence of product reformulation in response to the policy, suggesting that FOP-WLs contributed to reducing the sales of calories and health-harmful nutrients in packaged foods and beverages in Mexico.

The article further notes that in Chile, the first country to implement FOP-WLs, the policy reduced food and beverage purchases and encouraged reformulation. For example, among “high in” food and beverages, purchases decreased by 23.8% in calories, 36.7% in sodium, and 26.7% in sugars compared with the counterfactual scenario. The proportion of products with any “high in” label also decreased from 51% to 44%, suggesting product reformulation. In Peru, FOP-WLs led to sugar reductions in beverages and saturated fat in foods. Despite initial concerns raised by the food industry, they were able to reformulate products to avoid warning labels. These findings suggest that mandatory FOP-WLs influence food purchasing behavior and promote product reformulation.

- g) What does this bill do?** This bill requires chain restaurants to include a warning label on the menu next to a beverage which contains high added sugar content to mean 50% or more per serving of the daily reference value for added sugar used by the FDA on January 1, 2026. As described in a) of the Background above, the Daily Value for added sugars is 50 grams per day based on a 2,000 calorie daily diet. As such, this bill would in effect require restaurants to include an added sugar warning icon on their menus next to items that have 25 grams of added sugar or more.
- 3) SUPPORT.** American Heart Association (AHA) and American Diabetes Association (ADA) are the co-sponsors of this bill and state in support that this bill would require large chain restaurants with 20 or more locations nationwide to display a warning icon next to standard beverage menu items that contain high added sugar content equal to 50% or more of the recommended daily limit. AHA and ADA continue that by introducing these standards, this bill takes an important step toward improving the dietary environment for Californians and protecting them from early risk factors tied to Type 2 diabetes, obesity, and cardiovascular disease. AHA and ADA continue that restaurants are a frequent source of food for American families, with families dining out at an average of four to five times each week. AHA and ADA state that restaurant foods can contain high levels of salt and added sugars, including sugary drinks that can exceed the recommended daily intake in a single serving. AHA and ADA state that sugary drinks are the number one source of added sugars in U.S. diets. AHA and ADA state that consuming too many sugary drinks can lead to heart disease, dental caries, Type 2 diabetes, and obesity. AHA and ADA highlight that in 2015, New York City implemented sodium menu icons for chain restaurants, and a 2025 peer-reviewed study found declining hypertension rates, particularly among women and Black residents, following implementation. AHA and ADA continue that this bill does not restrict choice, it simply ensures transparency, giving consumers the information they need to take control of their own health. Californians deserve to have clear, easy-to-understand information at the point of purchase. AHA and ADA conclude that this bill promotes heart-healthy habits, fosters environments where consumers have access to balanced meal options, and encourages greater awareness among consumers about the importance of nutrition.
- 4) OPPOSITON.** The Latino Restaurant Association (LRA) opposes this bill and states that this bill imposes rigid and duplicative requirements that would create significant operational

and financial burdens—particularly for minority-owned restaurants that are already navigating a challenging economic landscape. LRA continues that outlined in existing law, chain restaurants are already required to provide detailed nutritional information, including sugar content, both on menus and through accessible formats such as digital platforms and in-store materials. LRA continues that this bill would require additional warning icons and disclosures on every menu and menu board, despite the fact that this information is already readily available to consumers. LRA states that for many Latino-owned businesses—especially those operating multiple locations—these requirements would necessitate costly menu redesigns, reprinting, and operational changes that provide little added value to consumers while imposing real financial strain on operators. LRA concludes that the cost of compliance with additional mandates does not remain with the restaurant—it is passed on to consumers.

- 5) **OPPOSE UNLESS AMENDED.** The California Restaurant Association (CRA) and the California Fuels and Convenience Alliance (CFCA) oppose this bill unless amended and state under current law, restaurants and similar retail food establishments part of a chain are already required to 1) designate, on the menu, the number of calories in a standard menu item, and 2) provide customers with detailed nutritional information for both food and drinks, including sugar. CRA and CFCA state that the very same restaurants targeted by this legislation already provide detailed, transparent nutrition information for consumers, which is conveniently available through various mediums such as on-site, online, and in apps. Requiring these same restaurants to produce warning icons and text on every single menu and menu board would be duplicative, given how accessible this information already is. CRA continues that by implementing yet another menu labelling mandate, this bill would crowd out other essential information that eating establishments would otherwise provide to guests, which customers look for in order to make their dining decisions. CRA states that while innocuous as a dish description may seem, establishments invest real time, effort, and funds into developing and crafting details such as these, and this bill would essentially serve as a restriction on what restaurants can and cannot share on their very own menus due to the limited “real estate” on menus and menu-boards. CRA concludes that menu labelling mandates of all kinds add tremendous cost, and there is simply no choice but to pass those costs onto guests.
- 6) **RELATED LEGISLATION.** SB 977 (Weber Pierson) would require a chain restaurant that sells a children’s meal to offer at least one children’s meal that meets specified minimum nutrition standards. SB 977 passed the Assembly Health Committee with a vote of 15-0 on June 23, 2026.
- 7) **PREVIOUS LEGISLATION.**
 - a) SB 68 (Menjivar), Chapter 741, Statute of 2025, requires a chain restaurant with 20 or more locations to provide written notification of major food allergens it knows or reasonably should know are contained as an ingredient in each menu item, commencing July 1, 2026 either directly on the food facility’s menu or using a digital format, including but not limited to a using a quick response (QR) code that links to the food facility’s digital menu. Requires if a food facility elects to provide the major food allergen information in a digital format, the food facility to also use an alternative method to provide the information to customers who are not able to access the information in the digital format. Specifies that an “alternative method” includes, but is not limited to, any

of the following: a separate allergen-specific menu, an allergen chart, an allergen grid, an allergen booklet, and other written materials.

- b) SB 764 (Weber Pierson) of 2025 would have required a chain restaurant that sells a children’s meal to offer at least one children’s meal that meets specified nutritional requirements. SB 764 was vetoed by Governor Newsom, who stated, in part:

“This bill regulates restaurants in a way that is unnecessary and overly burdensome. Parents understand their children’s needs and how to determine appropriate meals for them when eating at restaurants.”

- c) SB 347 (Monning) of 2019 would have established the Sugar-Sweetened Beverages Safety Warning Act to require a safety warning on all sealed sugar-sweetened beverage containers, as specified. Would have additionally required the safety warning label to be posted in a place that is easily visible at the point-of-purchase of an establishment. SB 347 was not heard in Assembly Health Committee.
- d) SB 1192 (Monning), Chapter 608, Statutes of 2018 requires restaurants that sell children’s meals to make either water, milk, or a nondairy milk alternative the default beverage that is offered with the children’s meal.

- 8) **AMENDMENTS.** To address stakeholder concerns and provide restaurants with additional flexibility, the author proposes to amend this bill to increase the threshold within the definition of high added sugar content (which triggers the icon requirement) from 50% of the total daily reference value to 100% of the daily value for added sugar and make related conforming changes.

REGISTERED SUPPORT / OPPOSITION:

Support

American Diabetes Association (co-sponsor)
 American Heart Association (co-sponsor)
 American Academy of Pediatrics, California
 American College of Obstetricians & Gynecologists - District IX
 California Chapter American College of Cardiology
 California Chiropractic Association
 California Chronic Care Coalition
 California Dental Association
 California Hospital Association
 California Medical Association (CMA)
 California Podiatric Medical Association
 California State Alliance of YMCAs
 Center for Science in the Public Interest
 Informed Policy Advocates
 Public Health Institute
 Scripps Health

Opposition

American Beverage Association
California Restaurant Association
Latino Restaurant Association

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