



BAN ON THE USE OF GENETIC TESTING INFORMATION IN LIFE INSURANCE



Summary of changes

- From 8 October 2026, decisions about whether to offer life insurance or the terms of the offer can no longer rely on assessments that solicit or use genetic test results.
- This means a genetic test result cannot be used to decline or limit cover, or increase the premium charged regardless of when the test was taken.
- Life insurers should not ask you for any genetic test results or if you have had, or are considering taking, a genetic test. This includes tests taken before or after the commencement of the ban and also applies to testing of your genetic relatives.
- You may choose to volunteer a favourable genetic test with written consent if you think it may help your application.
- Insurers can still ask for and use other information about your health, including any existing disease, signs or symptoms of possible illness, and family medical history.
- If you think a life insurer has breached the ban, you can take action (see below for information).

Changes from 8 October 2026

The Government has introduced a ban on the use of genetic test results and other related information to assess and price (underwrite) life insurance.

This ban protects genetic test results that may show a future risk of disease, and certain other related information about whether you have taken or plan to take a genetic test.

However, the ban does not apply to information about diagnosed diseases where signs and symptoms have manifested, even if the disease is a genetic one (see [Information that still needs to be provided](#)).

The ban stops life insurers from relying on underwriting that uses or solicits genetic test results.

- Solicitation includes asking for, incentivising, or otherwise encouraging someone to take a genetic test (e.g. requiring you to take and/or provide a genetic test before you will be given life insurance).

The ban applies to new policies of life insurance that start, or existing policies that are varied, on or after 8 October 2026. The ban applies to all types of life insurance including:

- death,
- total and permanent disability (TPD),
- trauma, and
- income protection.

This ban means you can be confident that you can consider, plan, and undertake a genetic test without worrying about it impacting your ability to get life insurance cover.

Why the Government made the changes

Genetic testing can help save lives and supports the prevention, diagnosis, and monitoring of a range of conditions including cancers and other diseases.

Genetic testing tells people about their genetic makeup. If someone knows they have a genetic predisposition to a health condition, this can support them to make informed health decisions and take earlier action to reduce their risk of developing that condition.

Some people have delayed or chosen not to have genetic testing out of fear that they will need to tell a life insurer about their results, and this could affect their ability to get life insurance in the future. People should not avoid potentially life-saving genetic testing because they are worried about its impact on life insurance.

Information life insurers cannot use

From 8 October 2026, life insurers cannot decide whether they offer life insurance (and the terms they offer it under) where any of the following was solicited or used during the assessment of the life insurance application:

- your genetic test results (however, individuals may volunteer test results – see **What if I have a test that shows I don't have a genetic predisposition?**);

- whether you have been recommended to take a genetic test;
- whether you have had or plan to take a genetic test; and
- any of the above in relation to any of your blood relatives.

Note: 'You/your' is used here for simplicity. The ban applies to the person the life insurance would cover, who may or may not be the person lodging the application for insurance.

The above information is protected by the ban. This protection means you should not be asked for any of the above information during the process of applying for life insurance.

In addition:

- it does not matter if a genetic test was taken, recommended, or planned before the start date of the ban – it is still protected by the ban;
- the ban applies no matter how the life insurer gets the protected information. For example, even if your information is accidentally provided by your doctor, the life insurer cannot use it as part of its assessment.

It is important to note insurance providers are unable to access your My Health Record. For more information visit My Health Record or website www.health.gov.au/topics/health-technologies-and-digital-health/my-health-record.

What is a genetic test?

A genetic test is any test conducted to identify genetic information or predict your future disease risk based on your genes. This includes tests that:

- analyse your DNA, RNA, or chromosomes;
- look for genetic variants linked to disease risk (such as BRCA1 or BRCA2 variants for cancer risk); or
- analyse substances in your body – such as proteins or biomarkers – when this test is specifically conducted to detect, infer or predict genetic variants or predict your future disease risk.

Importantly, these tests are designed to tell you about your genetic information, including whether you already have a genetic condition, or your genetic risk of future disease(s).

What is not a genetic test?

Tests that measure your current health status are **not** genetic tests, even if they are taken because:

- you have a genetic disease and are investigating its impact on your current health status; or
- you know you have a predisposition, or a family member has a disease that is genetic in nature, and you are testing to see if you have also developed the disease.

Life insurers can ask for results of these tests and consider them as part of underwriting. Tests that are not genetic tests include, but are not limited to:

- blood tests measuring cholesterol, blood sugar, or other current health markers;
- tests that diagnose a disease you currently have (such as a cancer biopsy);
- heart scans, X-rays, or other imaging tests; and
- pathology tests that show current illness or disease.

However, if any of these tests are being conducted for the purpose of detecting, inferring, or predicting your genetic information, they may be considered a genetic test under the ban.

Information that still needs to be provided

The ban does not stop life insurers asking for or using other relevant health information to assess and price life insurance, if they do so in line with other laws. This includes the below information.

Note: life insurance applicants have a duty to take reasonable care not to make a misrepresentation to a life insurer during the life insurance application and assessment process (and in some cases, there is a positive duty to disclose information). If you are aware of any of the below information and do not provide it if asked, this may impact your cover.

For further information, see **Example of what does and does not need to be provided**. If you're unsure about what information needs to be provided to an insurer, you should speak to your treating medical practitioner or a genetic counsellor.

Clinically diagnosed, manifested genetic diseases

The ban does not stop life insurers asking if you have a manifested, clinically diagnosed genetic disease, and if so, the name of that disease.

A disease has 'manifested' if you have any medical signs or symptoms of the disease. In practice, this means that you have a known genetic predisposition to a disease, and you:

- 1) develop signs or symptoms of the disease; and
- 2) your treating doctor has clinically diagnosed you with the disease.

If you are asked about this by a life insurer as part of the application and assessment process, you have a duty not to misrepresent this information.

For the purposes of the ban, a clinical diagnosis can only be made by your own treating medical practitioner, based on:

- your medical history;
- their medical examination of you; and

- results of relevant medical investigations you have had done (such as medical tests and scans).

Signs and symptoms

If you have any signs or symptoms of a possible genetic disease, but not a clinical diagnosis of that disease yet, then your duty to not misrepresent may mean that you need to provide this information if asked by a life insurer as part of the application and assessment process.

The difference between this and clinically diagnosed diseases is that you only need to provide information about the sign(s) or symptom(s) you have (e.g. high cholesterol) while if you also have a clinical diagnosis (above) you need to provide the name of the disease you have been diagnosed with if asked (e.g. familial hypercholesterolaemia).

Family medical history

Medical history of your blood relatives may need to be provided, including if they have any clinically diagnosed, manifested genetic disease. However, you do not need to provide information about if they have had or are planning on taking a genetic test, or any genetic test results.

Non-genetic medical tests

The ban does not stop life insurers asking if you have taken any medical tests that are not genetic tests (see **What is not a genetic test**).

What about if I know I have a genetic predisposition?

If you know you have a genetic predisposition because of a genetic test result, you do not have to reveal the existence of this predisposition to an insurer. The fact that you have a predisposition supported by a genetic test counts as a genetic test 'result', which is protected.

Common genetic predispositions include BRCA1 or BRCA2 variants; Huntington disease; and Lynch Syndrome. However, there are many other genetic predispositions associated with different conditions, and new predispositions continue to be identified as genetic knowledge and testing evolve.

Note: if the predisposition has progressed to signs or symptoms of a disease, and/or a clinical diagnosis, this information may need to be provided if asked (see above).

What if I have a test that shows I don't have a predisposition?

If you have a genetic test that shows that you have not inherited the gene variant/s that are associated with a disease that runs in your family, you may want to provide this to the insurer (as it may counteract information about your family history of the disease).

You (or certain authorised representatives) can volunteer these results with written consent. Once volunteered, genetic

test results can only be used in the assessment of your application if the outcome does not disadvantage you.

What about information held by medical practitioners?

The ban applies regardless of where the protected genetic information may be sourced from. This means that life insurers cannot solicit or use information from any source, including from records held by a person's treating medical practitioner(s).

Medical practitioners can therefore assure patients that they can undertake genetic testing without being worried that their practitioner will have to tell a life insurer about their result (this includes if they have a genetic predisposition supported by a genetic test).

However, the ban does not prevent life insurers from asking medical practitioners about and using other relevant health information, including: signs or symptoms of a possible disease; where the practitioner has made a clinical diagnosis after a genetic disease has manifested in the patient; or non-genetic testing done on the patient.

Example of what information does and does not need to be provided

The below provides an example of what information is protected by the ban and what may need to be provided to a life insurer if asked when you are applying for, or varying, life insurance.

Family history

You have a known family history of a BRCA1 variant, including family members who have been diagnosed with breast cancer, and/or ovarian cancer.

- The ban protects information about any genetic testing you or your genetic relatives have had. This means you don't need to tell the insurer that your genetic relatives have a BRCA1 variant.
- However, if asked by a life insurer, you have a duty to not misrepresent this information so may need to tell the insurer your family history of breast and/or ovarian cancer.

Planning for a genetic test

You speak to your treating doctor about your family history, who recommends you undergo testing. You agree to the genetic test.

- The fact that you have considered having a genetic test, or have been recommended to take a test, and the fact that one is planned is all protected by the ban and the life insurer should not ask about it.

Known predisposition

You take the genetic test, and it finds you also have the BRCA1 variant (which means you have a predisposition for related cancers). However, you do not have any known cancer.

- Your BRCA1-positive test result is protected by the ban, and a life insurer should not ask about it.
- You do not need to tell the insurer that you have taken the genetic test, or the results.

Progression to symptoms

Several years after the genetic test that shows your BRCA1 variant, you experience unusual symptoms (e.g. abdominal swelling) but the cause is not yet known (for example, you might not have seen a doctor about it, or it might still be under investigation).

- If asked by a life insurer, your abdominal swelling may be a relevant symptom that you have a duty to not misrepresent.

However, there is still no obligation to tell the insurer that you have a BRCA1 variant or that you have had a genetic test.

Progression to a clinical diagnosis

After investigations and clinical examination, your treating doctor clinically diagnoses you with ovarian cancer. You now have symptoms of a disease (manifestation) and a clinical diagnosis.

- If asked by a life insurer, your duty to not misrepresent information may mean you need to tell the insurer:
 - the name of your clinically diagnosed disease; and
 - (if known) information about the characteristics, natural history, or prognosis of the disease, and/or information about the intended treatment of the disease (even if any of this was informed by a genetic test e.g. pharmacogenetic testing). Your doctor can help you provide this information.
- However, the following information is still protected by the ban:
 - the fact you have a BRCA1 variant; or
 - any genetic test results themselves (including any post-diagnostic or pharmacogenetic genetic testing).

Complaints and support

Resolving an individual dispute with a life insurer

If you believe a life insurer has breached the ban, you should first raise a complaint with the life insurer. If you are not satisfied with the response to your complaint, you can report your complaint through the below avenues.

Australian Financial Complaints Authority (AFCA)

AFCA is the main body responsible for resolving disputes between life insurers and individuals. The outcomes you can get from AFCA are broad and will depend on the nature of your dispute.

AFCA independently assists consumers to make and resolve complaints about financial firms, including life insurers. AFCA's complaint resolution service is free to access. AFCA can make determinations on whether the ban has been breached, and issue orders for remedies.

For more information, visit: <https://www.afca.org.au/make-a-complaint>, or you can contact AFCA by:

Phone: 1800 931 678

Email: info@afca.org.au

Australian Human Rights Commission (the Commission)

Alternatively, you may wish to raise your complaint with the Commission which can help resolve complaints about discrimination and breaches of human rights. The Commission can investigate complaints and facilitate resolution of the matter with the insurer.

For more information, visit:

<https://humanrights.gov.au/complaints/how-to-make-a-complaint>

Financial Rights Legal Centre – Insurance Law Service

The Insurance Law Service at the Financial Rights Legal Centre is a free and independent legal service available to the public to get advice to help with dealing with insurers or in an insurance dispute.

The Insurance Law Service can be contacted by phone on 1300 663 464 (Monday to Friday 10am – 1pm (AEST/AEDT)).

For more information, visit Financial Rights' website at:

www.financialrights.org.au

Reporting a life insurer to Government

Australian Securities and Investments Commission (ASIC)

If you suspect an insurer has breached the ban, you can report your concerns to ASIC, which has oversight of life insurers' conduct under the ban.

ASIC does not intervene in individual disputes, resolve complaints, give legal advice, or act to recover money. ASIC will not intervene in individual cases to help resolve specific disputes (see **AFCA** and **the Commission** options for information). However, ASIC may act directly against a life insurer to issue infringements or take the insurer to court to

seek penalties for breaches. ASIC uses consumer reports and data to detect systemic issues that may warrant this action.

For more information, visit: <https://www.asic.gov.au/about-asic/contact-us/reporting-misconduct-to-asic/>.

Frequently Asked Questions (FAQs)

Can a life insurer increase my premium, deny me cover, or place restrictions on my cover because of a genetic test result?

No. The ban prevents life insurers from using genetic test results to refuse cover, increase premiums, apply exclusions, or otherwise offer less favourable terms.

Can I choose to provide a genetic test result if it helps my application?

Yes. You may volunteer genetic test results with written consent. A life insurer can only use those results if doing so does not disadvantage you.

Can a life insurer still ask about my family medical history?

Yes. Life insurers may still use information about family history of disease, including where the disease is genetic in nature.

You may need to provide information about any diseases that your blood relatives have been diagnosed with. A blood relative includes your children, siblings, parents, grandparents, aunts, uncles and cousins. This does not include the genetic test results of your relatives, which remain protected.

Does the ban protect information about diagnosed diseases?

Life insurers may still use information about clinically diagnosed diseases that have manifested in signs or symptoms in you or your relatives, even if the diagnosis was informed by a genetic test.

Does the ban protect information about known genetic predispositions?

Yes. If you know that you have a genetic predisposition to a disease (i.e. supported by a genetic test) this is protected by the ban. Even if you develop the disease, your genetic status of having the predisposition remains protected.

Can life insurers ask for my genetic test results once a disease manifests and a clinical diagnosis is made?

No. Even once a disease manifests and a clinical diagnosis is made, life insurers cannot ask for, or use, information about any genetic testing that may have been undertaken even if that test contributed to the diagnosis. However, if a disease manifests and a clinical diagnosis is made, life insurance applicants have a duty to not make a misrepresentation about this information if asked by the life insurer.

Does the ban apply if I had genetic testing before 8 October 2026?

Yes. The ban applies to life insurance contracts entered into, or varied, on or after 8 October 2026, even if the genetic test was taken before that date.

What types of insurance products does this apply to?

The ban applies to all types of life insurance, including death, total and permanent disability (TPD), trauma, and income protection.

Does the ban apply to life insurance I already have? What if I have an existing policy that has been impacted by a genetic test that I provided previously?

No. The ban only applies to life insurance contracts entered into, or varied, on or after 8 October 2026. If you have an existing life insurance contract that took into account genetic testing information, the ban does not impact that contract. However, if you vary the existing contract, the ban applies to consideration of that variation.

You may wish to consider applying for a new life insurance policy if you have a policy that was impacted by genetic test results when it was set up.

However, replacing an existing policy can carry risks. Before applying for a new policy, consider whether it is right for you and seek advice.

Does the ban have any impact on health, travel or other types of insurance?

No. The ban only applies to life insurance policies.

What do I do if I think an insurer has breached the ban?

If you suspect an insurer has breached the ban, see above options in [Complaints and support](#).

Can life insurers use genetic test results if the information is provided by my doctor as part of my medical record?

No. The ban applies regardless of how the life insurer or underwriter obtains the information. Genetic testing information must not be used unless it is volunteered with written consent, and its use does not disadvantage the individual.

Does the ban protect genetic testing results obtained through health or medical research?

Yes. The information protected under the ban includes all genetic testing information, including testing done through participation in health or medical research.

Can life insurers ask me about any preventative treatment I receive or have received because of a genetic risk?

Yes. Medication, surgery and specialist care you have or are receiving remain ordinary medical information that insurers can ask about and use.

Example

You have a BRCA1 variant which is associated with a higher risk of breast and ovarian cancer, and you choose to have preventive surgery.

If asked by an insurer, you have a duty to not misrepresent information about:

- The surgery performed or treatment received.
- Information about your response to and recovery from the treatment itself, including details of any complications and any ongoing medical management required relating to the treatment/surgery.

Do I have to provide any screening tests I may have or have had because of a known risk from family history or a genetic test that confirmed a genetic predisposition?

Yes. Regardless of why you are having it, non-genetic test screening, health monitoring, and specialist care is ordinary medical information that insurers can ask about and use.

Example

You have a family history of bowel cancer and had a genetic test that confirms you have the familial adenomatous polyposis (FAP) gene variant. You have regular screening colonoscopies to monitor if you develop bowel cancer.

If asked by a life insurer, your duty to not misrepresent may mean you need to tell the insurer about your screening colonoscopies and the results, however your FAP gene status is protected.

Will an insurer ask me to have other (non-genetic) tests relating to my family history?

Possibly, depending upon the family history itself. E.g. Insurers may ask you to undergo cardiac testing for certain family histories or non-genetic blood tests for others. This will depend upon the family history itself and the insurers approach to understanding the risk it presents.

Can insurers ask me to undergo non-genetic medical tests when applying for insurance?

Yes, routine medical tests requested during underwriting that are not genetic tests are not impacted by the ban (such as a cholesterol test).

The legislation does not remove insurers' right to request other medical information that is not protected by the ban.