

14 November 2025

Kathryn Haigh
First Assistant Secretary, Human Rights Branch
International Cooperation and Human Rights Division
Attorney-General's Department
4 National Circuit
BARTON ACT 2600

By email: DDAReview@ag.gov.au

Dear Ms Haigh

Disability Discrimination Act 1992 Review: Part 5 Exemptions

The Council of Australian Life Insurers (**CALI**) is the leading voice of life insurance in Australia. We support Australians to make informed choices about their future and help them live in a healthy, confident and secure way over their lifetime.

CALI advocates for national policy settings that expand Australians' access to the life insurance protection that suits them when they need it most. We welcome the opportunity to make a submission in response to the Australian Government's review of the *Disability Discrimination Act 1992* (Cth) (**DDA**) following the findings of the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with a Disability (**Disability Royal Commission**).

Our submission is limited to question 33 and provides a response in relation to the exemption for underwriting in life insurance pursuant to section 46 of the DDA (**the Exemption**).

It is critical that this review ensures fairness for all insured Australians when considering any changes to the Exemption. The existing Exemption was designed to balance the rights of people with disabilities with the ability of life insurers to fairly provide affordable and accessible life insurance cover to millions of Australians. It allows life insurers to provide underwritten insurance that is tailored to a person's individual circumstances.

Underwriting involves getting an understanding of a person's individual risk profile. Insurers look at a person's age, medical history, occupation, lifestyle and family history and assess that against community-level statistical and actuarial data to determine pricing and policy terms such as loadings or exclusions. Without access to this kind of information it would be impossible to provide accessible and affordable personalised life insurance protection in Australia and would be out of step with the rest of the world.

Beyond the amendments to the Exemption proposed by the Government's legislated ban on the use of genetic testing results in underwriting (**Genetic Testing Ban**)¹, our principal recommendation is that the Exemption be maintained in its current form to ensure that the DDA continues to meet its objective of providing "*a balance between the right of people with disabilities to have the same rights as other citizens and other competing interests*".²

We are supportive of the Australian Government's plan to legislate the Genetic Testing Ban as long as it does not result in any changes that could result in an unfair insurance system. We have been actively working with the Treasury to inform the development of this legislation and have provided detailed feedback on the proposed legislation. We support the proposed changes to section 46 in relation to genetic testing but do not support any further narrowing of this exemption.

Please refer to Attachment A for CALI's detailed feedback in relation to the review of the DDA and the operation of the Exemption, and Attachment B for reference on our prior submission relating to the Genetic Testing Ban.

Should you have any queries in relation to this matter, please contact Prue Wilson (Associate Director, Policy) at prue.wilson@cali.org.au

Kind regards



Christine Cupitt
Chief Executive Officer
Council of Australian Life Insurers

¹ Treasury Laws Amendment Bill 2025: Limiting the use of genetic information by life insurers

² Explanatory Memorandum, Disability Discrimination Bill 1992, p9.

Attachment A: detailed response

This attachment provides a detailed response to question 33: Could any of the permanent exemptions be narrowed or updated, while balancing other policy considerations?

Preserving the operation of the Exemption

The Exemption carefully balances the rights of people with disabilities with the ability of life insurers to provide fair, affordable and sustainable life insurance cover to as many Australians as possible. It is a policy that has served Australians well for over 30 years.

As a critical pillar of Australia's financial safety net, life insurance supports Australians and their families on their worst days, providing significant financial support in times of unexpected disability or death.

To ensure that life insurers can continue to provide this essential cover to Australians, it is essential that the Exemption continues to support this existing balance.

CALI acknowledges the Australian Government's intention to narrow the Exemption to implement the Genetic Testing Ban. The life insurance industry supports this targeted change that will support Australians to make proactive and informed decisions about their health.

Beyond the changes introduced to the Exemption by the proposed Genetic Testing Ban, CALI recommends that the Exemption be retained in its current form and application, as it is foundational to maintaining a sustainable and accessible life insurance industry.

In considering any further narrowing of the Exemption, CALI emphasises that this would likely result in higher premiums, reduced benefits and less choice for customers.

What the exemption does

In practice, the Exemption means that life insurers can fairly and equitably assess and price risk through underwriting and is critical to the sustainability of life insurance³

Underwriting is the process through which life insurers assess the risk profile of an individual customer to determine whether to offer cover, on what terms and at what price. This assessment of risk ensures that each customer's premium fairly reflects

³ Life insurance products purchased through a financial adviser.

their likelihood of claiming relative to every other customer who holds that insurance product.

Underwriting evaluates risk factors such as age, medical history, occupation and lifestyle at an individual customer level and overlays them against population-level statistical and actuarial data to determine pricing and policy terms such as loadings or exclusions.

Why the exemption matters

Without this ability to assess and price risk through underwriting, the likely impacts to affordability, accessibility and sustainability of life insurance would be significant.

Underwriting preserves equity within insurance so that each customer pays a premium commensurate with their level of risk, and insurance remains affordable and sustainable for all customers.

Importantly, most Australians obtain life insurance through default arrangements in superannuation.

Default insurance within superannuation is community-rated and automatically accepted, offering accessible, safety-net level benefits to a wide range of individuals without the need for personal underwriting.

By contrast, risk-rated life insurance provides tailored coverage for individuals with more specific needs, often through financial advice, allowing for personalised protection that reflects their unique circumstances and preferences. These needs often include higher sums insured that are not available through non-underwritten default insurance in superannuation.

The Exemption acknowledges the unique nature of risk-rated life insurance by allowing life insurers to lawfully discriminate in relation to a person's disability through the underwriting process by either refusing to offer a product or varying the terms or conditions or premium on which the product is offered.

Life insurers must ensure that underwriting decisions are based on actuarial or statistical data on which it is reasonable to rely and is reasonable having regard to the matter of the data and other relevant factors, for example where a particular condition or factor significantly increases the likelihood of a claim.

It is important to note that the Disability Royal Commission did not make any specific recommendations regarding the section 46 exemption under the DDA. The commission noted that the Exemption had been considered in earlier reviews by the Productivity Commission⁴ and Australian Human Rights Commission 'Free and Equal'

⁴ Productivity Commission, *Review of the Disability Discrimination Act 1992*, Report No. 30, Melbourne, 30 April 2004

project⁵. Both of these viewed the Exemption as appropriate within the broader framework of disability discrimination law.

Key issues for consideration

Risk management, affordability and accessibility

Life insurance primarily operates on a risk-rated model, meaning life insurers assess the likelihood of a claim and set premiums and terms that reflect the level of risk that an individual brings to the risk pool. This contrasts with default insurance in superannuation automatic acceptance policies which are not underwritten⁶, so all members obtain a base level of cover dependent on their age. It is also in contrast with community-rated insurance, such as private health insurance, where all applicants are accepted on the same terms and price, regardless of age or health status.

To maintain community-rated systems in private health insurance, governments may use incentives to attract healthier individuals. However, these individuals pay the same premiums as those in poorer health, even though they are less likely to claim.

If life insurers were required to adopt a similar approach and could not differentiate based on risk, adverse selection would occur where people with higher health risks seek more cover without corresponding premium adjustments.

Without offsetting changes, such as a significant increase in people with insurance coverage, this could increase claim costs, reduce affordability and reduce accessibility for people on lower incomes. In addition, insurers may have to cease offering higher sums insured entirely which would limit choice and accessibility for customers who have the need for higher levels of cover.

Limiting the information used in underwriting can lead to unequal costs for all Australians with insurance, making premiums less fair and reducing confidence in the system.

Further, to support community rating APRA administers the Private Health Insurance Risk Equalisation Levy which facilitates cross-subsidisation of high-cost policy holders between insurers, to assist insurers offset the costs of complying with the community rating principle. No such equalisation arrangements exist for life insurers.

⁵ Australian Human Rights Commission, *Free and Equal: Revitalising Australia's Commitment to Human Rights*, 2023

⁶ While default cover is offered without underwriting, certain exclusions may apply for pre-existing conditions. These are similarly based on statistical and actuarial assumptions about morbidity and mortality risk.

Evidence-based underwriting

The underwriting process is critical to ensure the cost of life insurance is sustainable and is fairly spread across every customer in the risk pool. Each person's unique risk of illness, injury and death depends on a range of factors that may be taken into account in the underwriting process. This will include their current and historical health, as well as any risks associated with other factors – for example, their age, sex, family medical history, occupation, pastimes and lifestyle choices (such as whether or not they smoke). Life insurers are permitted to consider these individual factors, which are indicators of the likelihood of claiming, on the basis of well-established actuarial and statistical models.

There is an inherent imbalance of information between customers applying for life insurance and the insurer. Customers know their own health and circumstances, but unless the insurer can obtain and assess this information, the insurer and existing customers are exposed to adverse selection. This occurs when customers with higher health risks seek cover without paying premiums that reflect those risks. The problem is amplified if customers fail to disclose relevant health details, because the additional risk they bring cannot be accurately priced.

CALI does not support amendment of the Exemption to include a requirement to make the statistical and actuarial evidence available to customers upon request when an application for insurance or claim is declined.

Life insurers use and rely on underwriting manuals to make underwriting decisions. These manuals, which are informed by highly complex actuarial and statistical data, are the intellectual property of life insurers and public disclosure would risk sharing highly confidential and commercially sensitive risk assessment methods.

Further, because these manuals contain highly technical, complex algorithms and loadings supported by medical evidence. They are designed and intended for specialist interpretation and are not structured or formatted in a manner that would provide meaningful insight to customers.

Actuarial frameworks and methodologies are robustly governed through the Australian Prudential Regulation Authority's (**APRA**) prudential framework. Actuarial and statistical frameworks also ensure any differentiation is supported by a demonstrable statistical basis, consistent with legal and prudential standards and insurers instead provide clear, plain-English explanations of decisions, ensuring transparency without compromising the integrity of actuarial processes or competitive risk management.

Customer protections

Discrimination under the Exemption requires insurer decisions to be based on actuarial data and be justified by statistical evidence such as the use of government produced mortality tables, demographic and health data, industry research and modelling, alongside industry studies and an insurers' individual experience where relevant.

The Exemption is part of a broader regulatory framework that ensures customer protections are upheld including:

- *Corporations Act 2001* (Cth): insurers must act efficiently, honestly and fairly towards customers;
- *Insurance Contracts Act 1984* (Cth) – section 13: an implied statutory duty requiring both parties to a contract to act with utmost good faith. As an insurer, it operates to ensure decency and honesty in all interactions with customers;
- Conduct regulations overseen by the Australian Securities and Investments Commission (**ASIC**); and
- Prudential standards and regulations overseen by APRA including prudential standard CPS 320 *Actuarial and Related Matters*.

In addition to the above, the Life Insurance Code of Practice (**the Code**) sets rules that ensure life insurers deliver fair, timely, transparent, and empathetic outcomes to customers. The Code is independently monitored and enforced by the Life Code Compliance Committee (**Life CCC**). The Australian Financial Complaints Authority (**AFCA**) can also consider whether life insurers have met its obligations under the Code when determining disputes.

The Code applies throughout the entire life insurance journey, from product design and advertising, claims, complaints and support for vulnerable customers. Importantly, in underwriting, if a customer has symptoms or is diagnosed with a mental health condition, the Code requires life insurers to give the customer an opportunity to provide information about the history, severity or type of condition and the underwriter must take that information into account when deciding whether it can offer insurance. Life insurers can then manage the risk by offering alternative terms such as through premium loadings, exclusions, limits or caps rather than just declining to offer insurance. This approach helps manage risk while maintaining access to insurance. Declining to provide cover is always a last resort.

The Code prohibits life insurers from asking questions during the underwriting assessment about an applicant's sexual preferences and practices for determining the risk of contracting an STI, including HIV and if an applicant discloses they are living with HIV or AIDS, insurers must treat it like any other medical condition. All underwriters must have appropriate skills and training including for mental health conditions and show technical competency before they make underwriting decisions and they must have an understanding of relevant laws (as stated above), including anti-discrimination laws. Together these protections ensure the Exemption operates within a broader framework of industry commitment that promote fairness and inclusion for all Australians.

Narrowing the Exemption in relation to genetic testing

CALI is supportive of the narrowing of the Exemption to prohibit the use of predictive genetic test results in underwriting, except in limited circumstances approved by

Government. We recognise that genetic testing plays an important role in empowering customers to proactively manage their health and reduce potential health risks.

It has never been the life insurance industry's intention to deter people from taking genetic tests or participating in scientific research. CALI has consistently supported, and advocated for, a legislated ban that strikes a balance between giving Australians the certainty and confidence to utilise genetic testing in support of their health and wellbeing while ensuring life insurers can continue to provide affordable and sustainable cover in an equitable way for customers.

Our detailed feedback regarding the proposed amendments to the Exemption can be found in our recent submission dated 17 October 2025 on *Treasury Laws Amendment Bill 2025: Limiting the use of genetic information by life insurers* and is provided as an Attachment B.

Attachment B: Genetic Testing Ban submission to Treasury

17 October 2025

Andrea Stone
Director, Insurance Unit
Financial System Division
The Treasury
Langton Crescent
PARKES ACT 2600

By email: genetictestinglifeinsurance@treasury.gov.au

Dear Ms Stone

Treasury Laws Amendment Draft legislation 2025: Limiting the use of genetic information by life insurers

The Council of Australian Life Insurers (**CALI**) has consistently supported, and advocated for, a legislated ban on the use of genetic tests in life insurance underwriting.

Life insurers help millions of Australians to live in a healthy, confident and secure way. Our members want to support their customers to proactively manage their health and reduce potential health risks. We recognise that genetic testing plays an important role in empowering people to do this in a preventative and personalised way. It has never been the life insurance industry's intention to deter people from taking genetic tests or participating in scientific research. This is why we support a ban on the use of genetic tests in life insurance underwriting.

We want to ensure the law gives people confidence to take genetic tests that may indicate their predisposition for future disease while ensuring life insurers can continue to underwrite based on other information. The underwriting process is critical to delivering affordable and sustainable insurance. It helps fairly manage risks across all insured people.

CALI supports the proposed approach to implement the ban and we have proposed changes to ensure the measure is appropriately drafted to provide certainty for all Australians.

To achieve this, the legislation must:

1. effectively integrate into the existing legislative framework, and duties and limits in relation to insurance contracts;

2. provide clarity and certainty to all stakeholders by:
 - a. adopting clear and unambiguous definitions;
 - b. providing defences to the operation of the strict liability and civil penalty provisions; and
3. apply only from the date of commencement to new applications for life insurance or alterations to existing life insurance.

We consider that the legislation, as currently drafted, broadly aligns with the policy objective of the ban.

We welcome:

- the preservation of the critical need for life insurers to be able to ask about, and assess, information about an individual's current state of health and any clinically diagnosed medical conditions, irrespective of whether that diagnosis was made through a genetic test;
- the preservation of life insurers' ability to collect family medical history, in accordance with the provisions of the Life Insurance Code of Practice (**Life Code**);
- the ability of customers to voluntarily disclose favourable genetic test results; and
- the mandatory five-year review periods and subordinated regulation-making powers to ensure that the legislation can keep pace with, and accommodate, material changes to the operating environment for life insurers and their customers.

We are concerned, however, that the legislation as proposed:

- contains ambiguous or unclear definitions that inadvertently capture a wide range of standard and essential clinical tests; and
- creates a significant strict liability risk for insurers acting in good faith and consistently with the intent of the ban.

If these risks are not addressed in the drafting of the legislation, it is likely to result in a lack of certainty for both life insurers and customers, and risks the objective of the policy.

We have set out our concerns, and proposed amendments, in greater detail in Attachment A.

Further information

This submission follows CALI's responses to prior information requests and targeted and public consultations regarding the impacts, policy options and design issues of the draft legislation, and is made on a non-confidential basis.

We look forward to continued engagement with the Treasury and Government as this important reform progresses to implementation. Please contact Luke Hyde (General Manager, Policy) at luke.hyde@cali.org.au for further information.

Kind regards



Christine Cupitt
Chief Executive Officer
Council of Australian Life Insurers

About CALI

CALI is the leading voice of life insurance in Australia. We support Australians to make informed choices about their future and help them live in a healthy, confident and secure way over their lifetime.

Our members' products and services give people peace of mind when making important decisions and provide a financial safety net during life's biggest challenges.

We advocate for national policy settings that expand Australians' access to the life insurance protection that suits them when they need it most.

CALI represents all life insurers and reinsurers in Australia. The Australian life insurance industry is today a \$26.4 billion industry, employing thousands of Australians and paying billions of dollars of benefits each year.

For more information, visit www.cali.org.au

Attachment A

Recommendations

CALI recommends:

1. the deletion of proposed subsection 33E(1)(c) to the *Insurance Contracts Act 1984* (Cth) (**ICA**);
2. the amendment of the proposed definition of *clinical diagnosis*;
3. the amendment of the proposed definition of *treating medical practitioner*;
4. the introduction of a safe harbour provision for the receipt and handling of unsolicited protected genetic information to preserve the ability of life insurers to undertake routine underwriting without undue legal risk;
5. the amendment of the definition of *solicit*;
6. the introduction of a definition of *use*;
7. the amendment of the definition of *protected genetic information*;
8. the introduction of a definition of *medical research genetic test*;
9. the introduction of a definition of a *disease that is of a genetic nature*; and
10. that the newly proposed section 47A be integrated into the existing section 47 of the ICA.

Analysis

Definitions

1. Meaning of *genetic testing*

While proposed section 33E aligns with our understanding of the intent of the ban, proposed subsection 33E(1)(c) states that genetic testing includes:

(c) *analysis or interpretation of information derived from any product of an individual's gene expression (such as a protein), biomarkers or metabolites, conducted to:*

- (i) *detect, infer or predict genotypes or genetic variants; or*
- (ii) *predict the individual's risk of developing a disease in the future.*

In CALI's view, this definition is likely to prohibit legitimate and essential risk assessment that is not intended to be within the scope of the ban. The wording conflates genotype (an individual's genetic code) with phenotype (the observable expression of genes, lifestyle, and environmental factors). Most of the human body

and its functions are products of gene expression, meaning this definition inadvertently captures a vast range of standard clinical tests that are not genomic in nature.

For example, iron studies measure iron levels to diagnose conditions such as haemochromatosis. While the condition is genetic, the test assesses the phenotype (iron levels), not the genotype, and is a standard clinical tool. Similarly, a cholesterol test measures blood lipids, a biomarker, while HbA1c/blood sugar tests assess diabetes risk. All of these are routine clinical tests and inform risk assessment and risk rating in underwriting.

To ensure the legislation appropriately targets and supports the use of predictive genetic testing without inhibiting standard medical underwriting and risk assessment, **CALI recommends the deletion of proposed subsection 33E(1)(c) in its entirety.**

2. Meaning of *clinical diagnosis* and *treating medical practitioner*

Proposed section 11 defines clinical diagnosis as follows:

in relation to an individual, means a clinical diagnosis made by any treating medical practitioner of the individual.

It also proposes to define treating medical practitioner as follows:

treating medical practitioner of an individual means a legally qualified medical practitioner who has, or has had, responsibility for medical treatment of the individual:

- (a) *whether or not in Australia; and*
- (b) *whether or not on an ongoing or regular basis.*

In CALI's view, these definitions are unsuitable as they don't reflect modern clinical practice. In clinical practice, the achievement of diagnoses is complex. Diagnoses may be made over time, involve multiple clinicians, and may not always be made by a practitioner with an ongoing treatment relationship with the individual.

As practical examples, both Huntington's disease and hypertrophic cardiomyopathy are generally diagnosed by a specialist and referred back to their general practitioner for ongoing management.

A more appropriate and inclusive definition that accommodates the realities of modern clinical pathways, differential diagnoses, and the involvement of various practitioners is necessary to ensure the legislation is future-proof and aligned with actual medical practice.

CALI recommends the amendment of the proposed definitions of *clinical diagnosis* and *treating medical practitioner*.

CALI proposes the following definitions:

Clinical diagnosis

Clinical diagnosis, in relation to an individual, means a clinical diagnosis made by a medical practitioner.

Medical practitioner

Medical practitioner means a legally qualified medical practitioner.

These amendments reflect the dynamic nature of clinical practice which includes medical practitioners who:

- Conduct direct clinical assessments or interpret diagnostic investigations;
- May or may not have an ongoing treatment relationship with the individual; and
- May operate in primary care, specialist, consultative, diagnostic laboratories, or remote settings, including telehealth or computer-assisted diagnostic platforms.

3. Meaning of *solicit* – safe harbour

Proposed section 33G(1)(b) states that a person solicits protected genetic information if:

the person requests another person:

(b) to provide a kind of information in which that protected genetic information is included.

This definition is too broad and creates a significant compliance risk for life insurers. The receipt of underwriting requests, such as Personal Medical Attendant Reports or full medical records, could expose life insurers to a strict liability offence and attendant civil penalties if they contain protected genetic information which is inadvertently or unintentionally provided to life insurers without solicitation.

CALI recommends the introduction of a safe harbour provision for the receipt and handling of unsolicited protected genetic information to preserve the ability of life insurers to undertake routine underwriting without undue legal risk.

CALI proposes the addition of a proposed subsection 33G(1)(c):

(3) *Despite subsection (b), a person does not solicit protected genetic information if the person requests another person to provide a kind of information in which protected genetic information is or may be included, if the person specifies that:*

(i) their request excludes the provision of protected genetic information about the individual to whom the request relates; and

(ii) the other person is requested to ensure that protected genetic information about the individual to whom the request relates is not included in, or is removed or redacted from, the information they provide.

4. Meaning of *solicit* - notifying of the ability to volunteer favourable results

Life insurers are prohibited by the draft legislation from “soliciting” protected genetic test information. In our view, this would include prompting a customer to provide favourable results.

The draft legislation also does not expressly permit insurers to inform customers of their general ability to voluntarily disclose favourable test results. While the explanatory memorandum indicates that the law is not intended to prevent life insurers from doing this, the law itself does not say so. The law should state this expressly to give life insurers confidence that they can lawfully inform customers of their ability to volunteer favourable results.

CALI observes that customer outcomes would be improved if life insurers could inform customers of their right to voluntarily disclose favourable test results (and the protections in place if they do) at relevant points in the underwriting process, and for this not to amount to prohibited solicitation.

CALI recommends amendment of the proposed meaning of *solicit* to introduce a provision enabling life insurers to inform customers of their general ability to voluntarily disclose favourable test results.

CALI proposes the following:

For the purposes of s33(G)(1), a person does not solicit protected genetic information from another person if the person notifies the other person of the operation and effect of the exception in s33H(3) and provides information about how the other person may provide protected genetic information to the insurer and consent to the use of that protected genetic information for the purposes of s33H(3).

5. Meaning of *use*

As insurers do not control what information is sent to them by third parties, there is a risk that life insurers will inadvertently receive genetic test results captured by the draft legislation, without the consent of the customer. For example, a customer’s doctor may send medical records that contain or refer to genetic testing results. This is risky for the receiving insurer as it may cause a breach and potentially exposure to criminal and civil penalty.

If protected genetic information is inadvertently received, the only way for an insurer to avoid the strict liability offence would be to avoid deciding on the customer's application.

To this end, **CALI recommends that "use" be defined to mean that the information is actually considered and applied in life insurance underwriting.**

This would also mean that where life insurers receive protected genetic information inadvertently or unintentionally they can, acting reasonably, institute a process to ensure that the life insurance underwriting is undertaken without regard to that information (such as by having the assessment performed by a person with no access to that information).

This could also include deleting or redacting the information, or taking any other reasonable steps to ensure the protected genetic information is not "used".

6. Definition of *protected genetic information*

The draft legislation provides that certain things are not protected genetic information – namely, the name of a disease for which the person has received a clinical diagnosis, and also "information about the characteristics, natural history or prognosis of a disease".

For completeness, **CALI recommends that the proposed s33F(2)(b) should also expressly include and refer to "treatment" (including planned or intended treatment) of a disease here, as information about medical treatment for a clinically diagnosed disease is commonly sought during underwriting.**

7. Definition of *medical research genetic tests*

The draft legislation refers to genetic tests in the context of medical research but does not provide a specific definition. Without a definition, there is uncertainty regarding when tests conducted for accredited medical research do not require disclosure.

Customers participating in medical research may inadvertently fall under protected information rules, creating compliance risk and discouraging participation.

CALI recommends the introduction of a definition of *medical research genetic test*.

Medical research genetic test means a genetic test conducted as part of a medical research study by an accredited university or medical research institution where the results of the test have not been, and will not be, provided to the individual, or the individual has specifically requested not to receive them.

8. Definition of *disease of a genetic nature*

The draft legislation makes a regulation-making power in respect of prescribing certain diseases that are “of a genetic nature”, without defining what “of a genetic nature” means. As this is the basis of the power, **CALI recommends that “*disease of a genetic nature*” is defined.**

9. Section 47 of the ICA

The draft legislation proposes to introduce a new section 47A into the ICA and shifts some of the content from existing section 47 (relating to pre-existing conditions) into it for the purposes of life insurance.

This is likely to have significant administrative repercussions for insurers' documentation and processes, such as within contracts of insurance and disclosure documents requiring any references to section 47 to be identified and updated to 47A. This is a significant operational and administrative burden, even with the proposed six-month transition period.

CALI recommends the newly proposed section 47A be instead integrated into section 47 (perhaps as further subsections to that section) so that the administrative burden of updating these references across thousands of documents may be avoided.