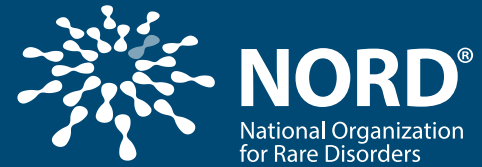


RARE DISEASE ADVISORY COUNCILS (RDAC)



NORD is working to establish well-organized, high-functioning Rare Disease Advisory Councils in every state to support the needs of the rare disease community.

An estimated 25-30 million Americans are living with a rare disease; that is close to one in ten people. Yet, with over 7,000 known unique rare diseases, it is difficult for state policymakers and government officials to have an in-depth understanding of the entire rare disease community. This lack of awareness contributes to common obstacles that rare disease patients face, such as delays in diagnosis, misdiagnosis, lack of treatment options, high out-of-pocket costs and limited access to medical specialists.

Rare Disease Advisory Councils (RDACs) demonstrate enormous promise to address these barriers for the rare disease community. With diverse membership and broad community support, RDACs can be a valuable resource for state governments as our health care system continues to advance. Without RDACs in place, state laws and regulations that affect the rare community will continue to be developed without the consultation of rare disease stakeholders, often leaving this vulnerable population at greater risk for poor health and economic outcomes. With strong RDACs, government officials and the rare disease community can partner together to develop the resources necessary to prevent and address barriers in a strategic way that allows states and their citizens to thrive.



In 2015, the first RDAC was created in North Carolina by patients, caregivers, families, and providers. Since then, rare disease advocates and stakeholders have sought councils in other states to help better represent their communities.

TIPS FOR STARTING A SUCCESSFUL RDAC:

1. Include stakeholders from across the rare disease community from the outset and provide opportunities for public engagement.
2. Identify a committed entity to house the council, such as an outside nonprofit, academic institution, or state Department of Health.
3. Encourage a diverse membership that includes: health department officials, elected legislative officials (or their designees), academic researchers, health care providers, industry members, patients and caregivers.
4. Identify clear duties, responsibilities and accountability measures that can serve as a roadmap for action to be taken by the RDAC.

It's estimated that

25-30
MILLION AMERICANS

(almost **1** in **10**) have rare diseases



More than

90%

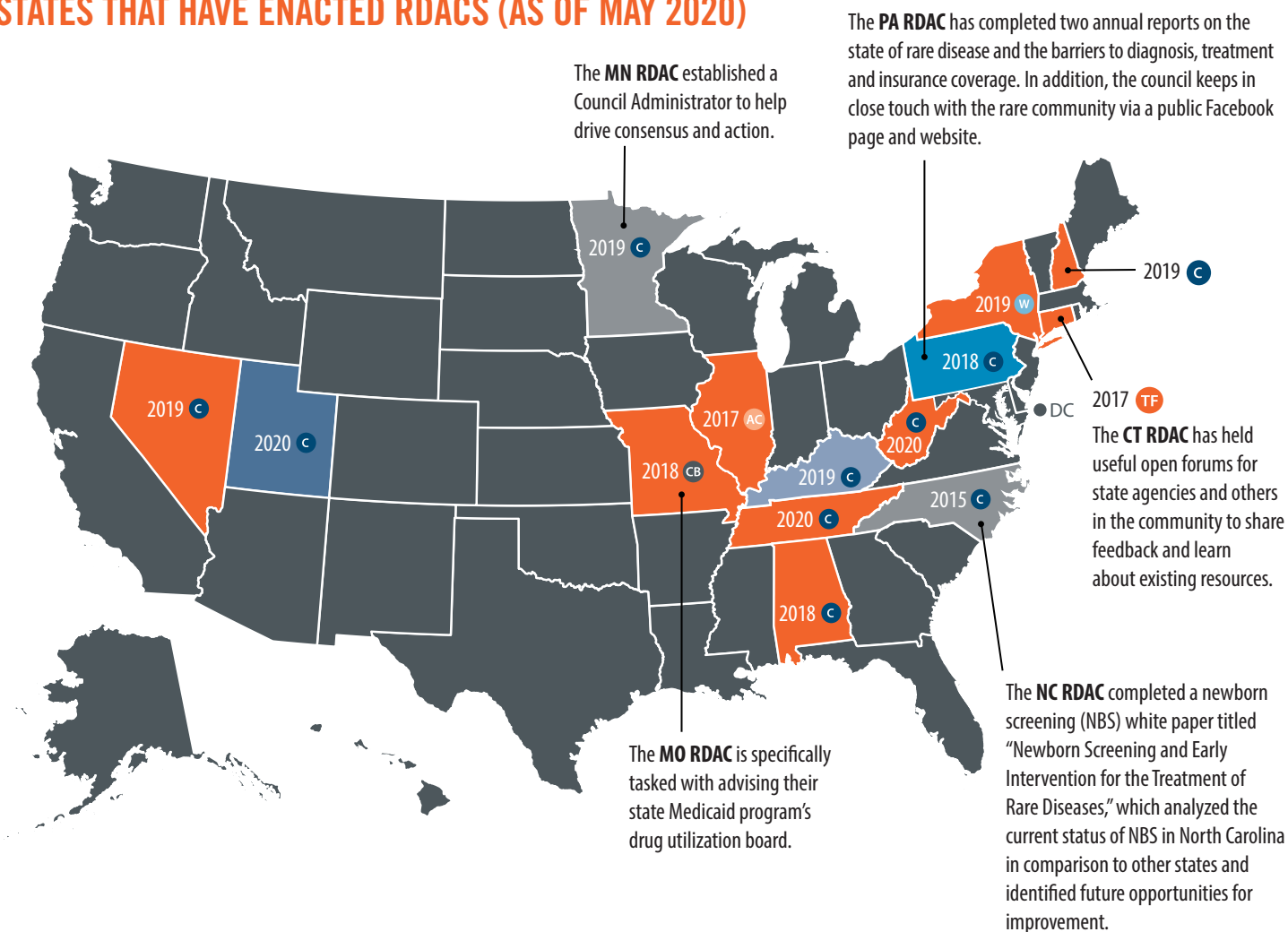
of rare diseases are **without**
an FDA-approved treatment.



Alone we are **rare**. Together we are strong.®

rareaction.org
rarediseases.org

STATES THAT HAVE ENACTED RDACS (AS OF MAY 2020)



HOUSED BY:

- Department of Health
- University
- Grantee from Department of Health
- Outside Nonprofit
- Department/Caucus

TYPE:

- C Council
- AC Advisory Commission
- CB Committee to DUR Board
- TF Task Force
- W Work Group

NORD: Fighting for the rare community every day for more than 37 years.

NORD, a 501(c)(3) organization, is a patient advocacy organization dedicated to individuals with rare diseases and the organizations that serve them. NORD, along with its more than 300 patient organization members, is committed to the identification, treatment, and cure of rare disorders through programs of education, advocacy, research, and patient services.

The mission of NORD's Rare Action Network® (RAN) is to connect and empower a unified network of individuals and organizations with the tools, training, and resources to become effective advocates for rare diseases through national and state based initiatives across the United States. To join RAN, go to rareaction.org.

For more information on Rare Disease Advisory Councils or NORD, please contact Heidi Ross, Director of Policy, at hross@rarediseases.org.