

2025 -- H 5023 SUBSTITUTE A

LC000507/SUB A/3

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2025

A N A C T

RELATING TO HEALTH AND SAFETY -- RARE DISEASE ADVISORY COUNCIL

Introduced By: Representatives Kennedy, Spears, Diaz, Donovan, Cotter, Carson,  
Azzinaro, Kazarian, Edwards, and Serpa

Date Introduced: January 10, 2025

Referred To: House Health & Human Services

It is enacted by the General Assembly as follows:

1 SECTION 1. Title 23 of the General Laws entitled "HEALTH AND SAFETY" is hereby  
2 amended by adding thereto the following chapter:

3 CHAPTER 87.1

4 RARE DISEASE ADVISORY COUNCIL

5 **23-87.1-1. Short title.**

6 This chapter shall be known and may be cited as the "Rare Disease Advisory Council."

7 **23-87.1-2. Establishment.**

8 (a) There is established in the department of health the rare disease advisory council.

9 (b) The purpose of the council is to provide guidance and recommendations to educate the  
10 public, legislature, as well as other government agencies, on the needs of individuals with rare  
11 diseases living in Rhode Island.

12 (c) The council shall conduct the following activities to benefit those impacted by rare  
13 diseases in Rhode Island. The duties of the council shall include:

14 (1) Convene public hearings, make inquiries, and solicit comments from the general public  
15 in Rhode Island to assist the council with a first-year landscape or survey of the needs of rare  
16 disease patients, caregivers, and providers in the state.

17 (2) Provide testimony and comments on pending legislation and regulations before the  
18 legislature and other state agencies that impact Rhode Island's rare disease community.

19 (3) Consult with experts on rare diseases to develop policy recommendations to improve

1 patient access to, and quality of, rare disease specialists, affordable and comprehensive health care  
2 coverage, relevant diagnostics, timely treatment and other needed services.

3 (4) Research and make recommendations to state agencies and insurers that provide  
4 services to persons with a rare disease on the impact of prior authorization, cost-sharing, tiering, or  
5 other utilization management procedures on the provision of treatment and care for patients.

6 (5) Establish best practices and protocols to include in-state planning related to natural  
7 disasters, public health emergencies or other emergency declarations to enable continuity of care  
8 for rare disease patients and ensure safeguards against discrimination for rare disease patients are  
9 in place.

10 (6) Evaluate and make recommendations to implement improvements to newborn infant  
11 screening programs.

12 (7) Evaluate and make recommendations to improve Medicaid coverage of drugs for rare  
13 disease patients, including engagement with the drug utilization review board, to improve coverage  
14 of diagnostics, and facilitate access to necessary healthcare providers with expertise in the treatment  
15 of rare diseases.

16 (8) Publish a list of existing, publicly accessible resources on research, diagnosis,  
17 treatment, and education relating to the rare diseases on the council's website. For purposes of this  
18 chapter, "rare disease" or "orphan disease" means a disease that affects fewer than two hundred  
19 thousand (200,000) people in the United States.

20 (9) Identify areas of unmet need for research and opportunities for collaboration across  
21 stakeholders that can inform future studies and reports by the council.

22 (10) Identify and distribute educational resources for health care providers to foster  
23 recognition and optimize treatment of rare diseases.

24 (11) Research and identify best practices to reduce health disparities and achieve health  
25 equity in the research, diagnosis and treatment of rare diseases.

26 (12) Research and identify best practices to ensure continuity of care for rare disease  
27 patients transitioning from child/youth services to adult care.

28 **23-87.1-3. Membership of council.**

29 (a) All members of the council shall be full-time residents of Rhode Island and membership  
30 shall include a diverse set of stakeholders.

31 (b) The governor shall appoint all members and shall designate a chair of the council within  
32 thirty (30) days of enactment. The chair shall not hold any position within the government of Rhode  
33 Island and shall serve for a term of three (3) years.

34 (c) The governor shall appoint the following members:

- 1           (1) One representative from academic research institutions in the state that receives any  
2 grant funding for rare disease research;
- 3           (2) One representative from the Rhode Island department of health's office of minority  
4 health;
- 5           (3) One representative from the Rhode Island Medicaid agency;
- 6           (4) One representative from the Rhode Island department of business regulation insurance  
7 division;
- 8           (5) One registered nurse or advanced practice registered nurse licensed and practicing in  
9 Rhode Island with experience treating rare diseases;
- 10           (6) One physician practicing in Rhode Island with experience treating rare diseases;
- 11           (7) One hospital administrator, or designee, from a hospital in Rhode Island that provides  
12 care to persons diagnosed with a rare disease;
- 13           (8) At least two (2) patients who have a rare disease;
- 14           (9) At least one caregiver of a person with a rare disease;
- 15           (10) One representative of a rare disease patient organization that operates in Rhode Island;
- 16           (11) A pharmacist with experience dispensing drugs used to treat rare diseases;
- 17           (12) A representative of the biopharma industry;
- 18           (13) A representative of a health plan company; and
- 19           (14) A member of the scientific community who is engaged in rare disease research,  
20 including, but not limited to, a medical researcher with experience conducting research on rare  
21 diseases.

22           **23-87.1-4. Terms and vacancies for council members.**

23           (a) Term of members. Council members shall serve no longer than three (3) years, except  
24 that, to facilitate a staggered rotation of members to retain continuity and knowledge transfer,  
25 during the initial five (5) years after the establishment of the council, members may serve up to a  
26 four (4) year term.

27           (b) Vacancy. If a vacancy occurs, the vacancy shall be filled in a like manner as required  
28 pursuant to this section.

29           **23-87.1-5. Reporting requirements.**

30           (a) The council shall submit a report to the governor, the speaker of the house and the  
31 president of the senate, and the chairs of the house and senate health and finance committees within  
32 one year of enactment of the council and annually thereafter. Prior to submission, a draft of the  
33 annual report shall be made available for public comment and discussed at an open public meeting.

34           (b) Annual reports shall:

1           (1) Describe the activities and progress of the council under this section; and  
2           (2) Provide recommendations to the governor and legislature on ways to address the needs  
3 of people living with rare diseases in the state.

4           **23-87.1-6. Meeting requirements.**

5           (a) Frequency.

6           (1) The initial meeting of the council shall occur within the first ninety (90) days after  
7 enactment.

8           (2) During the first twelve (12) months after the initial meeting, the council shall meet each  
9 month.

10          (3) Thereafter, the council shall meet once per quarter in person or via online meeting  
11 platform as determined by the chair.

12          (b) Notice.

13          (1) The council shall, in compliance with chapter 46 of title 42 ("open meetings"):

14          (i) Provide opportunities for the public to hear updates and provide input into their work;  
15 and

16          (ii) Create and maintain a public website where meeting minutes, notices of upcoming  
17 meetings, and public comments can be submitted.

18          SECTION 2. This act shall take effect upon passage.

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EXPLANATION  
BY THE LEGISLATIVE COUNCIL  
OF  
A N A C T  
RELATING TO HEALTH AND SAFETY -- RARE DISEASE ADVISORY COUNCIL

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- 1           This act would establish a rare disease advisory council within the department of health.
- 2   The council would provide guidance and recommendations to educate health care providers and
- 3   the citizens of the state.
- 4           This act would take effect upon passage.

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