



Who is eligible to apply?

This program is designed to help patients who:

- Have a diagnosis of BBS.
- Are a United States citizen or U.S. resident of six (6) months or greater with evidence of residency, such as a utility bill showing the patient's name and address.
- Meet the program's financial eligibility criteria.



What is the application process?

Patients may be referred to the program by their health care provider, their case managers, or they may self-refer.

A NORD Patient Services Representative will guide the applicant through the application process and verify eligibility for inclusion in the BBS Program.

Awards are based on meeting eligibility criteria and funding availability, and are made on a first-come, first serve basis.

NORD is Here for You

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.

NORD was founded by families struggling to obtain access to treatments and whose advocacy for change led to the passage of the Orphan Drug Act in 1983. NORD assists eligible patients (those with medical and financial needs) in affording the treatments and medical services their healthcare professionals have prescribed.

How do I get more information and apply?

Contact NORD's BBS Program

Monday-Thursday 8:30am – 7:00pm ET Friday 8:30am – 6:00pm ET



203-309-6751



203-648-4881



bbs@rarediseases.org



US MAIL to: NORD Attention: BBS Program 55 Kenosia Avenue Danbury, CT 06810

What kinds of assistance can I request from NORD?

NORD's program can assist eligible individuals/families with expenses in a number of categories:

- The BBS Premium & Copay Program assists eligible individuals who have health insurance with funding to cover health insurance premiums, deductibles, copayments and coinsurance costs associated with the care of BBS.
- Some examples of these expenses may be:
 - > medical office visit or consult.
 - > out-of-pocket cost for medications prescribed by your physician to manage your BBS diagnosis.
 - > out-of-pocket costs for lab services or radiological services.
 - > physician prescribed supportive therapies, such as physical, occupational therapies or speech therapy.
 - > durable medical equipment.

Once a patient is accepted into the assistance program(s), how long are they eligible?

- · Awards are issued for a calendar year.
- Patients are encouraged to reapply annually if continued assistance is needed.
- Program assistance is dependent on funding availability.

What happens if an applicant does not meet the criteria of the Electronic Income Verification?

The NORD Patient Services Representative will offer to e-mail, fax, or mail the brief program application and disclosure forms to the patient. The applicant may then complete the application, sign the disclosure form, provide the appropriate financial documentation to verify financial need, and return them via fax, email, or USPS mail.

How does NORD demonstrate compliance with regulations required of charities?

- NORD independently designs its patient assistance programs based on the needs of specific patient communities.
- No pharmaceutical company or donor controls or influences our programs.
- Our patient assistance decisions are based on consistently applied financial eligibility criteria and diagnosis only.
- Patients have their choice of health care provider, treatment and treatment location, and can make changes at any time.
- Patients' privacy and well-being are priorities at NORD. We
 do not share or provide patient names or data with donors,
 nor do we disclose or identify donors to patients. Patients
 are able to make the choices that are best for them
 because NORD's assistance covers all FDA-approved
 products available for a diagnosis. Our programs also help
 with more than medication: patients can use their funds to
 pay for other physician prescribed services related to their
 diagnosis such as, laboratory and diagnostic testing,
 physical and occupational therapy, durable medical and
 adaptive equipment, and travel to medical appointments.

