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H.371

Introduced by Representatives Troiano of Stannard, Cina of Burlington,
Anthony of Barre City, Branagan of Georgia, Burke of
Brattleboro, Campbell of St. Johnsbury, Casey of Montpelier,
Chesnut-Tangerman of Middletown Springs, Cordes of Lincoln,
Farlice-Rubio of Barnet, Goldman of Rockingham, Headrick of
Burlington, Hooper of Randolph, Hooper of Burlington,
LaBounty of Lyndon, LaMont of Morristown, Logan of
Burlington, McGill of Bridport, Minier of South Burlington,
Mrowicki of Putney, Mulvaney-Stanak of Burlington, Nicoll of
Ludlow, O'Brien of Tunbridge, Patt of Worcester, Rachelson of
Burlington, Satcowitz of Randolph, Small of Winooski,
Stebbins of Burlington, Surprenant of Barnard, Taylor of
Colchester, Templeman of Brownington, and White of Bethel

Referred to Committee on

Date:

Subject: Regulated drugs; psilocybin; crimes

Statement of purpose of bill as introduced: This bill proposes to make findings
regarding the therapeutic benefits of psilocybin, to remove criminal penalties
for possession of psilocybin, and to establish the Psychedelic Therapy
Advisory Working Group to examine the use of psychedelics to improve

1 physical and mental health and to make recommendations regarding the
2 establishment of a State program similar to Connecticut, Colorado, or Oregon
3 to permit health care providers to administer psychedelics in a therapeutic
4 setting.

5 An act relating to removal of criminal penalties for possessing, dispensing,
6 or selling psilocybin and establishment of the Psychedelic Therapy
7 Advisory Working Group

8 It is hereby enacted by the General Assembly of the State of Vermont:

9 Sec. 1. FINDINGS

10 The General Assembly finds that:

11 (1) Ten municipalities, three states, and the District of Columbia
12 recently have relaxed laws or policies regarding the possession and use of
13 psilocybin in light of a number of studies showing the therapeutic benefits of
14 psilocybin.

15 (2) The U.S. Department of Veterans Affairs has launched clinical trials
16 to study the effectiveness of psychedelic drugs including psilocybin as a
17 treatment for military veterans with post-traumatic stress disorder, addiction,
18 and other serious mental health issues.

19 (3) The Johns Hopkins Center for Psychedelic and Consciousness
20 Research is the leading research institution conducting a number of studies to

1 examine the potential benefits of psilocybin as a therapeutic drug for mental
2 illnesses.

3 (A) A Johns Hopkins study published in 2022 demonstrated
4 substantial antidepressant effects of psilocybin-assisted therapy for at least
5 12 months following acute intervention in some patients, with no reported
6 adverse effects or continued use of psilocybin by patients outside the context
7 of the study.

8 (B) A 2014 study by Johns Hopkins researchers found that longtime
9 smokers who had failed many attempts to drop the habit did so after a carefully
10 controlled and monitored use of psilocybin. The abstinence rate for study
11 participants was 80 percent after six months, substantially higher than typical
12 success rates in smoking cessation trials.

13 (4) A study published in published in *Scientific Reports* in 2022 looked
14 at data from 214,505 U.S. adults in the National Survey on Drug Use and
15 Health from 2015 to 2019 and found an association between past use of
16 psilocybin at any time in their lives and a reduced risk of opioid use disorder.

17 (5) In a 2020 article published in the journal *Frontiers in Psychiatry*
18 found that in a sample of 440 patients who self-administered LSD or
19 psilocybin in a naturalistic context, 96 percent of subjects met substance use
20 disorder criteria before psychedelic use. Following psychedelic use, only
21 27 percent met criteria for a substance use disorder. According to the study,

1 participants rated their psychedelic experience as highly meaningful and
2 insightful, with 28 percent endorsing psychedelic-associated changes in life
3 priorities or values as facilitating reduced substance misuse. Greater
4 psychedelic dose, insight, mystical-type effects, and personal meaning of
5 experiences were associated with greater reduction in drug consumption.

6 (6) A study published in 2022 in the *Journal of American Medical*
7 *Association Psychiatry* on the therapeutic effects of psychedelics found that
8 psilocybin combined with psychotherapy resulted in an 83 percent reduction in
9 heavy drinking among patients with alcohol use disorder.

10 Sec. 2. 18 V.S.A. § 4201 is amended to read:

11 § 4201. DEFINITIONS

12 As used in this chapter, ~~unless the context otherwise requires:~~

13 * * *

14 (10) “Hallucinogenic drugs” means stramonium, mescaline or peyote,
15 lysergic acid diethylamide, ~~and psilocybin~~, and all synthetic equivalents of
16 chemicals contained in resinous extractives of Cannabis sativa, or any salts or
17 derivatives or compounds of any preparations or mixtures thereof, and any
18 other substance that is designated as habit-forming or as having a serious
19 potential for abuse arising out of its effect on the central nervous system or its
20 hallucinogenic effect in the rules adopted by the Board of Health under section

1 4202 of this title. “Hallucinogenic drugs” does not include psilocybin for
2 purposes of this chapter.

3 * * *

4 Sec. 3. PSYCHEDELIC THERAPY ADVISORY WORKING GROUP;
5 STUDY

6 (a) Creation. There is created the Psychedelic Therapy Advisory Working
7 Group to examine the use of psychedelics to improve physical and mental
8 health and to make recommendations regarding the establishment of a State
9 program similar to Connecticut, Colorado, or Oregon to permit health care
10 providers to administer psychedelics in a therapeutic setting.

11 (b) Membership. The Working Group shall be composed of the following
12 members:

13 (1) two current members of the House of Representatives, not all from
14 the same political party, who shall be appointed by the Speaker of the House;

15 (2) two current members of the Senate, not all from the same political
16 party, who shall be appointed by the Committee on Committees;

17 (3) the Legislative Chair of the Vermont Psychological Association;

18 (4) a researcher appointed by the Behavioral Pharmacology Research
19 Unit of Johns Hopkins University School of Medicine;

20 (5) the Director of the Vermont Office of Professional Regulation or
21 designee; and

1 (6) a member appointed by Decriminalize Nature.

2 (c) Powers and duties. The Working Group shall:

3 (1) review the latest research and evidence of the benefits and risks of
4 clinical psychedelic assisted treatments;

5 (2) examine the laws and programs of other states that have authorized
6 the use of psychedelics by health care providers in a therapeutic setting and
7 necessary components and resources if Vermont were to pursue such a
8 program;

9 (3) provide an opportunity for individuals with lived experience to
10 provide testimony in both a public setting and through confidential means, due
11 to stigma and current criminalization of the use of psychedelics; and

12 (4) provide potential timelines for universal and equitable access to
13 psychedelic assisted treatments.

14 (d) Assistance. The Working Group shall have the administrative,
15 technical, and legal assistance of the Office of Legislative Operations, the
16 Office of Legislative Counsel, and the Joint Fiscal Office.

17 (e) Report. On or before November 15, 2024, the Working Group shall
18 submit a written report to the House and Senate Committees on Judiciary, the
19 House Committee on Health Care, the House Committee on Human Services,
20 and the Senate Committee on Health and Welfare with its findings and any
21 recommendations for legislative action.

1 (f) Meetings.

2 (1) The Office of Legislative Operations shall call the first meeting of
3 the Working Group to occur on or before September 15, 2023.

4 (2) The Committee shall select a chair from among its legislative
5 members at the first meeting.

6 (3) A majority of the membership shall constitute a quorum.

7 (4) The Working Group shall cease to exist on January 1, 2025.

8 (g) Compensation and reimbursement.

9 (1) For attendance at meetings during adjournment of the General
10 Assembly, a legislative member of the Working Group serving in the person's
11 capacity as a legislator shall be entitled to per diem compensation and
12 reimbursement of expenses pursuant to 2 V.S.A. § 23 for not more than eight
13 meetings. These payments shall be made from monies appropriated to the
14 General Assembly.

15 (2) Other members of the Working Group shall be entitled to per diem
16 compensation and reimbursement of expenses as permitted under 32 V.S.A.
17 § 1010 for not more than eight meetings. These payments shall be made from
18 monies appropriated to the General Assembly.

19 Sec. 4. EFFECTIVE DATE

20 This act shall take effect on July 1, 2023.