

1 S.114

2 Introduced by Senators Gulick, Hashim, Lyons, McCormack, Perchlik, Ram

3 Hinsdale, Vyhovsky, Watson and White

4 Referred to Committee on

5 Date:

6 Subject: Regulated drugs; psilocybin; crimes

7 Statement of purpose of bill as introduced: This bill proposes to make findings
8 regarding the therapeutic benefits of psilocybin, to remove criminal penalties
9 for possession of psilocybin; and to establish the Psychedelic Therapy
10 Advisory Working Group to examine the use of psychedelics to improve
11 physical and mental health and to make recommendations regarding the
12 establishment of a State program similar to Connecticut, Colorado, or Oregon
13 to permit health care providers to administer psychedelics in a therapeutic
14 setting.

15 An act relating to removal of criminal penalties for possessing, dispensing,
16 or selling psilocybin and establishment of the Psychedelic Therapy
17 Advisory Working Group

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

19 Sec. 1. FINDINGS

20 The General Assembly finds that:

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

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

9 (3) The Johns Hopkins Center for Psychedelic and Consciousness
10 Research is the leading research institution conducting a number of studies to
11 examine the potential benefits of psilocybin as a therapeutic drug for mental
12 illnesses.

13 (A) A Johns Hopkins study published in 2022 demonstrated
14 substantial antidepressant effects of psilocybin-assisted therapy for at least
15 12 months following acute intervention in some patients, with no reported
16 adverse effects or continued use of psilocybin by patients outside the context
17 of the study.

18 (B) A 2014 study by Johns Hopkins researchers found that longtime
19 smokers who had failed many attempts to drop the habit did so after a carefully
20 controlled and monitored use of psilocybin. The abstinence rate for study

1 participants was 80 percent after six months, substantially higher than typical
2 success rates in smoking cessation trials.

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

7 (5) In a 2020 article published in the journal *Frontiers in Psychiatry*
8 found that in a sample of 440 patients who self-administered LSD or
9 psilocybin in a naturalistic context, 96 percent of subjects met substance use
10 disorder criteria before psychedelic use. Following psychedelic use, only
11 27 percent met criteria for a substance use disorder. According to the study,
12 participants rated their psychedelic experience as highly meaningful and
13 insightful, with 28 percent endorsing psychedelic-associated changes in life
14 priorities or values as facilitating reduced substance misuse. Greater
15 psychedelic dose, insight, mystical-type effects, and personal meaning of
16 experiences were associated with greater reduction in drug consumption.

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

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

2 § 4201. DEFINITIONS

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

4 * * *

5 (10) “Hallucinogenic drugs” means stramonium, mescaline or peyote,
6 lysergic acid diethylamide, ~~and psilocybin~~, and all synthetic equivalents of
7 chemicals contained in resinous extractives of Cannabis sativa, or any salts or
8 derivatives or compounds of any preparations or mixtures thereof, and any
9 other substance that is designated as habit-forming or as having a serious
10 potential for abuse arising out of its effect on the central nervous system or its
11 hallucinogenic effect in the rules adopted by the Board of Health under section
12 4202 of this title. “Hallucinogenic drugs” does not include psilocybin for
13 purposes of this chapter.

14 * * *

15 Sec. 3. PSYCHEDELIC THERAPY ADVISORY WORKING GROUP;

16 STUDY

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

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

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

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

7 (3) a member appointed by the Psychedelic Society of Vermont;

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

10 (5) the Director of the Vermont Office of Professional Regulation or
11 designee; and

12 (6) a member appointed by Decriminalize Nature.

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

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

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

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

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

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

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

14 (f) Meetings.

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

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

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

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

21 (g) Compensation and reimbursement.

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

7 (2) Other members of the Working Group shall be entitled to per diem
8 compensation and reimbursement of expenses as permitted under 32 V.S.A.
9 § 1010 for not more than eight meetings. These payments shall be made from
10 monies appropriated to the General Assembly.

11 Sec. 4. EFFECTIVE DATE

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