## BILL AS INTRODUCED AND PASSED BY SENATES.1142023Page 1 of 9

1	S.114
2	Introduced by Senators Gulick, Hashim, Lyons, McCormack, Perchlik, Ram
3	Hinsdale, Vyhovsky, Watson and White
4	Referred to Committee on Health and Welfare
5	Date: March 1, 2023
6	Subject: Regulated drugs; psilocybin; crimes
7	Statement of purpose of bill as introduced: This bill proposes to make
8	findings regarding the therapeutic benefits of psilocybin, to remove criminal
9	penalties for possession of psilocybin; and to establish the Psychedelic
10	Therapy Advisory Working Group to examine the use of psychedelics to
11	improve physical and mental health and to make recommendations regarding
12	the establishment of a State program similar to Connecticut, Colorado, or
13	Oregon to permit health care providers to administer psychedelics in a
14	therapeutic setting.
15 16 17	An act relating to the establishment of the Psychedelic Therapy Advicery Working Crowp An act relating to the establishment of the Psychedelic Therapy Advisory Working Group

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

19	Stor The State of Sta

20 The General Assembly finds that

1	(1) Ton municipalities, three states, and the District of Columbia
2	recently have relaxed laws or policies regarding the possession and use of
3	psilocytin 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 versans with post-traumatic stress disorder, addiction,
8	and other serious mental hearth 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
20	carefully controlled and monitored use of psilocybin. The abstinence rate for

1	study participants was 80 percent after six months, substantially higher than
2	typical 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 comumption.
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 VS A $\frac{8}{4201}$ is amonded to read:
2	§ 4201. DEFINITIONS
3	As used in this chapter, unless the context otherwise requires:
4	* * *
5	(10) "Halucinogenic drugs" means stramonium, mescaline or peyote,
6	lysergic acid diethy amide, 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 psychedelies in a therapeutic setting.

1	(b) Membership. The Working Group shall be composed of the following
2	men bers:
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	(2) provide an apportunity 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 Nevember 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 reinfoursement.

- 1 of the Conoral 2 Assembly, a legislative member of the Working Group serving in the person's 3 capacity as a regislator shall be entitled to per diem compensation and reimbursement of expenses pursuant to 2 V.S.A. § 23 for not more than eight 4 5 meetings. These payments shall be made from monies appropriated to the 6 General Assembly. (2) Other members of the Working Croup shall be entitled to per diem 7 compensation and reimbursement of expenses as permitted under 32 V.S.A. 8 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 <u>This act shall take effect on July 1, 2023.</u>

## Sec. 1. PSYCHEDELIC THERAPY ADVISORY WORKING GROUP; STUDY

(a) Creation. There is created the Psychedelic Therapy Advisory Working Group to examine the use of psychedelics to improve physical and mental health and to make findings and recommendations regarding the advisability of the establishment of a State program similar to other jurisdictions to permit health care providers to administer psychedelics in a therapeutic setting and the impact on public health of allowing individuals to legally access psychedelics under State law.

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

(1) a representative of the Larner College of Medicine at the University of Vermont, appointed by the Dean;

(2) a representative of the Brattleboro Retreat, appointed by the President and Chief Executive Officer;

(3) a member of the Vermont Psychological Association, appointed by the President;

(4) a member of the Vermont Psychiatric Association, appointed by the *President*;

(5) the Executive Director of the Vermont Board of Medical Practice or designee;

(6) the Director of the Vermont Office of Professional Regulation or designee;

(7) the Vermont Commissioner of Health or designee; and

(8) a co-founder of the Psychedelic Society of Vermont.

(c) Powers and duties.

(1) The Working Group shall:

(A) review the latest research and evidence of the public health benefits and risks of clinical psychedelic assisted treatments and of criminalization of psychedelics under State law;

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

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

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

(2) The Working Group shall seek testimony from Johns Hopkins' Center for Psychedelic and Consciousness Research and Decriminalize Nature, in addition to any other individuals or entities with an expertise in psychedelics.

(d) Assistance. The Working Group shall have the assistance of the Vermont Psychological Association for purposes of scheduling and staffing meetings and developing and submitting the report required by subsection (e) of this section.

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

(f) Meetings.

(1) The Vermont Psychological Association shall call the first meeting of the Working Group to occur on or before July 15, 2024.

(2) The Working Group shall select a chair from among its members at the first meeting.

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

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

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

Sec. 2. EFFECTIVE DATE

This act shall take effect on July 1, 2024.