HB 1809-FN - AS INTRODUCED

2026 SESSION

26-2497
05/09

HOUSE BILL ***1809-FN***

AN ACT authorizing the medical use of psilocybin through a program established in the department of health and human services.

SPONSORS: Rep. Scherr, Rock. 26; Rep. C. McGuire, Merr. 27; Rep. Layon, Rock. 13; Rep. Mandelbaum, Rock. 21; Rep. Sabourin dit Choiniere, Rock. 30; Sen. Fenton, Dist 10

COMMITTEE: Health, Human Services and Elderly Affairs

ANALYSIS

This bill authorizes the medical use of psilocybin through a program established in the department of health and human services.

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Explanation: Matter added to current law appears in ***bold italics.***
Matter removed from current law appears [~~in brackets and struckthrough.~~]
Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

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STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty-Six

AN ACT authorizing the medical use of psilocybin through a program established in the department of health and human services.

Be it Enacted by the Senate and House of Representatives in General Court convened:

1 Statement of Purpose. The medical community has always recognized that patients exist with serious conditions that are very resistant to effective treatment. Recently, research has begun to show that certain of those patients have had positive results with the closely supervised use of psilocybin for treatment. Patients with significant post-traumatic stress disorder, with treatment-resistant clinical depression, and with serious substance use disorder have been shown to benefit from the controlled, therapeutic use of psilocybin in a supervised setting. The purpose of this act is to create a carefully monitored and closely supervised setting in which an approved medical provider can treat a carefully chosen patient with appropriate doses of psilocybin which that same provider has produced for a medical intervention.

2 New Chapter; Medical Use of Psilocybin. Amend RSA by inserting after chapter 126-Z the following new chapter:

CHAPTER 126-ZZ

MEDICAL USE OF PSILOCYBIN

126-ZZ:1 Definitions. In this chapter:

I. "Department" means the department of health and human services.

II. "Provider" means an approved medical provider licensed in New Hampshire who has been approved by the department to provide medical services to qualified patients and who has been approved by the department to produce the psilocybin they will use as a provider.

III. "Medical services" means services provided to a patient in an approved setting before, during, and after the ingestion of psilocybin and includes a preparation session, an administration session and an integration session.

IV. "Provider" or "producer" means a person who grows and harvests or prepares psilocybin from psilocybin-producing mushrooms, including to compound, convert, process, or manufacture psilocybin products directly or indirectly from psilocybin mushrooms and who has been approved as a provider.

V. "Program" means the medical use of psilocybin program.

VI. "Psilocybin" means the naturally occurring psychedelic compound 4-phosphoryloxy-N,N-dimethyltryptamine, also known as 4-PO-DMT, and its pharmacologically active metabolite psilocin, 4-hydroxy-N,N-dimethyltryptamine, found in certain mushrooms, but does not include synthetic or synthetic analogs of psilocybin.

VII. "Qualified patient" means a patient whom a provider, as defined by RSA 126-ZZ:1, IV, has diagnosed a medically appropriate candidate for the use of medical psilocybin based on being diagnosed with a qualifying condition.

VIII. "Qualifying condition" includes:

(a) Major treatment-resistant depression;

(b) Post-traumatic stress disorder;

(c) Substance use disorders; and

(d) Other conditions recommended by the advisory board to the department and approved by the department.

126-ZZ:2 Medical Use of Psilocybin Program. The department shall establish a medical use of psilocybin program that will:

I. Approve providers for the use of psilocybin in therapeutic doses with qualifying patients.

II. Approve the above providers as producers of psilocybin in therapeutic doses to qualifying patients.

III. Compile a public list of provider/producers that includes the name and address of each provider and provider/producer.

IV. Establish requirements for data collection to evaluate the program and the use of best practices by provider/producers.

V. Establish other requirements, restrictions, and limitations through rules promulgated by the department to ensure an efficacious program.

126-ZZ:3 Provider/Producer Application. Only a provider/producer who has received an approval by the department for the medical use of psilocybin subject to the rules established under 126-ZZ:4 shall be allowed to provide psilocybin to a qualified patient. To receive an approval, the provider shall complete an application that:

I. Lists the names, addresses, and birthdates of the owner of the provider's organization or business and all those within the organization or business who will be involved in any fashion with the medical use of psilocybin.

II. Provides the curriculum vitae of all those within the organization or business who will supervise the use of psilocybin by a qualified patient.

III. Identifies and describes the location or locations at which the supervised medical use of psilocybin will occur.

IV. Identifies and describes the location or locations at which the supervised production of psilocybin will occur.

V. Identifies any other state in which the provider/producer has been authorized in any fashion to provide psilocybin medically or therapeutically.

126-ZZ:4 Rulemaking; Approval of Provider/Producers. The commissioner of the department of health and human services shall adopt rules under RSA 541-A in consultation with the medical

psilocybin advisory board relative to administration of the psilocybin program, including eligibility criteria for patients, application procedures, and criteria for approval of provider/producers.

126-ZZ:5 Exemptions. A provider/producer who produces therapeutic amounts of psilocybin and provides a qualifying patient with therapeutic amounts of psilocybin shall be exempt from state criminal statutes regarding the possession, production, or sale of those therapeutic amounts provided to qualifying patients. Any provider/producer who produces psilocybin for any use other than for providing therapeutic doses to a qualifying patient shall not be exempt from criminal prosecution. Any provider/producer who provides psilocybin to anyone for any use other than to provide therapeutic doses to a qualifying patient shall not be exempt from criminal prosecution.

126-ZZ:6 Advisory Board.

I. There is hereby established the medical psilocybin advisory board which shall monitor and contribute to the assessment of the clinical, quality, and public health related matters of the use of psilocybin for therapeutic purposes under this chapter.

II. The board shall consist of the following members:

(a) The medical director, department of health and human services, or designee;

(b) A qualifying patient, appointed by the commissioner of the department;

(c) A representative from the veterans' affairs community;

(d) Eight medical and other providers, appointed by the commissioner, representative of the following fields:

(1) At least one medical psilocybin researcher.

(2) At least 2 administrative representatives from existing programs regulating the medical use of psilocybin.

(3) Addiction services.

(4) Palliative care.

(5) Veterans' affairs.

(6) Naturopathy.

(7) Registered nursing.

(8) Mental health counseling.

III. The members of the board need not be residents of New Hampshire in order to encourage the greatest possible expertise in board members.

IV. At its first meeting the board shall elect by majority vote a chairperson and an alternate. A quorum shall consist of a majority of members.

V. The board shall convene at least 4 times per year to monitor and contribute to the oversight and assessment of the clinical, quality, and public health related matters of therapeutic psilocybin under this chapter by:

(a) Reviewing medical and scientific evidence pertaining to currently approved and additional qualifying conditions.

(b) Monitoring clinical outcomes.

(c) Reviewing protocols for producer/provider staff based on models from other states.

(d) Receiving updates from alternative treatment centers in other states on effectiveness of the medical use of psilocybin.

(e) Reviewing best practices for medical providers regarding provider education, certification of patients, and patient access to the program.

(f) Reviewing any other clinical, quality, and public health related matter relative to use of psilocybin under this chapter.

(g) Reviewing the efficacy of a further expansion of the therapeutic psilocybin program.

VI. The board shall be empowered to meet electronically to facilitate the inclusion of members who live outside the state of New Hampshire.

VII. Beginning January 1, 2027, and annually thereafter, the board shall submit a report of its activities, findings, and recommendations to the governor, speaker of the house of representatives, senate president, house clerk, senate clerk, and state library.

3 Contingency. RSA 126-ZZ:1 through RSA 126-ZZ:5, as inserted by section 2 of this act, shall take effect 30 days after the medical psilocybin advisory board certifies to the governor, speaker of the house of representatives, the president of the senate, and the director of the office of legislative services that the program is ready for implementation as outlined in RSA 126-ZZ. If the medical psilocybin advisory board does not make such a certification within 2 years of the effective date of this act, RSA 126-ZZ:1 through RSA 126-ZZ:5 shall not take effect.

4 Effective Date.

I. RSA 126-ZZ:1 through RSA 126-ZZ:5, as inserted by section 2 of this act, shall take effect as provided in section 3 of this act.

II. The remainder of this act shall take effect upon its passage.

LBA
26-2497
12/16/25

HB 1809-FN- FISCAL NOTE
AS INTRODUCED

AN ACT authorizing the medical use of psilocybin through a program established in the department of health and human services.

FISCAL IMPACT: This bill does not provide funding, nor does it authorize new positions.

Estimated State Impact				
	FY 2026	**FY 2027**	**FY 2028**	**FY 2029**
Revenue	$0	$0	$0	$0
Revenue Fund(s)	None			
Expenditures*	$0	Indeterminable	Indeterminable	Indeterminable
Funding Source(s)	General Fund			
Appropriations*	$0	$0	$0	$0
Funding Source(s)	None			

***Expenditure = Cost of bill** ***Appropriation = Authorized funding to cover cost of bill**

METHODOLOGY:

This bill authorizes the medical use of psilocybin in the state, pending a determination by the newly-established medical psilocybin advisory board that a regulatory program is ready for implementation. If the board does not make such a determination within two years of the bill becoming law, the remainder of the bill will not take effect. Assuming the program becomes operational, the Department of Health and Human Services will be required to:

1. Establish and oversee the program;
2. Approve health care providers, and provider/producers, for the cultivation and administration of medical psilocybin to qualified patients, and maintain a list of approved providers/producers;
3. Collect data for program evaluation and the use of best practices; and
4. Adopt rules for the proper administration and regulation of the program, including on eligibility, application procedures, and qualifications.

The Department would also be responsible for providing administrative support to the advisory board. Assuming the program ultimately goes into effect, the Department anticipates needing one new administrator and one new program administrator. Including equipment and other upfront expenses, the Department anticipates costs of $250,000 in the first full year of implementation, followed by $224,000 and $236,000 in the second and third years, respectively.

AGENCIES CONTACTED:

Department of Health and Human Services