

Amendment to HB 1809-FN

1 Amend the title of the bill by replacing it with the following:

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3 AN ACT establishing a medical psilocybin advisory board to assess the advantages and
4 disadvantages of the use of psilocybin for therapeutic purposes.
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6 Amend the bill by replacing all after the enacting clause with the following:

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8 1 Statement of Purpose. The medical community has always recognized that patients exist with
9 serious conditions that are very resistant to effective treatment. Recently, research has begun to
10 show that certain of those patients have had positive results with the closely supervised use of
11 psilocybin for treatment. Patients with significant post-traumatic stress disorder, with treatment-
12 resistant clinical depression, and with serious substance use disorder have been shown to benefit
13 from the controlled, therapeutic use of psilocybin in a supervised setting. The purpose of this act is
14 to study the feasibility of the creation of a carefully monitored and closely supervised setting in
15 which an approved medical provider can treat a carefully chosen patient with appropriate doses of
16 psilocybin which that same provider has produced for a medical intervention.

17 2 New Chapter; Medical Psilocybin Advisory Board. Amend RSA by inserting after chapter 126-
18 Z the following new chapter:

19

CHAPTER 126-ZZ

20

Medical Psilocybin Advisory Board

21

126-ZZ:1 Definitions. In this chapter:

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

23

24 II. "Provider" means an approved medical provider licensed in New Hampshire who has
25 been approved by the department to provide medical services to qualified patients.

25

26 III. "Producer" means a person who grows and harvests or prepares psilocybin from
27 psilocybin-producing mushrooms, including to compound, convert, process, or manufacture
28 psilocybin products directly or indirectly from psilocybin mushrooms and who has been approved as
29 a provider.

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

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31 V. "Psilocybin" means the naturally occurring psychedelic compound 4-phosphoryloxy-N,N-
dimethyltryptamine, also known as 4-PO-DMT, and its pharmacologically active metabolite psilocin,

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1 4-hydroxy-N,N-dimethyltryptamine, found in certain mushrooms, but does not include synthetic or
2 synthetic analogs of psilocybin.

3 VI. "Qualifying patient" means a patient whom a provider, as defined by RSA 126-ZZ:1, II,
4 has diagnosed a medically appropriate candidate for the use of medical psilocybin based on being
5 diagnosed with a qualifying condition.

6 VII. "Qualifying condition" means any of the following:

- 7 (a) Major treatment-resistant depression;
- 8 (b) Post-traumatic stress disorder;
- 9 (c) Substance use disorders; and
- 10 (d) Other conditions recommended by the advisory board to the department.

11 126-ZZ:2 Medical Psilocybin Advisory Board.

12 I. There is hereby established the medical psilocybin advisory board, which shall assess the
13 clinical, quality, and public health related advantages and disadvantages of the use of psilocybin for
14 therapeutic purposes under this chapter and, if appropriate, design a program for the medical use of
15 psilocybin.

16 II. Notwithstanding RSA 14:49, the board shall consist of the following members:

- 17 (a) The medical director of the department of health and human services, or designee.
- 18 (b) A qualifying patient, appointed by the commissioner of the department of health and
19 human services.
- 20 (c) A representative from the veterans' affairs community, appointed by the
21 commissioner of the department of health and human services.
- 22 (d) A representative from the house of representatives, appointed by the speaker of the
23 house of representatives.
- 24 (e) A representative from the house of representatives, nominated by the minority leader
25 of the house and appointed by the speaker of the house of representatives.
- 26 (f) Nine medical and other providers, appointed by the commissioner of the department
27 of health and human services, representing the following fields:
 - 28 (1) At least one medical psilocybin researcher.
 - 29 (2) At least 2 administrative representatives from existing programs regulating the
30 medical use of psilocybin.
 - 31 (3) Addiction services.
 - 32 (4) Palliative care.
 - 33 (5) Veterans' affairs.
 - 34 (6) Naturopathy.
 - 35 (7) Registered nursing.
 - 36 (8) Mental health counseling.

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1 III. The board shall convene at least 6 times per year to assess the clinical, quality, and
2 public health related advantages and disadvantages of the use of psilocybin for therapeutic purposes
3 under this chapter and, if appropriate, design a program for the medical use of psilocybin by:

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

6 (b) Identifying clinical outcomes nationally.

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

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

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

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

15 (g) Reviewing the efficacy of the establishment of therapeutic psilocybin program in New
16 Hampshire.

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

19 V. At its first meeting, the board shall elect by majority vote a chairperson and an alternate.

20 VI. The board may meet electronically to facilitate the inclusion of members who live outside
21 the state of New Hampshire.

22 VII. Beginning November 1, 2028, and annually thereafter, the board shall submit a report
23 of its activities, findings, and recommendations to the governor, speaker of the house of
24 representatives, senate president, house clerk, senate clerk, and state library.

25 3 Repeal. RSA 126-ZZ, relative to the medical psilocybin advisory board, is repealed.

26 4 Effective Date.

27 I. Section 3 of this act shall take effect November 1, 2030.

28 II. The remainder of this act shall take effect July 1, 2027.

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2026-1201h

AMENDED ANALYSIS

This bill establishes a medical psilocybin advisory board to assess the advantages and disadvantages of the use of psilocybin for therapeutic purposes.