

2SSB 5263 - H COMM AMD

By Committee on Health Care & Wellness

ADOPTED 04/11/2023

1 Strike everything after the enacting clause and insert the
2 following:

3 "NEW SECTION. **Sec. 1.** The legislature intends to establish an
4 advisory board, interagency work group, and a task force to provide
5 advice and recommendations on developing a comprehensive regulatory
6 framework for access to regulated psilocybin for Washington residents
7 who are at least 21 years of age.

8 NEW SECTION. **Sec. 2.** The legislature declares that the purposes
9 of this chapter are:

10 (1) To develop a long-term strategic plan for ensuring that
11 psilocybin services become and remain a safe, accessible, and
12 affordable option for all persons 21 years of age and older in this
13 state for whom psilocybin may be appropriate or as part of their
14 indigenous religious or cultural practices;

15 (2) To protect the safety, welfare, health, and peace of the
16 people of this state by prioritizing this state's limited law
17 enforcement resources in the most effective, consistent, and rational
18 way;

19 (3) To develop a comprehensive regulatory framework concerning
20 psilocybin products and psilocybin services under state law;

21 (4) To prevent the distribution of psilocybin products to other
22 persons who are not permitted to possess psilocybin products under
23 this chapter including but not limited to persons under 21 years of
24 age; and

25 (5) To prevent the diversion of psilocybin products from this
26 state to other states.

27 NEW SECTION. **Sec. 3.** This chapter may be known and cited as the
28 Washington psilocybin services act.

1 NEW SECTION. **Sec. 4.** (1) The Washington psilocybin advisory
2 board is established within the department of health to provide
3 advice and recommendations to the department of health, the liquor
4 and cannabis board, and the department of agriculture. The Washington
5 psilocybin advisory board shall consist of:

6 (a) Members appointed by the governor as specified in subsection
7 (2) of this section;

8 (b) The secretary of the department of health or the secretary's
9 designee;

10 (c) The state health officer or a physician acting as the state
11 health officer's designee;

12 (d) A representative from the department of health who is
13 familiar with public health programs and public health activities in
14 this state; and

15 (e) A designee of the public health advisory board.

16 (2) The governor shall appoint the following individuals to the
17 Washington psilocybin advisory board:

18 (a) Any four of the following:

19 (i) A state employee who has technical expertise in the field of
20 public health;

21 (ii) A local health officer;

22 (iii) An individual who is a member of, or who represents, a
23 federally recognized Indian tribe in this state;

24 (iv) An individual who is a member of, or who represents, a body
25 that provides policy advice relating to substance use disorder
26 policy;

27 (v) An individual who is a member of, or who represents, a body
28 that provides policy advice relating to health equity;

29 (vi) An individual who is a member of, or who represents, a body
30 that provides policy advice related to palliative care and quality of
31 life; or

32 (vii) An individual who represents individuals who provide public
33 health services directly to the public;

34 (b) A military veteran, or representative of an organization that
35 advocates on behalf of military veterans, with knowledge of
36 psilocybin;

37 (c) A social worker, mental health counselor, or marriage and
38 family therapist licensed under chapter 18.225 RCW;

39 (d) A person who has knowledge regarding the indigenous or
40 religious use of psilocybin;

1 (e) A psychologist licensed under chapter 18.83 RCW who has
2 professional experience engaging in the diagnosis or treatment of a
3 mental, emotional, or behavioral condition;

4 (f) A physician licensed under chapter 18.71 RCW;

5 (g) A naturopath licensed under chapter 18.36A RCW;

6 (h) An expert in the field of public health who has a background
7 in academia;

8 (i) Any three of the following:

9 (i) A person who has professional experience conducting
10 scientific research regarding the use of psychedelic compounds in
11 clinical therapy;

12 (ii) A person who has experience in the field of mycology;

13 (iii) A person who has experience in the field of ethnobotany;

14 (iv) A person who has experience in the field of
15 psychopharmacology; or

16 (v) A person who has experience in the field of harm reduction;

17 (j) A person designated by the liquor and cannabis board who has
18 experience working with the cannabis central reporting system
19 developed for tracking the transfer of cannabis items;

20 (k) The attorney general or the attorney general's designee; and

21 (l) One, two, or three at large members.

22 (3) (a) Members of the Washington psilocybin advisory board shall
23 serve for a term of four years, but at the pleasure of the governor.
24 Before the expiration of the term of a member, the governor shall
25 appoint a successor whose term begins on January 1st of the following
26 year. A member is eligible for reappointment. If there is a vacancy
27 for any cause, the governor shall make an appointment to become
28 immediately effective for the unexpired term.

29 (b) Members of the board described in subsection (1)(b) through
30 (e) of this section are nonvoting ex officio members of the board.

31 (4) A majority of the voting members of the board constitutes a
32 quorum. Official adoption of advice or recommendations by the
33 Washington psilocybin advisory board requires the approval of a
34 majority of the voting members of the board.

35 (5) The board shall elect one of its voting members to serve as
36 chair.

37 (6) Until July 1, 2024, the Washington psilocybin advisory board
38 shall meet at least five times a calendar year at a time and place
39 determined by the chair or a majority of the voting members of the
40 board. After July 1, 2024, the board shall meet at least once every

1 calendar quarter at a time and place determined by the chair or a
2 majority of the voting members of the board. The board may meet at
3 other times and places specified by the call of the chair or of a
4 majority of the voting members of the board.

5 (7) The Washington psilocybin advisory board may adopt rules
6 necessary for the operation of the board.

7 (8) The Washington psilocybin advisory board may establish
8 committees and subcommittees necessary for the operation of the
9 board.

10 (9) The members of the Washington psilocybin advisory board may
11 receive reimbursement or an allowance for expenses within amounts
12 appropriated for that specific purpose consistent with RCW 43.03.220.

13 NEW SECTION. **Sec. 5.** (1) An interagency psilocybin work group
14 of the department of health, the liquor and cannabis board, and the
15 department of agriculture is created to provide advice and
16 recommendations to the advisory board on the following:

17 (a) Developing a comprehensive regulatory framework for a
18 regulated psilocybin system, including a process to ensure clean and
19 pesticide free psilocybin products;

20 (b) Reviewing indigenous practices with psilocybin, clinical
21 psilocybin trials, and findings;

22 (c) Reviewing research of medical evidence developed on the
23 possible use and misuse of psilocybin therapy; and

24 (d) Ensuring that a social opportunity program is included within
25 any licensing program created under this chapter to remedy the
26 targeted enforcement of drug-related laws on overburdened
27 communities.

28 (2) The findings of the psilocybin task force in section 6 of
29 this act must be submitted to the interagency work group created in
30 this section and to the psilocybin advisory board.

31 (3) The interagency psilocybin work group must submit regular
32 updates to the psilocybin advisory board.

33 NEW SECTION. **Sec. 6.** (1) The health care authority must
34 establish a psilocybin task force to provide a report on psilocybin
35 services. The director of the health care authority or the director's
36 designee must be a member of the task force and serve as chair. The
37 task force must also include, without limitation, the following
38 members:

- 1 (a) The secretary of the department of health or the secretary's
2 designee;
- 3 (b) The director of the liquor and cannabis board or the
4 director's designee; and
- 5 (c) As appointed by the director of the health care authority, or
6 the director's designee:
- 7 (i) A military veteran, or representative of an organization that
8 advocates on behalf of military veterans, with knowledge of
9 psilocybin;
- 10 (ii) Up to two recognized indigenous practitioners with knowledge
11 of the use of psilocybin or other psychedelic compounds in their
12 communities;
- 13 (iii) An individual with expertise in disability rights advocacy;
- 14 (iv) A public health practitioner;
- 15 (v) Two psychologists with knowledge of psilocybin, experience in
16 mental and behavioral health, or experience in palliative care;
- 17 (vi) Two mental health counselors, marriage and family
18 therapists, or social workers with knowledge of psilocybin,
19 experience in mental and behavioral health, or experience in
20 palliative care;
- 21 (vii) Two physicians with knowledge of psilocybin, experience in
22 mental and behavioral health, or experience in palliative care;
- 23 (viii) A health researcher with expertise in health equity or
24 conducting research on psilocybin;
- 25 (ix) A pharmacologist with expertise in psychopharmacology;
- 26 (x) A representative of the cannabis industry with knowledge of
27 regulation of medical cannabis and the cannabis business in
28 Washington;
- 29 (xi) An advocate from the LGBTQIA community with knowledge of the
30 experience of behavioral health issues within that community;
- 31 (xii) A member of the psychedelic medicine alliance of
32 Washington; and
- 33 (xiii) Up to two members with lived experience of utilizing
34 psilocybin.
- 35 (2) The health care authority must convene the first meeting of
36 the task force by June 30, 2023.
- 37 (3) The health care authority must provide a final report to the
38 governor and appropriate committees of the legislature by December 1,
39 2023, in accordance with RCW 43.01.036. The health care authority may

1 form subcommittees within the task force and adopt procedures
2 necessary to facilitate its work.

3 (4) The duties of the health care authority in consultation with
4 the task force must include, without limitation, the following
5 activities:

6 (a) Reviewing the available clinical information around specific
7 clinical indications for use of psilocybin, including what co-
8 occurring diagnoses or medical and family histories may exclude a
9 person from use of psilocybin. Any review of clinical information
10 should:

11 (i) Discuss populations excluded from existing clinical trials;

12 (ii) Discuss factors considered when approval of a medical
13 intervention is approved;

14 (iii) Consider the diversity of participants in clinical trials
15 and the limitations of each study when applying learnings to the
16 population at large; and

17 (iv) Identify gaps in the clinical research for the purpose of
18 identifying opportunities for investment by the state for the
19 University of Washington, Washington State University, or both to
20 consider studying.

21 (b) Reviewing and discussing regulatory structures for clinical
22 use of psilocybin in Washington and other jurisdictions nationally
23 and globally. This should include discussing how various regulatory
24 structures do or do not address concerns around public health and
25 safety the task force has identified.

26 (5) The department of health, liquor and cannabis board, and
27 department of agriculture must provide subject matter expertise and
28 support to the task force and any subcommittee meetings. For the
29 department of health, subject matter expertise includes an individual
30 or individuals with knowledge and experience in rule making, the
31 regulation of health professionals, and the regulation of health
32 facilities.

33 (6) Meetings of the task force under this section must be open to
34 participation by members of the public.

35 (7) Task force members participating on behalf of an employer,
36 governmental entity, or other organization are not entitled to be
37 reimbursed for travel expenses if they are elected officials or are
38 participating on behalf of an employer, governmental entity, or other
39 organization. Any reimbursement for other nonlegislative members is
40 subject to chapter 43.03 RCW.

1 (8) It is the legislature's intent that the provisions of this
2 section supersede section 211(99), chapter 297, Laws of 2022.

3 (9) This section expires June 30, 2024.

4 NEW SECTION. **Sec. 7.** (1) The duties, functions, and powers of
5 the department of health specified in this chapter include the
6 following:

7 (a) To examine, publish, and distribute to the public available
8 medical, psychological, and scientific studies, research, and other
9 information relating to the safety and efficacy of psilocybin in
10 treating mental health conditions including, but not limited to,
11 addiction, depression, anxiety disorders, and end-of-life
12 psychological distress, and the potential for psilocybin to promote
13 community, address trauma, and enhance physical and mental wellness;

14 (b) To adopt, amend, or repeal rules necessary to carry out the
15 intent and provisions of this chapter, including rules that the
16 department of health considers necessary to protect the public health
17 and safety;

18 (c) To exercise all powers incidental, convenient, or necessary
19 to enable the department of health to administer or carry out this
20 chapter or any other law of this state that charges the department of
21 health with a duty, function, or power related to psilocybin products
22 and psilocybin services. Powers described in this subsection include,
23 but are not limited to:

24 (i) Issuing subpoenas;

25 (ii) Compelling the attendance of witnesses;

26 (iii) Administering oaths;

27 (iv) Certifying official acts;

28 (v) Taking depositions as provided by law; and

29 (vi) Compelling the production of books, payrolls, accounts,
30 papers, records, documents, and testimony.

31 (2) The jurisdiction, supervision, duties, functions, and powers
32 held by the department of health under this section are not shared by
33 the pharmacy quality assurance commission under chapter 18.64 RCW.

34 NEW SECTION. **Sec. 8.** (1) Subject to amounts appropriated for
35 this purpose, the psilocybin therapy services pilot program is
36 established within, and administered by, the University of Washington
37 department of psychiatry and behavioral sciences. No later than

1 January 1, 2025, the University of Washington department of
2 psychiatry and behavioral sciences must implement this section.

3 (2) The pilot program must:

4 (a) Offer psilocybin therapy services through pathways approved
5 by the federal food and drug administration, to populations including
6 first responders and veterans who are:

7 (i) 21 years of age or older; and

8 (ii) Experiencing posttraumatic stress disorder, mood disorders,
9 or substance use disorders;

10 (b) Offer psilocybin therapy services facilitated by:

11 (i) An advanced social worker, independent clinical social
12 worker, or mental health counselor licensed under chapter 18.225 RCW;

13 (ii) A physician licensed under chapter 18.71 RCW; or

14 (iii) A psychiatric advanced registered nurse practitioner
15 licensed under chapter 18.79 RCW as defined in RCW 71.05.020;

16 (c) Ensure psilocybin therapy services are safe, accessible, and
17 affordable;

18 (d) Require an initial assessment to understand participant goals
19 and expectations, and assess the participant's history for any
20 concerns that require further intervention or information before
21 receiving psilocybin therapy services, and an integration session
22 after receiving psilocybin therapy services; and

23 (e) Use outreach and engagement strategies to include
24 participants from communities or demographic groups that are more
25 likely to be historically marginalized and less likely to be included
26 in research and clinical trials represented by race, sex, sexual
27 orientation, socioeconomic status, age, or geographic location.

28 NEW SECTION. **Sec. 9.** Medical professionals licensed by the
29 state of Washington shall not be subject to adverse licensing action
30 for recommending psilocybin therapy services.

31 NEW SECTION. **Sec. 10.** (1) The liquor and cannabis board shall
32 assist and cooperate with the department of health and the department
33 of agriculture to the extent necessary to carry out their duties
34 under this chapter.

35 (2) The department of agriculture shall assist and cooperate with
36 the department of health to the extent necessary for the department
37 of health to carry out the duties under this chapter.

1 NEW SECTION. **Sec. 11.** The department of health, the department
2 of agriculture, and the liquor and cannabis board may not refuse to
3 perform any duty under this chapter on the basis that manufacturing,
4 distributing, dispensing, possessing, or using psilocybin products is
5 prohibited by federal law.

6 NEW SECTION. **Sec. 12.** If any provision of this act or its
7 application to any person or circumstance is held invalid, the
8 remainder of the act or the application of the provision to other
9 persons or circumstances is not affected.

10 NEW SECTION. **Sec. 13.** Sections 1 through 5 and 7 through 11 of
11 this act constitute a new chapter in Title 18 RCW.

12 NEW SECTION. **Sec. 14.** Sections 4 through 6 of this act are
13 necessary for the immediate preservation of the public peace, health,
14 or safety, or support of the state government and its existing public
15 institutions, and take effect immediately."

16 Correct the title.

EFFECT: Adds a military veteran, or representative of an organization that advocates on behalf of military veterans, with knowledge of psilocybin as a voting member of the Washington Psilocybin Advisory Board. Adds a social worker, mental health counselor, or marriage and family therapist as a voting member of the Washington Psilocybin Advisory Board. Replaces a reference to "psilocybin treatments" with a reference to "psilocybin therapy services." Directs the University of Washington Department of Psychiatry and Behavioral Sciences to establish and administer a psilocybin therapy services (services) pilot program (Program) and requires the Program to: (a) Offer services to populations including first responders and veterans who are 21 years of age or older and experiencing posttraumatic stress disorder, mood disorders, or substance use disorders; (b) offer services facilitated by specified health care professionals; (c) ensure services are safe, accessible, and affordable; (d) require an initial assessment before receiving services, and an integration session after receiving services; and (e) use outreach and engagement strategies to include participants from communities or demographic groups that are more likely to be historically marginalized and less likely to be included in research and clinical trials represented by race, sex, sexual orientation, socioeconomic status, age, or geographic location.

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