

Medical Psilocybin Advisory Board

Meeting Minutes & Chat 6/26/26

Location: Microsoft Teams

Date: 6/26/26

Time: 9:00 AM

Organizers: Jonathan Mouchet (DOH), Jorge Gonzales (DOH), Dominick Zurlo (DOH), Brenda Martinez (DOH), Cyrus Rautman (DOH), Katy Freytag (DOH), Leslie Peterson (DOH), Cathy Augeri (DOH), Ian Dunn, Chris Peskuski, Celina Montoya, Larry Leeman, Robert Truckner (DOH), Dan Jennings, Burgard Brenda, Raymond Gallegos (DOH), DezBaa', Alanna Dancis

Attendees: JoEllen Schimmels, Christine Boerner, Christine Boerner, Jennifer Clemente, Kate Hawke, Catherine Sanchez, Jeff Steinborn, Hanifa Nayo Washington, James Blackford, Jason Brooks, Jason Burdge, Gregory Evans, Skye Rivers, Paul Walton, Rachel C, Denali Wilson, Breawwna Wunder, Anne Metz, Andrew Keyes, JoEllen Schimmels, Shane McDaniel, Andrew Conley, James Brown, Scott Shannon, Breawwna Wunder, Joel Apodaca, James Blackford, Reyna Fernandez, Shaina Fawn, Jackie Ashley, Eric Barlow, Deb Thorne, Chuck Lief

Minutes Taker: Cyrus Rautman, DOH

****This meeting was recorded. For specific details pertaining to the meeting, please refer to the recording located on the Medical Psilocybin Advisory Board Website: [Psilocybin Advisory Board](#)***

Agenda items

1. Announcements & Introductions

Dominick opened the meeting at 9:00 and turned things over to Ian Dunn for announcements and introductions. Members of the advisory board introduced themselves. Dominick announced that the purpose of this meeting is to review the draft training requirements.

2. Document review: Training & Education Requirements

Dominick went through the draft rules on Training & Education Requirements. Questions arose about role of Diagnostic Clinician. Alanna Dancis (HCA) elaborated that similar

arrangements are used in other non-FDA approved treatments, then clarified that the program would require a CS number but not a DEA license. Multiple questions on the role of the Diagnostic Clinician – would they be a continuing part of the care team? Concerns were voiced about potential bottlenecks. Dominick clarified that telemedicine options would be available. Alanna opined that this proposed model provides a good balance of safety and access and avoids pitfalls associated with scaling too quickly.

Questions regarding adding a potential distance requirement when mandating WFA or WFR certification for conducting administration sessions in natural areas – DOH will look into. Recommendation that the department increase harm reduction education for first responders in the state. Clarifying question about the “Therapy 101” training for facilitators; Dominick clarified that facilitators will not be performing therapy; added that adding a peer support module is a good idea. Dominick also clarified that “same-day therapy sessions” on administration days is for the purpose of billing insurance. Larry recommended additional training modules specifically for EOL and PTSD. Dominick advised that training programs could offer specific endorsements for EOL, PTSD, etc. Scott Shannon offered his opinion that overregulation may increase cost burden on all points of the treatment chain. The department responded that these recommended requirements are based on best practice recommendations from current practitioners and facilitators as well as MPP committees.

3. Document review: Requirements & Application for Psilocybin Education Programs

Dominick went through the draft rules for Psilocybin Education Programs Requirements & Application. Dominick clarified that we would be looking at a vote this meeting. Dominick clarified that discussion on third party evaluation requirements would continue. Dominick clarified that W-9 is necessary for potential equity fund payment/reimbursement. Alanna asked about attestation vs background check – Dominick answered that DOH does not have authority to require background checks. Ian offered that DOH should look for other avenues for background check verification (HCA?). Discussion followed on delaying discussion of Diagnostic Clinician role and vote on the rest of the framework.

Ian moved to adopt formal recommendations minus the reciprocity timeline, the CS number requirement, and the practicum requirement a vote was held: 3 in favor, 2 opposed; motion passes. reciprocity timeline, the CS number requirement, and the practicum requirement will be discussed at the next meeting. A discussion meeting was set for July 9th from 9:00-11:00am. Ian adjourned the meeting at 11:21am.

Chat

Medical Psilocybin Advisory Board Meeting 6/26/26

External

Mouchet, Jonathan, DOH named the meeting Medical Psilocybin Advisory Board Meeting 6/26/26.

Meeting started at 8:29 AM

Mouchet, Jonathan, DOH started recording.

Gonzales, Jorge, DOH

9:04 AM

Reminder:

This meeting is being recorded

Please remember to keep language appropriate as the recordings are made public on the Advisory Board Website

Zurlo, Dominick, DOH

9:05 AM

Permit Requirements:

Diagnostic Clinician: Qualifications required to certify patients for the medical psilocybin program:

- Have a current and valid license from a recognized New Mexico licensing board which allows diagnosing the qualifying medical condition within their licensure scope of practice (as outlined by their governing licensure Board); and,
- Have a New Mexico Controlled Substance number; and,
- Complete required NMDOH training and continuing educational training requirements annually; and,
- Apply, receive, and maintain a valid permit from the NMDOH medical psilocybin program as a diagnostic clinician.

Practitioner: means an individual who is a licensed healthcare professional who is certified by the department to provide medical psilocybin integrative therapy, supervise facilitators, supervise administrative sessions, supervise same-day therapy sessions, and who has completed department required trainings.

Practitioner (Lead Practitioner): Qualifications to provide psilocybin therapy sessions and supervise facilitators:

- Have a current and valid license from a recognized New Mexico licensing board which allows for the delivery of counseling, mental health therapy, or behavioral health therapy within their licensure scope of practice (as outlined by their governing licensure Board); and,
- Complete required NMDOH training and continuing educational training requirements; and,
- Apply, receive, and maintain a valid permit from the NMDOH medical psilocybin program as a practitioner.

Gregory Evans

9:06 AM

someone has an open mic that is causing a signifigant amount of feedback. and not like positive feedback.

Gonzales, Jorge, DOH

9:08 AM

The Department of Health's Center for Medical Cannabis and Psilocybin is excited to announce the promulgation of the Medical Psilocybin program's requirements for Producer and Laboratories. Those can be found here: [Adopted Rules, Issue 12 - State Records Center & Archives](#). Please review these rules to understand the detailed requirements expected for producers of psilocybin mushrooms and of the testing laboratories. The applications for permits will be through electronic submission for both the producers and laboratories. The applications for producers of psilocybin will open in mid-July and the applications for laboratories will open in August. Please check the website, [Medical Psilocybin](#), for additional information and updates.

[Adopted Rules, Issue 12 - State Records Center & Archives](#)

[A post on State Records Center & Archives provided by:
https://www.srca.nm.gov](https://www.srca.nm.gov)

www.srca.nm.gov

Denali Wilson

9:12 AM

Hello! Are we saving public comments until the end of the rule presentation or through out?

Chris Peskuski

9:15 AM

Echo please mute

Hanifa Nayo

9:16 AM

We discussed yesterday the the diagnosing clinician would also do the medical screening

Hanifa Nayo

9:17 AM

Is that accurate??

shane mcdaniel

9:18 AM

If and when this gets removed from Schedule 1 to Schedule 2 or 3 (most likely) will these requirements change?

Metz, Anne

9:24 AM

It seems like they could get clearance from their GP or the specialist (cardiologist, etc) after they are approved.

Metz, Anne

9:24 AM

by a therapist or social worker if it is warranted

shane mcdaniel

9:24 AM

Do Colorado and Oregon have this requirement? If not then why do we?

Brenda Burgard LPCC, LSAA, ATR

9:26 AM

When I have a patient that I am providing treatment and suggest medication to them. I referred them to their medical doctor or psychiatrist or prescriber first. The bottle neck is usually they don't have a medication prescriber or medical doctor.

Metz, Anne

9:28 AM

This model incentives low-quality telehealth pill-mills to set up in the state.

Breawwna B. Wunder

9:29 AM

What if covid era telehealth flexibilities end? Will the program still protect seeing patients in rural areas?

Larry Leeman

9:33 AM

I see the issue is if diagnostic clinician is required to "screen"

Hanifa Nayo

9:33 AM

I think Medical Eligibility Clinician is a better title because it more accurately reflects the responsibilities of the role.

A diagnosing clinician is responsible for evaluating a patient, determining whether they meet the criteria for a medical or mental health diagnosis, documenting that diagnosis, and developing an appropriate treatment plan. Their role is to answer the question, "Does this person have a qualifying condition?"

By contrast, a Medical Eligibility Clinician builds on that diagnosis by confirming that the patient has a documented qualifying condition and conducting a standardized medical safety assessment, including reviewing contraindications, medications, medical history, and other factors that determine whether it is safe and appropriate for the patient to receive medical psilocybin. The role is focused on eligibility and safety, not on establishing a new diagnosis.j

Kate Hawke

9:34 AM

Are we still thinking the “Required NMDOH training” for diagnostic clinicians will be something like a 3 hour online course on psilocybin basics, how the NM program works, and how to evaluate drug interactions? This would work for initial screening. Hanifa’s comment provides clarity.

Ellen Schimmels

9:34 AM

A flowchart/diagram would be helpful

Paul Walton - FFPM

9:38 AM

Correct Chris, several first responders are going to CO and OR for treatment

Zurlo, Dominick, DOH

9:38 AM

Practitioner: means an individual who is a licensed healthcare professional who is certified by the department to provide medical psilocybin integrative therapy, supervise facilitators, supervise administrative sessions, supervise same-day therapy sessions, and who has completed department required trainings.

Practitioner (Lead Practitioner): Qualifications to provide psilocybin therapy sessions and supervise facilitators:

- Have a current and valid license from a recognized New Mexico licensing board which allows for the delivery of counseling, mental health therapy, or behavioral health therapy within their licensure scope of practice (as outlined by their governing licensure Board); and,

- Complete required NMDOH training and continuing educational training requirements; and,
- Apply, receive, and maintain a valid permit from the NMDOH medical psilocybin program as a practitioner.

G-Ian.Dunn

9:39 AM

For clarification as I have been misquoted, I stated that Oregon and Colorado do not have qualifying conditions to sift out the general population (thus scewing data toward safety). In this program we are treating vulnerable populations exclusively.

Zurlo, Dominick, DOH

9:39 AM

Facilitator: an individual who has completed training and education approved by the department to be able to assist practitioners during the administration sessions and who has been registered with the department.

Facilitator: Qualifications to provide facilitator services:

- Complete required NMDOH training and continuing educational training requirements; and,
- Apply, receive, and maintain a valid permit from the NMDOH medical psilocybin program as a facilitator.

Zurlo, Dominick, DOH

9:40 AM

Educational requirements:

Diagnostic Clinician

- **New Mexico Module**
 - **Medical Psilocybin Act:** why, how, timeline, state vs federal laws, risks, malpractice
 - **Overview of Psilocybin Therapy in New Mexico:**
 - Patient flow
 - Emergency response plans

- Billing/coding
 - Informed consent (for psychedelics)
 - Documentation requirements (registration/data collection)
 - HIPPA compliance
- **Cultural Competency and Sensitivity**
 - **Equity and Access**
 - **History of NM cultural considerations**
 - **Non-Western/traditional medical models**, language barriers, involvement of other professionals including religious leaders, death doulas, indigenous healers, curanderas, others; history of psilocybin and psychedelic use in New Mexico
 - **SERT**: spiritual, existential, religious, theological concerns, existential processing
- **Test**
- **Psilocybin pharmacokinetics:**
 - Psilocin Medication/ Supplement Interactions
 - How psilocybin is processed in the body, dosing, half-life, etc.
- **Overview of Responsibilities for Diagnosing Clinician**
 - Scope of Practice - roles within care team
 - Diagnosis
- **Education on diagnosing qualifying conditions/medical clearance**
 - Benefit vs risk evaluation
 - Medication evaluation/monitoring
- **Medical Monitoring/Emergency Situations**
- **Research Evaluation**
- **Test**

shane mcdaniel

9:44 AM

Is an Integration Coach considered a practitioner?

Zurlo, Dominick, DOH

9:45 AM

Practitioner

- **New Mexico Module**
 - **Medical Psilocybin Act:** why, how, timeline, state vs federal laws, risks, malpractice
 - **Overview of Psilocybin Therapy in New Mexico:**
 - Patient flow
 - Emergency response plans
 - Billing/coding
 - Informed consent (for psychedelics)
 - Documentation requirements
 - Audit of records (how it occurs)
 - HIPPA compliance
 - **Cultural Competency and Sensitivity**
 - **Equity and Access**
 - **History of NM cultural considerations**
 - **Non-Western/traditional medical models**, language barriers, involvement of other professionals including religious leaders, death doulas, indigenous healers, curanderas, others; history of psilocybin and psychedelic use in New Mexico
 - **SERT:** spiritual, existential, religious, theological concerns, existential processing
 - **Test**
- **Basic Module for Practitioners**

- **Basic Life Support Certification (BLS)**
 - CPR
 - Basic First Aid certification; and,
 - For those conducting sessions in natural environments:
 - Wilderness First Aid certification; or,
 - Wilderness First Responder certification
- **HIPAA Certification**
- **Overview of Responsibilities for practitioner**
 - Scope of Practice - roles within care team
 - Therapeutic responsibilities
- **Research Evaluation**
 - Finding research on psilocybin
 - Reading research on psilocybin
 - Review of current research occurring
- **Test**
- **Psilocybin Therapeutic Module**
 - **Psilocybin pharmacokinetics**
 - **Session/Dosing Experience**
 - **Review/Education of Psychedelic Therapeutic Modalities**
 - History of psilocybin use
 - Models of psilocybin treatment
 - Cultural and spiritual humility
 - Patient autonomy
 - Non-Ordinary States of Consciousness
 - Ethics
 - Power dynamics, including personal bias

- Touch (Supportive Touch/consent)
 - Non-directive approach
 - Trauma Informed Care
- **Individual Treatment Modalities**
- **Group Treatment Modalities and Group Dynamics**
- **Psychedelic de-escalation techniques**
- **Self-Care**
- **Test**
- **Set and Setting Module**
 - **Room/building/therapy space**
 - **Preparation Sessions**
 - How to communicate with patients about their therapeutic goals/aims in psychedelic sessions
 - How to explain psychedelic experiences for patients
 - Trauma Informed Care
 - **Administration Day**
 - Transportation- to and from and ensure safety
 - Medication use
 - Therapy modalities
 - Emergency preparedness
 - **Integrative Sessions (post-administration)**
 - Models of therapy appropriate for psilocybin treatment
 - Trauma Informed Care
 - **Medical Monitoring during sessions**
 - **Psychedelic Emergencies/Urgencies/Safety Protocols**
 - **Test**

- **Simulated Patient Module (including evaluation)**
- **Practicum requirements** (see section on practicum)

shane mcdaniel

9:46 AM

Did we stop responding to chat questions in these meetings?

Kate Hawke

9:47 AM

Related to my previous question, it looks like Diagnosing Clinician requires more than just the basic screening knowledge. Screening for eligibility could be simple. Risk-benefit and treatment planning requires much more knowledge. How many hours is estimated for the “NM Module”

Brown, James

9:50 AM

With both roles so far.

Are we having them or is there a section that will cover:

- personal bias
- patent bill of rights

Paul Walton - FFPM

9:52 AM

Agree with Chris! To add to that, again, I would like to see training for first responders for harm reduction. I'm hoping to bring a program like Ohio States P.E.A.C.E. program here to NM.

Zurlo, Dominick, DOH

9:53 AM

- **Overview of therapeutic practices (ie, a 101-type overview)**
 - Ethics
 - Confidentiality
 - Therapeutic Modalities

Zurlo, Dominick, DOH

9:58 AM

Practicum Requirements:

- Supervised practice training, otherwise referred to as a practicum, must include a minimum of one hundred (100) hours of supervised practice training for Facilitators and one hundred and twenty (120) hours for Practitioners.
 - Students shall participate in a minimum of eighty (80) hours of administration and same-day therapy sessions, where students are provided the opportunity to experience, observe, or conduct supervised facilitation of administration and therapy sessions in-person with a minimum of fourteen (14) different patients over a minimum of 8 different administration and same-day therapy sessions with the following criteria:
 - A minimum of six (6) different patients during a minimum of six (6) individual administration and same-day therapy sessions; and,
 - A minimum of two (2) different group administration and same-day therapy sessions with four (4) or more patients in each group administration and same-day therapy session.
 - Students shall participate in a minimum of twenty (20) hours of in-person preparation and post-integration therapy sessions, where students are provided the opportunity to experience, observe, or conduct (when licensure allows) preparatory or integrative therapy sessions.
 - This must include a minimum of six (6) different patients during individual sessions.
 - This must include at least one (1) group preparatory and one (1) group post-integration session with a minimum of four (4) or more patients.
 - Practitioners must complete an additional minimum of twenty (20) hours as a practitioner supervising facilitators during in-person administration and same-day therapy sessions.
 - A minimum of two (2) different patients during individual administration and same-day therapy sessions; and,

- A minimum of one (1) group administration and same-day therapy sessions with a minimum of four (4) or more patients in the group.
 - All practicum hours must take place in an approved Healing Center[MJ1] .
 - Practicum supervisors and students shall follow all rules and best practices that apply to facilitation including but not limited to standards for confidentiality and limits on scope of practice.
-

[MJ1]Using this term?

Dancis, Alanna, HCA

9:59 AM

brb

Brenda Burgard LPCC, LSAA, ATR

10:06 AM

Yes Larry, thank you, and addiction. Need special training in these different conditions.

Paul Walton - FFPM

10:07 AM

In regards to OR and CO requiring 40 hrs of practicum, is an additional 40hrs required in NM and can they been done in OR or CO since it will be a timeline issue for doing that here in NM?

Paul Walton - FFPM

10:10 AM

Additionally, is there oversight on the program content for 100hr and 120hr requirement? There are numerous programs out there that are more designed for a monetary purpose rather than best practices and harm reduction?

Denali Wilson

10:13 AM

Thank you, Dr Shannon, for providing these valuable perspectives! Grateful for your contributions to this field and your interest in supporting an accessible and affordable program in New Mexico.

Kate Hawke

10:13 AM

Since facilitators will be working with practitioner oversight and backup, this could be seen as an entry point and a way to get experience while providing service. Consider lower entry qualifications?

Zurlo, Dominick, DOH

10:13 AM

Mentoring Requirements

- All educational programs must provide each practitioner and facilitator student with 10 hours minimum of mentoring sessions after graduation and practicum hours are completed.
- The purpose of the mentoring sessions are to allow new graduates to consult with the educational program faculty regarding cases, patients, situations, and how they handle them.
- These sessions may not have additional charges beyond the cost of the educational program itself.
- These 10 hours are only valid for up to 12 months after graduation and practicum hours are completed.
- If students wish for more than 10 hours of mentoring sessions, this will be at the purview of the educational program and may have an additional cost.

Zurlo, Dominick, DOH

10:17 AM

Psilocybin Educational Program Record Keeping

- Educational programs shall maintain records for:
- All course syllabi,
- Enrollment records including the:

- Name of each student
- Date of start and completion for each student
- Examination results for each student
- Dates, locations, and number of patients seen during each of the practicum sessions;
- For Practitioner students, the facilitators they supervise during practicum also needs to be recorded.
- Shall upload the completion certificate into the department approved online portal.
- Educational programs shall provide current and former students their records upon request.
- Educational programs shall provide records required to be maintained under this rule to the department upon request.
- These records must be maintained for five years.
- Ensure consent and confidentiality

Zurlo, Dominick, DOH

10:18 AM

Continuing Education Requirements

- Diagnostic Clinicians must complete a minimum of eight (8) hours of continuing medical education credits specific to psychedelic medicine or therapy every two years.
- Practitioners and Facilitators:
 - Complete a minimum of twenty (20) hours of continuing education credits specified to psychedelic therapy and practice every two years.
 - Keep current Basic Life Support Certification (BLS)/CPR/Basic First Aid in addition to the 20 hours of CEUs

Zurlo, Dominick, DOH

10:20 AM

7.35.X.X Requirements and Application for Psilocybin Educational Programs

1. Requirements and items submitted for Psilocybin Educational Program Applications

- All items must be submitted through the electronic system designated by the department
- Organizational chart
- Proof of registration with New Mexico Secretary of State
- Proof of registration of the business with New Mexico Taxation and Revenue Department
- Any applicable New Mexico city or county business licenses
- Certificate of Occupancy for locations utilized in New Mexico
- Additional documentation as the department may reasonably request to ensure compliance with applicable laws, regulations, or ordinances
- List and contact information of the owners or members of the Board of Directors
- Primary contact information including name, address, phone, and email
- A list of all of the instructors including their CV or resume which demonstrate their collective expertise in all of the required curriculum areas.
- Copy of the curricula which will be utilized with a brief description of how it meets the requirements for curricula
- Copy of the syllabi for the courses utilized within the educational program and a web address for where the educational program will publicly provide updated syllabi for prospective students
- Plans for record retention
- Safety and emergency response plan
- Plan for transparency and disclosure of fees for students
- Plans on how the Educational Program will ensure students graduate no more than 2 years from the date they are enrolled.
- Outline of grievance procedures for students

- Consent for contact information and educational program websites to be listed publicly on the department website, if approved.
- Consent for the curriculum and syllabi submitted to the department to be listed publicly on the department website, if approved;
- Provide a third-party evaluation report of the organization and the curricula which demonstrate meeting the requirements for Medical Psilocybin Educational Programs.
- Proof of arrangements with Healing Centers or other approved locations for practicum location placements.
- There must be a minimum of two faculty with current Practitioner or Facilitator permits from the department by January 1, 2027.
- The practicum faculty must have at least experience with 40 individual patients. How would this be determined/demonstrated.

Chris Peskuski

10:21 AM

Are we voting on these things?

Dancis, Alanna, HCA

10:21 AM

I had the same question

Zurlo, Dominick, DOH

10:23 AM

1. Updates required to be reported

- If an educational program updates their curriculum, they must submit the revised curriculum to the department through the electronic system designated by the department prior to implementation and may not utilize it until approved by the department.
- Any change in ownership
- Any change in locations for instructions
- Any changes in practicum agreements

- Any change in instructors, including any new instructors' CV or resumes

Zurlo, Dominick, DOH

10:23 AM

1. Psilocybin Educational Program Curriculum Approval Process

- An educational program applicant must submit a completed application packet through the electronic system designated by the department;
- The department will notify an applicant through the electronic system designated by the department if their application is approved or denied.
 - If the application is approved, the approval is effective on the date of notice and will be valid for two (2) years.
 - If the department denies an application, it will provide notice of the denial
 - If the application is denied, the applicant may re-submit their application within six months; or,
 - Applicants may not re-submit their application more than twice in a six month period; and
 - Applicants may appeal a denial utilizing the process outlined in this rule.
 - The department shall deny an application if:
 - The curriculum submitted does not match the required curriculum; or,
 - Not all required items have been submitted or are not complete; or,
 - The program instructors, staff or representatives have made false or misleading statements to the department, students, or the public.
- Applicants renewing their permit for being a Psilocybin Educational program must re-submit a full applicant packet through the electronic system no more than 60-days and no less than 30-days prior to the expiration of their permit.

- Training programs may voluntarily relinquish their permit at any time and for any reason, including cessation of student enrollment or instruction, by providing written notice to the department.

Zurlo, Dominick, DOH

10:26 AM

1. Evaluation for Psilocybin Educational Programs

- The department or its designee may perform remote or on-site assessments of an approved program or applicant, with or without prior notice, during normal business hours to determine compliance with the Medical Psilocybin Act and this rule. Exception: for practicum and if patients are present – notice must be provided prior to a visit.
- Assessments may include a review of the current curriculum, including observations, to determine if the curriculum is being implemented with fidelity.
- Assessments include review of the record retention plan and if it is being followed.
- Additional documentation as the department may reasonably request to ensure compliance
- The department holds authority to withdraw approval if a program no longer meets requirements.

1. Requirements for Third Party Evaluators

2. The third-party evaluators would need to consist of a minimum of three individuals who have:
 1. 3 or more years of experience in one of the following areas and ensuring all of the areas are covered by the evaluators:
 1. Psilocybin therapy practice with a Masters or Doctoral degree in Counseling, Therapy, Social Work, or a related Public or Behavioral Health Field;
 2. Medical or research practices with a Masters or Doctoral degree in Medicine, Pharmacy, Nursing, or a related field;

3. Educational curriculum development and evaluation with a Masters or Doctoral degree in Education, Educational Psychology, or a related field.
2. The evaluators must not have any conflict of interest with the organization and curriculum being evaluated such as:
 1. The evaluators must not have participated in designing or teaching the curriculum being evaluated
 2. The evaluators must not have a financial interest in the organization being evaluated.
3. The evaluators must sign a confidentiality and impartiality agreement
4. Provide a report sent to both the educational program and the department which includes at a minimum:
 1. The evaluators experience in each of the required fields;
 2. The evaluators conflict of interest, confidentiality, and impartiality agreements;
 3. Evaluations of the reliability, validity, and fidelity of implementation of the curriculum
 4. Evaluations of the reliability, validity and fidelity of implementation of the student evaluations of competency including tests, exams, and instructor observational feedback.
 5. Recommendations for improvement.
 6. Performance evaluations of all faculty
 7. Evaluation of any reported student grievances

Add separate path for CME/CEUs

Kate Hawke

10:31 AM

As noted third party evaluation had a lot of questions yesterday. How will further discussions continue?

Zurlo, Dominick, DOH

10:31 AM

Reciprocity

- Individuals who have completed training in a current government (this includes New Mexico Tribe, Pueblo, and Indian Nation governments) approved psilocybin educational program which has been verified and approved by the Department to meet the minimum didactic requirements to be able to provide psilocybin treatment and therapy may apply and be permitted to be either a Practitioner or a Facilitator in New Mexico if they complete the following for each New Mexico permit:
 - Provide documentation of completion of the government approved psilocybin educational program from another jurisdiction
 - Complete the New Mexico Module
 - Complete the required practicum or demonstrate completion of a practicum or practice with the minimum number of patients and hours as required in New Mexico; or,
 - If some of the practicum hours have been completed in another jurisdiction, and are able to be verified by the department, the remaining practicum hours required in New Mexico may be completed through a New Mexico approved educational program so long as the total hours and minimum number of patients required by the New Mexico program are met; and
 - For the practitioner permit, the reciprocal applicant will need to ensure they complete the twenty (20) supervisory practicum hours in New Mexico.
 - Exception: any reciprocal applications received by the department by December 31, 2026 will not be required to complete the full practicum hours required by New Mexico, but must demonstrate completion of at least 40 hours of contact time with a minimum of 2 separate individual sessions or 2 separate group sessions for preparation, administration, and integrative therapy with psilocybin treatment.
 - Exception: The department reserves the ability to waive, temporarily suspend, or reduce any of the rules regarding the training and practicum requirements for individuals applying for a permit through the reciprocal permit process in order to facilitate the permitting of individuals trained

by other governmental approved programs to build the initial infrastructure of the program.

- For another government approved psilocybin educational program to be accepted, the applicant would need to submit the following:
 - Documentation the psilocybin educational program has been approved by another governmental agency or authority; by,
 - They are included on the list of department approved reciprocal psilocybin educational programs from other jurisdictions; or
 - Provide the following documentation:
 - Proof the educational program has been approved by a government or governmental entity; and,
 - The educational program curriculum; and,
 - A curriculum equivalency for the didactic portion of the educational program when compared to the required New Mexico educational program.
- Department approval of reciprocal psilocybin educational programs from other jurisdictions is valid for two years from the date of approval.
 - Reciprocal psilocybin educational programs may request a curriculum review 30 days prior to their expiration; and,
 - After review by the department and approval of the didactic curriculum, their approval renewed for two more years.
- Individuals applying for reciprocity and having completed another governmental approved educational program outside of New Mexico and verified by the department will be excepted from the practicum hours if they apply for reciprocity by December 31, 2026. (clarify about the 40 contact hours needing to be demonstrated).

Scott Shannon MD

10:35 AM

The training program length seems very excessive based on my ten years in this work. The excess time and cost will drastically limit patient access. The intention is laudable but misdirected in my opinion. The training length in Colorado and Oregon

has been more than adequate with extremely low adverse events. This excessive length will not improve safety. I would strongly advise reconsideration of the length and cost. Thank you. Scott Shannon

Zurlo, Dominick, DOH

10:39 AM

Testing out of the didactic portion of the required curriculum

- Approved educational programs must offer an option for a student to take the test for each module without attending the lessons or classes for the module, except the New Mexico Module;
- The cost to take the test for each module cannot be more than one-fourth ($\frac{1}{4}$) of the normal price of each of the educational modules;
- If the student receives a passing grade for a module test, they will have been considered to have completed the module;
- If a student does not receive a passing grade for a module test, they will not have completed the module;
- The educational program may allow students to re-take the test without attending the lessons or classes for the modules at their discretion;
- Students who utilize this option must still complete all other requirements for the educational program including the New Mexico Module, certifications, simulated patient, and practicum requirements to graduate from the educational program.

Zurlo, Dominick, DOH

10:40 AM

Application Process

- An applicant must submit a completed application packet through the electronic system designated by the department;
- The department will notify an applicant through the electronic system designated by the department if their application is approved or denied.
 - If the application is approved, the approval is effective on the date of notice and will be valid for two (2) years.

- If the department denies an application, it will provide notice of the denial
- If the application is denied, the applicant may re-submit their application within six months; and,
- Applicants may not re-submit their application more than twice in a six month period; and
- Applicants may appeal a denial utilizing the process outlined in this rule.
 - The department shall deny an application if:
 - Not all required items have been submitted or are not complete; or,
 - Insufficient or expired licensure;
 - Missing or inadequate documentation of certification, education or practice requirements;
 - The applicant has made false or misleading statements in the application or to the department or the public;
- For renewal, applicants must complete a new applicant packet through the electronic system no more than 60-days and no less than 30-days prior to the expiration of their permit.
- Permittees may voluntarily relinquish their permit at any time and for any reason, by providing written notice to the department.
- Permittees must provide and consent to having contact information with a minimum of name, phone number, and email address published publicly.

Zurlo, Dominick, DOH

10:42 AM

Diagnostic Clinician, Practitioner, Facilitator Application Requirements:

- The requirements an applicant must meet and submit in a completed application packet include:
- Documentation of current professional license to practice in New Mexico for the appropriate certification (e.g. PSY, LSW, LCSW for Practitioner; MD, NP for Diagnostic Clinician);

- Documentation of completion of the appropriate department-approved training program for the specific certification (as previously outlined);
- Documentation of practicum requirements for practitioners and facilitators (as previously outlined);
- Documentation of current BLS certification (not needed for the diagnostic clinician);
- Documentation of current HIPAA certification
- Attestation they are not a registered sex offender and the department will deny or revoke a permit for anyone who is a registered sex offender;
- Personal data as appropriate:
 - Date of birth
 - NM Driver's License or state ID
 - Phone/email/mailing address
 - Legal name
 - Affirmation and consent forms

Metz, Anne

10:42 AM

I agree with Scott. I think we would be wise to consider to his suggestions.

Paul Walton - FFPM

10:43 AM

Because of the short timeline for having programs available based in NM, I wonder of extending reciprocity till the end of 2027 when the bill requires the program to be fully finished might be more appropriate?

Zurlo, Dominick, DOH

10:43 AM

Reciprocal Practitioner or Facilitator Application:

- The applicant must submit a completed application packet including:

- Documentation of completion of a psilocybin educational program from another governmental jurisdiction; and,
 - Provide documentation the psilocybin educational program has been approved by another governmental agency or authority; by,
 - Their previous inclusion on the list of department approved reciprocal psilocybin educational programs from other jurisdictions; or
 - If not previously approved by the department:
 - Provide documented approval from another governmental agency; and
 - Provide a curriculum equivalency for the didactic educational portion of the program between New Mexico and the other program.
- Documentation of active Practitioner or Facilitator or equivalent licensure or permit in another jurisdiction;
- Documentation of minimum core practicum hours and NM-required practicum hours;
- Documentation of completion of NM-specific training module;
- Verification of current BLS certification;

Breawna B. Wunder

10:43 AM

Providers in this state have delayed investing thousands of dollars in training while awaiting clear guidance on the education requirements from NMDOH. Implementing these requirements now would make compliance very challenging. I feel this also unfairly disadvantages NM providers while creating an easier pathway for out of state providers to enter the program

Zurlo, Dominick, DOH

10:52 AM

Patient Application and Record:

- An applicant must submit a completed application packet through the electronic system designated by the department:
- Documentation of diagnosis of qualifying condition by a permitted Diagnosing Clinician
 - Personal data:
 - Date of birth
 - Phone/email/mailling address
 - Legal name
 - Affirmation and consent forms
- Diagnostic Clinicians, Practitioners, and Facilitators must utilize the electronic system designated by the department to record information including:
 - Diagnosis qualifying the patient
 - Attestations about evaluating and treating the patient
 - Date and type of service for:
 - Evaluation
 - Preparation session
 - Administration:
 - Including approved location
 - Unique Identification Number of medicine used
 - Dosage
 - Initial Integrative Therapy Session
 - Any adverse events
- Information required for the Equity and Access Fund

Skye Rivers

10:53 AM

For those living in rural areas, who need assistance... not only financially, but translating for those individuals that don't speak english. Will this format be in

spanish. It will be important for the program to specifically work with spanish speaking providers and ensure we have licensed spanish speaking providers in the program.

Zurlo, Dominick, DOH

10:53 AM

Application appeal process

- Denial of an application will have a similar appeal process to the production and laboratory process.
 - Administrative review within 30 calendar days
 - Final determination within 15 calendar days

Disciplinary actions

- If the department issues a notice of disciplinary action:
- Person can request a hearing within 30 calendar days
- Hearing will be held no later than 60 calendar days from the request
 - Hearing is overseen by a hearing officer
 - Continuances can be granted.
 - Hearing officer shall submit a written recommendation of action to the secretary within 30 calendar days.
- Secretary will issue a final written decision within 45 calendar days

Metz, Anne

10:55 AM

I agree that this program unfairly disadvantages providers in NM who have delayed getting trained pending rule making. I think the solution is to lower the practicum requirements in the state to make them more on par with what other states are requiring rather than limiting the reciprocity entry path.

Zurlo, Dominick, DOH

10:56 AM

Healing Centers Requirements

- All items must be submitted through the electronic system designated by the department
- Name of business
- Organizational chart
- Proof of registration with New Mexico Secretary of State
- Proof of registration of the business with New Mexico Taxation and Revenue Department
- Any applicable New Mexico city or county business licenses
- Certificate of Occupancy for locations utilized in New Mexico
- Additional documentation as the department may reasonably request to ensure compliance with applicable laws, regulations, or ordinances
- List and contact information of the owners or members of the Board of Directors
- Primary contact information including name, address, phone, and email
- Maintain a list of all permitted individuals who will be utilizing or who have utilized the approved location
- Plans for record retention and confidentiality
- Plans for secured storage for medication
- Plans for wastage of any unused medication
- Safety and emergency response plan
- Documented policies and procedures for possession and storage of firearms and other weapons safely on the approved location premises.
- Plans demonstrating confidentiality of patients will be maintained within the approved location
- Plan for transparency and disclosure of fees for patients
- Outline of complaint and grievance procedures for patients
- Consent for contact information and websites to be listed publicly on the department website, if approved.
- For those conducting sessions in natural environments, also include:

- Permission to utilize the property;
- A detailed description of the outdoor administration area, including identification of safe entrance and exits, and verification that the area is free from hazards;
- An emergency safety and response plan;
- At least two individuals present who are not receiving treatment and who have:
 1. Wilderness First Aid certification; or,
 2. Wilderness First Responder certification
- Plan for adverse health event response/reporting

Chris Peskuski

10:56 AM

Since we are running out of time I will put my comments in the chat. I cannot in good conscience support these recommendations. The curricula requirements are too vague to ensure consistent, quality training, and the overall regulatory structure creates barriers that will disproportionately limit access, particularly for veterans who rely on the VA for their medical care

Zurlo, Dominick, DOH

10:58 AM

Other Approved Location Requirements

- Other approved locations include a patient's residence or other temporary location utilized if it is not possible for the patient to physically go to a Healing Center for reasons of medical necessity.
- Mobile unit for rural areas
- All items must be submitted through the electronic system designated by the department
 - A list of the permitted individuals who will be utilizing the approved location
 - Plan for secure transportation and, if necessary, storage for medication

- Plans for wastage of any unused medication
- A safety and emergency response plan
- Plan for storage of firearms and other weapons safety during and after treatment sessions
- Plans demonstrating confidentiality of patients will be maintained
- A description of why the location is appropriate for treatment sessions

Zurlo, Dominick, DOH

10:59 AM

Healing Center and other approved location responsibilities

- Psilocybin products may only be consumed in an approved location.
- Only patients and certified individuals may be present during a patient treatment unless each patient gives prior written consent for other individuals to be present, except in emergency response situations.
- A permittee must maintain a copy of the daily log of activities related to psilocybin in the department designated electronic reporting system.
- May not promote unregulated cultivation and processing of psilocybin products and may not sell unregulated psilocybin products.
- Provide required information to the department upon request in a form and manner designated by the department
- Healing centers must display:
 - A copy of the healing center's certification issued by the department.
 - Information regarding safe transportation after an Administration Session.

Dan Jennings

11:00 AM

im sorry i have a hard stop at 11am to host a town council event.

Brenda Burgard LPCC, LSAA, ATR

11:02 AM

Have a great weekend Dan.

Dancis, Alanna, HCA

11:02 AM

I also have a meeting now. I think we need to move voting up earlier in the meeting so the advisory council members can be present.

Kate Hawke

11:02 AM

Wondering about home treatment in situations where they might be able to go to a center but home would be more ideal. Thinking e.g. hospice patients who are ambulatory. Also does two in the room at all times mean even if one takes a bathroom break?

Zurlo, Dominick, DOH

11:02 AM

Service Center Safety and Emergency Plan

- Every approved location shall create and maintain a safety and emergency plan which:
 - Document procedures for evacuating and relocating patients to a safe location if the approved location becomes unsafe.
 - Document general procedures for emergency response when a patient experiences a medical or other emergency.
 - Document procedures for addressing disruptive conduct and patient reactions that do not rise to the level of requiring an emergency response.
 - Document procedures for patients who attempt to leave a treatment session against medical advice.
 - Document procedures ensuring there are practitioners and facilitators present at all times according to the minimum patient/provider ratio required by the department.
- Provide the emergency and safety plan to all people utilizing the location;
- If any of the emergency procedures are utilized, there will be a documented report which will include the adherence to the plan, if there were deviations or if

the plan did not work as intended, what will be changed in the future to ensure safety of individuals in the event of future incidents.

Storage

- All psilocybin products stored at an approved location must be kept within a locked area; and it must be:
 - An area enclosed on all sides with permanent walls and secured with at a minimum, a properly installed steel door with a steel frame, and a commercial grade, non-residential lock; or,
 - A locked safe; or,
- Products that require refrigeration may be stored within a locked refrigerator or freezer.

Adverse Health Event Reporting:

- Any possible adverse health event associated with psilocybin services it must report the adverse health event to the department no later than within two (2) business days from being notified through the designated electronic reporting system. Healing centers must maintain records of adverse health event reports in accordance with these rules. Reports must include:
 - Patient record number;
 - Product ID
 - Any participant reaction requiring medical attention; and
 - Any incident requiring emergency response;
 - Other incidents which have a negative impact on a patient(s).

Complaint Reporting:

- Patients or staff may lodge a complaint with the department.
- The complaint should be in writing and include:
- Name and contact information for the complainant which will remain confidential;

- The nature of the complaint and any other individuals who may be involved; and,
- The department may request additional information for investigation purposes.

Healing centers & approved locations must take adequate measures to:

- A Healing Center must make instructions or other guidance available related to:
- How to file a complaint with the department or other relevant state entities; and

How to report an adverse health event to the department

Skye Rivers

11:03 AM

Will cameras be required

Jenn Clemente

11:05 AM

How many treatment centers are allowed per town?

Skye Rivers

11:06 AM

Will cameras be required at healing centers. They are using them in CO

Paul Walton - FFPM

11:06 AM

I'm concerned with the reciprocity timeline. The short timeline of Dec. 2026 would be ok if NM had qualified programs. However, many NM folks are having to go out of state for training and this takes several months. Maybe an extension for NM residents?

Skye Rivers

11:07 AM

ONLY where medicine is being stored

Sanchez, Catherine, WCA

11:15 AM

only board members are voting right?

Martinez, Brenda V, DOH

11:16 AM

Sanchez, Catherine, WCA6/26/2026 11:15 AM

only board members are voting right?

Correct

Gonzales, Jorge, DOH

11:16 AM

Sanchez, Catherine, WCA6/26/2026 11:15 AM

only board members are voting right?

That is correct

Chris Peskuski

11:17 AM

17th?

Brenda Burgard LPCC, LSAA, ATR

11:18 AM

9:00 on the 17th

Sanchez, Catherine, WCA

11:18 AM

thank you Dominick and Ian. You all are awesome

Skye Rivers

11:18 AM

Such great work. Thank you all.

Chris Peskuski

11:19 AM

I can do 8th

Jenn Clemente

11:21 AM

Happy weekend all.

Gregory Evans

11:21 AM

Y'all might want to consider interstitial workgroups to develop solution oriented analysis of this with SME's and concerned parties able to put details together before your meetings.

Mouchet, Jonathan, DOH stopped recording.