Medical Psilocybin Training and Education Committee

Meeting Minutes & Chat

Location: Microsoft Teams

Date: 8/21/26

Time: 9:00AM

Organizers: Burgard Brenda, committee chair; Jonathan Mouchet, DOH; Dominick Zurlo, DOH; Cyrus Rautman, DOH; Katy Freytag, DOH; Leslie Peterson, DOH; Cathy Augeri, DOH; Brenda Martinez, DOH; Adrian Estrada, DOH; Robert Truckner, DOH; Raymond Gallegos, DOH; DeAnza Aragon, DOH

Attendees: Danielle Slupesky, Lawrence M Leeman, Don Moser, Gregory Evans, Erika Gergerich, Skye Rivers, Jason Brooks, JD, Kate Hawke, Chris Caldwell, Michael McDowell, DezBaa', Blaine Williams, Denali Wilson, Anne Metz, Chris Peskuski, Chris Caldwell, Jeff Steinborn, Breawnna B. Wunder

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 started the meeting at 9:03am and introduced the department and committee chair Brenda Burgard, then reminded attendees of meeting etiquette and rules and turned things over to Brenda. Brenda briefly introduced the purpose of today's meeting and opened the floor to attendees to introduce themselves:

- Skye Rivers, Santa Fe Reporter
- Kate Hawke
- Greg Evans, independent researcher
- Larry Leeman, chair, End of Life Care committee

Brenda then introduced a set of recommendations from Drs. Larry Leeman and Anne Metz. Dominick clarified that many different credentials would be eligible for reciprocity.

Questions arose regarding the role of the certifying clinician. Dominick clarified that any of the different levels of providers are eligible for reciprocity if they have trained elsewhere (in CO or OR), and they meet the other requirements of the NM program, they would be granted certification until December 31, 2027. Clinician does not need practicum requirements if they have been certified in another state. In response to a question, Dominick clarified that the DOH's perspective is that the rules should allow some flexibility with, for instance, specific educational curricula, and that rules should not be so granular as to be restrictive. Dominick clarified that cross-walking of program curricula would have to occur regardless of specific hourly training requirements in the rule.

Dominick then presented a document comparing recommended training requirements from Larry and Anne and proposed recommendations from the department. Highlighted and explained points of convergence and divergence between the two proposals. Clarified again that SB219 has no provisions that would allow for use of psilocybin by well participants. Clarified that the 10-hour mentoring requirement was adopted in response to input from current practicing facilitators. Also clarified that challenging and adverse experiences would be included in the "continuity of care" requirements under both proposed training schemes.

Next meeting date was set for September 4th at 9:00am. Brenda and Dominick thanked attendees and participants and adjourned the meeting at 11:09am.

Chat

Chat

Medical Psilocybin - Training and Education Committee 8/21/26

External

Meeting started at Friday 8:55 AM

Mouchet, Jonathan, DOH started recording.

Zurlo, Dominick, DOH

Friday 9:03 AM

Reminder:

This meeting is being recorded

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

Contact information: Email: Link Medical.P… by Zurlo, Dominick, DOH

Zurlo, Dominick, DOH

Friday 9:04 AM

Contact information:

- Email: Medical.Psilocybin@doh.nm.gov
- Program Website: https://www.nmhealth.org/about/mcpp/mpp/
- Advisory Board Website: https://www.nmhealth.org/about/mcpp/mpp/mpab/
- Link directly to the statute: https://nmonesource.com/nmos/nmsa/en/item/4355/index.do#a2D

Skye Rivers, SFR

Friday 9:05 AM

Good Morning everyone, Skye Sivers here from Santa Fe Reporter

Kate Hawke

Friday 9:05 AM

Good morning everyone 🌼 Kate Hawke, psychedelic educator from Santa Fe.

Lawrence M Leeman

Friday 9:06 AM

Hi all,

Zurlo, Dominick, DOH

Friday 9:06 AM

How to raise your hand to speak:

- If on a computer – click on the “hand” icon near the top of the Teams window (it says “Raise” under the icon)

- If on the Teams app on a phone, please press the ellipses (three dots) in the menu and then the “hand” icon will appear, and you can select it

- If you are joining through voice only on a phone, press *5 to raise or lower your hand

How to Unmute:

- Once your name is called, you will be able to unmute:
- To unmute/mute on Teams on a Computer or on the Teams Phone App click on the microphone icon:

- On a computer it is in the upper right area of the Teams window.
- On a phone it is usually in the lower left of the Teams App, however, different models of phone (Apple, Android, etc…) may have the mute/unmute icon in a different location:
- Telephone: voice only - press *6 to unmute/mute

DezBaa'

Friday 9:20 AM

72

Lawrence M Leeman

Friday 9:21 AM

72 + 42 is correct

Zurlo, Dominick, DOH

Friday 9:25 AM

The New Mexico Module: Required of Everyone

Every certifying clinician, Licensed Provider, and Facilitator must complete a New Mexico educational module created or approved by the department before applying for certification. This applies equally to applicants trained in other jurisdictions — there is no exemption by reciprocity. The module covers the New Mexico Medical Psilocybin Act; an overview of psilocybin in New Mexico's medical and therapeutic model; the social, cultural, and historical aspects of psilocybin use, including traditional use by Native American and other populations in New Mexico; spiritual, existential, religious, and theological (SERT) aspects of psilocybin therapy; and the state program's research and data collection requirements. It concludes with an evaluation demonstrating competency in each area.

Zurlo, Dominick, DOH

Friday 9:26 AM

Certifying Clinician Training: Eight Didactic Hours

Certifying clinicians complete a module of at least eight didactic hours before applying for certification. The module addresses psilocybin action, interactions, and pharmacology; the responsibilities of the certifying clinician role; federal confidentiality requirements under 42 CFR Part 2; diagnosis of qualifying conditions; determining medical clearance for psilocybin therapy; psychedelic emergencies, urgencies, and medical monitoring; and supporting patients with challenging experiences, including hallucinogen persisting perception disorder (HPPD). Like the New Mexico module, it ends with a competency evaluation.

Zurlo, Dominick, DOH

Friday 9:27 AM

Licensed Provider and Facilitator Training: Eighty Didactic Hours

Licensed Providers and Facilitators complete a psilocybin therapy module of at least 80 didactic hours before applying for certification. That places New Mexico below Oregon's 120 hours and Colorado's 150 — a deliberate calibration, since graduates in both states reported that longer didactic requirements did not buy greater depth.

Zurlo, Dominick, DOH

Friday 9:29 AM

Required didactic hours by state (New Mexico figure is the proposed minimum).

Within the 80 hours, the rules set minimums for nine content areas:

Content area	Minimum hours
Core psychotherapy skills and ethics — including patient-centered approaches and care, cultural competency, patient confidentiality, informed consent, self-care, somatic awareness and touch, and 42 CFR Part 2	22
End-of-life and palliative care considerations	8
Trauma and trauma-informed care	7
Preparation and integration sessions	6
Medicine, dosing, and clinical research — including psilocybin actions, interactions, and pharmacology	5
Screening, suicidality, and crisis response	5
Administration session — including set and setting, non-ordinary states of consciousness, and use of music	4
Management of challenging psychedelic experiences, including de-escalation techniques	4
Role playing and/or simulated patient experience	2
Total specified minimums	**63**

Lawrence M Leeman

Friday 9:45 AM

I agree with Anne. are there specific numbers that seem excessive?

Skye Rivers, SFR

Friday 9:47 AM

Brenda could I get a copy of this sent via email?

Skye Rivers, SFR

Friday 9:47 AM

after meeting is completed

Gregory Evans

Friday 9:50 AM

I agree with Anne. are there specific numbers that seem excessive?

nothing here seems excessive to me.

Brenda Burgard Chair Training and Education

Friday 9:51 AM

Skye I can send that to you.

Denali Wilson

Friday 9:53 AM

Sorry no I mean today in this meeting - trying to make sure we have time now.

Metz, Anne

Friday 9:55 AM

Colorado does require end of life

DezBaa'

Friday 9:56 AM

there is a difference between carte blanche reciprical approval and submission for consideration of reciprocity.

Denali Wilson

Friday 10:01 AM

Question for IT friends - is there a call in number? Chris (Peskuski) is trying to join by phone

Augeri, Cathy, DOH

Friday 10:02 AM

Unknown User8/21/2026 10:01 AM

Question for IT friends - is there a call in number? Chris (Peskuski) is trying to join by phone

Dial in by phone

+1 505-312-4308,,636055945#United States, Albuquerque

(888) 506-1357,,636055945#United States (Toll-free)

Find a local number

Phone conference ID: 636 055 945#

Denali Wilson

Friday 10:02 AM

Thank you!!

Jeff

Friday 10:05 AM

https://www.scientificamerican.com/article/first-of-its-kind-clinic-treats-psychedelic-side-effects/

Truckner, Robert, DOH

Friday 10:08 AM

Hi Senator- The RACI committee and we have been in conversation with Roman Palitsky form Emory who studies adverse effects from psychedelics including HPPD. I am happy to discuss with you if you are interested.

DezBaa'

10:09 AM

robust

Gregory Evans

10:09 AM

yes pelase>

Zurlo, Dominick, DOH

10:09 AM

The specified minimums account for 63 of the 80 hours. The remaining 17 hours are devoted to the topics the rule requires without an hour minimum: an overview of Licensed Provider and Facilitator responsibilities, including how to work as part of a care team and the unique role of non-clinical peer support facilitators; and treatment models. The module concludes with an evaluation demonstrating competency across all areas.

A note on the trauma minimum: seven hours is not PTSD treatment training and should not be represented as such. It prepares trainees to recognize dissociation and trauma responses, work somatically, and de-escalate. Where PTSD treatment falls outside a provider's scope, collaboration with a PTSD-trained provider is the appropriate path.

Zurlo, Dominick, DOH

10:11 AM

Before applying for certification, Licensed Providers and Facilitators must also hold current emergency-response credentials: basic life support, or both CPR and AED certification, or New Mexico EMT licensure (or a clinical license that includes these competencies).

Zurlo, Dominick, DOH

10:12 AM

The Practicum and Supervised Practice : 102 to 114 Supervised Hours

Supervised practice is sequenced from lower-risk to higher-risk experiences, and no one completes it without real client contact. Facilitator-track students complete a total of 102 practicum hours; Licensed Provider-track students complete 114.

Stage	Min. hours	Trainee potentially compensated	Client medicine sessions	What it involves
Practicum: Supervised Onsite: 72 Hours for Licensed Provider; 62 for Facilitator				
1. Well participants	24	N	2	Participants without a qualifying or risk-heightening condition; completed before seeing patients with qualifying

Stage	Min. hours	Trainee potentially compensated	Client medicine sessions	What it involves
				conditions. Includes preparation, administration, and integration.
2. Co-facilitation	24	N	2	Co-facilitated with a DOH-permitted Licensed Provider; low-acuity patients such as nicotine use disorder or depression. Includes preparation, administration, and integration.
3. Group work	12	Y	1	Group preparation, administration, and integration.
4. Provider supervisory hours (LP track only)	12	Y	1	Co-facilitating with a permitted facilitator for administration of same-day therapy sessions.
Supervised Practice : Case Consultation: 42 hours Licensed Provider or Facilitator				
5. Supervised practice with case consultation	42 (24 + 18)	Y	2	Trainees complete 24 hours of supervised practice with a permitted licensed provider for two clients, designed by the hosting school or healing center, which may include people with end of life, complex PTSD, or opioid addiction as qualifying conditions. The 24 hours are 12 hours with each participant: an 8 hr. medicine day, two 60-minute preparation sessions, and two 60-minute integration sessions. Both clients are presented and discussed within an 18 hr. consultation group.

Stage	Min. hours	Trainee potentially compensated	Client medicine sessions	What it involves
				This stage may occur in the two-year period after the individual has received their training licenses.
Total	**LP 114 · Facilitator 102 hours**		**8**	Eight client medicine sessions in total; four of them before compensation may occur.

Zurlo, Dominick, DOH

10:15 AM

Every stage spans preparation, administration, and integration — not administration alone. Students begin with well participants before seeing patients with qualifying conditions, then move to co-facilitation with a department-permitted Licensed Provider. Licensed Provider-track students additionally complete supervisory hours, building the skills the role requires.

Hours in co-facilitation, group work, and practice supervision may be earned simultaneously, with each actual hour counting only once toward the 102- or 114-hour aggregate. Any remaining balance is completed through co-facilitation designed by the hosting school or healing center. Once a student has completed at least 48 practicum hours — the end of stage 2 — they are qualified to provide care to high-acuity patients when accompanied by a Licensed Provider — a graduated on-ramp that expands what a student can do as demonstrated experience accumulates.

All practicum hours take place in an approved healing center or other approved location, and supervisors and students follow the program's facilitation and therapy rules, HIPAA and HITECH confidentiality requirements, and applicable scope-of-practice limits.

Denali Wilson

10:15 AM

A quick note for DOH on the lifesaving on the training requirements throughout: I think Paul Walton pointed out a need to allow EMS for equivalency, which we saw in the rules, but as drafting, it inadvertently excludes others who have lifesaving training as a part of their medical license. Recommendation to include "or as a clinician who otherwise has the above competencies as part of their medical licensure" (or something to that effect) in addition to the EMS equivalencies where the lifesaving training shows up throughout.

Lawrence M Leeman

10:17 AM

Dr Metz and I met with Memoru in Boulder on their case presentation approach

Zurlo, Dominick, DOH

10:17 AM

Practicum Stage: Case Presentation and Consultation — The Competency Checkpoint

As part of case presentation and consultation , every student participates in at least 18 hours of case presentation and consultation with educational program faculty (which programs may provide through a contracted third party). During these hours, each student presents at least two cases in which they personally provided direct psilocybin services. Which contributes another 24 hours to training hour Presentations and consultation include discussion of individual case concerns, risk factors, supportive factors, treatment considerations, and recommendations for aftercare — a full case conceptualization, not a formality. The two case presentations must be completed before full licensure.

This is the piece that makes the overall hour requirements defensible: rather than relying on raw hour counts, someone experienced evaluates the new provider's actual casework before independent practice. The 18 hours remain valid for up to 12 months after practicum is completed. The model mirrors the consultation structure developed at Memoru in Boulder under the leadership of one of the lead principal investigators in the MAPS MDMA clinical trials.

Zurlo, Dominick, DOH

10:21 AM

Comparison of Hours Between Colorado and New Mexico

Stage	Colorado	New Mexico
Didactic	150	80
Practicum, including case presentation with consultation stage	40	114 for LP 102 Facilitator
Colorado Consultation Phase (no medicine sessions required)	40	—
Psilocybin medicine sessions in training	2	8 (4 before compensation may occur)
Total hours	**230**	**194 LP** **182 Facilitator**

Metz, Anne

10:22 AM

That's a really wonderful suggestion, Gregory

Denali Wilson

10:23 AM

Can we skip the readthrough in this next part? Maybe Dr Leeman or Dr Metz can give a short summary

Zurlo, Dominick, DOH

10:23 AM

Continuing Education

Certification is not the end of training. Certifying clinicians complete at least eight hours of continuing medical education specific to psychedelic medicine or therapy every two years. Licensed Providers and Facilitators complete at least 20 hours of continuing education specific to psychedelic therapy and practice every two years, and keep their emergency-response credentials current.

Program Accountability and Records

Educational programs keep records for at least five years: course syllabi and enrollment records including each student's name, start and completion dates, examination results and transcripts, the dates, locations, and patient counts for practicum sessions, and the names of facilitators supervised by Licensed Provider students. Programs upload completion certificates into the department's electronic system, provide current and former students their records on request, and provide required records to the department on request.

Flexibility and the 2027 Transition Pathway

The department may waive, temporarily suspend, or reduce practicum requirements to recognize individuals trained by other government-approved programs and to build the program's initial infrastructure. In addition, applicants who apply and complete their didactic requirements by December 31, 2027, and graduate from a department-certified or department-approved program by that date, may satisfy a reduced practicum: at least 40 documented contact hours including a minimum of two individual sessions and one group session (each spanning preparation, administration, and integration), or completion of an approved out-of-state practicum meeting these requirements. This pathway lets New Mexico stand up a qualified workforce quickly without lowering the bar for the program's steady state.

Alternative Proposed Rule DOH Proposed … by Zurlo, Dominick, DOH

Zurlo, Dominick, DOH

10:26 AM

	Alternative Proposed Rule	**DOH Proposed Rule**	**Alternative Proposed Rule**	**DOH Proposed Rule**	**Alternative Proposed Rule**	**DOH Proposed Rule**
	Certifying Clinician	Certifying Clinician	Licensed Provider	Practitioner	Facilitator	Facilitator
Prerequisites/Other Requirements						
New Mexico Module	Required	Required	Required	Required	Required	Required

HIPAA/Privacy	Required	Required	Required	Required	Required	Required
Emergency-response credential (BLS, CPR/AED, or EMT)	-	-	Required	Required	Required	Required
Didactic Modules						
Practitioner and Facilitator General Module	8	8	78	65	78	65
Certification Specific Didactic Module	-	-	-	5	-	5
Simulated Patient Requirement	-	-	2	10	2	10
Total Didactic Hours	8	8	80	80	80	80
Practicum - note: all hours are supervised						
Well patients/students using psilocybin	-	-	24	-	24	-
Patients with low-acuity/Low risk for adverse reactions/Co-facilitation	-	-	24	20	24	20
General Practicum - 6 individual patients, 2 groups (same day - administration sessions)	-	-	-	60	-	60
Preparatory/Integrative Sessions - 6 individuals, 1 group	-	-	-	20	-	20
Group work - 1 group (combined preparatory, administration, integration sessions)			12	-	12	-
Supervised Practice - 2 individual patients (combined preparatory, administration, integration sessions)	-	-	24	-	24	-
Case presentation and consultation (2 cases)	–	–	18	Included in practicum hours	18	Included in practicum hours

Supervision Practicum	-	-	12	20	-	-
Total Practicum Hours			114	120	102	100
Initial Training Total of Hours	**8**	**8**	**194**	**200**	**182**	**180**
After Graduation						
Continuing education, every two years	8 hrs CME	8 hrs CME	20 hrs CE	20 hrs CE	20 hrs CE	20 hrs CE
Mentorship hours - these are after graduation and entry into practice to support new providers.	-	-	-	10	-	10

Zurlo, Dominick, DOH

10:27 AM

(a) Overview of practitioner/facilitator responsibilities including how to work as part of a care team;

(b) 42 CFR part 2;

(c) Trauma-informed care

(d) Psychedelic emergencies, urgencies, complications, and medical monitoring;

(e) Safety, risk mitigation, and harm reduction practices;

(f) Psilocybin actions and effects on the body, interactions, and pharmacology;

(g) Drug interactions and pharmacology;

(h) Set and setting;

(i) Ethics in therapeutic settings;

(j) Legal considerations;

(k) Cultural competencies;

(l) Traditional and ceremonial practices and considerations;

(m) Equity and access;

(n) Patient-centered approaches and care;

(o) Education on the qualifying conditions and appropriate treatment practices;

(p) Preparation and integration sessions;

(q) Administration session;

(r) Dosing;

(s) Psychedelic de-escalation techniques;

(t) Non-ordinary states of consciousness;

(u) Self-care;

(v) Research and data collection requirements;

(w) Evidence-informed practices and research updates;

(x) Informed consent;

(y) Touch and somatic awareness;

(z) Continuity of care and creating care plans; and

(aa) Evaluation to demonstrate competency in the above areas.

Skye Rivers, SFR

10:41 AM

I have a question re: clarity on HIPPA/Privacy. In the last EOL meeting, it was discussed about landlord approval. Has there been any movement on this challenge

Skye Rivers, SFR

10:41 AM

and this may be off topic as well

Metz, Anne

10:43 AM

sounds like it can't be a requirement if it is post certification though.

Kate Hawke

10:43 AM

I agree on the value of mentoring while facilitators start practicing. And having it available ongoing.

Metz, Anne

10:43 AM

I mean for the individual

Kate Hawke

10:46 AM

I recently took advantage of mentoring through Chris's EoLPC, partly to see how a mentoring program can work. It was valuable even after 40 years of practice.

jd

10:48 AM

For interested students, what is the estimated investment in cost and time to complete the training program?

Denali Wilson

10:49 AM

I misunderstood the mentoring proposal and thought the student was required to complete the 10 hours - understand now that training program is required to offer, but student can choose to participate if needed. Having it optional makes sense and I withdraw my recommendation to pull mentoring requirement out.

Skye Rivers, SFR

10:51 AM

I only bring this up as it was on this doc as a requirement

Metz, Anne

10:58 AM

It's in the challenging experiences section of the didactic portion.

Lawrence M Leeman

10:58 AM

Would be good to include in the certifying clinician training

Lawrence M Leeman

10:59 AM

Much progress has been made!

Gregory Evans

11:00 AM

I would love to change Certifying Clinician to Medical Screener or similar.

Denali Wilson

11:00 AM

Is there an anticipated date for the public hearing?

Denali Wilson

11:01 AM

Thank you!

Denali Wilson

11:02 AM

Unknown User8/21/2026 10:15 AM

> A quick note for DOH on the lifesaving on the training requirements throughout: I think Paul Walton pointed out a need to allow EMS for equivalency, which we saw in the rules, but as drafting, it ina...
>
> Lifting this small suggestion up again - got a little buried in copied text being presented

Don Moser

11:09 AM

Thanks!

Recording stopped.

Public Comment

From: Silver Sunbeam

To: Psilocybin, Medical, DOH

Today's Training and Education committee meeting of the Medical Psilocybin Act featured rules documentation by DOH that it expects to post next week. Providing a more granular understanding of how reciprocity with Oregon and Colorado programs are intended to function here.

Review of the documentation was detailed and generally well received. However, the committee chose not to vote on adopting the recommendations. Choosing to put it off until the next meeting. Allowing for more offline discussion.

Other considerations were still unknown or "off topic."

One question; What is the estimated time and cost for potential students interested in being certified? "We are not there yet."

I have a Gen Z son in search of a promising career helping his fellow man. I'd very much like to know what kind of investment the state is prepared to make in certifying him for this important public health service work? Many others also want to know, is it affordable?

The rush, it appears, is to put out of state practitioners from OR and CO first in line to stand up their retreat businesses. While New Mexico trains its' next generation of psychedelic practitioners to follow their lead.

And a question about the End-Of-Life program requiring patients who are renters to violate their HIPPA privacy regulations to protect landlords from DEA interference by requiring a permission form, was suppressed for another meeting.

That overlooked hot potato requires more discussion with the DOH legal team, they said. Indeed. It could in fact end the EOL program before it begins, if not resolved promptly.

This would be a tragic loss for our hospice patients and the care team who worked diligently for eight months to make it possible.

The next public hearing is scheduled for October.

Jim Dodson \ citizen researcher