

From: [Ian Dunn](#)
To: [Clark, Jacob, DOH](#)
Subject: [EXTERNAL] Proposed Rule Comment: 7.35.3
Date: Saturday, September 5, 2026 4:40:43 PM
Attachments: [publickey - idunn.nm@pm.me - 0x0DABD13C.asc](#)
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Dear New Mexico Department of Health,

My name is Ian Dunn, and I serve as Chair of the Medical Psilocybin Advisory Board. While I strongly support the regulatory framework proposed in NMAC 7.35.3, I am writing to express serious concern regarding the provision requiring property owner approval before a patient may receive services in their home. This requirement introduces an unjustified barrier to care, infringes on patient privacy, and misaligns with New Mexico housing law.

Under NMSA 1978, Section 47-8-25 of the Uniform Owner-Resident Relations Act, a resident is required to occupy and use their leased premises as a dwelling in compliance with their rental agreement. Receiving professional health or supportive care in one's home; whether delivered by nurses, aides, hospice workers, or licensed psilocybin facilitators, is an established facet of domestic life. It does not convert a residential dwelling into a commercial or nonresidential operation.

Mandating affirmative landlord consent imposes significant harm without a corresponding public health or safety benefit:

- **Compromised Patient Privacy:** It forces patients, including those with serious or terminal illnesses, to disclose confidential medical decisions to third-party landlords who have no clinical role or legal entitlement to that information.
- **Disproportionate Barriers to Care:** It effectively grants landlords veto power over lawful, medically appropriate care within a tenant's private residence, disproportionately affecting vulnerable populations and individuals receiving hospice care.
- **Administrative Overreach:** Requiring third-party property owner authorization for private healthcare delivery sets an unprecedented standard that departs from how other home-based health services are regulated in the state.

To preserve essential regulatory safeguards while protecting equitable access, I recommend replacing the landlord-permission requirement with a standard requiring proof of lawful residence or lawful occupancy of the location.

This adjustment ensures that services are conducted in verified, secure residences without creating unnecessary housing-related obstacles to necessary patient care. Thank you for your consideration of this critical revision.

Sincerely,

Ian Dunn

Chair | Medical Psilocybin Advisory Board