TITLE 7 HEALTH
CHAPTER 35 MEDICAL PSILOCYBIN
PART 3 PATIENTS, PRACTITIONERS, FACILITATORS, HEALING CENTERS, OTHER APPROVED LOCATIONS, AND EDUCATIONAL PROGRAMS

7.35.3.1 ISSUING AGENCY: New Mexico department of health.
[7.35.3.1 NMAC - N, 12/8/2026]

7.35.3.2 SCOPE: This rule applies to all patients, practitioners, clinicians, facilitators, healing centers and other approved locations, and educational programs who participate or seek to participate in the New Mexico medical psilocybin program.
[7.35.3.2 NMAC - N, 12/8/2026]

7.35.3.3 STATUTORY AUTHORITY: This rule is promulgated pursuant to the following statutory authorities: the New Mexico Department of Health Act, Subsection E of Section 9-7-6 NMSA 1978; and the Medical Psilocybin Act, Section 26-2D-7, NMSA 1978.
[7.35.3.3 NMAC - N, 12/8/2026]

7.35.3.4 DURATION: Permanent.
[7.35.3.4 NMAC - N, 12/8/2026]

7.35.3.5 EFFECTIVE DATE: December 8, 2026, unless a later date is cited at the end of a section.
[7.35.3.5 NMAC - N, 12/8/2026]

7.35.3.6 OBJECTIVE: The objective of this rule is to adopt rules governing the enrollment of qualified patients and the certification of practitioners, facilitators, educational programs, and approved locations, in accordance with the Medical Psilocybin Act at Sections 26-2D-1 through -11, NMSA 1978.
[7.35.3.6 NMAC - N, 12/8/2026]

7.35.3.7 DEFINITIONS: The definitions in 7.35.2.7 NMAC apply to this part.
[7.35.3.7 NMAC - N, 12/8/2026]

7.35.3.8 PATIENT ENROLLMENT PROCESS: A completed patient enrollment form shall be submitted by a patient and the patient's practitioner using the electronic system designated by the department, in accordance with the following:

A. Patient submittal requirements: A patient enrolling in the medical psilocybin program shall submit the following information to the department:

(1) patient's legal name, address, telephone number, and e-mail address;

(2) patient's date of birth;

(3) name of the patient's practitioner;

(4) a legible copy of the patient's driver's license or comparable photo identification card;

(5) the patient's signature and date;

(6) a signed consent for release of medical information related to the patient's qualifying medical condition;

(7) completed affirmation form, which shall include but not limited to attestations that:

(a) the patient has a qualifying diagnosis;

(b) the patient provided information to the practitioner that was, to the best of the patient's knowledge, true and correct;

(c) the patient has discussed with their practitioner the risks and benefits of medical psilocybin usage, and that the patient understands those risks; and

(d) the patient has been informed of the legal status of psilocybin and potential consequences of using it; and

(8) such additional information and documentation as the department may reasonably require.

B. Practitioner submittal requirements: A practitioner shall submit the following information to the department in support of a patient's enrollment in the medical psilocybin program:

(1) name of patient for enrollment;

(2) name, address, telephone number, and e-mail address of the practitioner;

(3) professional licensure of the practitioner;

(4) the patient's qualifying diagnosis, the date of diagnosis or date of confirmation of the diagnosis;

(5) information required for patient participation in the Medical Psilocybin Treatment Equity Fund (as applicable);

(6) completed affirmation forms, which shall include but not be limited to attestations that:

(a) the patient has a qualifying diagnosis and the practitioner has received or been provided with proof of the qualifying diagnosis; and

(b) the practitioner has discussed with the patient the risks and benefits of medical psilocybin usage;

(7) confirmation that the practitioner has completed the required department screening tool and attests that:

(a) the practitioner has referred the patient to a medical provider with the appropriate professional scope of practice to evaluate potential medical risk if:

(i) there are medical risks indicated through the screening tool review;

(ii) the patient has not seen a medical provider within the previous 12 months; or

(iii) the practitioner has otherwise chosen, within the practitioner's discretion, to make the referral; and

(b) the practitioner has determined, in their professional opinion and based on consultation with the medical provider (as applicable) that:

(i) the potential health benefits of the medical use of psilocybin likely outweigh the health risks for the patient; and

(ii) there are no identified medical risks that cannot be adequately addressed during treatment; or

(iii) to the extent that there are any identified medical risks, a written plan has been created to address those risks during treatment, to be implemented by the treating practitioner; and

(8) such additional information or documentation as the department may reasonably require.

C. Once the department has received a completed enrollment form, it will review it and render a decision within 10 business days.

(1) The department will notify the patient through the electronic system designated by the department regarding whether their enrollment is complete or whether additional information is needed.

(2) The department may verify information contained in an application by reference to information submitted by a practitioner, and by otherwise contacting a practitioner to obtain information and to review medical records.

D. A person whose patient enrollment is denied for failure to complete an application or failure to meet a submittal requirement of this rule may request an administrative record review to be conducted by the department, in accordance with this rule.

E. A qualified patient's enrollment in the medical psilocybin program shall expire two years after the initial date of enrollment. If additional treatment is needed, a qualified patient may re-enroll if their enrollment has expired.

F. Prior to certifying a patient to the program, a practitioner shall utilize the most current department screening tool to determine whether a patient requires further medical evaluation to evaluate their fitness for participation in the program. If the practitioner determines that a patient has any of the conditions, treatments, medical devices, or medical history identified in the department's most current screening tool, the practitioner shall refer the patient to a medical provider who has the appropriate professional scope of practice to evaluate the potential medical risk of psilocybin usage by the patient, and shall not certify the patient unless the practitioner determines, after consultation with the referred provider, that the patient is medically appropriate. The following conditions, treatments, medical devices, and medical histories shall be listed in the department's screening tool:

(1) cardiovascular disease;

(2) seizure disorder or history of seizure;

(3) moderate or greater head trauma;

(4) hypertension;

(5) history of brain disease including but not limited to stroke, cerebrovascular disease, increased intracranial pressure, aneurysms, or other conditions;

(6) asthma/ COPD or other disease impairing the respiratory system;

(7) diabetes or hypoglycemia;

(8) liver or kidney disease;

(9) thyroid disease

(10) cancer, excluding superficial skin cancers;

(11) gastroparesis or other condition altering gastrointestinal mobility;

(12) autoimmune disease;

(13) psychosis or disease with a risk of psychosis (including but not limited to bipolar disorder, schizophrenia spectrum disorder, mania);

(14) medication/drug-interaction contraindications (such as GLP-1, lithium, and drugs with serotonergic/psychotropic interactions);

(15) history of suicide attempt, thoughts of self-harm, or thoughts of harming others;

(16) use of a medical device that is used to manage a serious chronic medical condition, including but not limited to an insulin pump, continuous glucose sensor, feeding tube, ostomy system, central line, supplemental oxygen device, dialysis device, tracheostomy, pacemaker, external defibrillator, pain pump, stimulator, or other implantable device; and

(17) such additional conditions, treatments, medical devices, and medical histories as the department may require.

[7.35.3.8 NMAC - N, 12/8/2026]

7.35.3.9 PRACTITIONER AND FACILITATOR APPLICATION PROCESS: An individual may apply for certification as a practitioner, or facilitator in the medical psilocybin program in accordance with this rule. The applicant shall submit a completed application packet through the electronic system designated by the department.

A. Approval and denial; certification period:

(1) Once the department has received a completed application, it will review the application and render a decision within 30 calendar days.

(2) The department will notify the applicant of the approval or denial of the application through the electronic system designated by the department.

(3) If the application is approved, the certification shall be effective on the date of notice and shall be valid for two years.

(4) If the department denies an application, the department shall provide notice of the denial within 30 calendar days in accordance with this rule.

(5) If the application is denied, the applicant may re-apply within six months.

(6) An applicant who is denied a second time may not re-apply for six months from the denial.

(7) An applicant whose application is denied may appeal the denial in accordance with this rule.

B. Renewal of certification; submittal deadline: Applicants for renewal of certification shall submit a completed renewal application packet through the electronic system designated by the department no more than 60 calendar days and no less than 30 calendar days prior to the expiration of their current certification.

C. General application requirements: An applicant for certification as a practitioner, or facilitator shall submit the following as part of their completed application packet, using the electronic system designated by the department:

(1) applicant’s legal name, address, telephone number, and e-mail address;

(2) a legible copy of the applicant’s driver’s license or comparable photo identification card;

(3) documentation that the applicant has completed the applicable educational requirements and practicum requirements;

(4) documentation of satisfaction of continuing education requirements (if applying for renewal);

(5) completed affirmation and consent forms:

(a) consent to publication of contact information (name, phone number, e-mail address);

(b) affirmation that all of the information submitted is true and accurate; and

(c) attestation that the applicant is not registered in any jurisdiction as a sex offender;

(d) attestation that the applicant is aware of the legal status of psilocybin and potential consequences of utilizing it as part of their practice.

(6) The applicant's signature and date of application submittal.

D. Practitioner application requirements: An applicant for certification as a practitioner shall additionally submit the following, using the electronic system designated by the department:

(1) documentation of current professional license authorizing the individual to practice therapy, counseling, or behavioral services in New Mexico, including:

(a) licensed therapist, licensed professional clinical counselor, licensed mental health counselor, licensed alcohol and drug abuse counselor, licensed independent social worker, licensed clinical social worker, licensed master social worker, licensed psychologist, psychiatrist, psychiatric nurse practitioner, or an advanced practice nurse practitioner with certification to conduct psychotherapy; and

(b) if a specific license is not on this list, then the applicant can submit to the department a letter from their respective licensing body indicating that the utilization of medical psilocybin is within their professional scope of practice.

(2) documentation of current:

(a) basic life support (BLS) certification;

(b) both cardiopulmonary resuscitation (CPR) and automated external defibrillator (AED) certification; or

(c) licensure as a New Mexico emergency medical technician (e.g., EMT-basic, EMT-intermediate, EMT-paramedic);

(3) documentation of HIPAA certification completed within the preceding two years;

(4) completed W-9 form; and

(5) such additional information or documentation as the department may reasonably require.

E. Facilitator application requirements: An applicant for certification as a facilitator shall additionally submit the following, using the electronic system designated by the department:

(1) documentation of current:

(a) basic life support (BLS) certification;

(b) both cardiopulmonary resuscitation (CPR) and automated external defibrillator (AED) certification; or

(c) licensure as a New Mexico emergency medical technician (e.g., EMT-basic, EMT-intermediate, EMT-paramedic);

(2) documentation of HIPAA certification completed within the preceding two years;

(3) completed W-9 form, as applicable; and

(4) such additional information or documentation as the department may reasonably require.

[7.35.3.9 NMAC - N, 12/8/2026]

7.35.3.10 APPLICATION PROCESS FOR CERTIFICATION AS A PRACTITIONER OR FACILITATOR BASED ON EDUCATIONAL PROGRAMS FROM OTHER JURISDICTIONS:

A. List of department-approved psilocybin educational programs from other jurisdictions:

(1) The department shall maintain a list of psilocybin educational programs from other jurisdictions that have been identified by the department as being equivalent to the didactic educational requirements applicable for New Mexico certification, and that may be utilized as a basis for certification pursuant to this rule section.

(2) Educational programs shall be added to the list when an application for certification as a practitioner or facilitator is submitted and approved based on the applicant's completion of the out-of-state educational program.

(3) Such educational programs shall include both government-approved psilocybin educational programs from other jurisdictions (including but not limited to psilocybin educational programs approved by the states of Oregon and Colorado as of December 31, 2027), and psilocybin educational programs developed in collaboration with higher institutes of education or government-approved psychedelic research studies.

(4) Educational programs that are added to the department list of approved psilocybin educational programs from other jurisdictions shall remain on the list for two years, except that:

(a) educational programs that have been added to the department approved list will be removed if they lose certification, approval, or licensure from their issuing jurisdiction; and

(b) an educational program from the department list of approved psilocybin educational programs from other jurisdictions may be removed if the department determines that the didactic requirements of the educational program are no longer equivalent to those applicable for New Mexico certification.

(5) Consistent with this rule, educational programs that are included on the list of approved educational programs from other jurisdictions do not hold certification under this rule, and shall not be entitled to an administrative appeal in the event that the educational program is removed from the list.

B. Applications for certification based on a psilocybin educational program from another jurisdiction: An individual may apply for certification to be either a practitioner or facilitator in New Mexico on the basis of having completed a psilocybin educational program from another jurisdiction. An applicant for such certification shall submit the following, using the electronic system designated by the department:

(1) all of the information and documentation required for a practitioner or facilitator under the preceding section of this rule;

(2) documentation of either:

(a) completion of a government approved psilocybin educational program from another jurisdiction, which shall include:

(i) documentation that the curriculum of the educational program is equivalent to the didactic educational requirements applicable for New Mexico certification; and

(ii) for all applications received on or after January 1, 2028, documentation of a third-party evaluation of the curriculum demonstrating such equivalency;

(b) completion of a psilocybin educational program from another jurisdiction that is developed in collaboration with higher education institutions or government-approved psychedelic research studies, which shall include:

(i) documentation that the curriculum of the educational program is equivalent to the didactic educational requirements applicable for New Mexico certification, and

(ii) for all applications received on or after January 1, 2028, documentation of a third-party evaluation of the curriculum demonstrating such equivalency; or

(c) completion of an educational program that is currently included on the list of department-approved psilocybin educational programs from other jurisdictions.

(3) documentation of completion of the New Mexico required educational module; and

(4) documentation of completion of practicum or practice with the minimum number of patients and hours as required by this rule.

C. Application approval and denial; certification period: If the application is approved, the certification shall be effective on the date of notice and shall be valid for two years. If the department denies an application, the department shall provide notice of the denial in accordance with this rule. If the application is denied, the applicant may re-apply within six months. An applicant who is denied a second time may not re-apply for six months from the denial. An applicant whose application is denied may appeal the denial in accordance with this rule.

D. Waiver of practicum requirements:

(1) An applicant for certification as a practitioner or facilitator on the basis of an educational program from another jurisdiction and whose application is received by the department by December 31, 2027, shall not be required to complete the full practicum hours required by this rule, but shall demonstrate completion of at least 40 hours of contact time with a minimum of two separate individual sessions and one group session for preparation, administration, and integrative therapy with psilocybin treatment.

(2) The department may otherwise waive, temporarily suspend, or reduce the practicum requirements for individuals applying on the basis of having completed a psilocybin educational program from another jurisdiction, in order to facilitate the certifying of individuals trained by other governmental approved programs to build the initial infrastructure of the program.

[7.35.3.10 NMAC - N, 12/8/2026]

7.35.3.11 APPLICATION PROCESS FOR HEALING CENTERS AND OTHER APPROVED LOCATIONS:

A. Applications for healing centers: An applicant seeking certification as a healing center shall submit a complete application through the electronic system designated by the department. A complete application shall include, at minimum, the following:

(1) applicant’s legal name, address, telephone number, and e-mail address;

(2) names and contact information of primary contact person(s) and any affiliated practitioners or facilitators;

(3) an organizational chart depicting the applicant's governance and operational structure;

(4) proof of registration with the New Mexico secretary of state;

(5) proof of registration with the New Mexico taxation and revenue department;

(6) copies of any required business licenses issued by applicable New Mexico cities or counties;

(7) a certificate of occupancy for each location in New Mexico where the program will conduct operations;

(8) proof of compliance with applicable laws and regulations governing accessibility for individuals with disabilities;

(9) a list of all owners or members of the board of directors, including corresponding contact information;

(10) primary program contact information, including name, physical address, telephone number, and e-mail address;

(11) record retention plan requiring that patient and treatment records be retained for a minimum of five years;

(12) plan for maintaining confidentiality of patient information;

(13) a safety and emergency response plan appropriate to the location's operational settings, to include adverse health event response and reporting;

(14) a written outline of the location's complaint and grievance procedures available to patients;

(15) plan for secured storage for medical psilocybin;

(16) plans for wastage of any unused medical psilocybin;

(17) plan demonstrating how patient confidentiality will be maintained within the healing center;

(18) plan for transparency and disclosure of fees for patients;

(19) proof that the location has a functioning communication device which can reliably reach emergency medical services;

(20) for a location that intends to conduct administration sessions in an outdoor or natural environment:

(a) a detailed description of the outdoor administration area, including identification of safe entrances and exits, and verification that the area is free from hazards;

(b) an emergency safety and response plan; and

(c) proof that emergency medical services can reliably be contacted from, and respond to, the location at which medical psilocybin administration sessions will occur.

(21) a list of all other employees of the organization, including their legal names;

(22) completed affirmation and consent forms:

(a) consent to publication of contact information (name, phone number, e-mail address, website), if certified;

(b) attestation that the applicant is aware of the legal risks concerning the property;

(c) affirmation that all of the information submitted is true and accurate; and

(d) attestation that no persons associated with the applicant are registered in any jurisdiction as a sex offender;

(23) signature of authorized representative and date of application submittal; and

(24) such additional information and documentation as the department may reasonably require.

B. Applications for other approved locations: A practitioner or facilitator may apply for temporary department certification of an "other approved location". Other approved locations are physical locations at which medical psilocybin is intended to be consumed, that are not locations of healing centers. Such locations may be certified if a qualified patient is unable to be physically transported to a healing center, for other reasons of medical necessity, for purposes of improving patient access in rural and frontier counties, or to enable treatment to occur in a natural environment setting. Such locations may include a patient's residence, or another temporary location. An applicant who seeks certification of such a location shall submit a complete application using the electronic system designated by the department. A complete application shall include, at minimum, the following:

(1) address and description of the location to be utilized;

(2) plan for secure transportation and safe storage for medication;

(3) plans for wastage of any unused medicine;

(4) a safety and emergency response plan;

(5) proof that the location has a functioning communication device which can reliably reach emergency medical services;

(6) plan for safe storage of any firearms on the premises during and after treatment sessions;

(7) plan demonstrating how patient confidentiality will be maintained;

(8) a statement regarding the appropriateness of the location for treatment sessions;

(9) for outdoor or natural environments:

(a) a detailed description of the administration area, including identification of safe entrances and exits, and verification that the area is free from hazards;

(b) an emergency safety and response plan; and

(c) proof that emergency medical services can reliably be contacted from, and respond to, the location at which medical psilocybin administration sessions will occur;

(10) attestation that the applicant is aware of the legal risks concerning the property;

(11) affirmation that all of the information submitted is true and accurate;

(12) signature of authorized representative and date of application submittal; and

(13) such additional information and documentation as the department may reasonably require.

C. Application for renewal of certification for healing centers: An applicant seeking renewal of certification as a healing center shall submit a complete renewal application packet through the department-approved electronic system no more than 60 calendar days and no less than 30 calendar days prior to the certification's expiration date.

D. Certification period; approval and denial: Certification of a healing center shall be effective on the date of department issuance and shall be valid for two years. Certification of other approved locations shall be effective on the date of department issuance and shall be valid for 90 calendar days. If the department denies an application for a healing center or other approved location, the department shall provide notice of the denial within 30 calendar days in accordance with this rule. If the application is denied, the applicant may re-apply within six months. An applicant who is denied a second time may not re-apply for six months from the denial. An applicant whose application is denied may appeal the denial in accordance with this rule.

[7.35.3.11 NMAC - N, 12/8/2026]

7.35.3.12 APPLICATION PROCESS FOR PSILOCYBIN EDUCATIONAL PROGRAMS:

A. Application requirements: An applicant seeking certification as a psilocybin educational program shall submit a complete application through the electronic system designated by the department. A complete application shall include, at minimum, the following:

(1) an organizational chart depicting the applicant's governance and operational structure;

(2) proof of registration with the New Mexico secretary of state;

(3) proof of registration with the New Mexico taxation and revenue department;

(4) copies of any required business licenses issued by applicable New Mexico cities or counties;

(5) a certificate of occupancy for each location in New Mexico where the program will conduct operations;

(6) proof of compliance with applicable laws and regulations governing accessibility for individuals with disabilities;

(7) a list of all owners or members of the board of directors, including corresponding contact information;

(8) primary program contact information, including name, physical address, telephone number, and email address;

(9) a record retention plan requiring that student-related records be retained for a minimum of five years;

(10) a safety and emergency response plan appropriate to the program's operational settings;

(11) a written outline of the program's complaint and grievance procedures available to students;

(12) a signed consent authorizing the department to publicly list the program's contact information and website, if certification is granted;

(13) a list of all instructors, accompanied by curricula vitae or resumes demonstrating collective expertise sufficient to meet all required curriculum areas;

(14) a copy of the curriculum to be utilized by the program, including a brief description demonstrating how the curriculum satisfies the department's curriculum requirements;

(15) copies of all course syllabi and a web address at which the program will publicly maintain updated syllabi for prospective students;

(16) a plan describing how the program will ensure transparency in the disclosure of all student fees;

(17) a plan demonstrating how the program will ensure that enrolled students complete all required components and graduate within two years of enrollment;

(18) a signed consent authorizing the department to publicly list the curriculum and syllabi submitted with the application, if approval is granted;

(19) a third-party evaluation report that is conducted by a qualified third-party evaluation team in accordance with this rule, and that complies with the requirements of this section;

(20) proof of established arrangements with healing centers or other department-approved locations for student practicum placements;

(21) documentation demonstrating that, no later than December 31, 2027, the program will employ at least two faculty members who hold current practitioner or facilitator certificates issued by the department;

(22) a list of all other employees of the organization, including their legal names; and

(23) such additional information and documentation as the department may reasonably require.

B. Third-party evaluation reports: Applications for certification as an education program shall include a third-party evaluation report, generated in accordance with this rule, that assesses the organization and curriculum of the educational program and that demonstrates that the educational program meets requirements for medical psilocybin educational programs in New Mexico.

(1) Applications for certification as an education program that are submitted on or before December 31, 2027 may be approved without an accompanying third-party evaluation report, provided that the applicant submits the third-party evaluation by December 31, 2027. If the third-party evaluation is not submitted, the certification will be rescinded.

(2) Applications for certification as an education program that are submitted after December 31, 2027 shall include the third-party evaluation.

C. Application for renewal of educational program certification: An applicant seeking renewal of its psilocybin educational program certification shall submit a complete renewal application packet through the department-approved electronic system no more than 60 calendar days and no less than 30 calendar days prior to the certification expiration date.

D. Approval and denial; certification period: If the application is approved, the certification shall be effective on the date of notice and shall be valid for two years. If the department denies an application, the department shall provide notice of the denial in accordance with this rule. If the application is denied, the applicant may re-apply within six months. An applicant who is denied a second time may not re-apply for six months from the denial. An applicant whose application is denied may appeal the denial in accordance with this rule.
[7.35.3.12 NMAC - N, 12/8/2026]

7.35.3.13 REQUIREMENTS AND PROHIBITIONS FOR PRACTITIONERS AND FACILITATORS:

A. Facilitators; scope of work: A facilitator is authorized to work alongside a practitioner during medical psilocybin services. A facilitator works under the direct supervision of a practitioner, and provides peer support to qualified patients, as well as logistical and administrative support to the practitioner and to the healing center. A facilitator shall not perform any patient care outside this scope, unless another license held by the facilitator permits it.

B. Practitioners and facilitators; submittal of patient treatment information to department: Practitioners and facilitators shall maintain the following information and submit such information to the department using the electronic system designated by the department:

(1) dates and types of services provided to patients for evaluation and preparation sessions;

(2) information concerning the administration of medical psilocybin to the patient, including but not limited to:

(a) dates of administration of medical psilocybin products, and healing centers and other approved locations where medical psilocybin was administered to the patient;

(b) unique identification numbers of medical psilocybin products administered;

(c) dosage of medical psilocybin products administered;

(d) dates of initial integrative sessions; and

(e) any adverse health events; and

(3) Such additional information and documentation as the department may reasonably require.

C. Practitioners and facilitators; psilocybin product information; notification to patients of failed test results:

(1) A practitioner or facilitator who administers a psilocybin product to a qualified patient shall, upon request, make reasonable efforts to provide a translation of the psilocybin product information document in languages other than English and in an accessible format.

(2) A practitioner or facilitator who administers to a patient a psilocybin product that is determined by a producer to have come from a psilocybin lot that failed required testing shall timely forward the producer's notification of the failed test to the qualified patient who consumed the product.

D. Practitioners and facilitators; prohibition against certifying or treating certain relatives: A practitioner or facilitator shall not certify or treat a patient who is related to the practitioner or facilitator within the second degree of consanguinity or the first degree of affinity. This includes a spouse, child, stepchild, parent, stepparent, sibling, grandparent, mother-in-law, father-in-law, son-in law, or daughter-in-law.

E. Practitioners and facilitators; prohibition against intoxicants: A practitioner or facilitator shall not consume or otherwise be under the influence of psilocybin or any other intoxicant when providing services to a patient.

F. Record access: Practitioners and facilitators shall timely provide the department access to records upon the department's request.

[7.35.3.13 NMAC - N, 12/8/2026]

7.35.3.14 AUTHORIZED POSSESSION, PURCHASE, OR SALE OF MEDICAL PSILOCYBIN BY PRACTITIONERS, FACILITATORS, HEALING CENTER OWNERS AND EMPLOYEES; CHAIN OF CUSTODY: Certification of a practitioner, facilitator, or healing center shall enable practitioners, facilitators, and owners and employees of healing centers to do the following, in accordance with medical psilocybin program rules:

A. Practitioners: Practitioners may purchase and possess medical psilocybin products obtained from permitted producers, and may sell or otherwise provide medical psilocybin products to qualified patients during administration sessions conducted at a healing center location or other approved location. A practitioner may only sell or otherwise provide psilocybin products that are obtained from permitted producers.

B. Facilitators: Facilitators may possess medical psilocybin products, for the purpose of providing those products to qualified patients in administration sessions conducted at healing centers and other approved locations.

C. Healing centers: Owners and employees of healing centers who are registered with the department may purchase medical psilocybin products from permitted producers, may possess medical psilocybin products, and may sell or otherwise administer those products to qualified patients in administration sessions conducted at the healing center or other approved locations, provided that such individuals are also designated to engage in each activity by the healing center. A healing center may only sell or otherwise provide psilocybin products that are obtained from permitted producers.

D. Chain of custody; documentation: A practitioner, facilitator, or healing center owner or employee who obtains or transfers medical psilocybin shall generate and submit a chain of custody form through the electronic system designated by the department, unless the chain of custody form is otherwise generated and submitted by a producer, in which case the person who receives the psilocybin shall verify that the psilocybin is accurately reflected in the system. A practitioner, facilitator, or healing center owner or employee who obtains or transports psilocybin shall be prepared to show proper identification, including an employee badge, driver's license, vehicle registration and proof of insurance, and the appropriate chain of custody form to law enforcement and the department when requested.

[7.35.3.14 NMAC - N, 12/8/2026]

7.35.3.15 PSILOCYBIN EDUCATIONAL PROGRAMS; REQUIRED REPORTING AND CURRICULUM APPROVAL:

A. Review and approval of psilocybin educational program curriculum: The department shall review and evaluate the proposed curriculum, both for an initial application for psilocybin educational program certification and subsequent modifications to an approved curriculum, and shall determine whether to approve or deny the curriculum. The department may deny a proposed curriculum if:

(1) it does not meet the overall minimum hour requirements;

(2) it does not meet the specific requirements for each module;

(3) if the materials present incorrect or outdated information, or information that poses a substantial threat to public health or safety;

(4) if the proposed curriculum does not clearly outline how the required topics will be covered in sufficient depth for students to understand them; or

(5) if the department otherwise determines that the curriculum fails to meet the educational objectives of this rule.

B. Required reporting of updates: A department-certified psilocybin educational program shall notify the department, through the electronic system designated by the department, of any of the following changes, and shall not implement the change until written approval is issued by the department:

(1) any revision to the program's curriculum; revised curricula shall be submitted to the department for review and may not be implemented until the department grants approval;

(2) any change in ownership, including changes in controlling interest or organizational structure;

(3) any change in physical locations utilized for instruction or educational activities;

(4) any modification, termination, or addition of practicum site agreements; and

(5) any change in instructional or other staff, including submission of curricula vitae or resumes for all newly added instructors.

C. Psilocybin educational program curriculum approval process: Applicants shall submit a complete application packet for curriculum approval through the electronic system designated by the department. The department shall notify the applicant within 60 calendar days, through the department-approved electronic system, of whether the application is approved or denied. If approved, the approval shall take effect on the date of the notice and shall remain valid for two years. If denied, the department shall issue notice through the department-approved electronic system stating the basis for the denial. An applicant whose application has been denied may resubmit a corrected application within six months. No applicant may resubmit an application more than two times following an initial denial. An applicant may appeal a denial in accordance with the appeals process established in this rule.

[7.35.3.15 NMAC - N, 12/8/2026]

7.35.3.16 REQUIREMENTS FOR THIRD-PARTY EVALUATORS OF EDUCATIONAL PROGRAMS:

A. General requirements: A psilocybin educational program shall engage a qualified third-party evaluation team to conduct the evaluations required under this rule. The evaluation team shall consist of no fewer than three individuals who collectively meet all competency requirements set forth in this section.

B. Minimum qualifications: Each evaluator shall possess at least three years of professional experience in one or more of the following fields, and the evaluation team as a whole shall demonstrate expertise covering all listed domains:

(1) psilocybin therapy practice, supported by a master's or doctoral degree in counseling, therapy, social work, public health, behavioral health, or a closely related field;

(2) medical and research practice, supported by a master's or doctoral degree in medicine, pharmacy, nursing, or another related clinical or scientific field; and

(3) educational curriculum development and evaluation, supported by a master's or doctoral degree in education, educational psychology, or a closely related field.

C. Conflict of -interest prohibitions:

(1) all evaluators shall be free from actual or perceived conflicts of interest regarding the organization or curriculum under review.

(2) the following conflicts, at minimum, shall disqualify an individual from serving as an evaluator:

(a) participation in the design, development, or teaching of the curriculum being evaluated; or

(b) holding a financial interest in, receiving compensation from, or serving in any governance or advisory capacity with the program or organization being evaluated.

D. Confidentiality and impartiality: Prior to initiating evaluation activities, each evaluator shall sign a confidentiality and impartiality agreement affirming their obligation to maintain confidentiality, avoid bias, and act independently in carrying out evaluation responsibilities.

E. Evaluation report requirements: The evaluation team shall prepare a written evaluation report and shall submit the report simultaneously to both the psilocybin educational program and the department. The report shall include, at a minimum:

(1) a description of each evaluator's professional qualifications and experience relevant to the required evaluation domains;

(2) copies of all signed conflict of interest, confidentiality, and impartiality agreements;

(3) an assessment of the reliability, validity, and fidelity of implementation of the curriculum;

(4) an assessment of the reliability, validity, and fidelity of implementation of student competency evaluations, including examinations, assessments, and instructor observational feedback;

(5) an assessment of student feedback processes and a summary of the feedback;

(6) recommendations for corrective actions or improvements, where applicable;

(7) performance evaluations of all faculty members participating in the program; and

(8) a review and evaluation of any reported student grievances related to program instruction, curriculum implementation, or student assessment processes.

[7.35.3.16 NMAC - N, 12/8/2026]

7.35.3.17 EDUCATIONAL PROGRAMS; MENTORING REQUIREMENTS; RECORD-KEEPING:

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

B. Educational programs shall offer an option for a student to complete the evaluation for each educational module (not including the New Mexico module) without attending the lessons or classes for the module. The cost to complete the evaluation for each module shall not be greater than one-fourth of the normal price of each of the educational modules. If the student receives a passing grade for a module evaluation, they will have been considered to have completed the module; and if a student does not receive a passing grade for a module evaluation, they will not have completed the module. The educational program may at its discretion allow students to re-take the evaluation without attending the lessons or classes for the modules. Students who utilize this option shall 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.

C. Educational programs shall maintain the following records for a minimum of five years, and as required by applicable law:

(1) all course syllabi; and

(2) enrollment records, including but not limited to the:

(a) name of each student;

(b) date of start and completion for each student;

(c) examination results and transcripts for each student;

(d) dates, locations, and number of patients seen during each of the practicum sessions; and

(e) names of facilitators supervised by practitioner students during practicum.

D. Educational programs shall upload the completion certificate into the electronic system designated by the department.

E. Educational programs shall provide current and former students their records upon request.

F. Educational programs shall collect feedback from students within 30 calendar days of the completion of each module, which shall include, at a minimum, ratings and qualitative responses regarding the quality, quantity, and satisfaction of the students with the course pedagogy, materials, presentations, lectures, assignments, evaluations, and course content.

G. Educational programs shall provide records required to be maintained under this rule to the department upon request.
[7.35.3.17 NMAC - N, 12/8/2026]

7.35.3.18 EDUCATIONAL REQUIREMENTS FOR PRACTITIONERS AND FACILITATORS:

A. Requirements for practitioner and facilitator certification: All practitioners and facilitators who provide medical psilocybin services, including all such providers who are certified by the department on the basis of having completed an educational program from another jurisdiction, shall complete a New Mexico educational module created or approved by the department prior to applying for certification, which shall include at a minimum:

(1) education on the New Mexico Medical Psilocybin Act;

(2) an overview of the use of psilocybin in a medical and therapeutic model in New Mexico;

(3) evaluation to demonstrate competency in the above areas.

B. Requirements for initial practitioner and facilitator certification: All practitioners and facilitators shall complete a psilocybin therapy module consisting of a minimum of 65 didactic hours with at least one third of the didactic hours conducted in person, and 10 hours of simulated patient experience, prior to applying for certification. The therapy module shall include the following:

(1) the didactic portion, which shall address the following topics at a minimum:

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

(b) education on the social, cultural and historical aspects of psilocybin use, including traditional use by Native American and other populations in New Mexico;

(c) spiritual, existential, religious, and theological (SERT) aspects of psilocybin therapy;

(d) 42 CFR part 2;

(e) trauma-informed care;

(f) psychedelic emergencies, urgencies, complications, and medical monitoring;

(g) safety, risk mitigation, suicidality response, and harm reduction practices;

(h) psilocybin actions and effects on the body, interactions, and pharmacology;

(i) drug interactions and pharmacology;

(j) set and setting;

(k) ethics in therapeutic settings;

(l) legal considerations;

(m) cultural competencies;

(n) traditional and ceremonial practices and considerations;

(o) equity and access;

(p) patient-centered approaches and care;

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

(r) preparation and integration sessions;

(s) administration session;

(t) dosing;

(u) psychedelic de-escalation techniques;

(v) non-ordinary states of consciousness;

(w) self-care;

(x) research and data collection requirements;

(y) evidence-informed practices and research updates;

(z) informed consent;

(aa) touch and somatic awareness;

(bb) continuity of care and creating care plans; and

(cc) evaluation to demonstrate competency in the above areas.

(2) an in-person simulated patient experience of no less than five hours, which shall include:

(a) evaluation of the student to demonstrate competency; and

(b) an additional simulated patient experience of no less than five hours, which may be in-person, virtual, either synchronous or asynchronous, and which shall include evaluation of the student to demonstrate competency.

C. Additional requirements for initial facilitator certification: All facilitators shall complete a facilitator-specific training module consisting of a minimum of five didactic hours, prior to applying for certification, which shall include:

(1) peer facilitation ethics;

(2) how to work as part of a care team;

(3) what it means to be present with a patient;

(4) for informational purposes: basic concepts of psychotherapy; and

(5) evaluation to demonstrate competency in the above areas.

D. Additional requirements for initial practitioner certification: All practitioners shall complete a module on psychedelic and psilocybin therapeutic approaches consisting of a minimum of five didactic hours, prior to applying for certification, which shall include:

(1) additional education of psilocybin specific therapeutic modalities and non-ordinary states of consciousness;

(2) education on how to supervise and work as part of a care team; and

(3) evaluation to demonstrate competency in the above areas.

E. Practitioner and facilitator trainings: All practitioners and facilitators shall also complete and maintain proof of current certification prior to applying for medical psilocybin certification in:

(1) documentation of current:

(a) basic life support (BLS);

(b) both cardiopulmonary resuscitation (CPR) and automated external defibrillator (AED) certification; or

(c) licensure as a New Mexico emergency medical technician (e.g., EMT-basic, EMT-intermediate, EMT-paramedic); and

(2) Documentation of HIPAA certification completed within the preceding two years.

F. Continuing education requirements for practitioners and facilitators: P ractitioners and facilitators shall complete a minimum of 20 hours of continuing education credits specific to psychedelic therapy and practice every two years. Practitioners and facilitators shall also keep current with their basic life support, or cardiopulmonary resuscitation and automated external defibrillation certification, or emergency medical technician licensure in addition to the 20 hours of continuing education credits.

G. Waiver of didactic requirements: The department may waive, temporarily suspend, or otherwise reduce the didactic hourly and topic requirements for individuals applying for certification in order to facilitate the certification of individuals trained by other programs, to build the initial infrastructure of the program, or if subsequent evaluations of educational programs determine the changes are appropriate for ensuring competency of the applicants for certification.

[7.35.3.18 NMAC - N, 12/8/2026]

7.35.3.19 PRACTICUM REQUIREMENTS FOR PRACTITIONERS AND FACILITATORS:

A. Minimum practicum hours; administration day sessions: An individual who seeks to become certified as a practitioner or facilitator shall participate in supervised practice training, otherwise referred to as a "practicum", after completing at least half of the didactic requirements and all of the simulated patient requirements of the educational requirements. The practicum shall consist of a minimum of 100 hours of supervised practice training for facilitators and 120 hours for practitioners which shall be completed prior to applying for certification. Students shall participate in a minimum of 80 hours of administration day sessions, where students are provided the opportunity to experience, observe, or conduct supervised facilitation of in-person administration day sessions with a minimum of 14 different patients over a minimum of eight different administration and same-day sessions with the following criteria:

(1) a minimum of six different patients during a minimum of six individual administration day sessions;

(2) a minimum of two different group administration day sessions with four or more patients in each group administration day session; and

(3) the initial 20 hours of administration day sessions shall be with patients who are determined by the supervising practitioner to be low-risk for adverse events or other complications.

(4) same-day administration sessions shall, at a minimum, include patients who have a diversity of the qualifying conditions.

B. Minimum practicum hours; preparation and integration sessions: Students shall participate in a minimum of 20 hours of in-person preparation and integration sessions, where students are provided the

opportunity to experience, observe, or conduct (when licensure allows) preparation or integration sessions. This shall include a minimum of six different patients during individual sessions. This shall include at least one group preparatory and one group integration session with a minimum of four or more patients.

C. Practicum evaluation: As part of the minimum required practicum hours, the student shall present a minimum of two of the last four patients to the practicum supervisor as case presentations for evaluation, and must receive a passing grade on the case presentations to complete their practicum.

D. Practitioner supervision hours: Practitioners shall complete an additional minimum of 20 hours as a practitioner supervising facilitators during in-person administration day sessions, which shall include a minimum of two different patients during individual administration day sessions, and a minimum of one group administration day sessions with a minimum of four or more patients in the group.

E. Practicum location: All practicum hours shall take place in an approved healing center or other approved location.

F. Practicum standards: Practicum supervisors and students shall follow these rules as they apply to facilitation and therapy, shall comply with HIPAA and HITECH confidentiality requirements, and shall comport with applicable limits on scope of practice.

G. Waiver of practicum requirements: The department may otherwise waive, temporarily suspend, or reduce the practicum requirements for individuals applying for certification, in order to facilitate the certification of individuals trained by other government-approved programs, and to build the initial infrastructure of the program.

H. Waiver of practicum hours requirement for applications received by December 31, 2027: An applicant for certification shall not be required to satisfy the full New Mexico practicum hours requirement if the applicant:

(1) applies for certification by December 31, 2027;

(2) completes the didactic requirements by December 31, 2027;

(3) graduates from an educational program that the department certifies by December 31, 2027 or that the department has included on the department-approved list of educational programs by December 31, 2027; and

(4) demonstrates completion of at least 40 hours of contact time through logs or other records of the sessions, including:

(a) a minimum of two separate individual sessions including the appointments for preparation, administration and integration; and

(b) a minimum of one group session including the appointments for preparation, administration, and integration.

[7.35.3.19 NMAC - N, 12/8/2026]

7.35.3.20 REQUIREMENTS FOR HEALING CENTERS AND OTHER APPROVED LOCATIONS: A healing center and a registrant of another approved location shall comply with the following requirements:

A. A healing center and a registrant of another approved location shall maintain a list of all qualified patients who have utilized the location for administration sessions.

B. Neither a healing center nor any person who enters a healing center shall possess firearms or other weapons on the healing center's premises.

C. Medical psilocybin products may only be consumed on the premises of a healing center or other approved location. A healing center and a registrant of another approved location shall not allow the consumption of unauthorized psilocybin products during an administration session. A healing center and a registrant of another approved location shall not promote unregulated cultivation or processing of psilocybin products, and a registrant of another approved location shall not sell psilocybin products that are not lawfully produced or acquired in accordance with department rule.

D. Except in circumstances involving an emergency response, only patients, certified individuals, and students completing their practicums may be present during an administration session unless each patient gives prior written consent for the other individual(s) to be present.

E. A healing center and a registrant of another approved location shall maintain a daily log of all activities related to the purchase, storage, and administration of psilocybin, and shall maintain a copy of information contained in the log within the electronic system designated by the department, and shall provide information to the department upon request in a form and manner designated by the department.

F. A healing center shall publicly display a copy of its certification from the department.

G. A healing center shall provide the following information to qualified patients:

(1) information regarding safe transportation of the qualified patient following an administration session;

(2) the healing center's patient bill of rights and responsibilities;

(3) information explaining informed consent;

(4) information on how to file a complaint with the department or other relevant state entities; and

(5) how to report an adverse health event to the department.

H. A healing center and a registrant of another approved location shall create and maintain a safety and emergency plan which:

(1) identifies procedures for evacuating and relocating patients to a safe location if the approved location becomes unsafe;

(2) identifies general procedures for emergency response when a patient experiences a medical or other emergency;

(3) identifies procedures for addressing disruptive conduct and patient reactions that do not rise to the level of requiring an emergency response;

(4) describes how the healing center will address a situation in which a patient attempts to leave an administration session against medical advice; and

(5) includes procedures to ensure that there are practitioners and facilitators present at all times during an administration session with a minimum of one practitioner and one additional practitioner or facilitator for individual patient sessions; and in group administration sessions a minimum of one practitioner for every nine patients and a minimum of one additional practitioner, facilitator, or qualified student for every three patients. For purposes of the foregoing provision, a student shall be deemed qualified to substitute as a facilitator, including for the purposes of billing, if they are registered with a certified educational program and they have completed at least 50 hours of their practicum. Exception: the department may waive or adjust this ratio if the department determines that the ratio specified presents a barrier for patients and that safety concerns are otherwise alleviated. For the purpose of this provision, being present during an administration session requires that at least one certified individual remain in proximity to the patients and that the additional certified individuals be in the building to ensure that they can be called into the room in the event of an emergency or other need.

I. A healing center and a registrant of another approved location shall provide the emergency and safety plan to all persons who utilize the location.

J. In the event that any emergency procedure is utilized, the healing center or registrant of another approved location shall, within two calendar days, submit a report to the department utilizing the electronic system designated by the department, which shall identify whether the procedures of the safety and emergency plan were adhered to, whether there were deviations from the plan, whether the plan did not work as intended in whole or in part, and what if any procedures the healing center or other approved location intends to modify to ensure safety of individuals in the event of future incidents.

K. A healing center, and a registrant of another approved location, that conducts administration sessions in a natural environment setting that is 15 minutes or more away from emergency medical service response or a hospital, urgent care, or other emergency medical services shall ensure that there is a basic first aid kit and an AED on site, and that there are at least two individuals present during administration sessions who are not receiving treatment and who have:

(1) wilderness first aid certification;

(2) wilderness first responder certification; or

(3) licensure as a New Mexico emergency medical technician (e.g., EMT-basic, EMT-intermediate, EMT-paramedic).

L. All psilocybin products stored at a healing center or other approved location shall be stored within a secure, locked area, which shall be:

(1) 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 utilizing a commercial grade, non-residential lock;

(2) a locked safe; or

(3) a secure, locked refrigerator or freezer, for products that require refrigeration.

M. A healing center and a registrant of another approved location shall report any potential adverse health event associated with medical psilocybin services to the department no later than two calendar days after the healing center becomes aware of, or is otherwise notified of, the event, using the electronic system designated by the department. Healing centers and registrants of other approved locations shall maintain records of all adverse health event reports in accordance with these rules. Reports of adverse health events shall include:

(1) patient record number;
(2) unique identification number of the product(s) used;
(3) any challenging psychological, emotional, or behavioral reactions;
(4) any participant reaction requiring medical or therapeutic attention;
(5) any incident requiring emergency response; and
(6) any other incident which has a negative impact on a patient.

N. A healing center and a registrant of another approved location shall timely provide the department access to records, upon the department's request.

[7.35.3.20 NMAC - N, 12/8/2026]

7.35.3.21 DEPARTMENT EVALUATION AND ASSESSMENT OF PSILOCYBIN EDUCATIONAL PROGRAMS, HEALING CENTERS, AND OTHER APPROVED LOCATIONS:

A. Authority to conduct assessments: The department or its designee may conduct remote or on-site assessments of a psilocybin education program, healing center or other approved location, with or without prior notice, during normal business hours, for the purpose of determining compliance with the Medical Psilocybin Act and this rule. In conducting assessments, the department may review documentation, inspect premises and equipment, and interview staff and patients. Exception: except in emergency circumstances, the department or its designee shall not conduct an on-site assessment during a patient session or at a patient's home without prior written consent from the patient(s).

B. Curriculum implementation review: Educational program assessments may include review and observation of the current curriculum, instructional delivery, and related educational activities to determine whether the curriculum is being implemented with fidelity and in accordance with department requirements.

C. Record retention review: Assessments shall include a review of the certificant or certificant-applicant record retention plan and verification that the plan is being followed in accordance with all applicable requirements.

D. Additional documentation: The department may require any additional documentation it deems reasonably necessary to verify compliance with the Medical Psilocybin Act, this rule, or any other applicable law or regulation. A psilocybin educational program, healing center, or other approved location shall provide requested documentation within the timeframe specified by the department.

[7.35.3.21 NMAC - N, 12/8/2026]

7.35.3.22 PROHIBITIONS AND LIMITATIONS FOR QUALIFIED PATIENTS AND CERTIFICANTS: Participation in the medical psilocybin program by a qualified patient or certificant does not relieve the qualified patient or certificant from criminal prosecution or civil penalties for:

A. consumption of psilocybin outside an administration session conducted in accordance with the requirements of this rule;

B. unlawful distribution, transfer, or use of psilocybin;

C. operation of a vehicle while under the influence of psilocybin;

D. transport of psilocybin outside of New Mexico, or transport of psilocybin from another state into New Mexico;

E. fraudulent representation to a law enforcement officer regarding the person's participation in the program; or

F. any other activity not authorized by this rule or the Medical Psilocybin Act.

[7.35.3.22 NMAC - N, 12/8/2026]

7.35.3.23 PROHIBITION AGAINST DUAL OWNERSHIP IN CERTIFICANT AND PERMITTEE: A certificant or a person who holds an ownership interest in a certificant shall not hold an ownership interest in a permittee.

[7.35.3.23 NMAC - N, 12/8/2026]

7.35.3.24 COMPLAINTS TO THE DEPARTMENT: A qualified patient or certificant may submit a complaint to the department regarding a certificant in the medical psilocybin program, or regarding any activity or concern related to the medical psilocybin program. The complaint should be in writing, addressed to the medical psilocybin program, and submitted by U.S. certified mail or through the electronic system designated by the department. The department may request additional information for purposes of its own inquiry. A complaint shall include the name and contact information for the complainant; and a statement of the nature of the complaint and

any individuals who may be involved. The department may, within its discretion, choose to conduct a subsequent inquiry, and may request additional information from the complainant for this purpose.
[7.35.3.24 NMAC - N, 12/8/2026]

7.35.3.25 INFORMAL ADMINISTRATIVE REVIEW OF DENIED PATIENT ENROLLMENT:

A. Administrative review: A person whose patient enrollment form has been denied may request an informal administrative review from the department.

B. Procedure for requesting informal administrative review:

(1) An applicant given notice of an application denial, and a patient whose enrollment has been immediately suspended, may submit a request for an administrative review through the electronic system designated by the department or mail a written request to the department. To be effective, the request shall:

(a) be made within 30 calendar days, as determined from the date of the denial notice issued by the department;

(b) state the requestor's name, address, and telephone number;

(c) provide a brief narrative rebutting the circumstances of the application denial or demonstrate that the issues which resulted in the denial have been resolved; and

(d) if applicable, provide supplemental documentation from the applicant's clinician supporting the medical condition as eligible for the program.

(2) If the applicant wishes to submit additional documentation for consideration, such additional documentation must be included with the request for an administrative review.

(3) A request for administrative review shall not operate to stay or modify the time required for a denied patient applicant to request a formal appeal of the denial pursuant to this rule.

C. Administrative review proceeding: The administrative review proceeding shall be a closed proceeding that is limited to an administrative review of application materials and documents offered to verify eligibility. The administrative review proceeding is not an adjudicatory hearing, and an individual whose initial application for enrollment has been denied for failure to submit a completed application or failure to meet a submittal requirement of this rule shall not be entitled to an adjudicatory hearing to contest the denial. The administrative review shall be conducted by the administrative review committee. In cases where the administrative review committee finds the need for additional or clarifying information, the review committee shall request that the applicant supply such additional information within the time set forth in the committee's request.

D. Final determination:

(1) Content and timeline: The administrative review shall be completed, and a decision setting forth the reasons for the decision and the evidence upon which the decision is based, no later than 15 calendar days from the date that the program receives the written request for an administrative review.

(2) Effect: The decision of the administrative review committee is the final decision of the informal administrative review proceeding.

(3) Notice: A copy of the decision shall be issued to the applicant via certified U.S. postal mail and posted within the electronic system designated by the department.

E. Judicial review: Except as otherwise provided by law, there shall be no right to judicial review of a decision by the administrative review committee.
[7.35.3.25 NMAC - N, 12/8/2026]

7.35.3.26 VOLUNTARY WITHDRAWAL FROM ENROLLMENT OR RELINQUISHMENT OF CERTIFICATION: A qualified patient may voluntarily withdraw from enrollment in the medical psilocybin program, and a practitioner, facilitator, healing center or other approved location, or educational program may voluntarily relinquish its certification, at any time, by submitting written notice to the department. Upon receipt of such notice, the department shall terminate the enrollment or certification, which shall be effective on the date that the notice is received by the department.
[7.35.3.26 NMAC - N, 12/8/2026]

7.35.3.27 DISCIPLINARY ACTIONS AND APPEAL PROCESS FOR ENROLLED PATIENTS, PATIENT-APPLICANTS, CERTIFICANTS, AND APPLICANTS FOR CERTIFICATION:

A. Notices of disciplinary action; grounds for disciplinary action: The department may issue a notice of contemplated action to deny, suspend, or revoke, or take other disciplinary action regarding a patient's enrollment as a qualified patient in the medical psilocybin program, and may deny, suspend, revoke, or take other disciplinary action regarding the certification of a practitioner, facilitator, healing center or other approved location,

or an educational program. The department may also immediately suspend enrollment or certification if the department determines that such action is necessary to protect the health or safety of a patient or the general public. Notice shall be served via certified U.S. postal mail. A notice shall be deemed to have been served on the date borne by the certified mail return receipt showing delivery or the last attempted delivery, or the refusal of the addressee to accept delivery, at their address of record with the program.

B. Grounds for disciplinary action: Disciplinary action may be imposed based on:

(1) violation of, or failure to comply with, any provision of this rule or the Medical Psilocybin Act;

(2) threatening or harming a patient, practitioner, clinician, facilitator, or an employee of a producer, a laboratory, an educational program, a healing center or other approved location, or the department;

(3) intentionally destroying, damaging, altering, removing, or concealing evidence of a violation of rule or statute; attempting to do so; or asking or encouraging another person to do so;

(4) conduct that shows willful or reckless disregard for health or safety;

(5) falsification or misrepresentation of any material or information submitted to the department;

(6) failure to adhere to any attestation, acknowledgement, verification, or other representation made to the department;

(7) failure to submit or disclose information required by this rule or otherwise requested by the department;

(8) for practitioners: any determination by the individual's licensing body that the practitioner has engaged in unprofessional or dishonorable conduct;

(9) for practitioners and facilitators: registration in any jurisdiction as a sex offender.

C. Persons who may request a hearing: The following persons may request a hearing to contest an action or proposed action of the department, in accordance with this rule:

(1) an enrolled patient;

(2) a certified practitioner;

(3) a certified facilitator;

(4) a certified healing center or other approved location;

(5) a certified educational program; and

(6) an applicant for enrollment or certification as any of the foregoing, whose application is denied for any reason other than failure to submit a completed application or failure to meet a submittal requirement of this rule.

D. Timing and content of request for hearing: A person who has received a notice of contemplated action to impose a disciplinary action or a notice of immediate disciplinary action pursuant to this section who wishes to request a hearing (hereafter, "the appellant") may do so by mailing a written request for hearing no later than 30 calendar days from the date that the notice of contemplated action is received. The request shall:

(1) be properly addressed to the medical psilocybin program;

(2) be mailed to the medical psilocybin program via certified U.S. postal mail (return receipt requested, to verify delivery);

(3) state the requestor's name, address, and telephone number; and

(4) include a statement of the issue(s) that the requestor considers relevant to the review of the action.

E. Hearing process:

(1) All hearings held pursuant to this section shall be conducted by a hearing officer appointed by the secretary.

(2) Hearings shall be conducted in Santa Fe, NM, provided that, if the appellant is located more than 100 miles from Santa Fe, NM, or if the parties otherwise consent, the hearing may be conducted via telephone or via web video conference.

(3) Hearings held pursuant to this section that concern patients or patient-applicants shall be closed to the public. Hearings may also be closed in whole or in part, upon the request of a party, to prevent the disclosure of other information that is confidential under applicable law.

(4) The hearing shall be recorded, at a minimum, by means of sound reproduction.

F. Scheduling: The department shall schedule and hold the hearing as soon as practicable, provided that the hearing shall not be held later than 60 calendar days from the date the department receives the request for hearing. The hearing officer may extend the 60-day time period upon motion for good cause shown, or the parties

may extend the 60-day time period by mutual agreement. The department shall issue a notice of hearing, which shall include:

(1) a statement of the location, date, and time of the hearing;

(2) a short and plain statement of the legal authority under which the hearing is to be held; and

(3) a short and plain statement of the subject of the hearing.

G. Presentation of evidence: All parties shall be given the opportunity to present evidence and argument on all relevant issues.

H. Record of proceeding: The record of the proceeding shall include the following:

(1) all pleadings, motions, and intermediate rulings;

(2) evidence and briefs received or considered;

(3) a statement of matters officially noticed;

(4) offers of proof, objections, and rulings thereon;

(5) proposed findings and conclusions; and

(6) any findings or decisions recommended by the hearing officer for adoption by the secretary.

I. Recording: A party may request a copy of the recording of the proceedings.

J. Procedures and evidence:

(1) A party may be represented by a person licensed to practice law in New Mexico or a non-lawyer representative, or may represent themselves.

(2) The rules of evidence as applied in the courts do not apply in these proceedings. Any relevant evidence shall be admitted. Irrelevant, immaterial, or unduly repetitious evidence may be excluded.

(3) The experience, technical competence, and specialized knowledge of the hearing officer, the department or the department's staff may be used in the evaluation of evidence.

(4) An appellant's failure to appear at the hearing at the date and time noticed for the hearing shall, absent good cause, constitute a default.

K. Conduct of proceeding: Unless the hearing officer determines that a different procedure is appropriate, the hearing shall be conducted in accordance with the procedures set forth in this rule. The following procedures shall apply:

(1) the appellant shall present an opening statement and the department may present an opening statement or reserve the statement until presentation of the department's case;

(2) after the opening statements, if made, the appellant shall present their case;

(3) upon the conclusion of the appellant's case, the department shall present its case;

(4) upon conclusion of the appellee's case, the appellant may present rebuttal evidence; and

(5) after presentation of the evidence by the parties, the parties may present closing argument.

L. Burden of proof: An appellant who contests the denial of an initial application shall bear the burden of establishing by a preponderance of the evidence that the decision made or proposed by the department should be reversed or modified. In all other cases, the department shall bear the burden of establishing by a preponderance of the evidence that the decision made or proposed should be sustained.

M. Continuances: The hearing examiner may grant a continuance for good cause shown. A motion to continue a hearing shall be made at least 10 calendar days before the hearing date.

N. Telephonic and web video hearings:

(1) Any party requesting that a hearing be conducted via telephone or web video conference shall do so no less than 10 business days prior to the date of the hearing. Notice of the hearing shall be given to all parties and shall include all necessary telephone numbers or instructions for access to the web video conference.

(2) The in-person presence of some parties or witnesses at the hearing shall not prevent the participation of other parties or witnesses by telephone or web video conference with prior approval of the hearing officer.

O. Recommended action and final decision:

(1) The parties may submit briefs including proposed findings of fact and conclusions of law for consideration by the hearing officer.

(2) No later than 30 calendar days after the last submission by a party, the hearing officer shall prepare and submit to the secretary a written recommendation of action to be taken by the secretary. The recommendation may include proposed findings of fact and conclusions of law for adoption by the secretary, and shall propose sustaining, modifying, or reversing the action or proposed action of the department.

(3) The secretary shall issue a final written decision accepting or rejecting the hearing officer's recommendation in whole or in part no later than 45 calendar days after receipt of the hearing officer's recommendation. The final decision shall identify the final action taken. Service of the secretary's final decision shall be made upon the appellant via certified U.S. postal mail.

(4) The final decision or order shall be included in a medical psilocybin program's file concerning the petitioner.

[7.35.3.27 NMAC - N, 12/8/2026]

7.35.3.28 SEVERABILITY: The provisions of this rule are separate and severable. If any provision of this rule is held to be invalid, unconstitutional, or unenforceable, the remaining provisions shall stay in effect.

[7.35.3.28 NMAC - N, 12/8/2026]

HISTORY OF 7.35.3.28 NMAC: [RESERVED]