HCS HB 1830 -- ALTERNATIVE THERAPIES

SPONSOR: McMullen

COMMITTEE ACTION: Voted "Do Pass with HCS" by the Standing Committee on Veterans by a vote of 12 to 0. Voted "Do Pass" by the Standing Committee on Rules- Regulatory Oversight by a vote of 6 to 3.

The following is a summary of the House Committee Substitute for HB 1830.

As specified in this bill, any person who acquires, uses, produces, possesses, transfers, or administers psilocybin for the person's own therapeutic use will not be in violation of State or local law and will not be subject to a civil fine, penalty, or sanction so long as the person meets the following conditions:

(1) Is a veteran;

(2) Is 21 years of age or older;

(3) Suffers from posttraumatic stress disorder, major depressive disorder, or a substance use disorder or requires end-of-life care;

(4) Has enrolled in a study to study the use of psilocybin to treat posttraumatic stress disorder, major depressive disorder, or substance use disorders or for end-of-life care;

(5) Informs the Department of Mental Health that the person plans to acquire, use, produce, possess, transfer, or administer psilocybin in accordance with this section;

(6) Provides the Department with documents specified in the bill. The Department must maintain the confidentiality of any personally identifiable protected information collected from anyone who provides information to the Department;

(7) Use of psilocybin occurs only in the presence of a facilitator who meets requirements outlined in the bill;

(8) Ensures that a laboratory licensed by the State to test controlled substances tests the psilocybin the person intends to ingest; and

(9) The person limits the use of psilocybin to no more than 150 milligrams of psilocybin analyte (4-phosphoryloxy-N, Ndimethyltryptamine) during any 12 month period.

The Department must prepare and submit to the Governor, Lieutenant Governor, and the General Assembly annual reports on any information collected by the Department on the implementation and outcomes of the use of psilocybin.

This bill specifies that, a physician will not be subject to criminal or civil liability or sanction under the laws of this State for providing documentation that a person suffers from posttraumatic stress disorder, major depressive disorder, or a substance use disorder or requires end-of-life care, and no State agency or regulatory board shall revoke, fail to renew, or take any other action against a physician's license issued under Chapter 334, RSMo based solely on the physician's provision of documentation that a person suffers from posttraumatic stress disorder, major depressive disorder, or a substance use disorder or requires end-of-life care.

This bill also requires the Department, in collaboration with a hospital operated by the an institution of higher education in this state or contract research organizations conducting trials approved by the United States Food and Drug Administration in Missouri, to conduct a study on the efficacy of using alternative medicines and therapies, including, but not limited to, the use of psilocybin for the treatment of patients suffering from post-traumatic stress disorder, major depressive disorder, substance use disorders, or who require end-of-life care.

The bill specifies that such study shall include a study on the therapeutic efficacy of using psilocybin in the treatment of veterans who suffer from posttraumatic stress disorder, major depressive disorder, or substance use disorders or who require endof-life care, as well as a literature review and the submission of various reports. The Department of Mental Health, any health care providers, and any person participating in the study will not be subjected to criminal or civil liability or sanction for the participation in the study, except in cases of gross negligence or willful misconduct.

The Department shall prepare and submit to the Governor, Lieutenant Governor and the General Assembly:

(1) Quarterly reports on the progress of the study; and

(2) A written report, submitted one year following the commencement of the study, which must:

(a) Contain the results of the study and any recommendations for legislative or regulatory action; and

(b) Highlight those clinical practices that appear to be most successful as well as any safety or health concerns.

The Department must maintain the confidentiality of any personally identifiable protected information collected during the study. The Department of Mental Health, any health care providers, and any other person involved in the study under this section shall not be subject to criminal or civil liability or sanction under the laws of this state for participating in the study, except in cases of gross negligence or willful misconduct.No health care provider shall be subject to discipline against his or her professional license for participation in the study.

A physician will not be subject to criminal or civil liability or sanction under the laws of this state for referring a patient to the study under this section, and no state agency or regulatory board shall revoke, fail to renew, or take any other action against a physician's license based solely on the physician's referral of a patient to the study under this section.

This bill is similar to HB 1154 (2023).

The following is a summary of the public testimony from the committee hearing. The testimony was based on the introduced version of the bill.

PROPONENTS: Supporters say that we need to look for any way we can to help our veterans and other individuals with PTSD and depression and this treatment does that. We need to remove the stigma attached to psilocybin just like we did with marijuana in this state.

Testifying in person for the bill were Representative McMullen; Thomas W. Mundell; Amy Benson; Anne Bethune; Brad Bailey; Andrea Earlywine; Elaine Brewer, Grunt Style Foundation; Carl Shepard; Jamie Frederickson; and Mark E. Quinn, Special Operations Charity Network.

OPPONENTS: There was no opposition voiced to the committee.

OTHERS: Others testifying on the bill say that there is currently a trial program at Washington University. So far, tests have been very positive. Participants in the trial have tried multiple other remedies but nothing has worked for them. However, 50% of the participants have positive results from the program.

Testifying in person on the bill was Dr. Josh Siegel.

This bill is similar to HB 1154 (2023) 2459H.01P; 3978H.01I (2024). Written testimony has been submitted for this bill. The full written testimony and witnesses testifying online can be found under Testimony on the bill page on the House website.