

HOUSE No. 4986

The Commonwealth of Massachusetts

HOUSE OF REPRESENTATIVES, January 28, 2026.

The committee on Public Health, to whom were referred the petition (accompanied by bill, House, No. 2506) of Steven Owens relative to psilocybin as a treatment for PTSD and certain other conditions; and the petition (accompanied by bill, House, No. 2532) of Lindsay N. Sabadosa for legislation to establish a non profit therapeutic center pilot program offering psilocybin treatment for mental and physical health needs, reports recommending that the accompanying bill (House, No. 4986) ought to pass.

For the committee,

MARJORIE C. DECKER.

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In the One Hundred and Ninety-Fourth General Court
(2025-2026)

An Act relative to therapeutic psilocybin treatment centers.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. (a) Notwithstanding any general or special law to the contrary, there shall
2 be a 5-site pilot program with locations in western Massachusetts, central Massachusetts, the
3 North Shore area, the South Shore area, and the Metro Boston area, establishing non-profit
4 therapeutic centers offering psilocybin treatment for mental and physical health needs.

5 (b) The department of public health in consultation with an advisory board as set forth in
6 Section 2 shall promulgate rules and regulations necessary for the operation of a therapeutic
7 psilocybin center, including but not limited to, establishing a process to apply for licensure.
8 Entities that are run by medical professionals, psychiatrists, psychologists, and therapists who: (i)
9 are properly trained facilitators with experience working with psilocybin or (ii) obtain training in
10 administering psilocybin shall be eligible to apply for licensure to operate a therapeutic
11 psilocybin center. Approval from the local board of health to participate in the pilot program
12 shall be required before an entity may apply for licensure to operate a therapeutic psilocybin
13 center.

(c) The department of public health shall send notification and an explanation of the department's approval or denial of licensure, in writing, within 45 days of a completed application to the applicant and to the local board of health where the therapeutic psilocybin center would be located. A denial of licensure shall not prohibit an entity from submitting a future application at any time.

(d) To be considered for licensure, a therapeutic psilocybin center shall, at a minimum:

(1) provide a suitable space where participants may receive treatment with psilocybin under the supervision of a medical professional;

(2) provide adequate staffing by medical and mental health professionals, psychiatrists, therapists, or other staff who have all been trained in the use of psilocybin for therapeutic purposes;

(3) provide education on treatment with psilocybin for medical purposes;

(4) monitor participants and administer first aid, if needed;

(5) provide access or referrals to additional mental health services as appropriate;

(6) provide trainings for staff members to deliver psilocybin treatment offered by a group or organization offering such trainings as determined by the department of public health or make available any trainings provided by the department of public health, if required;

(7) establish standard security and safety procedures in consultation with local law enforcement;

(8) establish standard policies that facilitate communication and education with local businesses, community members, local law enforcement, and first responders; and

(9) create a price structure for patients that ensures affordability and access

SECTION 2. Notwithstanding any general or special law or rule or regulation to the contrary, the following persons shall not be arrested, charged, or prosecuted for any criminal offense, including, but not limited to, charges pursuant to sections 13, 32I, 34, 43 or 47 of chapter 94C of the General Laws, or be subject to any civil or administrative penalty, including seizure or forfeiture of data records, assets or property or disciplinary action by a professional licensing board, credentialing restriction, contractual liability, and action against clinical staff or other employment action, or be denied any right or privilege, solely for participation or involvement in a therapeutic psilocybin center licensed by the department of public health pursuant to this section: (i) a participant; (ii) a staff member or administrator of a licensed therapeutic psilocybin center, including a health-care professional, manager, or employee, (iii) a property owner who owns property at which a licensed therapeutic psilocybin center is located and operates and (iv) the entity operating the licensed therapeutic psilocybin center. Entering or exiting a licensed overdose therapeutic psilocybin center cannot serve as the basis for, or a fact contributing to the existence of, reasonable suspicion or probable cause to conduct a search or seizure.

The department of public health shall submit a report to the clerks of the senate and house of representatives and to the senate and house chairs of the joint committee on mental health, substance use and recovery. The report shall include site-specific and aggregate data for all licensed therapeutic psilocybin centers including but not limited to: (i) number of participant

visits; (ii) number of referrals to additional mental health treatment, (iii) number of patients who required to further mental health treatment following treatment with psilocybin, (iv) financial reports and (v) any adverse events that occurred as a result of treatment with psilocybin. The report shall be submitted no later than 18 months after implementation of the pilot program, and annually thereafter.

SECTION 3. (a) The department of public health shall convene an advisory committee comprised of: medical and mental health professionals, veterans, law enforcement representatives and other individuals with lived experience using psilocybin, individuals with experience in facilitating psilocybin sessions, and psilocybin researchers.

(b) The advisory committee shall be responsible for making recommendations to the department of public health regarding the promulgation of rules and regulations necessary for the operation of a therapeutic psilocybin center, including but not limited to, establishing a process for licensure application. The advisory committee shall also be responsible for studying and making recommendations towards the decriminalization of psilocybin use for post-traumatic stress disorder or a medical condition for which at least two and a majority of relevant clinical studies suggest psilocybin therapy in a clinical environment is safe and tolerable and which is not a bipolar disorder, a schizophrenia spectrum disorder, a Cluster A personality disorder, a Cluster B personality disorder, or a medical condition for which at least two and a majority of relevant clinical studies suggest psilocybin therapy in a clinical environment is not safe.

(c) The advisory committee shall consist of: the secretary of health and human services, who shall serve as chair; the commissioner of public health or a designee; the director of the bureau of substance addiction services or a designee; the attorney general or a designee; the

77 secretary of veterans services or a designee; the president of the Massachusetts District Attorneys
78 Association or a designee; and 9 members appointed by the secretary of health and human
79 services or a designee, 1 of whom shall be a representative from the Massachusetts General
80 Hospital Center for the Neuroscience of Psychedelics, 5 of whom shall be direct service
81 providers from organizations representing veterans across regions of the commonwealth and 3 of
82 whom shall be individuals with lived experience using psilocybin or individuals with experience
83 in facilitating psilocybin sessions.