..... moves to amend H.F. No. 4577 as follows:

Delete everything after the enacting clause and insert:

"Section 1. **PURPOSE.**

The purpose of this article is to establish a legal, regulated framework for the therapeutic use of psilocybin by individuals who are 21 years of age or older with a registered facilitator, have been diagnosed with a qualifying medical condition, and meet the other requirements for enrollment in the program.

Sec. 2. **[342.85] DEFINITIONS.**

Subdivision 1. **Application.** For the purposes of sections 342.85 to 342.98, the following terms have the meanings given.

Subd. 2. **Administration session.** "Administration session" means a session supervised by a registered facilitator during which a registered patient consumes and experiences the effects of psilocybin. May also be referred to as treatment sessions or medicine sessions.

Subd. 3. **Director.** "Director" means the director of the Office of Cannabis Management (OCM).

Subd. 4. **Integration session.** "Integration session" means a meeting between a registered patient and a registered facilitator that occurs after the completion of an administration session.

Subd. 5. **Physician.** "Physician" means a Minnesota-licensed physician.

Subd. 6. **Preparation session.** "Preparation session" means a meeting between a registered patient and a registered facilitator that occurs before an administration session. Preparation session does not mean an initial consultation between a registered patient and registered facilitator regarding psilocybin use, an inquiry from a registered patient to a

registered facilitator regarding psilocybin use, or a registered facilitator's response to a registered patient's inquiry regarding psilocybin use.

Subd. 7. **Program.** "Program" means the psilocybin therapeutic use program established under sections 342.85 to 342.98.

Subd. 8. **Program research institution.** "Program research institution" means a Minnesota nonprofit or academic institution that advises and assists with program data collection for public health monitoring, training, continuing education, and ethical oversight requirements.

Subd. 9. **Psilocybin.** "Psilocybin" means any mushroom, in raw, dried, or prepared form, that contains the psychoactive compound psilocybin or its metabolite psilocin.

Subd. 10. **Psychedelic Medicine Advisory Committee or advisory committee.** "Psychedelic Medicine Advisory Committee" or "advisory committee" means the advisory committee established under section 342.98.

Subd. 11. **Qualifying medical condition.** "Qualifying medical condition" means a medical condition designated by the director for which psilocybin shows evidence for an appropriate therapeutic use, including but not limited to posttraumatic stress disorder, depression, substance use disorders, anxiety, and chronic pain.

Subd. 12. **Registered facilitator.** "Registered facilitator" means an individual registered with the director to provide services in preparation sessions and integration sessions and to supervise administration sessions.

Subd. 13. **Registered patient.** "Registered patient" means a Minnesota resident certified by a physician as having a qualifying medical condition and enrolled in the psilocybin therapeutic use program.

Subd. 14. **Registered supplier.** "Registered supplier" means an individual or entity licensed by the state to cultivate and manufacture psilocybin products with appropriate treatment dosing for facilitated use in administration sessions.

Subd. 15. **Testing facility.** "Testing facility" means the testing and inspection services at OCM to test for quality, potency, and microbial contaminants from supply centers through product sampling and facility inspections to monitor the supply chain of psilocybin to be used for treatment sessions and ensure supply centers are adhering to good manufacturing practices.

Subd. 16. **Treatment facility.** "Treatment facility" means a Minnesota health clinic or center that has been licensed by the state with staff trained to respond to medical emergencies

and safety equipment to monitor vitals for supervised administration sessions. To accommodate homebound patients, a treatment facility may be the homebound patient's residence with a registered facilitator and safety equipment to monitor vitals provided by the registered facilitator.

Sec. 3. **[342.86] PSILOCYBIN THERAPEUTIC USE PROGRAM.**

Subdivision 1. **Establishment.** The director of OCM must establish and administer a psilocybin therapeutic use program according to sections 342.85 to 342.98 in which individuals age 21 and older who have a qualifying medical condition and meet the other eligibility requirements may enroll in the program and are able to access and use psilocybin under the supervision of a registered facilitator at a treatment facility.

Subd. 2. **Rulemaking; director of OCM.** (a) The director must adopt rules to govern the operation of the program. The rules must at least:

(1) specify the qualifying medical conditions that an individual must be diagnosed with in order to enroll in the program, based upon emerging evidence from scientific research and clinical trials evaluated in the psychedelic medicine task force legislative report, including but not limited to posttraumatic stress disorder, depression, substance use disorders, anxiety, chronic pain, and other conditions where scientific evidence shows there may be therapeutic benefit;

(2) specify testing standards in collaboration with the program research institution and with guidance from existing rules developed in Oregon and Colorado for psilocybin mushroom testing, dosing, and manufacturing standards for psilocybin mushrooms to ensure safety, appropriate dosing for treatment sessions, and preventing diversion of all points along the psilocybin supply chain where whoever has custody of psilocybin is responsible for the security of the supply chain at the registered supply center or in transit between licensed premises, including providing adequate safeguards to protect against theft or diversion of psilocybin;

(3) establish a standardized questionnaire in collaboration with the program research institution for use by physicians to conduct health screenings of individuals seeking to enroll in the program;

(4) establish a standardized formal risk assessment tool in collaboration with the program research institution for use by physicians to evaluate identified contraindications in individuals seeking to enroll in the program;

(5) establish qualifications in collaboration with the program research institution to register with the director as a facilitator, following the completion of a certification program for psilocybin facilitators that are approved training programs used by Oregon and Colorado psilocybin programs that provide competency testing and supervision for facilitators; and

(6) establish qualifications to register with the director as a supplier in collaboration with the program research institution, including any additional subjects on which individuals must demonstrate competency in the required subjects and standards for cultivation. Registered suppliers must work with testing facilities to ensure appropriate quality and dosing of psilocybin prior to releasing to registered facilitators or patients for treatment.

(b) The director must consult with the advisory committee and the program research institution in adopting rules under this subdivision.

(c) Rules for which notice is published in the State Register before January 1, 2028, may be adopted using the expedited rulemaking process in section 14.389. The notice of the proposed rule for the items in paragraph (a) must be published in the State Register no later than July 1, 2027.

Subd. 3. **Evaluation and research.** (a) The director must collect from registered patients de-identified data including, but not limited to, the frequency with which registered patients use psilocybin in administration sessions, the qualifying medical conditions for which psilocybin is used, outcomes from psilocybin use experienced by registered patients, and adverse effects of psilocybin use experienced by registered patients, as well as any changes to utilization of other health care, social services, or government funded programs. Registered patients and registered facilitators must provide data to the director in a form and manner specified by the director. The director must use data collected under this paragraph to evaluate the program and, in consultation with the advisory committee and in collaboration with the program research institution, develop recommendations to improve the program. The program may consult and partner with federal health and research institutions, including but not limited to efforts that promote confidentiality protections, applications for funding, and collaboration on national research efforts related to psilocybin therapy.

(b) The director may support research that investigates novel therapeutic uses of psilocybin and psilocin. In determining whether to support research initiatives, the director must use the content from the report and recommendations of the task force authorized under Laws 2023, chapter 70, article 4, section 99, so as not to duplicate efforts already covered by the task force, as the state has already invested in ways to implement these

recommendations and can be used as a guide for expanding research and improving the proposed psilocybin pilot program.

Sec. 4. **[342.87] ELIGIBILITY AND ENROLLMENT IN PROGRAM.**

Subdivision 1. **Registration system.** The director must administer a secure registration system to track patients enrolled in the program while protecting their privacy.

Subd. 2. **Eligibility for enrollment.** (a) To enroll in the program, an individual must:

(1) be 21 years of age or older;

(2) submit to the director a written certification from a physician dated within 90 days of submission and verifying the individual's diagnosis with a qualifying medical condition;

(3) submit to the director a written certification or certifications from one or more physicians dated within 90 days of submission and verifying either:

(i) that the detailed health screening conducted according to subdivision 3 did not identify contraindications to the individual's use of psilocybin; or

(ii) that the detailed health screening identified contraindications to the individual's use of psilocybin but a physician conducted a further evaluation using a formal risk assessment tool and determined the individual's identified contraindications should not preclude the individual from using psilocybin; and

(4) submit an application to the director in a form and manner specified by the director.

(b) Individuals may apply for enrollment in the program beginning July 1, 2028.

Subd. 3. **Health screening; evaluation.** An individual who wishes to enroll in the program must have a detailed health screening performed by a physician to identify whether the individual has a qualifying medical condition and if any significant physical or mental health conditions or medications that are contraindications to the use of psilocybin. Contraindicated conditions may include but are not limited to cardiovascular disease, psychosis, and bipolar disorders. Contraindicated medications include but are not limited to lithium, monoamine oxidase inhibitors (MAOIs), tramadol, and amphetamine stimulants. If the physician determines in the screening that the individual has one or more contraindications to the use of psilocybin, the individual must have the contraindication further evaluated by a physician using a formal risk assessment tool. An individual who has an additional evaluation performed may proceed with an application under subdivision 2 only if the physician performing the additional evaluation determines the individual's identified contraindications should not preclude the individual from using psilocybin.

Subd. 4. **Informed consent for program.** Upon receiving the individual's complete application and certifications required under subdivision 2, the director must provide the individual with information including, but not limited to, the nature of psilocybin use for therapeutic purposes, potential adverse effects of psilocybin use, possible interactions between psilocybin and other commonly used drugs, and legal risks associated with the program, along with a document, to be signed and returned by the individual, that the individual has read and understood the information provided and wishes to enroll in the program. An individual who wishes to proceed with the individual's application must sign and date the informed consent form and return it to the director. This is separate from the informed consent signed between a registered facilitator and the patient for consent to treatment.

Subd. 5. **Enrollment.** The director must approve or deny the individual's application within 60 days after receiving the individual's informed consent form under subdivision 4. Upon approval of an individual's application and receipt of the enrollment fee required under section 342.97, the director must register the individual in the program and issue the individual a card that permits the registered patient to access psilocybin with a registered facilitator at a treatment facility.

Subd. 6. **Renewal.** (a) A registered patient's registration is valid for 12 months from the date of issuance. A registered patient who wishes to renew the registration must, at least 60 days before the registration expires, submit an application for registration renewal; written certifications that meet the requirements in subdivision 2, paragraph (a), clauses (2) and (3); and the fee required under section 342.97. The director must approve or deny a registered patient's renewal application within 60 days after receiving the complete application and written certifications.

(b) A registered patient whose registration expired less than 31 days from the date of expiration may renew the registration under paragraph (a). A registered patient whose registration expired 31 or more days past the date of expiration must apply for enrollment according to subdivision 2.

(c) A registered patient who has not received treatment during the first 12 months after being registered in the program shall be removed from the program due to nonparticipation in order to allow for other patients to register for the program, given the cap of patients to be treated during the pilot to be limited to 1,000.

Subd. 7. **Permitted acts.** (a) Subject to section 342.91, a registered patient is permitted to:

(1) designate a registered facilitator; and

(2) consume the recommended amount at a treatment facility with an approved facilitator according to the recommended dosing limit.

(b) Subject to section 342.91, a registered supplier and testing facility registered with the director is permitted to cultivate and possess psilocybin, provided the cultivation and testing is performed according to section 342.88 and the total amount possessed does not exceed the limit designed by the program.

(c) Subject to section 342.91, a registered facilitator is permitted, according to section 342.89, to obtain psilocybin from a registered supplier, transport psilocybin to the treatment facility, provide services to registered patients in preparation sessions and integration sessions, and to administer psilocybin and supervise administration sessions of registered patients.

(d) No civil or criminal state penalty shall be imposed on:

(1) a registered patient solely for engaging in an act listed in paragraph (a);

(2) a registered supplier and testing facility solely for engaging in an act listed in paragraph (b); or

(3) a registered facilitator solely for engaging in an act listed in paragraph (c).

This does not preclude any individual from clause (1), (2), or (3) from being held civilly or criminally liable for other actions during the course of their participation in the program from penalties under either state or federal law.

Subd. 8. **Program initiation.** The director must approve an initial program structured to include:

(1) between 20 to 50 registered facilitators who are currently licensed according to section 342.94, subdivision 2, paragraph (b), from a state health licensing board, who will receive additional training as psilocybin facilitators from a certificate training program that have been approved by programs for Oregon and Colorado;

(2) at least three testing facilities;

(3) no more than 1,000 patients with qualifying medical conditions registered and that receive treatment during their first year being registered in the program; and

(4) that the program shall run for three years once initiated after supply centers are established and contain supply that is ready for the program, at least five registered facilitators

have obtained their facilitator license from an approved program, and at least one patient has registered for the program and identified a facilitator to receive treatment from.

Subd. 9. **Program evaluation.** The director, in consultation with the advisory committee and the program research institution, must evaluate the program at the end of the three-year period, and provide a report to the legislature with recommendations for program next steps no later than December 1, 2031.

Sec. 5. **[342.88] CULTIVATION.**

Subdivision 1. **Cultivation authorized.** (a) A registered patient and registered facilitator may compensate a registered supplier who cultivates psilocybin for the program at a registered facility. Compensating a registered supplier for cultivation under this paragraph does not constitute the sale or commercial distribution of psilocybin.

(b) Before cultivating psilocybin for the program, a registered supplier must register with the director.

(c) A registered supplier must:

(1) cultivate psilocybin only for licensed treatment facilities, registered facilitators, and their registered patients in an amount that does not exceed the cultivation limit as established by the director of OCM; and

(2) not cultivate psilocybin in an amount that exceeds the cultivation limit provided under their license as designated by the director.

Subd. 2. **Secure location.** Cultivation by a registered supplier must take place at an approved location in an enclosed locked space that is not accessible to the public or by individuals under age 21 and contains on-site testing facilities for quality and potency testing.

Sec. 6. **[342.89] LOCATION AND FACILITATOR; ADMINISTRATION SESSIONS.**

Subdivision 1. **Location.** A registered patient may use psilocybin in an administration session only:

(1) at an approved private residence, including the curtilage or yard of the residence, unless the property owner prohibits the use of psilocybin on the property; or

(2) at a licensed treatment facility, unless the property owner, if the clinic is being rented, prohibits the use of psilocybin on the property.

Subd. 2. **Registered facilitator.** A registered facilitator must be physically present with a registered patient during an administration session to supervise the registered patient's use

of psilocybin and to contact emergency services if necessary during the administration session. As a condition of supervising an administration session for a registered patient, a registered facilitator may require the registered patient to also participate in a preparation session and an integration session with the registered facilitator. A registered facilitator may charge a reasonable fee for the registered facilitator's services.

Subd. 3. **Informed consent for treatment.** (a) Before a registered facilitator supervises a registered patient's administration session, the registered facilitator must provide the registered patient with information including, but not limited to, the nature of psilocybin use for therapeutic purposes, what to expect in an administration session, potential adverse effects of psilocybin use, and possible interactions between psilocybin and other commonly used drugs. Registered patients must also be allowed to opt in for consent to data collection for program monitoring. This is separate from the informed consent for the program.

(b) A registered patient who wishes to proceed with an administration session must sign and date a document stating that the patient has been informed of and understands the information provided according to paragraph (a). Registered facilitators must maintain the signed informed consent documents for two years after receipt.

Subd. 4. **Chain of custody for psilocybin and psilocin.** Before a registered patient's administration session, a registered facilitator or registered patient must procure the recommended dose of psilocybin from a registered supplier. The director must establish a track and trace system to scan when the dose is picked up from the supplier, and when it is administered to the patient to ensure the same product is used for treatment after picking up from supplier with tamper-proof packaging. At the time of exchange between a registered supplier and a registered facilitator or registered patient, both the registered supplier and registered facilitator or registered patient must attest to the exchange in a form and manner specified by the director, and which must include, at minimum, the specific amount of psilocybin exchanged and a tracking number for that dose. Prior to an administration session, a registered facilitator and registered patient must attest to the specific dose amount that will be used in the administration session in a form and manner specified by the director by scanning and confirming the tracking number that was picked up prior to administration. Psilocybin supply can only be exchanged after a patient and facilitator have scheduled an administration session.

Sec. 7. **[342.90] REGISTERED FACILITATOR.**

Subdivision 1. **Registration required; qualifications.** An individual must register with the director as a facilitator in order to supervise administration sessions for registered patients

and to provide registered patients with services in preparation sessions and integration sessions. In order to register as a facilitator, an individual must:

(1) be 21 years of age or older;

(2) possess a license as a mental health professional as defined in section 245I.02, subdivision 27; and

(3) demonstrate competency, in a manner determined by the director and in collaboration with the program research institution, on facilitator ethics; the safe use of psilocybin; duties of a facilitator during preparation sessions, administration sessions, and integration sessions; and other topics as determined by the director and the program research institution.

An individual who holds a license, registration, or certification from a health-related licensing board as defined in section 214.01, subdivision 2; from the Office of Emergency Medical Services; or from the commissioner of health authorizing the individual to practice a health-related occupation may also serve as a registered facilitator.

Subd. 2. **Application for registration; registration renewal.** (a) An individual who wishes to register as a facilitator must apply to the director in a form and manner specified by the director.

(b) A registration issued under this section is valid for 12 months from the date of issuance. An individual who wishes to renew the individual's registration must apply for registration renewal, in a form and manner specified by the director, at least 60 days before the individual's registration expires. In evaluating an application for registration renewal, the director must consider any complaints reported to the director under subdivision 3 and may decline to renew an individual's registration if the director determines, based on complaints received or other evidence, that the individual did not perform the duties of a facilitator in a safe or ethical manner. The director must approve or deny a registered facilitator's renewal application within 60 days after receiving the facilitator's complete application.

(c) A registered facilitator whose registration expired less than 31 days ago may renew the registration under paragraph (b). A registered facilitator whose registration expired 31 or more days ago must apply for registration according to paragraph (a), except the director must consider any complaints reported to the director under subdivision 3 and may decline to register the individual if the director determines, based on complaints received or other evidence, that the individual did not perform the duties of a facilitator in a safe or ethical manner.

(d) Individuals may apply for registration as a facilitator beginning July 1, 2028.

Subd. 3. **Complaints.** The director must accept complaints from registered patients and other interested individuals regarding a registered facilitator's failure to supervise an administration session in a safe or ethical manner or failure to provide services in a preparation session or an integration session in a safe or ethical manner.

Subd. 4. **List of registered facilitators.** The director must post on the Office of Cannabis Management website the names of and contact information for registered facilitators.

Sec. 8. **[342.91] LIMITATIONS.**

Nothing in sections 342.85 to 342.98 permits an individual to:

(1) participate in the program if the individual is under 21 years of age;

(2) sell psilocybin to an individual or engage in the distribution of psilocybin to anyone not registered in the program;

(3) establish a treatment facility on the grounds of a public school, as defined in section 120A.05, subdivisions 9, 11, and 13, or a charter school governed by chapter 124E, including all owned, rented, or leased facilities and all vehicles that a school district owns, leases, rents, contracts for, or controls;

(4) establish a treatment facility in a state correctional facility;

(5) if the individual is a registered facilitator, provide psilocybin to an individual who is not a registered patient or supervise the administration session of an individual who is not a registered patient; or

(6) if the individual is a registered supplier, cultivate psilocybin not intended for the program for registered patients.

Sec. 9. **[342.92] CRIMINAL AND CIVIL PROTECTIONS.**

Subdivision 1. **Forfeiture.** Psilocybin cultivated or obtained under sections 342.85 to 342.98 and associated property are not subject to forfeiture under sections 609.531 to 609.5316.

Subd. 2. **Protections for public employees.** Notwithstanding any law to the contrary, the director, the governor of Minnesota, or an employee of any state agency may not be held civilly or criminally liable for any injury, loss of property, personal injury, or death caused by any act or omission while acting within the scope of their office or employment under sections 342.85 to 342.98.

Subd. 3. **Search warrant.** Federal, state, and local law enforcement authorities are prohibited from accessing the patient registry under sections 342.85 to 342.98 except when acting pursuant to a valid search warrant.

Subd. 4. **Evidence in criminal proceeding.** No information contained in a report, document, or registry or obtained from a patient or facilitator or physician under sections 342.85 to 342.98 may be admitted as evidence in a criminal proceeding as evidence of criminal activity unless independently obtained or in connection with a proceeding involving a violation of sections 342.85 to 342.98. Any person who violates this subdivision is guilty of a gross misdemeanor.

Subd. 5. **Possession of registry card or application.** The possession of a registry card or application for enrollment in the program by an individual entitled to possess a registry card or apply for enrollment in the program does not constitute probable cause or reasonable suspicion, and shall not be used to support a search of the person or property of the individual possessing the registry card or application, or otherwise subject the person or property of the individual to inspection by any governmental agency.

Subd. 6. **Employment.** An employer must not discriminate against a registered patient, registered supplier, or registered facilitator in hiring, termination, or any term or condition of employment, or otherwise penalize a registered patient, registered supplier, or registered facilitator based on the lawful cultivation, possession, transportation, provision of services in preparation sessions or integration sessions, supervision of administration sessions, or use of psilocybin under sections 342.85 to 342.98, unless:

(1) the employer's failure to act would violate federal law or regulations or would cause the employer to lose a monetary or licensing-related benefit under federal law or regulations; or

(2) the registered patient's use of psilocybin directly impacts the registered patient's job performance or safety requirements of the registered patient's job position.

Subd. 7. **Housing.** No landlord may refuse to lease to or evict a registered patient, registered supplier, or registered facilitator solely for lawfully engaging in the psilocybin program under sections 342.85 to 342.98, unless the landlord's failure to do so would violate federal law or regulations or would cause the landlord to lose a monetary or licensing-related benefit under federal law or regulations.

Subd. 8. **Education.** No school may refuse to enroll a registered patient or registered supplier or registered facilitator solely for lawfully engaging with their respective treatment or duties for the psilocybin program under sections 342.85 to 342.98, unless the school's

failure to do so would violate federal law or regulations or would cause the school to lose a monetary or licensing-related benefit under federal law or regulations.

Subd. 9. **Custody; visitation; parenting time.** A registered patient, registered supplier, or registered facilitator must not be denied custody of a minor child or visitation rights or parenting time with a minor child based solely on the registered patient's, registered supplier's, or registered facilitator's lawful cultivation, possession, transportation, provision of services in preparation sessions or integration sessions, supervision of administration sessions, or use of psilocybin under sections 342.85 to 342.98, unless the registered patient's, designated behavior creates an unreasonable danger to the safety of the minor as demonstrated by clear and convincing evidence.

Subd. 10. **Action for damages.** In addition to any other remedy provided by law, a registered patient, registered supplier, or registered facilitator who is injured by a violation of subdivision 6, 7, 8, or 9 may bring an action for damages against a person who violates subdivision 6, 7, 8, or 9. A person who violates subdivision 6, 7, 8, or 9 is liable to the registered patient, registered supplier, or registered facilitator injured by the violation for the greater of the registered patient's, registered supplier's, or registered facilitator's actual damages or a civil penalty of $100, plus reasonable attorney fees.

Sec. 10. **[342.93] VIOLATIONS.**

In addition to any other applicable penalty in law, a registered patient, registered supplier, or registered facilitator who intentionally sells or otherwise transfers psilocybin to a person other than a registered patient is guilty of a felony punishable by imprisonment for not more than two years or by payment of a fine of not more than $3,000, or both.

Sec. 11. **[342.94] PROTECTIONS FOR PHYSICIANS AND REGISTERED FACILITATORS.**

Subdivision 1. **Physicians.** The Board of Medical Practice must not impose civil or disciplinary penalties on, or limit or condition the practice of, a physician solely for certifying that an individual has a diagnosis of a qualifying medical condition according to section 342.87, subdivision 2, or performing health screenings or additional evaluations according to section 342.87, subdivision 3.

Subd. 2. **Registered facilitators.** (a) A health-related licensing board; the Office of Emergency Medical Services; or the commissioner of health must not impose civil or disciplinary penalties on, or limit or condition the practice of, a registered facilitator who also holds a license, registration, or certification from the health-related licensing board;

Office of Emergency Medical Services; or commissioner solely for obtaining and transporting psilocybin for registered patients, providing services to registered patients in preparation sessions and integration sessions, and administering psilocybin and supervising administration sessions of registered patients, provided the services are provided or supervision is performed according to sections 342.85 to 342.98. No existing disciplinary procedures for complaints to the health-related licensing boards will be changed.

(b) For the purposes of paragraph (a), the health-related licensing boards include the Board of Medical Practice, Board of Nursing, Board of Psychology, Board of Social Work, Board of Marriage and Family Therapy, and Board of Behavioral Health and Therapy.

Sec. 12. **[342.95] PUBLIC EDUCATION AND HARM REDUCTION.**

Subdivision 1. **Public education program.** The director, in collaboration with the program research institution, must develop and implement a public education program that makes information available to the public on the responsible use of psilocybin, potential risks of using psilocybin, harm reduction strategies related to psilocybin use, and mental health resources related to psilocybin use. A website must be developed and launched with educational content determined by the research program and advisory committee no later than January 1, 2028.

Subd. 2. **Training programs for first responders.** The director in collaboration with the program research institution must develop and offer training programs for emergency medical responders, ambulance service personnel, peace officers, and other first responders on best practices for handling situations involving the use of psilocybin. The training programs must be developed and offered in coordination with the Office of Emergency Medical Services, the Peace Officer Standards and Training Board, the Minnesota State Patrol, and local law enforcement agencies. Trainings must be developed and available for first responders no later than January 1, 2028.

Sec. 13. **[342.96] DATA PRACTICES; ACCESS TO AND USE OF DATA.**

(a) Except for the data specified in section 342.90, subdivision 4, data submitted to the director under section 342.87, 342.88, or 342.90:

(1) is private data on individuals as defined in section 13.02, subdivision 12, or nonpublic data as defined in section 13.02, subdivision 9; and

(2) may only be used to comply with chapter 13, to comply with a request from the legislative auditor or state auditors in the performance of official duties, and for purposes specified in sections 342.85 to 342.98.

(b) The data specified in paragraph (a) must not be combined or linked in any manner with any other list, data set, or database, and must not be shared with any federal agency, federal department, or federal entity unless specifically ordered by a state or federal court, or as part of a federally approved research project for monitoring of the program where a certificate of confidentiality is obtained by a federal agency to protect the identities of the program registrants.

Sec. 14. **[342.97] FEES.**

(a) The director must collect an annual fee of $..... from each patient whose enrollment application or renewal application is approved by the director.

(b) Notwithstanding paragraph (a), if the patient provides evidence to the director of receiving Social Security disability insurance, Supplemental Security Income, or veterans disability or railroad disability payments, or of being enrolled in medical assistance or MinnesotaCare, the director must collect an annual fee of $..... from the patient after approving the patient's enrollment application or renewal application.

(c) Fees collected under this section must be deposited in the state treasury and credited to the state government special revenue fund. The director may request appropriations of fee revenue to distribute as grants to fund Minnesota-based research exploring the effectiveness of psilocybin for additional conditions, or to provide funding to offset the cost of psilocybin therapy for low-income patients registered in the program demonstrated by evidence submitted from paragraph (b).

Sec. 15. **[342.98] PSYCHEDELIC MEDICINE ADVISORY COMMITTEE.**

Subdivision 1. **Establishment.** The director must establish a Psychedelic Medicine Advisory Committee to advise the director on the operation of the psilocybin therapeutic use program under sections 342.85 to 342.98.

Subd. 2. **Membership.** (a) The advisory committee shall consist of:

(1) ... members with knowledge or expertise regarding the therapeutic use of psilocybin and other psychedelic medicines or regarding integration resources associated with the use of psilocybin, as well as cultivation and testing of psilocybin. The director must make

recommendations to the governor for members appointed under this clause, and the governor must appoint members under this clause; and

(2) one member representing Tribal Nations in the state, appointed by the Indian Affairs Council.

(b) Initial appointments must be made to the advisory committee by November 1, 2026.

Subd. 3. **Chairperson.** Members of the advisory committee must elect a chairperson from among the advisory committee's members.

Subd. 4. **Terms; compensation; removal of members.** The advisory committee is governed by section 15.059, except the advisory committee does not expire.

Subd. 5. **Meetings.** The advisory committee must meet at least four times per year or at the call of the chairperson. The initial meeting of the advisory committee must occur by December 1, 2026, and must be called by the director.

Subd. 6. **Staff support; office space; equipment.** The director must provide the advisory committee with staff support, office space, and access to office equipment and services.

Sec. 16. **APPROPRIATION.**

$..... in fiscal year 2027 is appropriated from the general fund to the director of the Office of Cannabis Management for purposes of Minnesota Statutes, sections 342.85 to 342.98."

Amend the title accordingly