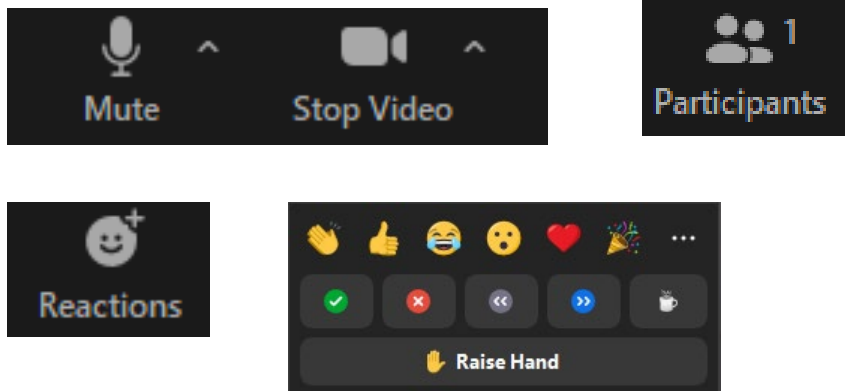




Psychedelic Medicine Task Force

Welcome Psychedelic Medicine Task Force members!

Please use this time to test your Zoom meeting controls located at the bottom of the screen:



Access **Mural** via the link sent to you in your meeting invitation. Only members have access to this shared workspace. Once on the site, minimize the screen for later use during the meeting.

MDH staff

- **Kari Gloppen**, Epidemiologist
Supervisor, Injury and Violence
Prevention Section
- **Dr. Caroline Johnson**, Psychedelic
Medicine Scientific Researcher

Task Force leadership

- Dr. Jessica Nielson, Chair
- Bennett Hartz, Vice-Chair
- Paula DeSanto, Work Group Chair

MAD staff

- Jessica Burke, Senior Management
Consultant
- Nick Kor, Senior Management Consultant
- Stacy Sjogren, Senior Management
Consultant

Welcome meeting observers

Thank you for your interest in the work of the
Psychedelic Medicine Task Force!

This meeting will not be recorded. **Minutes will be posted on the task force's website** along with other materials for this meeting:

<https://www.health.state.mn.us/people/psychmed/index.html>

health.psychedelictmmedicine@state.mn.us

The Psychedelic Medicine Task Force was established to advise the legislature on the legal, medical, and policy issues associated with the legalization of psychedelic medicine in the state. For purposes of this work, “psychedelic medicine” means MDMA, psilocybin, and LSD.

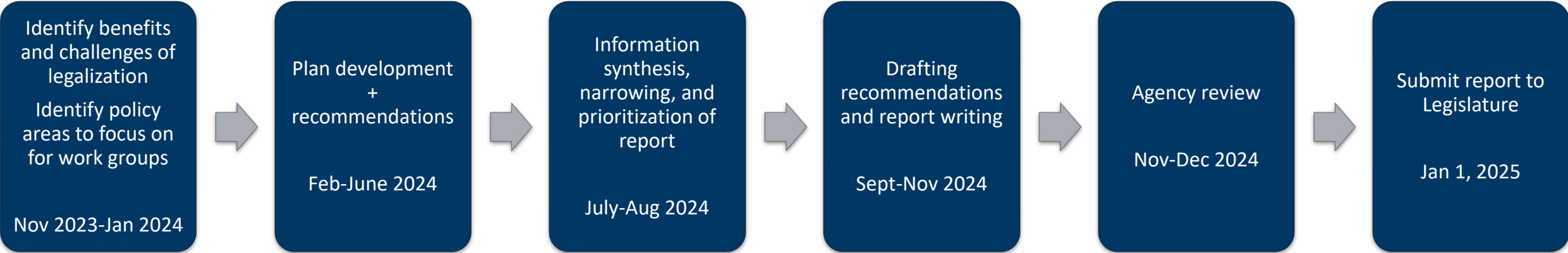
Scientific Research

1. Survey existing studies in the scientific literature on the therapeutic **efficacy** of psychedelic medicine in the treatment of mental health conditions, including depression, anxiety, post-traumatic stress disorder, bipolar disorder, and **any other mental health conditions and medical conditions** for which a psychedelic medicine may provide an **effective** treatment option.
2. Compare the efficacy of psychedelic medicine in treating the conditions described [above] with the efficacy of treatments currently used for these conditions.

Develop a comprehensive plan that covers:

1. statutory changes necessary for the legalization of psychedelic medicine.
2. state and local regulation of psychedelic medicine
3. federal law, policy, and regulation of psychedelic medicine, with a focus on retaining state autonomy to act without conflicting with federal law, including methods to resolve conflicts.
 - Such as seeking an administrative exemption to the federal Controlled Substances Act under United States Code, title 21, section 822(d), and Code of Federal Regulations, title 21, part 1307.03; seeking a judicially created exemption to the federal Controlled Substances Act; petitioning the United States Attorney General to establish a research program under United States Code, title 21, section 872(e); using the Food and Drug Administration's expanded access program; and using authority under the federal Right to Try Act
4. Education of the public on recommendations made to the legislature and others about necessary and appropriate actions related to the legalization of psychedelic medicine in the state.

Work cadence



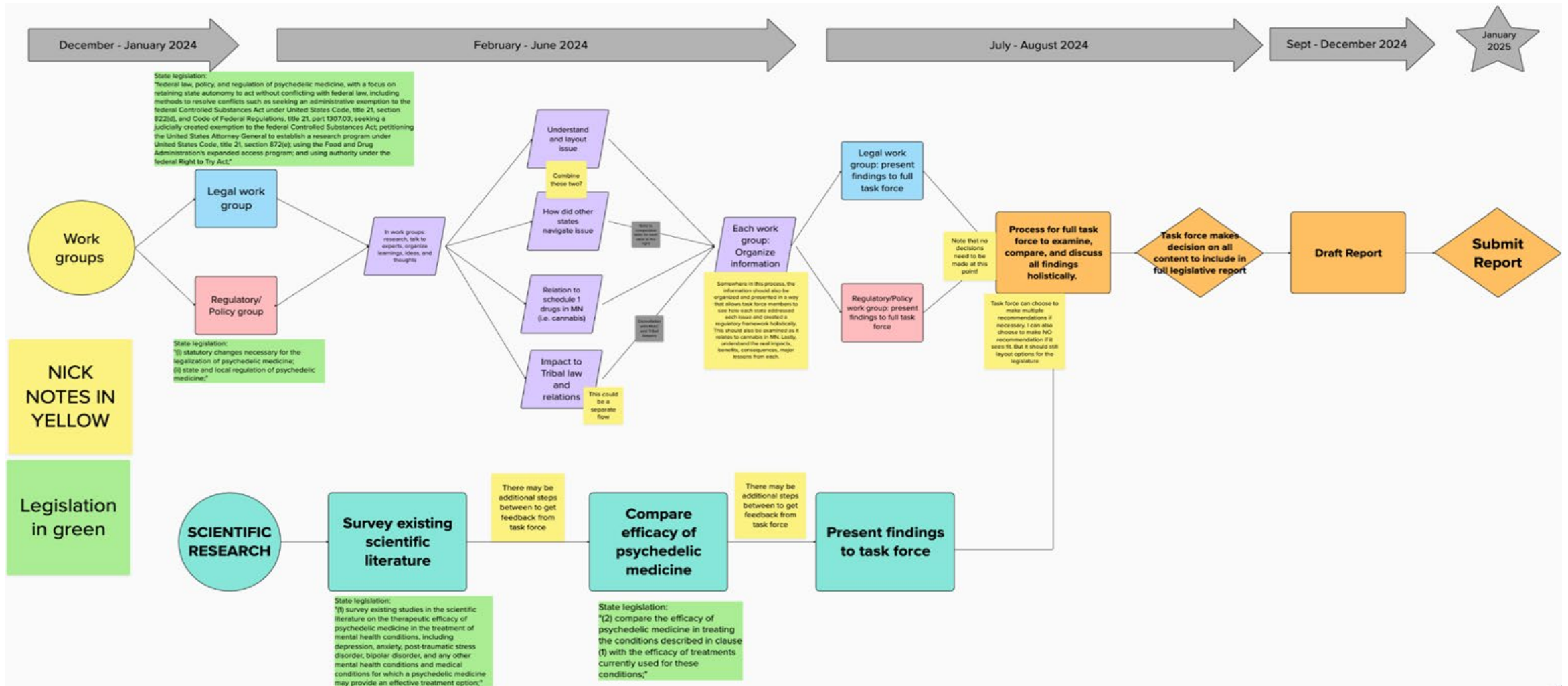
Today's agenda

- Approve September meeting summary (draft)
- Share member-collected feedback
- Decision preparation
- Voting on revised recommendations
- Task Force report development update

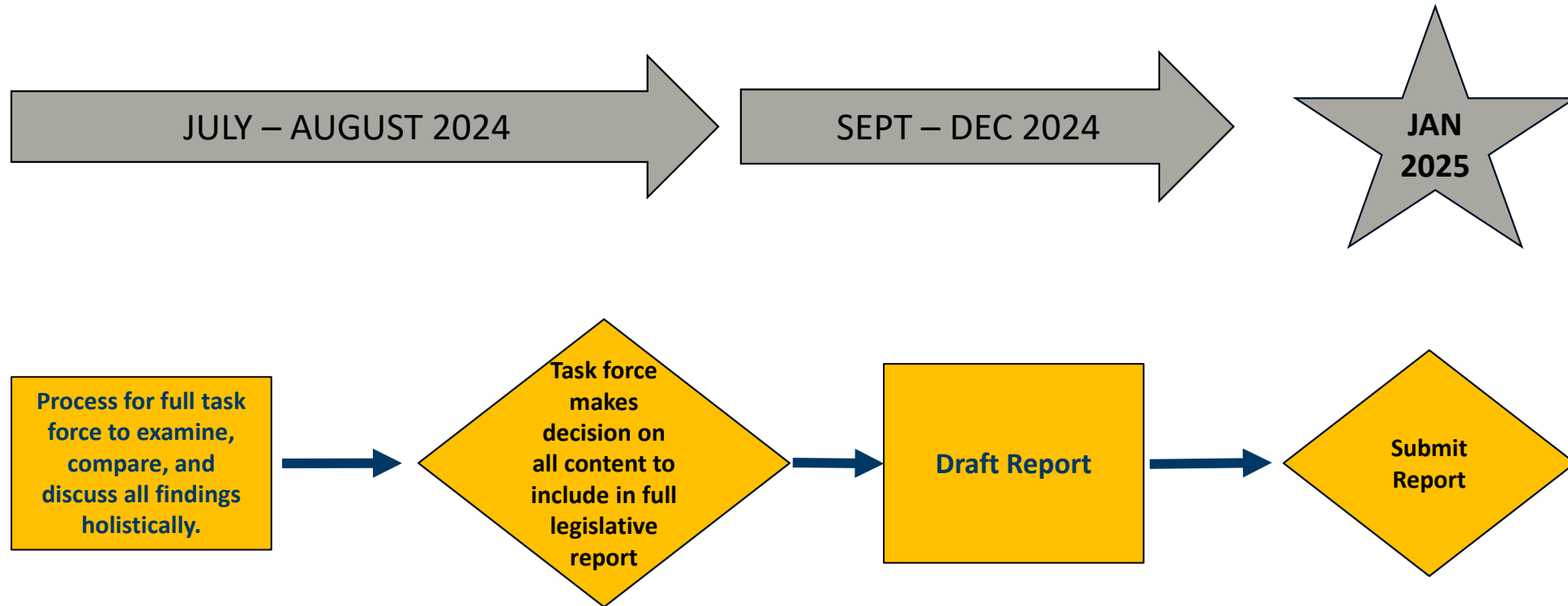
Task Force Status Update – October 2024

Dr. Jessica Nielson | Task Force Chair

Timeline: decision flow chart



Timeline: decision flow chart



Progress towards legislative duties – scientific research

- Scientific Research – Caroline Johnson, PhD
 - Psychedelic medicines perform as well or slightly better than current options for treatment for mental health conditions in placebo-controlled clinical trials, however psychedelic medicine trials have been too small to compare to larger trials (effectiveness) and are difficult to blind for comparing to placebo controls (efficacy). More trials are warranted.
 - MDMA shows promise for PTSD, with other studies looking at alcohol abuse and social anxiety
 - Psilocybin shows promise for depression and alcohol use disorder, with other studies looking at tobacco abuse, PTSD, cluster headaches, OCD, and palliative care
 - LSD shows promise for anxiety disorders, with other studies looking at alcohol abuse, cluster headaches, depression, palliative care

Progress towards legislative duties – resolving federal conflicts

RECS	Federally Legal?	Ways to resolve federal conflicts?	How to implement?	Public safety
Removing criminal penalties	N/A	Not enforcing federal controlled substances act (CSA), invoke 10th amendment/anticommandeering act	Change state CSA, allocate and disseminate resources for harm reduction	Ongoing education and training, community accountability
More research trials	Yes	N/A	Create funding mechanisms, advisory panels, and review boards	Ongoing education and training for researchers and interested trial participants and their communities.
State-regulated clinical program	No	Request exemptions to CSA, use Right to Try or Expanded Access, federal research partnerships, invoke 10th amendment	Develop rules and regulations around medicine sourcing, facilitation, safety screening and monitoring, training, etc.	Education and training for facilitators, cultivators, interested clients/patients
Adult-regulated use	No	Request exemptions to CSA, invoke 10th amendment, don't violate other federal laws (e.g. interstate commerce)	Allow and regulate a legal industry with psilocybin-mushrooms	Regulation, education and training across the state, like we do for cannabis and alcohol

Progress towards legislative duties

- Developing a comprehensive plan for
 - **Statutory changes and regulations on the proposed recommendations** – related to the MN controlled substances act (Ch. 152), examining & licensing boards (Ch. 214), data collection and privacy (Ch. 13), *Office of Cannabis Management (Ch. 342)*, Right To Try Act (151.375), statutes relating to shifting authority of agencies (Ch. 15), Farm Product Dealers (Ch. 27), as examples (more in the report).
 - **Public education** – psychedelics 101; history of Indigenous uses and ongoing consultation; status of the science and research; legal status across the state, the country, and internationally; training for first responders and clinicians on psychedelic crisis intervention; education for parents and teachers; youth outreach and education; religious uses and churches; best practices related to using and supporting communities using psychedelic medicines (and psychedelic adjacent communities); intersecting government groups, media relations, as examples (more listed in the report).

What's happening in other states?

- New Mexico has allowed home cultivation for personal use of psilocybin mushrooms since 2005.
- Local deprioritization (remains illegal, but policies allow certain activities) - many cities around the US have passed these, mostly for naturally grown psychedelics (aka entheogens) in CA, WA, MA, CO, ME, MN (Minneapolis), MI and DC
- Oregon passed measure 109 (ballot initiative) in 2020, creating a psilocybin service industry that launched summer 2023. They also passed measure 110 (ballot initiative) to decriminalize all drug use and possession, which was repealed (legislature approved) in 2024 due to the fentanyl/opioid crisis.
- Colorado passed the Natural Medicine Health Act (prop 122) in 2022, creating treatment centers and allowing for community/peer support and decriminalized use and possession, with services set to launch in 2025.
- Utah passed SB0266 in 2024 (legislature approved) that allows "breakthrough therapies" to be used in two of their state-wide hospital systems, time limited program expires on July 1, 2027.
- *Massachusetts to vote on Question 4 to legalize and regulate natural psychedelics in November 2024*

Noteworthy updates that impact our work

- Department of Health and Human Services (HHS) modified the way they consider "accepted medical use" when making rescheduling recommendations to the Drug Enforcement Administration (DEA) - *recommended rescheduling cannabis from schedule I to schedule III due to accepted medical use across many states and safety profile compared to alcohol and other prescription drugs; intentional data collection from states will be important for rescheduling considerations with psychedelic medicines.*
- FDA issued a complete response letter (CRL) to Lykos and did not approve MDMA assisted therapy for PTSD. They are requesting an additional clinical trial before they will consider approving it again. *Other psychedelic pharma companies are learning from this setback and conducting their trials accordingly (e.g. psilocybin trials for depression, LSD trials for anxiety).*
- The Chevron Accord was overturned by the Supreme Court (reducing administrative power of federal agencies), which *may* enable more successful litigation of cases with the DEA around Right to Try (RTT) or requests for exemptions to the controlled substance act (CSA) - *first post-Chevron RTT appeal in the 9th Circuit Court is pending a decision from August 2024 hearing (AIMS vs DEA).*

Final voting process review and discussion

Initial voting process review

- As discussed in the August and September task force meetings, *all* task force members, regardless of meeting attendance, will be able to vote. Jess will collect votes via email for absent members.
- Members can vote yes, no, or abstain.

Recommendation voting

Final voting on recommendations

- We will be voting via roll call today. There are two recommendations. Please be ready to unmute and cast your vote to help us move through everyone efficiently.
- Depending on when absent members vote, we may not know whether a recommendation passed by a supermajority or not at the meeting. Jess will report to the task force when all member votes have been recorded if that happens.
- There may be additional recommendations that come up in the report-writing process. If that happens, the task force will have an opportunity to vote on them.

Final vote

Revised recommendation 1

Original recommendation: The Task Force recommends the Minnesota legislature remove criminal penalties for the possession of personal use quantities of mushrooms containing psilocybin, synthetic psilocybin, MDMA, and LSD.

Revised recommendation 1: The Task Force recommends the Minnesota legislature remove criminal penalties for the possession of personal use quantities of mushrooms containing psilocybin.

Revised recommendation 2

Original recommendation: The Task Force recommends the Minnesota legislature remove criminal penalties for the non-commercial (without remuneration) cultivation and sharing of psilocybin-containing mushrooms.

Revised recommendation 2: The Task Force recommends the Minnesota legislature remove criminal penalties for the possession of personal use quantities and non-commercial (without remuneration) cultivation and sharing of psilocybin-containing mushrooms.

Report writing update

Dr. Caroline Johnson | Psychedelic Medicine Scientific Researcher

Report writing deadlines

When	September 27	October 8	October 18
What	First draft of each section due	Review deadline	Revision deadline
Who	Lead author/additional authors	Reviewer(s)	Lead author/additional authors

Task force report timeline

	October	November	December
At the meeting	Discuss the draft, discuss revised recommendations.	Discuss draft, edits, recommendations. Approve version to be submitted for review.	Discuss any returned edits.
Rest of month	Continue drafting and polishing report, prepare to submit for copyediting and accessibility by first week of November.	Submit report for review of formatting, accessibility. Continue polishing.	Make final edits.

Report development, legislative charge

- Does the report meet legislative charge?
 - Scientific
 - Legal
 - Regulatory
 - Policy

Report development, resources

- Do you need any additional information/data for your section? Who might you need it from?
- Do you have information/data to share?
- What is the best way to connect?

- Executive summary
 - How long?
 - How comprehensive?
- Report as a whole
 - How detailed?
 - How to best convey details?
 - How much to put in appendices?

- Appendix of personal anecdotes, experiences regarding psychedelic medicine
 - Members, their community members
- Paragraph or so finished by mid-October (15th/16th)

- Keep report concise
- Use plain language
- Other questions or comments?

- **Upcoming meetings**

- Second and fourth Thursdays of each month, 4:00-5:00 pm
- Members writing and reviewing recommendations can meet outside of work group meetings to work on their sections, as long as the number of meeting attendees is below quorum and no major decisions are made.

Next steps and adjournment

- **Opportunity for member feedback:** please leave your feedback in Mural.
- **Questions between meetings:** contact Jess Burke (jessica.burke@state.mn.us)
- **Next meeting:** Monday, November 4, 2024, 9:30 am – 12:30 pm