



TO: House Committee on Health Care

RE: House Bill 4040 - Provisions related to OHA's regulated psilocybin services program

Chair Nosse, Co-Chairs Diehl and Nelson, and Committee Members,

My name is Heidi Pendergast and I'm the Oregon Director of the Healing Advocacy Fund, a 501(c)3 non-profit organization that works to protect and expand safe, affordable state regulated access to psychedelic healing. We are supporting the inclusion of three items in HB 4040 to improve Oregon's Psilocybin Services Program:

- Section 40 - **Allowing reciprocity for trained and licensed psilocybin facilitators from other states.** Colorado is currently the only other state with a state regulated program, and their facilitator training matches and in some areas exceeds the training requirements of Oregon. Colorado also currently has reciprocity for trained and licensed Oregon facilitators and we are looking to match their reciprocity. *We are requesting the -16 amendment for this section, the current language requires OHA to approve these out of state programs which isn't needed (OHA approves the curriculum requirements, not the individual programs).*
- Section 41 - **Allowing the addition of the Oregon Occupational Therapy Licensing Board and the Oregon Board of Physical Therapy** to the current list of 7 named boards in HB 2387, a law passed in May of last year to allow healthcare providers to bring their skills to the psilocybin therapy program. This would allow providers who hold both a psilocybin facilitator license, and a license from one of those two boards to join the list of 7 and bring their skills to preparation and integration of psilocybin services.
- Section 42 - **Inclusion of a low-dose data point into SB 303 data collection requirements.** SB 303 is the data collection law for Oregon Psilocybin Services. The current law only requires averages and the lack of a low dose data point makes it impossible to get a clear understanding of the average macro dose. Dose amount is a critical piece of information to evaluate safety and potential for adverse events, and by separating out low dose data, we can get a better sense of the true average macro dose.

These changes will help to increase safety and strengthen the quality of psilocybin services for clients.

Sincerely,

Heidi Pendergast
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