

March 22, 2025

House Committee on Behavioral Health and Health Care  
900 Court Street NE  
Salem, Oregon 97301

**RE: HB 2387 - Oregon Psilocybin Program Improvement Bill**

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

Thank you for the opportunity to share my support for HB 2387, the Psilocybin Program Improvement bill. My name is Sam Georgi, and I am a Clinical Mental Health Counseling Intern and psilocybin services professional with experience in Oregon's legal psilocybin program since its inception. I am writing today to express my strong support for House Bill 2387, which makes critical improvements to Oregon's groundbreaking Psilocybin Services Program.

The passing of Measure 109 created the nation's first state-licensed psilocybin therapy program, providing access for individuals with mental health needs while implementing safeguards for clients, workers, and the community. Since the first services were delivered in May 2023, estimates indicate that more than 10,000 people have participated in the program.

Anecdotally, many individuals seek out psilocybin services for unresolved mental health challenges, including PTSD, depression, anxiety, and addiction. Many clients served are new to psilocybin and specifically seek a safe, supportive, and professional setting for their experience. As a clinical mental health counseling intern who also works in psilocybin services, I have witnessed firsthand the profound impact these services can have. Clients often describe renewed hope, emotional breakthroughs, and lasting improvements in their well-being—often from just one session.

The Oregon Psilocybin Services program maintains rigorous safety measures, including:

- Clients must be over 21 and consume psilocybin only in a state-licensed service center under the supervision of a trained facilitator.
- Clients must undergo a screening process to assess health history and ensure suitability for services.
- Service centers must be at least 1,000 feet from schools to protect public safety.
- Facilitators must report adverse events, with emergency services called in less than 0.12% of cases.

HB 2387 introduces necessary refinements to strengthen this system, including:

## **1. Licensure Protections for Healthcare Professionals**

Currently, licensed healthcare providers such as mental health professionals, nurses, and doctors cannot facilitate psilocybin services without risking their professional licensure. HB 2387

would create legal protections allowing these professionals to discuss psilocybin therapy with clients without fear of disciplinary action.

Without this protection, many clients are unable to consult their healthcare providers about whether psilocybin therapy is appropriate for them, increasing the risk of unintended adverse events. Legal protections will ensure that clients can make informed, safe decisions about their care.

## **2. Dual Licensure for Healthcare Professionals**

HB 2387 allows healthcare professionals who become licensed psilocybin facilitators to use their professional skills during preparation (pre-session) and integration (post-session). For example, a licensed therapist who is also a psilocybin facilitator could legally assist a client in processing their experience after a session, improving therapeutic outcomes.

This proposal does not change the non-directive nature of psilocybin administration, as defined by the Oregon Health Authority (OHA). Instead, it ensures that clients receive high-quality, professional support throughout their experience. I've seen firsthand the impact that quality integration has to inform positive outcomes with psilocybin use, even following sessions in which the participant initially did not realize any shift when processing the experience in an unsupported manner. To further the efficacy of integration through evidence based counseling approaches provided by licensed counselors would create a higher level of care and support positive outcomes for those who may otherwise struggle to integrate challenging sessions.

## **3. Representation on the Oregon Psilocybin Advisory Board**

Currently, the Psilocybin Advisory Board lacks representation from those working within the system. This gap leads to disconnects between agency rules and real-world experiences of service providers. HB 2387 adds two psilocybin service providers (one service center operator and one licensed facilitator) and a licensed behavioral health professional to the OPAB. This change will ensure practical, experience-driven policymaking that benefits clients, providers, and the community.

## **4. Improved Labeling for Psilocybin Products**

Psilocin is not currently required to be labeled on psilocybin products. Because psilocin is 40% more potent than psilocybin, this omission can lead to unintended dosing variations, creating unpredictability in clients' experiences.

HB 2387 requires accurate psilocin labeling and mandates that facilitators inform clients of potential potency differences before administration. This enhances informed consent and safety for all participants.

As a service center, we have stocked product from providers who label psilocin, allowing us to take an informed approach to safe and appropriate dosing. Requiring the labeling of psilocin content as an industry standard will create greater safety and predictability of outcomes.

Oregon has the opportunity to lead the nation in responsible, science-based mental health innovations through psilocybin therapy. HB 2387 ensures that Oregon's Psilocybin Services Program remains safe, accessible, and effective for those who need it most.

I urge you to support HB 2387 and help Oregon continue its leadership in this field.

Sincerely,

Samantha Georgi

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