

## **MPAB Committee Structure**

**Adopted: 12/12/25**

### **Patient Qualification & Safety Committee: Ian Dunn, Chair**

**Purpose:** ensure that psilocybin services in New Mexico are grounded in scientific evidence, appropriate safety standards, and clinically sound screening criteria.

#### **Responsibilities:**

1. Recommend to the Board the conditions or symptom clusters that may benefit from psilocybin services
2. Review and evaluate petitions for adding or modifying qualifying conditions or contraindications.
3. Recommend patient safety and exclusion criteria, including:
  - a. medical and psychiatric red-flag conditions
  - b. medication interaction concerns
  - c. stability requirements prior to facilitation

### **Dosage, Administration & Clinical Practice Committee: TBD**

**Purpose:** develop evidence-informed recommendations on psilocybin dosing, administration procedures, and facilitator training standards.

#### **Responsibilities:**

1. Recommend dosage ranges and administration protocols appropriate for medical psilocybin use, based on updated scientific literature.
2. Recommend therapeutic structure guidance, including preparation, duration, and environmental conditions and integration expectations.
3. Analyze current clinical research and data to define clear dosage parameters (including minimum effective doses and maximum safety limits) for various therapeutic or consumer applications.
4. Identify risk factors, contraindications, and side-effect profiles associated with specific dosage levels to ensure public safety and informed consent.
5. Establish a process for the periodic review of emerging scientific literature and real-world data to adjust dosage recommendations as the field evolves.

### **Education and Training Committee: Brenda Burgard, Chair**

**Purpose:** ensure New Mexico's psilocybin program includes clear scopes-of-work, training, and education standards for psilocybin practitioners.

1. Recommend standards for practitioner competencies.
2. Recommend required training and education.
3. Recommend supervision requirements and scope of practice.

### **Propagation Committee: Chris Peskuski, Chair**

**Purpose:** ensure that New Mexico's psilocybin production aligns with safety, quality, and testing standards.

#### **Responsibilities:**

1. Recommend best practices for psilocybin mushroom cultivation, harvesting, drying, storage, and contamination control standards
2. Recommend licensure criteria for producers, manufacturers, and laboratories.
3. Recommending to the full board rules on production, purity, potency, labeling, and packaging standards.
4. Monitor national and international research on product safety and testing innovations; recommend updates as needed.
5. Ensuring testing recommendations are as affordable as possible while requiring measures necessary for patient safety.

### **Equity, Access, and Cultural Considerations Committee: DezBaa' Chair**

**Purpose:** Ensure that New Mexico's medical psilocybin services system is accessible, culturally appropriate, and responsive to the needs of Indigenous rural, frontier, Hispanic, and underserved communities, and that program implementation promotes equity, inclusion, and culturally grounded care across all settings.

#### **Responsibilities:**

1. Recommend to the board policies to expand access to rural, frontier, and underserved areas New Mexico, including but not limited to telehealth-enabled screening and rural training.
2. Recommend anti-discrimination and anti-stigma policies within the psilocybin services system

3. Recommend policies that ensure culturally appropriate practices for Indigenous and Hispanic communities.
4. Recommend qualifications and process for determination for eligibility of financial assistance through the Patient Equity Fund.

**End of Life Care Committee: Larry Leeman, Chair**

**Purpose:** Ensure that psilocybin services for individuals experiencing serious illness, life limiting conditions, or end-of-life distress are delivered safely, ethically, and in accordance with best practices in palliative care, supportive care, and trauma-informed approaches. This committee will support the development of guidelines that promote dignity, comfort, cultural respect, and evidence-informed care for patients receiving psilocybin during advanced illness and end-of-life transitions

**Responsibilities:**

1. Recommend clinical and ethical guidance for psilocybin use in individuals experiencing serious illness or end-of-life distress.
2. Recommend safety criteria, screening considerations, and interdisciplinary coordination practices to end-of-life care, including collaboration with palliative care providers, hospice agencies, behavioral health clinicians, and spiritual/cultural support.
3. Recommend informed-consent requirements, advance-care-planning, and communication standards for patients and families receiving end-of-life psilocybin services
4. Recommend culturally appropriate trauma-informed, and dignity-centered care guidelines for end-of-life psilocybin services.

**Research and Continuous Improvement Committee: Dan Jennings, Chair**

**Purpose:** ensure that practitioner preparation, research activities, harm-reduction practices, and program evaluation for medical psilocybin services in New Mexico are grounded in scientific evidence, ethical standards, and continuous quality-improvement principals.

**Responsibilities:**

1. Recommend guidelines for research and data collection, including core data elements to be collected by practitioners and DOH, outcome-monitoring and adverse-event reporting standards, ethical research practices including considerations for tribal and

culturally specific communities, evaluation frameworks for monitoring safety, clinical outcomes, and population level trends.

2. Recommend harm-reduction and quality improvement practices,  
including: risk-screening frameworks and medication interaction guidance;  
emergency preparedness and crisis-response expectations, informed  
consent content and patient education materials, mechanisms for updating  
clinical, training, and safety standards as new evidence emerges.