



104TH GENERAL ASSEMBLY

State of Illinois

2025 and 2026

SB2772

Introduced 1/13/2026, by Sen. Rachel Ventura

SYNOPSIS AS INTRODUCED:

New Act

Creates the Illinois Psilocybin Advisory Board Act. Sets forth findings and defines terms. Establishes the Illinois Psilocybin Advisory Board within the Department of Financial and Professional Regulation for the purpose of advising and making recommendations to the Department regarding the provision of psilocybin and psilocybin services. Sets forth requirements for members of the Board. Provides that, within 3 months after the effective date of the Act, the Governor, the Senate President, the Speaker of the House, the Minority Leader of the House, and the Minority Leader of the Senate shall appoint certain individuals to the Board. Provides that, between January 1, 2027 and January 1, 2029, the Board shall meet at least once every 2 calendar months at a time and place determined by the chairperson or a majority of the voting members of the Board and that, after January 1, 2029, the Board shall meet at least once every calendar quarter. Provides that the Board shall perform certain duties, including publishing an annual report describing the Board's activities and making recommendations concerning (i) the safety and efficacy of psilocybin and other substances, (ii) potential requirements for providing psilocybin services to clients, (iii) a potential code of ethics and possible training requirements for facilitators, and (iv) public health considerations. Makes other changes. Effective immediately.

LRB104 16758 AAS 30166 b

1 AN ACT concerning health.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 1. Short title. This Act may be cited as the
5 Illinois Psilocybin Advisory Board Act.

6 Section 5. Findings. The General Assembly finds that:

7 (1) Providing access to mental health services for
8 veterans is vital.

9 (2) Emerging research supports the use of
10 psychedelics, such as psilocybin, combined with
11 psychotherapy to treat mental health conditions, including
12 treatment-resistant depression, anxiety, post-traumatic
13 stress disorder (PTSD), substance use disorder, and
14 end-of-life psychological distress.

15 (3) The United States Food and Drug Administration
16 has:

17 (A) determined that preliminary clinical evidence
18 indicates that psilocybin may demonstrate substantial
19 improvement over available therapies for
20 treatment-resistant depression; and

21 (B) granted a "Breakthrough Therapy" designation
22 for a treatment that uses psilocybin as a therapy for
23 treatment-resistant depression.

1 (4) Through the Illinois Breakthrough Therapies for
2 Veteran Suicide Prevention Program, Illinois has become a
3 leader in providing access to breakthrough treatments for
4 veterans, including psilocybin and MDMA-assisted therapy.

5 (5) Research conducted by domestic and international
6 medical institutions indicates that psilocybin is
7 efficacious and safe for the treatment of a variety of
8 mental health conditions, including, but not limited to,
9 addiction, depression, anxiety disorders, headache
10 disorders, and end-of-life psychological distress.

11 (6) In order to transition away from criminalization
12 models while protecting people who use or may use drugs
13 and reducing any negative environmental or cultural
14 impacts, it is necessary to review the full legal context
15 in which relevant changes to the law are made. It is also
16 necessary to incorporate evidence-based policy, consult
17 with experts, and maintain open discourse based in harm
18 reduction, reciprocity, and human rights during the
19 process of developing alternative regulatory systems.

20 Section 10. Definitions. In this Act:

21 "Administration session" means a structured session held
22 under the direct supervision of a licensed facilitator where a
23 client consumes and experiences the effects of a psilocybin
24 product.

25 "Board" means the Illinois Psilocybin Advisory Board

1 established under this Act.

2 "Client" means an individual who has received a referral
3 for psilocybin service and who consumes a psilocybin product
4 in an administration session in this State.

5 "Entheogen" or "entheogenic substance" means the following
6 substances in any form, regardless of whether the substance is
7 regulated under the federal Controlled Substances Act or the
8 Illinois Controlled Substances Act:

- 9 (1) psilocybin;
- 10 (2) psilocin;
- 11 (3) dimethyltryptamine;
- 12 (4) ibogaine, except ibogaine from iboga;
- 13 (5) mescaline, except mescaline from peyote;
- 14 (6) methylenedioxymethamphetamine (MDMA); and
- 15 (7) lysergic acid diethylamide (LSD).

16 "Facilitator" means an individual who facilitates the
17 provision of a psilocybin service in this State.

18 "Integration session" means a meeting between a client and
19 a facilitator that occurs after the client completes an
20 administration session.

21 "Post-administration evaluation session" means a meeting
22 between a client and a facilitator that occurs immediately
23 following the conclusion of an administration session and
24 prior to the client's release from the service center.

25 "Preparation session" means a meeting between a client and
26 a facilitator that occurs before the client participates in an

1 administration session.

2 "Psilocybin" means psilocybin or psilocin.

3 "Psilocybin product" means:

4 (1) psilocybin-producing fungi; or

5 (2) mixtures or substances containing a detectable
6 amount of psilocybin naturally produced from
7 psilocybin-producing fungi.

8 "Psilocybin service" means a service provided to a client
9 before, during, or after the client's consumption of a
10 psilocybin product, including any of the following:

11 (1) a preparation session;

12 (2) an administration session;

13 (3) an integration session; or

14 (4) a post-administration evaluation session.

15 Section 15. Illinois Psilocybin Advisory Board.

16 (a) The Illinois Psilocybin Advisory Board is established
17 within the Department of Financial and Professional Regulation
18 for the purpose of fulfilling the duties listed in Section 20
19 of this Act. The Board shall consist of the following members:

20 (1) the Secretary of Financial and Professional
21 Regulation or the Secretary's designee;

22 (2) the Director of Agriculture or the Director's
23 designee;

24 (3) the Director of the Illinois State Police or the
25 Director's designee;

1 (4) the Director of Revenue or the Director's
2 designee;

3 (5) the Secretary of Human Services or the Secretary's
4 designee;

5 (6) the Secretary of Veterans Affairs or the
6 Secretary's designee;

7 (7) the Illinois Chief Behavioral Health Officer;

8 (8) an expert in the field of public health, community
9 sciences, or a related health field or an individual who
10 is a member of or represents a group that provides public
11 health services directly to members of the public,
12 appointed by the Governor with the advice and consent of
13 the Senate;

14 (9) a local health official, appointed by the Governor
15 with the advice and consent of the Senate;

16 (10) a psychologist who has experience engaging in the
17 diagnosis or treatment of mental, emotional, and
18 behavioral conditions, appointed by the Governor with the
19 advice and consent of the Senate;

20 (11) a psychiatrist licensed to practice in this State
21 who has experience engaging in the diagnosis or treatment
22 of mental, emotional, and behavioral conditions, appointed
23 by the Governor with the advice and consent of the Senate;

24 (12) a professional counselor or a clinical
25 professional counselor licensed to practice in this State
26 who has experience engaging in the diagnosis or treatment

1 of mental, emotional, and behavioral conditions, appointed
2 by the Governor with the advice and consent of the Senate;

3 (13) a physician licensed to practice medicine in all
4 its branches, appointed by the Governor with the advice
5 and consent of the Senate;

6 (14) a doctor of osteopathic medicine licensed to
7 practice in this State, appointed by the Governor with the
8 advice and consent of the Senate;

9 (15) a physician representing an organization in this
10 State that is engaged in naturopathy, as defined by the
11 American Association of Naturopathic Physicians, appointed
12 by the Governor with the advice and consent of the Senate;

13 (16) a licensed social worker or a licensed clinical
14 social worker, appointed by the Governor with the advice
15 and consent of the Senate;

16 (17) a representative of the Behavioral Health
17 Workforce Education Center of Illinois, appointed by the
18 Governor with the advice and consent of the Senate;

19 (18) a representative of a local organization that
20 advocates for the equitable implementation of psychedelic
21 policies, appointed by the Governor with the advice and
22 consent of the Senate;

23 (19) at least 3 individuals who meet at least one of
24 the following qualifications, appointed by the Governor
25 with the advice and consent of the Senate:

26 (A) professional experience conducting scientific

1 research regarding the use of psychedelic compounds in
2 clinical therapy;

3 (B) experience in the field of mycology;

4 (C) experience in the field of ethnobotany;

5 (D) experience in the field of psychopharmacology;

6 or

7 (E) experience in the field of psilocybin harm
8 reduction;

9 (20) a current member of the Senate, appointed by the
10 President of the Senate;

11 (21) a current member of the Senate, appointed by the
12 Minority Leader of the Senate;

13 (22) a current member of the House, appointed by the
14 Speaker of the House; and

15 (23) a current member of the House, appointed by the
16 Minority Leader of the House.

17 (c) Within 3 months after the effective date of this Act,
18 the applicable appointing authority shall appoint the
19 individuals specified in subsection (b) to the Board.

20 (d) Board members shall serve for a term of 4 years, but a
21 member serves at the pleasure of the applicable appointing
22 authority. Before the expiration of the term of a member, the
23 applicable appointing authority shall appoint a successor
24 whose term shall begin on January 1 of the following calendar
25 year. Members may be eligible for reappointment. If there is a
26 vacancy for any reason, the applicable appointing authority

1 shall appoint an individual to serve as a member in an acting
2 capacity until the individual is approved as a member of the
3 Board by the Senate for the remainder of the unexpired term.

4 (e) A majority of the voting members of the Board
5 constitutes a quorum for the transaction of business.

6 (f) Official action by the Board requires the approval of
7 a majority of the voting members of the Board.

8 (g) The Board shall elect one of its voting members to
9 serve as chairperson.

10 (h) Between January 1, 2027 and January 1, 2029, the Board
11 shall meet at least once every 2 calendar months at a time and
12 place determined by the chairperson or a majority of the
13 voting members of the Board. After January 1, 2029, the Board
14 shall meet at least once every calendar quarter at a time and
15 place determined by the chairperson or a majority of the
16 voting members of the Board. The Board may also meet at other
17 times and places specified by the call of the chairperson or a
18 majority of the voting members of the Board.

19 (i) The Board may adopt policies and procedures necessary
20 for the operation of the Board.

21 (j) The Board may establish committees or subcommittees
22 necessary for the operation of the Board.

23 (k) Members of the Board shall not be paid a salary but
24 shall be reimbursed for travel and other reasonable expenses
25 incurred while fulfilling the responsibilities of the Board.

1 Section 20. Duties of the Board.

2 (a) The Board shall perform the following duties:

3 (1) provide advice to the Department of Agriculture,
4 the Department of Financial and Professional Regulation,
5 the Illinois State Police, and the Department of Revenue
6 with respect to accurate public health approaches
7 regarding the use, effect, and risk reduction of
8 entheogens and the content and scope of educational
9 campaigns related to the legalization of entheogens for
10 use in medical and psychological treatment;

11 (2) make summary reports or recommendations on
12 available medical, psychological, and scientific studies,
13 research, and other information relating to the safety and
14 efficacy of psilocybin in treating various health
15 conditions, including, but not limited to, addiction,
16 depression, anxiety and trauma disorders, headache
17 disorders, and end-of-life psychological distress;

18 (3) study and review the Oregon Psilocybin Services
19 Act (Measure 109) and any related administrative rules and
20 regulations, the Colorado Natural Medicine Health Act of
21 2022 (Proposition 122) and any related administrative
22 rules and regulations, and other relevant initiatives to
23 legalize or decriminalize entheogen use in other states or
24 units of local government in an effort to determine any
25 successes or failures that may be applied to the
26 rulemaking process in this State;

1 (4) make summary reports or recommendations on the
2 medical efficacy of ibogaine (except ibogaine from iboga),
3 mescaline (except mescaline from peyote), botanical forms
4 of dimethyltryptamine, methylenedioxymethamphetamine
5 (MDMA), and lysergic acid diethylamide (LSD) based on
6 medical, psychological, and scientific studies, research,
7 and other information related to the safety and efficacy
8 of each compound, and make recommendations concerning
9 whether these substances may be included in an appropriate
10 statutory or regulatory framework to avoid an unregulated
11 de facto market for entheogenic substances other than
12 psilocybin;

13 (5) make summary reports or recommendations concerning
14 naturally occurring psilocybin and synthetic psilocybin
15 and the safety and efficacy of these substances;

16 (6) make recommendations on the requirements,
17 specifications, and guidelines for providing psilocybin
18 services to a client, including the following:

19 (A) the requirements, specifications, and
20 guidelines for holding and verifying the completion of
21 a preparation session, an administration session, and
22 an integration session;

23 (B) the contents of the client information and
24 consent forms that a client must complete and sign
25 before the client participates in an administration
26 session, giving particular consideration to the

1 following:

2 (i) the information that should be solicited
3 from the client to determine whether the client
4 should participate in the administration session,
5 including information that may identify risk
6 factors and contraindications;

7 (ii) the information that should be solicited
8 from the client to assist the service center
9 operator and the facilitator in meeting any public
10 health and safety standards and industry best
11 practices during the administration session; and

12 (iii) the health and safety warnings and other
13 disclosures that should be made to the client
14 before the client participates in the
15 administration session; and

16 (C) whether this State should legalize psilocybin
17 for use in administration sessions;

18 (7) make recommendations on public health and safety
19 standards and industry best practices for psilocybin
20 product manufacturers, service center operators,
21 facilitators, and laboratories that conduct testing of
22 psilocybin products;

23 (8) make recommendations on the formulation of a code
24 of professional conduct for facilitators, giving
25 particular consideration to a code of ethics and cultural
26 responsibility and outlining a clear process for reporting

1 complaints of unethical conduct by facilitators or service
2 center employees;

3 (9) make recommendations on the education, experience,
4 and training that facilitators must achieve, including
5 whether such education, experience, and training should be
6 available through online resources, giving particular
7 consideration to the following:

8 (A) facilitation skills that are affirming,
9 nonjudgmental, nondirective, trauma-informed, and
10 rooted in informed consent;

11 (B) support skills for clients during an
12 administration session, including specialized skills
13 for the following:

14 (i) client safety;

15 (ii) clients who may have a mental health
16 condition;

17 (iii) appropriate boundaries, heightened
18 transference in expanded states of consciousness,
19 and special precautions related to the use of
20 touch in psilocybin sessions; and

21 (iv) crisis assessment and appropriate
22 referral for those who need ongoing support if
23 challenging mental health issues emerge in
24 psilocybin sessions;

25 (C) the environment in which psilocybin services
26 should occur;

1 (D) social and cultural considerations; and

2 (E) affordable, equitable, ethical, and culturally
3 responsible access to entheogens and requirements to
4 ensure that the regulated entheogen access program is
5 equitable and inclusive;

6 (10) make recommendations on the examinations that
7 facilitators must pass;

8 (11) make recommendations on public health and safety
9 standards and industry best practices for holding and
10 completing an administration session, including the
11 following:

12 (A) best practices surrounding group
13 administration;

14 (B) how clients can safely access common or
15 outside areas on the premises at which the
16 administration session is held;

17 (C) the circumstances under which an
18 administration session is considered complete; and

19 (D) the transportation needs of the client after
20 the completion of the administration session;

21 (12) develop a long-term strategic plan for ensuring
22 that psilocybin services become and remain a safe,
23 accessible, and affordable therapeutic option for all
24 persons 21 years of age and older in this State for whom
25 psilocybin may be appropriate;

26 (13) on an ongoing basis, monitor and study federal

1 laws, regulations, and policies regarding entheogens and
2 make summary reports with actionable recommendations
3 tailored for clinicians, public behavioral health clinics,
4 and any other entities that may issue referrals for
5 psilocybin services. These reports should also provide
6 guidance on this State's role in supporting safe,
7 equitable, and effective regulation of entheogens;

8 (14) on an ongoing basis, review and evaluate existing
9 research studies and real-world data related to entheogens
10 and make recommendations to the General Assembly and
11 relevant State agencies as to whether entheogens and
12 associated services should be covered under a State health
13 insurance program or another insurance program as a
14 cost-effective intervention for various health conditions,
15 including, but not limited to, anxiety, substance use
16 disorders, alcoholism, depressive disorders, neurological
17 disorders, post-traumatic stress disorder, other painful
18 conditions, including, but not limited to, cluster
19 headaches, migraines, cancer, and phantom limbs, and
20 comfort care, including palliative care, support care, and
21 hospice care;

22 (15) make summary reports and recommendations on the
23 availability of Medicaid coverage for entheogens and
24 associated services;

25 (16) on an ongoing basis, review and evaluate
26 sustainability issues related to natural entheogens and

1 the impact of natural entheogens on indigenous cultures
2 and document existing reciprocity efforts and continuing
3 support measures that are needed as part of the Board's
4 annual report under this Section; and

5 (17) publish an annual report describing the Board's
6 activities, including, but not limited to, any
7 recommendations and advice to the Department of Public
8 Health, the Department of Agriculture, the Department of
9 Financial and Professional Regulation, the Illinois State
10 Police, the Department of Revenue, or the General
11 Assembly.

12 (b) Within 9 months after the effective date of this Act,
13 the Board shall hold its first meeting at a time and place
14 specified by the Governor.

15 (c) Within one year after the effective date of this Act,
16 and every year thereafter, the Board shall submit its findings
17 and recommendations to the General Assembly.

18 (d) Within 18 months after the effective date of this Act,
19 the Board shall submit its findings and recommendations
20 concerning the following:

21 (1) any rules and regulations for the implementation
22 of this Act;

23 (2) a long-term strategic plan for ensuring that
24 psilocybin services become and remain a safe, accessible,
25 and affordable therapeutic option for all persons 21 years
26 of age and older in this State for whom psilocybin may be

1 appropriate; and

2 (3) an evaluation of federal laws, regulations, and
3 policies regarding psilocybin and other entheogens.

4 (e) The Department shall provide technical, logistical,
5 and other support to the Board, as requested by the Board, to
6 assist the Board with its duties and obligations.

7 Section 99. Effective date. This Act takes effect upon
8 becoming law.