



**November 8, 2022 General Election**

<b>Ballot Issue:</b>	<b>Proposition #122 (NATURAL MEDICINE HEALTH ACT of 2022)</b>
<b>Ballot Question</b>	<p><i>“Shall there be a change to the Colorado Revised Statutes concerning legal regulated access to natural medicine for persons 21 years of age or older, and, in connection therewith, defining natural medicine as certain plants or fungi that affect a person’s mental health and are controlled substances under state law; establishing a natural medicine regulated access program for supervised care, and requiring the department of regulatory agencies to implement the program and comprehensively regulate natural medicine to protect public health and safety; creating an advisory board to advise the department as to the implementation of the program; granting a local government limited authority to regulate the time, place, and manner of providing natural medicine services; allowing limited personal possession, use, and uncompensated sharing of natural medicine; providing specified protections under state law, including criminal and civil immunity, for authorized providers and users of natural medicine; and, in limited circumstances, allowing the retroactive removal and reduction of criminal penalties related to the possession, use, and sale of natural medicine?”</i></p> <p>Full text of the Proposition can be found <a href="#">here</a>.</p>
<b>Timeline</b>	<ul style="list-style-type: none"> <li>• Veronica Perez and Kevin Thomas Matthews filed the initiative on February 4, 2022. Ballot language was set for the initiative on February 16, 2022.</li> <li>• The initiative was cleared for signature gathering on March 22, 2022, with signatures due on August 8, 2022.</li> <li>• On May 11, 2022, Kevin Matthews, a chief petitioner for the initiative, said that the campaign had collected 40% of the required signatures after about six weeks of signature gathering.</li> <li>• On June 27, 2022, the Natural Medicine Colorado campaign submitted signatures to the Colorado Secretary of State's office.</li> <li>• The Colorado Secretary of State's office announced that the measure qualified for the ballot on July 21, 2022. Of the 225,140 signatures submitted, 138,760 were projected to be valid.</li> </ul>
<b>Chamber Position</b>	Opposed
<b>Some Basics</b>	The Food and Drug Administration allowed for research on psychedelic agents in 1992. Clinical research has explored potential treatment effects of psilocybin on conditions such as depression, anxiety disorders, suicidality, obsessive-compulsive disorder, and

addiction. The authors of the meta-analysis concluded that "it appears psilocybin may have some efficacy as an alternative agent to manage mental health conditions." They also stated that "there are multiple limitations to these studies. Many of them are small and are not able to be applied to larger populations. Additionally, because of the CSA Schedule I nature of psilocybin, it was administered under very controlled conditions."

In 2019, the FDA designated psilocybin therapy as *breakthrough therapy* for two clinical trials being facilitated by Compass Pathways and Usona Institute studying the effects of psilocybin on severe depression and major depressive disorder. The FDA defines the designation, *breakthrough therapy*, as "a process designed to expedite the development and review of drugs that are intended to treat a serious condition and preliminary clinical evidence indicates that the drug may demonstrate substantial improvement over available therapy on a clinically significant endpoint(s)."

As of 2022, psilocybin was classified as a Schedule I drug by the U.S. Drug Enforcement Administration (DEA). According to the DEA, Schedule I drugs are not approved for medical use and have a high potential for abuse and dependence. The DEA's website listed the following as effects caused by psilocybin use:

- Hallucinations
- Large amounts can cause panic attacks and psychosis
- Nausea and vomiting
- Muscle weakness, lack of coordination
- Overdose may result in psychosis or death

**Colorado:**

Leading up to the election, the use and possession of psilocybin was illegal and penalized in Colorado, except in certain cases allowed under the state's [right-to-try law](#). Right-to-try laws aim to allow terminally ill patients to gain access to experimental drugs without the permission of the [FDA](#). Colorado was the first state to adopt a right-to-try law in 2014.

The approval of [Initiated Ordinance 301](#) in 2019 made the adult possession and use of psilocybin mushrooms the lowest law enforcement priority in Denver and prohibited the city and county of Denver from spending resources on enforcing related penalties.

**Statewide:**

In [November of 2020](#), Oregon voters approved a ballot initiative, [Measure 109](#), that authorized the Oregon Health Authority (OHA) to create a program to permit licensed service providers to administer psilocybin-producing mushroom and fungi products to individuals 21 years of age or older. Measure 109 allowed cities and counties to place referendums on local ballots to prohibit or allow psilocybin-product manufacturers or psilocybin service centers in unincorporated areas within their jurisdictions. At the same election, Oregon voters approved [Measure 110](#), which removed criminal penalties for the possession of LSD (less than 40 units) and psilocybin (less than 12 grams), as well as other specified quantities of certain controlled substances.

	<p><b>Local:</b></p> <p>As of June 2022, 15 local jurisdictions had <b>decriminalized</b> psilocybin possession or, more frequently, <b>deprioritized</b> policing, prosecution, and arrest for possession of psilocybin. Three jurisdictions did so through the citizen initiative process and 11 did so through local government resolutions.</p>
<p><b>Arguments in support of the proposal</b></p>	<ul style="list-style-type: none"> <li>• Colorado’s current approach to mental health is severely lacking and an extensive body of research is advancing to support the efficacy of natural medicines combined with psychotherapy as treatment for depression, anxiety, substance abuse, end-of-life distress, and other conditions.</li> <li>• Colorado can better promote health and healing by reducing its focus on criminal punishments for persons who suffer mental health issues and by establishing regulated access to natural medicines through a humane, cost-effective, and responsible approach.</li> <li>• The federal government provides no indication of reclassifying natural medicines that would allow broader research and integration of natural medicines within our healthcare system. Colorado should not be held back from advancing the benefits these medicines provide.</li> </ul>
<p><b>Arguments against the proposal</b></p>	<ul style="list-style-type: none"> <li>• Legalizing hallucinogenic substances further erodes stigma associated with the use and proliferation of unproven and potentially dangerous substances.</li> <li>• Unlike the legalization of cannabis, local jurisdictions may not opt out of statewide legalization.</li> <li>• Possession, consumption and sharing of covered substances for recreational use is not limited to a healthcare regimen. This presents significant challenges to public health and safety officials, as well as the larger community, who will need to respond to people experiencing hallucinogenic episodes without benefit of qualified supervision.</li> </ul>
<p><b>Other Considerations</b></p>	<p>The Colorado Department of Regulatory Agencies would be directed to establish a Natural Medicines Advisory Board, develop rules, establishing licensure requirements, monitor activities of licensed healthcare facilities, and conduct enforcement actions. There would not be a direct role assigned to the Department of Health &amp; Environment.</p> <p>Localities may define the time, place and manner of the operation of licensed healing center, though it may not prohibit the physical presence of a licensed operation or the transport of natural medicines within its jurisdiction.</p> <p>Cultivation, possession, consumption, and sharing of natural medicines would become legal and not limited to supervised treatment through licensed facilities. The sale of natural medicines is limited to licensed facilities.</p>
<p><b>Where We Stand (NCLA)</b></p>	<p>N/A</p>