



Sen. Rachel Ventura

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10400SB2772sam003

LRB104 16758 CCC 37000 a

1 AMENDMENT TO SENATE BILL 2772

2 AMENDMENT NO. \_\_\_\_\_. Amend Senate Bill 2772, AS AMENDED,  
3 by replacing everything after the enacting clause with the  
4 following:

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

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

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

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

16 (3) The United States Food and Drug Administration

1 has:

2 (A) determined that preliminary clinical evidence  
3 indicates that psilocybin may demonstrate substantial  
4 improvement over available therapies for  
5 treatment-resistant depression; and

6 (B) granted a "Breakthrough Therapy" designation  
7 for a treatment that uses psilocybin as a therapy for  
8 treatment-resistant depression.

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

13 (5) Research conducted by domestic and international  
14 medical institutions indicates that, when used with the  
15 appropriate treatment protocols, psilocybin can be  
16 efficacious and safe for the treatment of a variety of  
17 mental health conditions, including, but not limited to,  
18 addiction, depression, anxiety disorders, headache  
19 disorders, and end-of-life psychological distress.

20 (6) In order to transition away from criminalization  
21 models while protecting people who use or may use drugs  
22 and reducing any negative environmental or cultural  
23 impacts, it is necessary to review the full legal context  
24 in which relevant changes to the law are made. It is also  
25 necessary to incorporate evidence-based policy, consult  
26 with experts, and maintain open discourse based in harm

1 reduction, reciprocity, and human rights during the  
2 process of developing alternative regulatory systems.

3 Section 10. Definitions. In this Act:

4 "Administration session" means a structured session held  
5 under the direct supervision of a licensed facilitator where a  
6 client consumes and experiences the effects of a psilocybin  
7 product.

8 "Board" means the Illinois Psilocybin Advisory Board  
9 established under this Act.

10 "Client" means an individual who has received a referral  
11 for psilocybin service and who consumes a psilocybin product  
12 in an administration session in this State.

13 "Entheogen" or "entheogenic substance" means the following  
14 substances in any form, regardless of whether the substance is  
15 regulated under the federal Controlled Substances Act or the  
16 Illinois Controlled Substances Act:

- 17 (1) psilocybin;
- 18 (2) psilocin;
- 19 (3) dimethyltryptamine;
- 20 (4) ibogaine, except ibogaine from iboga;
- 21 (5) mescaline, except mescaline from peyote;
- 22 (6) methylenedioxyamphetamine (MDMA);
- 23 (7) lysergic acid diethylamide; and
- 24 (8) ayahuasca.

25 "Facilitator" means an individual who facilitates the

1 provision of a psilocybin service in this State.

2 "Integration session" means a meeting between a client and  
3 a facilitator that occurs after the client completes an  
4 administration session.

5 "Post-administration evaluation session" means a meeting  
6 between a client and a facilitator that occurs immediately  
7 following the conclusion of an administration session and  
8 prior to the client's release from the service center.

9 "Preparation session" means a meeting between a client and  
10 a facilitator that occurs before the client participates in an  
11 administration session.

12 "Psilocybin" means psilocybin or psilocin.

13 "Psilocybin product" means:

- 14 (1) psilocybin-producing fungi;  
15 (2) mixtures or substances containing a detectable  
16 amount of psilocybin naturally produced from  
17 psilocybin-producing fungi; or  
18 (3) synthetically produced psilocybin or psilocin.

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

- 22 (1) a preparation session;  
23 (2) an administration session;  
24 (3) an integration session; or  
25 (4) a post-administration evaluation session.

1 Section 15. Illinois Psilocybin Advisory Board.

2 (a) The Illinois Psilocybin Advisory Board is established  
3 within the Department of Financial and Professional Regulation  
4 for the purpose of fulfilling the duties listed in Section 20  
5 of this Act. The Board shall consist of the following voting  
6 members:

7 (1) a member of the Senate, appointed by the President  
8 of the Senate;

9 (2) a member of the Senate, appointed by the Minority  
10 Leader of the Senate;

11 (3) a member of the House of Representatives,  
12 appointed by the Speaker of the House of Representatives;

13 (4) a member of the House of Representatives,  
14 appointed by the Minority Leader of the House of  
15 Representatives;

16 (5) the Secretary of Financial and Professional  
17 Regulation or the Secretary's designee;

18 (6) the Director of Agriculture or the Director's  
19 designee; and

20 (7) a member of an Indigenous tribe or community or a  
21 member of an organization representing an Indigenous tribe  
22 or community with experience in the use of psychedelic  
23 compounds, appointed by the Governor.

24 (b) The Board shall include one voting member from each  
25 paragraph under this subsection (b). Individuals listed who  
26 are not selected as the voting member may be appointed to serve

1 on the Board in a nonvoting advisory capacity:

2 (1) the executive director of a statewide association  
3 representing county sheriffs or his or her designee, the  
4 executive director of a statewide association representing  
5 chiefs of police or his or her designee, a representative  
6 of the Chicago Police Department, appointed by the  
7 Governor, the Director of the Illinois State Police, or  
8 the Director's designee;

9 (2) a veteran who has participated in clinical trials  
10 related to psychedelic compounds, appointed by the  
11 Governor, the Director of Veterans Affairs, or the  
12 Director's designee;

13 (3) a physician licensed to practice medicine in all  
14 its branches in this State, an emergency physician  
15 licensed to practice in this State, a representative of a  
16 poison control center, or a physician certified in medical  
17 toxicology, appointed by the Governor;

18 (4) a doctor of osteopathic medicine licensed to  
19 practice in this State or an individual who practices  
20 naturopathy in this State, appointed by the Governor;

21 (5) a psychologist licensed to practice in this State  
22 who has experience engaging in the diagnosis or treatment  
23 of mental, emotional, and behavioral conditions, a  
24 psychiatrist licensed to practice in this State who has  
25 experience engaging in the diagnosis or treatment of  
26 mental, emotional, and behavioral conditions, a

1 professional counselor or a clinical professional  
2 counselor licensed to practice in this State who has  
3 experience engaging in the diagnosis or treatment of  
4 mental, emotional, and behavioral conditions, a child and  
5 adolescent psychiatrist licensed to practice in this  
6 State, or a geriatric psychiatrist licensed to practice in  
7 this State, appointed by the Governor;

8 (6) a professional with experience conducting  
9 scientific research regarding the use of psychedelic  
10 compounds in clinical therapy, an individual with  
11 experience in the field of mycology, an individual with  
12 experience in the field of ethnobotany, or an individual  
13 with experience in the field of psychopharmacology,  
14 appointed by the Governor;

15 (7) a licensed social worker licensed in this State or  
16 a licensed clinical social worker licensed in this State,  
17 an individual with experience in the field of psilocybin  
18 harm reduction, a certified alcohol and drug counselor  
19 with advanced training who is certified to practice in  
20 this State who has experience engaging in the diagnosis  
21 and treatment of substance use disorders and co-occurring  
22 conditions, an addiction medicine physician licensed to  
23 practice in this State, or an addiction psychiatrist  
24 licensed to practice in this State, appointed by the  
25 Governor; and

26 (8) a public health surveillance expert, or an expert

1 in the field of public health, community sciences, or a  
2 related health field or an individual who is a member of or  
3 represents a group that provides public health services  
4 directly to members of the public, appointed by the  
5 Governor.

6 (c) The Board shall consist of the following nonvoting  
7 members in advisory capacity:

8 (1) the Director of Revenue or the Director's  
9 designee;

10 (2) the Director of Insurance or the Director's  
11 designee;

12 (3) the Secretary of Human Services or the Secretary's  
13 designee;

14 (4) the Illinois Chief Behavioral Health Officer; and

15 (5) the Director of Public Health or the Director's  
16 designee, which may include a local health official.

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

20 (e) Board members shall serve at the pleasure of the  
21 applicable appointing authority. Members may be eligible for  
22 reappointment. If there is a vacancy for any reason, the  
23 applicable appointing authority shall appoint an individual to  
24 fill the vacancy in a timely manner.

25 (f) A majority of the voting members of the Board  
26 constitutes a quorum for the transaction of business.

1 (g) Official action by the Board requires the approval of  
2 a majority of the voting members of the Board.

3 (h) The Board shall elect one of its voting members to  
4 serve as chairperson.

5 (i) By November 1, 2026, the Board shall hold its first  
6 meeting at a time and place specified by the Governor. After  
7 the first meeting of the Board, the Board shall meet at least  
8 once monthly at a time and place determined by the chairperson  
9 or a majority of the voting members of the Board. The Board may  
10 also meet at other times and places specified by the call of  
11 the chairperson or a majority of the voting members of the  
12 Board.

13 (j) The Board may adopt policies and procedures necessary  
14 for the operation of the Board.

15 (k) The Board may establish committees or subcommittees  
16 necessary for the operation of the Board.

17 (l) Board members shall serve without compensation.

18 (m) The Board, in compliance with the Open Meetings Act,  
19 may meet virtually.

20 Section 20. Duties of the Board.

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

22 (1) review the Oregon Psilocybin Services Act (Measure  
23 109) and any related administrative rules and regulations,  
24 the Colorado Natural Medicine Health Act of 2022  
25 (Proposition 122) and any related administrative rules and

1 regulations, and other relevant initiatives to legalize or  
2 decriminalize psilocybin use in other states or units of  
3 local government in an effort to determine any successes  
4 or failures that may be applied to the rulemaking process  
5 in this State;

6 (2) review federal laws, regulations, and policies  
7 regarding psilocybin;

8 (3) review existing research studies and real-world  
9 data related to psilocybin; and

10 (4) review sustainability issues related to natural  
11 psilocybin and the impact of natural psilocybin on  
12 indigenous cultures, including existing reciprocity  
13 efforts and continuing support measures.

14 (b) Within 18 months after the effective date of this Act,  
15 the Board shall submit a report to the Governor and the General  
16 Assembly that includes, but is not limited to:

17 (1) an evaluation of federal laws, regulations, and  
18 policies regarding psilocybin;

19 (2) advice to the Department of Public Health, the  
20 Department of Insurance, the Department of Human Services,  
21 the Department of Agriculture, the Department of Financial  
22 and Professional Regulation, the Illinois State Police,  
23 the Department of Revenue, and the General Assembly with  
24 respect to public health approaches regarding the use,  
25 effect, and risk reduction of psilocybin and the content  
26 and scope of educational campaigns related to the

1 legalization of psilocybin for use in medical and  
2 psychological treatment;

3 (3) recommendations on available medical,  
4 psychological, and scientific studies, research, and other  
5 information relating to the safety and efficacy of  
6 psilocybin in treating various health conditions,  
7 including, but not limited to, addiction, depression,  
8 anxiety and trauma disorders, headache disorders, and  
9 end-of-life psychological distress;

10 (4) an evaluation of the medical efficacy of ibogaine  
11 (except ibogaine from iboga), mescaline (except mescaline  
12 from peyote), botanical forms of dimethyltryptamine,  
13 methylenedioxymethamphetamine (MDMA), lysergic acid  
14 diethylamide (LSD), and ayahuasca based on medical,  
15 psychological, and scientific studies, research, clinical  
16 trials in the United States, and other information related  
17 to the safety and efficacy of each compound;

18 (5) recommendations concerning naturally occurring  
19 psilocybin and synthetic psilocybin and the safety and  
20 efficacy of these substances;

21 (6) whether this State should legalize psilocybin for  
22 use in administration sessions;

23 (7) if the Board recommends the legalization of  
24 psilocybin use in this State, recommendations on the  
25 requirements, specifications, and guidelines for providing  
26 psilocybin services to a client, including the following:

1 (A) the requirements, specifications, and  
2 guidelines for holding and verifying the completion of  
3 a preparation session, an administration session, and  
4 an integration session;

5 (B) the contents of the client information and  
6 consent forms that a client must complete and sign  
7 before the client participates in an administration  
8 session, giving particular consideration to the  
9 following:

10 (i) the information that should be solicited  
11 from the client to determine whether the client  
12 should participate in the administration session,  
13 including information that may identify risk  
14 factors and contraindications;

15 (ii) the information that should be solicited  
16 from the client to assist the service center  
17 operator and the facilitator in meeting any public  
18 health and safety standards and industry best  
19 practices during the administration session; and

20 (iii) the health and safety warnings and other  
21 disclosures that should be made to the client  
22 before the client participates in the  
23 administration session;

24 (8) recommendations on public health and safety  
25 standards and industry best practices for psilocybin  
26 product manufacturers, service center operators,

1 facilitators, and laboratories that conduct testing of  
2 psilocybin products;

3 (9) recommendations on the formulation of a code of  
4 professional conduct for facilitators, giving particular  
5 consideration to a code of ethics and cultural  
6 responsibility and outlining a clear process for reporting  
7 complaints of unethical conduct by facilitators or service  
8 center employees;

9 (10) recommendations on the education, experience, and  
10 training that facilitators must achieve, including whether  
11 such education, experience, and training should be  
12 available through online resources, giving particular  
13 consideration to the following:

14 (A) facilitation skills that are affirming,  
15 nonjudgmental, nondirective, trauma-informed, and  
16 rooted in informed consent;

17 (B) support skills for clients during an  
18 administration session, including specialized skills  
19 for the following:

20 (i) client safety;

21 (ii) clients who may have a mental health  
22 condition;

23 (iii) appropriate boundaries, heightened  
24 transference in expanded states of consciousness,  
25 and special precautions related to the use of  
26 touch in psilocybin sessions; and

1 (iv) crisis assessment and appropriate  
2 referral for those who need ongoing support if  
3 challenging mental health issues emerge in  
4 psilocybin sessions;

5 (C) the environment in which psilocybin services  
6 should occur;

7 (D) social and cultural considerations; and

8 (E) affordable, equitable, ethical, and culturally  
9 responsible access to psilocybin and requirements to  
10 ensure that the regulated psilocybin access program is  
11 equitable and inclusive;

12 (11) recommendations on required examinations for the  
13 licensure of facilitators;

14 (12) recommendations on public health and safety  
15 standards and industry best practices for holding and  
16 completing an administration session, including the  
17 following:

18 (A) best practices surrounding group  
19 administration;

20 (B) how clients can safely access common or  
21 outside areas on the premises at which the  
22 administration session is held;

23 (C) the circumstances under which an  
24 administration session is considered complete; and

25 (D) the transportation needs of the client after  
26 the completion of the administration session;

1           (13) if the Board recommends psilocybin be legalized  
2 for use in administrative sessions, recommendations on a  
3 long-term strategic plan for ensuring that psilocybin  
4 services become and remain a safe, accessible, and  
5 affordable therapeutic option for all persons 21 years of  
6 age and older in this State for whom psilocybin may be  
7 appropriate;

8           (14) actionable recommendations tailored for  
9 clinicians, public behavioral health clinics, and any  
10 other entities that may issue referrals for psilocybin  
11 services;

12           (15) recommendations to the General Assembly and  
13 relevant State agencies as to whether psilocybin and  
14 associated services should be covered under a State health  
15 insurance program or another insurance program as a  
16 cost-effective intervention for various health conditions,  
17 including, but not limited to, anxiety, substance use  
18 disorders, alcoholism, depressive disorders, neurological  
19 disorders, post-traumatic stress disorder, other painful  
20 conditions, including, but not limited to, cluster  
21 headaches, migraines, cancer, and phantom limbs, and  
22 comfort care, including palliative care, support care, and  
23 hospice care;

24           (16) recommendations on the availability of Medicaid  
25 coverage for psilocybin and associated services;

26           (17) existing reciprocity efforts and continuing

1 support measures related to natural psilocybin and the  
2 impact of psilocybin on Indigenous cultures; and

3 (18) a description of the Board's activities,  
4 including, but not limited to, any recommendations and  
5 advice to the Department of Public Health, the Department  
6 of Agriculture, the Department of Financial and  
7 Professional Regulation, the Illinois State Police, the  
8 Department of Revenue, or the General Assembly.

9 (b) The Department of Financial and Professional  
10 Regulation shall provide technical, logistical, and other  
11 support to the Board, as requested by the Board, to assist the  
12 Board with its duties and obligations.

13 Section 90. Repeal. This Act is repealed 2 years after the  
14 effective date of this Act.

15 Section 99. Effective date. This Act takes effect upon  
16 becoming law."