



Annual Natural Medicine Implementation Report

Prepared & Submitted by:

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Introduction & Background

Changes in the Law & Key Dates

Proposition 122

In November 2022, Colorado voters approved [Proposition 122](#), a citizen-initiated measure related to the use of certain plants or fungi for people 21 years of age and older. It also established the 15-member Natural Medicine Advisory Board, tasked with making recommendations on the regulated natural medicine program.

Senate Bill 23-290

Proposition 122 was followed by [Senate Bill 23-290](#) in the 2023 Colorado Legislative Session to allow for implementation. The purpose of SB 23-290 was to establish and operationalize the Natural Medicine Access Program by leveraging the existing state infrastructure, including the fiscal mechanisms of the Colorado State Government, and address personal use provisions. This bill specifically modified the responsibilities of two Colorado state agencies, the Department of Regulatory Agencies (DORA) and the Department of Revenue (DOR), and extended the implementation deadlines to December 31, 2024.

Key Dates

- **Tuesday, November 8, 2022:** Colorado Proposition 122 passed with a 53.64% voter approval.
- **Monday, December 22, 2022:** Colorado Secretary of State certified the passage of Proposition 122.
- **Tuesday, December 27, 2022:** Governor Polis issues a [proclamation](#) declaring the vote on Proposition 122.
- **Friday, January 27, 2023:** Governor Polis Announces the [Natural Medicine Advisory Board Appointments](#).
- **Tuesday, March 14, 2023:** The Natural Medicine Advisory Board is Confirmed by the Colorado State Senate Finance Committee.
- **Thursday, April 13, 2023:** The Colorado Natural Medicine Advisory Board holds its first meeting.
- **Tuesday, April 18, 2023:** SB 23-290 Natural Medicine Regulation and Legalization is [introduced](#).
- **Monday, May 8, 2023:** SB 23-290 [passes](#) in the Colorado legislature and is sent to the Governor to be signed.
- **Tuesday, May 23, 2023:** Governor Polis signed SB 23-290.
- **Tuesday, July 1, 2023:** SB 23-290 takes effect.

Establishing the Natural Medicine Advisory Board & Subcommittees

The Natural Medicine Advisory Board (Advisory Board or Board) is a 15 member, Governor-appointed board.

Lundi, MA, LPC, Chair
Representative of Mental Health and Behavioral Health Providers & Disparities in Access to Health Care Services Among Different Communities
Term expires January 31, 2027

Ricardo Baca
Representative of Traditional Indigenous Use and Public Health, Drug Policy, and Harm Reduction
Term expires January 31, 2027

Wendy Buxton-Andrade
Representative of Levels and Disparities in Access to Health Care Services Among Different Communities
Term expires January 31, 2029

Dr. Sofia Chavez, DNM
Representative of Traditional and Indigenous Use and Religious Use of Natural Medicine
Term expires January 31, 2029

Dr. Bradley Conner, PhD – Vice Chair
Representative of Natural Medicine Therapy, Medicine and Research and Public Health, Drug Policy, and Harm Reduction
Term expires January 31, 2029

William Dunn NRP, FP-C
Representative of Emergency Medical Services and Services Provided by First Responders
Term expires January 31, 2029

Dr. Clarissa Pinkola Estés Reyes, PhD
Representative of Traditional Indigenous Use and Religious Use
Term expires January 31, 2027

Dr. Tina Gonzales, PhD
Representative of Health Care Insurance and Health Care Policy, Past Criminal Justice Reform Efforts in Colorado, and Disparities in Access to Healthcare Services Among Different Communities
Term expires January 31, 2029

Dr. Alisa Hannum, PhD
Representative of Mental and Behavioral Health Providers and Issues Confronting Veterans
Term expires January 31, 2027

Stacie Loucks
Representative of Permitted Organization Criteria
Term expires January 31, 2027

Sheriff David Lucero
Representative of Past Criminal Justice Reform in Colorado
Term expires January 31, 2027

Dr. Alessio Luinetti
Representative of Issues Confronting Veterans
Term expires January 31, 2027

Skippy Upton Mesirow
Representative of Permitted Organization Criteria
Term expires January 31, 2029

Dr. Sue Sisley, M.D.
Representative of Mycology and Natural Medicine Cultivation
Term expires January 31, 2027

Billy Wynne, JD
Representative of Health Care Insurance and Healthcare Policy and Public Health, Drug Policy
and Harm Reduction
Term expires January 31, 2029

Natural Medicine Advisory Board 2023 and 2024 Activities

The Advisory Board first met on Thursday, April 13, 2023, to establish its by-Laws and organize its policy objectives' focus areas into six subcommittees. At the time of its first meeting, the Board was held to the Statutory Deadline of September 30, 2023, for its initial recommendations to DORA. See [12-170-105—Natural Medicine Advisory Board; Section \(5\)](#).

The program spent a total of 8 months in rulemaking, with 4 major periods of rulemaking divided among 8 hearings: 4 of which were stakeholder engagement meetings and 4 of which were permanent rulemaking hearings.

1. March - May 2024

- o Stakeholder Meeting on March 8
 - The purpose of this stakeholder meeting was for the Director of the Division of Professions and Occupations (“Director”) and the Program Director of the Colorado Natural Medicine Advisory Board (“Board”) to receive feedback regarding proposed new rules to implement Colorado Senate Bill 23-290. The Rules that were created for this meeting were Rules 1.1, 1.2, 1.3, 1.4, 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 2.8, 2.9, 3.1, 3.2, 3.3, 4.1, 5.1, 5.2, 5.3, 5.4, and 9
- o Permanent Rulemaking Hearing on May 3
 - The purpose of this stakeholder meeting was for the Director of the Division of Professions and Occupations (“Director”) and the Program Director of the Colorado Natural Medicine Advisory Board (“Board”) to receive feedback regarding proposed new rules to implement Colorado Senate Bill 23-290. The Rules that were created for this meeting were Rules 1.1, 1.2, 1.3, 1.4, 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 2.8, 2.9, 3.1, 3.2, 3.3, 4.1, 5.1, 5.2, 5.3, 5.4, and 9
- o These Rules were Adopted by the Director on May 10

- o These Rules Went into Effect on June 30
- 2. April - June 2024
 - o Stakeholder Meeting on April 26
 - The purpose of this stakeholder meeting was for the Director of the Division of Professions and Occupations (“Director”) and the Program Director of the Colorado Natural Medicine Advisory Board (“Board”) to receive feedback regarding proposed new rules 6- STANDARDS OF PRACTICE, and 7- ADVERTISEMENT
 - o Permanent Rulemaking Hearing on June 20
 - The purpose of this Permanent Rulemaking Hearing was to allow stakeholders a final opportunity to testify before the Director of the Division of Professions and Occupations (“Director”) decides whether to adopt proposed new rules 6- STANDARDS OF PRACTICE, and 7- ADVERTISEMENT
 - o These Rules were adopted by the Director on July 12
 - o These rules went into effect on September 14
- 3. May - July 2024
 - o Stakeholder Meeting on May 14
 - The purpose of this Stakeholder Meeting was for the Director of the Division of Professions and Occupations (“Director”) and the Program Director of the Colorado Natural Medicine Advisory Board (“Board”) to receive feedback regarding proposed new Rule 8(opens in new window) – DISCIPLINE/VIOLATIONS to implement Colorado Senate Bill 23-290(opens in new window).
 - o Permanent Rulemaking Hearing on July 8
 - The purpose of this Permanent Rulemaking Hearing was to allow stakeholders a final opportunity to testify before the Director of the Division of Professions and Occupations (“Director”) decides whether to adopt additions to Rule 1.4 - Definitions, new Section 6.22 – Data Collection, and proposed new Rule 8 – DISCIPLINE/VIOLATIONS to implement Colorado Senate Bill 23-290.
 - o These Rules were Adopted by the Director on July 26
 - o These Rules Went into Effect on September 14
- 4. September - November 2024
 - o Stakeholder Meeting September 25
 - The purpose of this Stakeholder Meeting was for the Director of the Division of Professions and Occupations (“Director”) to receive feedback regarding proposed revisions to Rules 2.1, 2.2, 2.5, 2.6, 2.7, 2.8, 2.9, 3.2, 3.3, 4.1, 5.3, 5.4, 6.3, 6.4, 6.5, 6.6, 6.9, 6.14, 6.15, 6.16, 6.17, 6.18, 8.1 &

8.2, and additions to Rules 1.4, 5 & 6. The purpose of the proposed revisions was to clarify and simplify the rules, correct clerical errors and address public safety concerns.

- o Permanent Rulemaking Hearing November 19
 - The purpose of this Permanent Rulemaking Hearing was to allow stakeholders a final opportunity before the Director of the Division of Professions and Occupations (“Director”) decides whether to adopt proposed revisions to Rules 2.1, 2.2, 2.5, 2.6, 2.7, 2.8, 2.9, 3.1, 3.2, 3.3, 4.1, 5.3, 5.4, 6.3, 6.4, 6.5, 6.6, 6.9, 6.14, 6.15, 6.16, 6.17, 6.18, 8.1 & 8.2, and additions to Rules 1.4, 5 & 6. The purpose of the proposed revisions was to clarify and simplify the rules, correct clerical errors and address public safety concerns.
- o These Rules were Adopted by the Director on December 12
- o These Rules will go into effect January 30, 2025

January 2024 Board Consolidated Recommendations

Overview

The Natural Medicine Advisory Board’s (Advisory Board or Board) initial recommendations document reflects the recommendations that the Advisory Board developed during more than 80 subcommittee and full board meetings held between April 13, 2023 and January 19, 2024. The Board's work is done pursuant to the Natural Medicine Health Act (Act), and the document was drafted to submit the Advisory Board’s recommendations to the Department of Regulatory Agencies (DORA) and to the Department of Revenue (DOR), as required by the Act.

Legislative Recommendations

Agency and legislative recommendations were made by the Advisory Board in 2024 as follows:

1. Board Data Collection Recommendation – 6-21-2024

The Combined Advisory Board approved this Recommendation on June 21, 2024, following their collective efforts to continue their collaborative discussions which spanned from April 13, 2023, to January 19, 2024, and resulting in Initial Recommendations submitted to the Natural Medicine Program, the Department of Regulatory Agencies (DORA) and the Department of Revenue (DOR) in January 2024.

The ongoing collaboration among the Advisory Board members continues to produce policy recommendations aimed at assisting the State Agencies in their establishment of a robust regulatory framework for the regulation of natural medicine within the State of Colorado. These recommendations are designed to ensure the safety, efficacy, and ethical standards of natural medicine practitioners in their provision of natural medicine services while also fostering a

balanced, regulated industry, through policy recommendations conducive to innovation, equity, and growth in the field over the coming years.

Natural Medicine Advisory Board Data Collection Recommendation -June 21st, 2024.

The state of Colorado has a unique opportunity to create a participant outcome database for those who receive natural medicines in the regulated market. This database will serve to reduce harm and maximize benefit for all Coloradans.

The subcommittee is strongly opposed to passing the burden of the cost of creating and maintaining such a participant outcome database on to the participants in the regulated program and deems of paramount importance having this database operational at program launch to ensure efficacious data collection and objective observation or initial facilitation.

As such, we strongly recommend that the Colorado Legislature allocate 1 million dollars initially to create and maintain such an outcome database, honoring the legislature's stated intent for Natural Medicine work to be publicly funded. The subcommittee strongly recommends that the legislature find a method for providing this funding in the near term. If such expediency is not possible, we ask you to allow the program to seek private funding to initiate the development of this registry so that it is in place when the regulated market launches in January of 2025, working with you to meet the intent of your desire for public funding as we do so.

We also strongly recommend that CDPHE oversee the development of such an outcome database and that development and oversight be contracted to individuals with expertise in this area, such as researchers who work for the major public universities in the State of Colorado, potentially creating a Request for Proposals for such a project.

The Advisory Board will continue to work on additional policy recommendations. Concurrently, the State Agencies will continue their respective rule-making processes, required by and subject to Colorado's Administrative Procedure Act, to promulgate rules on a timeline intended to ensure that licensure applications are open to the public prior to the statutory deadline of December 31, 2024.

We appreciate the opportunity to contribute to the regulatory process and invite any questions that may arise during the review of our recommendations. The Advisory Board remains committed to collaborating with your departments to enhance the regulatory landscape for natural medicine in our state.

2. Board Recommendation – Data Recommendation – 9-20-2024

This program affects public health in potentially positive and negative ways.

Therefore, the NMA Board recommends that CDPHE take on the statutory obligation to collect data on adverse health events, impacts to health care systems, consumer protection claims, and behavioral health impacts. This data

must include assessment of both positive health and negative health impacts associated with use of natural medicines.

We advocate that CDPHE issue a request for a quotation (RFQ) for collection of the data that clearly prioritizes 1) the capability of the vendor and 2) the ability to collect valid and actionable data.

At a minimum, this RFQ should request the need for a reliable and implementable registry administered to clients of the program, a dataset that can assess the behavioral health impacts, the health system impacts, and consumer claims.

These data must measure positive health impacts and negative public health impacts with the appropriate comparators to demonstrate the effect of this program on public health.

Finally, the cost of this data collection should not be passed onto licensees and their patients. Rather, as outlined in SB 23-290, it should be funded by the state of CO through a reliable vendor to minimize the risk of inaccurate or uninterpretable data that would be collected if DOR requirements do not have preferred provider, guidance, nor the optimal mechanism to collect these data.

Funding can be accomplished through an emergency amendment to the fiscal note for SB 23- 290 since this cost was not foreseen when that fiscal note was originally signed. Alternatively, collection of these data could be funded by philanthropic support for this state effort.

If CDPHE cannot currently receive external charitable funds, DOR should remedy this by drafting an emergency bill by Nov 1. DOR government relations department should identify a Bill Sponsor to file simple proposed language at the CO Assembly in January and this Bill could be fast-tracked through the legislative approval process and implemented immediately to coincide with launch of new psilocybin state regulated market.

Additional Board Recommendations

Following the Board's initial, consolidated recommendations approved in January 2024, the Board continued to meet and discuss additional recommendations throughout 2024. The Board approved two of additional recommendations between March and September 2024.

The ongoing collaboration among the Advisory Board members continues to produce policy recommendations aimed at assisting the State Agencies in their establishment of a robust regulatory framework for the regulation of natural medicine within the State of Colorado. These recommendations are designed to ensure the safety, efficacy, and ethical standards of natural medicine practitioners in their provision of natural medicine services while also fostering a balanced, regulated industry, through policy recommendations conducive to innovation, equity, and growth in the field over the coming years.

Data Collection

On June 21, 2024, the Board, via the Combined Subcommittee, approved the following recommendation language:

The state of Colorado has a unique opportunity to create a participant outcome database for those who receive natural medicines in the regulated market. This database will serve to reduce harm and maximize benefit for all Coloradans. The subcommittee is strongly opposed to passing the burden of the cost of creating and maintaining such a participant outcome database on to the participants in the regulated program and deems of paramount importance having this database operational at program launch to ensure efficacious data collection and objective observation or initial facilitation.

As such, we strongly recommend that the Colorado Legislature allocate 1 million dollars initially to create and maintain such an outcome database, honoring the legislature's stated intent for Natural Medicine work to be publicly funded. The subcommittee strongly recommends that the legislature find a method for providing this funding in the near term. If such expediency is not possible, we ask you to allow the program to seek private funding to initiate the development of this registry so that it is in place when the regulated market launches in January of 2025, working with you to meet the intent of your desire for public funding as we do so.

We also strongly recommend that CDPHE oversee the development of such an outcome database and that development and oversight be contracted to individuals with expertise in this area, such as researchers who work for the major public universities in the State of Colorado, potentially creating a Request for Proposals for such a project.

Health Equity Assessment

State should include a Health Equity Assessment in the annual report it is required to publish under section 12-170-105(1)(j) of the Natural Medicine Health Act that assesses access to Natural Medicine Services and licensure to participate in the delivery of such Services by underserved and marginalized communities, including those with below-average household income, those in or frontier rural areas, those with disabilities, indigenous peoples, racial and ethnic minorities, and those who identify as LGBTQIA+.

Possibly Develop a template to consider how future recommendations will impact equity.

DORA Implementation Update

Overview of the Board & Natural Medicine Program

The Office of Natural Medicine in the Division of Professions and Occupations (DPO), Department of Regulatory Agencies (DORA), has been tasked with issuing licenses to Facilitators and certifying Facilitator Training Programs to provide coursework, practicum and consultation to students preparing to qualify to be licensed as a Facilitator. Natural Medicine Advisory Board (NMAB) oversight falls under the Office of Natural Medicine's purview.

Federally Recognized American Tribes and Indigenous Communities Working Group

Establishing the Working Group

In January 2024, DORA published the online application for the Natural Medicine Health Act (NMHA) Federally Recognized American Tribes and Indigenous Communities Working Group and received 47 applications. The Natural Medicine Program Director and the Project Manager conducted first-round interviews with 24 applicants. DORA's Senior Advisor joined the Director and Project Manager for final interviews with 16 applicants. Nine applicants were invited by the Director to join the working group. Seven working group members identified as members of federally recognized Tribes and two members identified as Indigenous (not federally recognized). Five members were Colorado residents, and four members reside outside of Colorado.

On May 8, 2024, the first working group meeting took place and established a schedule of monthly meetings on the second Wednesday of each month. Working group members set out to review the themes listed in Section 6 of SB23-290 with one theme being explored at each month's meeting and written responses submitted in between meetings. Subject matter experts, scholarly articles, and community input have been included in the meeting discussions. The working group aims to produce a report with recommendations to the Natural Medicine Program Director and Advisory Board by March 2025.

Working Group Members

Commissioner, Thomas Allen
Sac and Fox Nation of Oklahoma, Northern Arapaho

Daniel Castro
Mestizo Kichwa from Ecuador

Katsi Cook
St. Regis Mohawk Tribe

Frank Dayish, Former President Navajo Nation
Navajo Nation
Gallop, New Mexico

Belinda P. Eriacho, MPH|MT
Navajo (Diné)

Dr. Santiago Ivan Guerra
Coahuiltecan and Chicano

Terry G. Knight, Sr.
Ute Mountain Ute

Marlena Robbins
Diné/Navajo

Councilman, Darwin Whiteman Jr.
Ute Mountain Ute Tribe

Draft Rules Proposed / Adopted

Rules and regulations to be adopted pursuant to the authority in sections 12-20-204 and 12-170-105(1)(a), C.R.S., and are intended to be consistent with the requirements of the State Administrative Procedure Act, sections 24-4-101, *et seq.*, C.R.S. (the “APA”), and the Natural Medicine Health Act of 2022 at sections 12-170-101, *et seq.* and 44-50-101, *et seq.*, C.R.S. (the “Practice Act”).

4 CCR 755-1-5 and section 9 Effective June 30, 2024

These rules and regulations shall govern the process to become licensed as a facilitator, to identify the requirements for approval of training programs for facilitators, and to identify the course content for training programs for facilitators in Colorado.

4 CCR 755-6-7 Effective September 14, 2024

Sections 6 and 7 of the Office of Natural Medicine Licensure’s rules are to effectuate the provisions of the Natural Medicine Health Act of 2022, sections 12-170-101, C.R.S., *et seq.*, regarding the regulation of licensed facilitators. Section 6 of the rules governs standards of practice applicable to Natural Medicine facilitators. Section 7 of the rules establishes requirements related to advertising by Natural Medicine facilitators.

4 CCR 755-6-7 Effective September 14, 2024

Additions to Rule 1.4, new Section 6.22 and new Rule 8 of the Office of Natural Medicine Licensure’s rules are to effectuate the provisions of the Natural Medicine Health Act of 2022, sections 12-170-101, C.R.S., *et seq.*, regarding the regulation of licensed facilitators. Section 8 of the rules establishes grounds for disciplinary violations and unlicensed practice applicable to Natural Medicine facilitators.

Permanent Rulemaking Hearing – November 19, 2024

Revisions to Rules 2.1, 2.2, 2.5, 2.6, 2.7, 2.8, 2.9, 3.2, 3.3, 4.1, 5.3, 5.4, 6.3, 6.4, 6.5, 6.6, 6.9, 6.14, 6.15, 6.16, 6.17, 6.18, 8.1 & 8.2, and additions to Rules 1.4, 5 & 6. to clarify and simplify the rules, correct clerical errors and address public safety concerns.

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DOR Implementation Update

Overview of the Regulated Natural Medicine Program

The Department of Revenue State Licensing Authority and Natural Medicine Division (together, “Division”) are tasked with regulating and licensing Healing Centers, Natural Medicine Cultivation Facilities, Natural Medicine Product Manufacturers, and Natural Medicine Testing Facilities on or before December 31, 2024. Additionally, the Natural Medicine Code, at sections 44-50-101 *et seq.*, C.R.S., mandates that the Division:

- Establish a testing program, in coordination with the Department of Public Health & Environment;
- Collect and report available data related to law enforcement incidents, adverse health events, healthcare system impacts, consumer protection claims, and behavioral health impacts;
- Create and distribute public education campaigns;
- Provide training materials for first and multi-responders; and
- Publish annually a public report concerning the implementation and administration of the Natural Medicine Code, in coordination with the Department of Regulatory Agencies.

Starting in July 2023, the Division began initial implementation work including, but not limited to, stakeholder engagements, and public outreach and coordination with partner state agencies, local authorities, law enforcement, and first responders. This work included evaluating mandatory responsibilities related to data collection and reporting, creation of public education materials, and providing training materials and resources for first responders, in addition to preparing initial rules and regulations.

The Division began accepting license applications for Natural Medicine Handler (employee) licenses, Owner licenses, and Natural Medicine Business licenses on December 31, 2024.

Stakeholder Engagement

Prior to initiating rulemaking, the Division held 11 public [Listening Sessions](#), which included participation by experts from the Colorado Department of Public Health and Environment, first and multi-responders, psilocybin (aka magic mushrooms) cultivators and manufacturers operating in Oregon and the personal use space, therapists interested in using this new healing modality in their current practices, and other advocates and citizens interested in the new regulatory programs.

Leading up to the Listening Sessions, the Division also attended and engaged with local authorities at the 2023 Colorado Counties Incorporated conference and the 2023 Fall Colorado Municipal Clerks Association conference. Following initial rulemaking work, the Division hosted two virtual Local Roundtables on [July 11, 2024](#) and [October 30, 2024](#) with local officials from across the state. Both roundtables were open to members of the public to attend and listen, and were recorded. In addition to the Local Roundtables, the Division has coordinated with and

educated local jurisdictions regarding changes in the law through outreach efforts to share information about the Division's implementation work.

Further, throughout 2023 and 2024, the Division attended eight regional meetings of law enforcement leaders across the state to inform Colorado's local and state law enforcement about the changes in the law regarding natural medicine, the Division's role in the regulatory program, and to answer questions or concerns from local law enforcement leaders. These meetings included small group regional meetings, the Colorado Chiefs of Police Association meeting, and the County Sheriffs of Colorado annual conference.

Finally, the Division hosted an [Interested Applicant Forum](#) on Wednesday, November 12, 2024, followed by an informal networking event. The forum served as a touch point with folks interested in applying for a regulated natural medicine business license and to walk through expectations for the license application process. The purpose of the informal networking event was to connect potential licensees with each other as everyone prepares to begin operations in 2025.

Data Collection & Reporting

In Fall 2023, the Division gathered state agency partners from a variety of departments to begin coordination efforts related to the Natural Medicine Code's directive to the Division:

The state licensing authority, in coordination with other relevant agencies, shall request available and relevant data concerning law enforcement incidences, adverse health events, impacts to health-care systems, consumer protection claims, and behavioral health impacts related to natural medicine, natural medicine product, and natural medicine businesses.

This group of state agency partners included representatives from the Department of Public Health & Environment, Behavioral Health Administration, Department of Regulatory Agencies, Office of Economic Development & International Trade, Department of Public Safety, Department of Transportation, and the Colorado Attorney General's Office and met throughout 2023 and 2024 to continue progressing the Division's efforts to:

- i) identify relevant data being collected by state agencies;
- ii) determine whether and how this data is currently reported;
- iii) coordinate information and data sharing as required and needed for the Division to fulfill the statutory mandate; and
- iv) evaluate opportunities to improve state data collection related to natural medicines.

The Division is on track to fulfill the data collection and reporting mandate. The Division is developing a report template, which will be utilized each year to publish the report on the Division's website.

Public Education Materials & Training Materials for First Responders

The Natural Medicine Code, at sections 44-50-101 *et seq.*, C.R.S., requires the State Licensing Authority and Division to

Develop and promote accurate public education campaigns related to the use of natural medicine or natural medicine product, including public service announcements, educational materials, and appropriate crisis response materials, and develop and promote training materials for first responders and multi-responders, including law enforcement, emergency medical providers, social services providers, and fire fighters.

In early 2024, the Division published and distributed the first public education resource, a [“Know the Law” pamphlet](#), which is available in print and web versions and in Spanish and English. All versions are available in the [Division's Public Resources Folder](#).

The Division also routinely distributes and promotes these resources at meetings with local law enforcement and first responders to support their understanding of the changes in the law and to share within their communities.

Additionally, the Division created a number of resources for both the regulated natural medicine program and personal use provisions, which are all available on the [Division's website](#).

Rulemaking

Process Overview

In March, the State Licensing Authority [initiated the first rulemaking process](#) to implement SB 23-290 by filing the Notice of Permanent Rulemaking Hearing with the Secretary of State's Office. The permanent rulemaking process focused on mandatory implementation requirements as outlined in the Natural Medicine Code at sections 44-50-101 *et seq.*, C.R.S. The State Licensing Authority adopted the first set of permanent rules on August 6, 2024 - the rules took effect on October 1, 2024.

In August, the State Licensing Authority [initiated the fee rulemaking process](#) to establish application, license, and renewal fees, as directed in sections 44-50-203 and 44-50-601, C.R.S., by filing a second Notice of Permanent Rulemaking Hearing with the Secretary of State's Office. The State Licensing Authority adopted final fees on October 25, 2024 - the fee rule took effect on December 15, 2024 representing the [final, comprehensive rules](#).

Between the two rulemaking proceedings, the Division held 11 public meetings covering every rule drafted and revised between March 2024 and October 2024. Each meeting was recorded and stakeholders had multiple opportunities to make as many public comments as they wished. Stakeholders who engaged in the rulemaking meetings brought ranges of experience and familiarity with the psilocybin and natural medicine space including:

- Natural Medicine Advisory Board Subcommittee advisors and participants (non-Board members);
- Proposition 122 advocates and drafters;
- Oregon licensed operators providing testing, cultivation, and manufacturing insights;
- Future facilitators;
- Future natural medicine business applicants and licensees; and
- Community advocates (including advocates for rural access, youth prevention, and healthcare and hospital officials).

Initial Rules

The final rules outline the license application process and the requirements to own, operate, and work at a natural medicine business. These include:

- Application requirements, including required fees;
- Location requirements;
- Safety and security;
- Operation standards and expectations;
- Permitted product types
- Regulated natural medicine required testing;
- Requirements for testing facilities (in coordination with CDPHE);
- Recordkeeping;
- Inventory tracking; and
- Procedures and penalties for state and rule violations.

Further the rules implement areas of mandatory rulemaking in section 44-50-203, C.R.S., which set expectations for how licenses will be maintained and operated.

Incorporated Board Recommendations

The Division attended every full Natural Medicine Advisory Board (Board) and subcommittee meeting in 2023 leading up to the Board's initial consolidated recommendations, approved at the January 2024 Board meeting. The Division took those recommendations (directed to the Department of Revenue) and the Department of Revenue's regulatory responsibilities to inform the initial rules.

The Board's five subcommittees each provided recommendations, and the Division addressed a majority of the recommendations in the final rules.

Natural Medicine Advisory Board Recommendations Incorporated in Division Rules

Board Subcommittee	# of Recommendations*	# of Recommendations Incorporated into DOR Rules**
Qualifications, Licensing, and Training	2	1
Products, Research, and Data	35	31
Emergency Response, Safety, and Ethics	103	80
Public Health and Health Equity	14	9
Indigenous and Religious Use and Outreach	2	n/a***

** Please note: The Division considered each substantive requirement recommended by the Board as a unique recommendation for purposes of evaluating how many recommendations were directed to the Department of Revenue.*

*** Please note: Some recommendations are not reflected verbatim in the final rules; rather, recommendations were adapted as necessary and informed by stakeholder feedback and those recommendations reflected as “incorporated” could be partially incorporated or contemplated in the final rules.*

**** Please note: The Indigenous and Religious Use and Outreach subcommittee’s recommendations relevant to the Division’s implementation work were not rule-specific.*

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Where the Agencies Are Now & The Work Ahead

License Applications

On December 31, 2024, DORA and DOR began accepting applications for facilitator, healing center, cultivation, products manufacturing, and testing facility licenses. As of the publication of this report, the agencies have received the following applications:¹

DORA Licensing Applications

License Type	Number of Complete Applications Received	Number of Approved Applications
Facilitator Training Program	16	11
Facilitator	6	2
Clinical Facilitator	0	0

DOR Licensing Applications

License Type	Number of Applications Received	Number of Approved Applications
Natural Medicine Handler	11	0
Owner	23	0
Healing Center	6 standard 3 micro	0
Cultivation Facility	5 standard 1 micro	0
Products Manufacturer	2	0
Testing Facility	1	0

¹ As of January 30, 2025.

Attachments

The following attachments are included for reference and are neither required to be included in this report nor endorsed by the agencies.

Attachment 1: Proposition 122

Be it Enacted by the People of the State of Colorado:

SECTION 1. In Colorado Revised Statutes, **add** Article 170 to Title 12 as follows:

ARTICLE 170

NATURAL MEDICINE HEALTH ACT of 2022

12-170-101. Short title. THE SHORT TITLE OF THIS ARTICLE 170 IS THE “NATURAL MEDICINE HEALTH ACT OF 2022.”

12-170-102. Legislative declaration. (1) THE VOTERS OF THE STATE OF COLORADO FIND AND DECLARE THAT:

(a) COLORADO’S CURRENT APPROACH TO MENTAL HEALTH HAS FAILED TO FULFILL ITS PROMISE. COLORADANS DESERVE MORE TOOLS TO ADDRESS MENTAL HEALTH ISSUES, INCLUDING APPROACHES SUCH AS NATURAL MEDICINES THAT ARE GROUNDED IN TREATMENT, RECOVERY, HEALTH, AND WELLNESS RATHER THAN CRIMINALIZATION, STIGMA, SUFFERING, AND PUNISHMENT.

(b) COLORADANS ARE EXPERIENCING PROBLEMATIC MENTAL HEALTH ISSUES, INCLUDING BUT NOT LIMITED TO SUICIDALITY, ADDICTION, DEPRESSION, AND ANXIETY.

(c) AN EXTENSIVE AND GROWING BODY OF RESEARCH IS ADVANCING TO SUPPORT THE EFFICACY OF NATURAL MEDICINES COMBINED WITH PSYCHOTHERAPY AS TREATMENT FOR DEPRESSION, ANXIETY, SUBSTANCE USE DISORDERS, END-OF-LIFE DISTRESS, AND OTHER CONDITIONS.

(d) THE FEDERAL GOVERNMENT WILL TAKE YEARS TO ACT AND COLORADANS DESERVE THE RIGHT TO ACCESS NATURAL MEDICINES NOW.

(e) NATURAL MEDICINES HAVE BEEN USED SAFELY FOR MILLENNIA BY CULTURES FOR HEALING.

(f) 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.

(g) THE CITY AND COUNTY OF DENVER VOTERS ENACTED ORDINANCE 301 IN MAY 2019 TO MAKE THE ADULT PERSONAL POSSESSION AND USE OF THE NATURAL MEDICINE PSILOCYBIN THE LOWEST LAW ENFORCEMENT PRIORITY IN THE CITY AND COUNTY OF DENVER AND TO PROHIBIT THE CITY AND COUNTY FROM SPENDING RESOURCES ON ENFORCING RELATED PENALTIES.

(h) OREGON VOTERS ENACTED MEASURE 109 IN OREGON IN NOVEMBER 2020 TO ESTABLISH A REGULATED SYSTEM OF DELIVERING A NATURAL MEDICINE, IN PART TO PROVIDE PEOPLE ACCESS TO PSILOCYBIN FOR THERAPEUTIC PURPOSES.

(i) CRIMINALIZING NATURAL MEDICINES HAS DENIED PEOPLE FROM ACCESSING ACCURATE EDUCATION AND HARM REDUCTION INFORMATION RELATED TO THE USE OF NATURAL MEDICINES, AND LIMITED THE DEVELOPMENT OF APPROPRIATE TRAINING FOR FIRST-AND MULTI-RESPONDERS INCLUDING LAW ENFORCEMENT, EMERGENCY MEDICAL SERVICES, SOCIAL SERVICES, AND FIRE SERVICES.

(j) THE PURPOSE OF THIS NATURAL MEDICINE HEALTH ACT OF 2022 IS TO ESTABLISH A NEW, COMPASSIONATE, AND EFFECTIVE APPROACH TO NATURAL MEDICINES BY:

(I) ADOPTING A PUBLIC HEALTH AND HARM REDUCTION APPROACH TO NATURAL MEDICINES BY REMOVING CRIMINAL PENALTIES FOR PERSONAL USE FOR ADULTS TWENTY-ONE YEARS OF AGE AND OLDER;

(II) DEVELOPING AND PROMOTING PUBLIC EDUCATION RELATED TO THE USE OF NATURAL MEDICINES AND APPROPRIATE TRAINING FOR FIRST RESPONDERS; AND

(III) ESTABLISHING REGULATED ACCESS BY ADULTS TWENTY-ONE YEARS OF AGE AND OLDER TO NATURAL MEDICINES THAT SHOW PROMISE IN IMPROVING WELL-BEING, LIFE SATISFACTION, AND OVERALL HEALTH.

(k) THE PROVISIONS OF THIS ARTICLE 170 SHALL BE INTERPRETED CONSISTENTLY WITH THE FINDINGS AND PURPOSES STATED IN THIS SECTION AND SHALL NOT BE LIMITED BY ANY COLORADO LAW THAT COULD CONFLICT WITH OR BE INTERPRETED TO CONFLICT WITH THE PURPOSES AND POLICY OBJECTIVES STATED IN THIS SECTION.

(l) THE PEOPLE OF THE STATE OF COLORADO FURTHER FIND AND DECLARE THAT IT IS NECESSARY TO ENSURE CONSISTENCY AND FAIRNESS IN THE APPLICATION OF THIS ARTICLE 170 THROUGHOUT THE STATE AND THAT, THEREFORE, THE MATTERS ADDRESSED BY THIS ARTICLE 170 ARE, EXCEPT AS SPECIFIED HEREIN, MATTERS OF STATEWIDE CONCERN.

12-170-103. Definitions. (1) AS USED IN THIS ARTICLE 170, UNLESS THE CONTEXT OTHERWISE REQUIRES:

(a) “ADMINISTRATION SESSION” MEANS A SESSION HELD AT A HEALING CENTER OR ANOTHER LOCATION AS PERMITTED BY RULES ADOPTED BY THE DEPARTMENT AT WHICH A PARTICIPANT PURCHASES, CONSUMES, AND EXPERIENCES THE EFFECTS OF A NATURAL MEDICINE UNDER THE SUPERVISION OF A FACILITATOR.

(b) “DEPARTMENT” MEANS THE DEPARTMENT OF REGULATORY AGENCIES.

(c) “FACILITATOR” MEANS A PERSON LICENSED BY THE DEPARTMENT WHO:

(I) IS TWENTY-ONE YEARS OF AGE OR OLDER.

(II) HAS AGREED TO PROVIDE NATURAL MEDICINE SERVICES TO A PARTICIPANT.

(III) HAS MET THE REQUIREMENTS ESTABLISHED BY THE DEPARTMENT.

(d) “HEALING CENTER” MEANS AN ENTITY LICENSED BY THE DEPARTMENT THAT IS ORGANIZED AND OPERATED AS A PERMITTED ORGANIZATION:

(I) THAT ACQUIRES, POSSESSES, CULTIVATES, MANUFACTURES, DELIVERS, TRANSFERS, TRANSPORTS, SUPPLIES, SELLS, OR DISPENSES NATURAL MEDICINE AND RELATED SUPPLIES; OR PROVIDES NATURAL MEDICINE FOR NATURAL MEDICINE SERVICES AT LOCATIONS PERMITTED BY THE DEPARTMENT; OR ENGAGES IN TWO OR MORE OF THESE ACTIVITIES;

(II) WHERE ADMINISTRATION SESSIONS ARE HELD; OR

(III) WHERE NATURAL MEDICINE SERVICES ARE PROVIDED BY A FACILITATOR.

(e) “HEALTH-CARE FACILITY” MEANS A HOSPITAL, HOSPICE, COMMUNITY MENTAL HEALTH CENTER, FEDERALLY QUALIFIED HEALTH CENTER, RURAL HEALTH CLINIC, PACE ORGANIZATION, LONG-TERM CARE FACILITY, A CONTINUING CARE RETIREMENT COMMUNITY, OR OTHER TYPE OF FACILITY WHERE HEALTH-CARE IS PROVIDED.

(f) “INTEGRATION SESSION” MEANS A MEETING BETWEEN A PARTICIPANT AND FACILITATOR THAT OCCURS AFTER THE PARTICIPANT HAS COMPLETED AN ADMINISTRATION SESSION.

(g) “LOCALITY” MEANS A COUNTY, MUNICIPALITY, OR CITY AND COUNTY.

(h) “NATURAL MEDICINE” MEANS THE FOLLOWING SUBSTANCES IN ANY FORM THAT WOULD CAUSE SUCH PLANT OR FUNGUS TO BE DESCRIBED IN THE “UNIFORM CONTROLLED SUBSTANCES ACT OF 2013”, ARTICLE 18 OF TITLE 18: DIMETHYLTRYPTAMINE; IBOGAINE; Mescaline (EXCLUDING LOPHOPHORA WILLIAMSII (“PEYOTE”)); PSILOCYBIN; OR PSILOCYN.

(i) “NATURAL MEDICINE SERVICES” MEANS SERVICES PROVIDED BY A FACILITATOR OR OTHER AUTHORIZED PERSON TO A PARTICIPANT BEFORE, DURING, AND AFTER THE PARTICIPANT’S CONSUMPTION OF NATURAL MEDICINE, INCLUDING, AT A MINIMUM AT:

(I) A PREPARATION SESSION;

(II) AN ADMINISTRATION SESSION; AND

(III) AN INTEGRATION SESSION.

(j) “PARTICIPANT” MEANS A PERSON TWENTY-ONE YEARS OF AGE OR OLDER WHO RECEIVES NATURAL MEDICINE SERVICES.

(k) “PERMITTED ORGANIZATION” MEANS ANY LEGAL ENTITY REGISTERED AND QUALIFIED TO DO BUSINESS IN THE STATE OF COLORADO THAT MEETS THE STANDARDS SET BY THE DEPARTMENT UNDER SECTION 12-170-104.

(1) “PREPARATION SESSION” MEANS A MEETING BETWEEN A PARTICIPANT AND A FACILITATOR THAT OCCURS BEFORE THE PARTICIPANT PARTICIPATES IN THE ADMINISTRATION SESSION.

12-170-104. Regulated natural medicine access program. (1) THE REGULATED NATURAL MEDICINE ACCESS PROGRAM IS ESTABLISHED AND THE DEPARTMENT SHALL REGULATE THE MANUFACTURE, CULTIVATION, TESTING, STORAGE, TRANSFER, TRANSPORT, DELIVERY, SALE, AND PURCHASE OF NATURAL MEDICINES BY AND BETWEEN HEALING CENTERS AND OTHER PERMITTED ENTITIES AND THE PROVISION OF NATURAL MEDICINE SERVICES TO PARTICIPANTS.

(2) NOT LATER THAN JANUARY 1, 2024, THE DEPARTMENT SHALL ADOPT RULES TO ESTABLISH THE QUALIFICATIONS, EDUCATION, AND TRAINING REQUIREMENTS THAT FACILITATORS MUST MEET PRIOR TO PROVIDING NATURAL MEDICINE SERVICES, AND TO APPROVE ANY REQUIRED TRAINING PROGRAMS.

(3) NOT LATER THAN SEPTEMBER 30, 2024, THE DEPARTMENT SHALL ADOPT RULES NECESSARY TO IMPLEMENT THE REGULATED NATURAL MEDICINE ACCESS PROGRAM AND SHALL BEGIN ACCEPTING APPLICATIONS FOR LICENSURE BY THAT DATE WITH DECISIONS MADE ON ALL LICENSING APPLICATIONS WITHIN 60 DAYS OF RECEIVING THE APPLICATION.

(4) FOR PURPOSES OF THE REGULATED NATURAL MEDICINE ACCESS PROGRAM SET FORTH IN THIS SECTION:

(a) UNTIL JUNE 1, 2026, THE TERM NATURAL MEDICINE SHALL ONLY INCLUDE PSILOCYBIN AND PSILOCYN.

(b) AFTER JUNE 1, 2026, IF RECOMMENDED BY THE NATURAL MEDICINE ADVISORY BOARD, THE DEPARTMENT MAY ADD ONE OR MORE OF THE FOLLOWING TO THE TERM NATURAL MEDICINE: DIMETHYLTRYPTAMINE; IBOGAINE; AND Mescaline (EXCLUDING LOPHOPHORA WILLIAMSII (“PEYOTE”)).

(c) THE DEPARTMENT MAY PREPARE PROPOSED RULES FOR THE ADDITION OF DIMETHYLTRYPTAMINE; IBOGAINE; AND Mescaline (EXCLUDING LOPHOPHORA WILLIAMSII (“PEYOTE”)) TO THE TERM NATURAL MEDICINE PRIOR TO JUNE 1, 2026, IN THE EVENT THAT DIMETHYLTRYPTAMINE; IBOGAINE; OR Mescaline (EXCLUDING LOPHOPHORA WILLIAMSII (“PEYOTE”)) IS ADDED TO THE TERM NATURAL MEDICINE UNDER SUBSECTION (4)(b) OF THIS SECTION.

(5) IN CARRYING OUT ITS DUTIES UNDER THIS ARTICLE 170, THE DEPARTMENT SHALL CONSULT WITH THE NATURAL MEDICINE ADVISORY BOARD AND MAY ALSO CONSULT WITH OTHER STATE AGENCIES OR ANY OTHER INDIVIDUAL OR ENTITY THE DEPARTMENT FINDS NECESSARY.

(6) THE RULES ADOPTED BY THE DEPARTMENT SHALL INCLUDE, BUT ARE NOT LIMITED TO, RULES TO:

(a) ESTABLISH THE REQUIREMENTS GOVERNING THE SAFE PROVISION OF NATURAL MEDICINE SERVICES TO PARTICIPANTS THAT INCLUDE:

(I) HOLDING AND VERIFYING COMPLETION OF A PREPARATION SESSION, AN ADMINISTRATION SESSION, AND AN INTEGRATION SESSION.

(II) HEALTH AND SAFETY WARNINGS THAT MUST BE PROVIDED TO PARTICIPANTS BEFORE NATURAL MEDICINE SERVICES BEGIN.

(III) EDUCATIONAL MATERIALS THAT MUST BE PROVIDED TO PARTICIPANTS BEFORE NATURAL MEDICINE SERVICES BEGIN.

(IV) THE FORM THAT EACH FACILITATOR, PARTICIPANT, AND AUTHORIZED REPRESENTATIVE OF A HEALING CENTER MUST SIGN BEFORE PROVIDING OR RECEIVING NATURAL MEDICINE SERVICES VERIFYING THAT THE PARTICIPANT WAS PROVIDED ACCURATE AND COMPLETE HEALTH INFORMATION AND INFORMED OF IDENTIFIED RISK FACTORS AND CONTRAINDICATIONS.

(V) PROPER SUPERVISION DURING THE ADMINISTRATION SESSION AND SAFE TRANSPORTATION FOR THE PARTICIPANT WHEN THE SESSION IS COMPLETE.

(VI) PROVISIONS FOR GROUP ADMINISTRATION SESSIONS WHERE ONE OR MORE FACILITATORS PROVIDE NATURAL MEDICINE SERVICES TO MORE THAN ONE PARTICIPANT AS PART OF THE SAME ADMINISTRATION SESSION.

(VII) PROVISIONS TO ALLOW A FACILITATOR OR A HEALING CENTER TO REFUSE TO PROVIDE NATURAL MEDICINE SERVICES TO A PARTICIPANT.

(VIII) THE REQUIREMENTS AND STANDARDS FOR INDEPENDENT TESTING OF NATURAL MEDICINE FOR CONCENTRATION AND CONTAMINANTS, TO THE EXTENT AVAILABLE TECHNOLOGY REASONABLY PERMITS.

(IX) THE LICENSURE OF ENTITIES PERMITTED TO ENGAGE IN THE TESTING OF NATURAL MEDICINE FOR USE IN NATURAL MEDICINE SERVICES OR OTHERWISE.

(X) THE STANDARDS FOR ADVERTISING AND MARKETING NATURAL MEDICINE AND NATURAL MEDICINE SERVICES.

(XI) THE STANDARDS FOR QUALIFICATION AS A PERMITTED ORGANIZATION ADDRESSING, WITHOUT LIMITATION, ENVIRONMENTAL, SOCIAL, AND GOVERNANCE CRITERIA DIRECTED TO THE FINDINGS AND DECLARATIONS SET FORTH IN SECTION 12-170-102.

(b) ESTABLISH THE REQUIREMENTS GOVERNING THE LICENSING AND PRACTICE OF FACILITATORS THAT INCLUDE:

(I) THE FORM AND CONTENT OF LICENSE AND RENEWAL APPLICATIONS FOR FACILITATORS SUBMITTED UNDER THIS ARTICLE 170.

(II) THE QUALIFICATIONS, EDUCATION, AND TRAINING REQUIREMENTS THAT FACILITATORS MUST MEET PRIOR TO PROVIDING NATURAL MEDICINE SERVICES. THE REQUIREMENTS SHALL:

(A) BE TIERED SO AS TO REQUIRE VARYING LEVELS OF EDUCATION AND TRAINING DEPENDING ON THE PARTICIPANTS THE FACILITATOR WILL BE WORKING WITH AND THE SERVICES THE FACILITATOR WILL BE PROVIDING.

(B) INCLUDE EDUCATION AND TRAINING ON CLIENT SAFETY; CONTRAINDICATIONS; MENTAL HEALTH; MENTAL STATE; PHYSICAL HEALTH; PHYSICAL STATE; SOCIAL AND CULTURAL CONSIDERATIONS; PHYSICAL ENVIRONMENT; PREPARATION; INTEGRATION; AND ETHICS.

(C) ALLOW FOR LIMITED WAIVERS OF EDUCATION AND TRAINING REQUIREMENTS BASED ON AN APPLICANT'S PRIOR EXPERIENCE, TRAINING, OR SKILL, INCLUDING, BUT NOT LIMITED TO, WITH NATURAL MEDICINES.

(D) NOT IMPOSE UNREASONABLE FINANCIAL OR LOGISTICAL BARRIERS THAT MAKE OBTAINING A FACILITATOR LICENSE COMMERCIALY UNREASONABLE FOR LOW INCOME PEOPLE OR OTHER APPLICANTS.

(E) NOT REQUIRE A PROFESSIONAL LICENSE OR PROFESSIONAL DEGREE OTHER THAN A FACILITATOR LICENSE GRANTED PURSUANT TO THIS SECTION.

(F) ALLOW FOR PAID COMPENSATION FOR NATURAL MEDICINE SERVICES.

(G) ALLOW FOR THE PROVISION OF NATURAL MEDICINE SERVICES TO MORE THAN ONE PARTICIPANT AT A TIME IN GROUP ADMINISTRATION SESSIONS.

(III) OVERSIGHT AND SUPERVISION REQUIREMENTS FOR FACILITATORS, INCLUDING PROFESSIONAL RESPONSIBILITY STANDARDS AND CONTINUING EDUCATION REQUIREMENTS.

(IV) A COMPLAINT, REVIEW, AND DISCIPLINARY PROCESS FOR FACILITATORS WHO ENGAGE IN MISCONDUCT.

(V) RECORDKEEPING, PRIVACY, AND CONFIDENTIALITY REQUIREMENTS FOR FACILITATORS, PROVIDED SUCH RECORD KEEPING DOES NOT RESULT IN THE DISCLOSURE TO THE PUBLIC OR ANY GOVERNMENT AGENCY OF PERSONALLY IDENTIFIABLE INFORMATION OF PARTICIPANTS.

(VI) PROCEDURES FOR SUSPENDING OR REVOKING THE LICENSES OF FACILITATORS WHO VIOLATE THE PROVISIONS OF THIS ARTICLE 170 OR THE RULES ADOPTED BY THE DEPARTMENT.

(c) ESTABLISH THE REQUIREMENTS GOVERNING THE LICENSING AND OPERATION OF HEALING CENTERS THAT INCLUDE:

(I) QUALIFICATIONS FOR LICENSURE AND RENEWAL.

(II) OVERSIGHT REQUIREMENTS FOR HEALING CENTERS.

(III) RECORDKEEPING, PRIVACY, AND CONFIDENTIALITY REQUIREMENTS FOR HEALING CENTERS, PROVIDED SUCH RECORD KEEPING DOES NOT RESULT IN THE DISCLOSURE TO THE PUBLIC OR ANY GOVERNMENT AGENCY OF PERSONALLY IDENTIFIABLE INFORMATION OF PARTICIPANTS.

(IV) SECURITY REQUIREMENTS FOR HEALING CENTERS, INCLUDING REQUIREMENTS FOR PROTECTION OF EACH LICENSED HEALING CENTER LOCATION BY A FULLY OPERATIONAL SECURITY ALARM SYSTEM.

(V) PROCEDURES FOR SUSPENDING OR REVOKING THE LICENSES OF HEALING CENTERS THAT VIOLATE THE PROVISIONS OF THIS ARTICLE 170 OR THE RULES ADOPTED BY THE DEPARTMENT.

(VI) PERMISSIBLE FINANCIAL RELATIONSHIPS BETWEEN LICENSED HEALING CENTERS, FACILITATORS, AND OTHER ENTITIES.

(VII) PROCEDURES AND POLICIES THAT ALLOW FOR HEALING CENTERS TO RECEIVE PAYMENT FOR SERVICES AND NATURAL MEDICINES PROVIDED.

(VIII) PROCEDURES AND POLICIES TO ENSURE STATEWIDE ACCESS TO HEALING CENTERS AND NATURAL MEDICINE SERVICES.

(IX) RULES THAT PROHIBIT AN INDIVIDUAL FROM HAVING A FINANCIAL INTEREST IN MORE THAN FIVE HEALING CENTERS.

(X) RULES THAT ALLOW FOR HEALING CENTERS TO SHARE THE SAME PREMISES WITH OTHER HEALING CENTERS OR TO SHARE THE SAME PREMISES WITH HEALTH-CARE FACILITIES.

(XI) RULES THAT ALLOW FOR LOCATIONS NOT OWNED BY A HEALING CENTER WHERE NATURAL MEDICINE SERVICES MAY BE PROVIDED BY LICENSED FACILITATORS, INCLUDING BUT NOT LIMITED TO, HEALTH-CARE FACILITIES AND PRIVATE RESIDENCES.

(d) ESTABLISH PROCEDURES, POLICIES, AND PROGRAMS TO ENSURE THE REGULATORY ACCESS PROGRAM IS EQUITABLE AND INCLUSIVE AND TO PROMOTE THE LICENSING OF AND THE PROVISION OF NATURAL MEDICINE SERVICES TO PERSONS FROM COMMUNITIES THAT HAVE BEEN DISPROPORTIONATELY HARMED BY HIGH RATES OF CONTROLLED SUBSTANCES ARRESTS; TO PERSONS WHO FACE BARRIERS TO ACCESS TO HEALTH CARE; TO PERSONS WHO HAVE A TRADITIONAL OR INDIGENOUS HISTORY WITH NATURAL MEDICINES; OR TO PERSONS WHO ARE VETERANS THAT INCLUDE, BUT ARE NOT LIMITED TO:

(I) REDUCED FEES FOR LICENSURE AND FACILITATOR TRAINING.

(II) INCENTIVIZING THE PROVISION OF NATURAL MEDICINE SERVICES AT A REDUCED COST TO LOW INCOME INDIVIDUALS.

(III) INCENTIVIZING GEOGRAPHIC AND CULTURAL DIVERSITY IN LICENSING AND THE PROVISION AND AVAILABILITY OF NATURAL MEDICINE SERVICES.

(VI) A PROCESS FOR ANNUALLY REVIEWING THE EFFECTIVENESS OF SUCH POLICIES AND PROGRAMS PROMULGATED UNDER THIS SUBSECTION (6)(d).

(e) ESTABLISH APPLICATION, LICENSING, AND RENEWAL FEES FOR HEALING CENTER AND FACILITATOR LICENSES. THE FEES SHALL BE:

(I) SUFFICIENT, BUT SHALL NOT EXCEED THE AMOUNT NECESSARY, TO COVER THE COST OF ADMINISTERING THE REGULATED NATURAL MEDICINE ACCESS PROGRAM, INCLUDING THE REGULATED NATURAL MEDICINE ACCESS PROGRAM FUND IN 12-170-106.

(II) FOR LICENSING AND RENEWAL FEES, SCALED BASED ON EITHER THE VOLUME OF BUSINESS OF THE LICENSEE OR THE GROSS ANNUAL REVENUE OF THE LICENSEE.

(f) DEVELOP AND PROMOTE ACCURATE PUBLIC EDUCATION CAMPAIGNS RELATED TO THE USE OF NATURAL MEDICINE, INCLUDING BUT NOT LIMITED TO PUBLIC SERVICE ANNOUNCEMENTS, EDUCATIONAL CURRICULA, AND APPROPRIATE CRISIS RESPONSE, AND APPROPRIATE TRAINING FOR FIRST-AND MULTI-RESPONDERS INCLUDING LAW ENFORCEMENT, EMERGENCY MEDICAL SERVICES, SOCIAL SERVICES, AND FIRE SERVICES.

(g) STUDY AND DELIVER RECOMMENDATIONS TO THE LEGISLATURE REGARDING THE REGULATION OF DOSAGE FOR OFF-SITE USE OF NATURAL MEDICINES.

(h) COLLECT AND ANNUALLY PUBLISH DATA ON THE IMPLEMENTATION AND OUTCOMES OF THE REGULATED NATURAL MEDICINE ACCESS PROGRAM IN ACCORDANCE WITH GOOD DATA AND PRIVACY PRACTICES AND THAT DOES NOT DISCLOSE ANY IDENTIFYING INFORMATION ABOUT INDIVIDUAL LICENSEES OR PARTICIPANTS.

(i) ADOPT, AMEND, AND REPEAL RULES AS NECESSARY TO IMPLEMENT THE REGULATED NATURAL MEDICINE ACCESS PROGRAM AND TO PROTECT THE PUBLIC HEALTH AND SAFETY.

(7) PARTICIPANT RECORDS COLLECTED AND MAINTAINED BY HEALING CENTERS, FACILITATORS, REGISTERED ENTITIES, OR THE DEPARTMENT SHALL CONSTITUTE MEDICAL DATA AS DEFINED BY SECTION 24-72-204 (3)(a)(I) AND ARE NOT PUBLIC RECORDS SUBJECT TO DISCLOSURE.

(8) THE DEPARTMENT SHALL HAVE THE AUTHORITY TO CREATE AND ISSUE ANY ADDITIONAL TYPES OF LICENSES AND REGISTRATIONS IT DEEMS NECESSARY TO CARRY OUT THE INTENTS AND PURPOSES OF THE REGULATED NATURAL MEDICINE ACCESS PROGRAM, INCLUDING ALLOWING NATURAL MEDICINE SERVICES TO BE PROVIDED AT OTHER TYPES OF LICENSED HEALTH FACILITIES OR BY INDIVIDUALS IN ORDER TO INCREASE ACCESS TO AND THE AVAILABILITY OF NATURAL MEDICINE SERVICES.

(9) THE DEPARTMENT SHALL HAVE THE AUTHORITY TO ADOPT RULES THAT DIFFERENTIATE BETWEEN NATURAL MEDICINES AND THAT REGULATE EACH NATURAL MEDICINE DIFFERENTLY BASED ON ITS SPECIFIC QUALITIES, TRADITIONAL USES, AND SAFETY PROFILE.

(10) THE DEPARTMENT SHALL ADOPT, AMEND, AND REPEAL ALL RULES IN ACCORDANCE WITH THE STATE ADMINISTRATIVE PROCEDURE ACT, ARTICLE 4 OF TITLE 24, C.R.S., AS AMENDED, AND THE RULES PROMULGATED THEREUNDER.

12-170-105. Natural Medicine Advisory Board (1) THE NATURAL MEDICINE ADVISORY BOARD SHALL BE ESTABLISHED WITHIN THE DEPARTMENT FOR THE PURPOSE OF ADVISING THE DEPARTMENT AS TO THE IMPLEMENTATION OF THE REGULATED NATURAL MEDICINE ACCESS PROGRAM.

(2) THE BOARD SHALL CONSIST OF FIFTEEN MEMBERS. MEMBERS SHALL BE APPOINTED BY THE GOVERNOR, WITH THE CONSENT OF THE SENATE.

(3) MEMBERS OF THE INITIAL BOARD SHALL BE APPOINTED BY JANUARY 31, 2023. IN MAKING THE APPOINTMENTS, THE GOVERNOR SHALL APPOINT:

(a) AT LEAST SEVEN MEMBERS WITH SIGNIFICANT EXPERTISE AND EXPERIENCE IN ONE OR MORE OF THE FOLLOWING AREAS: NATURAL MEDICINE THERAPY, MEDICINE, AND RESEARCH; MYCOLOGY AND NATURAL MEDICINE CULTIVATION; PERMITTED ORGANIZATION CRITERIA; EMERGENCY MEDICAL SERVICES AND SERVICES PROVIDED BY FIRST RESPONDERS; MENTAL AND BEHAVIORAL HEALTH PROVIDERS; HEALTH CARE INSURANCE AND HEALTH CARE POLICY; AND PUBLIC HEALTH, DRUG POLICY, AND HARM REDUCTION.

(b) AT LEAST EIGHT MEMBERS WITH SIGNIFICANT EXPERTISE AND EXPERIENCE IN ONE OR MORE OF THE FOLLOWING AREAS: RELIGIOUS USE OF NATURAL MEDICINES; ISSUES CONFRONTING VETERANS; TRADITIONAL INDIGENOUS USE OF NATURAL MEDICINES; LEVELS AND DISPARITIES IN ACCESS TO HEALTH CARE SERVICES AMONG DIFFERENT COMMUNITIES; AND PAST CRIMINAL JUSTICE REFORM EFFORTS IN COLORADO. AT LEAST ONE OF THE EIGHT MEMBERS SHALL HAVE EXPERTISE OR EXPERIENCE IN TRADITIONAL INDIGENOUS USE OF NATURAL MEDICINES.

(4) FOR THE INITIAL BOARD, SEVEN OF THE MEMBERS SHALL BE APPOINTED TO A TERM OF TWO YEARS AND EIGHT MEMBERS SHALL BE APPOINTED TO A TERM OF FOUR YEARS. EACH MEMBER APPOINTED THEREAFTER SHALL BE APPOINTED TO A TERM OF FOUR YEARS. MEMBERS OF THE BOARD MAY SERVE UP TO TWO CONSECUTIVE TERMS. MEMBERS ARE SUBJECT TO REMOVAL AS PROVIDED IN ARTICLE IV, SECTION 6 OF THE COLORADO CONSTITUTION.

(5) NOT LATER THAN SEPTEMBER 30, 2023, AND ANNUALLY THEREAFTER, THE BOARD SHALL MAKE RECOMMENDATIONS TO THE DEPARTMENT RELATED TO, BUT NOT LIMITED TO, ALL OF THE FOLLOWING AREAS:

(a) ACCURATE PUBLIC HEALTH APPROACHES REGARDING USE, EFFECT, AND RISK REDUCTION FOR NATURAL MEDICINE AND THE CONTENT AND SCOPE OF EDUCATIONAL CAMPAIGNS RELATED TO NATURAL MEDICINE;

(b) RESEARCH RELATED TO THE EFFICACY AND REGULATION OF NATURAL MEDICINE, INCLUDING RECOMMENDATIONS RELATED TO PRODUCT SAFETY, HARM REDUCTION, AND CULTURAL RESPONSIBILITY;

(c) THE PROPER CONTENT OF TRAINING PROGRAMS, EDUCATIONAL AND EXPERIENTIAL REQUIREMENTS, AND QUALIFICATIONS FOR FACILITATORS;

(d) AFFORDABLE, EQUITABLE, ETHICAL, AND CULTURALLY RESPONSIBLE ACCESS TO NATURAL MEDICINE AND REQUIREMENTS TO ENSURE THE REGULATED NATURAL MEDICINE ACCESS PROGRAM IS EQUITABLE AND INCLUSIVE;

(e) APPROPRIATE REGULATORY CONSIDERATIONS FOR EACH NATURAL MEDICINE;

(f) THE ADDITION OF NATURAL MEDICINES TO THE REGULATED NATURAL MEDICINE ACCESS PROGRAM UNDER SECTION 12-170-104(4)(b) BASED ON AVAILABLE MEDICAL, PSYCHOLOGICAL, AND SCIENTIFIC STUDIES, RESEARCH, AND OTHER INFORMATION RELATED TO THE SAFETY AND EFFICACY OF EACH NATURAL MEDICINE;

(g) ALL RULES TO BE PROMULGATED BY THE DEPARTMENT UNDER 12-170-104; AND

(h) REQUIREMENTS FOR ACCURATE AND COMPLETE DATA COLLECTION, REPORTING, AND PUBLICATION OF INFORMATION RELATED TO THE IMPLEMENTATION OF THIS ARTICLE 170.

(6) THE BOARD SHALL, ON AN ONGOING BASIS, REVIEW AND EVALUATE EXISTING RESEARCH, STUDIES, AND REAL-WORLD DATA RELATED TO NATURAL MEDICINE AND MAKE RECOMMENDATIONS TO THE LEGISLATURE AND OTHER RELEVANT STATE AGENCIES AS TO WHETHER NATURAL MEDICINE AND ASSOCIATED SERVICES SHOULD BE COVERED UNDER HEALTH FIRST COLORADO OR OTHER INSURANCE PROGRAMS AS A COST EFFECTIVE INTERVENTION FOR VARIOUS MENTAL HEALTH CONDITIONS, INCLUDING BUT NOT LIMITED TO END OF LIFE ANXIETY, SUBSTANCE USE DISORDER, ALCOHOLISM, DEPRESSIVE DISORDERS, NEUROLOGICAL DISORDERS, CLUSTER HEADACHES, AND POST TRAUMATIC STRESS DISORDER.

(7) THE BOARD SHALL, ON AN ONGOING BASIS, REVIEW AND EVALUATE SUSTAINABILITY ISSUES RELATED TO NATURAL MEDICINE AND IMPACT ON INDIGENOUS CULTURES AND DOCUMENT EXISTING RECIPROCITY EFFORTS AND CONTINUING SUPPORT MEASURES THAT ARE NEEDED AS PART OF ITS ANNUAL REPORT.

(8) THE BOARD SHALL PUBLISH AN ANNUAL REPORT DESCRIBING ITS ACTIVITIES INCLUDING THE RECOMMENDATIONS AND ADVICE PROVIDED TO THE DEPARTMENT AND THE LEGISLATURE.

(9) THE DEPARTMENT SHALL PROVIDE REQUESTED TECHNICAL, LOGISTICAL AND OTHER SUPPORT TO THE BOARD TO ASSIST THE BOARD WITH ITS DUTIES AND OBLIGATIONS.

(10) THIS SECTION IS REPEALED EFFECTIVE DECEMBER 31, 2033.

12-170-106. Regulated natural medicine access program fund. (1) THE REGULATED NATURAL MEDICINE ACCESS PROGRAM FUND IS HEREBY CREATED IN THE STATE TREASURY. THE FUND IS ADMINISTERED BY THE DEPARTMENT AND CONSISTS OF ALL MONEY FROM FEES COLLECTED AND MONEY TRANSFERRED FROM THE GENERAL FUND UNDER THIS ARTICLE 170. ALL INTEREST AND INCOME EARNED ON THE DEPOSIT AND INVESTMENT OF MONEY IN THE FUND SHALL BE CREDITED TO THE FUND AND SHALL NOT BE TRANSFERRED TO THE GENERAL FUND OR ANY OTHER STATE FUND AT THE END OF ANY STATE FISCAL YEAR.

(2) THE DEPARTMENT MAY SEEK, ACCEPT, AND EXPEND ANY GIFTS, GRANTS, DONATIONS, LOAN OF FUNDS, PROPERTY, OR ANY OTHER REVENUE OR AID IN ANY FORM FROM THE STATE, ANY STATE AGENCY, ANY OTHER PUBLIC SOURCE, ANY PRIVATE SOURCE, OR ANY COMBINATION THEREOF, AND ANY SUCH MONETARY RECEIPTS SHALL BE CREDITED TO THE FUND AND ANY SUCH IN-KIND RECEIPTS SHALL BE APPLIED FOR THE BENEFIT OF THE FUND.

(3) THE MONEY IN THE FUND IS CONTINUALLY APPROPRIATED TO THE DEPARTMENT FOR THE DIRECT AND INDIRECT COSTS OF CARRYING OUT THE PROVISIONS OF THIS ARTICLE 170.

(4) FUNDS FOR THE INITIAL ESTABLISHMENT AND SUPPORT OF THE REGULATORY ACTIVITIES BY THE DEPARTMENT UNDER THIS ARTICLE 170, INCLUDING THE NATURAL MEDICINE ADVISORY BOARD, THE DEVELOPMENT AND PROMOTION OF PUBLIC EDUCATION CAMPAIGNS RELATED TO THE USE OF NATURAL MEDICINE, AND THE DEVELOPMENT OF THE POLICIES, PROCEDURES, AND PROGRAMS REQUIRED BY 12-170-104(6)(d) SHALL BE ADVANCED FROM THE GENERAL FUND TO THE REGULATED NATURAL MEDICINE ACCESS PROGRAM FUND AND SHALL BE REPAID TO THE GENERAL FUND BY THE INITIAL PROCEEDS FROM FEES COLLECTED PURSUANT TO THIS ARTICLE 170.

(5) THE OFFICE OF STATE PLANNING AND BUDGETING SHALL DETERMINE THE AMOUNT OF THE INITIAL ADVANCE FROM THE GENERAL FUND TO THE REGULATED NATURAL MEDICINE ACCESS PROGRAM FUND BASED ON THE ESTIMATED COSTS OF ESTABLISHING THE PROGRAM.

12-170-107. Localities. (1) A LOCALITY MAY REGULATE THE TIME, PLACE, AND MANNER OF THE OPERATION OF HEALING CENTERS LICENSED PURSUANT TO THIS ARTICLE 170 WITHIN ITS BOUNDARIES.

(2) A LOCALITY MAY NOT BAN OR COMPLETELY PROHIBIT THE ESTABLISHMENT OR OPERATION OF HEALING CENTERS LICENSED PURSUANT TO THIS ARTICLE 170 WITHIN ITS BOUNDARIES.

(3) A LOCALITY MAY NOT BAN OR COMPLETELY PROHIBIT A LICENSED HEALTH-CARE FACILITY OR INDIVIDUAL WITHIN ITS BOUNDARIES FROM PROVIDING NATURAL MEDICINE SERVICES IF THE LICENSED HEALTH-CARE FACILITY OR INDIVIDUAL IS PERMITTED TO PROVIDE NATURAL MEDICINE SERVICES BY THE DEPARTMENT PURSUANT TO THIS ARTICLE 170.

(4) A LOCALITY MAY NOT PROHIBIT THE TRANSPORTATION OF NATURAL MEDICINE THROUGH ITS JURISDICTION ON PUBLIC ROADS BY A LICENSEE OR AS OTHERWISE ALLOWED BY THIS ARTICLE 170.

(5) A LOCALITY MAY NOT ADOPT ORDINANCES OR REGULATIONS THAT ARE UNREASONABLE OR IN CONFLICT WITH THIS ARTICLE 170, BUT MAY ENACT LAWS IMPOSING LESSER CRIMINAL OR CIVIL PENALTIES THAN PROVIDED BY THIS ARTICLE 170

12-170-108. Protections. (1) SUBJECT TO THE LIMITATIONS IN THIS ARTICLE 170, BUT NOTWITHSTANDING ANY OTHER PROVISION OF LAW:

(a) ACTIONS AND CONDUCT PERMITTED PURSUANT TO A LICENSE OR REGISTRATION ISSUED BY THE DEPARTMENT OR BY DEPARTMENT RULE, OR BY THOSE WHO ALLOW PROPERTY TO BE USED PURSUANT TO A LICENSE OR REGISTRATION ISSUED BY THE DEPARTMENT OR BY DEPARTMENT RULE, ARE NOT UNLAWFUL AND SHALL NOT BE AN OFFENSE UNDER STATE LAW, OR THE LAWS OF ANY LOCALITY WITHIN THE STATE, OR BE SUBJECT TO A CIVIL FINE, PENALTY, OR SANCTION, OR BE A BASIS FOR DETENTION, SEARCH, OR ARREST, OR TO DENY ANY RIGHT OR PRIVILEGE, OR TO SEIZE OR FORFEIT ASSETS UNDER STATE LAW OR THE LAWS OF ANY LOCALITY WITHIN THE STATE.

(b) A CONTRACT IS NOT UNENFORCEABLE ON THE BASIS THAT NATURAL MEDICINES, AS ALLOWED UNDER THIS ARTICLE 170, ARE PROHIBITED BY FEDERAL LAW.

(c) A HOLDER OF A PROFESSIONAL OR OCCUPATIONAL LICENSE, CERTIFICATION, OR REGISTRATION IS NOT SUBJECT TO PROFESSIONAL DISCIPLINE OR LOSS OF A PROFESSIONAL LICENSE OR CERTIFICATION FOR PROVIDING ADVICE OR SERVICES ARISING OUT OF OR RELATED TO NATURAL MEDICINE LICENSES, APPLICATIONS FOR LICENSES ON THE BASIS THAT NATURAL MEDICINES ARE PROHIBITED BY FEDERAL LAW, OR FOR PERSONAL USE OF NATURAL MEDICINES AS ALLOWED UNDER THIS ARTICLE 170. THIS SECTION DOES NOT PERMIT A PERSON TO ENGAGE IN MALPRACTICE.

(d) MENTAL HEALTH, SUBSTANCE USE DISORDER, OR BEHAVIORAL HEALTH SERVICES OTHERWISE COVERED UNDER THE COLORADO MEDICAL ASSISTANCE ACT, ARTICLES 4 TO 6 OF TITLE 25.5, C.R.S., SHALL NOT BE DENIED ON THE BASIS THAT THEY ARE COVERED IN CONJUNCTION WITH NATURAL MEDICINE SERVICES OR THAT NATURAL MEDICINES ARE PROHIBITED BY FEDERAL LAW. NO INSURANCE OR INSURANCE PROVIDER IS REQUIRED TO COVER THE COST OF THE NATURAL MEDICINE ITSELF.

(e) NOTHING IN THIS SECTION SHALL BE CONSTRUED OR INTERPRETED TO PREVENT THE DEPARTMENT FROM ENFORCING ITS RULES AGAINST A LICENSEE OR TO LIMIT A STATE OR LOCAL LAW ENFORCEMENT AGENCY'S ABILITY TO INVESTIGATE UNLAWFUL ACTIVITY IN RELATION TO A LICENSEE.

12-170-109. Personal Use. (1) SUBJECT TO THE LIMITATIONS IN THIS ARTICLE 170, BUT NOTWITHSTANDING ANY OTHER PROVISION OF LAW, THE FOLLOWING ACTS ARE NOT AN OFFENSE UNDER STATE LAW OR THE LAWS OF ANY LOCALITY WITHIN THE STATE OR SUBJECT TO A CIVIL FINE, PENALTY, OR SANCTION, OR THE BASIS FOR DETENTION, SEARCH, OR ARREST, OR TO DENY ANY RIGHT OR PRIVILEGE, OR TO SEIZE OR FORFEIT ASSETS UNDER STATE LAW OR THE LAWS OF ANY LOCALITY, IF THE PERSON IS TWENTY-ONE YEARS OF AGE OR OLDER:

(a) POSSESSING, STORING, USING, PROCESSING, TRANSPORTING, PURCHASING, OBTAINING, OR INGESTING NATURAL MEDICINE FOR PERSONAL USE, OR GIVING AWAY NATURAL MEDICINE FOR PERSONAL USE WITHOUT REMUNERATION TO A PERSON OR PERSONS TWENTY-ONE YEARS OF AGE OR OLDER.

(b) GROWING, CULTIVATING, OR PROCESSING PLANTS OR FUNGI CAPABLE OF PRODUCING NATURAL MEDICINE FOR PERSONAL USE IF:

(I) THE PLANTS AND FUNGI ARE KEPT IN OR ON THE GROUNDS OF A PRIVATE HOME OR RESIDENCE; AND

(II) THE PLANTS AND FUNGI ARE SECURED FROM ACCESS BY PERSONS UNDER TWENTY-ONE YEARS OF AGE.

(c) ASSISTING ANOTHER PERSON OR PERSONS WHO ARE TWENTY-ONE YEARS OF AGE OR OLDER, OR ALLOWING PROPERTY TO BE USED, IN ANY OF THE ACTIONS OR CONDUCT PERMITTED UNDER SUBSECTION (1).

(2) FOR THE PURPOSE OF THIS ARTICLE 170, “PERSONAL USE” MEANS THE PERSONAL INGESTION OR USE OF A NATURAL MEDICINE AND INCLUDES THE AMOUNT A PERSON MAY CULTIVATE OR POSSESS OF NATURAL MEDICINE NECESSARY TO SHARE NATURAL MEDICINES WITH OTHER PERSONS TWENTY-ONE YEARS OF AGE OR OLDER WITHIN THE CONTEXT OF COUNSELING, SPIRITUAL GUIDANCE, BENEFICIAL COMMUNITY-BASED USE AND HEALING, SUPPORTED USE, OR RELATED SERVICES. “PERSONAL USE” DOES NOT INCLUDE THE SALE OF NATURAL MEDICINES FOR REMUNERATION.

(3) CONDUCT PERMITTED BY THIS ARTICLE 170 SHALL NOT, BY ITSELF:

(a) CONSTITUTE CHILD ABUSE OR NEGLECT WITHOUT A FINDING OF ACTUAL THREAT TO THE HEALTH OR WELFARE OF A CHILD BASED ON ALL RELEVANT FACTORS.

(b) BE THE BASIS TO RESTRICT PARENTING TIME WITH A CHILD WITHOUT A FINDING THAT THE PARENTING TIME WOULD ENDANGER THE CHILD’S PHYSICAL HEALTH OR SIGNIFICANTLY IMPAIR THE CHILD’S EMOTIONAL DEVELOPMENT.

(4) CONDUCT PERMITTED BY THIS ARTICLE 170 SHALL NOT, BY ITSELF, BE THE BASIS FOR PUNISHING OR OTHERWISE PENALIZING A PERSON CURRENTLY UNDER PAROLE, PROBATION, OR OTHER STATE SUPERVISION, OR RELEASED AWAITING TRIAL OR OTHER HEARING.

(5) CONDUCT PERMITTED BY THIS ARTICLE 170 SHALL NOT, BY ITSELF, BE THE BASIS FOR DETENTION, SEARCH, OR ARREST; AND THE POSSESSION OR SUSPICION OF POSSESSION OF NATURAL MEDICINE, OR THE POSSESSION OF MULTIPLE CONTAINERS OF NATURAL MEDICINE, SHALL NOT INDIVIDUALLY OR IN COMBINATION WITH EACH OTHER CONSTITUTE REASONABLY ARTICULABLE SUSPICION OF A CRIME. NATURAL MEDICINES AS PERMITTED BY THIS ARTICLE 170 ARE NOT CONTRABAND NOR SUBJECT TO SEIZURE AND SHALL NOT BE HARMED OR DESTROYED.

(6) CONDUCT PERMITTED BY THIS ARTICLE 170 SHALL NOT, BY ITSELF, BE THE BASIS TO DENY ELIGIBILITY FOR ANY PUBLIC ASSISTANCE PROGRAM, UNLESS REQUIRED BY FEDERAL LAW.

(7) FOR THE PURPOSES OF MEDICAL CARE, INCLUDING ORGAN TRANSPLANTS, CONDUCT PERMITTED BY THIS ARTICLE 170 DOES NOT CONSTITUTE THE USE OF AN ILLICIT SUBSTANCE OR OTHERWISE DISQUALIFY A PERSON FROM MEDICAL CARE OR MEDICAL INSURANCE.

(8) NOTHING IN THIS SECTION SHALL BE CONSTRUED OR INTERPRETED TO PERMIT A PERSON TO GIVE AWAY ANY AMOUNT OF NATURAL MEDICINE AS PART OF A BUSINESS PROMOTION OR OTHER COMMERCIAL ACTIVITY OR TO PERMIT PAID ADVERTISING RELATED TO NATURAL MEDICINE, SHARING OF NATURAL MEDICINE, OR SERVICES INTENDED TO BE USED CONCURRENTLY WITH A PERSON'S CONSUMPTION OF NATURAL MEDICINE. SUCH ADVERTISING MAY BE CONSIDERED EVIDENCE OF COMMERCIAL ACTIVITY THAT IS PROHIBITED UNDER THIS SECTION. THIS PROVISION DOES NOT PRECLUDE THE DONATION OF NATURAL MEDICINE BY A PERSON TWENTY-ONE YEARS OF AGE OR OLDER, PAYMENT FOR BONA FIDE HARM REDUCTION SERVICES, BONA FIDE THERAPY SERVICES, OR OTHER BONA FIDE SUPPORT SERVICES, MAINTAINING PERSONAL OR PROFESSIONAL WEBSITES RELATED TO NATURAL MEDICINE SERVICES, DISSEMINATION OF EDUCATIONAL MATERIALS RELATED TO NATURAL MEDICINE, OR LIMIT THE ABILITY OF A HEALING CENTER TO DONATE NATURAL MEDICINE OR PROVIDE NATURAL MEDICINE AT REDUCED COST CONSISTENT WITH DEPARTMENT RULES.

(9) A PERSON WHO HAS COMPLETED A SENTENCE FOR A CONVICTION, WHETHER BY TRIAL OR PLEA OF GUILTY OR *NOLO CONTENDERE*, WHO WOULD NOT HAVE BEEN GUILTY OF AN OFFENSE UNDER THIS ACT HAD IT BEEN IN EFFECT AT THE TIME OF THE OFFENSE, MAY FILE A PETITION BEFORE THE TRIAL COURT THAT ENTERED THE JUDGMENT OF CONVICTION IN THE PERSON'S CASE TO SEAL THE RECORD OF THE CONVICTION AT NO COST. IF THERE IS NO OBJECTION FROM THE DISTRICT ATTORNEY, THE COURT SHALL AUTOMATICALLY SEAL SUCH RECORD. IF THERE IS AN OBJECTION BY THE DISTRICT ATTORNEY, A HEARING SHALL BE HELD AND THE COURT SHALL DETERMINE IF THE PRIOR CONVICTION DOES NOT QUALIFY TO BE SEALED UNDER THIS ACT. IF THE RECORD DOES NOT QUALIFY TO BE SEALED, THE COURT SHALL DENY THE SEALING OF THE RECORD. NOTHING IN THIS SECTION SHALL BE CONSTRUED TO DIMINISH OR ABROGATE ANY RIGHTS OR REMEDIES OTHERWISE AVAILABLE TO THE PETITIONER OR APPLICANT.

12-170-110. Personal use penalties. (1) UNLESS OTHERWISE PROVIDED BY SUBSECTION (2) OF THIS SECTION, A PERSON WHO IS UNDER TWENTY-ONE YEARS OF AGE IS SUBJECT TO A DRUG PETTY OFFENSE, AND UPON CONVICTION THEREOF, SHALL BE SUBJECT ONLY TO A PENALTY OF NO MORE THAN FOUR (4) HOURS OF DRUG EDUCATION OR COUNSELING PROVIDED AT NO COST TO THE PERSON, IF THE PERSON:

(a) POSSESSES, USES, INGESTS, INHALES, OR TRANSPORTS NATURAL MEDICINE FOR PERSONAL USE;

(b) GIVES AWAY WITHOUT REMUNERATION NATURAL MEDICINE FOR PERSONAL USE; OR

(c) POSSESSES, USES, OR GIVES AWAY WITHOUT REMUNERATION NATURAL MEDICINE PARAPHERNALIA.

(2) TO THE EXTENT SUBSECTION (1) ESTABLISHES A PENALTY FOR CONDUCT NOT OTHERWISE PROHIBITED BY LAW OR ESTABLISHES A PENALTY THAT IS GREATER THAN EXISTS ELSEWHERE IN LAW FOR THE CONDUCT SET FORTH IN SUBSECTION (1), THE PENALTIES IN SUBSECTION (1) SHALL NOT APPLY.

(3) A PERSON WHO CULTIVATES NATURAL MEDICINES THAT ARE NOT SECURE FROM ACCESS BY A PERSON UNDER TWENTY-ONE YEARS OF AGE IN VIOLATION OF 12-170-109(1)(b) IS SUBJECT TO A CIVIL FINE NOT EXCEEDING TWO-HUNDRED AND FIFTY DOLLARS, IN ADDITION TO ANY OTHER APPLICABLE PENALTIES.

(4) A PERSON SHALL NOT BE SUBJECT TO ANY ADDITIONAL FEES, FINES, OR OTHER PENALTIES FOR THE VIOLATIONS ADDRESSED IN THIS SECTION OTHER THAN THOSE SET FORTH IN THIS SECTION. FURTHER, A PERSON SHALL NOT BE SUBJECT TO INCREASED PUNISHMENT FOR ANY OTHER CRIME ON THE BASIS OF THAT PERSON HAVING UNDERTAKEN CONDUCT PERMITTED BY THIS ARTICLE 170.

12-170-111. Limitations. (1) THIS ARTICLE 170 SHALL NOT BE CONSTRUED:

(a) TO PERMIT A PERSON TO DRIVE OR OPERATE A MOTOR VEHICLE, BOAT, VESSEL, AIRCRAFT, OR OTHER DEVICE THAT IS CAPABLE OF MOVING ITSELF, OR OF BEING MOVED, FROM PLACE TO PLACE UPON WHEELS OR ENDLESS TRACKS UNDER THE INFLUENCE OF NATURAL MEDICINE;

(b) TO PERMIT A PERSON TO USE OR POSSESS NATURAL MEDICINE IN A SCHOOL, DETENTION FACILITY, OR PUBLIC BUILDING;

(c) TO PERMIT A PERSON TO INGEST NATURAL MEDICINES IN A PUBLIC PLACE, OTHER THAN A PLACE LICENSED OR OTHERWISE PERMITTED BY THE DEPARTMENT FOR SUCH USE;

(d) TO PERMIT THE TRANSFER OF NATURAL MEDICINE, WITH OR WITHOUT REMUNERATION, TO A PERSON UNDER TWENTY-ONE YEARS OF AGE OR TO ALLOW A PERSON UNDER TWENTY-ONE YEARS OF AGE TO USE OR POSSESS NATURAL MEDICINE;

(e) TO PERMIT A PERSON TO ENGAGE IN CONDUCT THAT ENDANGERS OR HARMS OTHERS;

(f) TO REQUIRE A GOVERNMENT MEDICAL ASSISTANCE PROGRAM OR PRIVATE HEALTH INSURER TO REIMBURSE A PERSON FOR COSTS OF PURCHASING NATURAL MEDICINE;

(g) TO REQUIRE AN EMPLOYER TO PERMIT OR ACCOMMODATE THE USE, CONSUMPTION, POSSESSION, TRANSFER, DISPLAY, TRANSPORTATION, OR GROWING OF NATURAL MEDICINES IN THE WORKPLACE;

(h) TO PROHIBIT A RECIPIENT OF A FEDERAL GRANT OR AN APPLICANT FOR A FEDERAL GRANT FROM PROHIBITING THE USE, CONSUMPTION, POSSESSION, TRANSFER, DISPLAY, TRANSPORTATION, OR GROWING OF NATURAL MEDICINES TO THE EXTENT NECESSARY TO SATISFY FEDERAL REQUIREMENTS FOR THE GRANT;

(i) TO PROHIBIT A PARTY TO A FEDERAL CONTRACT OR A PERSON APPLYING TO BE A PARTY TO A FEDERAL CONTRACT FROM PROHIBITING ANY ACT PERMITTED IN THIS ARTICLE 170 TO THE EXTENT NECESSARY TO COMPLY WITH THE TERMS AND CONDITIONS OF THE CONTRACT OR TO SATISFY FEDERAL REQUIREMENTS FOR THE CONTRACT;

(j) TO REQUIRE A PERSON TO VIOLATE A FEDERAL LAW; OR

(k) TO EXEMPT A PERSON FROM A FEDERAL LAW OR OBSTRUCT THE ENFORCEMENT OF A FEDERAL LAW.

12-170-112. Liberal construction. THIS ACT SHALL BE LIBERALLY CONSTRUED TO EFFECTUATE ITS PURPOSE.

12-170-113. Preemption. NO LOCALITY SHALL ADOPT, ENACT, OR ENFORCE ANY ORDINANCE, RULE, OR RESOLUTION IMPOSING ANY GREATER CRIMINAL OR CIVIL PENALTY THAN PROVIDED BY THIS ACT OR THAT IS OTHERWISE IN CONFLICT WITH THE PROVISIONS OF THIS ACT. A LOCALITY MAY ENACT LAWS IMPOSING LESSER CRIMINAL OR CIVIL PENALTIES THAN PROVIDED BY THIS ACT.

12-170-114. Self-executing, severability, conflicting provisions. ALL PROVISIONS OF THIS ARTICLE 170 ARE SELF-EXECUTING EXCEPT AS SPECIFIED HEREIN, ARE SEVERABLE, AND, EXCEPT WHERE OTHERWISE INDICATED IN THE TEXT, SHALL SUPERSEDE CONFLICTING STATE STATUTORY, LOCAL CHARTER, ORDINANCE, OR RESOLUTION, AND OTHER STATE AND LOCAL PROVISIONS. IF ANY PROVISION OF THIS ACT OR ITS APPLICATION TO ANY PERSON OR CIRCUMSTANCE IS HELD INVALID, THE INVALIDITY DOES NOT AFFECT OTHER PROVISIONS OR APPLICATIONS OF THIS ACT THAT CAN BE GIVEN EFFECT WITHOUT THE INVALID PROVISION OR APPLICATION, AND TO THIS END THE PROVISIONS OF THIS ACT ARE SEVERABLE.

12-170-115. Effective date. UNLESS OTHERWISE PROVIDED BY THIS ACT, ALL PROVISIONS OF THIS ACT SHALL BECOME EFFECTIVE UPON THE EARLIER OF THE OFFICIAL DECLARATION OF THE VOTE HEREON BY PROCLAMATION OF THE GOVERNOR OR THIRTY DAYS AFTER THE VOTE HAS BEEN CANVASSED, PURSUANT TO SECTION 1(4) OF ARTICLE V OF THE COLORADO CONSTITUTION. THE REMOVAL AND REDUCTION OF CRIMINAL PENALTIES BY THIS ACT IS INTENDED TO HAVE RETROACTIVE EFFECT.

SECTION 2. In Colorado Revised Statutes, 18-18-403.5, **amend** (1) as follows:

18-18-403.5. Unlawful possession of a controlled substance. (1) Except as authorized by part 1 or 3 of article 280 of title 12, part 2 of article 80 of title 27, section 18-1-711, section 18-18-428(1)(b), ~~or~~ part 2 or 3 of this article 18, OR THE “NATURAL MEDICINE HEALTH ACT OF

2022”, ARTICLE 170 OF TITLE 12 it is unlawful for a person knowingly to possess a controlled substance.

SECTION 3. In Colorado Revised Statutes, 18-18-404 **amend** (1)(a) as follows:

18-18-404. Unlawful use of a controlled substance. (1)(a) Except as is otherwise provided for offenses concerning marijuana and marijuana concentrate in sections 18-18-406 and 18-18-406.5 OR BY THE “NATURAL MEDICINE HEALTH ACT OF 2022”, ARTICLE 170 OF TITLE 12 any person who uses any controlled substance, except when it is dispensed by or under the direction of a person licensed or authorized by law to prescribe, administer, or dispense the controlled substance for bona fide medical needs, commits a level 2 drug misdemeanor.

SECTION 4. In Colorado Revised Statutes, 18-18-405, **amend** (1)(a) as follows:

18-18-405. Unlawful distribution, manufacturing, dispensing, or sale. (1)(a) Except as authorized by part 1 of article 280 of title 12, part 2 of article 80 of title 27, ~~or~~ part 2 or 3 of this article 18, OR BY “THE NATURAL MEDICINE HEALTH ACT OF 2022”, ARTICLE 170 OF TITLE 12 it is unlawful for any person knowingly to manufacture, dispense, sell, or distribute, or to possess with intent to manufacture, dispense, sell, or distribute, a controlled substance; or induce, attempt to induce, or conspire with one or more other persons, to manufacture, dispense, sell, distribute, or possess with intent to manufacture, dispense, sell, or distribute, a controlled substance; or possess one or more chemicals or supplies or equipment with intent to manufacture a controlled substance.

SECTION 5. In Colorado Revised Statutes, **amend** 18-18-410 as follows:

18-18-410. Declaration of class 1 public nuisance. EXCEPT AS PERMITTED BY THE “NATURAL MEDICINE HEALTH ACT OF 2022”, ARTICLE 170 OF TITLE 12 any store, shop, warehouse, dwelling house, building, vehicle, boat, or aircraft or any place whatsoever which is frequented by controlled substance addicts for the unlawful use of controlled substances or which is used for the unlawful storage, manufacture, sale, or distribution of controlled substances is declared to be a class 1 public nuisance and subject to the provisions of section 16-13-303, C.R.S. Any real or personal property which is seized or confiscated as a result of an action to abate a public nuisance shall be disposed of pursuant to part 7 of article 13 of title 16, C.R.S.

SECTION 6. In Colorado Revised Statutes, 18-18-411, **add** (5) as follows:

18-18-411. keeping, maintaining, controlling, renting, or making available property for unlawful distribution or manufacture of controlled substances.

(5) A PERSON ACTING IN COMPLIANCE WITH THE “NATURAL MEDICINE HEALTH ACT OF 2022”, ARTICLE 170 OF TITLE 12 DOES NOT VIOLATE THIS SECTION.

SECTION 7. In Colorado Revised Statutes, 18-18-412.7, **add** (3) as follows:

18-18-412.7. Sale or distribution of materials to manufacture controlled substances.

(3) A PERSON ACTING IN COMPLIANCE WITH THE “NATURAL MEDICINE HEALTH ACT OF 2022”, ARTICLE 170 OF TITLE 12 DOES NOT VIOLATE THIS SECTION.

SECTION 8. In Colorado Revised Statutes, 18-18-430.5, **add** (1)(c) as follows:

18-18-430.5. Drug paraphernalia—exemption. (1) A person is exempt from sections 18-18-425 to 18-18-430 if the person is:

(c) USING EQUIPMENT, PRODUCTS OR MATERIALS IN COMPLIANCE WITH THE “NATURAL MEDICINE HEALTH ACT OF 2022”, ARTICLE 170 OF TITLE 12. THE MANUFACTURE, POSSESSION, AND DISTRIBUTION OF SUCH EQUIPMENT, PRODUCTS, OR MATERIALS SHALL BE AUTHORIZED WITHIN THE MEANING OF 21 USC 863 SEC. (f).

SECTION 9. In Colorado Revised Statutes, 16-13-303, **add** (9) as follows:

16-13-303. Class 1 public nuisance.

(9) A PERSON ACTING IN COMPLIANCE WITH THE “NATURAL MEDICINE HEALTH ACT OF 2022”, ARTICLE 170 OF TITLE 12 DOES NOT VIOLATE THIS SECTION.

SECTION 10. In Colorado Revised Statutes, 16-13-304, **add** (2) as follows:

16-13-304. Class 2 public nuisance.

(2) A PERSON ACTING IN COMPLIANCE WITH THE “NATURAL MEDICINE HEALTH ACT OF 2022”, ARTICLE 170 OF TITLE 12 DOES NOT VIOLATE THIS SECTION.

Attachment 2: SB 23-290

An Act

SENATE BILL 23-290

BY SENATOR(S) Fenberg, Bridges, Ginal, Jaquez Lewis, Marchman,
Priola;
also REPRESENTATIVE(S) Amabile, Garcia, McCormick, Valdez.

CONCERNING NATURAL MEDICINE, AND, IN CONNECTION THEREWITH,
MAKING AN APPROPRIATION.

Be it enacted by the General Assembly of the State of Colorado:

SECTION 1. In Colorado Revised Statutes, 12-170-102, **amend**
(1)(b); and **add** (2) as follows:

12-170-102. Legislative declaration. (1) The voters of the state of
Colorado find and declare that:

(b) Coloradans are experiencing problematic mental health issues,
including but not limited to suicidality, addiction, END-OF-LIFE DISTRESS,
depression, and anxiety.

(2) THE GENERAL ASSEMBLY FINDS AND DECLARES THAT:

(a) CONSIDERABLE HARM MAY OCCUR TO THE FEDERALLY

*Capital letters or bold & italic numbers indicate new material added to existing law; dashes
through words or numbers indicate deletions from existing law and such material is not part of
the act.*

RECOGNIZED AMERICAN TRIBES AND INDIGENOUS PEOPLE, COMMUNITIES, CULTURES, AND RELIGIONS IF NATURAL MEDICINE IS OVERLY COMMODIFIED, COMMERCIALIZED, AND EXPLOITED IN A MANNER THAT RESULTS IN THE ERASURE OF IMPORTANT CULTURAL AND RELIGIOUS CONTEXT;

(b) CONSIDERABLE HARM MAY OCCUR TO THE FEDERALLY RECOGNIZED AMERICAN TRIBES AND INDIGENOUS PEOPLE, COMMUNITIES, CULTURES, AND RELIGIONS IF FACILITATORS, HEALING CENTERS, AND OTHER NATURAL MEDICINE LICENSEES WITH MINIMAL OR NO CONNECTION TO TRADITIONAL USE OF NATURAL MEDICINE MISAPPROPRIATE OR EXPLOIT TRIBAL AND INDIGENOUS CULTURES AND RELIGIONS;

(c) IT IS THE GENERAL ASSEMBLY'S INTENT TO ENSURE THAT THE FEDERALLY RECOGNIZED AMERICAN TRIBES AND INDIGENOUS PEOPLE, COMMUNITIES, CULTURES, AND RELIGIONS ARE HONORED AND RESPECTED AS THE STATE LEGALIZES AND REGULATES NATURAL MEDICINE. BY ENACTING LAWS, RULES, AND ORDERS TO IMPLEMENT THIS ARTICLE 170 AND ARTICLE 50 OF TITLE 44, THE GENERAL ASSEMBLY, DIVISION, AND STATE LICENSING AUTHORITY SHALL CONSIDER THE POTENTIAL FOR DIRECT AND INDIRECT HARM THAT MAY OCCUR TO THE FEDERALLY RECOGNIZED AMERICAN TRIBES AND INDIGENOUS PEOPLE, COMMUNITIES, CULTURES, AND RELIGIONS THAT HAVE A CONNECTION TO NATURAL MEDICINE; AND

(d) ALTHOUGH THERE MAY BE TREMENDOUS POTENTIAL IN UTILIZING NATURAL MEDICINE FOR MANAGING VARIOUS MENTAL HEALTH CONDITIONS, HEALING, AND SPIRITUAL GROWTH, THIS POTENTIAL MUST BE APPROPRIATELY BALANCED WITH THE HEALTH AND SAFETY RISKS THAT IT COULD POSE TO CONSUMERS AS WELL AS THE CULTURAL HARMS IT COULD POSE TO THE FEDERALLY RECOGNIZED AMERICAN TRIBES AND INDIGENOUS AND TRADITIONAL COMMUNITIES THAT HAVE CONNECTIONS TO NATURAL MEDICINE.

SECTION 2. In Colorado Revised Statutes, **repeal and reenact, with amendments**, 12-170-103 as follows:

12-170-103. Applicability of common provisions. ARTICLES 1 AND 20 OF THIS TITLE 12 APPLY, ACCORDING TO THEIR TERMS, TO THIS ARTICLE 170.

SECTION 3. In Colorado Revised Statutes, **repeal and reenact**,

with amendments, 12-170-104 as follows:

12-170-104. Definitions. AS USED IN THIS ARTICLE 170, UNLESS THE CONTEXT OTHERWISE REQUIRES:

(1) "ADMINISTRATION SESSION" MEANS A SESSION CONDUCTED AT A HEALING CENTER, OR ANOTHER LOCATION AS ALLOWED BY THIS ARTICLE 170 AND ARTICLE 50 OF TITLE 44, DURING WHICH A PARTICIPANT CONSUMES AND EXPERIENCES THE EFFECTS OF REGULATED NATURAL MEDICINE OR REGULATED NATURAL MEDICINE PRODUCT UNDER THE SUPERVISION OF A FACILITATOR.

(2) "BOARD" MEANS THE STATE NATURAL MEDICINE ADVISORY BOARD CREATED IN SECTION 12-170-106.

(3) "DIRECTOR" MEANS THE DIRECTOR OF THE DIVISION OR THE DIRECTOR'S DESIGNEE.

(4) "DIVISION" MEANS THE DIVISION OF PROFESSIONS AND OCCUPATIONS CREATED IN THE DEPARTMENT PURSUANT TO SECTION 12-20-103.

(5) "FACILITATION" MEANS THE PERFORMANCE AND SUPERVISION OF NATURAL MEDICINE SERVICES FOR A PARTICIPANT.

(6) "FACILITATOR" MEANS AN INDIVIDUAL WHO IS TWENTY-ONE YEARS OF AGE OR OLDER; HAS THE NECESSARY QUALIFICATIONS, TRAINING, EXPERIENCE, AND KNOWLEDGE, AS REQUIRED PURSUANT TO THIS ARTICLE 170 OR RULES PROMULGATED PURSUANT TO THIS ARTICLE 170, TO PERFORM AND SUPERVISE NATURAL MEDICINE SERVICES FOR A PARTICIPANT; AND IS LICENSED BY THE DIRECTOR TO ENGAGE IN THE PRACTICE OF FACILITATION.

(7) "FEDERALLY RECOGNIZED AMERICAN TRIBE" HAS THE SAME MEANING AS "INDIAN TRIBE" AS DEFINED BY THE FEDERAL "FEDERALLY RECOGNIZED INDIAN TRIBE LIST ACT OF 1994", AS AMENDED.

(8) "HEALING CENTER" MEANS A FACILITY WHERE AN ENTITY IS LICENSED BY THE STATE LICENSING AUTHORITY PURSUANT TO ARTICLE 50 OF TITLE 44 THAT PERMITS A FACILITATOR TO PROVIDE AND SUPERVISE NATURAL MEDICINE SERVICES FOR A PARTICIPANT.

(9) "HEALTH-CARE FACILITY" MEANS AN ENTITY THAT IS LICENSED, CERTIFIED, OR OTHERWISE PERMITTED BY LAW TO ADMINISTER MEDICAL TREATMENT IN THIS STATE, INCLUDING A HOSPITAL, CLINIC, HOSPICE ENTITY, COMMUNITY MENTAL HEALTH CENTER, FEDERALLY QUALIFIED HEALTH CENTER, RURAL HEALTH CLINIC, ORGANIZATION PROVIDING A PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY, LONG-TERM CARE FACILITY, CONTINUING CARE RETIREMENT COMMUNITY, OR OTHER TYPE OF ENTITY WHERE HEALTH CARE IS PROVIDED.

(10) "INTEGRATION SESSION" MEANS A MEETING BETWEEN A PARTICIPANT AND FACILITATOR THAT OCCURS AFTER THE COMPLETION OF AN ADMINISTRATION SESSION.

(11) "LOCAL JURISDICTION" MEANS A COUNTY, MUNICIPALITY, OR CITY AND COUNTY.

(12)(a) "NATURAL MEDICINE" MEANS THE FOLLOWING SUBSTANCES:

(I) PSILOCYBIN; OR

(II) PSILOCYN.

(b) IN ADDITION TO THE SUBSTANCES LISTED IN SUBSECTION (12)(a) OF THIS SECTION, "NATURAL MEDICINE" INCLUDES:

(I) DIMETHYLTRYPTAMINE, IF RECOMMENDED BY THE BOARD AND APPROVED BY THE DIRECTOR AND THE EXECUTIVE DIRECTOR OF THE STATE LICENSING AUTHORITY FOR INCLUSION ON OR AFTER JUNE 1, 2026;

(II) IBOGAINE, IF RECOMMENDED BY THE BOARD AND APPROVED BY THE DIRECTOR AND THE EXECUTIVE DIRECTOR OF THE STATE LICENSING AUTHORITY; OR

(III) Mescaline, IF RECOMMENDED BY THE BOARD AND APPROVED BY THE DIRECTOR AND THE EXECUTIVE DIRECTOR OF THE STATE LICENSING AUTHORITY FOR INCLUSION ON OR AFTER JUNE 1, 2026.

(c) "NATURAL MEDICINE" DOES NOT MEAN A SYNTHETIC OR SYNTHETIC ANALOG OF THE SUBSTANCES LISTED IN SUBSECTIONS (12)(a) AND (12)(b) OF THIS SECTION, INCLUDING A DERIVATIVE OF A NATURALLY

OCCURRING COMPOUND OF NATURAL MEDICINE THAT IS PRODUCED USING CHEMICAL SYNTHESIS, CHEMICAL MODIFICATION, OR CHEMICAL CONVERSION.

(d) NOTWITHSTANDING SUBSECTION (12)(b)(III) OF THIS SECTION, "MESCALINE" DOES NOT INCLUDE PEYOTE, MEANING ALL PARTS OF THE PLANT CLASSIFIED BOTANICALLY AS *LOPHOPHORA WILLIAMSII* LEMAIRE, WHETHER GROWING OR NOT; ITS SEED; ANY EXTRACT FROM ANY PART OF THE PLANT, AND EVERY COMPOUND, SALT, DERIVATIVE, MIXTURE, OR PREPARATION OF THE PLANT; OR ITS SEEDS OR EXTRACTS.

(13) "NATURAL MEDICINE PRODUCT" MEANS A PRODUCT INFUSED WITH NATURAL MEDICINE THAT IS INTENDED FOR CONSUMPTION.

(14) "NATURAL MEDICINE SERVICES" MEANS A PREPARATION SESSION, ADMINISTRATION SESSION, AND INTEGRATION SESSION PROVIDED PURSUANT TO THIS ARTICLE 170.

(15) "PARTICIPANT" MEANS AN INDIVIDUAL WHO IS TWENTY-ONE YEARS OF AGE OR OLDER AND WHO RECEIVES NATURAL MEDICINE SERVICES PERFORMED BY AND UNDER THE SUPERVISION OF A FACILITATOR.

(16) "PREPARATION SESSION" MEANS A MEETING BETWEEN A PARTICIPANT AND FACILITATOR THAT OCCURS BEFORE AN ADMINISTRATION SESSION. "PREPARATION SESSION" DOES NOT MEAN AN INITIAL CONSULTATION, AN INQUIRY, OR RESPONSE ABOUT NATURAL MEDICINE SERVICES.

(17) "REGULATED NATURAL MEDICINE" MEANS NATURAL MEDICINE THAT IS CULTIVATED, MANUFACTURED, TESTED, STORED, DISTRIBUTED, TRANSPORTED, TRANSFERRED, OR DISPENSED PURSUANT TO ARTICLE 50 OF TITLE 44.

(18) "REGULATED NATURAL MEDICINE PRODUCT" MEANS NATURAL MEDICINE PRODUCT THAT IS CULTIVATED, MANUFACTURED, TESTED, STORED, DISTRIBUTED, TRANSPORTED, TRANSFERRED, OR DISPENSED PURSUANT TO ARTICLE 50 OF TITLE 44.

(19) "REMUNERATION" MEANS ANYTHING OF VALUE, INCLUDING MONEY, REAL PROPERTY, TANGIBLE AND INTANGIBLE PERSONAL PROPERTY,

CONTRACT RIGHT, CHOSE IN ACTION, SERVICE, AND ANY RIGHT OF USE OR EMPLOYMENT OR PROMISE OR AGREEMENT CONNECTED THEREWITH, BUSINESS PROMOTION, OR COMMERCIAL ACTIVITY.

(20) "STATE LICENSING AUTHORITY" MEANS THE AUTHORITY CREATED FOR THE PURPOSE OF REGULATING AND CONTROLLING THE LICENSING OF THE CULTIVATION, MANUFACTURING, TESTING, STORING, DISTRIBUTION, TRANSPORTATION, TRANSFER, AND DISPENSATION OF REGULATED NATURAL MEDICINE AND REGULATED NATURAL MEDICINE PRODUCT IN THIS STATE PURSUANT TO SECTION 44-50-201.

SECTION 4. In Colorado Revised Statutes, **repeal and reenact, with amendments**, 12-170-105 as follows:

12-170-105. Director powers and duties - prohibition - rules.

(1) IN ADDITION TO ANY OTHER POWERS AND DUTIES GRANTED OR IMPOSED ON THE DIRECTOR PURSUANT TO THIS ARTICLE 170 OR BY ANY OTHER LAW, THE DIRECTOR HAS THE FOLLOWING POWERS AND DUTIES:

(a) TO PROMULGATE RULES PURSUANT TO SECTION 12-20-204 CONCERNING THE FOLLOWING SUBJECTS:

(I) REQUIREMENTS FOR THE SAFE PROVISION OF REGULATED NATURAL MEDICINE, REGULATED NATURAL MEDICINE PRODUCT, AND NATURAL MEDICINE SERVICES TO A PARTICIPANT, INCLUDING:

(A) PARAMETERS FOR A PREPARATION SESSION, AN ADMINISTRATION SESSION, AND AN INTEGRATION SESSION, INCLUDING REQUIREMENTS FOR PROVIDING AND VERIFYING THE COMPLETION OF EACH SESSION; WHETHER ANY OF THE SESSIONS MAY BE CONDUCTED USING TELEPHONE OR AUDIO-VISUAL COMMUNICATION TECHNOLOGY; AND ANY TIMELINESS REQUIREMENTS FOR WHEN EACH SESSION MUST BE COMPLETED IN RELATION TO THE OTHER SESSIONS;

(B) HEALTH AND SAFETY WARNINGS THAT MUST BE PROVIDED TO A PARTICIPANT BEFORE THE PREPARATION SESSION, ADMINISTRATION SESSION, AND INTEGRATION SESSION BEGIN;

(C) EDUCATIONAL MATERIALS THAT MUST BE PROVIDED TO A PARTICIPANT BEFORE THE PREPARATION SESSION, ADMINISTRATION SESSION,

AND INTEGRATION SESSION BEGIN;

(D) A FORM THAT A PARTICIPANT, FACILITATOR, AND AN AUTHORIZED REPRESENTATIVE OF THE HEALING CENTER MUST SIGN, UNLESS THE FACILITATOR IS A SOLE PRACTITIONER, THEN ONLY THE PARTICIPANT AND FACILITATOR MUST SIGN, BEFORE THE PREPARATION SESSION, ADMINISTRATION SESSION, AND INTEGRATION SESSION BEGIN. AT A MINIMUM, THE FORM MUST PROVIDE THAT THE PARTICIPANT PROVIDED THE PARTICIPANT'S COMPLETE AND ACCURATE HEALTH INFORMATION TO THE FACILITATOR AND THAT THE FACILITATOR PROVIDED TO THE PARTICIPANT IDENTIFIED RISK FACTORS BASED UPON THE PARTICIPANT'S PROVIDED HEALTH INFORMATION AND DRUG CONTRAINDICATIONS; PARTICIPANT EXPECTATIONS OF THE NATURAL MEDICINE SERVICES; PARAMETERS FOR PHYSICAL CONTACT DURING NATURAL MEDICINE SERVICES, THE REQUIREMENT OF INFORMED CONSENT PERMITTING PHYSICAL CONTACT, AND THE RIGHT TO WITHDRAW CONSENT FOR PHYSICAL CONTACT; AND RISKS OF PARTICIPATING IN NATURAL MEDICINE SERVICES.

(E) PROPER SUPERVISION BY THE FACILITATOR DURING THE ADMINISTRATION SESSION, AND REQUIREMENTS TO ENSURE THAT THE PARTICIPANT HAS A DISCHARGE PLAN OR SAFE TRANSPORTATION FROM THE HEALING CENTER;

(F) PROVISIONS FOR GROUP ADMINISTRATION SESSIONS, INCLUDING REQUIREMENTS FOR AN ADMINISTRATION SESSION THAT HAS ONE OR MORE FACILITATORS PERFORMING AND SUPERVISING THE ADMINISTRATION SESSION FOR MORE THAN ONE PARTICIPANT;

(G) PROVISIONS TO PERMIT A FACILITATOR TO REFUSE TO PROVIDE NATURAL MEDICINE SERVICES TO A PERSON BASED UPON HEALTH AND SAFETY RISKS, OR CIRCUMSTANCES PROMULGATED BY RULE; AND

(H) THE DOSAGE LIMIT OF REGULATED NATURAL MEDICINE OR REGULATED NATURAL MEDICINE PRODUCT THAT MAY BE PROVIDED TO A PARTICIPANT FOR CONSUMPTION DURING AN ADMINISTRATION SESSION.

(II) REQUIREMENTS FOR THE LICENSING OF FACILITATORS, PRACTICE OF FACILITATION, AND PROFESSIONAL CONDUCT OF FACILITATORS, INCLUDING:

(A) THE FORM AND PROCEDURES FOR APPLYING FOR A NEW LICENSE OR RENEWING OR REINSTATING A LICENSE ISSUED PURSUANT TO THIS ARTICLE 170;

(B) THE EDUCATIONAL AND EXPERIENTIAL REQUIREMENTS AND QUALIFICATIONS FOR AN INDIVIDUAL TO BECOME A FACILITATOR, INCLUDING EDUCATION AND TRAINING ON PARTICIPANT SAFETY, DRUG INTERACTIONS, CONTRAINDICATIONS, MENTAL HEALTH AND STATE, PHYSICAL HEALTH AND STATE, SOCIAL AND CULTURAL CONSIDERATIONS, PREPARATION, ADMINISTRATION, INTEGRATION, AND ETHICS. THE EDUCATIONAL REQUIREMENTS MUST NOT REQUIRE A PROFESSIONAL LICENSE OR PROFESSIONAL DEGREE OTHER THAN A FACILITATOR LICENSE ISSUED PURSUANT TO THIS ARTICLE 170, EXCEPT THAT IF THERE ARE MULTIPLE TIERS OF FACILITATOR LICENSES, AN ADVANCED TIER OF FACILITATOR LICENSES MAY REQUIRE ANOTHER PROFESSIONAL LICENSE OR PROFESSIONAL DEGREE;

(C) OVERSIGHT AND SUPERVISION REQUIREMENTS, INCLUDING PROFESSIONAL RESPONSIBILITY STANDARDS AND CONTINUING EDUCATION REQUIREMENTS;

(D) ESTABLISHMENT OF PROFESSIONAL STANDARDS OF CONDUCT TO PRACTICE FACILITATION, OR A LICENSE, REGISTRATION, PERMIT, OR CERTIFICATION PURSUANT TO THIS ARTICLE 170;

(E) PARAMETERS FOR PHYSICAL CONTACT WITH A PARTICIPANT DURING NATURAL MEDICINE SERVICES, INCLUDING REQUIREMENTS FOR OBTAINING SIGNED INFORMED CONSENT FOR PERMISSIBLE PHYSICAL CONTACT AND PERMITTING A PARTICIPANT TO WITHDRAW CONSENT FOR PERMISSIBLE PHYSICAL CONTACT WITH A PARTICIPANT IN ANY MANNER AND AT ANY TIME;

(F) PERMITTING REMUNERATION FOR THE PROVISION OF NATURAL MEDICINE SERVICES;

(G) PERMITTING PROVISION OF GROUP ADMINISTRATION SESSIONS BY ONE FACILITATOR WHO IS PERFORMING AND SUPERVISING THE ADMINISTRATION SESSION FOR MORE THAN ONE PARTICIPANT, AND ESTABLISH A LIMIT ON THE TOTAL NUMBER OF PARTICIPANTS WHO MAY PARTICIPATE IN A GROUP ADMINISTRATION SESSION THAT IS PERFORMED AND SUPERVISED BY ONE FACILITATOR;

(H) RECORD-KEEPING, PRIVACY, AND CONFIDENTIALITY REQUIREMENTS FOR LICENSEES, REGISTRANTS, PERMITTEES, AND CERTIFICATE HOLDERS, INCLUDING PROTECTIONS PREVENTING DISCLOSURE OF A PROSPECTIVE PARTICIPANT'S OR PARTICIPANT'S PERSONALLY IDENTIFIABLE INFORMATION TO THE PUBLIC, THIRD PARTIES, OR ANY GOVERNMENT AGENCY, EXCEPT AS ALLOWED FOR PURPOSES EXPRESSLY STATED PURSUANT TO THIS ARTICLE 170, RULES PROMULGATED PURSUANT TO THIS ARTICLE 170, ARTICLE 50 OF TITLE 44, RULES PROMULGATED PURSUANT TO ARTICLE 50 OF TITLE 44, OR FOR STATE OR LOCAL LAW ENFORCEMENT AGENCIES TO ACCESS RECORDS AND INFORMATION FOR OTHER STATE OR LOCAL LAW ENFORCEMENT. THE INFORMATION OR RECORDS RELATED TO A PARTICIPANT CONSTITUTE MEDICAL DATA AS DESCRIBED IN SECTION 24-72-204 (3)(a)(I), AND THE INFORMATION OR RECORDS MAY ONLY BE DISCLOSED TO THOSE PERSONS DIRECTLY INVOLVED WITH AN ACTIVE INVESTIGATION OR PROCEEDING.

(I) PARAMETERS FOR A FACILITATOR'S PERMISSIBLE AND PROHIBITED FINANCIAL INTERESTS IN A HEALING CENTER, LICENSE PURSUANT TO THIS ARTICLE 170, OR LICENSE PURSUANT TO ARTICLE 50 OF TITLE 44; EXCEPT THAT A FACILITATOR MAY NOT HAVE A FINANCIAL INTEREST IN MORE THAN FIVE NATURAL MEDICINE BUSINESS LICENSES PURSUANT TO ARTICLE 50 OF TITLE 44.

(J) PARAMETERS FOR A FACILITATOR TO PROVIDE AND SUPERVISE NATURAL MEDICINE SERVICES AT AN AUTHORIZED LOCATION THAT IS NOT A HEALING CENTER'S LICENSED PREMISES, INCLUDING A HEALTH-CARE FACILITY OR A PRIVATE RESIDENCE;

(K) STANDARDS FOR ADVERTISING AND MARKETING A LICENSEE'S SERVICES, INCLUDING: AVOIDING THE MISAPPROPRIATION AND EXPLOITATION OF THE FEDERALLY RECOGNIZED AMERICAN TRIBES AND INDIGENOUS PEOPLE, COMMUNITIES, CULTURES, AND RELIGIONS; AVOIDING THE EXCESSIVE COMMERCIALIZATION OF NATURAL MEDICINE, NATURAL MEDICINE PRODUCT, AND NATURAL MEDICINE SERVICES; PROHIBITING ADVERTISING AND MARKETING OF NATURAL MEDICINE, NATURAL MEDICINE PRODUCT, AND NATURAL MEDICINE SERVICES DIRECTED TO INDIVIDUALS WHO ARE UNDER TWENTY-ONE YEARS OF AGE; AND OTHER PARAMETERS DETERMINED NECESSARY BY THE DIRECTOR.

(III) ANY RULES NECESSARY TO DIFFERENTIATE BETWEEN THE TYPES

OF REGULATED NATURAL MEDICINE OR REGULATED NATURAL MEDICINE PRODUCT PROVIDED FOR PARTICIPANT CONSUMPTION DURING AN ADMINISTRATION SESSION BASED ON QUALITIES, TRADITIONAL USES, AND SAFETY PROFILE;

(IV) ANY RULES DETERMINED NECESSARY BY THE DIRECTOR RELATED TO THE POWERS OR DUTIES GRANTED OR IMPOSED ON THE DIRECTOR PURSUANT TO THIS ARTICLE 170 OR BY ANY OTHER LAW; AND

(V) ANY OTHER MATTERS DETERMINED NECESSARY BY THE DIRECTOR TO IMPLEMENT OR ADMINISTER THIS ARTICLE 170.

(b) BEGINNING ON OR BEFORE DECEMBER 31, 2024, TO REVIEW APPLICATIONS IN THE FORM AND MANNER DETERMINED BY THE DIRECTOR FOR NEW LICENSES, REGISTRATIONS, PERMITS, OR CERTIFICATES AFTER PAYMENT OF THE REQUIRED FEE AND TO GRANT OR DENY LICENSES, REGISTRATIONS, PERMITS, OR CERTIFICATES AS PROVIDED IN THIS ARTICLE 170 OR A RULE PROMULGATED PURSUANT TO THIS ARTICLE 170. THE DIVISION SHALL PRIORITIZE REVIEWING APPLICATIONS FROM APPLICANTS WHO HAVE ESTABLISHED RESIDENCY IN COLORADO.

(c) TO ESTABLISH LICENSES, REGISTRATIONS, PERMITS, OR CERTIFICATES DETERMINED NECESSARY BY THE DIRECTOR TO IMPLEMENT OR ADMINISTER THIS ARTICLE 170, AND TO ESTABLISH ELIGIBILITY REQUIREMENTS AND PRIVILEGES UNDER THE LICENSES, REGISTRATIONS, PERMITS, OR CERTIFICATES;

(d) TO ESTABLISH, WHEN FINANCIALLY FEASIBLE, PROCEDURES, POLICIES, AND PROGRAMS TO ENSURE THIS ARTICLE 170 AND RULES PROMULGATED PURSUANT TO THIS ARTICLE 170 ARE EQUITABLE AND INCLUSIVE AND PROMOTE THE LICENSING, REGISTRATION, AND PERMITTING OF, AND PROVISION OF NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT TO, PERSONS FROM COMMUNITIES THAT HAVE BEEN DISPROPORTIONATELY HARMED BY HIGH RATES OF ARREST FOR CONTROLLED SUBSTANCES, PERSONS WHO FACE BARRIERS TO HEALTH-CARE ACCESS, PERSONS WHO HAVE TRADITIONAL, TRIBAL, OR INDIGENOUS HISTORY WITH NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT, OR TO PERSONS WHO ARE VETERANS. THE DIRECTOR MAY CONSULT THE BOARD WHEN CONSIDERING PROCEDURES, POLICIES, AND PROGRAMS PURSUANT TO THIS SUBSECTION (1)(d).

(e) TO CONDUCT INVESTIGATIONS AND HEARINGS, GATHER EVIDENCE, AND PURSUE DISCIPLINARY ACTIONS PURSUANT TO SECTIONS 12-20-403, 12-20-404, AND 24-4-105, AND THIS ARTICLE 170, WITH RESPECT TO LICENSES, REGISTRATIONS, PERMITS, OR CERTIFICATES WHEN THE DIRECTOR HAS REASONABLE CAUSE TO BELIEVE THAT AN INDIVIDUAL OR ENTITY IS VIOLATING THIS ARTICLE 170 OR A RULE PROMULGATED PURSUANT TO THIS ARTICLE 170;

(f) TO TAKE DISCIPLINARY OR OTHER ACTION AS AUTHORIZED IN SECTION 12-20-404 OR LIMIT THE SCOPE OF PRACTICE OF AN APPLICANT, LICENSEE, REGISTRANT, PERMITTEE, OR CERTIFICATE HOLDER UPON PROOF OF A VIOLATION OF THIS ARTICLE 170 OR A RULE PROMULGATED PURSUANT TO THIS ARTICLE 170;

(g) TO ISSUE CEASE-AND-DESIST ORDERS UNDER THE CIRCUMSTANCES AND IN ACCORDANCE WITH THE PROCEDURES SPECIFIED IN SECTION 12-20-405;

(h) (I) TO PETITION A DISTRICT COURT FOR AN INVESTIGATIVE SUBPOENA APPLICABLE TO A PERSON WHO IS NOT LICENSED, REGISTERED, PERMITTED, OR CERTIFIED PURSUANT TO THIS ARTICLE 170 TO OBTAIN DOCUMENTS OR INFORMATION NECESSARY TO ENFORCE A PROVISION OF THIS ARTICLE 170 OR A RULE PROMULGATED PURSUANT TO THIS ARTICLE 170 AFTER REASONABLE EFFORTS HAVE BEEN MADE TO OBTAIN REQUESTED DOCUMENTS OR INFORMATION WITHOUT A SUBPOENA;

(II) TO APPLY TO ANY COURT OF COMPETENT JURISDICTION TO TEMPORARILY RESTRAIN OR PRELIMINARILY OR PERMANENTLY ENJOIN THE ACT IN QUESTION OF AN INDIVIDUAL WHO OR ENTITY THAT IS NOT LICENSED, REGISTERED, PERMITTED, OR CERTIFIED PURSUANT TO THIS ARTICLE 170 AND TO ENFORCE COMPLIANCE WITH THIS ARTICLE 170 OR A RULE PROMULGATED PURSUANT TO THIS ARTICLE 170 WHENEVER IT APPEARS TO THE DIRECTOR UPON SUFFICIENT EVIDENCE SATISFACTORY TO THE DIRECTOR THAT AN INDIVIDUAL OR ENTITY HAS BEEN OR IS COMMITTING AN ACT PROHIBITED BY THIS ARTICLE 170 OR A RULE PROMULGATED PURSUANT TO THIS ARTICLE 170, AND THE ACT:

(A) THREATENS PUBLIC HEALTH OR SAFETY; OR

(B) CONSTITUTES AN UNLAWFUL ACT FOR WHICH THE INDIVIDUAL OR

ENTITY DOES NOT HOLD THE REQUIRED LICENSE, REGISTRATION, PERMIT, OR CERTIFICATE PURSUANT TO THIS ARTICLE 170 OR A RULE PROMULGATED PURSUANT TO THIS ARTICLE 170;

(i) TO MAINTAIN AND UPDATE AN ONLINE LIST THAT IS ACCESSIBLE TO THE PUBLIC OF LICENSEES, REGISTRANTS, PERMITTEES, AND CERTIFICATE HOLDERS THAT INCLUDES WHETHER THE LICENSEE, REGISTRANT, PERMITTEE, OR CERTIFICATE HOLDER HAS HAD ITS LICENSE, REGISTRATION, PERMIT, OR CERTIFICATE LIMITED, SUSPENDED, OR REVOKED IN ACCORDANCE WITH A DISCIPLINARY ACTION PURSUANT TO THIS ARTICLE 170;

(j) IN COORDINATION WITH THE STATE LICENSING AUTHORITY PURSUANT TO SECTION 44-50-202 (1)(k), ANNUALLY PUBLISH A PUBLICLY AVAILABLE REPORT CONCERNING THE IMPLEMENTATION AND ADMINISTRATION OF THIS ARTICLE 170 AND ARTICLE 50 OF TITLE 44. THE REPORT MUST USE RELEVANT DATA, AS DETERMINED BY THE DIRECTOR AND THE STATE LICENSING AUTHORITY, AND MUST NOT DISCLOSE THE IDENTITY OF ANY PARTICIPANT OR INCLUDE ANY INFORMATION THAT COULD DISCLOSE THE IDENTITY OF A PARTICIPANT.

(k) PERFORM OTHER FUNCTIONS AND DUTIES NECESSARY TO ADMINISTER THIS ARTICLE 170.

(2) THE DIRECTOR SHALL CONSULT THE BOARD WHEN CONSIDERING AND PROMULGATING RULES PURSUANT TO THIS ARTICLE 170.

(3) THE DIVISION HAS AUTHORITY TO COLLECT AVAILABLE AND RELEVANT DATA NECESSARY TO PERFORM FUNCTIONS AND DUTIES NECESSARY TO ADMINISTER THIS ARTICLE 170.

(4) THE DIRECTOR OR A DIVISION EMPLOYEE WITH REGULATORY OVERSIGHT RESPONSIBILITIES FOR LICENSEES, PERMITTEES, REGISTRANTS, OR CERTIFICATE HOLDERS PURSUANT TO THIS ARTICLE 170 SHALL NOT WORK FOR, REPRESENT, PROVIDE CONSULTING SERVICES TO, OR OTHERWISE DERIVE PECUNIARY GAIN FROM A LICENSEE, PERMITTEE, REGISTRANT, OR CERTIFICATE HOLDER THAT IS REGULATED PURSUANT TO THIS ARTICLE 170 OR ANY OTHER BUSINESS ESTABLISHED FOR THE PRIMARY PURPOSE OF PROVIDING SERVICES TO THE NATURAL MEDICINE INDUSTRY FOR A PERIOD OF SIX MONTHS AFTER THE EMPLOYEE'S LAST DAY OF EMPLOYMENT WITH THE DIVISION.

SECTION 5. In Colorado Revised Statutes, **repeal and reenact, with amendments**, 12-170-106 as follows:

12-170-106. Board - creation - appointment - duties - report.

(1) THERE IS CREATED WITHIN THE DIVISION A NATURAL MEDICINE ADVISORY BOARD, WHICH CONSISTS OF FIFTEEN MEMBERS, TO ADVISE THE DIVISION AND THE STATE LICENSING AUTHORITY CONCERNING THE IMPLEMENTATION OF THIS ARTICLE 170 AND ARTICLE 50 OF TITLE 44.

(2) THE GOVERNOR SHALL APPOINT INITIAL BOARD MEMBERS ON OR BEFORE JANUARY 31, 2023, WITH CONSENT OF THE SENATE. THE MEMBERS MUST INCLUDE:

(a) SEVEN MEMBERS WITH SIGNIFICANT EXPERTISE AND EXPERIENCE IN ONE OR MORE OF THE FOLLOWING AREAS: NATURAL MEDICINE THERAPY, MEDICINE, AND RESEARCH; MYCOLOGY AND NATURAL MEDICINE CULTIVATION; LICENSEE QUALIFICATIONS; EMERGENCY MEDICAL SERVICES AND SERVICES PROVIDED BY FIRST RESPONDERS; MENTAL AND BEHAVIORAL HEALTH CARE; HEALTH-CARE INSURANCE AND HEALTH-CARE POLICY; AND PUBLIC HEALTH, DRUG POLICY, AND HARM REDUCTION; AND

(b) EIGHT MEMBERS WITH SIGNIFICANT EXPERTISE AND EXPERIENCE IN ONE OR MORE OF THE FOLLOWING AREAS: RELIGIOUS USE OF NATURAL MEDICINES; ISSUES CONFRONTING VETERANS; TRADITIONAL TRIBAL OR INDIGENOUS USE OF NATURAL MEDICINES; LEVELS AND DISPARITIES IN ACCESS TO HEALTH-CARE SERVICES AMONG DIFFERENT COMMUNITIES; AND PAST CRIMINAL JUSTICE REFORM EFFORTS IN COLORADO. AT LEAST ONE OF THE EIGHT MEMBERS MUST HAVE EXPERTISE OR EXPERIENCE IN TRADITIONAL, TRIBAL, OR INDIGENOUS USE OF NATURAL MEDICINES.

(3) THE BOARD INCLUDES THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OF REVENUE, OR THE EXECUTIVE DIRECTOR'S DESIGNEE, SERVING AS A NON-VOTING MEMBER.

(4) (a) FOR THE INITIAL BOARD, SEVEN OF THE MEMBERS ARE APPOINTED TO A TERM OF TWO YEARS AND EIGHT MEMBERS ARE APPOINTED TO A TERM OF FOUR YEARS AS DESIGNATED IN THE GOVERNOR'S APPOINTMENT.

(b) AT THE EXPIRATION OF THE TERMS OF THE MEMBERS OF THE

INITIAL BOARD PURSUANT TO SUBSECTION (2) OF THIS SECTION, THE GOVERNOR SHALL APPOINT MEMBERS TO THE BOARD, WITHOUT CONSENT OF THE SENATE. EACH MEMBER APPOINTED BY THE GOVERNOR IS APPOINTED TO A TERM OF FOUR YEARS.

(c) EXCEPT FOR THE EXECUTIVE DIRECTOR OF THE STATE LICENSING AUTHORITY, OR THE EXECUTIVE DIRECTOR'S DESIGNEE, MEMBERS OF THE BOARD MAY SERVE UP TO TWO CONSECUTIVE TERMS. MEMBERS ARE SUBJECT TO REMOVAL FOR MISCONDUCT, INCOMPETENCE, NEGLECT OF DUTY, OR UNPROFESSIONAL CONDUCT.

(5) THE BOARD SHALL MAKE RECOMMENDATIONS TO THE DIRECTOR AND STATE LICENSING AUTHORITY RELATED TO, BUT NOT LIMITED TO, THE FOLLOWING AREAS:

(a) ACCURATE PUBLIC HEALTH APPROACHES REGARDING USE, BENEFITS, HARMS, AND RISK REDUCTION FOR NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT AND THE CONTENT AND SCOPE OF EDUCATIONAL CAMPAIGNS RELATED TO NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT;

(b) RESEARCH RELATED TO THE EFFICACY AND REGULATION OF NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT, INCLUDING RECOMMENDATIONS RELATED TO PRODUCT SAFETY, HARM REDUCTION, AND CULTURAL RESPONSIBILITY;

(c) THE PROPER CONTENT OF TRAINING PROGRAMS, EDUCATIONAL AND EXPERIENTIAL REQUIREMENTS, AND QUALIFICATIONS FOR FACILITATORS. WHEN CONSIDERING RECOMMENDATIONS MADE PURSUANT TO THIS SUBSECTION (5)(c), THE BOARD MAY CONSIDER:

(I) TIERED FACILITATOR LICENSING, FOR THE PURPOSE OF REQUIRING VARYING LEVELS OF EDUCATION AND TRAINING DEPENDENT UPON THE TYPE OF PARTICIPANT THAT THE FACILITATOR WILL BE PROVIDING SERVICES TO AND THE TYPE OF SERVICES THE FACILITATOR WILL BE PROVIDING;

(II) LIMITED WAIVERS OF EDUCATION AND TRAINING REQUIREMENTS BASED UPON THE APPLICANT'S PRIOR EXPERIENCE, TRAINING, OR SKILLS, INCLUDING BUT NOT LIMITED TO NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT; AND

(III) THE REMOVAL OF UNREASONABLE FINANCIAL OR LOGISTICAL BARRIERS THAT MAKE OBTAINING A FACILITATOR LICENSE COMMERCIALY UNREASONABLE FOR INDIVIDUALS, INCLUDING LOW-INCOME INDIVIDUALS.

(d) AFFORDABLE, EQUITABLE, ETHICAL, AND CULTURALLY RESPONSIBLE ACCESS TO NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT AND REQUIREMENTS TO ENSURE THIS ARTICLE 170 IS EQUITABLE AND INCLUSIVE. IN PERFORMING THIS REQUIREMENT, THE BOARD MAY CONSIDER MAKING RECOMMENDATIONS ON WAYS TO REDUCE THE COSTS OF LICENSURE FOR LOW-INCOME INDIVIDUALS, FOR PROVIDING INCENTIVES FOR THE PROVISION OF NATURAL MEDICINE SERVICES AT A REDUCED COST TO INDIVIDUALS WITH LOW INCOME, AND PROVIDING INCENTIVES FOR THE PROVISION OF NATURAL MEDICINE SERVICES IN GEOGRAPHIC AND CULTURALLY DIVERSE REGIONS OF THE STATE.

(e) APPROPRIATE REGULATORY CONSIDERATIONS FOR EACH TYPE OF NATURAL MEDICINE, AND THE PREPARATION SESSION, ADMINISTRATION SESSION, AND INTEGRATION SESSION;

(f) THE ADDITION OF OTHER TYPES OF NATURAL MEDICINE TO THIS ARTICLE 170 AND ARTICLE 50 OF TITLE 44 PURSUANT TO SECTION 12-170-104 (12)(b)(I), (12)(b)(II), OR (12)(b)(III) BASED ON AVAILABLE MEDICAL, PSYCHOLOGICAL, AND SCIENTIFIC STUDIES, RESEARCH, AND OTHER INFORMATION RELATED TO THE SAFETY AND EFFICACY OF EACH NATURAL MEDICINE, AND SHALL PRIORITIZE CONSIDERING THE ADDITION OF IBOGAINE PURSUANT TO SECTION 12-170-104 (12)(b)(II), TO THIS ARTICLE 170, AND ARTICLE 50 OF TITLE 44;

(g) ALL RULES TO BE PROMULGATED BY THE DIRECTOR PURSUANT TO THIS ARTICLE 170, AND THE STATE LICENSING AUTHORITY PURSUANT TO ARTICLE 50 OF TITLE 44; AND

(h) REQUIREMENTS FOR ACCURATE AND COMPLETE DATA COLLECTION, REPORTING, AND PUBLICATION OF INFORMATION RELATED TO THE IMPLEMENTATION OF THIS ARTICLE 170.

(6) THE BOARD SHALL, ON AN ONGOING BASIS, REVIEW AND EVALUATE EXISTING AND CURRENT RESEARCH, STUDIES, AND REAL-WORLD DATA RELATED TO NATURAL MEDICINE AND MAKE RECOMMENDATIONS TO THE GENERAL ASSEMBLY AND OTHER RELEVANT STATE AGENCIES AS TO

WHETHER NATURAL MEDICINE, NATURAL MEDICINE PRODUCT, NATURAL MEDICINE SERVICES, AND ASSOCIATED SERVICES SHOULD BE COVERED UNDER HEALTH FIRST COLORADO OR OTHER INSURANCE PROGRAMS AS A COST-EFFECTIVE INTERVENTION FOR VARIOUS MENTAL HEALTH CONDITIONS, INCLUDING, BUT NOT LIMITED TO, END-OF-LIFE DISTRESS, SUBSTANCE USE DISORDER, ALCOHOL USE DISORDER, DEPRESSIVE DISORDERS, NEUROLOGICAL DISORDERS, CLUSTER HEADACHES, AND POST-TRAUMATIC STRESS DISORDER.

(7) THE BOARD SHALL, ON AN ONGOING BASIS, REVIEW AND EVALUATE SUSTAINABILITY ISSUES RELATED TO NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT AND THE IMPACT ON TRIBAL AND INDIGENOUS CULTURES AND DOCUMENT EXISTING RECIPROCITY EFFORTS AND CONTINUING SUPPORT MEASURES THAT ARE NEEDED.

(8) THE BOARD SHALL PUBLISH AN ANNUAL REPORT DESCRIBING ITS ACTIVITIES, INCLUDING THE RECOMMENDATIONS AND ADVICE PROVIDED TO THE DIRECTOR, THE STATE LICENSING AUTHORITY, AND THE GENERAL ASSEMBLY.

(9) THE DIVISION SHALL PROVIDE REASONABLE REQUESTED TECHNICAL, LOGISTICAL, AND OTHER SUPPORT TO THE BOARD TO ASSIST THE BOARD WITH ITS DUTIES AND OBLIGATIONS.

SECTION 6. In Colorado Revised Statutes, **repeal and reenact, with amendments**, 12-170-107 as follows:

12-170-107. Federally recognized American tribes and Indigenous community working group - creation - duties. (1) THE DIRECTOR SHALL ESTABLISH THE FEDERALLY RECOGNIZED AMERICAN TRIBES AND INDIGENOUS COMMUNITY WORKING GROUP FOR THE PURPOSE OF ENGAGING AND CREATING A DIALOGUE TO IDENTIFY ISSUES RELATED TO THE COMMERCIALIZATION OF NATURAL MEDICINE, NATURAL MEDICINE PRODUCT, AND NATURAL MEDICINE SERVICES FOR TRIBAL AND INDIGENOUS PEOPLE, COMMUNITIES, CULTURES, AND RELIGIONS. THE COMMUNITY WORKING GROUP SHALL STUDY THE FOLLOWING:

(a) AVOIDING THE MISAPPROPRIATION AND EXPLOITATION OF THE FEDERALLY RECOGNIZED AMERICAN TRIBES AND INDIGENOUS PEOPLE, COMMUNITIES, CULTURES, AND RELIGIONS;

(b) AVOIDING THE EXCESSIVE COMMERCIALIZATION OF NATURAL MEDICINE, NATURAL MEDICINE PRODUCT, AND NATURAL MEDICINE SERVICES;

(c) ANY CONSERVATION ISSUES ASSOCIATED WITH THE LEGALIZATION AND REGULATION OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT, INCLUDING THE POTENTIAL FOR FURTHER DEPLETION OF PEYOTE DUE TO PEYOTE BEING A SOURCE OF Mescaline; AND

(d) BEST PRACTICES AND OPEN COMMUNICATION TO BUILD TRUST AND UNDERSTANDING BETWEEN THE FEDERALLY RECOGNIZED AMERICAN TRIBES AND INDIGENOUS PEOPLE AND COMMUNITIES, THE BOARD, THE DIVISION, THE STATE LICENSING AUTHORITY, AND LAW ENFORCEMENT AGENCIES, FOR THE PURPOSE OF AVOIDING UNNECESSARY BURDENS AND CRIMINALIZATION OF TRADITIONAL TRIBAL AND INDIGENOUS USES OF NATURAL MEDICINE.

(2) THE WORKING GROUP SHALL ADVISE THE BOARD AND THE DIVISION ON ITS FINDINGS AND RECOMMENDATIONS PURSUANT TO THE SUBJECTS IDENTIFIED IN SUBSECTION (1) OF THIS SECTION.

(3) THE DIRECTOR IS ENCOURAGED TO ENGAGE WITH THE FEDERALLY RECOGNIZED AMERICAN TRIBES AND INDIGENOUS PEOPLE WHO HAVE SIGNIFICANT EXPERIENCE WITH TRADITIONAL USE OF NATURAL MEDICINE AND OTHER PERSONS DEEMED NECESSARY BY THE DIRECTOR FOR THE PURPOSE OF THIS SECTION.

SECTION 7. In Colorado Revised Statutes, **repeal and reenact, with amendments**, 12-170-108 as follows:

12-170-108. License required - unauthorized practice - mandatory disclosure of information - rule. (1) AN INDIVIDUAL SHALL NOT ENGAGE IN FACILITATION, OR REPRESENT TO THE PUBLIC OR IDENTIFY THE INDIVIDUAL'S SELF AS A FACILITATOR, IN THIS STATE UNTIL THE INDIVIDUAL HAS RECEIVED A LICENSE FROM THE DIRECTOR.

(2) A FACILITATOR SHALL CONSPICUOUSLY DISPLAY THE LICENSE ISSUED BY THE DIRECTOR IN THE HEALING CENTER, INCLUDING INFORMATION CONCERNING HOW TO FILE A COMPLAINT AGAINST THE FACILITATOR WITH THE DIRECTOR.

(3) EVERY LICENSEE, PERMITTEE, REGISTRANT, OR CERTIFICATE HOLDER SHALL PROVIDE THE FOLLOWING INFORMATION IN WRITING TO EACH PARTICIPANT PRIOR TO A PREPARATION SESSION, ADMINISTRATION SESSION, AND INTEGRATION SESSION:

(a) THE NAME, ADDRESS, AND PHONE NUMBER OF THE LICENSEE, PERMITTEE, REGISTRANT, OR CERTIFICATE HOLDER;

(b) AN EXPLANATION OF THE REGULATIONS APPLICABLE TO THE LICENSEE, PERMITTEE, REGISTRANT, OR CERTIFICATE HOLDER PURSUANT TO THIS ARTICLE 170 OR RULES PROMULGATED PURSUANT TO THIS ARTICLE 170;

(c) A LISTING OF TRAINING, EDUCATIONAL AND EXPERIENTIAL REQUIREMENTS, AND QUALIFICATIONS THE LICENSEE, PERMITTEE, REGISTRANT, OR CERTIFICATE HOLDER PURSUANT TO THIS ARTICLE 170 OR RULES PROMULGATED PURSUANT TO THIS ARTICLE 170 SATISFIED IN ORDER TO OBTAIN A LICENSE, PERMIT, REGISTRATION, OR CERTIFICATE;

(d) A STATEMENT INDICATING THAT THE LICENSEE, PERMITTEE, REGISTRANT, OR CERTIFICATE HOLDER IS REGULATED BY THE DIVISION, AND AN ADDRESS AND TELEPHONE NUMBER FOR THE DIVISION; AND

(e) A STATEMENT INDICATING THAT THE PARTICIPANT IS ENTITLED TO RECEIVE INFORMATION ABOUT NATURAL MEDICINE SERVICES, MAY TERMINATE NATURAL MEDICINE SERVICES AT ANY TIME, AND MAY TERMINATE PREVIOUSLY PROVIDED INFORMED CONSENT FOR PHYSICAL CONTACT AT ANY TIME.

(4) NOTHING IN THIS SECTION PROHIBITS AN INDIVIDUAL FROM PERFORMING A BONA FIDE RELIGIOUS, CULTURALLY TRADITIONAL, OR SPIRITUAL CEREMONY, IF THE INDIVIDUAL INFORMS AN INDIVIDUAL ENGAGING IN THE CEREMONY THAT THE INDIVIDUAL IS NOT A LICENSED FACILITATOR, AND THAT THE CEREMONY IS NOT ASSOCIATED WITH COMMERCIAL, BUSINESS, OR FOR-PROFIT ACTIVITY.

SECTION 8. In Colorado Revised Statutes, **repeal and reenact, with amendments**, 12-170-109 as follows:

12-170-109. Grounds for discipline. (1) THE DIRECTOR MAY TAKE DISCIPLINARY OR OTHER ACTION AS AUTHORIZED IN SECTION 12-20-404

UPON PROOF THAT THE LICENSEE, PERMITTEE, REGISTRANT, OR CERTIFICATE HOLDER:

(a) VIOLATED A PROVISION OF THIS ARTICLE 170 OR A RULE PROMULGATED PURSUANT TO THIS ARTICLE 170;

(b) HAS BEEN CONVICTED OF OR HAS ENTERED A PLEA OF NOLO CONTENDERE TO A FELONY. IN CONSIDERING THE CONVICTION OF OR THE PLEA TO ANY SUCH CRIME, THE DIRECTOR SHALL BE GOVERNED BY THE PROVISIONS OF SECTIONS 12-20-202 (5) AND 24-5-101.

(c) MADE ANY MISSTATEMENT ON AN APPLICATION FOR A LICENSE, REGISTRATION, OR PERMIT TO PRACTICE PURSUANT TO THIS ARTICLE 170 OR ATTEMPTED TO OBTAIN A LICENSE, REGISTRATION, PERMIT, OR CERTIFICATE TO PRACTICE BY FRAUD, DECEPTION, OR MISREPRESENTATION;

(d) COMMITTED AN ACT OR FAILED TO PERFORM AN ACT NECESSARY TO MEET THE GENERALLY ACCEPTED PROFESSIONAL STANDARDS OF CONDUCT TO PRACTICE A PROFESSION LICENSED PURSUANT TO THIS ARTICLE 170 OR PROMULGATED BY RULE PURSUANT TO 12-170-105 (1)(a)(II)(D), INCLUDING PERFORMING SERVICES OUTSIDE OF THE PERSON'S AREA OF TRAINING, EXPERIENCE, OR COMPETENCE;

(e) EXCESSIVELY OR HABITUALLY USES OR ABUSES ALCOHOL OR CONTROLLED SUBSTANCES;

(f) VIOLATED ANY OF THE PROVISIONS OF THIS ARTICLE 170, AN APPLICABLE PROVISION OF ARTICLE 20 OF THIS TITLE 12, OR ANY VALID ORDER OF THE DIRECTOR;

(g) IS GUILTY OF UNPROFESSIONAL OR DISHONEST CONDUCT;

(h) ADVERTISES BY MEANS OF FALSE OR DECEPTIVE STATEMENT;

(i) FAILS TO DISPLAY THE LICENSE AS PROVIDED IN SECTION 12-170-108 (2);

(j) FAILS TO COMPLY WITH THE RULES PROMULGATED BY THE DIRECTOR PURSUANT TO THIS ARTICLE 170;

(k) IS GUILTY OF WILLFUL MISREPRESENTATION;

(l) FAILS TO DISCLOSE TO THE DIRECTOR WITHIN FORTY-FIVE DAYS A CONVICTION FOR A FELONY OR ANY CRIME THAT IS RELATED TO THE PRACTICE AS A FACILITATOR;

(m) AIDS OR ABETS THE UNLICENSED PRACTICE OF FACILITATION; OR

(n) FAILS TO TIMELY RESPOND TO A COMPLAINT SENT BY THE DIRECTOR PURSUANT TO SECTION 12-170-110.

SECTION 9. In Colorado Revised Statutes, **repeal and reenact, with amendments**, 12-170-110 as follows:

12-170-110. Disciplinary proceedings - administrative law judges - judicial review. (1) THE DIRECTOR MAY, THROUGH THE DEPARTMENT, EMPLOY ADMINISTRATIVE LAW JUDGES TO CONDUCT HEARINGS AS PROVIDED BY THIS SECTION OR ON ANY MATTER WITHIN THE DIRECTOR'S JURISDICTION UPON SUCH CONDITIONS AND TERMS AS THE DIRECTOR MAY DETERMINE.

(2) A PROCEEDING FOR DISCIPLINE OF A LICENSEE, PERMITTEE, REGISTRANT, OR CERTIFICATE HOLDER MUST BE COMMENCED WHEN THE DIRECTOR HAS REASONABLE GROUNDS TO BELIEVE THAT A LICENSEE, PERMITTEE, REGISTRANT, OR CERTIFICATE HOLDER HAS COMMITTED ACTS THAT MAY VIOLATE THE PROVISIONS OF THIS ARTICLE 170 OR RULES PROMULGATED PURSUANT TO THIS ARTICLE 170. THE GROUNDS MAY BE ESTABLISHED BY AN INVESTIGATION BEGUN BY THE DIRECTOR ON THE DIRECTOR'S OWN MOTION OR BY AN INVESTIGATION PURSUANT TO A WRITTEN COMPLAINT. SECTION 12-20-403 AND ARTICLE 4 OF TITLE 24 GOVERN PROCEEDINGS BROUGHT PURSUANT TO THIS SECTION.

(3) ANY HEARING ON THE REVOCATION OR SUSPENSION OF A LICENSE, PERMIT, REGISTRATION, OR CERTIFICATE, OR ON THE DENIAL OF AN APPLICATION FOR A NEW LICENSE, PERMIT, REGISTRATION, OR CERTIFICATE, OR FOR RENEWAL OF A PREVIOUSLY ISSUED LICENSE, PERMIT, REGISTRATION, OR CERTIFICATE MUST BE CONDUCTED BY AN ADMINISTRATIVE LAW JUDGE.

(4) FINAL ACTION BY THE DIRECTOR MAY BE JUDICIALLY REVIEWED PURSUANT TO SECTION 12-20-408.

SECTION 10. In Colorado Revised Statutes, **repeal and reenact, with amendments,** 12-170-111 as follows:

12-170-111. Fees - cash fund - created. (1) BASED UPON THE APPROPRIATION MADE AND SUBJECT TO THE APPROVAL OF THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OF REGULATORY AGENCIES, THE DIRECTOR SHALL ESTABLISH AND ADJUST FEES THAT THE DIRECTOR IS AUTHORIZED BY LAW TO COLLECT SO THAT THE REVENUE GENERATED FROM THE FEES APPROXIMATES ITS DIRECT AND INDIRECT COSTS; EXCEPT THAT FEES MUST NOT EXCEED THE AMOUNT NECESSARY TO ADMINISTER THIS ARTICLE 170.

(2) THE NATURAL MEDICINE FACILITATOR CASH FUND, REFERRED TO IN THIS SECTION AS THE "FUND", IS CREATED IN THE STATE TREASURY. THE FUND CONSISTS OF FEES CREDITED TO THE FUND PURSUANT TO THIS ARTICLE 170 AND ANY OTHER MONEY THAT THE GENERAL ASSEMBLY MAY APPROPRIATE OR TRANSFER TO THE FUND.

(3) THE STATE TREASURER SHALL CREDIT ALL INTEREST AND INCOME DERIVED FROM THE DEPOSIT AND INVESTMENT OF MONEY IN THE FUND TO THE FUND.

(4) MONEY IN THE FUND IS CONTINUOUSLY APPROPRIATED TO THE DEPARTMENT FOR THE ADMINISTRATION OF THIS ARTICLE 170.

SECTION 11. In Colorado Revised Statutes, **repeal and reenact, with amendments,** 12-170-112 as follows:

12-170-112. Local jurisdiction. (1) A LOCAL JURISDICTION SHALL NOT PROHIBIT A FACILITATOR FROM PROVIDING NATURAL MEDICINE SERVICES WITHIN ITS BOUNDARIES IF THE INDIVIDUAL IS A LICENSED FACILITATOR PURSUANT TO THIS ARTICLE 170.

(2) A LOCAL JURISDICTION SHALL NOT ADOPT ORDINANCES OR REGULATIONS THAT ARE UNREASONABLE OR IN CONFLICT WITH THIS ARTICLE 170.

SECTION 12. In Colorado Revised Statutes, **repeal and reenact, with amendments,** 12-170-113 as follows:

12-170-113. Protections. (1) SUBJECT TO THE LIMITATIONS IN THIS

ARTICLE 170 AND ARTICLE 50 OF TITLE 44, BUT NOTWITHSTANDING ANY OTHER PROVISION OF LAW:

(a) ACTIONS AND CONDUCT PERMITTED PURSUANT TO A LICENSE, REGISTRATION, PERMIT, OR CERTIFICATE ISSUED BY THE DIRECTOR PURSUANT TO THIS ARTICLE 170, OR BY THOSE WHO ALLOW PROPERTY TO BE USED PURSUANT TO A LICENSE, REGISTRATION, PERMIT, OR CERTIFICATE ISSUED BY THE DIRECTOR PURSUANT TO THIS ARTICLE 170, ARE LAWFUL AND ARE NOT AN OFFENSE UNDER STATE LAW, OR THE LAWS OF ANY LOCAL JURISDICTION WITHIN THIS STATE; ARE NOT SUBJECT TO A CIVIL FINE, PENALTY, OR SANCTION; ARE NOT A BASIS FOR DETENTION, SEARCH, OR ARREST; AND ARE NOT A BASIS TO DENY ANY RIGHT OR PRIVILEGE, OR TO SEIZE OR FORFEIT ASSETS UNDER STATE LAW OR THE LAWS OF ANY LOCAL JURISDICTION WITHIN THIS STATE.

(b) A CONTRACT IS NOT UNENFORCEABLE ON THE BASIS THAT NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT, AS ALLOWED PURSUANT TO THIS ARTICLE 170, IS PROHIBITED BY FEDERAL LAW;

(c) MENTAL HEALTH CARE, SUBSTANCE USE DISORDER INTERVENTION SERVICES, OR BEHAVIORAL HEALTH SERVICES OTHERWISE COVERED PURSUANT TO THE "COLORADO MEDICAL ASSISTANCE ACT", ARTICLES 4 TO 6 OF TITLE 25.5, MUST NOT BE DENIED ON THE BASIS THAT THEY ARE COVERED IN CONJUNCTION WITH NATURAL MEDICINE SERVICES, OR THAT NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT ARE PROHIBITED BY FEDERAL LAW. INSURANCE OR AN INSURANCE PROVIDER IS NOT REQUIRED TO COVER THE COST OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT.

(d) NOTHING IN THIS SECTION MAY BE CONSTRUED OR INTERPRETED TO PREVENT THE DIRECTOR FROM ENFORCING RULES PROMULGATED BY THE DIRECTOR AGAINST A LICENSEE, REGISTRANT, PERMITTEE, OR CERTIFICATE HOLDER OR LIMIT A STATE OR LOCAL LAW ENFORCEMENT AGENCY'S ABILITY TO INVESTIGATE UNLAWFUL ACTIVITY IN RELATION TO A LICENSEE, REGISTRANT, PERMITTEE, OR CERTIFICATE HOLDER.

(2) A PROFESSIONAL OR OCCUPATIONAL LICENSE, REGISTRATION, PERMIT, OR CERTIFICATE HOLDER IS NOT SUBJECT TO PROFESSIONAL DISCIPLINE OR LOSS OF A PROFESSIONAL OR OCCUPATIONAL LICENSE, REGISTRATION, PERMIT, OR CERTIFICATE FOR PROVIDING ADVICE OR

SERVICES ARISING OUT OF OR RELATED TO A NATURAL MEDICINE LICENSE, REGISTRATION, PERMIT, OR CERTIFICATE ISSUED PURSUANT TO THIS ARTICLE 170 OR ARTICLE 50 OF TITLE 44 OR APPLICATION FOR LICENSE, REGISTRATION, PERMIT, OR CERTIFICATE ISSUED PURSUANT TO THIS ARTICLE 170 OR ARTICLE 50 OF TITLE 44 ON THE BASIS THAT NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT ARE PROHIBITED BY FEDERAL LAW, OR FOR PERSONAL USE OF NATURAL MEDICINE OR NATURAL MEDICINE ALLOWED PURSUANT TO THIS ARTICLE 170. THIS ARTICLE 170 DOES NOT AUTHORIZE AN INDIVIDUAL TO ENGAGE IN CONDUCT THAT IN THE COURSE OF PRACTICING UNDER THE INDIVIDUAL'S LICENSE, REGISTRATION, PERMIT, OR CERTIFICATE WOULD VIOLATE STANDARDS OF CARE OR SCOPE OF PRACTICE OF THE INDIVIDUAL'S PROFESSION OR OCCUPATION AS REQUIRED BY ANY PROVISION OF LAW OR RULE.

SECTION 13. In Colorado Revised Statutes, **repeal and reenact, with amendments**, 12-170-114 as follows:

12-170-114. Liberal construction. THIS ARTICLE 170 MUST BE LIBERALLY CONSTRUED TO EFFECTUATE ITS PURPOSE.

SECTION 14. In Colorado Revised Statutes, **repeal and reenact, with amendments**, 12-170-115 as follows:

12-170-115. Preemption. A LOCAL JURISDICTION SHALL NOT ADOPT, ENACT, OR ENFORCE ANY ORDINANCE, RULE, OR RESOLUTION THAT IS OTHERWISE IN CONFLICT WITH THE PROVISIONS OF THIS ARTICLE 170.

SECTION 15. In Colorado Revised Statutes, **add** 12-170-116 as follows:

12-170-116. Self-executing, severability, conflicting provisions. ALL PROVISIONS OF THIS ARTICLE 170 ARE SELF-EXECUTING EXCEPT AS SPECIFIED HEREIN, ARE SEVERABLE, AND, EXCEPT WHEN OTHERWISE INDICATED, SHALL SUPERSEDE CONFLICTING STATE STATUTORY, LOCAL CHARTER, ORDINANCE, OR RESOLUTION PROVISIONS, AND OTHER STATE AND LOCAL PROVISIONS. IF ANY PROVISION OF THIS ARTICLE 170 OR ITS APPLICATION TO ANY PERSON OR CIRCUMSTANCE IS HELD INVALID, THE INVALIDITY DOES NOT AFFECT OTHER PROVISIONS OR APPLICATIONS OF THIS ARTICLE 170 THAT CAN BE GIVEN EFFECT WITHOUT THE INVALID PROVISION OR APPLICATION, AND TO THIS END THE PROVISIONS OF THIS ARTICLE 170

ARE SEVERABLE.

SECTION 16. In Colorado Revised Statutes, **add** 12-170-117 as follows:

12-170-117. Repeal of article - review of functions. THIS ARTICLE 170 IS REPEALED, EFFECTIVE SEPTEMBER 1, 2032. BEFORE THE REPEAL, THIS ARTICLE 170 IS SCHEDULED FOR REVIEW IN ACCORDANCE WITH SECTION 24-34-104.

SECTION 17. In Colorado Revised Statutes, 12-20-407, **amend** (1)(a)(V)(V) and (1)(a)(V)(W); and **add** (1)(a)(V)(X) as follows:

12-20-407. Unauthorized practice of profession or occupation - penalties - exclusions. (1) (a) A person commits a class 2 misdemeanor and shall be punished as provided in section 18-1.3-501 if the person:

(V) Practices or offers or attempts to practice any of the following professions or occupations without an active license, certification, or registration issued under the part or article of this title 12 governing the particular profession or occupation:

(V) Respiratory therapy, as regulated under article 300 of this title 12; ~~or~~

(W) Veterinary medicine or as a veterinary technician, as regulated under article 315 of this title 12; OR

(X) FACILITATING NATURAL MEDICINE SERVICES, AS REGULATED UNDER ARTICLE 170 OF THIS TITLE 12.

SECTION 18. In Colorado Revised Statutes, 24-1-117, **amend** (4)(a)(X) and (4)(a)(XI); and **add** (4)(a)(XII) as follows:

24-1-117. Department of revenue - creation. (4) (a) The department of revenue consists of the following divisions:

(X) The auto industry division, created in section 44-20-105. The division is a **type 2** entity, as defined in section 24-1-105, and exercises its powers and performs its duties and functions under the department of

revenue; and

(XI) The state licensing authority created in section 44-10-201; AND

(XII) THE NATURAL MEDICINE DIVISION, CREATED IN SECTION 44-50-201, WHICH IS A **TYPE 2** ENTITY, AS DEFINED IN SECTION 24-1-105.

SECTION 19. In Colorado Revised Statutes, 24-34-104, **add** (33)(a)(VII) and (33)(a)(VIII) as follows:

24-34-104. General assembly review of regulatory agencies and functions for repeal, continuation, or reestablishment - legislative declaration - repeal. (33) (a) The following agencies, functions, or both, are scheduled for repeal on September 1, 2032:

(VII) THE "NATURAL MEDICINE HEALTH ACT OF 2022", ARTICLE 170 OF TITLE 12;

(VIII) THE "COLORADO NATURAL MEDICINE CODE", ARTICLE 50 OF TITLE 44.

SECTION 20. In Colorado Revised Statutes, **add** 25-1.5-120 as follows:

25-1.5-120. Natural medicine testing and standards - rules.

(1) THE DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT, IN COORDINATION WITH THE DEPARTMENT OF REVENUE, TO ENSURE CONSISTENCY BETWEEN RULES, SHALL PROMULGATE RULES CONCERNING TESTING STANDARDS AND CERTIFICATION REQUIREMENTS OF NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT REGULATED BY THE DEPARTMENT OF REVENUE PURSUANT TO ARTICLE 50 OF TITLE 44.

(2) AT A MINIMUM, THE RULES MUST:

(a) ESTABLISH NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT TESTING STANDARDS AND CERTIFICATION REQUIREMENTS;

(b) ESTABLISH A NATURAL MEDICINE INDEPENDENT TESTING AND CERTIFICATION PROGRAM FOR LICENSEES PURSUANT TO ARTICLE 50 OF TITLE 44, WITHIN AN IMPLEMENTATION TIME FRAME ESTABLISHED BY THE

DEPARTMENT OF REVENUE, REQUIRING LICENSEES TO TEST NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT TO ENSURE, AT A MINIMUM, THAT PRODUCTS TRANSFERRED FOR HUMAN CONSUMPTION BY NATURAL PERSONS OR ENTITIES LICENSED PURSUANT TO ARTICLE 50 OF TITLE 44 DO NOT CONTAIN CONTAMINANTS THAT ARE INJURIOUS TO HEALTH AND TO ENSURE CORRECT LABELING;

(c) ESTABLISH PROCEDURES THAT ENSURE NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT ARE QUARANTINED AND NOTIFICATION PROCEDURES IF TEST RESULTS INDICATE THE PRESENCE OF QUANTITIES OF ANY SUBSTANCE DETERMINED TO BE INJURIOUS TO HEALTH;

(d) ENSURE THAT TESTING VERIFIES CONCENTRATION REPRESENTATIONS AND HOMOGENEITY FOR CORRECT LABELING;

(e) ESTABLISH AN ACCEPTABLE VARIANCE FOR CONCENTRATION REPRESENTATIONS AND PROCEDURES TO ADDRESS CONCENTRATION MISREPRESENTATIONS; AND

(f) ESTABLISH THE PROTOCOLS AND FREQUENCY OF NATURAL MEDICINE TESTING BY LICENSEES.

SECTION 21. In Colorado Revised Statutes, **add** article 50 to title 44 as follows:

ARTICLE 50
Natural Medicine

PART 1
COLORADO NATURAL MEDICINE CODE

44-50-101. Short title. THE SHORT TITLE OF THIS ARTICLE 50 IS THE "COLORADO NATURAL MEDICINE CODE".

44-50-102. Legislative declaration. (1) THE GENERAL ASSEMBLY FINDS AND DECLARES THAT:

(a) THE PEOPLE OF COLORADO APPROVED STATUTORY MEASURES THAT, IN PART, INTENDED TO ENSURE THAT PEOPLE IN COLORADO HAVE ACCESS TO REGULATED NATURAL MEDICINE AND REGULATED NATURAL

MEDICINE PRODUCT;

(b) THE DEPARTMENT IS UNIQUELY SUITED TO REGULATE THE CULTIVATION, MANUFACTURING, TESTING, STORING, DISTRIBUTION, TRANSPORTATION, TRANSFERRING, AND DISPENSATION OF REGULATED NATURAL MEDICINE AND REGULATED NATURAL MEDICINE PRODUCT BECAUSE OF ITS EXPERIENCE AND EXISTING RESOURCES IN REGULATING ALCOHOL, TOBACCO, AND MARIJUANA; AND

(c) IT IS NECESSARY TO ENTRUST THE REGULATION OF THE CULTIVATION, MANUFACTURING, TESTING, STORING, DISTRIBUTION, TRANSPORTATION, TRANSFERRING, AND DISPENSATION OF REGULATED NATURAL MEDICINE AND REGULATED NATURAL MEDICINE PRODUCT TO THE DEPARTMENT IN ORDER TO IMPLEMENT THE REGULATORY MEASURES IN A MANNER THAT HONORS THE INTENT OF THE PEOPLE, PROMOTES PUBLIC TRUST, SUPPORTS THE INTEGRITY AND SUSTAINABILITY OF THE REGULATORY MEASURES, AND ENSURES REGULATORY EFFICIENCY.

(2) THE GENERAL ASSEMBLY DECLARES THAT THIS ARTICLE 50 IS DEEMED AN EXERCISE OF THE POLICE POWERS OF THE STATE FOR THE PROTECTION OF THE ECONOMIC AND SOCIAL WELFARE AND THE HEALTH, PEACE, AND MORALS OF THE PEOPLE OF THIS STATE.

(3) THE GENERAL ASSEMBLY DECLARES THAT IT IS UNLAWFUL UNDER STATE LAW TO CULTIVATE, MANUFACTURE, TEST, STORE, DISTRIBUTE, TRANSPORT, TRANSFER, AND DISPENSE NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT, EXCEPT IN COMPLIANCE WITH THE TERMS, CONDITIONS, LIMITATIONS, AND RESTRICTIONS IN THIS ARTICLE 50; RULES PROMULGATED PURSUANT TO THIS ARTICLE 50; ARTICLE 170 OF TITLE 12; RULES PROMULGATED PURSUANT TO ARTICLE 170 OF TITLE 12; ARTICLE 1.5 OF TITLE 25; RULES PROMULGATED PURSUANT TO ARTICLE 1.5 OF TITLE 25; TITLE 16; AND TITLE 18.

44-50-103. Definitions. AS USED IN THIS ARTICLE 50, UNLESS THE CONTEXT OTHERWISE REQUIRES:

(1) "ADMINISTRATION SESSION" MEANS A SESSION CONDUCTED AT A HEALING CENTER, OR OTHER LOCATION IF PERMITTED BY THIS ARTICLE 50 OR RULES PROMULGATED PURSUANT TO THIS ARTICLE 50, DURING WHICH A PARTICIPANT CONSUMES AND EXPERIENCES THE EFFECTS OF NATURAL

MEDICINE UNDER THE SUPERVISION OF A FACILITATOR.

(2) "BOARD" MEANS THE STATE NATURAL MEDICINE ADVISORY BOARD CREATED IN SECTION 12-170-106.

(3) "DIRECTOR" MEANS THE DIRECTOR OF THE DIVISION OF PROFESSIONS AND OCCUPATIONS OR THE DIRECTOR'S DESIGNEE.

(4) "DIVISION" MEANS THE DIVISION OF PROFESSIONS AND OCCUPATIONS CREATED IN THE DEPARTMENT PURSUANT TO SECTION 12-20-103.

(5) "FACILITATOR" MEANS A NATURAL PERSON WHO IS TWENTY-ONE YEARS OF AGE OR OLDER, HAS THE NECESSARY QUALIFICATIONS, TRAINING, EXPERIENCE, AND KNOWLEDGE TO PERFORM AND SUPERVISE NATURAL MEDICINE SERVICES FOR A PARTICIPANT, AND IS LICENSED BY THE DIRECTOR TO ENGAGE IN THE PRACTICE OF FACILITATION.

(6) "HEALING CENTER" MEANS A FACILITY WHERE AN ENTITY IS LICENSED BY THE STATE LICENSING AUTHORITY THAT PERMITS A FACILITATOR TO PROVIDE AND SUPERVISE NATURAL MEDICINE SERVICES FOR A PARTICIPANT.

(7) "HEALTH-CARE FACILITY" MEANS AN ENTITY THAT IS LICENSED, CERTIFIED, OR OTHERWISE PERMITTED BY LAW TO ADMINISTER MEDICAL TREATMENT IN THIS STATE, INCLUDING A HOSPITAL, HOSPICE FACILITY, COMMUNITY MENTAL HEALTH CENTER, FEDERALLY QUALIFIED HEALTH CENTER, RURAL HEALTH CLINIC, ORGANIZATION PROVIDING A PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY, LONG-TERM CARE FACILITY, CONTINUING CARE RETIREMENT COMMUNITY, OR OTHER TYPE OF ENTITY WHERE HEALTH CARE IS PROVIDED.

(8) "INTEGRATION SESSION" MEANS A MEETING BETWEEN A PARTICIPANT AND FACILITATOR THAT OCCURS AFTER THE COMPLETION OF AN ADMINISTRATION SESSION.

(9) "LICENSE" MEANS TO GRANT A LICENSE, PERMIT, OR REGISTRATION PURSUANT TO THIS ARTICLE 50 OR RULES PROMULGATED PURSUANT TO THIS ARTICLE 50.

(10) "LICENSED PREMISES" MEANS THE PREMISES SPECIFIED IN AN APPLICATION FOR A LICENSE PURSUANT TO THIS ARTICLE 50 THAT THE LICENSEE OWNS OR IS IN POSSESSION OF AND WITHIN WHICH THE LICENSEE IS AUTHORIZED TO CULTIVATE, MANUFACTURE, TEST, STORE, DISTRIBUTE, TRANSPORT, TRANSFER, OR DISPENSE NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT IN ACCORDANCE WITH THIS ARTICLE 50.

(11) "LICENSEE" MEANS A PERSON LICENSED, REGISTERED, OR PERMITTED PURSUANT TO THIS ARTICLE 50 OR RULES PROMULGATED PURSUANT TO THIS ARTICLE 50.

(12) "LOCAL JURISDICTION" MEANS A COUNTY, MUNICIPALITY, OR CITY AND COUNTY.

(13)(a) "NATURAL MEDICINE" MEANS THE FOLLOWING SUBSTANCES:

(I) PSILOCYBIN; OR

(II) PSILOCYN.

(b) IN ADDITION TO THE SUBSTANCES LISTED IN SUBSECTION (13)(a) OF THIS SECTION, "NATURAL MEDICINE" INCLUDES:

(I) DIMETHYLTRYPTAMINE, IF RECOMMENDED BY THE BOARD AND APPROVED BY THE DIRECTOR AND THE EXECUTIVE DIRECTOR OF THE STATE LICENSING AUTHORITY FOR INCLUSION ON OR AFTER JUNE 1, 2026;

(II) IBOGAIN, IF RECOMMENDED BY THE BOARD AND APPROVED BY THE DIRECTOR AND THE EXECUTIVE DIRECTOR OF THE STATE LICENSING AUTHORITY FOR INCLUSION; OR

(III) Mescaline, IF RECOMMENDED BY THE BOARD AND APPROVED BY THE DIRECTOR AND THE EXECUTIVE DIRECTOR OF THE STATE LICENSING AUTHORITY FOR INCLUSION ON OR AFTER JUNE 1, 2026.

(c) "NATURAL MEDICINE" DOES NOT MEAN A SYNTHETIC OR SYNTHETIC ANALOG OF THE SUBSTANCES LISTED IN SUBSECTIONS (13)(a) AND (13)(b) OF THIS SECTION, INCLUDING A DERIVATIVE OF A NATURALLY OCCURRING COMPOUND OF NATURAL MEDICINE THAT IS PRODUCED USING CHEMICAL SYNTHESIS, CHEMICAL MODIFICATION, OR CHEMICAL

CONVERSION.

(d) NOTWITHSTANDING SUBSECTION (13)(b)(III) OF THIS SECTION, "MESCALINE" DOES NOT INCLUDE PEYOTE, MEANING ALL PARTS OF THE PLANT CLASSIFIED BOTANICALLY AS *LOPHOPHORA WILLIAMSII* LEMAIRE, WHETHER GROWING OR NOT; ITS SEEDS; ANY EXTRACT FROM ANY PART OF THE PLANT, AND EVERY COMPOUND, SALT, DERIVATIVE, MIXTURE, OR PREPARATION OF THE PLANT; OR ITS SEEDS OR EXTRACTS.

(14) "NATURAL MEDICINE BUSINESS" MEANS ANY OF THE FOLLOWING ENTITIES LICENSED PURSUANT TO THIS ARTICLE 50: A NATURAL MEDICINE HEALING CENTER, A NATURAL MEDICINE CULTIVATION FACILITY, A NATURAL MEDICINE PRODUCTS MANUFACTURER, OR A NATURAL MEDICINE TESTING FACILITY, OR ANOTHER LICENSED ENTITY CREATED BY THE STATE LICENSING AUTHORITY.

(15) "NATURAL MEDICINE PRODUCT" MEANS A PRODUCT INFUSED WITH NATURAL MEDICINE THAT IS INTENDED FOR CONSUMPTION.

(16) "NATURAL MEDICINE SERVICES" MEANS A PREPARATION SESSION, ADMINISTRATION SESSION, AND INTEGRATION SESSION PROVIDED PURSUANT TO ARTICLE 170 OF TITLE 12.

(17) "PARTICIPANT" MEANS A PERSON WHO IS TWENTY-ONE YEARS OF AGE OR OLDER AND WHO RECEIVES NATURAL MEDICINE SERVICES PERFORMED BY AND UNDER THE SUPERVISION OF A FACILITATOR.

(18) "PERSON" MEANS A NATURAL PERSON OR AN ENTITY.

(19) "PREPARATION SESSION" MEANS A MEETING BETWEEN A PARTICIPANT AND FACILITATOR THAT OCCURS BEFORE THE START OF AN ADMINISTRATION SESSION. "PREPARATION SESSION" DOES NOT MEAN AN INITIAL CONSULTATION OR AN INQUIRY RESPONSE ABOUT NATURAL MEDICINE SERVICES.

(20) "PRINCIPLE FILE" MEANS A FILE THAT IS ESTABLISHED BY THE STATE LICENSING AUTHORITY AND CONTAINS LICENSING AND BACKGROUND INFORMATION FOR AN APPLICANT SEEKING LICENSES PURSUANT TO THIS ARTICLE 50.

(21) "REGULATED NATURAL MEDICINE" MEANS NATURAL MEDICINE THAT IS CULTIVATED, MANUFACTURED, TESTED, STORED, DISTRIBUTED, TRANSPORTED, TRANSFERRED, OR DISPENSED PURSUANT TO THIS ARTICLE 50.

(22) "REGULATED NATURAL MEDICINE PRODUCT" MEANS NATURAL MEDICINE PRODUCT THAT IS CULTIVATED, MANUFACTURED, TESTED, STORED, DISTRIBUTED, TRANSPORTED, TRANSFERRED, OR DISPENSED PURSUANT TO THIS ARTICLE 50.

(23) "REMUNERATION" MEANS ANYTHING OF VALUE, INCLUDING MONEY, REAL PROPERTY, TANGIBLE AND INTANGIBLE PERSONAL PROPERTY, CONTRACT RIGHT, CHOSE IN ACTION, SERVICE, AND ANY RIGHT OF USE OR EMPLOYMENT OR PROMISE OR AGREEMENT CONNECTED THEREWITH, BUSINESS PROMOTION, OR COMMERCIAL ACTIVITY.

(24) "STATE LICENSING AUTHORITY" MEANS THE AUTHORITY CREATED FOR THE PURPOSE OF REGULATING AND CONTROLLING THE LICENSING OF THE CULTIVATION, MANUFACTURING, TESTING, STORAGE, DISTRIBUTION, TRANSPORTATION, TRANSFER, AND DISPENSATION OF REGULATED NATURAL MEDICINE AND REGULATED NATURAL MEDICINE PRODUCT IN THIS STATE PURSUANT TO SECTION 44-50-201.

(25) "TRANSFER" MEANS TO GRANT, CONVEY, HAND OVER, ASSIGN, SELL, EXCHANGE, DONATE, OR BARTER, IN ANY MANNER AND BY ANY MEANS, WITH OR WITHOUT REMUNERATION.

44-50-104. Applicability. (1) ALL BUSINESSES, FOR THE PURPOSE OF CULTIVATION, MANUFACTURING, TESTING, STORAGE, DISTRIBUTION, TRANSPORT, TRANSFER, AND DISPENSATION OF REGULATED NATURAL MEDICINE OR REGULATED NATURAL MEDICINE PRODUCT, AS DEFINED IN THIS ARTICLE 50, ARE SUBJECT TO THE TERMS AND CONDITIONS OF THIS ARTICLE 50 AND RULES PROMULGATED PURSUANT TO THIS ARTICLE 50.

(2) A PERSON APPLYING FOR LICENSURE PURSUANT TO THIS ARTICLE 50 MUST COMPLETE FORMS AS PROVIDED BY THE STATE LICENSING AUTHORITY AND MUST PAY THE APPLICATION FEE AND THE LICENSING FEE, WHICH MUST BE CREDITED TO THE REGULATED NATURAL MEDICINE DIVISION CASH FUND ESTABLISHED PURSUANT TO SECTION 44-50-601. THE STATE LICENSING AUTHORITY SHALL PRIORITIZE REVIEWING APPLICATIONS FROM APPLICANTS WHO HAVE ESTABLISHED RESIDENCY IN COLORADO.

(3) THIS ARTICLE 50 SETS FORTH THE EXCLUSIVE MEANS THAT CULTIVATION, MANUFACTURING, TESTING, STORAGE, DISTRIBUTION, TRANSPORT, TRANSFER, AND DISPENSATION OF REGULATED NATURAL MEDICINE AND REGULATED NATURAL MEDICINE PRODUCT MAY OCCUR IN THIS STATE.

(4) (a) NOTHING IN THIS ARTICLE 50 IS INTENDED TO REQUIRE AN EMPLOYER TO PERMIT OR ACCOMMODATE THE USE, CONSUMPTION, POSSESSION, CULTIVATION, MANUFACTURING, TESTING, STORAGE, DISTRIBUTION, TRANSPORT, TRANSFER, AND DISPENSATION OF OR IMPAIRMENT FROM NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT IN THE WORKPLACE OR TO AFFECT THE ABILITY OF EMPLOYERS TO HAVE POLICIES RESTRICTING THE USE OF OR IMPAIRMENT FROM NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT BY EMPLOYEES IN THE WORKPLACE.

(b) NOTHING IN THIS ARTICLE 50 PROHIBITS A PERSON, EMPLOYER, SCHOOL, HOSPITAL, DETENTION FACILITY, CORPORATION, OR ANY OTHER ENTITY THAT OCCUPIES, OWNS, OR CONTROLS A PROPERTY FROM PROHIBITING OR OTHERWISE REGULATING THE CULTIVATION, MANUFACTURING, TESTING, STORAGE, DISTRIBUTION, TRANSPORT, TRANSFER, AND DISPENSATION OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT ON OR IN THAT PROPERTY.

(5) (a) A LOCAL JURISDICTION MAY ENACT ORDINANCES OR REGULATIONS GOVERNING THE TIME, PLACE, AND MANNER OF THE OPERATION OF LICENSES ISSUED PURSUANT TO THIS ARTICLE 50 WITHIN ITS BOUNDARIES.

(b) A LOCAL JURISDICTION MAY NOT PROHIBIT THE ESTABLISHMENT OR OPERATION OF LICENSES PURSUANT TO THIS ARTICLE 50 WITHIN ITS BOUNDARIES.

(c) A LOCAL JURISDICTION MAY NOT PROHIBIT THE TRANSPORTATION OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT WITHIN ITS BOUNDARIES ON PUBLIC ROADS BY A PERSON LICENSED TO EXERCISE SUCH PRIVILEGES PURSUANT TO THIS ARTICLE 50.

(d) A LOCAL JURISDICTION MAY NOT ADOPT ORDINANCES OR REGULATIONS THAT ARE UNREASONABLE OR CONFLICT WITH THIS ARTICLE 50.

PART 2
STATE LICENSING AUTHORITY

44-50-201. State licensing authority - creation. (1) FOR THE PURPOSE OF REGULATING AND LICENSING THE CULTIVATION, MANUFACTURING, TESTING, STORAGE, DISTRIBUTION, TRANSPORT, TRANSFER, AND DISPENSATION OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT BY AND BETWEEN NATURAL MEDICINE LICENSEES IN THIS STATE, THERE IS CREATED THE STATE LICENSING AUTHORITY, WHICH IS THE EXECUTIVE DIRECTOR, OR THE DIRECTOR OF THE NATURAL MEDICINE DIVISION IF DESIGNATED BY THE EXECUTIVE DIRECTOR.

(2) THE EXECUTIVE DIRECTOR IS THE CHIEF ADMINISTRATIVE OFFICER OF THE STATE LICENSING AUTHORITY AND MAY EMPLOY, PURSUANT TO SECTION 13 OF ARTICLE XII OF THE STATE CONSTITUTION, SUCH OFFICERS AND EMPLOYEES AS DETERMINED TO BE NECESSARY. THE OFFICERS AND EMPLOYEES ARE A PART OF THE DEPARTMENT.

(3) THE EXECUTIVE DIRECTOR OF THE STATE LICENSING AUTHORITY OR A STATE LICENSING AUTHORITY EMPLOYEE WITH REGULATORY OVERSIGHT RESPONSIBILITIES FOR THE NATURAL MEDICINE LICENSEES THAT ARE LICENSED BY THE STATE LICENSING AUTHORITY SHALL NOT WORK FOR, REPRESENT, PROVIDE CONSULTING SERVICES TO, OR OTHERWISE DERIVE PECUNIARY GAIN FROM A NATURAL MEDICINE LICENSEE THAT IS LICENSED BY THE STATE LICENSING AUTHORITY OR ANY OTHER BUSINESS ESTABLISHED FOR THE PRIMARY PURPOSE OF PROVIDING SERVICES TO THE NATURAL MEDICINE INDUSTRY FOR A PERIOD OF SIX MONTHS AFTER THE EMPLOYEE'S LAST DAY OF EMPLOYMENT WITH THE STATE LICENSING AUTHORITY.

44-50-202. Powers and duties of state licensing authority - report. (1) THE STATE LICENSING AUTHORITY SHALL:

(a) BEGINNING ON OR BEFORE DECEMBER 31, 2024, GRANT OR REFUSE STATE LICENSES FOR THE CULTIVATION, MANUFACTURING, TESTING, STORAGE, DISTRIBUTION, TRANSPORT, TRANSFER, AND DISPENSATION OF REGULATED NATURAL MEDICINE OR REGULATED NATURAL MEDICINE PRODUCT; SUSPEND, FINE, RESTRICT, OR REVOKE SUCH LICENSES, WHETHER ACTIVE, EXPIRED, OR SURRENDERED, UPON A VIOLATION OF THIS ARTICLE 50 OR A RULE PROMULGATED PURSUANT TO THIS ARTICLE 50; AND IMPOSE ANY PENALTY AUTHORIZED BY THIS ARTICLE 50 OR A RULE PROMULGATED

PURSUANT TO THIS ARTICLE 50. THE STATE LICENSING AUTHORITY MAY TAKE ANY ACTION WITH RESPECT TO A REGISTRATION OR PERMIT PURSUANT TO THIS ARTICLE 50 AS IT MAY WITH RESPECT TO A LICENSE ISSUED PURSUANT TO THIS ARTICLE 50, IN ACCORDANCE WITH THE PROCEDURES ESTABLISHED PURSUANT TO THIS ARTICLE 50.

(b) PROMULGATE RULES FOR THE PROPER REGULATION AND CONTROL OF THE CULTIVATION, MANUFACTURING, TESTING, STORAGE, DISTRIBUTION, TRANSPORT, TRANSFER, AND DISPENSATION OF REGULATED NATURAL MEDICINE OR REGULATED NATURAL MEDICINE PRODUCT AND FOR THE ENFORCEMENT OF THIS ARTICLE 50 AND PROMULGATE AMENDED RULES AND SUCH SPECIAL RULINGS AND FINDINGS AS NECESSARY;

(c) CONDUCT INVESTIGATIONS AND HEARINGS, GATHER EVIDENCE, AND PURSUE DISCIPLINARY ACTIONS WITH RESPECT TO LICENSES WHEN THE STATE LICENSING AUTHORITY HAS REASONABLE CAUSE TO BELIEVE THAT A PERSON OR ENTITY IS VIOLATING THIS ARTICLE 50 OR A RULE PROMULGATED PURSUANT TO THIS ARTICLE 50;

(d) (I) PETITION A DISTRICT COURT FOR AN INVESTIGATIVE SUBPOENA APPLICABLE TO A PERSON WHO IS NOT LICENSED PURSUANT TO THIS ARTICLE 50 TO OBTAIN DOCUMENTS OR INFORMATION NECESSARY TO ENFORCE A PROVISION OF THIS ARTICLE 50 OR A RULE PROMULGATED PURSUANT TO THIS ARTICLE 50 AFTER REASONABLE EFFORTS HAVE BEEN MADE TO OBTAIN REQUESTED DOCUMENTS OR INFORMATION WITHOUT A SUBPOENA;

(II) APPLY TO ANY COURT OF COMPETENT JURISDICTION TO TEMPORARILY RESTRAIN OR PRELIMINARILY OR PERMANENTLY ENJOIN THE ACT IN QUESTION OF A PERSON WHO IS NOT LICENSED PURSUANT TO THIS ARTICLE 50 AND TO ENFORCE COMPLIANCE WITH THIS ARTICLE 50 OR A RULE PROMULGATED PURSUANT TO THIS ARTICLE 50 WHENEVER IT APPEARS TO THE DIRECTOR OF THE NATURAL MEDICINE DIVISION UPON SUFFICIENT EVIDENCE SATISFACTORY TO THE DIRECTOR OF THE NATURAL MEDICINE DIVISION THAT A PERSON HAS BEEN OR IS COMMITTING AN ACT PROHIBITED BY THIS ARTICLE 50 OR A RULE PROMULGATED PURSUANT TO THIS ARTICLE 50, AND THE ACT:

(A) THREATENS PUBLIC HEALTH OR SAFETY; OR

(B) CONSTITUTES AN UNLAWFUL ACT FOR WHICH THE PERSON DOES NOT HOLD THE REQUIRED LICENSE PURSUANT TO THIS ARTICLE 50;

(e) HEAR AND DETERMINE AT A PUBLIC HEARING ANY CONTESTED STATE LICENSE DENIAL AND ANY COMPLAINTS AGAINST A LICENSEE, AND ADMINISTER OATHS AND ISSUE SUBPOENAS TO REQUIRE THE PRESENCE OF PERSONS AND THE PRODUCTION OF PAPERS, BOOKS, AND RECORDS NECESSARY TO THE DETERMINATION OF ANY HEARING SO HELD, ALL IN ACCORDANCE WITH ARTICLE 4 OF TITLE 24. THE STATE LICENSING AUTHORITY MAY, IN ITS DISCRETION, DELEGATE TO THE DEPARTMENT'S HEARING OFFICERS THE AUTHORITY TO CONDUCT LICENSING, DISCIPLINARY, AND RULE-MAKING HEARINGS PURSUANT TO SECTION 24-4-105. WHEN CONDUCTING THE HEARINGS, THE HEARING OFFICERS ARE EMPLOYEES OF THE STATE LICENSING AUTHORITY UNDER THE DIRECTION AND SUPERVISION OF THE EXECUTIVE DIRECTOR AND THE STATE LICENSING AUTHORITY.

(f) DEVELOP FORMS, LICENSES, IDENTIFICATION CARDS, AND APPLICATIONS AS NECESSARY OR CONVENIENT IN THE DISCRETION OF THE STATE LICENSING AUTHORITY FOR THE ADMINISTRATION OF THIS ARTICLE 50 OR A RULE PROMULGATED PURSUANT TO THIS ARTICLE 50;

(g) IN COORDINATION WITH THE DIVISION OF PROFESSIONS AND OCCUPATIONS WITHIN THE DEPARTMENT OF REGULATORY AGENCIES PURSUANT TO SECTION 12-170-105 (1)(j), ANNUALLY PUBLISH A PUBLICLY AVAILABLE REPORT CONCERNING THE IMPLEMENTATION AND ADMINISTRATION OF THIS ARTICLE 50 AND ARTICLE 170 OF TITLE 12. THE REPORT MUST USE RELEVANT DATA, AS DETERMINED BY THE STATE LICENSING AUTHORITY AND THE DIRECTOR, AND MUST NOT DISCLOSE THE IDENTITY OF ANY PARTICIPANT OR INCLUDE ANY INFORMATION THAT COULD DISCLOSE THE IDENTITY OF A PARTICIPANT.

(h) DEVELOP AND PROMOTE ACCURATE PUBLIC EDUCATION CAMPAIGNS RELATED TO THE USE OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT, INCLUDING PUBLIC SERVICE ANNOUNCEMENTS, EDUCATIONAL MATERIALS, AND APPROPRIATE CRISIS RESPONSE MATERIALS, AND DEVELOP AND PROMOTE TRAINING MATERIALS FOR FIRST RESPONDERS AND MULTI-RESPONDERS, INCLUDING LAW ENFORCEMENT, EMERGENCY MEDICAL PROVIDERS, SOCIAL SERVICES PROVIDERS, AND FIRE FIGHTERS.

(2) NOTHING IN THIS ARTICLE 50 DELEGATES TO THE STATE

LICENSING AUTHORITY THE POWER TO FIX PRICES FOR REGULATED NATURAL MEDICINE OR REGULATED NATURAL MEDICINE PRODUCT.

(3) NOTHING IN THIS ARTICLE 50 LIMITS A LAW ENFORCEMENT AGENCY'S ABILITY TO INVESTIGATE UNLAWFUL ACTIVITY IN RELATION TO A NATURAL MEDICINE LICENSEE. A LAW ENFORCEMENT AGENCY HAS THE AUTHORITY TO RUN A COLORADO CRIME INFORMATION CENTER CRIMINAL HISTORY RECORD CHECK OF A LICENSEE OR EMPLOYEE OF A LICENSEE DURING AN INVESTIGATION OF UNLAWFUL ACTIVITY RELATED TO NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT.

(4) THE STATE LICENSING AUTHORITY SHALL COORDINATE WITH THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT CONCERNING THE ESTABLISHMENT OF STANDARDS FOR LICENSING LABORATORIES PURSUANT TO THE REQUIREMENTS OUTLINED IN SECTION 25-1.5-120 FOR REGULATED NATURAL MEDICINE AND REGULATED NATURAL MEDICINE PRODUCT.

(5) THE STATE LICENSING AUTHORITY SHALL, WHEN FINANCIALLY FEASIBLE, ESTABLISH PROCEDURES, POLICIES, AND PROGRAMS TO ENSURE THIS ARTICLE 50 AND RULES PROMULGATED PURSUANT TO THIS ARTICLE 50 ARE EQUITABLE AND INCLUSIVE, PROMOTE THE LICENSING, REGISTRATION, AND PERMITTING OF, AND PROVISION OF NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT TO, PERSONS FROM COMMUNITIES THAT HAVE BEEN DISPROPORTIONATELY HARMED BY HIGH RATES OF ARREST FOR CONTROLLED SUBSTANCES, PERSONS WHO FACE BARRIERS TO HEALTH-CARE ACCESS, PERSONS WHO HAVE TRADITIONAL, TRIBAL, OR INDIGENOUS HISTORY WITH NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT, OR TO PERSONS WHO ARE VETERANS. THE STATE LICENSING AUTHORITY MAY CONSULT THE BOARD WHEN CONSIDERING PROCEDURES, POLICIES, AND PROGRAMS PURSUANT TO THIS SUBSECTION (5).

(6) THE STATE LICENSING AUTHORITY HAS AUTHORITY TO COLLECT AVAILABLE AND RELEVANT DATA NECESSARY TO PERFORM FUNCTIONS AND DUTIES NECESSARY TO ADMINISTER THIS ARTICLE 50.

(7) THE STATE LICENSING AUTHORITY, IN COORDINATION WITH OTHER RELEVANT AGENCIES, SHALL REQUEST AVAILABLE AND RELEVANT DATA CONCERNING LAW ENFORCEMENT INCIDENCES, ADVERSE HEALTH EVENTS, IMPACTS TO HEALTH CARE SYSTEMS, CONSUMER PROTECTION

CLAIMS, AND BEHAVIORAL HEALTH IMPACTS RELATED TO NATURAL MEDICINE, NATURAL MEDICINE PRODUCT, AND NATURAL MEDICINE BUSINESSES. THE STATE LICENSING AUTHORITY SHALL INCLUDE THE AVAILABLE AND RELEVANT DATA IN THE REPORT REQUIRED PURSUANT TO SUBSECTION (1)(g) OF THIS SECTION.

(8) THE STATE LICENSING AUTHORITY SHALL PERFORM OTHER FUNCTIONS AND DUTIES NECESSARY TO ADMINISTER THIS ARTICLE 50.

44-50-203. State licensing authority - rules - legislative declaration. (1) **Mandatory rule-making.** RULES PROMULGATED PURSUANT TO SECTION 44-50-202 (1)(b) MUST INCLUDE THE FOLLOWING SUBJECTS:

(a) PROCEDURES AND REQUIREMENTS CONSISTENT WITH THIS ARTICLE 50 FOR THE ISSUANCE, DENIAL, RENEWAL, REINSTATEMENT, MODIFICATION, SUSPENSION, AND REVOCATION OF LICENSES;

(b) OVERSIGHT REQUIREMENTS FOR LICENSEES;

(c) A SCHEDULE OF APPLICATION, LICENSING, AND RENEWAL FEES FOR LICENSES;

(d) QUALIFICATIONS AND ELIGIBILITY REQUIREMENTS FOR LICENSURE PURSUANT TO THIS ARTICLE 50, INCLUDING CONTINUING ELIGIBILITY EXPECTATIONS, INCLUDING TIMELY PAYING TAXES OWED TO THE DEPARTMENT OF REVENUE, TIMELY FILING TAX RETURNS, AND TIMELY CURING ANY TAX DEFICIENCIES, AND AUTHORIZATION FOR THE DEPARTMENT OF REVENUE TO HAVE ACCESS TO LICENSING INFORMATION TO ENSURE TAX PAYMENT FOR THE EFFECTIVE ADMINISTRATION OF THIS ARTICLE 50;

(e) PERMISSIBLE AND PROHIBITED FINANCIAL INTERESTS IN A LICENSE ISSUED PURSUANT TO THIS ARTICLE 50 OR A LICENSE ISSUED PURSUANT TO ARTICLE 170 OF TITLE 12; EXCEPT THAT A PERSON MAY NOT HAVE A FINANCIAL INTEREST IN MORE THAN FIVE NATURAL MEDICINE BUSINESS LICENSES;

(f) (I) ESTABLISHMENT OF A NATURAL MEDICINE INDEPENDENT TESTING AND CERTIFICATION PROGRAM FOR LICENSEES WITHIN AN IMPLEMENTATION TIME FRAME ESTABLISHED BY THE DIVISION, REQUIRING

LICENSEES TO TEST REGULATED NATURAL MEDICINE AND REGULATED NATURAL MEDICINE PRODUCT TO ENSURE, AT A MINIMUM, THAT REGULATED NATURAL MEDICINE AND REGULATED NATURAL MEDICINE PRODUCT TRANSFERRED FOR HUMAN CONSUMPTION BY PERSONS LICENSED PURSUANT TO THIS ARTICLE 50 DO NOT CONTAIN CONTAMINANTS THAT ARE INJURIOUS TO HEALTH AND TO ENSURE CORRECT LABELING, AS WELL AS:

(A) CERTIFICATION REQUIREMENTS FOR LABORATORIES THAT TEST REGULATED NATURAL MEDICINE AND REGULATED NATURAL MEDICINE PRODUCT, AND REQUIREMENTS THAT THE TEST RESULTS PRODUCED BY A LABORATORY MUST NOT BE USED UNLESS THE LABORATORY IS CERTIFIED;

(B) TESTING PROCEDURES AND FREQUENCY OF REGULATED NATURAL MEDICINE AND REGULATED NATURAL MEDICINE PRODUCT BY LICENSEES;

(C) WHETHER TO ALLOW FOR ANY NATURAL PERSON TO REQUEST AND UTILIZE TESTING SERVICES OF NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT IF THE NATURAL PERSON IS TWENTY-ONE YEARS OF AGE OR OLDER;

(D) DEFINITIONS, PERMISSIONS, AND PROHIBITIONS CONCERNING CONFLICTS OF INTEREST RELATED TO, AND ECONOMIC INTERESTS FOR, PERSONS WHO OWN OR ARE ASSOCIATED WITH A NATURAL MEDICINE TESTING LICENSE AND OTHER LICENSES; AND

(E) PROCEDURES AND REQUIREMENTS NECESSARY TO FACILITATE THE COORDINATION OF DUTIES WITH RESPECT TO THE NATURAL MEDICINE TESTING AND CERTIFICATION PROGRAM WITH THE DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT.

(II) THE STATE LICENSING AUTHORITY SHALL PROMULGATE RULES PURSUANT TO THIS SUBSECTION (1)(f) IN COORDINATION WITH THE DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT TO ENSURE CONSISTENCY BETWEEN RULES.

(g) THE REGULATION OF A LICENSED PREMISES, INCLUDING RULES THAT ALLOW A NATURAL MEDICINE HEALING CENTER LICENSEE'S LICENSED PREMISES TO BE CO-LOCATED WITH ANOTHER NATURAL MEDICINE HEALING CENTER LICENSEE'S LICENSED PREMISES OR A HEALTH-CARE FACILITY;

(h) REQUIREMENTS FOR THE TRANSPORTATION OF REGULATED NATURAL MEDICINE AND REGULATED NATURAL MEDICINE PRODUCT, INCLUDING:

(I) SECURITY REQUIREMENTS;

(II) TRANSPORTATION VEHICLE REQUIREMENTS, INCLUDING REQUIREMENTS FOR SURVEILLANCE;

(III) LIMITS ON THE AMOUNT OF REGULATED NATURAL MEDICINE AND REGULATED NATURAL MEDICINE PRODUCT THAT MAY BE CARRIED IN A TRANSPORTATION VEHICLE;

(IV) RECORD-KEEPING REQUIREMENTS; AND

(V) TRANSPORTATION MANIFEST REQUIREMENTS;

(i) LIMITS ON THE AMOUNT OF REGULATED NATURAL MEDICINE AND REGULATED NATURAL MEDICINE PRODUCT THAT IS ALLOWED FOR PRODUCTION BY A NATURAL MEDICINE CULTIVATION FACILITY LICENSE OR NATURAL MEDICINE PRODUCT MANUFACTURER LICENSE BASED ON A METRIC OR SET OF METRICS. WHEN CONSIDERING ANY LIMITATIONS, THE STATE LICENSING AUTHORITY SHALL CONSIDER THE TOTAL CURRENT AND ANTICIPATED DEMAND FOR REGULATED NATURAL MEDICINE AND REGULATED NATURAL MEDICINE PRODUCT IN COLORADO AND ATTEMPT TO MINIMIZE THE MARKET FOR UNLAWFUL NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT.

(j) RECORDS TO BE KEPT BY LICENSEES AND THE REQUIRED AVAILABILITY OF THE RECORDS FOR INSPECTION BY THE STATE LICENSING AUTHORITY;

(k) REQUIREMENTS TO PREVENT THE TRANSFER OR DIVERSION OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT TO PERSONS UNDER TWENTY-ONE YEARS OF AGE;

(l) PERMITTED AND PROHIBITED TRANSFERS OF REGULATED NATURAL MEDICINE AND REGULATED NATURAL MEDICINE PRODUCT BETWEEN LICENSEES;

(m) STANDARDS FOR ADVERTISING AND MARKETING A LICENSEE'S SERVICES, INCLUDING: AVOIDING THE MISAPPROPRIATION AND EXPLOITATION OF THE FEDERALLY RECOGNIZED AMERICAN TRIBES, AS DEFINED IN SECTION 12-170-104 (7), AND INDIGENOUS PEOPLE, COMMUNITIES, CULTURES, AND RELIGIONS; AVOIDING THE EXCESSIVE COMMERCIALIZATION OF NATURAL MEDICINE, NATURAL MEDICINE PRODUCT, AND NATURAL MEDICINE SERVICES; PROHIBITING ADVERTISING AND MARKETING OF NATURAL MEDICINE, NATURAL MEDICINE PRODUCT, AND NATURAL MEDICINE SERVICES DIRECTED TO INDIVIDUALS WHO ARE UNDER TWENTY-ONE YEARS OF AGE; AND OTHER PARAMETERS DETERMINED NECESSARY BY THE STATE LICENSING AUTHORITY.

(n) THE STANDARDS FOR QUALIFICATION AS A LICENSEE, INCLUDING ENVIRONMENTAL, SOCIAL, AND GOVERNANCE CRITERIA DIRECTED TO THE FINDINGS AND DECLARATIONS SET FORTH IN SECTION 12-170-102.

(2) **Permissive rule-making.** RULES PROMULGATED PURSUANT TO SECTION 44-50-202 (1)(b) MAY INCLUDE, BUT NEED NOT BE LIMITED TO, THE FOLLOWING SUBJECTS:

(a) ESTABLISHMENT OF LICENSES, AND THE PRIVILEGES AND RESTRICTIONS PURSUANT TO SUCH LICENSES, DETERMINED NECESSARY BY THE STATE LICENSING AUTHORITY TO IMPLEMENT OR ADMINISTER THIS ARTICLE 50;

(b) ESTABLISHMENT OF A PRINCIPLE FILE PROCESS AND REQUIREMENTS FOR AN APPLICANT SEEKING TO EXERCISE THE PRIVILEGES OF A LICENSE TYPE IN MULTIPLE LOCATIONS OR SEEKING TO EXERCISE THE PRIVILEGES OF MULTIPLE LICENSE TYPES;

(c) REQUIREMENTS FOR ISSUANCE OF CO-LOCATION PERMITS TO A LICENSEE AUTHORIZING CO-LOCATION WITH ANOTHER LICENSED PREMISES;

(d) REQUIREMENTS AND RESTRICTIONS ON DIFFERENT TYPES OF REGULATED NATURAL MEDICINE OR REGULATED NATURAL MEDICINE PRODUCT;

(e) PACKAGING AND LABELING REQUIREMENTS FOR REGULATED NATURAL MEDICINE OR REGULATED NATURAL MEDICINE PRODUCT, INCLUDING:

(I) WARNING LABELS;

(II) INDIVIDUAL SERVING AND PER-PACKAGE SERVING AMOUNTS;
AND

(III) CONCENTRATION OF THE REGULATED NATURAL MEDICINE OR
REGULATED NATURAL MEDICINE PRODUCT;

(f) SECURITY REQUIREMENTS FOR LICENSED PREMISES, INCLUDING
LIGHTING, PHYSICAL SECURITY, VIDEO, AND ALARM REQUIREMENTS, AND
OTHER MINIMUM PROCEDURES FOR INTERNAL CONTROL AS DEEMED
NECESSARY BY THE STATE LICENSING AUTHORITY TO PROPERLY ADMINISTER
AND ENFORCE THE PROVISIONS OF THIS ARTICLE 50, INCLUDING REPORTING
REQUIREMENTS FOR CHANGES, ALTERATIONS, MODIFICATIONS TO THE
PREMISES, OR ACTIVITIES OR INCIDENTS ON THE PREMISES;

(g) HEALTH AND SAFETY REGULATIONS AND STANDARDS;

(h) SANITARY REQUIREMENTS;

(i) WASTE, DISPOSAL, AND DESTRUCTION REQUIREMENTS OF
REGULATED NATURAL MEDICINE OR REGULATED NATURAL MEDICINE
PRODUCT, INCLUDING RECORD-KEEPING REQUIREMENTS;

(j) STORAGE AND TRANSPORTATION OF REGULATED NATURAL
MEDICINE OR REGULATED NATURAL MEDICINE PRODUCT;

(k) REQUIREMENTS OF LICENSEES TO TRACK AND MANAGE
INVENTORY;

(l) COMPLIANCE WITH, ENFORCEMENT OF, OR VIOLATION OF ANY
PROVISION OF THIS ARTICLE 50, ARTICLE 18 OF TITLE 18, OR ANY RULE
PROMULGATED PURSUANT TO THIS ARTICLE 50, INCLUDING PROCEDURES AND
GROUNDS FOR DENYING, SUSPENDING, FINING, MODIFYING, RESTRICTING, OR
REVOKING A STATE LICENSE ISSUED PURSUANT TO THIS ARTICLE 50 OR ANY
RULE PROMULGATED PURSUANT TO THIS ARTICLE 50;

(m) ESTABLISHING A SCHEDULE OF PENALTIES FOR ALLEGED
VIOLATIONS OF STATUTES AND RULES;

(n) SPECIFICATIONS OF DUTIES OF OFFICERS AND EMPLOYEES OF THE STATE LICENSING AUTHORITY;

(o) GUIDANCE FOR LAW ENFORCEMENT OFFICERS;

(p) REQUIREMENTS FOR INSPECTIONS, INVESTIGATIONS, SEARCHES, SEIZURES, FORFEITURES, EMBARGO, QUARANTINE, RECALLS, AND SUCH ADDITIONAL ACTIVITIES AS MAY BECOME NECESSARY;

(q) PROHIBITION OF MISREPRESENTATION AND UNFAIR PRACTICES;
AND

(r) SUCH OTHER MATTERS AS ARE NECESSARY FOR THE FAIR, IMPARTIAL, STRINGENT, AND COMPREHENSIVE ADMINISTRATION OF THIS ARTICLE 50.

(3) THE STATE LICENSING AUTHORITY SHALL CONSULT THE BOARD WHEN CONSIDERING AND PROMULGATING RULES PURSUANT TO THIS SECTION.

(4)(a) THE STATE LICENSING AUTHORITY MAY, BY RULE, ESTABLISH PROCEDURES FOR THE CONDITIONAL ISSUANCE OF AN EMPLOYEE LICENSE IDENTIFICATION CARD AT THE TIME OF APPLICATION.

(b)(I) THE STATE LICENSING AUTHORITY SHALL BASE ITS ISSUANCE OF AN EMPLOYEE LICENSE IDENTIFICATION CARD PURSUANT TO THIS SUBSECTION (4) ON THE RESULTS OF AN INITIAL INVESTIGATION THAT DEMONSTRATES THE APPLICANT IS QUALIFIED TO HOLD A LICENSE. THE EMPLOYEE LICENSE APPLICATION FOR WHICH AN EMPLOYEE LICENSE IDENTIFICATION CARD WAS ISSUED PURSUANT TO THIS SUBSECTION (4) REMAINS SUBJECT TO DENIAL PENDING THE COMPLETE RESULTS OF THE APPLICANT'S INITIAL FINGERPRINT-BASED CRIMINAL HISTORY RECORD CHECK.

(II) RESULTS OF A FINGERPRINT-BASED CRIMINAL HISTORY RECORD CHECK THAT DEMONSTRATE THAT AN APPLICANT POSSESSING AN EMPLOYEE LICENSE IDENTIFICATION CARD PURSUANT TO THIS SUBSECTION (4) IS NOT QUALIFIED TO HOLD A LICENSE ISSUED PURSUANT TO THIS ARTICLE 50 ARE GROUNDS FOR DENIAL OF THE EMPLOYEE LICENSE APPLICATION. IF THE EMPLOYEE LICENSE APPLICATION IS DENIED, THE APPLICANT SHALL RETURN

THE EMPLOYEE LICENSE IDENTIFICATION CARD TO THE STATE LICENSING AUTHORITY WITHIN A TIME PERIOD THAT THE STATE LICENSING AUTHORITY ESTABLISHES BY RULE.

(III) THE STATE LICENSING AUTHORITY SHALL REQUIRE THE APPLICANT TO HAVE THE APPLICANT'S FINGERPRINTS TAKEN BY A LOCAL LAW ENFORCEMENT AGENCY OR A THIRD PARTY APPROVED BY THE COLORADO BUREAU OF INVESTIGATION. IF AN APPROVED THIRD PARTY TAKES THE APPLICANT'S FINGERPRINTS, THE FINGERPRINTS MAY BE ELECTRONICALLY CAPTURED USING THE COLORADO BUREAU OF INVESTIGATION'S APPROVED LIFESCAN EQUIPMENT. A THIRD PARTY SHALL NOT KEEP THE APPLICANT INFORMATION FOR MORE THAN THIRTY DAYS UNLESS REQUESTED BY THE APPLICANT. THE STATE LICENSING AUTHORITY SHALL SEND THE APPLICANT'S FINGERPRINTS TO THE COLORADO BUREAU OF INVESTIGATION FOR THE PURPOSE OF FINGERPRINT PROCESSING BY UTILIZING THE FILES AND RECORDS OF THE COLORADO BUREAU OF INVESTIGATION AND THE FEDERAL BUREAU OF INVESTIGATION.

44-50-204. Confidentiality. (1) THE STATE LICENSING AUTHORITY SHALL MAINTAIN THE CONFIDENTIALITY OF:

(a) REPORTS OR OTHER INFORMATION OBTAINED FROM A LICENSEE OR A LICENSE APPLICANT CONTAINING ANY INDIVIDUALIZED DATA, INFORMATION, OR RECORDS RELATED TO THE APPLICANT; LICENSEE; LICENSEE'S OPERATION, INCLUDING SALES INFORMATION, LEASES, BUSINESS ORGANIZATION RECORDS, FINANCIAL RECORDS, TAX RETURNS, CREDIT REPORTS, CULTIVATION INFORMATION, TESTING RESULTS, AND SECURITY INFORMATION AND PLANS; ANY PARTICIPANT INFORMATION; OR ANY OTHER RECORDS THAT ARE EXEMPT FROM PUBLIC INSPECTION PURSUANT TO STATE LAW. SUCH REPORTS OR OTHER INFORMATION MAY BE USED ONLY FOR A PURPOSE AUTHORIZED BY THIS ARTICLE 50 OR A RULE PROMULGATED PURSUANT TO THIS ARTICLE 50 FOR INVESTIGATION OR ENFORCEMENT OF ANY INTERNATIONAL, FEDERAL, STATE, OR LOCAL SECURITIES LAW OR REGULATION, OR FOR ANY OTHER STATE OR LOCAL LAW ENFORCEMENT PURPOSE. ANY INFORMATION RELEASED RELATED TO A PARTICIPANT MAY BE USED ONLY FOR A PURPOSE AUTHORIZED BY THIS ARTICLE 50, AS A PART OF AN ACTIVE INVESTIGATION, AS A PART OF A PROCEEDING AUTHORIZED BY THIS ARTICLE 50, OR FOR ANY STATE OR LOCAL LAW ENFORCEMENT PURPOSE INVOLVING EVIDENCE OF SALES TRANSACTIONS IN VIOLATION OF THIS ARTICLE 50 OR EVIDENCE OF CRIMINAL ACTIVITY. THE INFORMATION OR

RECORDS RELATED TO A PARTICIPANT CONSTITUTE MEDICAL DATA AS DESCRIBED BY SECTION 24-72-204 (3)(a)(I), AND THE INFORMATION OR RECORDS MAY ONLY BE DISCLOSED TO THOSE PERSONS DIRECTLY INVOLVED WITH AN ACTIVE INVESTIGATION OR PROCEEDING.

(b) INVESTIGATIVE RECORDS AND DOCUMENTS RELATED TO ONGOING INVESTIGATIONS. THOSE RECORDS AND DOCUMENTS MAY BE USED ONLY FOR A PURPOSE AUTHORIZED BY THIS ARTICLE 50 OR RULES PROMULGATED BY THIS ARTICLE 50, OR FOR ANY OTHER STATE OR LOCAL LAW ENFORCEMENT PURPOSE.

(c) COMPUTER SYSTEMS MAINTAINED BY THE STATE LICENSING AUTHORITY AND THE VENDORS WITH WHICH THE STATE LICENSING AUTHORITY HAS CONTRACTED.

(2) THE STATE LICENSING AUTHORITY SHALL MAKE AVAILABLE FOR PUBLIC INSPECTION:

(a) DOCUMENTS RELATED TO FINAL AGENCY ACTIONS AND ORDERS;

(b) RECORDS RELATED TO TESTING ON AN AGGREGATED AND DE-IDENTIFIED BASIS;

(c) DEMOGRAPHIC INFORMATION RELATED TO APPLICANTS AND LICENSEES AVAILABLE ON AN AGGREGATED AND DE-IDENTIFIED BASIS; AND

(d) ENFORCEMENT FORMS AND COMPLIANCE CHECKLISTS.

PART 3 LICENSE TYPES

44-50-301. Classes of licenses. (1) FOR THE PURPOSE OF REGULATING THE CULTIVATION, MANUFACTURING, TESTING, STORAGE, DISTRIBUTION, TRANSPORT, TRANSFER, AND DISPENSATION OF REGULATED NATURAL MEDICINE OR REGULATED NATURAL MEDICINE PRODUCT, THE STATE LICENSING AUTHORITY IN ITS DISCRETION, UPON APPLICATION IN THE PRESCRIBED FORM, MAY ISSUE AND GRANT TO THE APPLICANT A LICENSE FROM ANY OF THE CLASSES LISTED IN SUBSECTION (2) OF THIS SECTION, SUBJECT TO THE PROVISIONS AND RESTRICTIONS PROVIDED BY THIS ARTICLE 50 OR A RULE PROMULGATED PURSUANT TO THIS ARTICLE 50.

(2)(a) THE FOLLOWING ARE NATURAL MEDICINE BUSINESS LICENSES:

(I) NATURAL MEDICINE HEALING CENTER LICENSE;

(II) NATURAL MEDICINE CULTIVATION FACILITY LICENSE;

(III) NATURAL MEDICINE PRODUCT MANUFACTURER LICENSE;

(IV) NATURAL MEDICINE TESTING FACILITY LICENSE; AND

(V) ANY NATURAL MEDICINE BUSINESS LICENSE DETERMINED NECESSARY BY THE STATE LICENSING AUTHORITY.

(b) THE FOLLOWING ARE NATURAL MEDICINE LICENSES OR REGISTRATIONS: OCCUPATIONAL LICENSES AND REGISTRATIONS FOR OWNERS, MANAGERS, OPERATORS, EMPLOYEES, CONTRACTORS, AND OTHER SUPPORT STAFF EMPLOYED BY, WORKING IN, OR HAVING ACCESS TO RESTRICTED AREAS OF THE LICENSED PREMISES, AS DETERMINED BY THE STATE LICENSING AUTHORITY. THE STATE LICENSING AUTHORITY MAY TAKE ANY ACTION WITH RESPECT TO A REGISTRATION OR PERMIT PURSUANT TO THIS ARTICLE 50 OR RULES PROMULGATED PURSUANT TO THIS ARTICLE 50 AS IT MAY, WITH RESPECT TO A LICENSE ISSUED PURSUANT TO THIS ARTICLE 50 OR RULES PROMULGATED PURSUANT TO THIS ARTICLE 50 IN ACCORDANCE WITH THE PROCEDURES ESTABLISHED PURSUANT TO THIS ARTICLE 50 OR RULES PROMULGATED PURSUANT TO THIS ARTICLE 50.

(3) A STATE CHARTERED BANK OR A CREDIT UNION MAY LOAN MONEY TO ANY PERSON LICENSED PURSUANT TO THIS ARTICLE 50 OR RULES PROMULGATED PURSUANT TO THIS ARTICLE 50 FOR THE OPERATION OF A LICENSED NATURAL MEDICINE BUSINESS.

(4) A PERSON MAY NOT OPERATE A LICENSE ISSUED PURSUANT TO THIS ARTICLE 50 AT THE SAME LOCATION AS A LICENSE OR PERMIT ISSUED PURSUANT TO ARTICLE 3, 4, 5, OR 10 OF THIS TITLE 44.

44-50-302. Restrictions for applications for new licenses. (1) THE STATE LICENSING AUTHORITY SHALL NOT RECEIVE OR ACT UPON AN APPLICATION FOR THE ISSUANCE OF A NATURAL MEDICINE BUSINESS LICENSE PURSUANT TO THIS ARTICLE 50:

(a) IF THE APPLICATION FOR A LICENSE CONCERNS A PARTICULAR LOCATION THAT IS THE SAME AS OR WITHIN ONE THOUSAND FEET OF A LOCATION FOR WHICH, WITHIN THE TWO YEARS IMMEDIATELY PRECEDING THE DATE OF THE APPLICATION, THE STATE LICENSING AUTHORITY DENIED AN APPLICATION FOR THE SAME CLASS OF LICENSE DUE TO THE NATURE OF THE USE OR OTHER CONCERN RELATED TO THE LOCATION;

(b) UNTIL IT IS ESTABLISHED THAT THE APPLICANT IS, OR WILL BE, ENTITLED TO POSSESSION OF THE PREMISES FOR WHICH APPLICATION IS MADE UNDER A LEASE, RENTAL AGREEMENT, OR OTHER ARRANGEMENT FOR POSSESSION OF THE PREMISES OR BY VIRTUE OF OWNERSHIP OF THE PREMISES;

(c) FOR A LOCATION IN AN AREA WHERE THE CULTIVATION, MANUFACTURING, TESTING, STORAGE, DISTRIBUTION, TRANSFER, AND DISPENSATION OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT AS CONTEMPLATED IS NOT PERMITTED UNDER THE APPLICABLE ZONING LAWS OF THE LOCAL JURISDICTION;

(d) (I) IF THE BUILDING WHERE NATURAL MEDICINE SERVICES ARE PROVIDED IS WITHIN ONE THOUSAND FEET OF A CHILD CARE CENTER; PRESCHOOL; ELEMENTARY, MIDDLE, JUNIOR, OR HIGH SCHOOL; OR A RESIDENTIAL CHILD CARE FACILITY. THE PROVISIONS OF THIS SECTION DO NOT AFFECT THE RENEWAL OR REISSUANCE OF A LICENSE ONCE GRANTED OR APPLY TO LICENSED PREMISES LOCATED OR TO BE LOCATED ON LAND OWNED BY A MUNICIPALITY, NOR DO THE PROVISIONS OF THIS SECTION APPLY TO AN EXISTING LICENSED PREMISES ON LAND OWNED BY THE STATE OR APPLY TO A LICENSE IN EFFECT AND ACTIVELY DOING BUSINESS BEFORE THE SCHOOL OR FACILITY WAS CONSTRUCTED. THE GOVERNING BODY OF A MUNICIPALITY, BY ORDINANCE; AND THE GOVERNING BODY OF A COUNTY, BY RESOLUTION, MAY VARY THE DISTANCE RESTRICTIONS IMPOSED BY THIS SUBSECTION (1)(d)(I) FOR A LICENSE OR MAY ELIMINATE ONE OR MORE TYPES OF SCHOOLS OR FACILITIES FROM THE APPLICATION OF A DISTANCE RESTRICTION ESTABLISHED BY OR PURSUANT TO THIS SUBSECTION (1)(d)(I).

(II) THE DISTANCES REFERRED TO IN THIS SUBSECTION (1)(d) MUST BE COMPUTED BY DIRECT MEASUREMENT FROM THE NEAREST PROPERTY LINE OF THE LAND USED FOR A SCHOOL OR FACILITY TO THE NEAREST PORTION OF THE BUILDING IN WHICH NATURAL MEDICINE SERVICES ARE PROVIDED, USING A ROUTE OF DIRECT PEDESTRIAN ACCESS.

(III) THE STATE LICENSING AUTHORITY SHALL CONSIDER THE EVIDENCE AND MAKE A SPECIFIC FINDING OF FACT AS TO WHETHER THE BUILDING IN WHICH THE NATURAL MEDICINE BUSINESS IS LOCATED IS WITHIN ANY DISTANCE RESTRICTIONS ESTABLISHED BY OR PURSUANT TO THIS SUBSECTION (1)(d).

(2) THE STATE LICENSING AUTHORITY SHALL NOT APPROVE AN APPLICATION FOR THE ISSUANCE OF A NATURAL MEDICINE BUSINESS LICENSE PURSUANT TO THIS ARTICLE 50 UNTIL THE STATE LICENSING AUTHORITY ESTABLISHES THAT THE APPLICANT IS, OR WILL BE, ENTITLED TO POSSESSION OF THE PREMISES FOR WHICH APPLICATION IS MADE UNDER A LEASE, RENTAL AGREEMENT, OR OTHER ARRANGEMENT FOR POSSESSION OF THE PREMISES OR BY VIRTUE OF OWNERSHIP OF THE PREMISES.

PART 4 NATURAL MEDICINE LICENSE TYPES

44-50-401. Natural medicine healing center license - rules. (1) A NATURAL MEDICINE HEALING CENTER LICENSE MAY BE ISSUED ONLY TO A PERSON THAT EMPLOYS OR CONTRACTS WITH A FACILITATOR WHO PROVIDES NATURAL MEDICINE SERVICES PURSUANT TO THE TERMS AND CONDITIONS OF ARTICLE 170 OF TITLE 12.

(2) A NATURAL MEDICINE HEALING CENTER LICENSEE MAY TRANSFER REGULATED NATURAL MEDICINE OR REGULATED NATURAL MEDICINE PRODUCT TO ANOTHER NATURAL MEDICINE HEALING CENTER LICENSEE PURSUANT TO RULES PROMULGATED BY THE STATE LICENSING AUTHORITY.

(3) PRIOR TO INITIATING NATURAL MEDICINE SERVICES, THE FACILITATOR OF THE NATURAL MEDICINE HEALING CENTER LICENSEE SHALL VERIFY THAT THE PARTICIPANT IS TWENTY-ONE YEARS OF AGE OR OLDER.

(4) A NATURAL MEDICINE HEALING CENTER LICENSEE SHALL COMPLY WITH ALL PROVISIONS OF ARTICLE 34 OF TITLE 24, AS THE PROVISIONS RELATE TO PERSONS WITH DISABILITIES.

(5) (a) EXCEPT AS PROVIDED IN SUBSECTION (5)(b) OF THIS SECTION, A NATURAL MEDICINE HEALING CENTER LICENSEE SHALL NOT TRANSFER, INDIVIDUALLY OR IN ANY COMBINATION, MORE THAN AN AMOUNT PROMULGATED BY RULE OF NATURAL MEDICINE AND NATURAL MEDICINE

PRODUCT TO A PARTICIPANT IN A SINGLE ADMINISTRATION SESSION.

(b) THE STATE LICENSING AUTHORITY MAY PROMULGATE RULES TO ESTABLISH CERTAIN EXEMPTIONS TO THE NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT LIMITATION AND MAY ESTABLISH RECORD-KEEPING REQUIREMENTS FOR NATURAL MEDICINE HEALING CENTER LICENSEES PURSUANT TO ANY EXEMPTION TO THE ADMINISTRATION LIMITATION.

44-50-402. Natural medicine cultivation facility license. (1) A NATURAL MEDICINE CULTIVATION FACILITY LICENSE MAY BE ISSUED ONLY TO A PERSON WHO CULTIVATES REGULATED NATURAL MEDICINE FOR TRANSFER AND DISTRIBUTION TO NATURAL MEDICINE HEALING CENTER LICENSEES, NATURAL MEDICINE PRODUCT MANUFACTURER LICENSEES, OR OTHER NATURAL MEDICINE CULTIVATION FACILITY LICENSEES.

(2) NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT MUST NOT BE CONSUMED ON THE NATURAL MEDICINE CULTIVATION FACILITY LICENSEE'S LICENSED PREMISES, UNLESS THE LICENSED PREMISES IS CO-LOCATED WITH A NATURAL MEDICINE HEALING CENTER LICENSEE'S LICENSED PREMISES.

44-50-403. Natural medicine product manufacturer license. (1) (a) A NATURAL MEDICINE PRODUCT MANUFACTURER LICENSE MAY BE ISSUED TO A PERSON WHO MANUFACTURES REGULATED NATURAL MEDICINE PRODUCT PURSUANT TO THE TERMS AND CONDITIONS OF THIS ARTICLE 50 AND RULES PROMULGATED PURSUANT TO THIS ARTICLE 50.

(b) A NATURAL MEDICINE PRODUCT MANUFACTURER LICENSEE MAY CULTIVATE ITS OWN REGULATED NATURAL MEDICINE PURSUANT TO A NATURAL MEDICINE CULTIVATION FACILITY LICENSEE.

(c) A NATURAL MEDICINE PRODUCT MANUFACTURER LICENSEE SHALL NOT:

(I) ADD ANY REGULATED NATURAL MEDICINE TO A FOOD PRODUCT IF THE MANUFACTURER OF THE FOOD PRODUCT HOLDS A TRADEMARK TO THE FOOD PRODUCT'S NAME; EXCEPT THAT A NATURAL MEDICINE PRODUCT MANUFACTURER LICENSEE MAY USE A TRADEMARKED FOOD PRODUCT IF THE MANUFACTURER USES THE PRODUCT AS A COMPONENT OR AS PART OF A RECIPE AND IF THE NATURAL MEDICINE PRODUCT MANUFACTURER LICENSEE

DOES NOT STATE OR ADVERTISE TO THE CONSUMER THAT THE FINAL NATURAL MEDICINE PRODUCT CONTAINS A TRADEMARKED FOOD PRODUCT;

(II) INTENTIONALLY OR KNOWINGLY LABEL OR PACKAGE NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT IN A MANNER THAT WOULD CAUSE A REASONABLE CONSUMER CONFUSION AS TO WHETHER THE NATURAL MEDICINE PRODUCT WAS A TRADEMARKED FOOD PRODUCT; OR

(III) LABEL OR PACKAGE A PRODUCT IN A MANNER THAT VIOLATES ANY FEDERAL TRADEMARK LAW OR REGULATION.

(2) NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT MUST NOT BE CONSUMED ON A NATURAL MEDICINE PRODUCT MANUFACTURER LICENSEE'S LICENSED PREMISES, UNLESS THE LICENSED PREMISES IS CO-LOCATED WITH A NATURAL MEDICINE HEALING CENTER LICENSEE'S LICENSED PREMISES.

44-50-404. Natural medicine testing facility license - rules.

(1) (a) A NATURAL MEDICINE TESTING FACILITY LICENSE MAY BE ISSUED TO A PERSON WHO PERFORMS TESTING AND RESEARCH ON NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT.

(b) THE TESTING OF NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT, AND THE ASSOCIATED STANDARDS, IS A MATTER OF STATEWIDE CONCERN.

(2) THE STATE LICENSING AUTHORITY SHALL PROMULGATE RULES RELATED TO ACCEPTABLE TESTING AND RESEARCH PRACTICES, INCLUDING BUT NOT LIMITED TO TESTING, STANDARDS, QUALITY CONTROL ANALYSIS, EQUIPMENT CERTIFICATION AND CALIBRATION, IDENTIFICATION OF CHEMICALS AND OTHER SUBSTANCES USED IN BONA FIDE RESEARCH METHODS, AND WHETHER TO ALLOW A NATURAL PERSON TO REQUEST AND UTILIZE TESTING SERVICES OF NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT IF THE NATURAL PERSON IS TWENTY-ONE YEARS OF AGE OR OLDER.

(3) A PERSON WHO HAS AN INTEREST IN A NATURAL MEDICINE TESTING FACILITY LICENSE SHALL NOT HAVE ANY INTEREST IN A LICENSED NATURAL MEDICINE HEALING CENTER, A LICENSED NATURAL MEDICINE CULTIVATION FACILITY, A LICENSED NATURAL MEDICINE PRODUCT MANUFACTURER, OR A NATURAL MEDICINE LICENSE ISSUED BY THE STATE

LICENSING AUTHORITY PURSUANT TO THIS ARTICLE 50 OR RULES PROMULGATED PURSUANT TO THIS ARTICLE 50.

PART 5 UNLAWFUL ACTS

44-50-501. Unlawful acts. (1) EXCEPT AS OTHERWISE PROVIDED IN THIS ARTICLE 50, IT IS UNLAWFUL FOR A LICENSEE TO:

(a) KNOWINGLY TRANSFER NATURAL MEDICINE OR A NATURAL MEDICINE PRODUCT TO A PERSON UNDER TWENTY-ONE YEARS OF AGE; OR

(b) KNOWINGLY ADULTERATE OR ALTER, OR ATTEMPT TO ADULTERATE OR ALTER, ANY SAMPLE OF REGULATED NATURAL MEDICINE OR A NATURAL MEDICINE PRODUCT FOR THE PURPOSE OF CIRCUMVENTING TESTING REQUIREMENTS.

PART 6 FEES

44-50-601. Regulated natural medicine cash fund - created - rules. (1) (a) ALL MONEY COLLECTED BY THE STATE LICENSING AUTHORITY PURSUANT TO THIS ARTICLE 50 OR RULES PROMULGATED PURSUANT TO THIS ARTICLE 50 MUST BE TRANSMITTED TO THE STATE TREASURER, WHO SHALL CREDIT THE SAME TO THE REGULATED NATURAL MEDICINE DIVISION CASH FUND, WHICH IS HEREBY CREATED. THE REGULATED NATURAL MEDICINE DIVISION CASH FUND, REFERRED TO IN THIS SECTION AS THE "FUND", CONSISTS OF:

(I) THE MONEY COLLECTED BY THE STATE LICENSING AUTHORITY;
AND

(II) ANY ADDITIONAL GENERAL FUND MONEY APPROPRIATED TO THE FUND THAT IS NECESSARY FOR THE OPERATION OF THE STATE LICENSING AUTHORITY.

(b) MONEY IN THE FUND IS SUBJECT TO ANNUAL APPROPRIATION BY THE GENERAL ASSEMBLY TO THE DEPARTMENT FOR THE DIRECT AND INDIRECT COSTS ASSOCIATED WITH IMPLEMENTING THIS ARTICLE 50.

(c) ANY MONEY IN THE FUND NOT EXPENDED FOR THE PURPOSES OF THIS SECTION MAY BE INVESTED BY THE STATE TREASURER AS PROVIDED BY LAW. ALL INTEREST AND INCOME DERIVED FROM THE INVESTMENT AND DEPOSIT OF MONEY IN THE FUND SHALL BE CREDITED TO THE FUND. ANY UNEXPENDED AND UNENCUMBERED MONEY REMAINING IN THE FUND AT THE END OF A FISCAL YEAR REMAINS IN THE FUND AND SHALL NOT BE CREDITED OR TRANSFERRED TO THE GENERAL FUND OR ANOTHER FUND.

(2) THE EXECUTIVE DIRECTOR BY RULE OR AS OTHERWISE PROVIDED BY LAW MAY REDUCE THE AMOUNT OF ONE OR MORE OF THE FEES IF NECESSARY PURSUANT TO SECTION 24-75-402 (3) TO REDUCE THE UNCOMMITTED RESERVES OF THE FUND TO WHICH ALL OR ANY PORTION OF ONE OR MORE OF THE FEES IS CREDITED. AFTER THE UNCOMMITTED RESERVES OF THE FUND ARE SUFFICIENTLY REDUCED, THE EXECUTIVE DIRECTOR BY RULE OR AS OTHERWISE PROVIDED BY LAW MAY INCREASE THE AMOUNT OF ONE OR MORE OF THE FEES AS PROVIDED IN SECTION 24-75-402 (4).

(3)(a) THE STATE LICENSING AUTHORITY SHALL ESTABLISH FEES FOR PROCESSING THE APPLICATIONS OR LICENSES PURSUANT TO SECTION 44-50-301.

(b) THE AMOUNTS OF SUCH FEES, WHEN ADDED TO THE OTHER FEES TRANSFERRED TO THE FUND PURSUANT TO THIS SECTION, MUST REFLECT THE ACTUAL DIRECT AND INDIRECT COSTS OF THE STATE LICENSING AUTHORITY IN THE ADMINISTRATION AND ENFORCEMENT OF THIS ARTICLE 50 SO THAT THE FEES AVOID EXCEEDING THE STATUTORY LIMIT ON UNCOMMITTED RESERVES IN ADMINISTRATIVE AGENCY CASH FUNDS AS SET FORTH IN SECTION 24-75-402 (3).

(c) THE STATE LICENSING AUTHORITY MAY CHARGE APPLICANTS LICENSED PURSUANT TO THIS ARTICLE 50 A FEE FOR THE COST OF EACH FINGERPRINT ANALYSIS AND BACKGROUND INVESTIGATION UNDERTAKEN TO QUALIFY NEW OFFICERS, DIRECTORS, MANAGERS, OR EMPLOYEES.

(d) AT LEAST ANNUALLY, THE STATE LICENSING AUTHORITY SHALL REVIEW THE AMOUNTS OF THE FEES AND, IF NECESSARY, ADJUST THE AMOUNTS TO REFLECT THE DIRECT AND INDIRECT COSTS OF THE STATE LICENSING AUTHORITY.

(e) THE FEES ESTABLISHED AND COLLECTED PURSUANT TO THIS SECTION MUST NOT EXCEED THE AMOUNT NECESSARY TO ADMINISTER THIS ARTICLE 50.

(4) EXCEPT AS PROVIDED IN SUBSECTION (5) OF THIS SECTION, THE STATE LICENSING AUTHORITY SHALL ESTABLISH A BASIC FEE THAT SHALL BE PAID AT THE TIME OF SERVICE OF ANY SUBPOENA UPON THE STATE LICENSING AUTHORITY, PLUS A FEE FOR MEALS AND A FEE FOR MILEAGE AT THE RATE PRESCRIBED FOR STATE OFFICERS AND EMPLOYEES IN SECTION 24-9-104 FOR EACH MILE ACTUALLY AND NECESSARILY TRAVELED IN GOING TO AND RETURNING FROM THE PLACE NAMED IN THE SUBPOENA. IF THE PERSON NAMED IN THE SUBPOENA IS REQUIRED TO ATTEND THE PLACE NAMED IN THE SUBPOENA FOR MORE THAN ONE DAY, THERE SHALL BE PAID, IN ADVANCE, A SUM TO BE ESTABLISHED BY THE STATE LICENSING AUTHORITY FOR EACH DAY OF ATTENDANCE TO COVER THE EXPENSES OF THE PERSON NAMED IN THE SUBPOENA.

(5) THE SUBPOENA FEE ESTABLISHED PURSUANT TO SUBSECTION (4) OF THIS SECTION DOES NOT APPLY TO ANY FEDERAL, STATE, OR LOCAL GOVERNMENTAL AGENCY.

44-50-602. Fees - allocation. (1) EXCEPT AS OTHERWISE PROVIDED, ALL FEES AND FINES PROVIDED FOR BY THIS ARTICLE 50 SHALL BE PAID TO THE STATE LICENSING AUTHORITY, WHICH SHALL TRANSMIT THE FEES TO THE STATE TREASURER. THE STATE TREASURER SHALL CREDIT THE FEES TO THE REGULATED NATURAL MEDICINE DIVISION CASH FUND CREATED IN SECTION 44-50-601.

(2) THE EXPENDITURES OF THE STATE LICENSING AUTHORITY ARE PAID OUT OF APPROPRIATIONS FROM THE REGULATED NATURAL MEDICINE DIVISION CASH FUND CREATED IN SECTION 44-50-601.

PART 7 DISCIPLINARY ACTIONS

44-50-701. Suspension - revocation - fines. (1) IN ADDITION TO ANY OTHER SANCTIONS PRESCRIBED BY THIS ARTICLE 50 OR RULES PROMULGATED PURSUANT TO THIS ARTICLE 50, THE STATE LICENSING AUTHORITY HAS THE POWER, ON ITS OWN MOTION OR ON COMPLAINT, AFTER INVESTIGATION AND OPPORTUNITY FOR A PUBLIC HEARING AT WHICH THE

LICENSEE MUST BE AFFORDED AN OPPORTUNITY TO BE HEARD, TO FINE A LICENSEE OR TO SUSPEND OR REVOKE A LICENSE ISSUED BY THE AUTHORITY FOR A VIOLATION BY THE LICENSEE OR BY ANY OF THE AGENTS OR EMPLOYEES OF THE LICENSEE OF THE PROVISIONS OF THIS ARTICLE 50, OR ANY OF THE RULES PROMULGATED PURSUANT TO THIS ARTICLE 50, OR OF ANY OF THE TERMS, CONDITIONS, OR PROVISIONS OF THE LICENSE ISSUED BY THE STATE LICENSING AUTHORITY. THE STATE LICENSING AUTHORITY HAS THE POWER TO ADMINISTER OATHS AND ISSUE SUBPOENAS TO REQUIRE THE PRESENCE OF PERSONS AND THE PRODUCTION OF PAPERS, BOOKS, AND RECORDS NECESSARY TO THE DETERMINATION OF A HEARING THAT THE STATE LICENSING AUTHORITY IS AUTHORIZED TO CONDUCT.

(2) THE STATE LICENSING AUTHORITY SHALL PROVIDE NOTICE OF SUSPENSION, REVOCATION, FINE, OR OTHER SANCTION, AS WELL AS THE REQUIRED NOTICE OF THE HEARING PURSUANT TO SUBSECTION (1) OF THIS SECTION, BY MAILING THE SAME IN WRITING TO THE LICENSEE AT THE ADDRESS CONTAINED IN THE LICENSE AND, IF DIFFERENT, AT THE LAST ADDRESS FURNISHED TO THE AUTHORITY BY THE LICENSEE. EXCEPT IN THE CASE OF A SUMMARY SUSPENSION, A SUSPENSION MAY NOT EXCEED SIX MONTHS. IF A LICENSE IS SUSPENDED OR REVOKED, A PART OF THE FEES PAID FOR THE LICENSE ARE NOT RETURNED TO THE LICENSEE. ANY LICENSE, REGISTRATION, OR PERMIT MAY BE SUMMARILY SUSPENDED BY THE STATE LICENSING AUTHORITY WITHOUT NOTICE PENDING ANY PROSECUTION, INVESTIGATION, OR PUBLIC HEARING PURSUANT TO THE TERMS OF SECTION 24-4-104 (4). NOTHING IN THIS SECTION PREVENTS THE SUMMARY SUSPENSION OF A LICENSE PURSUANT TO SECTION 24-4-104 (4).

PART 8 JUDICIAL REVIEW

44-50-801. Judicial review. DECISIONS BY THE STATE LICENSING AUTHORITY ARE SUBJECT TO JUDICIAL REVIEW PURSUANT TO SECTION 24-4-106.

PART 9 PROTECTIONS, CONSTRUCTION, PREEMPTION, AND SEVERABILITY

44-50-901. Protections. (1) SUBJECT TO THE LIMITATIONS IN THIS ARTICLE 50 AND ARTICLE 170 OF TITLE 12, BUT NOTWITHSTANDING ANY

OTHER PROVISION OF LAW:

(a) ACTIONS AND CONDUCT PERMITTED PURSUANT TO A LICENSE, REGISTRATION, OR PERMIT ISSUED BY THE STATE LICENSING AUTHORITY PURSUANT TO THIS ARTICLE 50, OR BY THOSE WHO ALLOW PROPERTY TO BE USED PURSUANT TO A LICENSE ISSUED PURSUANT TO THIS ARTICLE 50, ARE LAWFUL AND ARE NOT AN OFFENSE UNDER STATE LAW OR THE LAWS OF ANY LOCAL JURISDICTION WITHIN THE STATE; ARE NOT SUBJECT TO A CIVIL FINE, PENALTY, OR SANCTION; ARE NOT A BASIS FOR DETENTION, SEARCH, OR ARREST; ARE NOT A BASIS TO DENY ANY RIGHT OR PRIVILEGE; AND ARE NOT A BASIS TO SEIZE OR FORFEIT ASSETS UNDER STATE LAW OR THE LAWS OF ANY LOCAL JURISDICTION WITHIN THIS STATE;

(b) A CONTRACT IS NOT UNENFORCEABLE ON THE BASIS THAT NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT, AS ALLOWED PURSUANT TO THIS ARTICLE 50, IS PROHIBITED BY FEDERAL LAW;

(c) A LICENSEE, REGISTRANT, OR PERMITTEE PURSUANT TO THIS ARTICLE 50 IS NOT SUBJECT TO DISCIPLINE OR LOSS OF A PROFESSIONAL LICENSE OR CERTIFICATION FOR PROVIDING ADVICE OR SERVICES ARISING OUT OF OR RELATED TO NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT, APPLICATIONS FOR LICENSES ON THE BASIS THAT NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT IS PROHIBITED BY FEDERAL LAW, OR FOR PERSONAL USE OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT AS ALLOWED PURSUANT TO THIS ARTICLE 50. THIS SUBSECTION (1)(c) DOES NOT PERMIT A LICENSEE, REGISTRANT, OR PERMITTEE TO ENGAGE IN MALPRACTICE.

(d) MENTAL HEALTH CARE, SUBSTANCE USE DISORDER INTERVENTION, OR BEHAVIORAL HEALTH SERVICES OTHERWISE COVERED UNDER THE "COLORADO MEDICAL ASSISTANCE ACT", ARTICLES 4 TO 6 OF TITLE 25.5, MUST NOT BE DENIED ON THE BASIS THAT THEY ARE COVERED IN CONJUNCTION WITH NATURAL MEDICINE SERVICES, OR THAT NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT IS PROHIBITED BY FEDERAL LAW. INSURANCE OR AN INSURANCE PROVIDER IS NOT REQUIRED TO COVER THE COST OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT.

(e) NOTHING IN THIS SECTION MAY BE CONSTRUED OR INTERPRETED TO PREVENT THE DIRECTOR OF THE NATURAL MEDICINE DIVISION FROM ENFORCING ITS RULES AGAINST A LICENSEE OR TO LIMIT A STATE OR LOCAL

LAW ENFORCEMENT AGENCY'S ABILITY TO INVESTIGATE UNLAWFUL ACTIVITY IN RELATION TO A LICENSEE.

44-50-902. Liberal construction. THIS ARTICLE 50 MUST BE LIBERALLY CONSTRUED TO EFFECTUATE ITS PURPOSE.

44-50-903. Preemption. A LOCAL JURISDICTION SHALL NOT ADOPT, ENACT, OR ENFORCE ANY ORDINANCE, RULE, OR RESOLUTION THAT ARE OTHERWISE IN CONFLICT WITH THE PROVISIONS OF THIS ARTICLE 50.

44-50-904. Severability. IF ANY PROVISION OF THIS ARTICLE 50 IS FOUND BY A COURT OF COMPETENT JURISDICTION TO BE UNCONSTITUTIONAL, THE REMAINING PROVISIONS OF THIS ARTICLE 50 ARE VALID, UNLESS IT APPEARS TO THE COURT THAT THE VALID PROVISIONS OF THE STATUTE ARE SO ESSENTIALLY AND INSEPARABLY CONNECTED WITH, AND SO DEPENDENT UPON, THE VOID PROVISION THAT IT CANNOT BE PRESUMED THAT THE GENERAL ASSEMBLY WOULD HAVE ENACTED THE VALID PROVISIONS WITHOUT THE VOID ONE; OR UNLESS THE COURT DETERMINES THAT THE VALID PROVISIONS, STANDING ALONE, ARE INCOMPLETE AND ARE INCAPABLE OF BEING EXECUTED IN ACCORDANCE WITH THE LEGISLATIVE INTENT.

PART 10 SUNSET REVIEW - ARTICLE REPEAL

44-50-1001. Sunset review - repeal of article. (1) THIS ARTICLE 50 IS REPEALED, EFFECTIVE SEPTEMBER 1, 2032.

(2) PRIOR TO THE REPEAL OF THIS ARTICLE 50, THE DEPARTMENT OF REGULATORY AGENCIES SHALL CONDUCT A SUNSET REVIEW AS DESCRIBED IN SECTION 24-34-104 (5).

SECTION 22. In Colorado Revised Statutes, 16-13-303, **amend** (9) as follows:

16-13-303. Class 1 public nuisance. (9) ~~A person acting in compliance with the "Natural Medicine Health Act of 2022", article 170 of title 12 does not violate this section~~ IT IS NOT A VIOLATION OF THIS SECTION IF A PERSON IS ACTING IN COMPLIANCE WITH SECTION 18-18-434, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44.

SECTION 23. In Colorado Revised Statutes, 16-13-304, **amend** (2) as follows:

16-13-304. Class 2 public nuisance. (2) ~~A person acting in compliance with the "Natural Medicine Health Act of 2022", article 170 of title 12 does not violate this section~~ IT IS NOT A VIOLATION OF THIS SECTION IF A PERSON IS ACTING IN COMPLIANCE WITH SECTION 18-18-434, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44.

SECTION 24. In Colorado Revised Statutes, 18-18-403.5, **amend** (1) as follows:

18-18-403.5. Unlawful possession of a controlled substance - notice to revisor of statutes - repeal. (1) Except as authorized by part 1 or 3 of article 280 of title 12, part 2 of article 80 of title 27, section 18-1-711, section 18-18-428 (1)(b), part 2 or 3 of this article 18, ~~or the "Natural Medicine Health Act of 2022", article 170 of title 12~~ SECTION 18-18-434, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44, it is unlawful for a person knowingly to possess a controlled substance.

SECTION 25. In Colorado Revised Statutes, 18-18-404, **amend** (1)(a) as follows:

18-18-404. Unlawful use of a controlled substance. (1)(a) Except as is otherwise provided for offenses concerning marijuana and marijuana concentrate in sections 18-18-406 and 18-18-406.5, ~~or by the "Natural Medicine Health Act of 2022", article 170 of title 12~~ OR FOR NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT IN SECTION 18-18-434, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44, any person who uses any controlled substance, except when it is dispensed by or under the direction of a person licensed or authorized by law to prescribe, administer, or dispense the controlled substance for bona fide medical needs, commits a level 2 drug misdemeanor.

SECTION 26. In Colorado Revised Statutes, 18-18-405, **amend** (1)(a) as follows:

18-18-405. Unlawful distribution, manufacturing, dispensing, or sale. (1) (a) Except as authorized by part 1 of article 280 of title 12, part 2 of article 80 of title 27, part 2 or 3 of this article 18, ~~or by the "Natural~~

~~Medicine Health Act of 2022", article 170 of title 12~~ SECTION 18-18-434, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44, it is unlawful for any person knowingly to manufacture, dispense, sell, or distribute, or to possess with intent to manufacture, dispense, sell, or distribute, a controlled substance; or induce, attempt to induce, or conspire with one or more other persons, to manufacture, dispense, sell, distribute, or possess with intent to manufacture, dispense, sell, or distribute, a controlled substance; or possess one or more chemicals or supplies or equipment with intent to manufacture a controlled substance.

SECTION 27. In Colorado Revised Statutes, **amend** 18-18-410 as follows:

18-18-410. Declaration of class 1 public nuisance. Except as permitted by the ~~"Natural Medicine Health Act of 2022", article 170 of title 12~~ AUTHORIZED BY SECTION 18-18-434, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44, any store, shop, warehouse, dwelling house, building, vehicle, boat, or aircraft or any place whatsoever ~~which~~ THAT is frequented by controlled substance addicts for the unlawful use of controlled substances or which is used for the unlawful storage, manufacture, sale, or distribution of controlled substances is declared to be a class 1 public nuisance and subject to the provisions of section 16-13-303. ~~C.R.S.~~ Any real or personal property ~~which~~ THAT is seized or confiscated as a result of an action to abate a public nuisance shall be disposed of pursuant to part 7 of article 13 of title 16. ~~C.R.S.~~

SECTION 28. In Colorado Revised Statutes, 18-18-411, **repeal** (5); and **add** (3.5) as follows:

18-18-411. Keeping, maintaining, controlling, renting, or making available property for unlawful distribution or manufacture of controlled substances. (3.5) IT IS NOT A VIOLATION OF THIS SECTION IF A PERSON IS ACTING IN COMPLIANCE WITH SECTION 18-18-434, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44.

(5) ~~A person acting in compliance with the "Natural Medicine Health Act of 2022", article 170 of title 12 does not violate this section.~~

SECTION 29. In Colorado Revised Statutes, 18-18-412.7, **repeal** (3); and **add** (1.5) as follows:

18-18-412.7. Sale or distribution of materials to manufacture controlled substances. (1.5) IT IS NOT A VIOLATION OF THIS SECTION IF A PERSON IS ACTING IN COMPLIANCE WITH SECTION 18-18-434, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44.

(3) ~~A person acting in compliance with the "Natural Medicine Health Act of 2022", article 170 of title 12 does not violate this section.~~

SECTION 30. In Colorado Revised Statutes, 18-18-430.5, **amend** (1)(c) as follows:

18-18-430.5. Drug paraphernalia - exemption. (1) A person is exempt from sections 18-18-425 to 18-18-430 if the person is:

(c) Using equipment, products, or materials in compliance with ~~the "Natural Medicine Health Act of 2022", article 170 of title 12~~ SECTION 18-18-434, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44. The manufacture, possession, and distribution of such equipment, products, or materials ~~shall be~~ IS authorized within the meaning of 21 U.S.C. 863 sec. (f).

SECTION 31. In Colorado Revised Statutes, **add** 18-18-434 as follows:

18-18-434. Offenses relating to natural medicine and natural medicine product - definitions. (1) A PERSON WHO IS UNDER TWENTY-ONE YEARS OF AGE WHO KNOWINGLY POSSESSES OR CONSUMES NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT COMMITS A DRUG PETTY OFFENSE AND, UPON CONVICTION THEREOF, IS SUBJECT TO A FINE OF NOT MORE THAN ONE HUNDRED DOLLARS OR NOT MORE THAN FOUR HOURS OF SUBSTANCE USE EDUCATION OR COUNSELING; EXCEPT THAT A SECOND OR SUBSEQUENT CONVICTION FOR A VIOLATION OF THIS SUBSECTION (1) IS SUBJECT TO A FINE OF NOT MORE THAN ONE HUNDRED DOLLARS, NOT MORE THAN FOUR HOURS OF SUBSTANCE USE EDUCATION OR COUNSELING, AND NOT MORE THAN TWENTY-FOUR HOURS OF USEFUL PUBLIC SERVICE.

(2) A PERSON WHO OPENLY AND PUBLICLY DISPLAYS OR CONSUMES NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT COMMITS A DRUG PETTY OFFENSE AND, UPON CONVICTION THEREOF, IS SUBJECT TO A FINE OF NOT MORE THAN ONE HUNDRED DOLLARS AND NOT MORE THAN

TWENTY-FOUR HOURS OF USEFUL PUBLIC SERVICE.

(3)(a) A PERSON WHO KNOWINGLY CULTIVATES NATURAL MEDICINE THAT CUMULATIVELY EXCEEDS AN AREA OF MORE THAN TWELVE FEET WIDE BY TWELVE FEET LONG IN ONE OR MORE CULTIVATION AREAS ON THE PRIVATE PROPERTY, OR KNOWINGLY ALLOWS SUCH CULTIVATION ON PRIVATE PROPERTY THAT THE PERSON OWNS, OCCUPIES, OR CONTROLS, COMMITS A DRUG PETTY OFFENSE, AND UPON CONVICTION THEREOF, IS SUBJECT TO A FINE OF NOT MORE THAN ONE THOUSAND DOLLARS.

(b) (I) EXCEPT AS PROVIDED IN SUBSECTION (3)(b)(II) OF THIS SECTION, A PERSON WHO KNOWINGLY CULTIVATES NATURAL MEDICINE ON THE PRIVATE PROPERTY OUTSIDE OF AN ENCLOSED AND LOCKED SPACE, OR KNOWINGLY ALLOWS SUCH CULTIVATION ON THE PRIVATE PROPERTY OUTSIDE OF AN ENCLOSED AND LOCKED SPACE, THAT THE PERSON OWNS, OCCUPIES, OR CONTROLS, COMMITS A DRUG PETTY OFFENSE, AND UPON CONVICTION THEREOF, IS SUBJECT TO A FINE OF NOT MORE THAN ONE THOUSAND DOLLARS.

(II) IT IS NOT A VIOLATION OF THIS SUBSECTION (3)(b) IF THE PERSON WHO IS CULTIVATING NATURAL MEDICINE IS TWENTY-ONE YEARS OF AGE OR OLDER, IF THE CULTIVATION AREA IS LOCATED IN A DWELLING ON THE PRIVATE PROPERTY, AND:

(A) IF A PERSON UNDER TWENTY-ONE YEARS OF AGE LIVES AT THE DWELLING, THE CULTIVATION AREA ITSELF IS ENCLOSED AND LOCKED; OR

(B) IF NO PERSON UNDER TWENTY-ONE YEARS OF AGE LIVES AT THE DWELLING, THE EXTERNAL LOCKS ON THE DWELLING CONSTITUTE AN ENCLOSED AND LOCKED SPACE, BUT IF A PERSON UNDER TWENTY-ONE YEARS OF AGE ENTERS THE DWELLING, THE PERSON CULTIVATING THE NATURAL MEDICINE SHALL ENSURE THAT ACCESS TO THE CULTIVATION AREA IS REASONABLY RESTRICTED FOR THE DURATION OF THE PERSON UNDER TWENTY-ONE YEARS OF AGE'S PRESENCE IN THE PRIVATE PROPERTY.

(c) IT IS NOT A VIOLATION OF SUBSECTION (3)(a) OF THIS SECTION IF A COUNTY, MUNICIPALITY, OR CITY AND COUNTY LAW EXPRESSLY PERMITS THE CULTIVATION OF NATURAL MEDICINE THAT CUMULATIVELY EXCEEDS AN AREA OF MORE THAN TWELVE FEET WIDE BY TWELVE FEET LONG IN ONE OR MORE CULTIVATION AREAS ON THE PRIVATE PROPERTY AND THE PERSON

CULTIVATES THE NATURAL MEDICINE IN AN ENCLOSED AND LOCKED SPACE WITHIN THE LIMIT SET BY THE COUNTY, MUNICIPALITY, OR CITY AND COUNTY WHERE THE NATURAL MEDICINE IS LOCATED.

(4) (a) IT IS UNLAWFUL FOR A PERSON WHO IS NOT LICENSED PURSUANT TO ARTICLE 50 OF TITLE 44 TO KNOWINGLY MANUFACTURE NATURAL MEDICINE PRODUCT USING AN INHERENTLY HAZARDOUS SUBSTANCE.

(b) IT IS UNLAWFUL FOR A PERSON WHO IS NOT LICENSED PURSUANT TO ARTICLE 50 OF TITLE 44 WHO OWNS, MANAGES, OPERATES, OR OTHERWISE CONTROLS THE USE OF A PROPERTY TO KNOWINGLY ALLOW NATURAL MEDICINE PRODUCT TO BE MANUFACTURED ON THE PREMISES USING AN INHERENTLY HAZARDOUS SUBSTANCE.

(c) A PERSON WHO VIOLATES THIS SUBSECTION (4) COMMITS A LEVEL 2 DRUG FELONY.

(5) (a) UNLESS EXPRESSLY LIMITED BY THIS SECTION, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44, A PERSON WHO FOR THE PURPOSE OF PERSONAL USE AND WITHOUT REMUNERATION, POSSESSES, CONSUMES, SHARES, CULTIVATES, OR MANUFACTURES NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT, DOES NOT VIOLATE STATE LAW, OR COUNTY, MUNICIPALITY, OR CITY AND COUNTY ORDINANCE, RULE, OR RESOLUTION.

(b) UNLESS EXPRESSLY LIMITED BY THIS SECTION, A PERSON WHO PERFORMS TESTING ON NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT, AND POSSESSES NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT IN CONJUNCTION THEREWITH, FOR ANOTHER PERSON WHO IS TWENTY-ONE YEARS OF AGE OR OLDER WHO SUBMITS FOR TESTING NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT INTENDED FOR PERSONAL USE, DOES NOT VIOLATE STATE LAW, OR COUNTY, MUNICIPALITY, OR CITY AND COUNTY ORDINANCE, RULE, OR RESOLUTION, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44, IF:

(I) THE PERSON PERFORMING THE TESTING PROVIDES WRITTEN NOTICE TO THE PERSON SUBMITTING FOR TESTING NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT INTENDED FOR PERSONAL USE, THAT THE PERSON IS NOT LICENSED BY THE STATE TO CONDUCT TESTING; AND

(II) THE PERSON WHO SUBMITS FOR TESTING NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT PROVIDES A SIGNED STATEMENT THAT THE NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT IS INTENDED FOR PERSONAL USE ONLY.

(c) NOTHING IN THIS SECTION PERMITS A PERSON TO:

(I) DISPENSE, SELL, DISTRIBUTE, OR POSSESS WITH INTENT TO DISPENSE, SELL, OR DISTRIBUTE, NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT TO A PERSON UNDER TWENTY-ONE YEARS OF AGE;

(II) DISPENSE, SELL, DISTRIBUTE, OR POSSESS WITH INTENT TO DISPENSE, SELL, OR DISTRIBUTE, NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT FOR REMUNERATION, EXCEPT AS PROVIDED BY ARTICLE 170 OF TITLE 12 AND ARTICLE 50 OF TITLE 44;

(III) MANUFACTURE, CULTIVATE, POSSESS, CONSUME, USE, DISPENSE, OR DISTRIBUTE NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT, OR POSSESS WITH INTENT TO MANUFACTURE, CULTIVATE, POSSESS, CONSUME, USE, DISPENSE, OR DISTRIBUTE NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT FOR A PURPOSE OTHER THAN PERSONAL USE OR AS PROVIDED BY ARTICLE 170 OF TITLE 12 AND ARTICLE 50 OF TITLE 44;

(IV) DISPENSE, DISTRIBUTE, OR POSSESS WITH INTENT TO DISPENSE OR DISTRIBUTE, NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT AS A PART OF A BUSINESS PROMOTION OR COMMERCIAL ACTIVITY, EXCEPT AS PROVIDED BY ARTICLE 170 OF TITLE 12 AND ARTICLE 50 OF TITLE 44; OR

(V) DISPENSE, SELL, OR DISTRIBUTE, OR POSSESS WITH INTENT TO DISPENSE, SELL, OR DISTRIBUTE, IBOGAININE OR NATURAL MEDICINE PRODUCT THAT CONTAINS IBOGAININE TO ANOTHER PERSON, EXCEPT AS PROVIDED BY ARTICLE 170 OF TITLE 12 AND ARTICLE 50 OF TITLE 44.

(d) A PEACE OFFICER SHALL NOT ARREST A PERSON, AND A DISTRICT ATTORNEY SHALL NOT CHARGE OR PROSECUTE A PERSON FOR A CRIMINAL OFFENSE INVOLVING NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT PURSUANT TO THIS PART 4, EXCEPT AS EXPRESSLY PROVIDED IN THIS SECTION.

(e) NOTWITHSTANDING ANY PROVISION OF THIS SECTION TO THE

CONTRARY, A PEACE OFFICER MAY ARREST A PERSON, OR A DISTRICT ATTORNEY MAY CHARGE OR PROSECUTE A PERSON FOR A CRIMINAL OFFENSE THAT IS NOT EXPRESSLY LAWFUL PURSUANT TO THIS SECTION OR ARTICLE 170 OF TITLE 12 AND ARTICLE 50 OF TITLE 44.

(6) NOTWITHSTANDING ANY LAW TO THE CONTRARY, AN ACTION THAT IS LAWFUL PURSUANT TO THIS SECTION, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44, INDIVIDUALLY OR IN COMBINATION WITH ANOTHER ACTION THAT IS LAWFUL PURSUANT TO THIS SECTION, MUST NOT BE THE SOLE REASON TO:

- (a) SUBJECT A PERSON TO A CIVIL FINE, PENALTY, OR SANCTION;
- (b) DENY A PERSON A RIGHT OR PRIVILEGE; OR
- (c) SEIZE OR FORFEIT ASSETS.

(7)(a) EXCEPT AS PROVIDED IN SUBSECTION (7)(b) OF THIS SECTION, AN ACTION THAT IS LAWFUL PURSUANT TO THIS SECTION, INDIVIDUALLY OR IN COMBINATION WITH ANOTHER ACTION THAT IS LAWFUL PURSUANT TO THIS SECTION, MUST NOT SOLELY BE USED AS A FACTOR IN A PROBABLE CAUSE DETERMINATION OF ANY CRIMINAL OFFENSE.

(b) AN ACTION THAT IS LAWFUL PURSUANT TO THIS SECTION MAY BE USED AS A FACTOR IN A PROBABLE CAUSE DETERMINATION OF ANY CRIMINAL OFFENSE IF THE ORIGINAL STOP OR SEARCH WAS LAWFUL AND OTHER FACTORS ARE PRESENT TO SUPPORT A PROBABLE CAUSE DETERMINATION OF ANY CRIMINAL OFFENSE.

(8) THE FACT THAT A PERSON IS ENTITLED TO CONSUME NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT UNDER THE LAWS OF THIS STATE DOES NOT CONSTITUTE A DEFENSE AGAINST ANY CHARGE FOR VIOLATION OF AN OFFENSE RELATED TO THE OPERATION OF A VEHICLE, AIRCRAFT, BOAT, MACHINERY, OR OTHER DEVICE.

(9) A COUNTY, MUNICIPALITY, OR CITY AND COUNTY SHALL NOT ADOPT, ENACT, OR ENFORCE ANY ORDINANCE, RULE, OR RESOLUTION IMPOSING ANY GREATER CRIMINAL OR CIVIL PENALTY THAN PROVIDED BY THIS SECTION OR THAT IS OTHERWISE IN CONFLICT WITH THIS SECTION.

(10) NOTHING IN THIS SECTION PROHIBITS A PERSON OR ANY ENTITY WHO OCCUPIES, OWNS, OR CONTROLS A PROPERTY FROM PROHIBITING OR OTHERWISE REGULATING THE CULTIVATION OR MANUFACTURE OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT ON OR IN THAT PROPERTY.

(11) NOTWITHSTANDING ANY OTHER LAW TO THE CONTRARY, THE OFFENSES PROVIDED FOR IN THIS SECTION DO NOT APPLY TO A PERSON POSSESSING, DISPLAYING, CULTIVATING, PURCHASING, OR SELLING A LIVING PLANT FOR ORNAMENTAL PURPOSES ONLY THAT WAS COMMONLY AND LAWFULLY SOLD PRIOR TO THE EFFECTIVE DATE OF THIS SECTION. FOR PURPOSES OF THIS SECTION, A "LIVING PLANT" DOES NOT INCLUDE MUSHROOMS OR OTHER FUNGAL MATTER.

(12) AS USED IN THIS SECTION, UNLESS THE CONTEXT OTHERWISE REQUIRES:

(a) "INHERENTLY HAZARDOUS SUBSTANCE" MEANS ANY LIQUID CHEMICAL, COMPRESSED GAS, OR COMMERCIAL PRODUCT THAT HAS A FLASH POINT AT OR LOWER THAN THIRTY-EIGHT DEGREES CELSIUS OR ONE HUNDRED DEGREES FAHRENHEIT, INCLUDING BUTANE, PROPANE, AND DIETHYL ETHER, AND EXCLUDING ALL FORMS OF ALCOHOL AND ETHANOL.

(b) (I) "NATURAL MEDICINE" MEANS THE FOLLOWING SUBSTANCES:

(A) DIMETHYLTRYPTAMINE;

(B) Mescaline;

(C) IBOGAINE;

(D) PSILOCYBIN; OR

(E) PSILOCYN.

(II) "NATURAL MEDICINE" DOES NOT MEAN A SYNTHETIC OR SYNTHETIC ANALOG OF THE SUBSTANCES LISTED IN THIS SUBSECTION (12)(b), INCLUDING A DERIVATIVE OF A NATURALLY OCCURRING COMPOUND OF NATURAL MEDICINE THAT IS PRODUCED USING CHEMICAL SYNTHESIS, CHEMICAL MODIFICATION, OR CHEMICAL CONVERSION.

(III) NOTWITHSTANDING SUBSECTION (12)(b)(I) OF THIS SECTION, "MESCALINE" DOES NOT INCLUDE PEYOTE, MEANING ALL PARTS OF THE PLANT CLASSIFIED BOTANICALLY AS *LOPHOPHORA WILLIAMSII* LEMAIRE, WHETHER GROWING OR NOT; ITS SEEDS; ANY EXTRACT FROM ANY PART OF THE PLANT, AND EVERY COMPOUND, SALT, DERIVATIVE, MIXTURE, OR PREPARATION OF THE PLANT; OR ITS SEEDS OR EXTRACTS.

(c) "NATURAL MEDICINE PRODUCT" MEANS A PRODUCT INFUSED WITH NATURAL MEDICINE THAT IS INTENDED FOR CONSUMPTION.

(d) "PERSONAL USE" MEANS THE CONSUMPTION OR USE OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT; OR THE AMOUNT OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT A PERSON MAY LAWFULLY POSSESS, CULTIVATE, OR MANUFACTURE THAT IS NECESSARY TO SHARE WITH ANOTHER PERSON WHO IS TWENTY-ONE YEARS OF AGE OR OLDER WITHIN THE CONTEXT OF COUNSELING, SPIRITUAL GUIDANCE, BENEFICIAL COMMUNITY-BASED USE AND HEALING, SUPPORTED USE, OR RELATED SERVICES. "PERSONAL USE" DOES NOT MEAN THE SALE OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT FOR REMUNERATION; THE POSSESSION, CULTIVATION, OR MANUFACTURE OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT WITH INTENT TO SELL THE NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT FOR REMUNERATION; OR THE POSSESSION, CULTIVATION, MANUFACTURE, OR DISTRIBUTION OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT FOR BUSINESS OR COMMERCIAL PURPOSES, EXCEPT AS PROVIDED BY ARTICLE 170 OF TITLE 12 AND ARTICLE 50 OF TITLE 44. NOTHING IN THIS SECTION PRECLUDES REMUNERATION FOR BONA FIDE HARM REDUCTION SERVICES OR BONA FIDE SUPPORT SERVICES USED CONCURRENTLY WITH THE SHARING OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT, PROVIDED THAT THERE IS NO ADVERTISEMENT RELATED TO THE SHARING OF NATURAL MEDICINE, NATURAL MEDICINE PRODUCT, OR THE SERVICES PROVIDED, AND PROVIDED THAT THE INDIVIDUAL PROVIDING THE SERVICES INFORMS AN INDIVIDUAL ENGAGING IN THE SERVICES THAT THE INDIVIDUAL IS NOT A LICENSED FACILITATOR PURSUANT TO ARTICLE 170 OF TITLE 12.

(e) "PRIVATE PROPERTY" MEANS A DWELLING, ITS CURTILAGE, AND A STRUCTURE WITHIN THE CURTILAGE THAT IS BEING USED BY A NATURAL PERSON OR NATURAL PERSONS FOR HABITATION AND THAT IS NOT OPEN TO THE PUBLIC.

(f) "REMUNERATION" MEANS ANYTHING OF VALUE, INCLUDING MONEY, REAL PROPERTY, TANGIBLE AND INTANGIBLE PERSONAL PROPERTY, CONTRACT RIGHT, CHOSE IN ACTION, SERVICE, ANY RIGHT OF USE OR EMPLOYMENT OR PROMISE OR AGREEMENT CONNECTED THEREWITH, BUSINESS PROMOTION, OR COMMERCIAL ACTIVITY.

SECTION 32. In Colorado Revised Statutes, **add** 10-16-162 as follows:

10-16-162. Prohibition on discrimination for coverage based solely on natural medicine consumption - definitions. (1) A CARRIER THAT OFFERS, ISSUES, OR RENEWS A HEALTH BENEFIT PLAN SHALL NOT, SOLELY ON THE BASIS OF A PERSON'S CONSUMPTION OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT:

(a) DECLINE OR LIMIT COVERAGE OF A PERSON; OR

(b) PENALIZE A COVERED PERSON OR REDUCE OR LIMIT COVERAGE FOR A PERSON.

(2) A CARRIER THAT OFFERS, ISSUES, OR RENEWS A HEALTH BENEFIT PLAN THAT PROVIDES COVERAGE FOR ANATOMICAL GIFTS, ORGAN TRANSPLANTS, OR RELATED TREATMENTS OR SERVICES SHALL NOT, SOLELY ON THE BASIS OF A COVERED PERSON'S CONSUMPTION OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT:

(a) DENY COVERAGE TO A COVERED PERSON FOR AN ORGAN TRANSPLANT OR RELATED TREATMENT OR SERVICES;

(b) DECLINE OR LIMIT COVERAGE OF A COVERED PERSON SOLELY FOR THE PURPOSE OF AVOIDING THE REQUIREMENTS OF THIS SECTION; OR

(c) PENALIZE A COVERED PERSON OR REDUCE OR LIMIT COVERAGE FOR A COVERED PERSON FOR HEALTH-CARE SERVICES RELATED TO ORGAN TRANSPLANTATION, AS DETERMINED IN CONSULTATION WITH THE ATTENDING PHYSICIAN AND THE COVERED PERSON OR THE COVERED PERSON'S REPRESENTATIVE.

(3) THIS SECTION DOES NOT REQUIRE A HEALTH BENEFIT PLAN TO PROVIDE COVERAGE FOR THE DONATION OF AN ANATOMICAL GIFT, AN ORGAN

TRANSPLANT, OR RELATED TREATMENT OR SERVICES.

(4) FOR THE PURPOSES OF THIS SECTION, UNLESS THE CONTEXT OTHERWISE REQUIRES:

(a) "ANATOMICAL GIFT" MEANS THE DONATION OF PART OF A HUMAN BODY FOR THE PURPOSE OF TRANSPLANTATION TO ANOTHER PERSON.

(b) (I) "NATURAL MEDICINE" MEANS THE FOLLOWING SUBSTANCES:

(A) DIMETHYLTRYPTAMINE;

(B) Mescaline;

(C) IBOGAINE;

(D) PSILOCYBIN; OR

(E) PSILOCYN.

(II) "NATURAL MEDICINE" DOES NOT MEAN A SYNTHETIC OR SYNTHETIC ANALOG OF THE SUBSTANCES LISTED IN THIS SUBSECTION (4)(b), INCLUDING A DERIVATIVE OF A NATURALLY OCCURRING COMPOUND OF NATURAL MEDICINE THAT IS PRODUCED USING CHEMICAL SYNTHESIS, CHEMICAL MODIFICATION, OR CHEMICAL CONVERSION.

(c) "NATURAL MEDICINE PRODUCT" MEANS A PRODUCT INFUSED WITH NATURAL MEDICINE THAT IS INTENDED FOR CONSUMPTION.

SECTION 33. In Colorado Revised Statutes, 17-2-102, **add** (8.5)(d) as follows:

17-2-102. Division of adult parole - general powers, duties, and functions - definition. (8.5)(d) THIS SUBSECTION (8.5) DOES NOT APPLY TO A PAROLEE WHO POSSESSES OR USES NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT AS AUTHORIZED PURSUANT TO SECTION 18-18-434, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44.

SECTION 34. In Colorado Revised Statutes, 17-2-201, **add** (5.3) as follows:

17-2-201. State board of parole - duties - definitions.
(5.3) NOTWITHSTANDING ANY LAW TO THE CONTRARY, THE POSSESSION OR USE OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT, AS AUTHORIZED PURSUANT TO SECTION 18-18-434, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44, MUST NOT BE CONSIDERED AN OFFENSE SUCH THAT ITS POSSESSION OR USE CONSTITUTES A VIOLATION OF CONDITIONS OF PAROLE.

SECTION 35. In Colorado Revised Statutes, 18-1.3-204, **amend** (2)(a)(VIII) introductory portion; and **add** (1)(c) as follows:

18-1.3-204. Conditions of probation - interstate compact probation transfer cash fund - creation. (1) (c) NOTWITHSTANDING THE PROVISIONS OF SUBSECTION (1)(a) OF THIS SECTION, THE POSSESSION OR USE OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT, AS AUTHORIZED PURSUANT TO SECTION 18-18-434, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44, MUST NOT BE CONSIDERED ANOTHER OFFENSE SUCH THAT ITS USE CONSTITUTES A VIOLATION OF THE TERMS OF PROBATION.

(2) (a) When granting probation, the court may, as a condition of probation, require that the defendant:

(VIII) Refrain from excessive use of alcohol or any unlawful use of controlled substances, as defined in section 18-18-102 (5), or of any other dangerous or abusable drug without a prescription; except that the court shall not, as a condition of probation, PROHIBIT THE POSSESSION OR USE OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT, AS AUTHORIZED PURSUANT TO SECTION 18-18-434, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44. FURTHERMORE, THE COURT SHALL NOT, AS A CONDITION OF PROBATION, prohibit the possession or use of medical marijuana, as authorized pursuant to section 14 of article XVIII of the state constitution, unless:

SECTION 36. In Colorado Revised Statutes, 19-2.5-103, **amend** (1)(a)(I) and (5) as follows:

19-2.5-103. Jurisdiction. (1) Except as otherwise provided by law, the juvenile court has exclusive original jurisdiction in proceedings:

(a) Concerning any juvenile ten years of age or older who has

violated:

(I) Any federal or state law, except nonfelony state traffic, game and fish, and parks and recreation laws or rules; the offense specified in section 18-13-122, concerning the illegal possession or consumption of ethyl alcohol or marijuana by an underage person or illegal possession of marijuana paraphernalia by an underage person; the offenses specified in section 18-18-406 (5)(b)(I) and (5)(b)(II), concerning marijuana and marijuana concentrate; THE OFFENSES SPECIFIED IN SECTION 18-18-434 CONCERNING NATURAL MEDICINE AND NATURAL MEDICINE PRODUCT; and the civil infraction in section 18-7-109 (3), concerning exchange of a private image by a juvenile;

(5) Notwithstanding any other provision of this section to the contrary, the juvenile court and the county court have concurrent jurisdiction over a juvenile who is under eighteen years of age and who is charged with a violation of section 18-13-122, 18-18-406 (5)(b)(I) and (5)(b)(II), 18-18-428, 18-18-429, 18-18-430, ~~18-18-434~~, or 42-4-1301; except that, if the juvenile court accepts jurisdiction over such a juvenile, the county court jurisdiction terminates.

SECTION 37. In Colorado Revised Statutes, 19-3-103, **add** (4) as follows:

19-3-103. Child not neglected - when. (4) (a) A PERSON WHO PERFORMS OR HAS PERFORMED AN ACTION THAT IS LAWFUL PURSUANT TO SECTION 18-18-434, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44 DOES NOT CONSTITUTE CHILD ABUSE OR NEGLECT BY A PARENT OR LEGAL GUARDIAN FOR PURPOSES OF THIS ARTICLE 3, UNLESS IT THREATENS THE HEALTH OR WELFARE OF A CHILD.

(b) THE COURT SHALL NOT RESTRICT OR PROHIBIT FAMILY TIME, OR DETERMINE THAT FAMILY TIME IS NOT IN THE CHILD'S BEST INTERESTS, BASED SOLELY ON THE FACT THAT A PERSON PERFORMS OR HAS PERFORMED AN ACTION THAT IS LAWFUL PURSUANT TO SECTION 18-18-434, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44, UNLESS THE COURT FINDS THAT THE CHILD'S SAFETY OR MENTAL, EMOTIONAL, OR PHYSICAL HEALTH IS AT RISK AS A RESULT OF THE FAMILY TIME.

SECTION 38. In Colorado Revised Statutes, 24-72-706, **amend**

(1)(h); and **add** (1)(f.5) as follows:

24-72-706. Sealing of criminal conviction and criminal justice records - processing fee. (1) Sealing of conviction records.

(f.5) (I) NOTWITHSTANDING ANY PROVISION OF THIS PART 7 TO THE CONTRARY, A MOTION FILED FOR THE SEALING OF CONVICTION RECORDS FOR AN OFFENSE THAT WAS UNLAWFUL AT THE TIME OF CONVICTION, BUT IS NO LONGER UNLAWFUL PURSUANT TO SECTION 18-18-434, MAY BE FILED AT ANY TIME. THE COURT SHALL ORDER THE RECORDS SEALED UNLESS THE DISTRICT ATTORNEY OBJECTS PURSUANT TO SUBSECTION (1)(f.5)(II) OF THIS SECTION.

(II) IF A MOTION IS FILED FOR THE SEALING OF AN OFFENSE DESCRIBED IN THIS SUBSECTION (1)(f.5), THE DEFENDANT SHALL PROVIDE NOTICE OF THE MOTION TO THE DISTRICT ATTORNEY, WHO MAY OBJECT. THE DISTRICT ATTORNEY SHALL DETERMINE WHETHER TO OBJECT TO THE MOTION BASED ON WHETHER THE UNDERLYING CONVICTION FOR AN OFFENSE IS NO LONGER UNLAWFUL PURSUANT TO SECTION 18-18-434. THE DISTRICT ATTORNEY SHALL DETERMINE WHETHER TO OBJECT AND PROVIDE NOTICE TO THE COURT WITHIN FORTY-TWO DAYS OF RECEIPT OF THE MOTION. IF THE DISTRICT ATTORNEY OBJECTS TO THE MOTION, THE COURT SHALL SET THE MATTER FOR HEARING AND THE BURDEN IS ON THE DEFENDANT TO SHOW BY A PREPONDERANCE OF THE EVIDENCE THAT THE UNDERLYING FACTUAL BASIS OF THE CONVICTION SOUGHT TO BE SEALED IS NO LONGER UNLAWFUL PURSUANT TO SECTION 18-18-434.

(III) (A) A DEFENDANT WHO FILES A MOTION PURSUANT TO THIS SUBSECTION (1)(f.5) MUST NOT BE CHARGED FEES OR COSTS.

(B) NOTWITHSTANDING SUBSECTION (1)(c) OF THIS SECTION, A DEFENDANT WHO FILES A MOTION PURSUANT TO THIS SUBSECTION (1)(f.5) IS NOT REQUIRED TO SUBMIT A VERIFIED COPY OF THE DEFENDANT'S CRIMINAL HISTORY WITH A FILED MOTION.

(C) SECTION 24-72-703 (2)(a)(V) DOES NOT APPLY TO CONVICTION RECORDS SEALED PURSUANT TO THIS SUBSECTION (1)(f.5).

(h) A defendant who files a motion to seal criminal justice records pursuant to this section shall pay a processing fee of sixty-five dollars to cover the actual costs related to the sealing of the criminal justice records.

The defendant shall pay to the Colorado bureau of investigation any costs related to the sealing of the defendant's criminal justice records in the custody of the bureau. The court shall waive the processing fee upon a determination that:

(I) The defendant is indigent; ~~or~~

(II) The defendant's records should have been automatically sealed pursuant to section 13-3-117, 24-72-704, or 24-72-705; OR

(III) THE DEFENDANT FILED A MOTION TO SEAL PURSUANT TO SUBSECTION (1)(f.5) OF THIS SECTION.

SECTION 39. In Colorado Revised Statutes, **add** 24-76.5-104 as follows:

24-76.5-104. Natural medicine consumption consideration prohibited - exception. CONSIDERATION OF WHETHER A PERSON PERFORMS OR HAS PERFORMED AN ACTION THAT IS LAWFUL PURSUANT TO SECTION 18-18-434, ARTICLE 170 OF TITLE 12, OR ARTICLE 50 OF TITLE 44 IS NOT A REQUIREMENT FOR ELIGIBILITY FOR A PUBLIC ASSISTANCE PROGRAM, UNLESS CONSIDERATION IS REQUIRED PURSUANT TO FEDERAL LAW.

SECTION 40. In Colorado Revised Statutes, **add** 25-56-104.5 as follows:

25-56-104.5. Prohibition on discrimination for organ transplants based solely on natural medicine consumption - applicability. (1) THIS ARTICLE 56 APPLIES TO ALL STAGES OF THE ORGAN TRANSPLANT PROCESS.

(2) A COVERED ENTITY SHALL NOT, SOLELY ON THE BASIS OF A PERSON'S CONSUMPTION OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT:

(a) CONSIDER THE INDIVIDUAL INELIGIBLE TO RECEIVE AN ANATOMICAL GIFT OR ORGAN TRANSPLANT;

(b) DENY MEDICAL SERVICES OR OTHER SERVICES RELATED TO ORGAN TRANSPLANTATION, INCLUDING DIAGNOSTIC SERVICES, EVALUATION, SURGERY, COUNSELING, AND POST-OPERATIVE TREATMENT AND SERVICES;

(c) REFUSE TO REFER THE INDIVIDUAL TO A TRANSPLANT CENTER OR OTHER RELATED SPECIALIST FOR THE PURPOSE OF BEING EVALUATED FOR OR RECEIVING AN ORGAN TRANSPLANT;

(d) REFUSE TO PLACE A QUALIFIED RECIPIENT ON AN ORGAN TRANSPLANT WAITING LIST; OR

(e) PLACE A QUALIFIED RECIPIENT ON AN ORGAN TRANSPLANT WAITING LIST AT A LOWER PRIORITY POSITION THAN THE POSITION AT WHICH THE PERSON WOULD HAVE BEEN PLACED IF THE PERSON DID NOT CONSUME NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT.

(3) NOTWITHSTANDING SUBSECTION (2) OF THIS SECTION, A COVERED ENTITY MAY TAKE A PERSON'S CONSUMPTION OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT INTO ACCOUNT WHEN MAKING TREATMENT OR COVERAGE RECOMMENDATIONS OR DECISIONS, SOLELY TO THE EXTENT THAT THE NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT CONSUMPTION HAS BEEN FOUND BY A PHYSICIAN OR SURGEON, FOLLOWING AN INDIVIDUALIZED EVALUATION OF THE PERSON, TO BE MEDICALLY SIGNIFICANT TO THE PROVISION OF THE ANATOMICAL GIFT OR ORGAN TRANSPLANT.

(4) A COVERED ENTITY SHALL:

(a) MAKE REASONABLE MODIFICATIONS TO ITS POLICIES, PRACTICES, AND PROCEDURES TO ALLOW A PERSON WHO CONSUMES NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT ACCESS TO TRANSPLANTATION-RELATED SERVICES, INCLUDING DIAGNOSTIC SERVICES, SURGERY, COVERAGE, POST-OPERATIVE TREATMENT, AND COUNSELING, UNLESS THE COVERED ENTITY DEMONSTRATES THAT MAKING SUCH MODIFICATIONS WOULD FUNDAMENTALLY ALTER THE NATURE OF THE SERVICES PROVIDED; AND

(b) TAKE REASONABLE AND NECESSARY STEPS TO ENSURE THAT A PERSON'S CONSUMPTION OF NATURAL MEDICINE OR NATURAL MEDICINE PRODUCT IS NOT THE REASON THE PERSON IS DENIED MEDICAL SERVICES OR OTHER SERVICES RELATED TO ORGAN TRANSPLANTATION, INCLUDING DIAGNOSTIC SERVICES, SURGERY, POST-OPERATIVE TREATMENT, OR COUNSELING, DUE TO THE ABSENCE OF AUXILIARY AIDS OR SERVICES, UNLESS THE COVERED ENTITY DEMONSTRATES THAT TAKING SUCH STEPS WOULD FUNDAMENTALLY ALTER THE NATURE OF THE MEDICAL SERVICES OR

OTHER SERVICES RELATED TO ORGAN TRANSPLANTATION OR WOULD RESULT IN AN UNDUE BURDEN FOR THE COVERED ENTITY.

(5) NOTHING IN THIS ARTICLE 56 REQUIRES A COVERED ENTITY TO MAKE A REFERRAL OR RECOMMENDATION FOR OR PERFORM A MEDICALLY INAPPROPRIATE ORGAN TRANSPLANT.

SECTION 41. In Colorado Revised Statutes, 35-36-102, **amend** (14)(b) as follows:

35-36-102. Rules - definitions. As used in this article 36, unless the context otherwise requires:

(14) (b) "Farm products" does not include poultry and poultry products, timber products, nursery stock, commodities, ~~or~~ marijuana, OR NATURAL MEDICINE AS DEFINED IN SECTION 12-170-104 (12).

SECTION 42. In Colorado Revised Statutes, 39-22-104, **add** (4)(r.5) as follows:

39-22-104. Income tax imposed on individuals, estates, and trusts - single rate - report - legislative declaration - definitions - repeal. (4) There shall be subtracted from federal taxable income:

(r.5) FOR INCOME TAX YEARS COMMENCING ON OR AFTER JANUARY 1, 2024, IF A TAXPAYER IS LICENSED PURSUANT TO THE "COLORADO NATURAL MEDICINE CODE", ARTICLE 50 OF TITLE 44, AN AMOUNT EQUAL TO ANY EXPENDITURE THAT IS ELIGIBLE TO BE CLAIMED AS A FEDERAL INCOME TAX DEDUCTION BUT IS DISALLOWED BY SECTION 280E OF THE INTERNAL REVENUE CODE BECAUSE NATURAL MEDICINE IS A CONTROLLED SUBSTANCE UNDER FEDERAL LAW;

SECTION 43. In Colorado Revised Statutes, 39-22-304, **add** (3)(m.5) as follows:

39-22-304. Net income of corporation - legislative declaration - definitions - repeal. (3) There shall be subtracted from federal taxable income:

(m.5) FOR INCOME TAX YEARS COMMENCING ON OR AFTER JANUARY

1, 2024, IF A TAXPAYER IS LICENSED PURSUANT TO THE "COLORADO NATURAL MEDICINE CODE", ARTICLE 50 OF TITLE 44, AN AMOUNT EQUAL TO ANY EXPENDITURE THAT IS ELIGIBLE TO BE CLAIMED AS A FEDERAL INCOME TAX DEDUCTION BUT IS DISALLOWED BY SECTION 280E OF THE INTERNAL REVENUE CODE BECAUSE NATURAL MEDICINE IS A CONTROLLED SUBSTANCE UNDER FEDERAL LAW;

SECTION 44. Appropriation. (1) For the 2023-24 state fiscal year, \$733,658 General Fund is appropriated to the department of revenue. To implement this act, the department may use this appropriation as follows:

(a) \$536,826 for use by the natural medicine division for the enforcement and regulation of natural medicines, which amount is based on an assumption that the department will require an additional 4.7 FTE;

(b) \$6,500 for tax administration IT system (GenTax) support; and

(c) \$190,332 for the purchase of legal services.

(2) For the 2023-24 state fiscal year, \$190,332 is appropriated to the department of law. This appropriation is from reappropriated funds received from the department of revenue under subsection (1)(c) of this section and is based on an assumption that the department of law will require an additional 1.0 FTE. To implement this act, the department of law may use this appropriation to provide legal services for the department of revenue.

(3) For the 2023-24 state fiscal year, \$101,150 is appropriated to the department of law. This appropriation is from the legal services cash fund created in section 24-31-108 (4), C.R.S., from revenue received from the department of regulatory agencies that is continuously appropriated to the department of regulatory agencies from the regulated natural medicine access program fund created in section 12-170-106 (1), C.R.S. The appropriation to the department of law is based on an assumption that the department of law will require an additional 0.5 FTE. To implement this act, the department of law may use this appropriation to provide legal services for the department of regulatory agencies.

(4) For the 2023-24 state fiscal year, \$838,402 General Fund is appropriated to the department of public health and environment for use by the division of disease control and public health response. This

appropriation is based on an assumption that division will require an additional 4.1 FTE. To implement this act, the division may use this appropriation for the natural medicine program related to laboratory services.

SECTION 45. Effective date. This act takes effect July 1, 2023, and applies to offenses committed on or after July 1, 2023.

SECTION 46. Safety clause. The general assembly hereby finds, determines, and declares that this act is necessary for the immediate preservation of the public peace, health, or safety.



Steve Fenberg
PRESIDENT OF
THE SENATE



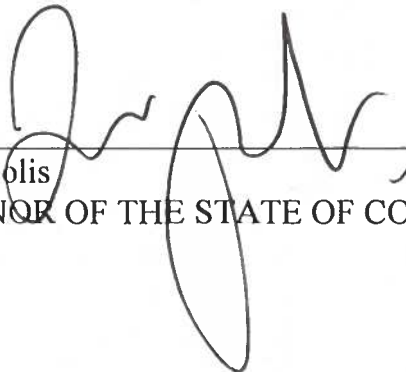
Julie McCluskie
SPEAKER OF THE HOUSE
OF REPRESENTATIVES



Cindi L. Markwell
SECRETARY OF
THE SENATE

Robin Jones
CHIEF CLERK OF THE HOUSE
OF REPRESENTATIVES

APPROVED Tuesday May 23rd 2023 at 3:30 PM
(Date and Time)



Jared S. Polis
GOVERNOR OF THE STATE OF COLORADO

Attachment 3: SB 24-198

An Act

SENATE BILL 24-198

BY SENATOR(S) Fenberg and Michaelson Jenet, Gonzales, Jaquez Lewis, Marchman, Priola;
also REPRESENTATIVE(S) Brown and McCormick, Amabile, Garcia, Joseph, Lindsay, Mabrey, Ortiz, Ricks, Snyder, Valdez.

CONCERNING MEASURES TO SUPPORT THE IMPLEMENTATION OF THE STATE'S
REGULATED NATURAL MEDICINE PROGRAM.

Be it enacted by the General Assembly of the State of Colorado:

SECTION 1. In Colorado Revised Statutes, 10-16-162, **amend** (4)(b)(I)(E) as follows:

10-16-162. Prohibition on discrimination for coverage based solely on natural medicine consumption - definitions. (4) As used in this section, unless the context otherwise requires:

(b) (I) "Natural medicine" means the following substances:

(E) ~~Psilocyn~~ PSILOCIN.

SECTION 2. In Colorado Revised Statutes, 12-170-104, **amend** (8)

Capital letters or bold & italic numbers indicate new material added to existing law; dashes through words or numbers indicate deletions from existing law and such material is not part of the act.

and (12)(a)(II) as follows:

12-170-104. Definitions. As used in this article 170, unless the context otherwise requires:

(8) "Healing center" means a facility ~~where an entity is~~ licensed by the state licensing authority pursuant to article 50 of title 44 that permits a facilitator to provide and supervise natural medicine services for a participant.

(12) (a) "Natural medicine" means the following substances:

(II) ~~Psilocyn~~ PSILOCIN.

SECTION 3. In Colorado Revised Statutes, 12-170-105, **amend** (1)(e); **repeal** (1)(h)(I); and **add** (1)(a)(II)(L), (1)(a)(II)(M), (5), (6), (7), and (8) as follows:

12-170-105. Director powers and duties - prohibition - rules.

(1) In addition to any other powers and duties granted or imposed on the director pursuant to this article 170 or by any other law, the director has the following powers and duties:

(a) To promulgate rules pursuant to section 12-20-204 concerning the following subjects:

(II) Requirements for the licensing of facilitators, practice of facilitation, and professional conduct of facilitators, including:

(L) THE APPROVAL OF EDUCATIONAL PROGRAMS IN THE STATE INTENDED TO PREPARE INDIVIDUALS FOR LICENSURE UNDER THIS ARTICLE 170, INCLUDING APPROVING CURRICULA, CONDUCTING SURVEYS, AND ESTABLISHING STANDARDS FOR THE EDUCATIONAL PROGRAMS; DENIAL OF, APPROVAL OF, AND WITHDRAWAL OF APPROVAL FROM AN EDUCATIONAL PROGRAM FOR FAILURE TO MEET REQUIRED STANDARDS ESTABLISHED BY THIS ARTICLE 170 OR RULES ADOPTED BY THE DIRECTOR; ESTABLISHMENT OF STANDARDS TO DETERMINE WHETHER INSTITUTIONS OUTSIDE THIS STATE ARE DEEMED TO HAVE ACCEPTABLE EDUCATIONAL PROGRAMS AND WHETHER GRADUATES OF INSTITUTIONS OUTSIDE THIS STATE ARE DEEMED TO BE GRADUATES OF APPROVED EDUCATIONAL PROGRAMS FOR THE

PURPOSE OF LICENSURE UNDER THIS ARTICLE 170; AND DETERMINATION OF WHEN ACCREDITATION OF AN EDUCATION PROGRAM BY ANOTHER STATE MAY SERVE AS A BASIS FOR APPROVAL OF LICENSURE;

(M) THE APPROVAL OF FACILITATOR EDUCATION AND TRAINING PROGRAMS PURSUANT TO SUBSECTION (5)(a) OF THIS SECTION;

(e) To conduct investigations and hearings, gather evidence, and pursue disciplinary actions pursuant to sections 12-20-403, 12-20-404, and 24-4-105, and this article 170, with respect to licenses, registrations, permits, or certificates when the director has reasonable cause to believe that ~~an individual or entity~~ A PERSON is violating this article 170 or a rule promulgated pursuant to this article 170, IN ALL MATTERS RELATING TO THE EXERCISE AND PERFORMANCE OF THE POWERS AND DUTIES VESTED IN THE DIRECTOR;

~~(h) (I) To petition a district court for an investigative subpoena applicable to a person who is not licensed, registered, permitted, or certified pursuant to this article 170 to obtain documents or information necessary to enforce a provision of this article 170 or a rule promulgated pursuant to this article 170 after reasonable efforts have been made to obtain requested documents or information without a subpoena;~~

(5)(a) THE DIRECTOR MAY APPROVE A FACILITATOR EDUCATION AND TRAINING PROGRAM AND ADOPT RULES PURSUANT TO SUBSECTION (1)(a) OF THIS SECTION.

(b) A PERSON SEEKING APPROVAL OF AN EDUCATION AND TRAINING PROGRAM TO PREPARE INDIVIDUALS FOR LICENSURE AS A FACILITATOR SHALL APPLY TO THE DIRECTOR AND SUBMIT EVIDENCE THAT THE PROPOSED EDUCATION AND TRAINING PROGRAM COMPLIES WITH THIS ARTICLE 170 AND RULES ADOPTED BY THE DIRECTOR PURSUANT TO SUBSECTION (1)(a) OF THIS SECTION.

(c) TO BE APPROVED PURSUANT TO THIS SUBSECTION (5), AN EDUCATION AND TRAINING PROGRAM MUST INCLUDE ALL ITEMS REQUIRED BY SUBSECTION (1)(a)(II)(B) OF THIS SECTION, INCLUDING A CURRICULUM AND MATERIALS THAT WILL PROVIDE A BASIC LEVEL OF BOTH KNOWLEDGE AND DEMONSTRABLE SKILLS FOR EACH INDIVIDUAL COMPLETING THE PROGRAM AND ANY ADDITIONAL CONTENT REQUIRED PURSUANT TO RULES

ADOPTED BY THE DIRECTOR PURSUANT TO SUBSECTION (1)(a) OF THIS SECTION.

(6) THE DIRECTOR OR THE DIRECTOR'S DESIGNEE MAY INSPECT AND SURVEY EACH APPROVED FACILITATOR EDUCATION AND TRAINING PROGRAM AT THE DIRECTOR'S DISCRETION.

(7) (a) THE DIVISION SHALL CREATE A PROCESS TO REVIEW THE DIRECTOR'S DENIAL OF AN EDUCATION AND TRAINING PROGRAM. THE PROCESS ESTABLISHED PURSUANT TO THIS SUBSECTION (7) MUST REQUIRE THE DIRECTOR OR THE DIRECTOR'S DESIGNEE, DIVISION COUNSEL, AND THE CHAIR OF THE NATURAL MEDICINE ADVISORY BOARD OR THE CHAIR'S DESIGNEE TO REVIEW APPLICATIONS PRIOR TO A DENIAL BEING ISSUED BY THE DIRECTOR.

(b) IF THE APPLICANT IS DENIED APPROVAL AFTER THE REVIEW PROCESS CREATED PURSUANT TO SUBSECTION (7)(a) OF THIS SECTION, THE DIRECTOR SHALL DOCUMENT THE GROUNDS FOR DENIAL AND SUBMIT THAT DOCUMENTATION TO THE APPLICANT.

(8) THE DIVISION SHALL REGULARLY REVIEW THE NATURAL MEDICINE PROGRAM, INCLUDING THE APPROVAL PROCESS FOR FACILITATOR EDUCATION AND TRAINING PROGRAMS. THE DIVISION SHALL INCLUDE THE REVIEW IN THE ANNUAL REPORTING REQUIRED IN SUBSECTION (1)(j) OF THIS SECTION.

SECTION 4. In Colorado Revised Statutes, 18-18-434, **amend** (12)(b)(I)(E) as follows:

18-18-434. Offenses relating to natural medicine and natural medicine product - definitions. (12) As used in this section, unless the context otherwise requires:

(b) (I) "Natural medicine" means the following substances:

(E) ~~Psilocyn~~ PSILOCIN.

SECTION 5. In Colorado Revised Statutes, 23-64-104, **amend** (1)(p) and (1)(q); and **add** (1)(r) as follows:

23-64-104. Exemptions. (1) The following educational institutions and educational services are exempt from this article 64:

(p) Yoga teacher training courses, programs, and schools; ~~and~~

(q) Training of guides, trip leaders, and guide instructors by river outfitters licensed pursuant to section 33-32-104; AND

(r) EDUCATION AND TRAINING PROGRAMS APPROVED BY THE DIRECTOR OF THE DIVISION OF PROFESSIONS AND OCCUPATIONS IN THE DEPARTMENT OF REGULATORY AGENCIES UNDER ARTICLE 170 OF TITLE 12.

SECTION 6. In Colorado Revised Statutes, 25-1.5-120, **amend** (1), (2)(a), (2)(b), and (2)(c) as follows:

25-1.5-120. Natural medicine testing and standards - rules.

(1) The department of public health and environment, in coordination with the department of revenue, to ensure consistency between rules, shall promulgate rules concerning testing standards and LABORATORY certification requirements of natural medicine and natural medicine product regulated by the department of revenue pursuant to article 50 of title 44.

(2) At a minimum, the rules must:

(a) Establish natural medicine and natural medicine product LABORATORY testing standards and ~~certification~~ requirements;

(b) Establish a natural medicine independent LABORATORY testing ~~and~~ certification program for licensees pursuant to article 50 of title 44, within an implementation time frame established by the department of revenue, requiring licensees to test natural medicine and natural medicine product to ensure, at a minimum, that products transferred for human consumption by ~~natural~~ persons ~~or entities~~ licensed pursuant to article 50 of title 44 do not contain contaminants that are injurious to health and to ensure correct labeling;

(c) Establish procedures that ~~ensure natural medicine and natural medicine product are quarantined and~~ REQUIRE notification procedures TO THE STATE LICENSING AUTHORITY if test results indicate the presence of quantities of any substance determined to be injurious to health;

SECTION 7. In Colorado Revised Statutes, 25-56-104.5, **add** (6) as follows:

25-56-104.5. Prohibition on discrimination for organ transplants based solely on natural medicine consumption - applicability - definitions. (6) AS USED IN THIS SECTION:

(a) "NATURAL MEDICINE" HAS THE SAME MEANING AS SET FORTH IN SECTION 44-50-103 (13).

(b) "NATURAL MEDICINE PRODUCT" HAS THE SAME MEANING AS SET FORTH IN SECTION 44-50-103 (15).

SECTION 8. In Colorado Revised Statutes, 44-50-103, **amend** (3), (4), (5), (6), and (13)(a)(II) as follows:

44-50-103. Definitions. As used in this article 50, unless the context otherwise requires:

(3) "Director" means the director of the NATURAL MEDICINE division ~~of professions and occupations~~ or the director's designee.

(4) "Division" means the NATURAL MEDICINE division ~~of professions and occupations~~ created in the department. ~~pursuant to section 12-20-103.~~

(5) "Facilitator" means a natural person who is twenty-one years of age or older, has the necessary qualifications, training, experience, and knowledge to perform and supervise natural medicine services for a participant, and is licensed TO ENGAGE IN THE PRACTICE OF FACILITATION by the director ~~to engage in the practice of facilitation~~ OF THE DIVISION OF PROFESSIONS AND OCCUPATIONS IN THE DEPARTMENT OF REGULATORY AGENCIES PURSUANT TO ARTICLE 170 OF TITLE 12.

(6) "Healing center" means a facility ~~where an entity is~~ licensed by the state licensing authority PURSUANT TO THIS ARTICLE 50 that permits a facilitator to provide and supervise natural medicine services for a participant.

(13) (a) "Natural medicine" means the following substances:

(II) ~~Psilocyn~~ PSILOCIN.

SECTION 9. In Colorado Revised Statutes, 44-50-203, **amend** (1)(e), (1)(f)(I)(B), and (2)(p) as follows:

44-50-203. State licensing authority - rules. (1) **Mandatory rule-making.** Rules promulgated pursuant to section 44-50-202 (1)(b) must include the following subjects:

(e) Permissible and prohibited financial interests in a license issued pursuant to this article 50 or a license issued pursuant to article 170 of title 12; except that ~~a person may~~ AN INDIVIDUAL SHALL not have a financial interest in more than five natural medicine business licenses;

(f) (I) Establishment of a natural medicine independent testing and certification program for licensees within an implementation time frame established by the division, requiring licensees to test regulated natural medicine and regulated natural medicine product to ensure, at a minimum, that regulated natural medicine and regulated natural medicine product transferred for human consumption by persons licensed pursuant to this article 50 do not contain contaminants that are injurious to health and to ensure correct labeling, as well as:

(B) Testing ~~procedures and frequency of~~ REQUIREMENTS FOR regulated natural medicine and regulated natural medicine product by licensees;

(2) **Permissive rule-making.** Rules promulgated pursuant to section 44-50-202 (1)(b) may include, but need not be limited to, the following subjects:

(p) Requirements for inspections, investigations, searches, seizures, forfeitures, embargoes, quarantines, recalls, DESTRUCTION, and such additional activities as may become necessary;

SECTION 10. In Colorado Revised Statutes, 44-50-301, **amend** (4) as follows:

44-50-301. Classes of licenses. (4) (a) EXCEPT AS PROVIDED IN SUBSECTION (4)(b) OF THIS SECTION, a person ~~may~~ SHALL not operate a

license issued pursuant to this article 50 at the same location as a license or permit issued pursuant to article 3, 4, 5, or 10 of this title 44.

(b) A PERSON MAY OPERATE A NATURAL MEDICINE TESTING FACILITY LICENSE ISSUED PURSUANT TO SECTION 44-50-404 AT THE SAME LOCATION AS A REGULATED MARIJUANA TESTING FACILITY LICENSE ISSUED PURSUANT TO ARTICLE 10 OF THIS TITLE 44.

SECTION 11. In Colorado Revised Statutes, 44-50-401, **amend** (2) as follows:

44-50-401. Natural medicine healing center license - rules. (2) A natural medicine healing center licensee may transfer regulated natural medicine or regulated natural medicine product to another natural medicine healing center licensee OR A FACILITATOR pursuant to rules promulgated by the state licensing authority.

SECTION 12. In Colorado Revised Statutes, 44-50-402, **amend** (1) as follows:


44-50-402. Natural medicine cultivation facility license. (1) A natural medicine cultivation facility license may be issued PURSUANT TO STATE LICENSING AUTHORITY RULES AND only to a person who cultivates regulated natural medicine for transfer and distribution to natural medicine healing center licensees, natural medicine product manufacturer licensees, ~~or~~ other natural medicine cultivation facility licensees, OR OTHER PERSONS LICENSED UNDER ARTICLE 170 OF TITLE 12 OR THIS ARTICLE 50.

SECTION 13. In Colorado Revised Statutes, 44-50-403, **add** (3) as follows:

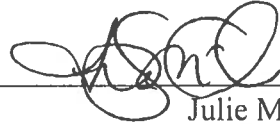
44-50-403. Natural medicine product manufacturer license. (3) PURSUANT TO RULES PROMULGATED BY THE STATE LICENSING AUTHORITY, A NATURAL MEDICINE PRODUCT MANUFACTURER LICENSEE MAY TRANSFER AND DISTRIBUTE REGULATED NATURAL MEDICINE AND A REGULATED NATURAL MEDICINE PRODUCT TO ANOTHER PERSON LICENSED UNDER ARTICLE 170 OF TITLE 12 OR ANOTHER PERSON LICENSED UNDER THIS ARTICLE 50.

SECTION 14. Safety clause. The general assembly finds,

determines, and declares that this act is necessary for the immediate preservation of the public peace, health, or safety or for appropriations for the support and maintenance of the departments of the state and state institutions.



Steve Fenberg
PRESIDENT OF
THE SENATE



Julie McCluskie
SPEAKER OF THE HOUSE
OF REPRESENTATIVES

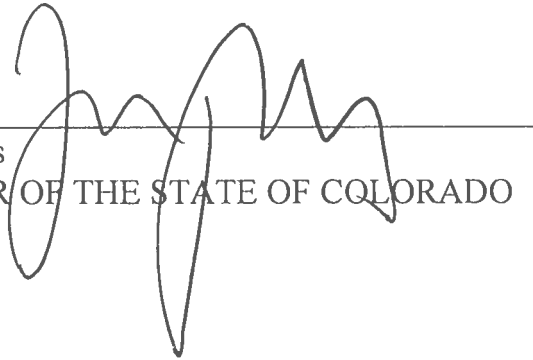


Cindi L. Markwell
SECRETARY OF
THE SENATE



Robin Jones
CHIEF CLERK OF THE HOUSE
OF REPRESENTATIVES

APPROVED Thursday June 6th 2024 at 1:00 pm
(Date and Time)



Jared S. Polis
GOVERNOR OF THE STATE OF COLORADO

Attachment 4: January 2024
Consolidated Natural Medicine Advisory
Board Recommendations

Natural Medicine Advisory Board Initial Recommendations

Approved on January 19, 2024

Preface

The Natural Medicine Advisory Board’s (“Advisory Board”) initial recommendations document reflects the recommendations that the Advisory Board developed between April 13, 2023 and January 19, 2024. The Board’s work is done pursuant to the Natural Medicine Health Act (“Act”), and the document was drafted to submit the Advisory Board’s recommendations to the Department of Regulatory Agencies (“DORA”) and to the Department of Revenue (“DOR”), as required by the Act.

The Advisory Board will continue to formulate further recommendations. The Advisory Board’s role is to make recommendations to DORA and DOR. Those state agencies will adopt rules and will administer the Natural Medicine regulated access program.

None of the statements in the Advisory Board’s initial recommendation document carry the force of law, and they should not be construed as any form of law or regulatory guidance as contemplated by the Act. This document constitutes preliminary recommendations that are not legally binding and should not be perceived or construed as such. Readers are recommended not to take any action based on the content of this document.

In summary, this document is a resource for the Advisory Board as it continues to develop recommendations for DORA and DOR. Recommendations are subject to further changes; while this document has been finalized by the Advisory Board and submitted to DORA and to DOR, the Advisory Board anticipates making additional recommendations through subsequent reports to those agencies.

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Definitions 12-170-104

As used in this article 170, unless the context otherwise requires:

#	Term	Definition
1	“Administration session”	means a session conducted at a healing center, or another location as allowed by this article 170 and article 50 of title 44, during which a participant consumes and experiences the effects of regulated natural medicine or regulated natural medicine product under the supervision of a facilitator.
2	“Board”	means the state natural medicine advisory board created in section 12-170-106.
3	“Director”	means the director of the division or the director's designee.
4	“Division”	means the division of professions and occupations created in the department pursuant to section 12-20-103.
5	“Facilitation”	means the performance and supervision of natural medicine services for a participant.
6	“Facilitator”	means an individual who is twenty-one years of age or older; has the necessary qualifications, training, experience, and knowledge, as required pursuant to this article 170 or rules promulgated pursuant to this article 170, to perform and supervise natural medicine services for a participant; and is licensed by the director to engage in the practice of facilitation.
7	“Federally recognized American tribe”	has the same meaning as “Indian tribe” as defined by the federal “Federally Recognized Indian Tribe List Act of 1994”, as amended.
8	“Healing center”	means a facility where an entity is licensed by the state licensing authority pursuant to article 50 of title 44 that permits a facilitator to provide and supervise natural medicine services for a participant.
9	“Health-care facility”	means an entity that is licensed, certified, or otherwise permitted by law to administer medical treatment in this state, including a hospital, clinic, hospice entity, community mental health center, federally qualified health center, rural health clinic, organization providing a program of all-inclusive care for the elderly, long-term care facility, continuing care retirement community, or other type of entity where health care is provided.
10	“Integration session”	means a meeting between a participant and facilitator that occurs after the completion of an administration session.
11	“Local jurisdiction”	means a meeting between a participant and facilitator that occurs after the completion of an administration session.
12(a)	“Natural medicine”	means the following substances: Psilocybin; or Psilocyn.
12(b)	In addition to the substances listed in subsection (12)(a) of this section, “natural medicine” includes:	
12(b)(i)	Dimethyltryptamine	if recommended by the board and approved by the director and the executive director of the state licensing authority for inclusion on or after June 1, 2026;

12(b)(ii)	Ibogaine	if recommended by the board and approved by the director and the executive director of the state licensing authority; or
12(b)(iii)	Mescaline	if recommended by the board and approved by the director and the executive director of the state licensing authority for inclusion on or after June 1, 2026.
12(c)	“Natural medicine” <u>does not mean a synthetic or synthetic analog</u> of the substances listed in subsections (12)(a) and (12)(b) of this section, including a derivative of a naturally occurring compound of natural medicine that is produced using chemical synthesis, chemical modification, or chemical conversion.	
12(d)	Notwithstanding subsection (12)(b)(III) of this section, <u>“mescaline” does not include peyote</u> , meaning all parts of the plant classified botanically as lophophora williamsii lemaire, whether growing or not; its seed; any extract from any part of the plant, and every compound, salt, derivative, mixture, or preparation of the plant; or its seeds or extracts.	
13	“Natural medicine product”	means a product infused with natural medicine that is intended for consumption.
14	“Natural medicine services”	means a preparation session, administration session, and integration session provided pursuant to this article 170.
15	“Participant”	means an individual who is twenty-one years of age or older and who receives natural medicine services performed by and under the supervision of a facilitator.
16	“Preparation session”	means a meeting between a participant and facilitator that occurs before an administration session. “Preparation session” does not mean an initial consultation, an inquiry, or a response about natural medicine services.
17	“Regulated natural medicine”	means a natural medicine that is cultivated, manufactured, tested, stored, distributed, transported, transferred, or dispensed pursuant to article 50 of title 44.
18	“Regulated natural medicine product”	means natural medicine product that is cultivated, manufactured, tested, stored, distributed, transported, transferred, or dispensed pursuant to article 50 of title 44.
19	“Remuneration”	means anything of value, including money, real property, tangible and intangible personal property, contract right, chose in action, service, and any right of use or employment or promise or agreement connected therewith, business promotion, or commercial activity.
20	“State licensing authority”	means the authority created for the purpose of regulating and controlling the licensing of the cultivation, manufacturing, testing, storing, distribution, transportation, transfer, and dispensation of regulated natural medicine and regulated natural medicine product in this state pursuant to section 44-50-201.

Board Duties - CRS 12-170-106.	
1.	<i>Accurate public health approaches regarding use, benefits, harms, and risk reduction.</i>
2.	<i>Content and scope of educational campaigns</i>
3.	<i>Research related to the efficacy and regulation, including product safety, harm reduction, and cultural responsibility</i>
4.	<i>Facilitator Requirements - Proper content of training programs, educational and experiential requirements, and qualifications. When making recommendations, the Board may consider: (I) Tiered facilitator licensing; (II) Limited waivers of education and training requirements based on experience, training, skills; (III) Removal of unreasonable or logistical barriers.</i>
5.	<i>Affordable, equitable, ethical, and culturally responsible access to NM (may consider recommendations on ways to reduce costs of licensure, incentives for reduced costs for services, and incentives for services in geographic and culturally diverse regions).</i>
6.	<i>Regulatory considerations for each type of NM and each type of session</i>
7.	<i>Addition of other types of NM, based on medical, psychological, and scientific studies, research, and other information related to safety and efficacy - Shall prioritize consideration of Ibogaine.</i>
8.	<i>All rules to be promulgated by DORA & DOR</i>
9.	<i>Requirements for accurate and complete data collection, reporting, and publication</i>

Qualifications, Licensing, and Training

12-170-106 (5)(c)(I, II, III)

“Facilitator Requirements - Proper content of training programs, educational and experiential requirements, and qualifications. When making recommendations, the Board may consider: (I) Tiered facilitator licensing; (II) Limited waivers of education and training requirements based on experience, training, skills; (III) Removal of unreasonable or logistical barriers.”

Recommendation #1

The State should promulgate rules that outline the requirements necessary to obtain facilitator licensees to provide natural medicine services (which includes a preparation session for natural medicine, an administration session for natural medicine, and an integration session).

Vote Outcome: Voted Unanimously 1/18/2024

License 1(Wellness)

1. **Facilitator License 1 (Wellness)** to include those who do not hold another professional license, as well as **Indigenous and Religious Practitioners who choose to engage in regulated space, individuals trained and licensed to provide traditional and complementary medicine, individuals licensed to provide massage, individuals licensed to provide acupuncture, and registered psychotherapists):**
 - i. A Single Licensed Wellness Natural Medicine Facilitator is licensed to provide natural medicine services (which includes a preparation session for natural medicine, an administration session for natural medicine, and an integration session).
 - ii. A Licensed Wellness Natural Medicine Facilitator may not independently engage in the “practice of medicine,” as defined by CO Rev Stat § 12-36-106, in conjunction with the administration of natural medicine. (“‘ The practice of medicine’ [per CO Rev Stat § 12-36-106] means holding out one’s self to the public as being able to diagnose, treat, prescribe for, palliate, or prevent any human disease, ailment, pain, injury, deformity, or physical or mental condition, whether by the use of drugs, surgery, manipulation, electricity, telemedicine, the interpretation of tests, including primary diagnosis of pathology specimens, images, or photographs, or any physical, mechanical, or other means whatsoever.”)
 - iii. A Licensed Wellness Natural Medicine Facilitator may not independently practice “psychotherapy,” as defined by CO Rev Stat § 12-43-201, in conjunction with the administration of natural medicine. (“‘ Psychotherapy’ [per CO Rev Stat § 12-43-201] means the treatment, diagnosis, testing, assessment, or counseling in a professional relationship to assist individuals or groups to alleviate mental disorders, understand unconscious or conscious motivation, resolve emotional, relationship, or attitudinal conflicts, or modify behaviors that interfere with effective emotional, social, or intellectual functioning. Psychotherapy follows a planned procedure of intervention that takes base on a regular basis over a period of time, or in the case of testing, assessment, and brief psychotherapy, psychotherapy can be a single intervention.”)

- iv. A Licensed Wellness Natural Medicine Facilitator may not independently provide natural medicine services to participants who have been **diagnosed with cardiovascular disease, uncontrolled hypertension, diseases of the liver, seizure disorders, severe chronic medical illness, terminal illness, severe suicidal behavior (i.e., severe current suicidal ideation, current suicidal intent, the current plan for suicide)**, severe (PCL-5 score above 33) current PTSD, psychosis, schizophrenia, schizoaffective disorders, or Bipolar Disorder (This limitation does not apply in situations where a diagnosis is in remission. A Licensed Wellness Natural Medicine Facilitator may not independently provide natural medicine services to participants who are taking lithium or antipsychotic medications.
 - 1. A Licensed Wellness Natural Medicine Facilitator may provide natural medicine services to participants with these conditions if the participant is directly referred for natural medicine or provided medical clearance by someone licensed in the state of Colorado or their respective home state or state of residence to diagnose and treat these disorders.
 - 2. It is recommended that participants taking other psychotropic medications undergo consultation from a medical provider before participating in natural medicine services.
- v. To obtain a Licensed Wellness Natural Medicine Facilitator license, an applicant must complete:
 - 1. Completion of Natural Medicine Facilitators training that includes, at minimum, the curriculum mandated by DORA (see education requirements)
 - 2. Basic Life Support (BLS) Certification
 - 3. 40 hours of supervised practicum training in the facilitation of natural medicine
 - 4. These requirements may be modified if an applicant meets the criteria for accelerated training (see education requirements)
 - 5. Applicants must apply for renewal of license every two years.
- vi. Applicants for a Licensed Wellness Natural Medicine Facilitator License will be eligible to apply for a Training Wellness Natural Medicine Facilitator license:
 - 1. Applicants are eligible for a Training Wellness Natural Medicine Facilitator License after they have completed all didactic requirements, 40 hours of practicum, and BLS training.
 - 2. Individuals with a Training Wellness Natural Medicine Facilitator License must operate under the supervision of a facilitator licensed in the state of Colorado who is willing to oversee their work as a facilitator.
 - 3. Individuals with a Training Wellness Natural Medicine Facilitator License must demonstrate regular meetings (virtual or in person) with their supervisor.
 - 4. Individuals with a Training Wellness Natural Medicine Facilitator License must apply for a Licensed Wellness Natural Medicine Facilitator license within two years of receiving a Training Wellness Natural Medicine Facilitator License.

License 2 (Clinical & Medical)

1. Facilitator License 2 (clinical) Licensed Natural Medicine Behavioral Health Facilitator:

- i. A Licensed Natural Medicine Behavioral Health Facilitator is licensed to provide natural medicine services (which includes a preparation session for natural medicine, an administration session for natural medicine, and an integration session).
- ii. Licensed Natural Medicine Behavioral Health Facilitators may provide natural medicine services for the purpose of treatment of mental health/behavioral health disorders using appropriate standards of care for natural medicine as outlined in the Colorado Natural Medicine Code of Ethics.
- iii. Licensed Natural Medicine Behavioral Health Facilitators may not independently engage in the “practice of medicine,” as defined by CO Rev Stat § 12-36-106, in conjunction with the administration of natural medicine. (“The practice of medicine’ [per CO Rev Stat § 12-36-106] means holding out one’s self to the public as being able to diagnose, treat, prescribe for, palliate, or prevent any human disease, ailment, pain, injury, deformity, or physical or mental condition, whether by the use of drugs, surgery, manipulation, electricity, telemedicine, the interpretation of tests, including primary diagnosis of pathology specimens, images, or photographs, or any physical, mechanical, or other means whatsoever.”) except as outlined by exception granted to individuals practicing under the Mental Health Act (CO Rev Stat § 12-43) This limitation does not apply in situations where diagnosis is in remission
- iv. Licensed Natural MedicineWhen clinically appropriate, Licensed Natural Medicine Behavioral Health Facilitators may advise and collaborate with Licensed Wellness Natural Medicine Facilitators to provide natural medicine services with mental health/behavioral health risk factors.
- v. Behavioral Health Facilitators may not independently provide natural medicine services to participants with cardiovascular disease, uncontrolled hypertension, diseases of the liver, seizure disorders, severe chronic medical illness, or terminal illness. Licensed Natural Medicine Behavioral Health Facilitators may not independently provide natural medicine services to participants who are taking lithium or antipsychotic medications.
 1. Licensed Wellness Natural Medicine Behavioral Health Facilitators may provide natural medicine services to participants with these conditions if the participant is directly referred for natural medicine or provided medical clearance by someone licensed in the state of Colorado or their respective home state or state of residence to diagnose and treat these disorders.
 2. It is recommended that participants taking other psychotropic medications undergo consultation from a medical provider before participating in natural medicine services.
- vi. To obtain a Licensed Natural Medicine Behavioral Health Facilitator license, an applicant must complete the following:
 1. Licensed in the state of Colorado as a psychologist, social worker, clinical social worker, marriage and family therapist, licensed professional counselor, or addiction counselor.

- a. Students working under the supervision of a psychologist, social worker, clinical social worker, marriage and family therapist, licensed professional counselor, or addiction counselor licensed in the state of Colorado who is also licensed as a Licensed Natural Medicine Psychotherapy Facilitator may also provide natural medicine services.
- 2. Completion of Natural Medicine Facilitators training that includes, at minimum, the curriculum mandated by DORA.
- 3. Basic Life Support Certification.
- 4. 40 hours of supervised practicum training in the facilitation of natural medicine.
- 5. These requirements may be modified if an applicant meets the criteria for accelerated training (see education requirements).
- 6. Applicants must apply for renewal of license every two years.

These requirements may be modified if an applicant meets the criteria for accelerated training (see education requirements)

- v. Applicants for a Licensed Natural Medicine Behavioral Health Facilitator, will be eligible to apply for a Training Natural Medicine Behavioral Health Facilitator License:
 - 1. Applicants are eligible for a Training Natural Medicine Behavioral Health Facilitator License after they have completed all didactic requirements, 40 hours of practicum, and BLS training.
 - 2. Individuals with a Training Natural Medicine Behavioral Health Facilitator License must operate under the supervision of a facilitator licensed in the state of Colorado who is willing to oversee their work as a facilitator.
 - 3. Individuals with a Training Natural Medicine Behavioral Health Facilitator License must demonstrate regular meetings (virtual or in person) with their supervisor.
 - 4. Individuals with a Training Natural Medicine Behavioral Health Facilitator License must apply for a Licensed Natural Medicine Medical Facilitator license within two years of receiving a Training Natural Medicine Behavioral Health Facilitator License.

2. Facilitator License 2 (Medical)

- i. A Licensed Natural Medicine Medical Facilitator is licensed to provide natural medicine services (which includes a preparation session for natural medicine, an administration session for natural medicine, and an integration session).
- ii. Licensed Natural Medicine Medical Facilitators may provide natural medicine services for the purpose of treatment of medical and mental health/behavioral health disorders using appropriate standards of care for natural medicine as outlined in the Colorado Natural Medicine Code of Ethics. This would include the practice of medicine for the purposes of ensuring the safety and efficacy of natural medicine administration, including assessing the appropriateness of natural medicine administration for participants with medical and/or psychiatric risk factors, managing potential drug interactions with natural medicines, providing medical treatments to mitigate risk factors that might prohibit a participant from receiving natural medicine services, providing recommendations about the dosage of natural medicines, providing additional medical monitoring and interventions as necessary to increase safety and efficacy during the administration of natural medicines.

- iii. When clinically appropriate, Licensed Natural Medicine Medical Facilitators may advise and collaborate with Licensed Natural Medicine Behavioral Health Facilitators and Licensed Wellness Natural Medicine Facilitators to provide natural medicine services to participants with medical and/or mental health/behavioral health risk factors.
- iv. To obtain a Licensed Natural Medicine Medical Facilitator license, an applicant must complete the following:
 - 1. Licensed in the state of Colorado as a Medical Doctor (MD), Doctor of Osteopathic Medicine (DO), Nurse Practitioner (NP), or Physician's Associate (PA).
 - i. Students working under the supervision of a Medical Doctor (MD), Doctor of Osteopathic Medicine (DO), Nurse Practitioner (NP), or Physician's Associate (PA) licensed in the state of Colorado who is also licensed as a Licensed Natural Medicine Medical Facilitator may also participate in natural medicine services
 - 2. Completion of Natural Medicine Facilitators training that includes, at minimum, the curriculum mandated by DORA.
 - 3. Basic Life Support Certification
 - 4. 40 hours of supervised practicum training in the facilitation of natural medicine
 - 5. These requirements may be modified if the applicant meets the criteria for accelerated training (see education requirements)
 - 6. Applicants must apply for license renewal every two years.
- v. Applicants for a Licensed Natural Medicine Medical Facilitator will be eligible to apply for a Training Natural Medicine Medical Facilitator License:
 - 1. Applicants are eligible for a Training Natural Medicine Medical Facilitator License after they have completed all didactic requirements, 40 hours of practicum, and BLS training.
 - 2. Individuals with a Training Natural Medicine Medical Facilitator License must operate under the supervision of a facilitator licensed in the state of Colorado who is willing to oversee their work as a facilitator.
 - 3. Individuals with a Training Natural Medicine Medical Facilitator License must demonstrate regular meetings (virtual or in person) with their supervisor.
 - 4. Individuals with a Training Natural Medicine Medical Facilitator License must apply for a Licensed Natural Medicine Medical Facilitator license within two years of receiving a Training Natural Medicine Medical Facilitator License.

Recommendation #2

The State should promulgate rules that outline the requirements necessary to obtain a Distinguished Educator License facilitator license to provide natural medicine services (which includes a preparation session for natural medicine, an administration session for natural medicine, and an integration session).

Vote Outcome: Voted Unanimously 1/18/2024

3. Distinguished Educator License

- i. A licensed distinguished educator is licensed to provide natural medicine services (which includes a preparation session for natural medicine, an administration session for natural medicine, and an integration session) for the purposes of education and training.
- ii. A licensed distinguished educator may provide natural medicine services for the purposes of the treatment of medical, behavioral health, and mental health disorders if they are also licensed to do so in the state of Colorado for the purposes of education or training.
- iii. A licensed distinguished educator may not independently own or operate a healing center and may only facilitate natural medicine sessions in the state of Colorado for the purposes of education and training.
 - 1. Licensees who hold licenses 1 or 2 may own or operate a healing center and be an educator.
- vi. To obtain a Distinguished Educator license, an applicant must submit the following:
 - 1. A confirmed affiliation with a Natural Medicine Training Program approved by the state of Colorado.
 - 2. A CV or resume
 - 3. An up to 500-word biographical statement summarizing the qualifications of the educator to teach within their assigned subject matter. This statement should note the experience or qualifications of the instructor to provide educational instruction and/or student supervision
 - 4. Attestation of additional materials collected by the training program to verify the experience and skill of the instructor (including, but not limited to, personal narratives, client references, community references, or professional references)
 - 5. Basic Life Support Certification
 - 6. These requirements may be modified if an applicant meets the criteria for accelerated training (see education requirements)
 - 7. Applicants must apply for renewal of license annually.

Sections (A) (1, 2, 3)) have been added by the Natural Medicine Advisory Board Subcommittee on Qualifications, Licensing, and Training. By Dr. Alisa Hannum, Subcommittee Chair's Draft Facilitator Scope Document

Providing information about natural medicine or providing services designed to help participants process psychedelic experiences for the purposes of "natural medicine harm reduction" to participants who have used natural medicine for personal use or participants who have completed a full course of natural medicine services (i.e. at least one preparation session, an administration session, and at least one integration session) with a licensed Facilitator does not require a Facilitator license in the state of Colorado. In the state of Colorado, "natural medicine harm reduction" is defined as "a set of practical strategies and ideas aimed at reducing negative consequences to physical, mental or social well-being associated with the use of natural medicines.

educational and Experiential

1. Educational and Experiential Requirements and Qualifications to Become a Facilitator [Proficiency Program]

- i.** Educational programs shall provide core training that consists of at least 150 hours of instruction, 40 hours of supervised experience, and 6 months of consultation with a supervisor.
- ii.** For training that is not conducted in person, at least 50 percent of the training shall be conveyed through online synchronous learning.
- iii.** Applicants for training programs must demonstrate that their education consists of the following minimum hours of instruction, in the following areas:

2. Required Education and Training

Recommendation #3

The State should promulgate rules that outline the requirements necessary to obtain a Training Program license to provide instruction, supervision, consultation, and core training for individuals seeking a facilitator license.

Vote Outcome: Voted Unanimously 1/18/2024

E

i. Facilitator Best Practices (5 hours)

1. Awareness of the facilitator's personal bias, including examination of the facilitator's motives and the potential issues surrounding transference and countertransference.
2. Awareness of the "state of the field" in terms of research on natural medicines and how to present this information to participants in a way that is accurate and unbiased.
3. Awareness of new research related to safety and ethics of providing psilocybin services and resources for professional development following program completion.
4. Appropriate measures to mitigate risks associated with psilocybin services, including harm reduction, de-escalation, and conflict resolution

ii. Ethics and Colorado Natural Medicine Rules and Regulations (25 hours)

1. Colorado's Facilitator Code of Ethics
2. Ethical considerations relating to equity, privilege, bias, and power
3. Awareness of increased vulnerability associated with altered states of consciousness
4. Appropriate use of touch and participant consent to physical contact, including the development of a Touch Contract in preparation session
5. Financial conflicts of interest and duties to participants
6. Ethical advertising practices
7. Providing accurate information about current research on the efficacy of natural medicines and facilitator scope of practice
8. Reasonable expectations regarding client outcomes
9. Training in Colorado Natural Medicine rules and regulations

iii. Relation Boundaries and Introduction to Physical Touch (10 hours)

1. Defining and holding boundaries in the facilitation of natural medicines.

2. Historical and contemporary abuse of power and boundary violations associated with natural medicine, including sexual, emotional, and physical abuse, and implications for facilitators.
3. Appropriate emotional and sexual boundaries between facilitators and participants both during the provision of natural medicine services and at other times.
4. Potential harm to participants for boundary and touch violations.
5. Consequences for facilitators for breaching relation boundaries.
6. Consequence for facilitators for breaching the touch contract.
7. Active monitoring of client-facilitator boundaries, specifically boundaries related to consent and touch.
8. Participant-directed discussion of touch contracts to address personalized boundaries around touch, limitations of capacity to request additional touch once natural medicine has been ingested, and the possibility of requesting a co-facilitator and/or videotaping of administration sessions.
9. Practical training and experience in an introduction to the appropriate use of touch during the facilitation of natural medicine.

iv. Physical and Mental/Behavioral Health and State (25 hours)

1. Training in therapeutic presence, including compassionate presence, client communication, openness, receptivity, groundedness, self-awareness, empathy, and rapport, including a non-directive facilitation approach, cultural attunement, and a nonjudgmental disposition.
2. Response to psychological distress and creating a safe space for difficult emotional experiences.
3. Training on how participants manage self-care.
4. Identification and facilitation of a variety of subjective natural medicine experiences, including experiences related to physiological sensations, cognitive, emotional, and mystical states, and traumatic memories.
5. Appropriate modes of intervention for mental/behavioral health concerns, understanding when intervention is necessary, and when a client may need a higher level of care.
6. Appropriate modes of intervention for physical health concerns, understanding when intervention is necessary, and when a client may need a higher level of care.
7. Training in the use of Natural Medicine for chronic pain.
8. Recognizing and addressing adverse medical and/or behavioral reactions and implementation of a safety plan when necessary.
9. Scenario training for navigating challenging and unusual situations.
10. Models of substance abuse, addiction, and recovery.

v. Drug Effects, Contraindications, and Interactions (5 hours)

1. Pharmacodynamics and pharmacokinetics of natural medicine.
2. Physical reactions and side effects of natural medicine.
3. Drug and supplement interaction.
4. The metabolism of natural medicine.
5. The primary effects and mechanisms of action of natural medicines on the brain, including connectivity in the brain and activation of serotonin receptors.
6. Awareness of medical, mental/behavioral health, and pharmaceutical contraindications for natural medicine services.

vi. Introduction to Trauma Informed Care (10 hours)

1. Trauma-informed care, including the physiology of trauma, vicarious trauma, empathic stress, and compassion fatigue.
2. Trauma-informed communication skills.

3. Training in how to recognize when someone may be dissociating or going into a trauma response.
4. Training in understanding sympathetic and parasympathetic nervous system response.
5. Role plays focused on helping regulate when they are in a traumatic stress response.

vii. Introduction to Suicide Risk (5 hours)

1. Understanding suicidality, suicidal ideation, self-injury, and models of assessing risk.
2. Basics of suicide risk assessment.
3. How to refer and/or seek emergency mental/behavioral health services when suicide risk is severe.
4. Basics of creating a Mental/Behavioral Health Safety Plan.

viii. Indigenous, Social, and Cultural Considerations (10 hours)

1. Historical and indigenous modalities of preparation of natural medicines.
2. Current and historical use of plant and fungal medicines in indigenous and Western cultures.
3. Information about the practice of Curanderismo and traditional training for the use of natural medicines.
4. The Controlled Substance Act and its effect on natural medicine services in indigenous and Western cultures and implications for facilitators.
5. Cultural equity, its relationship to health equity, and social determinants of health.
6. Racial justice, including the impact of race and privilege on health outcomes and the impact of systemic racism on individuals and communities.
7. The impact of drug policy on individuals and communities, especially underrepresented, marginalized, and under-resourced communities.
8. History of systemic inequity, including systemic inequity in the delivery of healthcare, mental/behavioral health, and behavioral health services.
9. Intergenerational trauma.
10. Understanding of how racial and cultural dynamics affect interactions between facilitator and participant
11. Identification of the unique psychological, physical, and socio-cultural needs presented by persons with terminal illness and awareness of the appropriate knowledge, skills, and approach needed to provide safe facilitation to such persons in a manner consistent with client goals, values, heritage, and spiritual practices.

ix. Screening (5 hours)

1. Discussion of participant's reasons for seeking natural medicine services
2. Completion of the mandated screening form
3. How to conduct screening for pertinent physical and mental/behavioral health concerns
4. Helping participants connect with different facilitators if needed
5. Role plays of screening sessions

X. Preparation (10 hours)

1. How to conduct informed consent.

2. How to complete and collect participant information forms and intake interviews.
3. Providing accurate information about current research on the efficacy of natural medicines and facilitator scope of practice.
4. Discussion of the concept of trusting inner guidance, which may include discussion of topics such as Inner Healing Intelligence, Inner Genius, The Self, Wise Mind, Soul, or Spirit.
5. Using intake and screening information to assist participants in identifying the benefits of referral to specialized treatment services.
6. Discussion of the facilitator's role and the limits of the facilitator's scope of practice.
7. Discussion of the state of scientific research for natural medicines and limitations of this research.
8. Discussion of "set and setting," including environmental considerations for administration sessions such as lighting, sound, and temperature.
9. Discussion of the reasonable expectations regarding client outcomes.
10. Identification of participant safety concerns, including medical history, contraindicated medication, and psychological instability.
11. Appropriate strategies to discuss facilitator safety concerns, including but not limited to identification of participant's support system.
12. Determination of whether the participant should participate in the administration session.
13. Participant directed discussion of a safety plan to address identified safety concerns and transportation plan for the administration session.
14. "Set and setting" includes environmental considerations for administration sessions, such as lighting, sound, and temperature.
15. Historical and indigenous modalities of preparation for facilitation and administration of natural medicines.

xi. Administration (10 hours)

1. Dosing strategies and considerations, including the following:
 - a. Experiential differences relating to differing dosages.
 - b. Physiological considerations in relation to dosage.
 - c. Delivery mechanisms of natural medicine.
 - d. Use of secondary doses.
2. Skills to help facilitators handle natural medicine material effectively, Including the following:
 - a. Hygiene while handling material.
 - b. Assessing material for potential spoilage, contamination, and other concerns.
3. Effectively working with challenging behaviors during administration sessions, including the following:
 - a. Unexpected client disclosures.
 - b. Substance-induced psychosis.
 - c. Suicidality
4. Traumatic stress and its manifestation during natural medicine experiences and appropriate facilitator response, including the following:
 - a. Trauma's relationship to the body.
 - b. Repressed trauma emerging during natural medicine experience.
 - c. Trauma and traumatic stress resulting from systemic oppression.
 - d. Safety for trauma resolution and risks associated with re-traumatization.
 - e. Protocols ensuring facilitator safety and responding to emergencies.
5. "Set and setting" includes environmental considerations for administration sessions, such as lighting, sound, and temperature.
6. Completion of administration session, including implementation of transportation plan

xii. Integration (10 hours)

1. Training on how to conduct an integration session
2. Identification of appropriate resources that may assist participants with integration, including resources for:
 - a. Interpreting feelings and emotions experienced during administration sessions.
 - b. Facilitation of positive internal and external changes.
 - c. Enhancement of existing supportive relationships.
3. Identification of participant client safety concerns
4. Facilitator scope of practice
5. Discussion of appropriate intervals between administration sessions and related safety concerns

xiii. Group Facilitation (10 hours)

1. Training in how to conduct groups, proper ratios for participants, and group facilitators.
2. Special considerations regarding group administration of natural medicine, including understanding boundaries and touch between group members and between group members and facilitators.
3. Skills required to facilitate natural medicine group sessions, including, but not limited to:
 - a. Group preparation sessions.
 - b. Group integration sessions.
 - c. Regulatory requirements for group facilitation.
4. Scenario training for navigating challenging and unusual situations when facilitating groups

xiv. Facilitator Development and Self-Care (10 hours)

1. Facilitator self-care as a participant safety concern and facilitator ethical requirements.
2. How to identify when a facilitator is not in a space to facilitate and what to do about it (including discussion of countertransference).
3. How facilitators keep themselves safe while working with participants.
4. How a facilitator can prepare themselves for facilitation.
5. How a facilitator can decompress after facilitation.

3. Educational programs must comply with the requirements specified in these rules to maintain approved status.
4. The requirements listed in these rules are minimum requirements. Nothing in these rules prevents an educational program from offering additional modules or hours of instruction.
5. Educational programs must ensure that all supervisors and educators are licensed in the state of Colorado as either Facilitators or Distinguished Educators

Recommendation #4

The State should promulgate rules that outline the requirements necessary to qualify as an Accelerated Training Applicant.

Vote Outcome: Voted Unanimously 1/18/2024

6. Accelerated options for applicants with significant experience providing natural medicine services

- i. Accelerated training applicants must demonstrate completion of training equivalent to all required training modules in Colorado's Natural Medicine Facilitators Education requirements (either through an education

- training program approved in the state of Colorado or through alternative training)
- ii. Accelerated training applicants must demonstrate experience helping with or facilitating the administration of Natural Medicine with at least 40 sessions
- iii. Accelerated training applicants must provide an Attestation of additional materials provided by an applicant to verify the experience and skill of the instructor (including, but not limited to, personal narratives, client references, community references, or professional references)
- iv. Accelerated training applicants must have active Basic Life Support training
- v. Accelerated training applicants must complete a 35-hour module on Ethics and Colorado Natural Medicine Rules and Regulations

Sections (ii, iv, v, vi, viii, x, xi, xii) are required in statute 12-70-105 Section 1(II)(B)

Sections have been added by the Natural Medicine Advisory Board Subcommittee on Qualifications, Licensing, and Training. By Dr. Alisa Hannum, Subcommittee Chair's Draft Educational and Experiential Requirements Document

Facilitator Supervised Practice Requirements

- 1) Programs shall require students to complete supervised practice training that provides an opportunity to experience, facilitate, and observe the facilitation of non-ordinary states of consciousness.
- 2) Supervised practice may include in-person training where students can experience, observe, and facilitate psilocybin services under the supervision of qualified training faculty. Supervised practice may also include placement at a practicum site where students can observe and facilitate psilocybin services under the supervision of a practicum site supervisor.
- 3) Any licensed Healing Center can function as a practicum site. If a training program uses a Healing Center as a practicum site to satisfy the requirements of this rule, the training program shall notify the Authority in a form and manner prescribed by the Authority.
 - a) A practicum site must obtain written client consent prior to allowing a client to be observed by practicum students and prior to sharing any client information with practicum students or a training program.
 - b) The practicum site supervisor is primarily responsible for developing students' practicum skills and evaluating students' practicum performance, focusing on services with clients.
- 4) Where supervised practice directly with psilocybin services is not available or accessible, supervised practice training may additionally include but is not limited to observation of taped facilitation sessions that were recorded with participants' consent, apprenticeship in a psychedelic peer support organization, role-playing, and experience with altered states of consciousness that are not drug-induced, for example, breath work, meditation or spiritual journeys.
- 5) Students shall complete a minimum of 40 hours of supervised practice training, including at least 30 hours of direct practice (*about 5 to 6 administration sessions*) in which students directly experience, co-facilitate, or observe clients or trainees receiving psilocybin services or directly participate in alternative supervised practice activity as described in section (4), and at least 10 hours of consultation relating to the student's direct practice.

- 6) (6) All supervised practice training must be conducted in person.

1) Facilitator Consultation Requirements:

- a) Facilitators must complete a minimum of 6 months of consultation (which must include a minimum of 50 hours) with a supervisor. Facilitators need to be actively engaged in the delivery of Natural Medicine Services during consultation.
- b) Supervisors must maintain documentation contemporaneously within the consultation period to reflect expectations of the period. Supervisees must maintain documentation of supervision hours. Supervisors must verify documentation of supervision hours.
- c) Consultation with a supervisor must include 10 hours of ethical training focused on ethical issues that arise in the facilitator's work as facilitators.
- d) Consultation can only be provided by facilitators licensed in the state of Colorado.
- e) Consultation may be provided virtually.
- f) Consultation may be provided in groups of up to 10 facilitators in training.
- g) Applicants may charge for services they provide to participants during this 6-month consultation period if applicants are licensed with a Training license (please see above).
- h) Consultation must require Case Review
- i) Supervisors must demonstrate via a structured evaluation that the following competencies (reinforcing competencies learned in the education program) be addressed during the consultation:
 - i) Non-directive approach: Facilitators used a largely non-directive approach, being guided by the participant's experience, offering support in service of an unfolding inner-directed process. If the participant was having a largely inward process, the facilitator did not interrupt this process to discuss traumatic material. A participant was allowed to have a largely inward process.
 - ii) Relational Boundaries and Use of Touch: Demonstrate knowledge of and initiate the use of healthy relational boundaries in psychedelic care contexts, including appropriate use of touch. Demonstrate healthy relational boundaries in psychedelic care contexts. Evaluate one's ability to maintain healthy relational boundaries in psychedelic care contexts. Demonstrate a knowledge of one's social identity as related to psychedelic care.
 - iii) Cultural Competence: Articulate how one's social identity informs one's approach to psychedelic care. Demonstrate how one's social identity interacts with the care receiver's social identity. Evaluate one's integration of how knowledge of social identity informs one's practice of psychedelic care. Articulate awareness upon reflection when a care encounter intersects or does not intersect with elements of one's social-cultural identity. Demonstrate awareness in the moment when a care encounter intersects or does not intersect with elements of one's social-cultural identity.
 - iv) Non-ordinary States of Consciousness: Describe one's beliefs about spirituality and/or religion or non-ordinary states of consciousness. Demonstrate how one's belief system may interact with the care participant's belief orientation when providing psychedelic care.
 - v) Self-Care: Demonstrate active self-care practices, encourage the supervisor to suggest the use of alternative practices, and frequently inquire about self-care activities and their effects. The Supervisor should be inquiring about compassion fatigue and vicarious trauma in supervisees. Discussion of physical, mental, and spiritual impacts of facilitation on the supervisees.

- vi) Ethics: The supervisee engages in case review focused on ethical issues and engages on ethical decision-making as part of this review.

Section has been added by the Natural Medicine Advisory Board Subcommittee on Qualifications, Licensing, and Training. By Dr. Alisa Hannum, Subcommittee Chair's Draft Educational and Experiential Requirements Document.

- 1) Facilitators will maintain active certification in Basic Life Support training.
- 2) Facilitators will be expected to complete 40 hours of continuing education related to natural medicine service delivery every two years, including at least 5 hours of ethics training.
- 3) Accelerated options for applicants with significant experience providing natural medicine services:
 - a) Accelerated training applicants must demonstrate completion of training equivalent to all required training modules in Colorado's Natural Medicine.
 - b) Accelerated training applicants must demonstrate experience facilitating natural medicine services with at least 40 participants.
 - c) Accelerated training applicants must have active Basic Life Support training.
 - d) Accelerated training applicants must complete a 35-hour module on Ethics and Colorado Natural Medicine Rules and Regulations.

Section has been added by the Natural Medicine Advisory Board Subcommittee on Qualifications, Licensing, and Training. By Dr. Alisa Hannum, Subcommittee Chair's Draft Educational and Experiential Requirements Document

Recommendation #5

5. Recommendation: The State (DORA and DOR) should promulgate rules to create a path for Facilitation to take place at a Participant's Home under certain conditions (including but not limited to needs related to Palliative Care, End of Life, Hospice, Disability, etc) related to the Participant and create a path for Facilitation to take place at an Authorized Location Other than Healing Centers. The board recommends that rules be considered at the State's earliest opportunity.

Voted Unanimously 1/18/2024

Recommendation #6

6. Recommendation: The State should promulgate rules to encourage consistent application of local zoning laws applicable to healthcare facilities or service uses to Healing Centers and/or Licensed Premises.

Voted Unanimously 1/18/2024

Products, Research, and Data

Draft Recommendations for Testing

1. All laboratories approved by the regulatory agency to perform testing on natural medicines for potency, mycotoxins, heavy metals, pesticides, solvents, microbials, and species should meet International Organization for Standardization (ISO) 17025 standards for lab testing or similar newly developed standards that are particularly relevant to the testing of natural medicines.

Reasoning: This is proposed to ensure that proper testing procedures are used for natural medicines in the regulated market.

2. All laboratories approved by the regulatory agency to perform testing on natural medicines for potency, mycotoxins, heavy metals, pesticides, solvents, microbials, and species shall participate in proficiency testing provided by ISO 17043 accredited proficiency testing providers or similar newly developed standards that are particularly relevant to the testing of natural medicines.

Reasoning: This is proposed to ensure that proper testing procedures are used for natural medicines in the regulated market.

3. The regulatory agency shall develop a proficiency test program for all labs that wish to be approved for testing of natural medicines in the regulated market, which may consist of initial round-robin testing and subsequent annual testing.

Reasoning: This is proposed to ensure that the regulator is able to update testing procedures if new standards are developed between rule-making sessions.

4. Potency testing should be conducted for all batches of psilocybin using best practices for the testing of psilocybin and psilocin.
 - a. Potency testing should include testing for psilocybin and psilocin.
 - b. A batch shall be considered all psilocybin-containing mushrooms that result from a single inoculation and in any single flush, where a new flush is defined as mushrooms that grow from the same inoculation after the first flush has been harvested from the same substrate.
 - c. For batches up to 1 kilogram in total weight after drying, cultivators must submit a sample of that batch that represents the heterogeneity of the batch, including caps and stems and different sizes of mushrooms and weighs 2.5 grams. Larger batches require additional samples in 2.5-gram increments, such that for every

additional kilogram in a batch, an additional 2.5-gram sample representing the variety of the batch must be submitted.

- d. **Any new flushes from a single inoculation should be considered a new batch. The same weight to sample requirements apply to each additional flush.**

Reasoning: We are proposing that potency testing include both psychoactive ingredients in psilocybin-containing mushrooms so that potency can be accurately reported to the participants and so that facilitators can administer known doses of natural medicine. The definition of a batch is proposed by inoculation to keep the cost of cultivating natural medicines and the testing of those medicines controlled. The batch definition in Oregon has been reported to be too restrictive, increasing the costs of cultivation and testing unnecessarily. This definition protects participants from mislabeled potency and will keep associated costs lower. We proposed multiple samples for large batches and a variety of samples that are potency tested to ensure accuracy in the potency testing. Finally, we define new flushes from the same inoculation as new batches, as there is not enough research currently to know if potency changes significantly from flush to flush.

5. **Species testing should be conducted randomly once per year for all licensed cultivators. Random samples should be generated, and tests should be administered by random site visits by regulatory authorities.**

Reasoning: We are recommending that *Psilocybe Cubensis* be the only species allowed to be cultivated; as such, random testing is needed to ensure that that is the only species being cultivated. However, this test needs to be done infrequently. It should, however, be done by the regulatory agency or a third-party company picked by the regulatory agency to ensure the randomness and accuracy of the sampling and the testing.

6. **Testing for heavy metals, pesticides, solvents, microbials, and mycotoxins should occur randomly once per year for all licensed cultivators. Random sampling should be generated, and regulatory authorities should administer tests through random site visits. Samples that fail tests for the presence of heavy metals, pesticides, solvents, microbials, and mycotoxins and the batches those samples came from should be destroyed. Additionally, licensed cultivators should work with the regulatory agency to develop a remediation plan for the failed test, and the regulatory agency should ensure that the cultivator meets the requirements of the remediation plan prior to resuming the testing of natural medicines.**

Reasoning: We propose this so that participants can have confidence in the safety and quality of the natural medicines they are ingesting in the regulated market.

7. **Retesting for potency should occur every nine months or at an interval based on research on the degradation of potency over time. When retesting indicates a significant deviation, more than 15% lower than the previous potency test, from the potency established during the previous potency test of the batch, the product should be relabeled with the new maximum potency, which constitutes the combination of psilocybin and psilocin present in the product at the time of testing. If the potency retest results in a higher potency value than the previous potency test, that batch of product should be destroyed.**

Reasoning: There is enough good data yet on how potency in psilocybin-containing mushrooms changes over time; retesting ensures that facilitators are administering accurate doses of natural medicine.

8. **Failure on any of the above-described tests may result in the requirement for additional testing from the regulatory Agency.**

Reasoning: This recommendation has been developed from thoughtful feedback by the DOR regarding best practices.

9. **The General Assembly should revise 44-50-301(4), C.R.S. so that natural medicine testing facility licensees may also hold a marijuana testing facility license under Article 10 of Title 44, C.R.S.**

Reasoning: This will allow testing facilities to hold multiple licenses to ease the burden on third-party testing facilities.

10. **The Division should permit, but not require, licensed cultivators to perform in-house testing of natural medicines. However, all testing required by the Division should be conducted by licensed third parties.**

Reasoning: This recommendation was developed to allow for product innovation and development for Licensed Cultivators while also still requiring third-party testing by the division.

Draft Recommendations for MGAP and Cultivation Best Practices

- 1) **The Division should only permit the cultivation of psilocybin-containing mushrooms of the species *Psilocybe cubensis*. No other species of psilocybin-containing mushrooms shall be permitted for cultivation. The Division should permit the cultivation of all strains of *Psilocybe cubensis*.**

Reasoning: We are proposing this as research indicates that *Psilocybe cubensis* is safe for human consumption and has few known risks when ingested orally. The board will annually review other species of Psilocybin fruiting fungi to be considered for the Natural Medicine regulated access program each year. Additionally, we are taking into consideration the costs associated with confirmation testing.

- 2) **Mushroom Good Agricultural Practices (MGAP) should be used as a best practice guide for all cultivators.**

Reasoning: This will help ensure that natural medicines cultivated in the regulated market are safe for ingestion.

- 3) **Licensed cultivators and producers who wish to produce forms of psilocybin other than whole dried mushroom fruiting bodies or powdered mushroom fruiting bodies where they use solvent-free extraction procedures should be required to follow Colorado State Laws for Food Safety.**

Reasoning: We are proposing this to ensure that participants consuming natural medicines in the regulated market are receiving food-safe products. - Note

- 4) **Outdoor cultivation should require a license type that reflects the inherent difficulties of outdoor cultivation, security of outdoor spaces, and a myriad of additional sources of contamination of natural medicines. Additional testing should be conducted on natural medicines that are cultivated outdoors.**

Reasoning: We seek to preserve historic, organic, indigenous, and sacred practices while acknowledging concerns about differences in cultivation when attempting outdoor cultivation and how those differences may alter the costs of cultivation and licensure.

- 5) **Cultivators should follow best practices for the storage of natural medicines. Current best practices for the storage of psilocybin-containing products are to store them at room temperature in darkness and away from moisture or with devices to absorb moisture to improve the stability of the active ingredients in the products.**

Reasoning: Standardization of storage techniques can assist in slowing the of degradation of natural medicines, preserving the potency and quality of the products.

- 6) **The Division should promulgate rules that define permissible and impermissible practices for the cultivation of natural medicines, which may include defining permissible substrates.**

Reasoning: We propose this recommendation so there can be standardization of cultivation practices in the regulated market.

- 7) **The Division should permit the use of additives, such as inactive ingredients from the FDA's inactive ingredient database, or additives to substrate that encourage cultivation without increasing harm.**

Reasoning: We propose this recommendation for innovation in the practice of cultivation in Natural Medicine.

- 8) **The Division should prohibit the use of pesticides and fungicides in the cultivation of natural medicine, in the event that they decide to permit the use of these, then this information should be included on the label of the Natural Medicine.**

Reasoning: We propose this recommendation to follow best practices of the cultivation of Natural Medicine and reduce the harms associated with these chemicals in the cultivation of Natural Medicine.

Draft Recommendations for Labeling

- 1) **Products should be labeled with the date that the natural medicine was harvested.**

Reasoning: We are proposing this to ensure that facilitators and participants are aware of how long the natural medicines have been shelved prior to administration.

- 2) **Products should have labels that detail potency in both mg of psilocybin and psilocin.**

Reasoning: This is proposed so that participants can understand how much of the psychoactive compound they are ingesting.

- 3) **Products should have labels that detail the total psychoactive compound present at the time of potency testing in mg of psilocin. Total potency in psilocin is calculated by summing the % psilocin with the % psilocybin multiplied by 0.719 (the multiplier places % psilocybin on the same scale as % psilocin).**

Reasoning: This is proposed so that cultivators, producers, facilitators, and participants may better understand the degree of psychoactivity of the natural medicine that is being administered.

- 4) **Products should be labeled with the date that potency testing occurred and should state that potency tested on that date is the maximum possible potency of the product with an indication that potency declines over time.**

Reasoning: This is proposed so that facilitators and participants know the maximum potency of the natural medicine being administered and how long ago that maximum was established.

- 5) **Labels should contain best-by dates that are commensurate with research on the degradation of potency over time.**

Reasoning: We are proposing this so that facilitators and participants understand the quality of the natural medicine that is being administered and the freshness of that product.

Draft Recommendations for Disposal of Substrate, Mycelium, and Mushrooms

- 1) **All waste should be rendered non-consumable and non-productive for possible further psilocybin production before discarding.**

Reasoning: This is proposed to allow maximum flexibility in the disposal of natural medicines and their substrates while also attempting to eliminate the possibility of diversion of waste material that might still have psychoactive effects.

Draft Recommendations for Products

- 1) **The Division should prohibit the use of additives that increase harm or the intoxicating effects of natural medicines.**
- 2) **Only natural medicine products that can be orally ingested shall be available in the regulated market at this time unless the natural medicine producer is able to attest with peer-reviewed scientific data that a product that is consumed using a method other than oral ingestion is safe for human consumption e.g. Topicals.**
Reasoning: This is proposed as there needs to be more research on other methods of administration to know whether those methods are safe for participants.
- 3) **Products available in the regulated market shall be restricted to fruiting body mushrooms and powdered fruiting body mushrooms.**
Reasoning: We are proposing this until there is more research available on appropriate products for distribution in the regulated market.
- 4) **Extraction of psilocybin from mushroom fruiting bodies or from powdered mushroom fruiting bodies using solvents other than water or fruit juice shall be prohibited in the regulated market.**
Reasoning: This is being proposed to protect the safety of participants.
- 5) **Licensed Healing Centers are permitted to assist a participant with the preparation of natural medicine for ingestion. Preparation is defined as using a finished nat med product that consists only of fruiting bodies or powdered fruiting bodies to make ingestible products that only contain foods or inactive ingredients as defined by the FDA's inactive ingredient database.**
Reasoning: This is being proposed to distinguish between production and preparation and to provide a path from common preparations of psilocybin-containing mushrooms, such as teas, chocolates, and candies, and to not have that process conflated with production or enhancement.
- 6) **Licensed Facilitators who are facilitating natural medicine in an authorized location other than a licensed healing center are permitted to assist a participant with the preparation of natural medicine for ingestion. Preparation is defined as using a finished nat med product that consists only of fruiting bodies or powdered fruiting bodies to make ingestible products that only contain foods or inactive ingredients as defined by the FDA's inactive ingredient database.**
Reasoning: This is being proposed to distinguish between production and preparation and to provide a path from common

preparations of psilocybin-containing mushrooms, such as teas, chocolates, and candies, and to not have that process conflated with production or enhancement. **Vote Outcome: All recommendations [Approved unanimously as amended 1/17/24]**

Emergency Response, Safety, and Ethics

ETHICAL CODE - NATURAL MEDICINE FACILITATOR

PREAMBLE, GENERAL PRINCIPLES, AND CODE OF CONDUCT

PREAMBLE

To protect the safety and welfare of people receiving natural medicine services in the State of Colorado ("participant"), this Ethical Code only governs the behavior of Licensed Facilitators ("facilitators") delivering natural medicine services at any level or in any environment in the State of Colorado. The Ethical Code is divided into this Preamble, the General Principles, which describe the ideal behavior of a facilitator in the practice of natural medicine and are aspirational, and the Code of Conduct, which sets forth enforceable rules for the conduct of a Facilitator at any level or in any environment in the State of Colorado.

The use of natural medicine is founded on the practices of healers, curandera(o)s, shamans, explorers, researchers, and others using indigenous and traditional healing practices that are centuries old. A Facilitator honors this rich history and recognizes the privilege of working with natural medicine.

The use of natural medicine invokes non-ordinary states of consciousness; therefore, the use of natural medicine carries unique ethical considerations. These considerations include the potential for greater participant suggestibility, the need for sensitivity regarding consent, and the likelihood of stronger and more complex transference and countertransference between a facilitator and a participant. Given the special considerations of the use of natural medicine, a facilitator takes seriously their obligation to participant safety. This work requires a facilitator to be intensely present, tending to the process consistently throughout preparation, administration, and integration sessions.

The development of a dynamic Ethical Code for Natural Medicine Facilitators' work-related conduct requires a personal commitment and lifelong effort to act ethically; to encourage ethical behavior by students, supervisees, employees, and colleagues; and to consult with others concerning ethical problems.

The ethical code impacts different communities disparately. The Board anticipates that it will need to adjust and update the code to better support those impacted communities. 1/19/24

GENERAL PRINCIPLES

Principle 1: Beneficence and Nonmaleficence.

Beneficence: Facilitators shall strive to benefit others and to safeguard the welfare of participants and other affected persons.

Nonmaleficence: Facilitators shall do no harm. Facilitators strive to be aware of the possible effect of their own physical and mental/behavioral health on their ability to help those with whom they work.

Principle 2: Fiduciary Duties.

Fiduciary duties are intended to protect the more vulnerable parties in relationships where one party has greater expertise and influence. Facilitators establish relationships of trust with those with whom they work and thus owe fiduciary duties including, but not limited to, the duties of loyalty, care, and confidentiality.

Duty of Loyalty: While acting in the role of fiduciary, facilitators have a duty to put their participants' interests above their own. When soliciting a participant's consent for natural medicine services, facilitators shall have a duty to disclose all information that is material to the participant's decision, including but not limited to, any personal or financial interests unrelated to the participant's welfare that may affect the facilitator's judgment. Should such information arise after consent is obtained, the facilitator has an ongoing duty to disclose it to the participant.

Duty of Care: Facilitators have a duty to use the degree of skill, knowledge, and care that other reasonably careful licensed facilitators would use in the same or similar circumstances. Facilitators shall understand the laws and regulations governing the provision of natural medicine services, comply with the facilitator's professional code of conduct, and complete the continuing education necessary to maintain the requisite level of skill, knowledge, and care.

Duty of Confidentiality: Facilitators have a duty to maintain the confidentiality of participant information. When disclosure of participant information may be required or permitted, facilitators should attempt to maintain the confidentiality of participant information to the greatest extent possible, and if compliance can be achieved without disclosing participant information, the facilitator should avoid disclosure.

Duty of Professionalism: Facilitators adhere to the values of accountability, respect, and integrity for their participants. Facilitators consult with, refer to, or cooperate with other professionals and institutions to serve the best interests of their participants.

Principle 3: Misconduct and Responsibility for the Acts of Others

Facilitators are concerned about the ethical compliance of their own and their colleagues' professional conduct. It is professional misconduct for a facilitator to:

- a. Violate this code of conduct, knowingly induce another to do so, or to do so through the acts of another.
- b. Commit a criminal act that reflects adversely on the facilitator's honesty, trustworthiness, or fitness to provide psilocybin services.
- c. Engage in conduct involving dishonesty, fraud, deceit, or misrepresentation. A facilitator shall be responsible for another facilitator's violation of this code of conduct if:
 - i. The facilitator orders or, with the knowledge of the specific conduct, observes, condones, or approves the conduct involved; or
 - ii. The facilitator has direct supervisory authority over the other facilitator and knows of the conduct at the time when its consequences can be avoided or mitigated but fails to take reasonable remedial action.

If a facilitator faces ethical decisions or questions about their practice that are not sufficiently addressed in this Ethical Code, they shall seek consultation from colleagues or a supervisor.

Principle 4: Competence

A facilitator shall demonstrate successful completion of an accredited training program that meets training standards set by Colorado Law.

A facilitator shall only provide services within the bounds of their competence (scope of practice), based on education, training, and licensure.

A facilitator shall undertake relevant education, training, supervision, and consultation when providing techniques or services that are new to them.

A facilitator shall participate in ongoing training or continuing education to maintain competence.

Principle 5: Autonomy, Dignity, Equity, Justice, and Respect

A facilitator respects the autonomy of persons to make decisions in their life and make meaning of their experiences. A facilitator is aware that special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous decision-making.

A facilitator understands that people have their own belief systems and that they do not need to share mystical beliefs with the facilitator regarding the use of natural medicines in order to benefit from them.

A facilitator recognizes that equity and justice entitle everyone to have access to and benefit from the use of natural medicines and the work of facilitators to enhance potential benefits from the use of natural medicines. A facilitator is attentive to the impact of power dynamics in their relationships with participants, particularly where there are differences in privilege, gender, race, age, culture, education, and/or socioeconomic status.

A facilitator exercises reasonable judgment and takes precautions to ensure that their potential biases, the boundaries of their competence, and the limitations of their expertise do not lead to or condone unjust practices.

A facilitator respects the dignity and worth of all people, and the rights of individuals to privacy, confidentiality, and self-determination.

A facilitator is aware of and respects cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status, and considers these factors when working with members of such groups. A facilitator makes every reasonable effort to include people living with physical, mental, and cognitive disabilities. A facilitator does not knowingly participate in or condone the activities of others who act on biases or prejudices.

Principle 6: Special Considerations for Non-Ordinary States of Consciousness

Participants receiving natural medicine may be especially open to suggestion, manipulation, or exploitation, and because the effects of natural medicines can persist for months, this state of vulnerability may be prolonged, which requires increased attention to safety and consent.

Natural medicine facilitation has the potential for stronger, more subtle, more complicated transference (strong feelings a participant projects onto a provider; for example, as a parental figure) and countertransference (strong feelings a provider feels toward a participant). This potential dynamic requires a facilitator to be self-aware, to engage in self-reflection and self-examination, and, when possible, to participate in supervision/peer support for facilitators.

As participants under the influence of natural medicines may be particularly prone to suggestion, facilitators do not engage in coercive practices or behaviors.

Principle 7: Use of Physical Touch

Participants may want or benefit from a facilitator's reassuring touch during the natural medicine administration session. A facilitator shall complete training regarding the appropriate use of touch and demonstrate an acceptable level of understanding regarding the context and boundaries for appropriate touch.

CODE OF CONDUCT

A. Participant Safety

1. A facilitator shall ensure that potential participants are medically and psychologically eligible before enrolling them in natural medicine treatment.
2. A facilitator shall conduct thorough and comprehensive screening and assessment with every potential participant prior to providing any natural medicine services.
3. A facilitator shall provide participants with clear information about availability, support, and emergency contacts as part of the informed consent process.
4. A facilitator shall take an active role in preventing physical and psychological harm to a participant by working with healing center staff to monitor vital signs and hydration, prevent physical injury or falls, and assess for suicidality and self-harm.
5. A facilitator shall instruct a participant to not leave the administration space during administration sessions and to follow instructions given to them by facilitators or other healing center personnel.
6. A facilitator shall restrict the movements of a participant when such movements would endanger the physical or mental safety of the participant.
7. A facilitator may administer natural medicines to groups of participants. However, when doing so, conducts individual preparation sessions with each participant and limits the administration of natural medicines to groups of no more than 4 participants per facilitator present during the administration session. Facilitators should limit the overall group size to no more than 64 participants.
8. When facilitating in authorized locations other than licensed healing centers, the facilitator takes all reasonable steps to ensure they are adhering to this Ethical Code and the laws regarding the administration of natural medicines in the state of Colorado to protect participant safety and to maintain custody of all-natural medicines until administered or unused during the administration session. A facilitator returns all unused natural medicines to a healing center upon completion of the administration session.

9. Prior to a natural medicine administration session occurring in a healing center, a facilitator will, as part of the informed consent process, inform the participant of the risks associated with taking natural medicines. This shall include a thorough description of how natural medicines alter the human state of consciousness and how that may disrupt a participant's ability to make decisions, give or revoke consent, and/or stop unwanted interactions with a facilitator or authorized representative of the healing center. A facilitator will then give the participant the right to request a second person, whether another facilitator, an authorized representative of the healing center, or a person trusted by the participant from their own life, be present during an administration session or the right to request a video recording of an administration session. A facilitator shall allow a second person to be present or a video recording of an administration session upon request from a participant. If a second person is to be present during the administration session, both the facilitator and the participant shall meet the second person during a preparation session prior to administration sessions. If a facilitator is unable for any reason to meet this request, they shall provide the participant with referrals to other healing centers where such services may be available.
10. If, after the assessment and informed consent processes, a facilitator determines that either a participant or a facilitator would benefit from having a second person, whether another facilitator, an authorized representative of the healing center, or a person trusted by the participant from their own life, be present during an administration session or a video recording of an administration session, they shall inform a participant of their decision. If a second person is to be present during the administration session, both the facilitator and the participant shall meet the second person during a preparation session prior to administration sessions. If the participant would prefer not to have a second person present or have a video recording of an administration session, the facilitator shall provide the participant with referrals to other healing services where such services may be available.
11. Prior to a natural medicine administration session occurring in an authorized location other than a healing center, a facilitator will, as part of the informed consent process, inform the participant of the risks associated with taking natural medicines. This shall include a thorough description of how natural medicines alter the human state of consciousness and how that may disrupt a participant's ability to make decisions, give or revoke consent, and/or stop unwanted interactions with a facilitator or authorized representative of the healing center. During an administration session in an authorized location other than a healing center, a facilitator shall have a second person, whether another facilitator or an authorized representative of the healing center, present at all times or shall video record an administration session for the protection of the participant and the facilitator. Participants shall be made aware of the need for a second person or the need to video record during an administration session in an authorized location other than healing centers, shall meet the second person to the facilitator, and shall consent to either the presence of the second person or the video recording as part of the informed consent process during a preparation session prior to administration of natural medicine. If the participant does not want a second person present or a video recording, they will be informed that they will need to receive services in a healing center.
12. Video recordings of administration sessions are considered to be part of the participant records and should be maintained following rules in this Ethical Code governing the maintenance of participant records. This applies to administration sessions conducted at healing centers and in authorized locations other than healing centers.

B. Facilitator Transparency and Competence

1. A facilitator includes a participant in all decisions regarding their treatment.
2. A facilitator obtains informed consent from the participant before initiating a new treatment with natural medicines.
3. A facilitator honors each participant's option to withhold or withdraw consent at any time.
4. A facilitator informs a participant of all treatment procedures, including an accurate description of natural medicines used, potential risks and benefits, and alternative treatment options prior to starting treatment with natural medicines.
5. A facilitator accurately represents their background and training using appropriate terms according to applicable laws and professional codes. They disclose all licenses they hold and all professional domains they operate in.
6. A facilitator informs a participant of treatment fees and the process for collecting payment before delivering a billable service. This includes any third-party services that will be used to collect payment from a participant should they fail to pay the healing center and that, by using a third party to collect delinquent fees, a facilitator will disclose the identity of the participant and indicate that they are a participant of the facilitator.
7. A facilitator informs a participant and all persons present of any audio or video recording occurring during treatment with natural medicine, including the preparation, administration, and integration sessions; they describe the purpose of recording and how recordings will be stored and used; they obtain informed consent from all persons present prior to recording sessions; they obtain explicit permission, outlining the specific use, authorized recipient(s), and terms of release, from the participant and all identifiable persons before releasing audio or video recordings.
8. A facilitator obtains informed consent for any physical touch that might be included in treatment with natural medicine during the administration session. A facilitator informs a participant that there may be times they need to make physical contact to ensure participant safety, including but not limited to when taking the participant's vital signs, walking a participant to the restroom, or preventing a fall while the participant is under the influence of natural medicine. Aside from preventing immediate danger, all physical touch is for therapeutic purposes, occurs only during administration sessions, is described and consented to in the physical touch contract, which is executed during the preparation session, and is optional; the participant can refuse or revoke their consent for physical touch at any time.
9. A facilitator informs a participant in advance and, when possible, receives permission from the participant about the possible or scheduled presence of assistants, providers, observers, or any other staff who may be part of treatment with natural medicine or have access to participant-identifying information.
10. A facilitator refrains from initiating an activity when they know or should know that there is a substantial likelihood that their

personal problems will prevent them from performing their work-related activities in a competent manner.

11. When a facilitator becomes aware of personal problems that may interfere with their ability to perform their work adequately, they take appropriate measures, including but not limited to obtaining professional consultation or assistance, and determine whether they should limit, suspend, or terminate their work.
12. A facilitator discusses the process of termination with a participant as part of the informed consent process at intake.
13. A facilitator identifies when they are unable to provide appropriate care and informs a participant that they must discontinue treatment and refer them to other providers as a result.
14. A facilitator has a plan in case they are unable to perform services, enabling the participant to receive treatment from another facilitator or provider.
15. A facilitator terminates treatment when a participant is no longer benefitting from the treatment when it becomes reasonably clear that a participant no longer needs the treatment, is not likely to benefit from the treatment, or is being harmed by continued treatment.
16. A facilitator may terminate treatment when threatened or otherwise endangered by a participant or another person with whom the participant has a relationship.
17. A facilitator provides the participant with appropriate referrals when terminating treatment.
18. When providing referrals, including within or across state lines, referrals should be offered without the expectation of reciprocity or brokering, and should not involve the use of deceptive practices.

C. Use of Physical Touch

1. A facilitator may provide supportive touch during administration sessions when requested by the participant and with the participant's written consent, which is obtained during a preparation session using the physical touch contract.
2. A facilitator can use supportive touch during the administration session, for example, hugs or placing hands on a participant's hands, feet, or shoulders. A facilitator shall only use forms of touch for which they have received education and training and are within the bounds of their competence to use. A facilitator shall not permit another person to use any other form of touch during an administration session unless a participant has consented to that physical touch in the physical touch contract.
3. Participants participating in a group administration session may provide prior written consent to authorize supportive touch from other participants participating in the group administration session. Supportive touch is limited to hugs or placing hands

on a participant's hands, feet or shoulders. Supportive touch between participants will be supervised and directed by a facilitator. A facilitator shall not permit another person to use any other form of touch during an administration session.

4. A facilitator obtains consent for the agreed-on touch in the moment during the administration session in addition to consent obtained during the informed consent process as recorded on the physical touch contract. This consent can come from the participant verbally or by the use of hand gestures determined during the informed consent process and as recorded on the physical touch contract. Aside from protecting a person's body from imminent harm, including but not limited to catching them from falling, the use of touch is always optional, according to the consent of the participant, and limited to the administration session.
5. A facilitator discusses with the participant in advance of the administration session simple and specific words and gestures the participant is willing to use to communicate about touch during administration sessions. For example, a participant may use the word "stop" or a hand gesture indicating stop, and the facilitator shall stop touch.
6. A facilitator shall practice discernment with physical touch, using clinical judgment and assessing their own motivation for physical touch when considering if touching a participant is appropriate and in adherence to the touch contract established between the facilitator and the participant through the informed consent process.
7. The use of physical touch that is outside the bounds of a facilitator's competence or that is used solely for the purpose of a facilitator's or participant's pleasure is never permitted.

D. Facilitator Documentation and Disclosure Requirements

1. A facilitator shall complete and retain the following records for every participant to whom they provide services. A facilitator shall use document forms as approved by the State of Colorado for all documentation requirements. A copy of these records must be stored at the healing center regardless of where the administration of natural medicine occurs:
 - (a) Completed demographic information form.
 - (b) ~~Completed risk factor screening form.~~ **Struck from ethical code on 1/10/23 and Approved via Motion(S.Lucero)**
 - (c) Completed informed consent document.
 - (d) Completed preferred means of communication document.
 - (e) Completed transportation plan and any deviation from the participant's transportation plan.

- (f) Completed agreement between participant and facilitator or healing center regarding fees and any other financial arrangements.
 - (g) Completed physical touch contract.
 - (h) Completed participant safety and support plans.
 - (i) The date, start time, and end time for every preparation, administration, and integration session.
 - (j) The natural medicine products, including a unique identification number, consumed by each participant, including the amount of product consumed and whether it was consumed in a single dose or multiple doses.
 - (k) Any adverse reactions that required medical attention or emergency services.
 - (l) Any other documentation required by regulatory agencies in Colorado related to or in service of the cultivation, production, distribution, and/or use of natural medicines as regulated by Colorado law.
- 2. Records required by this rule are governed by the Health Information Portability and Accessibility Act (HIPAA) and must be provided to the participant upon their request.
 - 3. Records required by this rule shall be stored in a secure fashion so that only the facilitator and those with participant approval can access them.
 - 4. Records required by this rule must identify the participant receiving services.
 - 5. Facilitators and healing centers shall not share or disclose any records required by this rule unless the participant has provided written consent to share or disclose this information or as required by Colorado law.
 - 6. When facilitators or healing centers are required to release information about participants, they shall follow all pertinent laws and regulations and provide the minimum amount of information necessary. They shall also inform participants about the release of protected information when possible and permissible.
 - 7. A facilitator shall not disclose confidential participant information when consulting with colleagues or with other participants.
 - 8. Limits of confidentiality shall be discussed with participants, including under what conditions confidential information is legally required to be released.

9. Participant records must be stored and maintained for a minimum of 7 years.
10. Records should only be destroyed in a manner that maintains participant confidentiality, such as a commercial shredding service.
11. A facilitator shall consult with legal counsel as needed to maintain participant confidentiality.
12. A facilitator may not withhold records under their control that are requested and needed for a participant's treatment solely because payment has not been received.

E. Facilitator Conduct

1. A facilitator shall utilize their training to distinguish between typical side effects of consuming natural medicines and medical emergencies. In the event of a medical emergency, a facilitator must contact emergency responders or other appropriate medical professionals immediately. ***Any facilitator who holds an additional license (s) should consider the NMAB ethics code a base requirement and shall be bound by the strictest ethical standards of the licenses they hold while conducting natural medicine-related services.***
2. A facilitator does not engage in unfair discrimination based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law.
3. A facilitator does not knowingly engage in behavior that is harassing or demeaning to persons with whom they interact in their work based on factors including but not limited to those persons' age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, socioeconomic status, or any basis proscribed by law
4. **(1/19/24) Contextual / Intent statement for Subsection E points 4-13:**

"The NMAB seeks to improve the ethical guidelines in Subsection E, points 4 - 13, related to relationality, by learning from and integrating indigenous practices. Expect changes over time.

A facilitator shall not provide services to people over whom they have supervisory, evaluative, or other authority, including but not limited to students, supervisees, research participants, and employees.

5. A facilitator does not exploit persons over whom they have supervisory, evaluative, or other authority, including but not limited to participants, students, supervisees, research participants, and employees.

6. A facilitator does not engage in sexual relationships with students or supervisees who are in their department, agency, or training center or over whom the facilitator has or is likely to have evaluative authority.
7. A facilitator shall not offer or render natural medicine services as a means of establishing a personal relationship with participants.
8. A facilitator refrains from consuming or being under the influence of natural medicine while interacting with participants while providing preparation, administration, or integration sessions.
9. A facilitator shall not provide any services while under the influence of any intoxicants.
10. A facilitator shall not engage in any romantic relationship, sexual contact, or sexual intimacy with a participant during the provision of any natural medicine services or therapy of any kind.
11. A facilitator shall not engage in any romantic relationships, sexual contact, or sexual intimacy with participants, or participants' partners, or immediate family members for a period of one year following the last date that the facilitator provided any kind of services to the participant.
12. A facilitator shall not engage in the facilitation of natural medicine with someone whom they already have a romantic, sexual, or personal relationship or with someone who is related to someone whom they already have a romantic, sexual, or personal relationship with.
13. A facilitator may not engage in any financial transactions with a participant or the participant's partners or immediate family members that violate a facilitator's duty to place participant's interests first.
14. A facilitator may be a mandatory reporter according to the laws in the jurisdiction they are operating in and/or depending on what other licenses they may hold. In the case that a facilitator is a mandated reporter, a facilitator must disclose their status as a mandated reporter and obligations to report to a participant at the beginning of the relationship with the participant as part of the informed consent process.
15. A facilitator shall provide natural medicine services, which consist of preparation, administration, and integration sessions. These services can be provided in combination with other services, including but not limited to psychotherapy, as long as the facilitator is licensed to provide such services and is operating within their bounds of competence or in collaboration with a provider working within their bounds of their competence.

16. Barter is the acceptance of goods, services, or other non-monetary remuneration from participants in return for facilitation services. A facilitator may barter only if (1) it is not clinically contraindicated, and (2) the resulting arrangement is not exploitative.
17. A facilitator shall practice within the bounds of competence, training, and experience specific to the populations they are working with and the modalities they offer.
18. In those emerging areas in which generally recognized standards for training do not yet exist, a facilitator takes reasonable steps to ensure the competence of their work and to protect participants, students, supervisees, research participants, organizational participants, and others from harm.
19. A facilitator shall represent their work and qualifications honestly and accurately.
20. A facilitator shall assess at intake whether a potential participant's needs can be addressed within their bounds of competence, and if not, the facilitator shall make informed referrals to other providers and services.
21. When working with participants who reside outside the state of Colorado, a facilitator only provides services while the participant is in Colorado and explains to participants the risks of traveling to a different state to receive natural medicine services.
22. When indicated and professionally appropriate, a facilitator cooperates with other professionals in order to serve their participants effectively and appropriately.
23. A facilitator shall receive ongoing professional development, seeking supervision and continuing education to maintain or further competence as dictated by the law of the state of Colorado.
24. A facilitator maintains licensure(s) and certification(s) in good standing for all services they offer, including re-certification as required by Colorado Law.
25. The requirements of this Ethical Code apply to all facilitators, regardless of the sphere the facilitator is licensed to facilitate.

F. Advertising and Other Public Statements

1. A facilitator shall not make false, deceptive, or misleading statements and shall take reasonable efforts to prevent others from making false, deceptive, or misleading statements on their behalf.
2. A facilitator providing public advice (in person, in print, or on the internet, etc.) shall take precautions to ensure statements are based on training and experience and are consistent with this code of ethics.

3. While testimonials may be collected and displayed, a facilitator shall not solicit testimonials from participants.

G. Duty to Report Misconduct

1. A facilitator who witnesses or becomes aware of conduct involving a participant that violates this Ethical Code rules must report that conduct to the proper authority within 72 hours.
2. A facilitator who witnesses or becomes aware of conduct that harms or potentially endangers a participant must report that conduct to the proper authority within 72 hours in a form and manner prescribed by that authority.
3. A facilitator who fails to report as required by sections (1) and (2) of this rule is in violation of this Ethics Code, separate from any violations that may have occurred as a result of the underlying conduct, and must also be reported to the proper authority.
4. A facilitator cooperates in ethics investigations, proceedings, and resulting rulings. In doing so, they address any confidentiality issues, protecting a participant's confidentiality when possible. Failure to cooperate is itself an ethical violation unless cooperating would cause legal jeopardy, in which case, the facilitator will cooperate in the ethics investigation once the legal jeopardy resolves.
5. A facilitator does not file or encourage the filing of ethical complaints that are made with reckless disregard for or willful ignorance of facts that would disprove the allegation. Such filings themselves are ethical violations.

H. Adherence to Multiple Codes of Ethics and Addressing Discrepancies

1. If a facilitator's ethical responsibilities conflict with law, regulations, or other governing legal authority, they clarify the nature of the conflict, make known their commitment to this and other Ethical Codes governing their behavior, and take reasonable steps to resolve the conflict consistent with this Ethics Code. Under no circumstances may this standard be used to justify or defend violating human rights.
2. If the demands of an organization with which a facilitator is affiliated or for whom they are working are in conflict with this Ethics Code, the facilitator clarifies the nature of the conflict, makes known their commitment to this and other Ethical Codes governing their behavior, and take reasonable steps to resolve the conflict consistent with the this Ethics Code. Under no circumstances may this standard be used to justify or defend violating human rights.
3. If a facilitator possesses multiple licenses or certifications that have their own Ethical Codes, the facilitator clarifies any conflicts among the different Ethical Codes, makes known their commitment to all Ethical Codes governing their behavior, and takes reasonable steps to resolve the conflict consistent with each of the Ethical Codes. Under no circumstances may this standard be used to justify or defend violating human rights.

ACKNOWLEDGEMENTS: The Natural Medicine Facilitator Ethical Code was inspired by the Ethical Codes of the American Counseling Association, the American Psychological Association, the Oregon Administrative Rules, and the Multidisciplinary Association for Psychedelic Studies. **Vote outcome- Approved Unanimously 1/10/23**

Facilities & Safety Requirements <i>Draft Recommendations from (6/14)(7/13)(8/9)(9/13)(10/11)</i> <i>Original Materials and References were consolidated prior to 6/14 by Board Member, Dr. Joshua Goodwin</i>		
<i>*This table is a consolidation of draft recommendations from the Emergency, Response, Safety, and Ethics Subcommittee over multiple meetings. None of the recommendations in this table are final and are subject to the rule-making authority; this section should not be viewed or perceived as final rules.</i> <i>*Licensed Premises - meaning an Authorized Location other than a healing center.</i>		
#	Subcommittee Position	Recommendation
#1	Approved - 5/31 Revised - 6/14 Revised - 8/9	<p>1. A “licensee or licensed premises” may not permit:</p> <ul style="list-style-type: none"> a. A person under 21 years of age to work or be on a licensed premises except as described in this rule. - Adopted b. On-site consumption of a psilocybin product except for participants consuming psilocybin products at a service center in connection with an administration session. - Review and Follow CRS / Adopted c. On-site consumption of any <u>intoxicants</u> by any individual, except for participants in an administration session. - Adopted 5/31 - Revised 8/9 <p>2. A “licensee or licensed premises” May be located within another facility offering medication-assisted therapy. - Added - 8/9</p>
#2	Approved - 6/14	<p>Intoxicants: <i>“Intoxicants means any substance that has intoxicating effects and includes alcohol, Cannabis, prescription drugs, nonprescription drugs, and any other controlled substances. “Intoxicants” does not include caffeine and nicotine.”</i></p> <p>Notes - <i>Added Cannabis to the list of intoxicants from the OHA Definition and Adopted Definition.</i></p> <p>Reference: Intoxicants Definition from OHA Section: 333-333-6000 - Prohibited Conduct - (6 - D) 6(d) <i>“As used in this section, “intoxicants” means any substance that has intoxicating effects and includes alcohol, prescription drugs, non-prescription drugs, and any other controlled substances. “Intoxicants” does not include caffeine and nicotine.”</i></p>

#3	Approved - 6/14	A “licensee or licensed premises” may receive psilocybin products only from other licensed premises as allowed by these rules
#4	Approved - 6/14	A “licensee or licensed premises” who sells or handles food must comply with Colorado Law on food handling. <ul style="list-style-type: none"> Food on-premises needs to be regulated by the State of Colorado to adhere to food handling, safety, and storage compliance
#5	Approved - 6/14 Revised - 11/8	<p style="text-align: center;">1st Edit</p> <p>A “licensee or licensed premises” may not allow animals to be present on the licensed premises except where required by law. To the extent required by law, service animals must be accommodated</p> <p style="text-align: center;">2nd Edit</p> <p>A “licensee or licensed premises” may not allow animals to be present on the licensed premises except To the extent required by law, service animals must be accommodated</p> <p>11/8 - Under Consideration Emotional Support Animals, at the discretion of a licensee of licensed premises - if they are permitted it is up - if they are</p> <p>11/8 - Support animals not permitted in Group Facilitation</p>
#6	Approved - 6/14	If the “healing center or licensed premises” contains outdoor areas, the boundaries of the licensed outdoor areas must be clearly marked with visible signage or barriers. <ul style="list-style-type: none"> Add a reference to outdoor space
#7	Approved - 6/14	1. Indoor administration areas must be adequately lit to allow safe exit if necessary.
#8	Approved - 6/14	2. Participant administration areas must be free of conditions that could pose an unreasonable risk to participants experiencing the effects of consuming psilocybin products. <ul style="list-style-type: none"> Must take all reasonable steps to provide an environment free of unreasonable risks and precautions to ensure safety
#9	Approved - 6/14	3. During an administration session: <ul style="list-style-type: none"> only participants and facilitators may access a participant administration area unless each participant receiving services in that area has given prior written consent for other individuals (Participant Support Person or Authorized Personnel) to be present and that has been approved by a licensed facilitator or licensee during their administration session and approved by the facilitator.

		<ul style="list-style-type: none"> b. Licensees must take reasonable steps to prevent access to participant administration areas by unauthorized individuals while administration sessions are taking place. c. The requirements of this section do not apply to service center licensee representatives who are present to deliver psilocybin products to participants to be consumed during an administration session.
#10	Approved - 6/14	<p>4. A Participant may leave an administration area briefly during an administration session, following the stipulations outlined in the informed consent document:</p> <ul style="list-style-type: none"> a. A participant who leaves an administration area must be accompanied by a facilitator or authorized representatives. b. licensee/Licensed Premises and facilitators must make reasonable efforts to ensure that participants do not travel through areas that could present safety hazards. c. Licensee/Licensed Premises must make reasonable efforts to ensure that participants who leave administration areas do not interact with vendors, contractors, other participants, or any persons who may be present at the service center.
#11	Approved - 6/14	<p>5. <i>“licensee or licensed premises”</i> must ensure that Participants and Licensed Facilitators are able to exit the Participant administration areas as needed. <i>“Licensee or licensed premises”</i> may not lock participant administration areas from the outside nor take any other actions that prevent individuals within the participant administration areas from exiting.</p>
#12	Approved - 6/14	<p>6. Psilocybin products may only be consumed in a participant administration area.</p>
#13	Approved - 6/14	<p>1. Every <i>“licensee or licensed premises”</i> shall create and maintain a service center emergency plan which:</p> <ul style="list-style-type: none"> a. Documents procedures for evacuating and relocating participants to a safe location and confidential location when the participant administration areas become unsafe due to unforeseen circumstances such, including but not limited to as fire or a power outage. Licensees should take all reasonable steps to maintain participant confidentiality should evacuation and relocation become necessary.

		b. Documents general procedures for emergency response when a participant experiences a medical or other emergency while receiving psilocybin services.
#14	Approved- 6/14	2. The emergency plan described in section (1) of this rule must be provided to every employee of a center offering psilocybin services at the service center prior to the facilitator providing psilocybin services at that location.
#15	Approved - 6/14	“Healing centers and licensed premises” must make at least one accessible single-occupancy restroom located within the licensed premises available for participants’ use during an administration session. The restroom required is not required to be located within an administration area.
#16	Approved - 6/14	“Participants” may use alternate restrooms when restrooms within the licensed premises are occupied, subject to the following conditions: For safety reasons, the facilitator or an authorized personnel must escort a participant to and from the alternate restroom location. A facilitator or authorized personnel must remain at the restroom door to ensure that no other people are present in the alternate restroom during the time the participant is using the restroom.
#17	Approved - 7/13/23	Psilocybin products offered for an administrative session by a “Healing Center Licensee or Licensed Premises” must be stored in such a manner that the items are only accessible to licensee representatives until such time as they are administered to the participant to the participant is completed. Participants who wish to examine psilocybin products prior to an “administration session” may do so only under the direct supervision of a “Licensed Facilitator or authorized personnel” representative
#18	Approved - 7/13/23	1. A “licensee or licensed premises” (healing center, cultivation facility, or laboratory licensee) is responsible for the security of all psilocybin products on the licensee or licensed premises or in transit from the licensed premises, including providing adequate safeguards against theft or diversion of psilocybin products.
#19	Approved - 7/13/23	2. During hours when the “licensee or licensed premises” is not operating, the “licensee or licensed premises” must ensure that all points of ingress and egress to and from indoor areas of the “licensed premises” are securely locked.
#20	Approved - 7/13/23	3. Licensees must ensure that all limited access areas of licensed premises are accessible only to licensee representatives and other personnel authorized to be present under these rules.
#21	Approved - 7/13/23	4. The requirements of these rules apply to all “licensees or licensed premises” regardless of whether the “licensed premises” is located within a building that contains separate unlicensed areas or

		located at an address that contains separate unlicensed structures.
#22	Approved - 7/13/23	1. A <i>“licensee or licensed premises”</i> healing center, manufacturer, or laboratory must have a fully operational security alarm system on the licensed premises, activated at all times when the licensed premises are closed for business.
#23	Approved	2. The security alarm system for the <i>“licensee or licensed premises”</i> must: <ul style="list-style-type: none"> • (a) Be able to detect unauthorized entry into interior areas of the licensed premises and unauthorized activity within interior areas of the licensed premises. • (b) Notify the licensee, licensee representative, or authorized personnel in the event of an unauthorized entry. • (c) Have “panic buttons” located inside the licensed premises linked with the alarm system that immediately notifies a security company or law enforcement.
#24	Approved - 7/13/23	3. Upon request, <i>“licensees or licensed premises”</i> shall make all information related to security alarm systems, monitoring, and alarm activity available to the Authority.
#25	Approved - 7/13/23	1. <i>“licensees or licensed premises”</i> must have a fully operational video surveillance recording system.
#26	Approved - 7/13/23	2. Video surveillance equipment must, at a minimum: <ul style="list-style-type: none"> A. (a) Consist of the following: <ul style="list-style-type: none"> a. Digital or network video recorders. b. Cameras capable of meeting the requirements. c. Video monitors. d. Digital archiving devices. e. A minimum of one monitor on-premises capable of viewing video. f. Interface devices, if required, to adequately operate systems or machinery, such as a mouse and keyboard. <ul style="list-style-type: none"> i. Have the capability of producing and printing a still photograph from any camera image. ii. Have sufficient battery backup to support a minimum of one hour of recording time in the event of a power outage.

#27	Approved - 7/13/23	3. Except for mounted cameras and monitors, all video surveillance equipment and recordings required by this rule must be stored in a locked, secure area that is accessible only to authorized personnel, Authority employees and contractors, and other state or local government officials that have jurisdiction over some aspect of the licensed premises or licensee.
#28	Approved - 7/13/23	1. A “licensee or licensed premises” must have camera coverage, if applicable, for <ul style="list-style-type: none"> a. All points of ingress and egress to and from indoor areas of the licensed premises, unless those points are located within a participant administration area. b. All areas where psilocybin products are stored or produced. c. All areas where psilocybin waste is required to be stored, destroyed, or rendered unusable.
#29	Approved - 7/13/23	2. A “licensee or licensed premises” must ensure that cameras are placed so that they capture clear and certain images of any individual and activity occurring: <ul style="list-style-type: none"> a. All points of ingress and egress to and from indoor areas of the licensed premises. b. In all locations on the licensed premises where psilocybin products are produced or stored.
#30	Approved - 7/13/23	A “licensee or licensed premises” may not install video surveillance equipment in participant administration areas. “Healing Centers or Licensed Premises” may make video and audio recordings of administration sessions using portable equipment with the prior written consent of every participant and facilitator who will be recorded.
#31	Approved - 7/13/23	A “licensee or licensed premises” must make recordings made under this rule available to view for recorded participants and facilitators upon request. Healing centers or licensed premises must create and maintain records that documents when and to whom recordings are made available. Healing centers or licensed premises are prohibited from charging a fee to view recordings.
#32	Approved - 7/13/23	“Licensee or licensed premises” must securely store recordings and may not publish, share or otherwise distribute without obtaining the prior written consent of every person recorded, adhering to documentation requirements in reviewed and signed in a preparation session.

#33	Approved - 7/13/23	<p>1. Facilitators or Authorized Personnel of a healing center or licensed premises may only access recordings made under this rule under the following circumstances:</p> <ul style="list-style-type: none"> a. To provide access to participants and licensed facilitators who have been recorded. With prior written consent. b. To the Authority or law enforcement when required.
#34	Approved- 7/13/23	A <i>“licensee or licensed premises”</i> must retain recordings made under this rule for a period of three to five years.
#35	Approved - 7/13/23	Participants and Licensed facilitators may withdraw their written consent described of this rule at any time prior to beginning an administration session, but not after.
#36	Approved - 7/13/23	Recordings under this section are not subject to requirements for video surveillance requirements for Licensed Healing Centers or Licensed Premises, except that any video recordings of administration sessions in the licensee’s possession must be provided to the Authority upon request.
#37	Approved - 7/13/23	<p>1. A Healing Center/Licensed Premises, cultivator, manufacturer, or laboratory licensee must have cameras that continuously record, 24 hours a day:</p> <ul style="list-style-type: none"> a. (a) In all areas where psilocybin products are produced or stored on the licensed premises. b. (b) In all areas where psilocybin waste may be present on the licensed premises. c. (c) All points of ingress and egress to and from: <ul style="list-style-type: none"> i. Indoor areas of the licensed premises. ii. Areas where psilocybin products are produced or stored. iii. Areas where psilocybin waste may be present.
#38	Approved - 7/13/23	<p>2. A Healing Center/Licensed Premises, cultivator, manufacturer, or laboratory licensee must:</p> <ul style="list-style-type: none"> a. In all areas where camera coverage is required, use cameras that record at a minimum resolution of 1280 x 720 px and record at 10 fps (frames per second). b. Use cameras that are capable of recording in all lighting conditions. c. Retain surveillance recordings for a minimum of 30 calendar days. d. Maintain surveillance recordings in a format approved by the Authority that can be easily accessed for viewing and easily reproduced. e. Upon request of the Authority, keep surveillance recordings for periods exceeding the retention period specified in subsection (2)(c) of this rule.

		<ul style="list-style-type: none"> f. Have the date and time embedded on all surveillance recordings without significantly obscuring the picture. g. Archive video recordings in a format that ensures authentication of the recording and guarantees that no alteration of the recorded image has taken place. h. Make video surveillance records and recordings available immediately upon request to the Authority in a format specified by the Authority for the purpose of ensuring compliance with rules, regardless of whether the recordings are stored on the licensed premises or on a cloud-based platform.
#39	Approved - 7/13/23	<p>3. Notwithstanding the requirements in section (1) of this rule, a healing center/licensed premises, licensed cultivator, licensed manufacturer, or licensed laboratory may stop recording in areas where psilocybin products are not present due to seasonal closures or periods of inactivity.</p> <ul style="list-style-type: none"> a. At least 24 hours before stopping recording, a licensee must submit written notice to the Authority by electronic mail using a designated form as published by the Authority on its website, and the notice must include: <ul style="list-style-type: none"> i. A description of the total number and location of cameras that will be deactivated. ii. The date and time recording will stop. iii. An explanation for why the recording will be stopped. iv. The date and time recording will resume. b. A licensee must resume all required recording no later than the date and time specified in the notice submitted under subsection (a) of this section. c. A licensee may not engage
#40	Approved - 7/13/23	<p>1. A licensed healing center or licensed premises, licensed cultivator, licensed manufacturer, or licensed testing laboratory must house the surveillance recording equipment in a designated, locked, and secured room or other enclosure with access limited to the following:</p> <ul style="list-style-type: none"> a. The licensee, licensee representatives, and authorized personnel. b. Employees of the Authority. c. Service personnel or contractors.
#41	Approved - 7/13/23	<p>2. A licensed healing center or licensed premises, licensed cultivator, licensed manufacturer, or licensed testing laboratory must keep a current list of all authorized employees and service personnel who have access to the surveillance system and room on the licensed premises.</p>

#42	Approved - 7/13/23	3. A licensed healing center or licensed premises, licensed cultivator, licensed manufacturer, or licensed testing laboratory must keep a surveillance equipment maintenance activity log on the licensed premises to record all service activity, including the identity of any individual performing the service, the service date and time and the reason for service to the surveillance system.
#43	Approved - 7/13/23	4. A licensed healing center or licensed premises, licensed cultivator, licensed manufacturer, or licensed testing laboratory must keep a surveillance equipment outage log on the licensed premises to record all camera outages lasting more than 30 minutes. The log must identify the cameras affected and record the time and duration of the outage.
#44	Approved - 7/13/23	5. Off-site monitoring of the licensed premises by a licensee or an independent third party is authorized if standards exercised at the remote location meet or exceed all standards for onsite monitoring.
#45	Approved - 7/13/23	Licensed Facilitators and authorized representatives are required to make reasonable efforts to resolve any activity or conditions on the licensed premises that endangers the safety of any person present on the premises.
#46	Approved - 7/13/23	If activity or conditions on/at the “ healing center or licensed premises ” that endanger the safety of any person present on the premises persist following the reasonable efforts required, licensed facilitators and authorized personnel must immediately contact appropriate emergency services.
#47	Approved - 7/13/23	If a licensed facilitator is unable to contact emergency services while the activity is taking place, the licensed facilitator must contact emergency services as soon as it is possible to do or they must instruct another authorized personnel.
#48	Approved - 7/13/23	License Facilitators or authorized personnel must contact emergency medical services when any person on the premises requires emergency medical care due to an immediate or potential life threat.
#49	Approved - 7/13/23	In addition to the requirements, licensees must notify the regulator in writing in a form and manner prescribed by the authority within 48 hours of contacting emergency services.
#50	Approved - 7/13/23	A participant must have an opportunity to approve and meet any licensed facilitator or authorized personnel who will provide psilocybin services prior to receiving services from that facilitator .
#51	Approved - 7/13/23	For every participant who will receive psilocybin, a licensed facilitator must complete documentation as required by the natural medicine “rules” (Referencing B.Conner Ethical Code 7/13)

#52	Approved 1/10/24	A <i>licensed facilitator or an authorized personnel</i> of (at) a “ <i>Licensed Healing Center or Licensed Premises</i> ” must transfer psilocybin products to participants within the designated administration area during the administration session - Context Note: Most of this section will be for the products subcommittee. Only items directly related to safety and security are listed here.
#53	Approved 1/10/24	A “ <i>licensed facilitator or authorized personnel</i> ” of a “ <i>Licensed Healing Center or Licensed Premises</i> ” must observe a participant consume any psilocybin products transferred to that participant and dispose of packaging waste appropriately. Any portion of the psilocybin product that is not consumed must be returned to the “ <i>licensed facilitator or authorized personnel.</i> ” Any remaining product not consumed by a participant must be destroyed or (DISPOSED) at the conclusion of the participant’s administration session by a “ <i>licensed facilitator or authorized personnel.</i> ”
#54	Approved 1/10/24	Licensed Facilitators are not prohibited from transferring, selling, or otherwise handling any psilocybin product while they are facilitating a preparation, administration, or integration session, regardless of whether the facilitator is also a licensee representative of a healing center or licensed premises.
#55	Approved 1/10/24	Participants may mix psilocybin products with packaged food or packaged beverages prior to consuming, as long as the packaged food or packaged beverage was unopened prior to mixing. Potable water is not required to be packaged.
#56	Approved 1/10/24	<ol style="list-style-type: none"> 1. A Licensed Facilitator or authorized personnel of a healing center or licensed premises shall not permit participants to mix psilocybin products with any items other than packaged food and beverages, including but not limited to the following: <ol style="list-style-type: none"> a. Homemade food and beverage items. b. Dietary and nutritional supplements, including herbal supplements and products derived from cannabis. c. Prescription and non-prescription drugs. d. Any intoxicant.

Screening Tool Requirements

#57	Approved 1/10/24	<p style="text-align: center;">Screening Tool Requirements</p> <p>Licensed Facilitators shall use a screening tool to determine the sphere of care for a participant's facilitation needs and requirements. General Domains and concerns the screening tool should screen for the following:</p> <ul style="list-style-type: none"> • General Health. • Behavioral Health & Mental Health. • Medical health. • Pharmacology (with special considerations for drug interactions). • and any special considerations (E.g.) disability needs, need for a service animal to be present, spiritual or religious accommodations should be considered.
<p style="text-align: center;">Authorized Locations other than a Licensed Healing Center <i>(Referenced Document) Vice Chair - Dr. Brad Connor's Draft Recommendations for Locations Other Than a Healing Center</i></p>		
#58	Approved 1/10/24	<p>Recommendation: That the Nat Med Advisory Board to the regulatory agencies that they collect data, on the authorization of locations other than licensed healing centers for the facilitation of natural medicine.</p>
<p style="text-align: center;">Natural Medicine Ethical Code Revision</p>		
#59	Approved 1/10/24	<p>Recommendation: to adopt the ethical code striking Section D(1)(B) having adopted #57</p>

Indigenous and Religious Use and Outreach

The Challenges of this subcommittee require an exploratory approach, navigating the complexities, for the four recommendations, for our ultimate goal. Appreciating the statutory requirements, The Nature of our work demands flexibility and iteration not operating with established parameters, and we are delving into the very fabric of inclusion and offering doorways. We are reserving our right to refine our language as we learn. This has been a profound learning process for everyone from the board members, non-voting participants, the staff, and the public. It is not sufficient to be understood. Of equal or greater importance, is that this language needs to be discernible to the general public. DEI is a world challenge, and we recognize that this is a historic challenge, specifically because of our honoring, We are committing to the pace of the possible.

1. Recommendation: Remuneration Acceptance for Indigenous & Religious Use

- *This recommendation is for those who do not want a facilitator license. Our recommendation is that those who do not want a facilitator license will have a legal way to make a livable wage for Indigenous and Religious providers.*
- *We recommend the broadest possible legal interpretation of the exemption for Religious and Ceremonial Use*
 - *CITATION: 12-170-108(4) “NOTHING IN THIS SECTION PROHIBITS AN INDIVIDUAL FROM PERFORMING A BONA FIDE RELIGIOUS, CULTURALLY TRADITIONAL, OR SPIRITUAL CEREMONY, IF THE INDIVIDUAL INFORMS AN INDIVIDUAL ENGAGING IN THE CEREMONY THAT THE INDIVIDUAL IS NOT A LICENSED FACILITATOR, AND THAT THE CEREMONY IS NOT ASSOCIATED WITH COMMERCIAL, BUSINESS, OR FOR-PROFIT ACTIVITY. “*

****Note: This recommendation, would be a legislative action to request clarifying Statute, to explicitly state that remuneration is not prohibited.***

2. Recommendation: Indigenous and Underrepresented Decision-Making Representation-Recommendation to require the voice of underrepresented business leaders and facilitators “The Federally Recognized American Tribes and Indigenous Community Working Group” to also guide the oversight of natural medicines we build opportunities and awareness for equitable initiatives to continue/expand.

- 1) Requirements for accurate and complete data collection, reporting, and publication;
- 2) Research related to the efficacy and regulation, including product safety, harm reduction, and cultural responsibility;

- 3) Affordable, equitable, ethical, and culturally responsible access to natural medicines...

3. Recommendation: The Division should develop a collaborative council to support those with traditional knowledge passed down by generations to practice and heal with the use of natural Medicine to bypass licensure requirements set forth by the NMAB. For non-indigenous and indigenous people without generational traditional knowledge, licensure requirements would still apply.

The Tribal Council Will Consist of

1. (1) Senior leaders, elected officials, or the President of any federally recognized Indian tribe, nation, or pueblo;
2. (2) individuals who work for or are appointed by state departments as Subject Matter Experts in indigenous identity, culture, languages, heritage and livelihoods or
3. (3) individuals who have been deemed eligible for services and programs provided to American Indians and Alaska Natives by the United States Public Health Service, the Bureau of Indian affairs, or other federal programs
4. (4) and the elected governor or a representative appointed by the sitting governor to act on their behalf with signatory authority.

4. Recommendation: The State should promulgate rules outlining the criteria for an applicant applying for an accelerated training facilitator license.

1. Criteria

- a. Show that an apprenticeship (the term has been a minimum of 3-5 years and **2000** number of hours).
 - i. ***People come to apprenticeship by blood family, or maestro and maestra, which is through a connection, essentially a fourth way.***
- b. Provide an outline of how the facilitator's ceremonies are conducted.
- c. Provide an outline of what occurs in preparation, the ceremony itself, and an outline of what happens in the integration after the ceremony.
- d. Documentation of teachers
 - i. Students of someone who has some form of *recognition*, credential, or lineage
 - 1. ***(NOTE: credential needs a definition).***
 - ii. Mentorship with an elder.
 - iii. Tribal council members (or any other designated names for communities and their elders or leaders and how they are identified)
 - iv. The teacher should have a credential and or qualification (***age, demographic, etc.***).
- e. Provide references
 - i. At least one of the references must have been the person's teacher *unless they have passed*.
 - 1. ***(If they have passed away, provide a bio to credit the teacher)***
 - ii. Community has a say (signatures or references to say who is safe and who is ethical (meaning honoring the students))
 - 1. ***note: respectable needs a definition.***
 - a. ***Example: [A statement and education indicating that, in a professional relationship, sexual intimacy is never appropriate and should be reported to the board that licensed, registers, or certifies the licensee, registrant, or certificate holder.]***
- f. Provide evidence of completion of a state training and exam.***Note(exam and training to be determined)***
 - i. Write an essay of their healing experience and their journey. (***accommodate for disability or literacy level)***
 - 1. ***Note: The essay should be fill-in-the-blank.***
 - ii. Interviews
 - 1. ***Note: needs clarification on the type of interview and accommodations.***
 - iii. Live Demonstrations
 - 1. ***Note: Only if the applicant would like to provide a small ceremony to provide a cultural perspective.***

Public Health and Health Equity

- a. For purposes of this program, the State shall define health equity as: *“Health equity is both an outcome and a process. Health equity happens when everyone has an equal and equitable opportunity to be as healthy as they can be. Recognition of one’s race, ethnicity, disability, age, sexual orientation, gender identity, socioeconomic status, geography, or preferred language is vital to promoting equitable health and well-being. Health equity work includes building bridges to positive health outcomes, such as ensuring access to local providers who reflect the diversity of the community that they serve.”* **[Approved 5-0 on 10/12]**
- b. The State should establish a clear pathway for Facilitators with Medical or Psychotherapy Facilitator licenses to bill the State Medicaid program for otherwise covered mental/behavioral health care, substance use disorder intervention services, or behavioral health services that are delivered in conjunction with natural medicine services, in compliance with section 12-179-113(1)(c) of the Natural Medicine Health Act. **[Approved 5-0 on 10/12]**
- c. The Division should promulgate rules clarifying that cultivators and product manufacturers can transfer natural medicine or natural medicine products directly to facilitators. If the Division determines that it is outside its statutory authority to do so, the legislature should revise the natural medicine license types codified at §§ 44-50-401 to -404, C.R.S., to clarify that a facilitator can purchase natural medicine or natural medicine product directly from cultivators or product manufacturers without requiring a facilitator to purchase through a healing center. **[Approved 5-0 on 10/12, revised by unanimous consent on 12/14]**
- d. To the degree feasible without increasing licensing fees, in collaboration with community organizations, and leveraging available relevant resources, the State should include a Health Equity Assessment in the annual report it is required to publish under section 12-170-105(1)(j) of the Natural Medicine Health Act that assesses access to Natural Medicine Services and licensure to participate in the delivery of such Services by underserved and marginalized communities, including those with below-average household income, those in or frontier rural areas, those with disabilities, indigenous peoples, racial and ethnic minorities, and those who identify as LGBTQIA+. **[Approved 5-0 on 12/14]**
- e. The State should investigate and implement, as soon as feasible, a partnership with a payment processing application or other financial enterprise that permits licensees to pay licensing fees over a period of months or years while not delaying the State’s receipt of full payment at or around the time licenses are awarded. **[Approved 5-0 on 12/14]**
- f. The State should develop regulations permitting the delivery of Natural Medicine Services in the private residences of patients and facilitators. **[Approved 4-1 on 12/14]**

Equity Recommendations By Board Chair Lundy
List of Pending Recommendations
Approved on January 11, 2023

Category: Facilitators

1. **Social Equity Facilitator Licenses** - Allocate a percentage of total projected annual licenses for "social equity" candidates in light of state cash programs impacting license costs. *With the intent to not offset or increase the costs of licenses to candidates/applicants that do not meet the criteria of a "social equity" candidate.*
 - a. **Background/Consideration:** *Licenses are projected to cost thousands of dollars and potentially five figures.*
 - b. **Vote Outcome:** *[Approved unanimously 1/11/24]*
2. **Facilitator Licensing Cost Differentials** - Based on proposed licensing spheres, establish licensing cost differentials to expand spherical facilitator license cost equity. *With some kind of consideration for demographic, geographic, income, and protections against maneuvering.*
 - a. **Background/Consideration:** *A masters-level mental/behavioral health therapist's median income is \$53,818, and a Psychiatrist's median income is \$251,445 in Colorado*
 - b. **Vote Outcome:** *[Approved unanimously 1/11/24]*
3. **Facilitator Independence from Healing Center** - Safe and best practice methods for facilitators and participants to engage in natural medicine services independent of a healing center.
 - a. **Background/Consideration:** *Most facilitators will be private practice therapists, at least part-time. Requiring a facilitator to have an association with a healing center significantly restricts facilitator and participant autonomy, the cost of total licenses needed to facilitate, and significantly decreases access to areas of Colorado that will likely have fewer healing centers available (i.e., rural and mountain towns). Establish delineations of allowances in consideration of multiple license holder requirements and restrictions.*
 - b. **Vote Outcome:** *[Approved unanimously 1/11/24]*
4. **Direct Cultivator to Facilitator Purchasing** - Safe and best practice methods for facilitators to purchase directly from cultivators, transport natural medicines to/from facilitation sessions, safe living soil disposal practices (see "Living Soil Disposal Practices") independent of a healing center, increasing optimal affordability and access, and thus equity.
 - a. **Background/Consideration:** *If not, we risk monopolizing the cultivator industry sector and increasing out-of-pocket costs for healing centers and clients/patients.*
 - b. **Vote Outcome:** *[Approved unanimously 1/11/24]*

Category: Consumers AKA “Participants”

5. **Access to Group Therapy** - Group therapy access with a virtual supervision option and one licensed facilitator in the physical room with the patients.
 - a. **Background/Consideration:** (1) "Group therapy saved 50.9% of clinician costs for MDMA-PTSD and 34.7% for psilocybin-MDD, or \$3,467 and \$981 per patient, respectively. To treat all eligible PTSD and MDD patients in the U.S. in 10 years with group therapy, 6,711 fewer full-time equivalent (FTE) clinicians for MDMA-PTSD and 1,159 fewer for FTE clinicians for psilocybin-MDD would be needed, saving up to \$10.3 billion and \$2.0 billion respectively, discounted at 3% annually."
 - b. **Vote Outcome:** [Approved unanimously 1/11/24]

Category: For Licensed Cultivators, Manufacturers, and Distributors

6. **Disposal Practices Consideration for DOR** - In collaboration with the Colorado Department of Revenue's plans around considering disposal practices that there are considerations for indigenous guidance, regenerative agriculture, commercial composting, and social equity.
 - a. **Background/Consideration:** Indigenous communities honor the sacred natural medicine throughout the process. Mushrooms, by nature, replenish soil through breaking down organic matter. They are a key to living soil work and regenerative farming, impacting both rural communities and climate change. Through safe green waste disposal practices, Colorado can protect the environment and residents from the detrimental health effects of pollution and climate change. Safe disposal practices need consideration in light of psychedelic nature of psilocybin cubensis mushrooms.
 - b. **Vote Outcome:** [Approved unanimously 1/11/24]
7. **Social Equity Business License** - In collaboration with recommendation #2 for facilitator social equity licensing for (DORA) that the Colorado Department of Revenue provide similar social equity considerations for business licensing.
 - a. **Background/Consideration:** Equity barriers in light of state cash programs impacting license costs for both individuals and businesses. Licenses are projected to cost thousands of dollars and potentially five-figures.
 - b. **Vote Outcome:** [Approved unanimously 1/11/24]
8. **Cultivator License Equity** - In acknowledgment of the work DOR is already doing we request to minimize overhead cultivator costs as much as possible in compliance with best practices and safety considerations.
 - a. **Background/Consideration:** Supports affordable and free access to natural medicine.
 - b. **Vote Outcome:** [Approved unanimously 1/11/24]

**Year 2 (2025) List of Pending Recommendations for
By Board Chair Lundy**

Category: Facilitators

1. **Social Equity Facilitator Mentorship Program** - Increase equitable business sustainability and scalability by providing business mentorship in accounting, business services (e.g., sales and marketing), financial or capital support, and information technology support *based on mentorship matching. In future years, without increasing costs to licenses.
 - a. **Background/Consideration:** *If not, there will be increased business access inequities and decreased owner/operator representation of Colorado's diverse communities.*
 - b. **Vote Outcome:** *[Approved unanimously 1/11/24]*
2. **State Education Program: Free Remote Learning** - Eliminate cost and physical access barriers of facilitator certification and continuing education to increase overall facilitator access in light of education licensing and business costs. Financial resources to make this resource possible will not come from the program or increase facilitator licensing cost.
 - a. **Background/Consideration:** *Prohibitive education costs in money and time, alongside cash program licensing costs, significantly increases overall inequitable industry access. Collaboration with private sector partners could create a free or heavily reduced-cost accredited training program for facilitators in the masterclass mold and inclusive of diverse stakeholder voices including but not limited to: Black, Indigenous, Communities of Color, and LGBTQIA+ communities.*
 - b. **Vote Outcome:** *[Approved unanimously 1/11/24]*

Category: For Licensed Cultivators, Manufacturers, and Distributors

3. **Social Equity Business Leader Mentorship Program** - Similar to recommendation # 1 that DOR considers a business leader mentorship program to expand social equity that Increases business access inequities and decrease owner/operator representation and has considerations for incentives to make this program sustainable and viable
 - a. **Background/Consideration:** *Increase business access inequities and decrease owner/operator representation of Colorado's demographics and communities. Increase business sustainability, scalability, and industry by providing business mentorship in accounting, business services (e.g., sales and marketing), financial or capital support, information technology support *based on mentorship matching.*
 - b. **Vote Outcome:** *[Approved unanimously 1/11/24]*
4. **Natural Medicine Business Loan Program** - Designate an agency and or a third-party provider to provide loans to natural medicine facilitators. The revenue for this program does not come from licensing fees or costs to the program.
 - a. **Background/Consideration:** *Supports affordable and free access to natural medicine.*
 - b. **Vote Outcome:** *[Approved unanimously 1/11/24]*

Category: Natural Medicine Industry

5. **Psychedelics Research Organization and Implementation** - Learning from historical research through the Marjaunia division as well as opportunities for the full board and partnership between agencies to implement the consolidation of psychedelic research.practices, collaborating and with guidance from Indigenous and Religious leaders. The social equity subcommittee should have guidance in data collection.
 - a. **Background/Consideration:** *Establish a psychedelic research working group to expand state research on the therapeutic use of natural medicines that translate to policy recommendations for optimizing safety, best practices, and equitable access for an industry in need of a significant amount of additional research.*
 - b. **Vote Outcome:** *[Approved unanimously 1/11/24]*
6. **Licensing and Insurance Application Integration** - Increase access to trusted insurance providers, eliminate licensee insurance research sweat equity, and incentivize insurance supply. Lack of insurance awareness/knowledge among licensees and lack of supply for insurance companies.
 - a. **Background/Consideration:**
 - b. **Vote Outcome:** *[Approved unanimously 1/11/24]*
7. **License Loan Provider Collaboration** - In acknowledgment of the work state agencies are already doing that there are considerations for fair loan access related to licensed costs for licensed facilitators and licensed businesses.
 - a. **Background/Consideration:** *Supports affordable and free access to natural medicine.*
 - b. **Vote Outcome:** *[Approved unanimously 1/11/24]*
8. **Social Equity Grant Program** - This is a Grant's program for social equity, that isn't solely funded by the cash program and does not increase license costs. Primary focus is on direct licenses and secondary focus on ancillary businesses that support social equity, innovation, and job creation for licensees.
 - a. **Background/Consideration:** *Inequitable licensee access as startup costs forecast close to six-figures.*
 - b. **Vote Outcome:** *[Approved unanimously 1/11/24]*
9. **Natural Medicine Sales Charge** - That a charge on natural medicine products to benefit social equity through allocations to indigenous and religious, environmentalism, social equity programs, harm reduction, data, and observational study. In implementing the charge regulators should consider protections to prevent abuse of indigenous people and land.
 - a. **Background/Consideration:** *If not, we decrease opportunities for a regenerative industry revenue model that builds impact and community engagement through sales tax allocations; we risk higher and unaffordable client costs if we make the sales tax too high.*
 - b. **Outcome:** *[Approved unanimously 1/11/24]*

Attachment 5: Natural Medicine Advisory Board 2024 Activity Report

2024 Natural Medicine Advisory Board Annual Activities Report

Approved by the Natural Medicine Advisory Board on November 15th, 2024

1. Executive Summary

- In 2022, Proposition 122 was initiated by the Citizens of Colorado, and approved by the voters of Colorado, which created the Natural Medicine Program as part of the Department of Regulatory Agencies, and Established the Natural Medicine Advisory Board (NMAB) to advise DORA on various aspects of the Natural Medicine Program. The Goal of the Natural Medicine Program is to give Coloradans “more tools to address mental health issues, including approaches such as natural medicines that are grounded in treatment, recovery, health, and wellness.” Since its establishment in 2023, the Board has covered extensive ground, with over 90 meetings of its committees and subcommittees, as well as the drafting of hundreds of recommendations for the program's implementation.
- As part of its mandate, the Board is required to report all activities it has conducted in the past year, including recommendations made to DORA, The Department of Revenue, or the Legislature. The statute which created the Board also requires it to make recommendations on the following subjects:
 - Accurate public health approaches regarding use, benefits, harms, and risk reduction for natural medicine and natural medicine product and the content and scope of educational campaigns related to natural medicine and natural medicine product;
 - Research related to the efficacy and regulation of natural medicine and natural medicine product, including recommendations related to product safety, harm reduction, and cultural responsibility;
 - The proper content of training programs, educational and experiential requirements, and qualifications for facilitators. When considering recommendations made pursuant to this subsection (5)(c), the board may consider:
 - Tiered facilitator licensing, for the purpose of requiring varying levels of education and training dependent upon the type of participant that the facilitator will be providing services to and the type of services the facilitator will be providing;
 - Limited waivers of education and training requirements based upon the applicant's prior experience, training, or skills, including, but not limited to, natural medicine or natural medicine product; and

- The removal of unreasonable financial or logistical barriers that make obtaining a facilitator license commercially unreasonable for individuals, including low-income individuals.
- Affordable, equitable, ethical, and culturally responsible access to natural medicine and natural medicine product and requirements to ensure this article 170 is equitable and inclusive. In performing this requirement, the board may consider making recommendations on ways to reduce the costs of licensure for low-income individuals, for providing incentives for the provision of natural medicine services at a reduced cost to individuals with low income, and for providing incentives for the provision of natural medicine services in geographic and culturally diverse regions of the state.
- Appropriate regulatory considerations for each type of natural medicine and the preparation session, administration session, and integration session;
- The addition of other types of natural medicine to this article 170 and article 50 of title 44 pursuant to section 12-170-104 (12)(b)(I), (12)(b)(II), or (12)(b)(III) based on available medical, psychological, and scientific studies, research, and other information related to the safety and efficacy of each natural medicine, and shall prioritize considering the addition of ibogaine pursuant to section 12-170-104 (12)(b)(II), to this article 170, and to article 50 of title 44;
- All rules to be promulgated by the director pursuant to this article 170 and the state licensing authority pursuant to article 50 of title 44; and
- Requirements for accurate and complete data collection, reporting, and publication of information related to the implementation of this article 170.
- Additionally, statute requires that the board shall, on an ongoing basis:
 - Review and evaluate existing and current research, studies, and real-world data related to natural medicine and make recommendations to the general assembly and other relevant state agencies as to whether natural medicine, natural medicine product, natural medicine services, and associated services should be covered under health first Colorado or other insurance programs as a cost-effective intervention for various mental health conditions, including, but not limited to, end-of-life distress, substance use disorder, alcohol use disorder, depressive disorders, neurological disorders, cluster headaches, and post-traumatic stress disorder.
 - Review and evaluate sustainability issues related to natural medicine and natural medicine product and the impact on tribal and Indigenous cultures and document existing reciprocity efforts and continuing support measures that are needed.

2. Introduction

- The Establishment of the Natural Medicine Health Act and the Natural Medicine Advisory Board:
 - Proposition 122
 - In November of 2022, Proposition 122 was initiated by the Citizens of Colorado, and approved by the Voters of Colorado, which created the

Natural Medicine Program as part of the Department of Regulatory Agencies, and Established the Natural Medicine Advisory Board (NMAB) to advise DORA on various aspects of the Natural Medicine Program

- Senate Bill 23-290
 - In 2023, SB23-290 was drafted and introduced by the Colorado Senate, and signed into law, to amend the framework of the act and delegate responsibility for certain aspects of the regulated market to the Department of Revenue (DOR); This Bill also established the Federally Recognized Tribes & Indigenous Community Working Group
- Senate Bill 24-198
 - In 2024, SB24-198 was drafted and introduced by the Colorado Senate and signed into law, to delegate specific authority to DORA to regulate natural medicine training programs, to update requirements for testing facilities and manufacturers, and to clarify requirements for transferring natural medicine.
- The Natural Medicine Program
 - The Natural Medicine Program is tasked with the following responsibilities:
 - Establishing and regulating the licensure of Facilitators, including qualifications and standards of conduct
 - Establishing and regulating the licensure of Approved Facilitator Training Programs, including faculty qualifications and required curricula for students
 - Working with the NMAB, the Federally Recognized Tribes & Indigenous Community Working Group, and the DOR to implement the provisions of the Natural Medicine Health Act
 - Publishing an annual report, in coordination with the DOR, on the implementation and administration of the Natural Medicine Health Act
- Board, Subcommittees, Work Groups
 - The NMAB is created by Statute, and is composed of individuals appointed by the Governor of the State of Colorado, with expertise in the following areas:
 - Seven members with significant expertise and experience in one or more of the following areas: Natural medicine therapy, medicine, and research; mycology and natural medicine cultivation; licensee qualifications; emergency medical services and services provided by first responders; mental and behavioral health care; health-care insurance and health-care policy; and public health, drug policy, and harm reduction; and
 - Eight members with significant expertise and experience in one or more of the following areas: Religious use of natural medicines; issues confronting veterans; traditional tribal or Indigenous use of natural medicines; levels and disparities in access to health-care

services among different communities; and past criminal justice reform efforts in Colorado. At least one of the eight members must have expertise or experience in traditional, tribal, or Indigenous use of natural medicines.

- The Board was Further Divided into Subcommittees on the following topics, in order to create and clarify specialized recommendations to present to the Full Board:
 - The Emergency Response Safety & Ethics Subcommittee
 - The Harm Reduction and Public Safety Subcommittee
 - The Indigenous and Religious Use Outreach Subcommittee
 - The Product Research and Data Subcommittee
 - The Public Health and Health Equity Subcommittee, and
 - The Qualifications, Training and Licensing Subcommittee
- 2023 & 2024 Meetings
 - Since the Board's inception, it has had a combined total of 91 meetings of the different subcommittees, working groups, and full board
 - For further information on the number and types of meetings conducted by the Board, please see "Section 4: Activities and Accomplishments, of this report"
- Composition of the Board
 - Lundi Ramos, MA, LPC, Chair
 - Representative of Mental Health and Behavioral Health Providers and Disparities in Access to Health Care Services Among Different Communities
 - Ricardo Baca
 - Representative of Traditional Indigenous Use and Public Health, Drug Policy, and Harm Reduction
 - Wendy Buxton-Andrade
 - Representative of Levels and Disparities in Access to Health Care Services Among Different Communities
 - Dr. Sofia Chavez, DNM
 - Representative of Traditional and Indigenous Use and Religious Use of Natural Medicine
 - Dr. Bradley Conner, PhD
 - Representative of Natural Medicine Therapy, Medicine and Research and Public Health, Drug Policy and Harm Reduction
 - William Dunn NRP, FP-C
 - Representative of Emergency Medical Services and Services Provided by First Responders
 - Dr. Clarissa Pinkola Estés, PhD
 - Representative of Traditional Indigenous Use and Religious Use
 - Dr. Tina Gonzales, PhD

- Representative of Health Care Insurance and Health Care Policy, Past Criminal Justice Reform Efforts in Colorado, and Disparities in Access to Healthcare Services Among Different Communities
 - Dr. Alisa Hannum, PhD
 - Representative of Mental and Behavioral Health Providers and Issues Confronting Veterans
 - Stacie Loucks
 - Representative of Permitted Organization Criteria
 - Sheriff David Lucero
 - Representative of Past Criminal Justice Reform in Colorado
 - Skippy Upton Mesirow
 - Representative of Permitted Organization Criteria
 - Dr. Sue Sisley, MD
 - Representative of Mycology and Natural Medicine Cultivation
 - Billy Wynne, JD
 - Representative of Health Care Insurance and Healthcare Policy and Public Health, Drug Policy and Harm Reduction
- Composition of The Federally Recognized American Tribes and Indigenous Community Working Group
 - Tom Allen - Arvada, Colorado
 - Sac and Fox Nation of Oklahoma, Northern Arapaho
 - Daniel Castro - Boulder, Colorado
 - Mestizo Kichwa from Ecuador
 - Sherrill Katsi Cook Barreiro - Akwesasne, New York
 - St. Regis Mohawk Tribe
 - Frank Dayish, Former Vice President Navajo Nation- Gallup, New Mexico
 - Navajo Nation (Diné)
 - Belinda P. Eriacho, MPH|MT - Tempe, Arizona
 - Navajo Nation (Diné)
 - Dr. Santiago Ivan Guerra - Colorado Springs, Colorado
 - Coahuiltecan and Chicano
 - Terry G. Knight, Sr. - Towaoc, Colorado
 - Ute Mountain Ute Tribe
 - Marlena Robbins - Berkeley, California
 - Navajo Nation (Diné)
 - Councilman, Darwin Whiteman Jr. - Towaoc, Colorado
 - Ute Mountain Ute Tribe

3. Goals and Objectives

- The Natural Medicine Advisory Board (NMAB) in Colorado was established under the Natural Medicine Health Act to guide the state on how to implement the law effectively. The Board's 2024 goals included:

- Developing Regulatory Recommendations: Advise the Colorado Department of Regulatory Agencies (DORA) and the Colorado Department of Revenue (DOR) on creating rules and standards for the production and use of natural psychedelics like psilocybin and psilocin.
- Establishing Best Practice Standards: Develop standards for training and certification of facilitators and practitioners involved in psychedelic therapy to ensure high-quality, ethical practices.
- Promoting Equity and Accessibility: Ensure that the regulatory framework is inclusive, focusing on equitable access to psychedelic therapies and practice, especially for indigenous, underserved and marginalized communities.
- Ensuring Public Health and Safety: Provide guidelines to ensure that the production, distribution, and therapeutic use of psychedelics are conducted in a manner that protects public health and safety in collaboration with DORA and DOR.
- Supporting Mental Health Treatments: Focus on maximizing the potential of psychedelics in treating mental health conditions by recommending best practices for facilitator education and therapeutic use.
- Expanding Access Over Time: Explore opportunities to expand the use of other natural psychedelics, as allowed by the law, with the goal of increasing access to safe and effective treatments.
- Overall, the Natural Medicine Advisory Board plays a crucial role in shaping Colorado's approach to psychedelic therapy, advising the State with recommendations designed to balance innovation with safety and equity.

4. Work Processes

Unique Process for Public Meetings: A Model for Effective Policy

- The Natural Medicine Advisory Board's unique approach to public meetings fosters a collaborative, cross cultural, and respectful environment that leads to more effective policies and improved public trust. Guided by principles like a unified purpose, respect for diverse perspectives, and a heart-centered focus on human impact, we navigate policy discussions with care and consideration for all stakeholders. Our commitment to reflective listening and supportive collaboration creates a safe space for open dialogue and growth. By honoring Indigenous, board, public and staff contributions, we ensure that all voices are heard and every decision is made with integrity, transparency and accountability. This model serves as an inspiring guide for any board seeking to enhance its policy-making process

5. Activities and Accomplishments

The Board, as part of its activities, met numerous times as a whole, as well as through multiple subcommittee meetings. The breakdown of these meetings can be seen below:

<i>Count By Year</i>	<i>Year</i>		
<i>Meeting Name</i>	2023	2024	Grand Total
Advisory Board	9	9	18
Combined Subcommittee		6	6
Emergency Response Safety & Ethics Subcommittee	11	1	12
Federally Recognized American Tribes and Indigenous Community Working Group		5	5
Harm Reduction and Public Safety Subcommittee	3		3
Indigenous and Religious Use Outreach Subcommittee	10	1	12
Product Research and Data Subcommittee	11		11
Public Health and Health Equity Subcommittee	11	1	12
Qualifications, Training and Licensing Subcommittee	11	1	12
Grand Total	66	25	91

NMAB Full Board Activities:

- **The Board's Major Accomplishment and Activities are collected in the [January 2024 Board Consolidated Recommendations Report](#)**

In January of 2024 the NMAB made a list of consolidated recommendations (linked above) to both DORA and DOR, addressing those requirements placed upon them by statute. This report is the culmination of the many Subcommittees of the Board. The report consists of well over 96 recommendations to both DORA and DOR, which were approved by the Board
- Additional board and subcommittee recommendations for future agency and legislative consideration were made in 2024 as well, including as follows:
 1. **Board Data Collection Recommendation - 6-21-2024**

The Combined Advisory Board approved this Recommendation on June 21, 2024, following their collective efforts to continue their collaborative discussions which spanned from April 13, 2023, to January 19, 2024, and resulting in Initial Recommendations submitted to the Natural Medicine Program, the Department of Regulatory Agencies (DORA) and the Department of Revenue (DOR) in January 2024.

The ongoing collaboration among the Advisory Board members continues to produce policy recommendations aimed at assisting the State Agencies in their establishment of a robust regulatory framework for the regulation of natural medicine within the State of Colorado. These recommendations are designed to ensure the safety, efficacy, and

ethical standards of natural medicine practitioners in their provision of natural medicine services while also fostering a balanced, regulated industry, through policy recommendations conducive to innovation, equity, and growth in the field over the coming years.

Natural Medicine Advisory Board Data Collection Recommendation -June 21st, 2024.

The state of Colorado has a unique opportunity to create a participant outcome database for those who receive natural medicines in the regulated market. This database will serve to reduce harm and maximize benefit for all Coloradans.

The subcommittee is strongly opposed to passing the burden of the cost of creating and maintaining such a participant outcome database on to the participants in the regulated program and deems of paramount importance having this database operational at program launch to ensure efficacious data collection and objective observation or initial facilitation.

As such, we strongly recommend that the Colorado Legislature allocate 1 million dollars initially to create and maintain such an outcome database, honoring the legislatures stated intent for Natural Medicine work to be publicly funded. The subcommittee strongly recommends that the legislature find a method for providing this funding in the near term. If such expediency is not possible, we ask you to allow the program to seek private funding to initiate the development of this registry so that it is in place when the regulated market launches in January of 2025, working with you to meet the intent of your desire for public funding as we do so.

We also strongly recommend that CDPHE oversee the development of such an outcome database and that development and oversight be contracted to individuals with expertise in this area, such as researchers who work for the major public universities in the State of Colorado, potentially creating a Request for Proposals for such a project.

The Advisory Board will continue to work on additional policy recommendations. Concurrently, the State Agencies will continue their respective rule-making processes, required by and subject to Colorado's Administrative Procedure Act, to promulgate rules on a timeline intended to ensure that licensure applications are open to the public prior to the statutory deadline of December 31, 2024.

We appreciate the opportunity to contribute to the regulatory process and invite any questions that may arise during the review of our recommendations. The Advisory Board remains committed to collaborating with your departments to enhance the regulatory landscape for natural medicine in our state.

2. Board Recommendation - Data Recommendation - 9-20-2024

This program affects public health in potentially positive and negative ways.

Therefore, the NMA Board recommends that CDPHE take on the statutory obligation to collect data on adverse health events, impacts to health care systems, consumer protection claims, and behavioral health impacts. This data must include assessment of both positive health and negative health impacts associated with use of natural medicines.

We advocate that CDPHE issue a request for a quotation (RFQ) for collection of these data that clearly prioritizes 1) the capability of the vendor and 2) the ability to collect valid and actionable data.

At a minimum, this RFQ should request the need for a reliable and implementable registry administered to clients of the program, a dataset that can assess the behavioral health impacts, the health system impacts, and consumer claims.

These data must measure positive health impacts and negative public health impacts with the appropriate comparators to demonstrate the effect of this program on public health.

Finally, the cost of this data collection should not be passed onto licensees and their patients. Rather, as outlined in SB 23-290, it should be funded by the state of CO through a reliable vendor to minimize the risk of inaccurate or uninterpretable data that would be collected if DOR requirements do not have preferred provider, guidance, nor the optimal mechanism to collect these data.

Funding can be accomplished through an emergency amendment to the fiscal note for SB 23- 290 since this cost was not foreseen when that fiscal note was originally signed. Alternatively, collection of these data could be funded by philanthropic support for this state effort.

If CDPHE cannot currently receive external charitable funds, DOR should remedy this by drafting an emergency bill by Nov 1. DOR government relations department should identify a Bill Sponsor to file simple proposed language at the CO Assembly in January and this Bill could be fast-tracked through the legislative approval process and implemented immediately to coincide with launch of new psilocybin state regulated market.

- **The Federally Recognized American Tribes and Indigenous Community Working Group (Active)**
 - The Federally Recognized American Tribes and Indigenous Community Working Group met 5 times in 2024, for a total of 18 Hours
 - The Group was created specifically by Senate Bill 23-290 to solicit the input of Indigenous and Federally Recognized Tribes on issues surrounding Natural Medicine
 - The Working Group is charged with studying issues related to legalizing and regulating natural medicine and natural medicine product, the effect of legalization and regulation on federally recognized American tribes and Indigenous people and communities, and making recommendations to the director of the division of professions and occupations and the board.
 - The Working Group is made up of 9 members, and is representative of various Federally Recognized Tribes from across the United States
 - The Working Group has recommended that DORA conduct Tribal Consultation
 - The Department has reached out to CCIA, the Colorado Commission of Indian Affairs, to understand the process Tribal Consultation
 - Additionally The Department has made two site visits to the Ute Mountain Reservation
 - The Working Group is currently in progress on the publication of an official report

and recommendations for the Board, in order for the Board to address its statutory mandate to review the impact of Natural Medicine Services on tribal and Indigenous cultures and document existing reciprocity efforts and continuing support measures that are needed

- **The Forms Subcommittee (Active)**

- The Forms Subcommittee is tasked with reviewing and promulgating forms for Facilitator Use, including all forms required by the Natural Medicine Rules and Standards of Conduct. This includes the creation and dissemination of Informed Consent, Safety Screen, Transportation, and Supportive Touch Documents
- The Forms Subcommittee has spent six hours in session reviewing and approving documents,

- **Combined Subcommittee (Active)**

- The Combined Subcommittee was formed in Spring of 2024 to streamline the meetings of the various subcommittees of the Board, and address and approve recommendations for the full Board and improve the efficiency of Board meetings and tasks
- The Combined Subcommittee meets monthly, and has met for six sessions in 2024, with 3 sessions left in the calendar year
- The Combined Subcommittee has addressed eighteen different action items, working to clarify and revise these items before they are presented to the full Board

- **Emergency Response Safety & Ethics Subcommittee (Retired)**

- The Emergency Response Safety & Ethics Subcommittee met a total of 12 times.
- This Subcommittee consisted of 5 voting members & 13 nonvoting participants
- This Subcommittee drafted recommended standards for Facilitator conduct, safety screening, and requirements for administration outside healing centers
- This Subcommittee drafted a Colorado Facilitator's Code of Ethics

- **Harm Reduction and Public Safety Subcommittee (Retired)**

- The Harm Reduction and Public Safety Subcommittee met a total of 3 times
- This Subcommittee consisted of 6 voting members
- This Subcommittee assisted in drafting recommended standards for harm reduction and measures to protect public welfare

- **Indigenous & Religious Use Outreach Subcommittee (Retired)**

- The Indigenous & Religious Use Outreach Subcommittee met a total of 12 times
- This Subcommittee consisted of 5 voting members & 6 nonvoting participants
- This Subcommittee drafted recommendations for allowing indigenous and religious providers to practice without licensure, to including underrepresented facilitators and businesses in the rulemaking process, and to allow for accelerated licensure for Legacy Healer's

- **Product Research and Data Subcommittee (*Retired*)**
 - The Product Research and Data Subcommittee met a total of 11 times
 - This Subcommittee consisted of 6 voting members & 20 nonvoting participants
 - This Subcommittee drafted recommendations for the testing, cultivation, and labeling of Natural Medicine Product

- **Public Health & Health Equity Subcommittee (*Retired*)**
 - The Public Health & Health Equity Subcommittee met a total of 12 times
 - This Subcommittee consisted of 6 voting members & 9 nonvoting participants
 - This Subcommittee drafted recommendations for billing Natural Medicine to Medicaid, for clarifying from whom and how Natural Medicine is purchased, and to create a Health Equity Assessment to be published by DORA

- **The Qualifications, Training, and Licensing Subcommittee (*Retired*)**
 - The Qualifications, Training, and Licensing Subcommittee met a total of 12 times.
 - This Subcommittee consisted of 9 voting members and 5 nonvoting participants
 - This Subcommittee drafted recommendations focused on creating a licensure structure for both natural medicine facilitators and clinical natural medicine facilitators. The Subcommittee also drafted recommendations about requirements for training programs, including specific required didactic training modules and experiential requirements. The Qualifications, Training, and Licensing Subcommittee had the great fortune to partner with other subcommittees to contribute to the development of ethical standards for natural medicine facilitators

6. Staff and Volunteer Acknowledgement

- The NMAB would like to thank the following staff, volunteers, or partners who contributed to the program:
 - Natural Medicine Program Contributors
 - DORA Executive Director Office and Staff
 - DORA Division of Professions and Occupations - Division Director and Staff
 - Sam Bahrami
 - Natural Medicine Program Staff
 - Federally Recognized American Tribes and Indigenous Community Working Group
 - Colorado Department of Revenue - Natural Medicine - Division Director and Staff
 - Colorado Department of Public Health and Environment
 - Colorado Attorney General Office
 - Colorado Governor's Office

- Colorado Department of Public Safety Colorado Department of Agriculture
 - Colorado Department of Human Services
 - Colorado Department of Local Affairs
 - Colorado Department of Early Childhood
 - Colorado Department of Health Care Policy and Financing
 - Oregon Health Authority - Oregon Psilocybin Services - Angela Allbee and Staff
 - 5 Non-Voting Subcommittees - with a total of 55 members
 - Stakeholders
- From April 2023 - September 2024 - a total of 91 meetings were held, and we would like to acknowledge the following Presenters and Speakers:
 - Sara Gail with MAPS
 - Tristin Watkins Deputy Director of the Cannabis Business of office OEDIT
 - Martha Hartley presentation on the Federal and State Agencies Restoration and Freedom Act.
 - Rafael Lopez
 - Ben Lightburn and Ryan Moss with Filament Health
 - Kevin Kozup with San Juan Shrooms
 - Nathen Howard from the Sherri Eckert Foundation
 - Ariel Clark
 - Dr. Enrique Antunes presentation on Ayahuasca and the Impacts of the Psychedelic Movement to the Medicine and the Indigenous People of the Amazon.
 - Kari Rockhill, PhD, MPH, Assistant Statistical Scientist Rocky Mountain Poison & Drug
 - Dr. Osiris Garcia (Mazateca)

7. Future Plans

- The Board has been tasked with assisting in the implementation of Colorado's Natural Medicine Program. Currently, the Program is still being rolled out by the Department of Regulatory Agencies and the Department of Revenue, and is statutorily tasked and on track for Licensing to be rolled out by the end of 2024 and the beginning of 2025.
 - As of September of 2024, The Department of Regulatory Agencies has licensed eight (8) Approved Facilitator Training Programs, to train Facilitators who will be licensed as part of the first round of applicants in 2025
 - If recommended by the Board, DORA, and DOR, ibogaine may be added to the definition of "natural medicine.
 - As early as June 2026, if recommended by the Natural Medicine Advisory Board, DORA, and DOR, one or more of the following may be added to the term "Natural Medicine": dimethyltryptamine, and mescaline (excluding lophophora williamsii (peyote);

- The Board shall, on an ongoing basis, review and evaluate existing and current research, studies, and real-world data related to natural medicine and make recommendations to the general assembly and other relevant state agencies as to whether natural medicine, natural medicine product, natural medicine services, and associated services should be covered under health first Colorado or other insurance programs as a cost-effective intervention for various mental health conditions, including, but not limited to, end-of-life distress, substance use disorder, alcohol use disorder, depressive disorders, neurological disorders, cluster headaches, and post-traumatic stress disorder.