

Joint Effort: How Cannabis Legalization Is Shaping New Jersey's Psychedelics Legislation

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The landscape of drug policy in the United States has shifted dramatically in recent years, most recently evidenced by DEA's recommended rescheduling of cannabis. Cannabis legalization has been at the forefront of this movement, paving the way for a regulatory reset of other controlled substances as well, including psychedelics like psilocybin. This article aims to chronicle and analyze the parallels and divergences between these two legislative journeys, highlighting their historical contexts, regulatory frameworks, societal impacts, and the lessons learned for future drug policy reform efforts.

The legalization of cannabis in New Jersey marked a milestone in drug policy reform efforts in the state. Gov. Phil Murphy signed the New Jersey Cannabis Regulatory, Enforcement Assistance, and Marketplace Modernization Act (CREAMM Act) into law on Feb. 22, 2021, following a protracted legislative process that began years earlier. The road to legalization was not without challenges; a failed attempt to pass legislation in the 2018-19 session led to a proposed constitutional amendment being placed on the 2020 ballot as a referendum, known as New Jersey Public Question 1. The referendum passed with 67% approval, reflecting a new era of public support for cannabis legalization.

Drawing parallels from the cannabis legalization experience, New Jersey is now poised to navigate the complexities of psilocybin policy and regulatory change. Similar to cannabis, public opinion regarding psilocybin has shifted as scientific research



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increasingly supports its efficacy in controlled therapeutic settings.

Significance of Medical and Clinical Support

Like the early stages of cannabis reform, reforms surrounding psilocybin and other psychedelics have been jumpstarted by mounting medical and clinical support. Psilocybin, a psychedelic compound found in "magic mushrooms," has gained attention for its potential therapeutic benefits, particularly in treating depression, anxiety, and PTSD. Multiple randomized clinical trials have demonstrated its efficacy as an antidepressant and anxiolytic, with minimal risks when used in controlled settings. Even federally, the substance has been recognized as a "breakthrough therapy" by the U.S. Food and Drug Administration.

In that vein, proposed legislative changes involving psilocybin in New Jersey have been framed in the health care context. For example, the Psilocybin Behavioral Health Access and Services Act, reintroduced to the state Senate at the beginning of the year, is a 50-page comprehensive bill establishing a framework for the regulated production and use of psilocybin in connection with behavioral health care and preventative behavioral health treatment. Sponsored by Senate President Nick Scutari (who also championed the state’s recreational marijuana legislation) and Sen. Joe Vitale, this bipartisan effort is also supported by Republican Sen. Holly Schepisi and Sen. Declan O’Scanlon. The bill emulates the early days of New Jersey’s medical cannabis legalization by creating a patient-based framework regulated by the New Jersey Department of Health (NJDOH).

Among other things, under the bill, NJDOH would oversee the licensing of psilocybin manufacturing facilities, psilocybin “service centers,” and testing laboratories. Psilocybin or related products would only be allowed for consumption at licensed service centers (with limited exceptions). Service centers would provide comprehensive support, including initial screening, administration sessions under employee supervision to guide patients through their experience, and optional integration sessions to help patients process psychedelic experiences. To ensure community safety, service centers would be prohibited from operating in residential neighborhoods or within 1,000 feet of schools. Manufacturers could produce synthetic psilocybin or cultivate magic mushrooms without specified production limits, subject to NJDOH oversight.

In early June of this year, New Jersey’s Senate Health, Human Services, and Senior Citizens Committee convened to consider the bill. Expert testimonies during the session included perspectives from clinical social workers and a surviving firefighter from 9/11, who shared personal experiences illustrating the profound relief psilocybin can provide. Following deliberations, the committee voted 6-2 in favor of advancing the bill, marking a significant stride towards its potential enactment into law.

Reflecting Changes in Public Opinion

New Jersey’s psilocybin legislation also arrives at a time of evolving public opinion. According to a poll

conducted by the William J. Hughes Center for Public Policy at Stockton University, a significant portion of New Jersey residents express support for legalizing psilocybin under controlled conditions. Specifically, 55% of respondents favor legalizing psilocybin for therapeutic use under medical supervision, citing its potential to alleviate depression and anxiety (Hughes Center, 2024). This level of support mirrors the shift observed in cannabis legislation, where public opinion has gradually shifted towards acceptance. For example, in 2018, the Hughes Center reported that 49% of New Jersey residents supported legalizing recreational marijuana—a notable increase from previous years (Hughes Center, 2018). That number evolved to 67% by the time cannabis was legalized for adult-use at the ballot box in 2020.

Prioritizing Criminal Justice Reforms

If passed, the bill would not only authorize the controlled use of psilocybin but also decriminalize its possession and use by adults. This change takes a page out of New Jersey’s cannabis playbook, where the state legislature advanced multiple bills intended to address not only a legalization framework, but a robust decriminalization and expungement plan as well. Under the current version of the psychedelics bill, adults would be permitted to possess up to 4 grams of psilocybin for personal use, and they would also have the right to cultivate mushrooms in their own homes. Moreover, the bill emphasizes the medicinal potential of psilocybin, focusing on its use in a controlled environment under professional supervision. The legislative intent primarily addresses the medicinal and decriminalization use of psilocybin and does not explicitly cover recreational or unsupervised consumption—at least not yet.

Ancillary Legal Protections for Patients

Similar to New Jersey’s existing cannabis laws, the bill also makes it unlawful to take any adverse employment action against an employee who receives psilocybin services (unless the employee is visibly impaired while at work). An employer would not be permitted to test an employee for the presence of psilocybin in the employee’s system unless the employee exhibits clear, observable symptoms of impairment. The bill would also ensure that lawful psilocybin use would not, of itself, constitute child

abuse or neglect, constitute a basis to deny eligibility for any public assistance program, nor subject a holder of a professional or occupational license to discipline or loss of that license. Legal protections like these are the product of evolved cannabis policies that have now integrated their way into New Jersey's existing body of cannabis laws.

Seeking Guidance From Out-of-State Programs

In developing our state's cannabis laws, New Jersey borrowed and improved upon cannabis policies that found success in other states. Similarly, New Jersey is now poised to observe the existing legislative landscapes in Oregon, Connecticut and Colorado, which offer contrasting approaches to psilocybin regulation.

For example, under the Oregon Psilocybin Services Act, overseen by the Oregon Health Authority, Oregon issues licenses for psilocybin manufacturers, laboratories, facilitators, and service centers. This approach ensures that psilocybin products are cultivated, processed, tested, and administered in a controlled environment to ensure safety and efficacy. Unlike cannabis dispensaries where products can be purchased and taken off-site, psilocybin must be consumed at licensed service centers, reinforcing stringent controls over its distribution and use (oregon.gov). The legislation reflects a paradigm shift toward integrating psychedelics into mainstream health care practices while addressing concerns about misuse and public safety.

In contrast to Oregon's approach, Connecticut has encountered legislative challenges in advancing psilocybin reform. Recently, despite initial committee approval, legislation aimed at decriminalizing small amounts of psilocybin did not progress further in the legislative process. This outcome underscores the complexities and varying attitudes towards psychedelic substances among state lawmakers, and the need for public opinion to be in step with the state's legislative goals. Meanwhile, Colorado has embraced a forward-thinking approach with Proposition 122, passed in November 2022, which legalizes and regulates natural psychedelic medicines, including psilocybin. This initiative represents a significant departure from traditional drug policies by acknowledging the therapeutic potential of

psychedelics and providing a framework for their responsible use. By establishing guidelines for cultivation, distribution, and consumption, Colorado has consciously aimed to mitigate public health risks associated with illicit psychedelic use while fostering a supportive environment for further research and therapeutic applications (colorado.gov).

These diverse approaches to psilocybin regulation in Oregon, Connecticut and Colorado underscore the complex interplay between public health, social attitudes, and legislative action in shaping drug policy reform. New Jersey's current bill reflects shades of each approach, but leans more conservative with a limited focus on clinically-supervised use and the need for further research before promulgating further policy reforms.

In sum, the legislative journeys of cannabis and psilocybin in New Jersey represent significant milestones in the state's drug policy reform efforts. The legislative evolution from cannabis to psilocybin in New Jersey reflects a growing recognition of the need for evidence-based drug policy reform, driven by changing societal attitudes, clinical advancements, and legislative leadership. By building upon the successes and challenges of cannabis legalization, New Jersey has the opportunity to establish a model framework for psilocybin legislation.

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