



Care Delivery Primer

What is psychedelic care delivery?

Psychedelic-assisted therapy (PAT) care delivery is still in its earliest days. Aside from ketamine, no psychedelics are currently legally available as medical or wellness treatments. In the future, psychedelic care will likely be delivered both inside and outside a prescription medical context—addressing diagnosed mental illness, as well as promoting better mental health and wellness. If and when treatments are approved by the FDA, patients could receive PAT via prescription in a clinic, hospital setting, or a solo practitioner's office. With the passage of Measure 109, Oregon's psilocybin therapy ballot initiative, PAT will likely also be available in a non-prescription context, first in Oregon, and potentially elsewhere in coming years. Regardless of how it is delivered, this care will require training, certification, and regulatory oversight of therapists; standards for treatment and systems to pay for treatment; physical infrastructure for delivery of care; and refinement of a variety of inpatient and outpatient delivery models.

Where is care available today?

Only a tiny handful of practitioners are delivering psychedelic-assisted therapy in the US today. Outside of research trials, ketamine is the only legally-available psychedelic treatment in a medical setting, with over four hundred ketamine-focused independent practitioners and clinics operating in the US. Very few of these use a therapy-assisted protocol—most deliver ketamine infusions to patients under medical supervision without a psychotherapy component.¹⁶

Apart from clinics providing ketamine-assisted therapy, treatments in which psychedelics are provided as adjuncts to psychotherapy are currently only available to participants in clinical trials.¹⁷ Following FDA approval of MDMA and psilocybin, we expect that psychedelic-assisted treatments will become widely available by prescription.

Outside of a medical context, psychedelic treatment is available through an unknown (but presumptively small) number of underground therapists offering guided treatment, and psychedelic retreat centers operating outside the US. However, these experiences are unregulated, illegal in some cases, accessible only to those who can pay their own way, and highly variable in quality.

We choose to use the term "therapist" to encompass both conventional psychotherapists and people trained in the delivery of PAT who do not have the conventional training and licensure of Ph.D and Master's psychotherapists. Some call the latter group, mostly working in the underground, "guides," but we envision a future in which the skilled, trained, licensed providers of care include both categories.