BRAINFUTURES
Translating Science to Advance Human Potential

Senate Committee on Veterans' Affairs Roundtable

December 9, 2025

Members in Attendance:

Committee Chair, Sen. Jerry Moran (KS)
Sen. Tim Sheehy (MT)
Sen. John Boozman (AR), Chair, MilconVA Appropriations Subcommittee

Rep. Jack Bergman, MI-1
Rep. Morgan Luttrell, TX-8

Kyrsten Sinema, former Senator from Arizona

Roundtable Participants:

Dr. Ilse Wiechers, Acting Deputy Assistant Under Secretary for Health for Patient Care Services, VHA

Jazz Glastra, Senior Director, BrainFutures

Juliana Mercer, Executive Director, Healing Breakthrough

Bryan Hubbard, Founder, Americans for Ibogaine

Julie Garner, VP of Government Affairs and Patient Access, MindMed

Marcus Capone, Founder/Chairman, Veterans Exploring Treatment Solutions and retired Navy SEAL

Dr. Lynnette Averill, Baylor College of Medicine, Veterans Mental Health Leadership Coalition, Reason for Hope

Lt. General (Retired), Martin Steele, Veteran Mental Health Leadership Coalition and Reason for Hope

Jon Kostas, Executive Director, Association for Prescription Psychedelics

Dr. Frederick Barrett, Director of the Johns Hopkins Center for Psychedelics and Consciousness Research

Dr. Brandon Weiss, Assistant Professor, researcher at the Johns Hopkins Center for Psychedelics and Consciousness Research

Dr. Steve Levine, Chief Patient Officer, Compass Pathways

Eric Rasmussen, Government relations at Compass Pathways

Dr. Rachel Yehuda, 35 years of service at the Bronx VAMC and director of the Center for Psychedelic Psychotherapy and Trauma Research at Icahn School of Medicine

Brian Dempsey, Government Affairs Director, Wounded Warrior Project

Naomi Mathis, Assistant National Legislative Director, Disabled American Veterans

Hawk Tran, COO, National Association of Veterans' Research and Education Foundations

David Zakariaie, CEO and Cofounder of Senseye

Summary & Takeaways

At the outset of this roundtable, Chair Moran stated that the VA should become a national leader in the next frontier of mental health and highlighted that gaps remain in planning capacity, research, clinician training, safety monitoring, and more. Within this context, the discussion focused on how to accelerate access to psychedelic treatment for veterans, both through expanded research and—once FDA-approved—patient access at VHA facilities. Dr. Wiechers, Acting Deputy Assistant Under Secretary for Health for Patient Care Services, expressed confidence that the VHA would be prepared to begin treatment after FDA approval, but did not give a timeline for such access or discuss how widespread these services will be in the VHA system.

Meeting Takeaways:

Senator Sinema summarized the following action items for Congress at the conclusion of the roundtable:

1. Streamline the research process.
2. Fund "protected time" for VA clinicians to conduct research and loosen inclusion/exclusion criteria for study participants while maintaining patient safety.
3. Prepare to scale these treatments across the country.

BrainFutures' Recommendations:

Research and preparation for clinical rollout must proceed simultaneously. With likely FDA approval for the first psychedelic drug within 12 months, there is a narrowing window of opportunity to get it right and meet Veteran demand for these emerging treatments.

1. Congress should ensure that the administration reduces barriers to conducting research by fully implementing the reforms contained in the HALT Fentanyl Act and evaluating research oversight processes at FDA and VA. Congress could hold hearings to explore how FDA, DEA, and VA oversee—and restrict—research on emerging breakthrough treatments such as psychedelics.
2. Congress should ensure that VHA has both the mandate and the resources to ensure readiness for psychedelic therapies on **day one** after approval. VHA should prioritize workforce training, clinical operations and workflows, establishing monitoring systems, and upgrading facilities.

Discussion Themes:

Urgency vs. Bureaucracy: There is a strong tension between the desperate need for new treatments and the slow pace of research, including trials that may lead to FDA approval. This is due to barriers from multiple federal agencies, including:

- DEA, which has not yet enacted the reforms of the HALT Fentanyl Act. Once fully implemented, these reforms will streamline the process for obtaining registration to conduct research with Schedule I drugs, including psychedelics.
- FDA, which oversees and approves clinical trial protocols and is often cited by researchers as a major obstruction.
- VA, which in some locations has blocked researchers from conducting psychedelic clinical trials and does not provide clinicians with “protected time” to conduct research unless significant external funds are secured through grants.

Research Needs: Research is crucial and ongoing, including 24 studies at VA sites, three of which are funded internally. All attendees agreed that research must continue and expand, but major hurdles include a lack of "protected time" for VA researchers to conduct studies (time away from clinical responsibilities), overly restrictive eligibility criteria for clinical trial participants, and bureaucratic barriers from multiple federal agencies.

Entering Clinical Practice: With potential approval for psilocybin coming within 12 months, focus and resources must be allocated to implementation—how to scale these treatments safely and effectively, especially within the VHA system. Key considerations include workforce training and expansion, clinical operations planning, processes for monitoring safety and outcomes, and facilities needs.

Cost vs. Outcome: Participants argued that while treating Veterans in a research context is expensive, the current "pill cocktail" approach is failing. Senator Sheehy called for the VHA to become "obsessed with outcomes.”