

Date of Hearing: April 21, 2026

Chief Counsel: Andrew Ironside

ASSEMBLY COMMITTEE ON PUBLIC SAFETY

Nick Schultz, Chair

AB 1778 (Patterson) – As Introduced February 9, 2026

SUMMARY: Requires testosterone’s classification under California’s Uniform Controlled Substances Act (UCSA) to conform to its classification under the federal Controlled Substances Act, including any future rescheduling or exemption.

EXISTING LAW:

- 1) Lists controlled substances in five “schedules” - intended to list drugs in decreasing order of harm and increasing medical utility or safety - and provides penalties for possession of and commerce in controlled substances. Schedule I includes the most serious and heavily controlled substances, with Schedule V being the least serious and most lightly controlled substances. (Health & Saf. Code, §§ 11054-11058.)
- 2) Classifies testosterone, among other specified substances, as a Schedule III controlled substance. (Health & Saf. Code, § 11056.)
- 3) Makes possession of a non-narcotic Schedule III controlled substance a misdemeanor subject to imprisonment in county jail for up to one year. (Health & Saf. Code, § 11377, subd. (a).)
- 4) Makes possession of a non-narcotic Schedule III controlled substance a felony subject to 16 months, 2 years, or 3 years in county jail where the person has one or more prior convictions for an offense classified as a violent felony or one that requires registration as a sex offender. (Health & Saf. Code, § 11377, subd. (a).)
- 5) Makes possession for sale of a non-narcotic Schedule III substance a felony subject to imprisonment in county jail for 16 months, 2 years or 3 years. (Health & Saf. Code, § 11378.)
- 6) Makes trafficking of a non-narcotic Schedule III substance a felony subject to imprisonment in county jail for 2, 3, or 4 years. (Health & Saf. Code, § 11379.)
- 7) Makes manufacturing, producing, or preparing a non-narcotic Schedule III controlled substance either directly or indirectly by chemical extraction or independently by means of chemical synthesis a felony punishable by imprisonment in county jail for 3, 5, or 7 years and a fine of up to \$50,000. (Health & Saf. Code, § 11379.6, subd. (a).)
- 8) Makes offering to manufacture, produce, or prepare a non-narcotic Schedule III controlled substance either directly or indirectly by chemical extraction or independently

by means of chemical synthesis a felony punishable by imprisonment in county jail for 3, 4, or 5 years. (Health & Saf., § 11379.6, subd. (e).)

FISCAL EFFECT: Unknown

COMMENTS:

- 1) **Author's Statement:** According to the author, “AB 1778 is about ensuring consistency and clarity in our laws. If the federal government changes how testosterone is classified, California should not be stuck operating under outdated rules that create confusion for doctors, pharmacists, and patients. Right now, state law would not automatically adjust if federal law changes, and this opens the door to unnecessary red tape and conflicting standards. AB 1778 simply keeps California aligned with federal scheduling decisions, providing a clear and consistent framework moving forward.”
- 2) **Testosterone:** Testosterone is an androgenic hormone that is essential to the development of male growth and masculine characteristics, which is classified as a Schedule III controlled substance under both federal and California law. Medically, testosterone is currently approved solely for use in men who lack or have low testosterone levels in conjunction with an associated medical condition.¹ Current FDA-approved testosterone formulations include oral, topical gel, transdermal patch, buccal system (applied to upper gum or inner cheek), and injection.² Testosterone is also widely used as part of gender-affirming hormone therapy for transgender men and some nonbinary individuals, where it is considered a medically necessary treatment by major medical organizations.³ At the same time, testosterone and other anabolic steroids are associated with non-medical use, particularly in athletic performance enhancement and bodybuilding. The U.S. Drug Enforcement Administration (DEA) has identified anabolic steroid misuse, including testosterone, as a persistent concern due to risks of cardiovascular harm, liver damage, and hormonal disruption.⁴ Additionally, the World Anti-Doping Agency prohibits testosterone use in competitive sports due to potential misuse for its performance-enhancing effects.⁵ National researchers estimates that between 3 to 4 million individuals misuse anabolic steroids, with use concentrated among young men and often beginning before age 21.⁶ Due to California-specific data being limited, it is unclear how often illegal uses of testosterone may be occurring in California.
- 3) **The California Uniform Controlled Substances Act:** In 1970, Congress passed the Comprehensive Drug Abuse Prevention and Control Act, which established a framework for federal regulation of controlled substances. Title II of the act is the Controlled Substances Act (CSA), which placed controlled substances in one of five “schedules.”

The schedule on which a controlled substance is placed determines the level of restriction imposed on its production, distribution, and possession, as well as the penalties applicable to any improper handling of the substance... [W]hen DEA

¹ https://www.fda.gov/drugs/drug-alerts-and-statements/fda-issues-class-wide-labeling-changes-testosterone-products?aff_id=DAPL4&order=ASC&orderby=post_date

² *Ibid.*

³ <https://www.endocrine.org/clinical-practice-guidelines/gender-dysphoria-gender-incongruence>

⁴ <https://www.dea.gov/factsheets/steroids>

⁵ <https://www.wada-ama.org/en/prohibited-list>

⁶ <https://www.ncbi.nlm.nih.gov/books/NBK538174/>

places substances under control by regulation, the agency assigns each controlled substance to a schedule based on its medical utility and its potential for abuse and dependence.⁷

Substances are added to or removed from schedules through agency action or by legislation.⁸

State laws generally follow the federal scheduling decisions, and “they are relatively uniform across jurisdictions because almost all states have adopted a version of a model statute called the Uniform Controlled Substances Act (UCSA).” (*Id.* at 4.) California adopted the UCSA in 1972. (Stats. 1972, ch. 1407, § 3.) The UCSA generally aligns with the federal government’s scheduling decisions. (See *People v. Ward* (2008) 167 Cal.App.4th 252, 259 [“In the California Uniform Controlled Substances Act, California adopted the five schedules of controlled substances used in federal law and in the Uniform Controlled Substances Act”]; *Williamson v. Bd. Of Medical Quality Assurance* (1990) 271 Cal.App.3d 1343, 1352, fn. 1. [“Effective January 1, 1985, Schedules I through V of the California Uniform Controlled Substances Act were revised so as to generally parallel the five schedules contained in the Federal Controlled Substances Act.”].)

Congress has already classified testosterone as a Schedule III controlled substance under the federal Controlled Substances Act, when it passed the Anabolic Steroids Control Act of 1990.⁹ There appears to be no current federal bills proposing to reschedule or reclassify testosterone. However, in December 2025, the U.S. Food and Drug Administration (FDA) convened an expert panel on testosterone replacement therapy to evaluate its safety, appropriate clinical use, and potential risks, including misuse and overprescription.¹⁰ The panel reflects the FDA is reviewing new evidence on testosterone therapy and considering expanded approved uses, signaling potential shifts in federal regulation such as rescheduling testosterone in the near future.

- 4) **Effect of the Bill:** This bill would provide that the classification of testosterone under the California Uniform Controlled Substances Act conforms to its classification under the federal Controlled Substances Act. Under this bill, if testosterone is rescheduled or exempted under federal law, it would be deemed rescheduled or exempted under state law without further legislative action. Testosterone is classified as a Schedule III controlled substance and is not considered a narcotic. (Health & Saf. Code, § 11056.) As a non-narcotic, Schedule III substance, possession of testosterone without a valid prescription is generally a misdemeanor punishable by up to one year in county jail. (Health & Saf. Code, § 11377, subd. (a).) Possession of testosterone for sale is punishable by imprisonment for up to three years, and sale or transportation is punishable by imprisonment for up to four years. (Health & Saf. Code, §§ 11378-11379, subd. (a).)

In California, testosterone remains lawfully available by prescription, but unlawful possession, distribution, or use without a valid prescription is subject to criminal penalties. While comprehensive statewide data on testosterone misuse is limited, national law

⁷ The Controlled Substances ACT (CSA): A Legal Overview for the 118th Congress, Congressional Research Service (Jan. 19, 2023) p. 2 <<https://crsreports.congress.gov/product/pdf/r/r45948>> [last visited Mar. 28, 2024].

⁸ *Id.* at p. 9.

⁹ <https://www.congress.gov/bill/101st-congress/house-bill/4658>

¹⁰ <https://www.fda.gov/patients/fda-expert-panels/fda-expert-panel-testosterone-replacement-therapy-men-12102025>

enforcement and public health authorities have identified anabolic steroid use, including testosterone, as part of broader illicit drug distribution networks and doping practices.¹¹ The dual status of testosterone, as both an established medical therapy and a substance with potential for misuse, makes in an inherently complicated substance to regulate, especially with growing medical uses being contemplated by the FDA.

By linking state classification to federal law, this bill would effectively delegate future scheduling decisions regarding testosterone to federal authorities, ensuring that California law conforms to any federal reclassification without requiring separate state legislation.

- 5) **Argument in Support:** According to the *California Pharmacists Association*, “Pharmacists in California must comply with both state and federal requirements. When controlled substance schedules are not aligned, even temporarily, it can create confusion about which rules apply, including prescribing limits, storage and security, and recordkeeping. This increases the risk of inadvertent noncompliance, potential enforcement issues, and operational challenges. By ensuring that California law automatically conforms if federal law reclassifies or exempts testosterone from Schedule III, AB 1778 helps eliminate these inconsistencies. This alignment reduces administrative burden, streamlines workflow, and allows pharmacists to focus more on patient care rather than navigating conflicting regulatory frameworks.”
- 6) **Related Legislation:** AB 1612 (Alanis) authorizes law enforcement agencies to transport controlled substances that have been held beyond the applicable retention period for use in ongoing investigations or related proceedings. AB 1612 is set to be heard by the Committee today.
- 7) **Prior Legislation:**
 - a) AB 82 (Ward) Chapter 679, Statutes of 2025, prohibited the reporting of prescriptions for testosterone to the Department of Justice’s Controlled Substance Utilization Review and Evaluation System (CURES), California’s prescription drug monitoring program, and required the removal of existing testosterone prescription records from CURES by January 1, 2027.
 - b) SB 6 (Ashby), of the 2025-2026 Legislative Session, would made xylazine a Schedule III controlled substance under California’s Uniform Controlled Substances Act. SB 6 was held in suspense in the Assembly Appropriations Committee.
 - c) AB 634 (Gonzalez), of the 2025–2026 Legislative Session, would made tianeptine a Schedule I controlled substance under California’s Uniform Controlled Substances Act. AB 634 is pending referral in the Senate Rules Committee.
 - d) SB 1502 (Ashby) was substantially similar to SB 6. SB 1502 was held in the Assembly Public Safety Committee.

¹¹ <https://www.dea.gov/factsheets/steroids>

- e) AB 2018 (Rodriguez), Chapter 98, Statutes of 2024, removed fenfluramine as a controlled substance under the UCSA.
- f) SB 58 (Wiener), of the 2023-2024 Legislative Session, would have made lawful the possession for personal use of specified hallucinogenic substances by persons 21 years of age or older, and would have made lawful the facilitated and supported use of these substances once the state develops a regulatory framework for these activities. The Governor vetoed SB 58.
- g) AB 2246 (Petrie-Norris), of the 2021-2022 Legislative Session, would have, among other things, classified non-FDA approved fentanyl analogs as Schedule I controlled substances. AB 2246 failed passage in this committee.
- h) SB 519 (Wiener), of the 2021-2022 Legislative Session, was substantially similar to SB 58. SB 519 died on the Assembly inactive file.
- i) AB 710 (Wood), Chapter 62, Statutes of 2018 provides that if cannabidiol (CBD) is federally rescheduled or otherwise made a legally prescribable controlled substance, it shall also be legal to prescribe under state law.

REGISTERED SUPPORT / OPPOSITION:

Support

California Pharmacists Association

Opposition

None submitted

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