SENATE COMMITTEE ON BUSINESS, PROFESSIONS AND ECONOMIC DEVELOPMENT

Senator Dr. Aisha Wahab, Chair
2025 - 2026 Regular

Bill No:	AB 1785	**Hearing Date:**	June 8, 2026
Author:	Hoover		
Version:	February 9, 2026		
Urgency:	No	**Fiscal:**	Yes
Consultant:	Sarah Mason		

Subject: California Uniform Controlled Substances Act: online retailer

SUMMARY: Updates the definition of "retail distributor" in the Uniform Controlled Substances Act (UCSA) to include online retailers for purposes of selling ephedrine, pseudoephedrine, norpseudoephedrine, or phenylpropanolamine products (PSE medications), subject to the same reporting requirements and distribution limits.

Existing law:

1) Establishes the UCSA, which divides controlled substances into five schedules ranging with the most serious and heavily controlled substances, classified as Schedule I, to the least serious and most lightly controlled substances, classified as Schedule V, and imposes various reporting and enforcement provisions specific to each schedule. (Health and Safety Code (HSC) §§ 11000 *et. seq.*)

2) Requires any manufacturer, wholesaler, retailer, or other person or entity in California that sells, transfers, or otherwise furnishes PSE medications, or PSE compounds, to any other person or entity to submit a report to the California Department of Justice (DOJ) of all of those transactions. (HSC § 11100(a))

3) Prohibits any person or entity from furnishing a PSE medication to a person under 18 years of age. (HSC § 111100(g))

4) Prohibits a retail distributor from selling, in a single transaction, more than three packages of a product known to contain ephedrine, pseudoephedrine, norpseudoephedrine, or phenylpropanolamine. Prohibits a retail distributor from knowingly selling more than nine grams of those substances in a single transaction, except for pediatric liquid products, as defined. Applies these limits to products that may lawfully be sold over the counter without a prescription under federal law, unless the product has been specifically exempted from the requirements of the federal Controlled Substances Act by the federal Drug Enforcement Administration. (HSC § 111100(g)(3))

5) Defines "retail distributor" as a grocery store, general merchandise store, drugstore, or similar business whose sales of products containing ephedrine, pseudoephedrine, norpseudoephedrine, or phenylpropanolamine are limited to direct sales to customers for personal use, including sales to walk-in customers and other face-to-face transactions. Specifies that a parent company is not a retail distributor if it is not involved in those direct sales. (HSC § 11100(h)(5))

This bill:

1) Updates the definition of “retail distributor”, for purposes of PSE sale limitations, to also include an online retailer.

2) Clarifies that the sale of PSE medications for personal use by a retail distributor can be facilitated via direct in-store sales, or online sales fulfilled via delivery, in-person pickup, or curbside pickup.

3) Makes various technical and conforming changes.

FISCAL EFFECT: This bill is keyed fiscal by Legislative Counsel. According to the Assembly Committee on Appropriations, the Department of Justice reports no significant costs.

COMMENTS:

1. **Purpose.** This bill is sponsored by the Consumer Healthcare Products Association. According to the Author, six states, including California, continue to prohibit online sales of PSE medications, creating unnecessary barriers to healthcare access, while most states (44) have successfully implemented secure online sales channels. The Author states that it still ensures online sales of PSE medications maintain all federal and state mandated security restrictions and that online retailers would still be required to validate a person’s identity to ensure they have not already purchased their legally allowable maximum of PSE. According to the Author, the bill improves access to common cold medicines, especially for people with limited transportation and those who live in rural areas where brick and mortar retailers are not conveniently located.

2. **Background.**

   PSE Medications. Pseudoephedrine is a central nervous system stimulant that serves as an effective nasal decongestant and sinus reliever and is the primary ingredient in many allergy and cold medications. There are derivatives and alternative formulations of pseudoephedrine, including ephedrine, norpseudoephedrine, and phenylpropanolamine, which have similar therapeutic effects. These drugs, also called “PSE medications”, have many therapeutic uses and are commonly used to treat allergies, cold symptoms, asthma, obesity, and other respiratory ailments. It is typically administered either orally or via injection. Popular PSE medications on the consumer market include “Sudafed,” “Claritin-D,” and “Mucinex D.” In addition to their many therapeutic uses, PSE medications are chemical precursors to methamphetamine, a Schedule II controlled substance under both the federal Controlled Substances Act (CSA) and California’s UCSA. As a result, there are a number of state and federal laws which regulate the manufacture, distribution, sale, possession, and usage of PSE medications.

   Ephedrine and Controlled Substance Regulation. Both the federal CSA and California’s USCA classify controlled substances into one of five schedules, and largely mirror one another. Drugs falling within Schedules II through V may be prescribed only by health practitioners in possession of a federal Drug Enforcement

Agency (DEA) registration, and are scheduled according to the drug's potential for abuse and harm. The federal CSA also classifies certain chemicals that, while not designated as controlled substances under the CSA's drug schedule, have been identified as precursors for the manufacture of scheduled drugs. Chemicals included on List I of the CSA have legitimate medical uses but are also crucial ingredients to the manufacture of other drugs included on the CSA's controlled substance schedule. California maintains its own controlled substance schedule under the UCSA. Like the Federal CSA, California's UCSA also contains a list of precursor chemicals which, although not scheduled, are subject to a number of restrictions due to their potential use in the manufacture of more egregious controlled substances.

Regulation of PSE Medicines in California. In California, PSE medications are not a scheduled substance, but they are listed as precursor chemicals under the UCSA. As such, PSE medications are subject to a number of regulations concerning their manufacture, distribution, sale, furnishing, possession and usage. Additionally, PSE medications are considered "List I" substances under the federal CSA.

Many of the recordkeeping, age verification, and distribution limit requirements related to PSE medications resulted from the passage of the Combat Methamphetamine Epidemic Act (CMEA) by the federal government in 2005. Recognizing the potential for PSE medications to be used in the illegal manufacture of methamphetamine, this act established controls on the manufacture, distribution, sale, furnishing, and possession of PSE medications, including reporting requirements and minimum age limits. Specific to retail distributors of PSE medications, the CMEA required that they ensure customers are not furnished with more than three packages, or nine grams, of a PSE medication within a 30-day period. Further, retail distributors must ensure customers purchasing PSE medications are at least 18 years of age. Many of the requirements set out by the CMEA are mirrored in California's USCA, and they helped shape subsequent California legislation concerning PSE medications.

Currently, PSE medications can only be lawfully sold in California by retail distributors who register with the Department of Justice and make periodic reports to the department containing information about PSE medication sales. Additionally, "retail distributors" are limited to a grocery store, general merchandise store, drugstore, or other related entity that sells PSE products directly to consumers. However, online retailers are currently not included under this definition of retail distributor and as a result, are not able to sell PSE medications in California. As a result, the author and sponsors have put forward this bill to include "online retailers" under the wider definition of "retail distributor" under the USCA for purposes of selling PSE medications, and would clarify that such sales can occur either directly in-person, or online via direct delivery to the consumer, in-person pickup, or curbside pickup. Consumers purchasing from an online retailer would still be subject to the same monthly transaction limits as physical retailers and would be subject to the same age verification requirements. Furthermore, online retailers would still be required to retain and report transaction information to the DOJ relevant to PSE medication sales.

3. **Arguments in Support.** The Consumer Healthcare Products Association writes that allowing the online sales of widely used PSE-containing products, like Sudafed, Claritin-D, Allegra-D, Zyrtec-D, and more, this bill will make it easier for consumers to have access to some of the most effective and trusted treatments for cold, allergy, and sinus symptoms. According to the group, "The bill simply ensures that the existing, robust regulatory framework governing the sale of PSE-containing products applies equally to online purchases as it does to traditional in-store transactions. Importantly, all existing consumer safeguards remain fully intact. Online sales would continue to be subject to the requirements of both the federal Combat Methamphetamine Epidemic Act (CMEA) and California state law, including strict per-transaction purchase limits of no more than 3.6 grams per day or 9 grams of PSE per month, and identity verification requirements."

SUPPORT AND OPPOSITION:

Support:

Consumer Healthcare Products Association

Opposition:

None received

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