



MINNESOTA BOARD OF PHARMACY

Report to the Legislature on Changes the Board Proposes to Make to the Controlled Substance Schedules Maintained by the Board in Minnesota Rules. (In compliance with Minnesota Statutes Section 152.02, Subd. 12)

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COST OF REPORT

Minnesota Statutes §3.197 states that a “report to the legislature must contain, at the beginning of the report, the cost of preparing the report, including any costs incurred by another agency or another level of government”. The estimated cost of preparing this report was **\$200.00**. That is the approximate value, in terms of salary and benefits, of the time that Board staff spent communicating with manufacturers, administering any exemptions, and preparing the report.

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Introduction

The Board of Pharmacy (Board) is submitting this report to the Legislature in compliance with Minnesota Statutes §152.02, subdivision 12. That section states, in part:

"The state Board of Pharmacy shall annually submit a report to the legislature on or before December 1 that specifies what changes the board made to the controlled substance schedules maintained by the board in Minnesota Rules, parts 6800.4210 to 6800.4250, in the preceding 12 months. The report must also specify any orders issued by the board under this subdivision. The report must include specific recommendations for amending the controlled substance schedules contained in subdivisions 2 to 6, so that they conform with the controlled substance schedules maintained by the board in Minnesota Rules, parts 6800.4210 to 6800.4250, and with the federal schedules."

The Board reviewed and approved this report at its October 22, 2025 meeting.

2025 Scheduling Changes

The Board did not engage in rulemaking to enact any changes to the controlled substance schedules found in Minnesota Rules Chapter 6800 during calendar year 2025. Nor did it issue any scheduling orders in 2025.

To make the scheduling process timelier and more efficient in the future, the Board of Pharmacy is currently evaluating other statutory change options and strategies. The Board believes that eliminating unnecessary technical and procedural work both for the agency, and the legislative process is a worthwhile endeavor as it pertains to this matter.

Board staff have evaluated the state's controlled substance schedules in Minnesota Statutes §152.02 and compared this information to the federal schedules as published in the DEA Orange Book as of October 2025 in an effort to identify newly scheduled chemicals or drugs.

The Board has identified several Schedule I changes at the Federal level involving opioid variants and benzodiazepines. Schedule I substance properties can be generally described as follows:

- There is no accepted safety evaluation for their use.
- There are no recognized or approved medical treatment indications in the US
- These substances are highly likely to be misused or abused.

The Board has drafted and will propose controlled substance scheduling changes for Minnesota Statutes §152.02 legislation during the 2026 Session as found in **Appendix 1**. While these changes are substantially technical, they have a profound impact on ensuring the safety of the citizens of the state. These items as scheduled in the chapter above are of critical importance for law enforcement and the judicial system in the state of Minnesota.

Please feel free to engage the agency in any dialogue or questions about this report or the Board's considerations and efforts as they pertain to controlled substances scheduling by contacting the author of the report.

Appendix 1

List of changes proposed to Controlled Substance Schedules in Minnesota

Schedule I additions

"High abuse potential with no accepted medical use; medications within this schedule may not be prescribed, dispensed, or administered"

- ortho-methyl methoxyacetyl fentanyl;
- 2'-fluoro ortho-fluorofentanyl;
- beta-methylacetyl fentanyl; (N-phenyl-N-(1-(2-phenylpropyl)piperidin-4-YL)acetamide)
- meta-fluorofuranyl fentanyl; (N-3-fluorophenyl) N-(1-phenethylpiperidin-4-YL)furan-2-carboxamide
- ortho-chlorofentanyl; (N-(2-chlorophenyl)-N-(1-phenethylpiperidin-4-YL)propionamide
- ortho-methylcyclopropylfentanyl; (N-2-methylphenyl)-N-(1-phenethylpiperidin-4YL) cyclopropanecarboxamide)
- para-fluoro valeryl fentanyl; (N-(4-fluorophenyl)-N-(1-phenethylpiperidin-4YL)pentanamide)
- para-chlorofentanyl; (N-4-chlorophenyl)-N-(1-phenethylpiperidin-4-YL) propionamide)
- tetrahydrothiofuranyl fentanyl; (N-(1-phenethylpiperidin-4-YL)-N-phenyltetrahydrothiophene-2-carboxamide)
- diclazepam; (7-chloro-5-(2-chlorophenyl)-1-methyl-1,3-dihydro-2H-benzo[e][1,4]diazepin-2-one)
- flualprazolam [(12) 8-chloro-6-(2-fluorophenyl)-1-methyl-4H-benzo[f][1,2,4]triazolo[4,3-a][1,4] diazepine
- eutylone; [(40) 1-(1,3-benzodioxol-5-yl)-2-(ethylamino)butan-1-one]
- methiopropamine; (N-methyl-1-(thiophen-2-yl)propane-2-amine)
- meso carb; (N-phenyl-N'-(3-(1-phenylpropan-2-yl)-1,2,3-oxadiazol-3-ium-5-yl)carbamimidate)
- MPHP; (43) 4'-methyl-alpha-pyrrolidinohexiophenone
- alpha-PHP; alpha-pyrrolidinohexanophenone
- PV-8; (alpha-pyrrolidinoheptaphenone)

- Amineptine; (7-[(10,11-dihydro-5H-dibenzo[a,d]cyclohepten-5-yl)amino]heptanoic acid)
- Dipenylone; (1-(1,3-benzodioxol-5-yl)-2-(dimethylamino) pentan-1-one (N,N-dimethylpentylone)
- N-pyrrolidino metonitazene; (2-(4-methoxybenzyl)-5-nitro-1-(2-(pyrrolidin-1-yl) ethyl)-1H-benzimidazole)
- N-pyrrolidino protonitazene; (5-nitro-2-(4-propoxybenzyl)-1-(2-(pyrrolidin-1-yl) ethyl)-1H-benzimidazole)
- MMB-chmica, AMB-chmica; (methyl 2-(1-(cyclohexylmethyl)-1H-indole-3-carboxamido)-3-Methylbutanoate)

Schedule IV additions/deletions

"Abuse potential less than Schedule II or Schedule III but more than Schedule V medications; these medications have an accepted medical use and may be prescribed, dispensed, or administered"

- brexanolone (3a-Hydroxy-5a-pregnan-20-one)
- daridorexant
- lemborexant
- remimazolam (4H-Imidazol[1,2-a][1,4]benzodiazepine-4-propionic acid)
- zuranolone
- Delete: Any material, compound, mixture, or preparation which contains any quantity of the following substance including its salts, isomers, and salts of such isomers, whenever the existence of such salts, isomers, and salts of isomers is possible: fenfluramine
 - *(Fenfluramine was removed from federal scheduling as of December 2022)*

Schedule V additions/deletions

"Medications with the least potential for abuse among the controlled substances; these medications have an accepted medical use and may be prescribed, dispensed, or administered "

ganaxolone; (3-alpha-hydroxy-3-beta-methyl-5-alpha-pregnan-20-one);

brivaracetam; (BRV; UCB-34714; Briviact)

lasmiditan; (2,4,6-trifluoro-N-(6-(1-methylpiperidine-4-carbonyl)pyridine-2-yl)-benzamide)

(end)