MEDICAL CANNABIS IS NOW FEDERAL SCHEDULE III

What the April 2026 order covers, what it does not, and how the bill is drafted to work either way.

Connecticut Cannabis Reform Project | Current as of August 9, 2026

WHAT HAPPENED

On April 22–23, 2026 the Acting Attorney General signed a final order, effective April 28, 2026, moving two categories from Schedule I to Schedule III of the Controlled Substances Act: FDA-approved drug products containing marijuana, and marijuana subject to a qualifying state-issued license to manufacture, distribute or dispense marijuana for medical purposes.

It was issued under the President's Executive Order of December 18, 2025 on increasing medical marijuana and cannabidiol research, using the treaty-based pathway at 21 U.S.C. § 811(d)(1), which permits expedited rescheduling without ordinary notice and comment.

Adult-use cannabis remains Schedule I. A separate DEA administrative hearing on broader rescheduling ran June 29 to July 15, 2026. Post-hearing briefs are due August 17, 2026. No decision has issued.

1. Exactly What Moved, and What Did Not

Category	Federal status as of August 9, 2026
FDA-approved drug products containing marijuana	Schedule III
Marijuana subject to a qualifying state-issued medical license to manufacture, distribute or dispense	Schedule III
Adult-use cannabis, regardless of state law	Schedule I
Medical marijuana outside a licensed state program	Schedule I
Unlicensed bulk cannabis and marijuana extract	Schedule I
Synthetic tetrahydrocannabinols	Schedule I
Hemp as defined at 7 U.S.C. § 1639o	Unaffected
Marinol, Syndros and other previously rescheduled products	Unaffected

Conditions attached to the medical category

- State-licensed medical entities must submit their state credentials to DEA for federal registration, with a committed six-month review period.
- Applications should be filed within sixty days to preserve the right to operate during agency review.
- Registered facilities must accommodate DEA access rights.
- Prescribers and pharmacists dispensing must meet DEA controlled-substance requirements.
- Section 280E no longer disallows ordinary business deductions for qualifying medical operators as of April 22, 2026.

> **THE ORDER IS UNDER CHALLENGE**
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> Three petitions are pending in the D.C. Circuit: Smart Approaches to Marijuana v. Department of Justice, filed May 4, 2026; a joint petition by Nebraska, Indiana and Louisiana filed May 22, 2026 arguing the order violates the Administrative Procedure Act and exceeds authority under the Controlled Substances Act; and a third petition. **The bill does not rest on Schedule III persisting.** Section 10 provides that if any federal order affecting the classification of cannabis is amended, repealed or judicially invalidated, the act remains in full force as a matter of state law.

2. What This Supports

Federal recognition of medical use. Schedule III is by definition a classification for substances with accepted medical use. The federal government has now said so of state-licensed medical cannabis. Any argument premised on medical cannabis not being medicine is materially weaker than it was in February 2025.

It is an action of the current federal administration. The rescheduling was directed by executive order and executed by the Justice Department, framed around expanding access to medical treatment options and supporting research. Support for medical cannabis cultivation reform is consistent with current federal policy rather than opposed to it. That pairs with the psychedelic-therapy pilot at § 17a-484g, which the General Assembly created in 2022 and expanded in 2026 for veterans, retired first responders and direct care health care workers.

Section 280E relief. Connecticut's 45 licensed medical outlets can now deduct ordinary business expenses on their medical lines. A newly deductible medical line of business is a better place to add a product category than a 280E-burdened one, which bears on the seed and clone provisions.

3. What This Complicates

A. License framing — addressed in the current draft. The federal order attaches to a state-issued license to manufacture, distribute or dispense. An earlier version of this proposal created a cultivating caregiver *registration* to cultivate and transfer. Those are different words, and in a federal scheduling context the words do real work. The current draft issues a **license**, and § 4(b) states that it is a state-issued license to cultivate, manufacture and distribute cannabis for medical purposes. Whether a caregiver license qualifies under the federal order remains a legal question for counsel and the Office of Legislative Research; the drafting is aligned so that the question can at least be asked.

B. DEA access rights against the privacy provision. Federal Schedule III coverage runs through DEA registration, and registrants must accommodate agency access to registered premises. Section 7(d) of the bill provides that nothing in the act authorizes entry into a dwelling or its curtilage without a warrant or written consent. A licensee who registers with DEA accepts federal inspection authority over a private residence; one who does not keeps the state privacy protection and stays Schedule I. The bill resolves this by leaving the choice to the licensee: § 7(e) makes federal registration elective and provides that neither holding nor applying for a state license is evidence of unlawful conduct.

C. The prescription mismatch is unresolved. Schedule III substances are lawfully dispensed on a valid prescription by a DEA-registered prescriber. Connecticut uses a written certification under chapter 420f, which is not a prescription. How state certification regimes interact with Schedule III dispensing rules has not been resolved. **Schedule III does not make Connecticut's program federally compliant.**

D. Home growers remain Schedule I either way. Patients cultivating under § 21a-408d(b) hold no license, and adults cultivating under § 21a-278c fall in the adult-use category the order expressly excludes. The cultivation location provisions in §§ 2 and 3 are unaffected by rescheduling. Their justification is privacy, energy cost and legislative authority — not federal status.

4. Accurate and Inaccurate Statements

For a legislator, staffer or advocate answering questions about federal status. The left column is supportable on the current record; the right column is not.

Accurate	Not accurate
As of April 2026 the federal government places state-licensed medical cannabis in Schedule III, a classification reserved for substances with accepted medical use.	“Cannabis is now federally legal”, or that Schedule III makes Connecticut's program federally compliant. Neither is true.
The rescheduling was directed by executive order and executed by the Justice Department, so the bill is consistent with current federal policy.	That rescheduling settles the question. Three petitions challenging the order are pending in the D.C. Circuit.
Adult-use remains Schedule I. The broader DEA hearing concluded July 15 and briefs are due August 17, 2026. No decision has issued.	That all cannabis is Schedule III. It is not.
The bill uses a license so that Connecticut's caregivers sit inside the licensed medical system that received federal recognition.	That caregivers are automatically Schedule III. Whether the license qualifies is unresolved.

5. Sources

Fact	Source	Status
Final order signed April 22–23, 2026; effective April 28, 2026	DOJ Office of Public Affairs release, April 23, 2026	Verified
Two categories moved	DOJ release; 91 FR (Apr. 28, 2026) final rule	Verified
Authority: 21 U.S.C. § 811(d)(1) treaty-based expedited pathway	Federal Register final rule	Verified
Issued under Executive Order of December 18, 2025	DOJ release; EO 14370	Verified
Adult-use remains Schedule I; synthetics and hemp unaffected	Final rule	Verified
DEA credential submission, six-month review, sixty-day filing window, facility access	Practitioner analyses	As reported — confirm against the final rule
280E relief effective April 22, 2026	Practitioner analyses	As reported — confirm with a tax professional
Broader hearing June 29 – July 15, 2026; briefs due August 17, 2026	91 FR 22777 (Apr. 28, 2026); DEA	Verified
Three D.C. Circuit petitions	Practitioner tracking	As reported — confirm docket numbers
Whether a caregiver license qualifies as a state-issued license under the order	—	UNRESOLVED — a question for counsel and OLR

Current as of August 9, 2026. Post-hearing briefs in the broader rescheduling proceeding are due August 17, 2026 and litigation over the April order is pending; federal cannabis law is moving quickly and current status should be confirmed before any hearing. This document is advocacy and policy analysis. It is not legal advice and its author is not an attorney. Statutory citations were verified against the current General Statutes on August 9, 2026.