The Combat Meth Act of 2005

Questions & Answers

Q. What is the Combat Methamphetamine Epidemic Act of 2005?

A. The Combat Methamphetamine Epidemic Act of 2005 (CMEA) was signed into law on March 9, 2006 to regulate, among other things, retail over-the-counter sales of ephedrine, pseudoephedrine, and phenylpropanolamine products. Retail provisions of the CMEA include daily sales limits and monthly purchase limits, placement of product out of direct customer access, sales logbooks, customer ID, employee training, and self-certification of regulated sellers. The CMEA is found as Title VII of the USA PATRIOT Improvement and Reauthorization Act of 2005 (Public Law 109-177).

Q. Why was the CMEA passed?

A. Ephedrine, pseudoephedrine, and phenylpropanolamine are precursor chemicals used in the illicit manufacture of methamphetamine or amphetamine. They are also common ingredients used to make cough, cold, and allergy products. Methamphetamine laboratories have been found in homes, cars, hotel rooms, storage facilities – these are generally referred to as “small toxic labs.” Passage of the CMEA was accomplished to curtail the illicit production of methamphetamine and amphetamine. States that have enacted similar or more restrictive retail regulations have seen a dramatic drop in small toxic labs.

Q. What is methamphetamine?

A. Methamphetamine is a powerfully addictive drug that severely affects users’ minds and bodies, ruins lives, and endangers communities and the environment. Chronic use can lead to extremely violent behavior, the neglect of user’s children, and an inability to cope with the ordinary demands of life. Unfortunately, methamphetamine is unique in that making it is easy but dangerous, posing the risk of explosion, exposing families, children, and neighborhoods to toxic chemicals.

Q. Is methamphetamine production and abuse a nationwide problem?

A. Methamphetamine or “meth” has become a tremendous challenge for the entire nation. A clandestine methamphetamine laboratory has been found in every state over the past five years. A July 18, 2006, National Association of Counties Survey found that meth is the leading drug-related local law enforcement problem in the country. The survey of 500 county law enforcement officials in 44 states found that meth continues to be the number one drug problem – more counties (48%) report that meth is the primary drug problem – more than cocaine (22%), marijuana (22%) and heroin (3%) combined. In addition, according to the survey, crimes related to meth continue to grow – 55% of law enforcement officials report an increase in robberies or burglaries in the last year and 48% report an increase in domestic violence.

Q. Does methamphetamine production have an impact on the environment?

A. Clandestine methamphetamine laboratories pose a significant danger in the community, as they contain highly flammable and explosive materials. Additionally, for each pound of methamphetamine produced, five to seven pounds of toxic waste remain, which is often introduced into the environment via streams, septic systems, and surface water run-off.

Q. When does the CMEA go into effect?

A. Some of the provisions of this new law became effective immediately (March 9, 2006) and others became effective on April 8, 2006. Other provisions became effective September 30, 2006. Congress specified these times in the statute itself, and DEA has no discretion regarding the implementation dates. DEA will work with retailers to ensure that they are able to comply with the law and will seek to ensure that the rule is effectively and rationally implemented. DEA will be available to answer questions retailers may have in order to ensure a smooth transition. Questions relating to the CMEA may be directed to the DEA Policy and Liaison Section at 202-307-7297.

Q. Do the Combat Meth Act and the implementing regulations preempt state laws?

A. State laws vary considerably. Some parts of a State law may be less stringent than the CMEA requirements; other parts may be more stringent. The CMEA does not preempt those requirements under State laws/regulations that are more stringent than the Act’s requirements. Simply put, all persons subject to the CMEA must comply with the Act and the laws in the State(s) in which they sell scheduled listed chemical products at retail. Where the CMEA is less stringent than a State law (e.g., the State limits sales to licensed pharmacists or pharmacy technicians where the Act does not), the State requirements continue to be in force. If there are State requirements that are less stringent than the CMEA provisions (e.g., exemptions of some products), the Act supersedes the provisions.

Q. As a retailer, what must I do in order to continue to sell products containing ephedrine, pseudoephedrine, or phenylpropanolamine?
A. On and after September 30, 2006, retailers, or regulated sellers, must be "self-certified" before selling these products and must comply with all provisions of the CMEA relating to employee training, product placement, photo identification of customers, sales logbooks, and other procedures listed in the law. DEA has provided detailed training instructions for use in explaining your obligations on its website at www.DEAdiversion.usdoj.gov.

Q. How can I self-certify?

A. Businesses wishing to self-certify can do so online at www.DEAdiversion.usdoj.gov. The process is simple and requires providing the following information:

1. DEA Number (if applicable)
2. Tax ID
3. Business name
4. Address Line 1
5. Address Line 2
6. City
7. State
8. Zip Code
9. Point of Contact (POC) Last Name
   a. ephedrine
   b. pseudoephedrine
   c. phenylpropanolamine
10. POC First Name
11. POC Middle Initial
12. POC Email Address
13. POC Telephone Number
14. Number of employees trained
15. Total number of employees at location
16. Type of establishment (e.g. pharmacy)
17. Products handled

Procedures are also available for chains to register multiple locations in a single process. Information regarding the chain self-certification process may be obtained by contacting the DEA Registration Unit at 800-882-9539.

Q. Where do these products need to be kept in a retail store?

A. You must store products containing ephedrine, pseudoephedrine, or phenylpropanolamine where your customers do not have direct access to the product: either behind the counter or in a locked cabinet.

Q. What about this logbook requirement?

A. Regulated sellers are required to maintain a logbook, written or electronic, to record sales of products containing ephedrine, pseudoephedrine, or phenylpropanolamine. The seller must enter into the logbook the name of the product, and quantity sold. The customer must write or enter into the logbook their name, address, date, and time of sale. The customer must also sign the logbook. You may not sell the product unless these requirements are met.

Q. What identification must a customer provide to purchase these products?

A. Purchasers must show a photo identification issued by a state or federal government. If the purchaser does not have such a photo ID, other forms of identification can be used. See www.deadiversion.usdoj.gov/meth/index.html for a list of alternate forms of identification. You may not sell the product unless your customer provides identification. The regulated seller must verify that the customer's name matches the name written in the logbook by that individual and that the date and time of sale are correct.

Q. How much product can I sell, and how much can my customer buy?

A. The CMEA sets daily sales limits and monthly sales and purchase limits. The CMEA sets a daily sales limit of 3.6 grams of these products to each customer, regardless of the number of transactions. The CMEA also sets monthly sales limits for mobile retail vendors (persons who sell product from movable or temporary stands or locations) and mail order distributors. The CMEA also sets a monthly purchase limit of 9 grams per customer each month. All sales and purchase limits pertain to solid and liquid forms of ephedrine, pseudoephedrine, and phenylpropanolamine products. As an example of a daily sales limit, regulated sellers may sell no more than 146 tablets of a 30mg pseudoephedrine (as hydrochloride) product per day. Detailed equivalency tables for additional strengths and dosage forms are available at www.DEAdiversion.usdoj.gov.

Q. Isn't there an exemption for providing ID and signing the logbook?

A. If a person buys a single package containing not more than 60 milligrams of pseudoephedrine (one 60 mg tablet or two 30 mg tablets), the individual does not have to provide identification or sign the logbook. This exemption does not apply to ephedrine or phenylpropanolamine. This exemption applies to logbook and identification requirements only; regulated sellers selling these single packages of pseudoephedrine must self-certify with DEA and comply with all other requirements of CMEA.