

# 2025 Midwest HIDTA Threat Assessment

Program Year 2026

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# **Table of Contents**

Scope	3
Executive Summary	4
The Midwest HIDTA Region	5
Drug Threats	9
Overview of All Drug Threats	
Fentanyl	
Methamphetamine	16
Cocaine	20
Heroin	23
Marijuana	26
Controlled Prescription Drugs	30
Psychedelics	34
New Psychoactive Substances	37
Source Considerations	39
Drug Trafficking Organizations	40
Overview of All Drug Trafficking Organizations	40
International Drug Trafficking Organizations	
Multi-State Drug Trafficking Organizations	
Local Drug Trafficking Organizations	
Tren de Aragua	
Intelligence Gaps	51
Source Considerations	51
Money Laundering Organizations	52
Overview of All Money Laundering Organizations	
Affiliations and Membership	
Activities and Methods	52
Intelligence Gaps	52
Source Considerations	53
Drug-Related Poisoning Deaths in the Midwest HIDTA Region	54
Centers for Disease Control and Prevention WONDER Data	54
Intelligence Gaps	
Source Considerations	
Outlook	57
Appendices	
Appendix I: Methodology	
Appendix II: Explanation of Sources	
Appendix III: Midwest HIDTA Initiatives	
Appendix IV: 2025 Public Health Survey Participating Agencies	
Appendix V: State Maps	
Appendix VI: State-Level Data Tables	
Appendix VII: Drug Trafficking Organization Summary Table	
Appendix VIII: Drug Trafficking Organization Summary Table by State	
Appendix IX: Money Laundering Organization Summary Table by State	
Appendix X: List of Tables and Figures	
Appendix XI: Endnotes	82

# I. Scope

The 2025 Midwest High Intensity Drug Trafficking Area (HIDTA) Threat Assessment<sup>a</sup> identifies current and emerging illicit drug trends within the region's seven-state area. It strives to deliver accurate and timely strategic intelligence to assist law enforcement executives and other officials in the development of drug enforcement strategies to ensure the safety of our communities. This document provides an illicit drug threat overview with respect to the abuse, transportation, and organizations involved in drug trafficking. This document fulfills the statutory and grant requirements issued by the Office of National Drug Control Policy (ONDCP), and has been approved by the Midwest HIDTA Executive Board.

<sup>&</sup>lt;sup>a</sup> The "2025 Midwest HIDTA Threat Assessment" is being published for the 2026 Program Year.

# II. Executive Summary

# Overview

Considering its nexus to drug poisoning deaths, fentanyl<sup>b</sup> is still the greatest drug threat to the Midwest HIDTA region. <sup>c</sup> This is evident in both the Midwest HIDTA's Law Enforcement Survey (LES) and Public Health Survey (PHS), along with Performance Management Process (PMP) data reported by Midwest HIDTA law enforcement initiatives. Methamphetamine and cocaine are the region's second and third-greatest drug threats, respectively. Polydrug drug trafficking organizations (DTOs) remained the same percentage from 2023 to 2024, with just over one in four DTOs being polydrug. The Midwest HIDTA's central location within the continental United States (U.S.) and extensive network of roadways make the region ideal for DTOs and criminal enterprises intent on moving drugs into or through the region, to other destinations.

Key findings derived from the data sources listed in Appendix I are presented and discussed in detail throughout this document. A description of the drug and DTO threats facing the Midwest HIDTA region include, but are not limited to, the following:

- ❖ Methamphetamine, marijuana, and fentanyl are the most widely available and widely used drugs in Midwest HIDTA.
- ❖ The trend of adulterating the region's illicit drug supply with fentanyl and other synthetic opioids continues, as reported by both law enforcement and public health agencies.
- ❖ Privately owned vehicles, the United States Postal Service (USPS), and commercial parcel services (e.g. FedEx, UPS) are the most common methods used by DTOs to traffic drugs into and throughout Midwest HIDTA.
- ❖ Midwest HIDTA law enforcement initiatives documented 1,046 DTOs and four money laundering organizations (MLOs) operating within the region in 2024, with 8,985 members and 1,399 leaders identified.¹
- ❖ DTOs in Midwest HIDTA utilize technologies to facilitate communication, obtain payment, and monitor drug courier location. These platforms include encrypted messaging applications and social media.
- ❖ Midwest HIDTA experienced a 10 percent decrease in drug-related poisoning deaths from 2022 to 2023. Sixty-nine percent of these deaths involved opioids including fentanyl and heroin.<sup>2 d</sup>

b Unless indicated otherwise, the term fentanyl refers to fentanyl and all its analogs which are manufactured illicitly and not pharmaceutically

<sup>&</sup>lt;sup>c</sup> The term drug poisoning deaths (often interchangeably referred to as drug overdose deaths) is derived from the International Classification of Diseases, Tenth Revision (ICD-10) codes which are used by the Centers for Disease Control (CDC) to report deaths by drug exposure.

 $<sup>^{\</sup>rm d}\,{\rm A}$  drug poisoning death may involve more than one drug type.

# III. The Midwest HIDTA Region

The Midwest HIDTA region is a vast and varied area with equally diverse drug threats. The region spans more than 428,000 square miles, making it the largest by geographic area of the 33 HIDTAs operating in the U.S. The Midwest HIDTA region consists of 73 designated counties that fall within the following seven states: Iowa (IA), Illinois (IL), Kansas (KS), Missouri (MO), Nebraska (NE), North Dakota (ND), and South Dakota (SD). Midwest HIDTA has a total of 60 initiatives (see Appendix III for complete list, by state), including 43 drug enforcement task forces, 6 domestic highway interdiction initiatives, 5 intelligence initiatives, and 6 support initiatives, including Management and Coordination. The 60 initiatives include 183 participating agencies from federal, state and local law enforcement. A map of the Midwest HIDTA region is shown in Figure 1 depicting HIDTA designated counties, interstate highway systems and ports of entry with Canada. Additional state maps may be found in Appendix V: State Maps.

The U.S. Census Bureau estimates the population of the area comprising Midwest HIDTA to be over 16.18 million in 2024. The region is comprised of metropolitan districts, medium and small cities, and many rural areas. The most populous urban centers are St. Louis, MO-IL; and Kansas City, KS-MO; which rank 23<sup>rd</sup> and 31<sup>st</sup>, respectively, amongst the largest metropolitan statistical areas in the United States. Omaha-Council Bluffs, NE-IA; Des Moines, IA; and Wichita, KS, are other cities ranking in the top 100 most populated metropolitan statistical areas, according to 2023 U.S. Census Bureau information. However, less than half of the overall population of Midwest HIDTA resides in these large urban areas. Table 1 presents information on the most populous metropolitan areas in the Midwest HIDTA region.

Table 1. 2023 U.S. Population Ranking of the Most Populated Metropolitan Statistical Areas in the Midwest HIDTA Region.<sup>3</sup> e

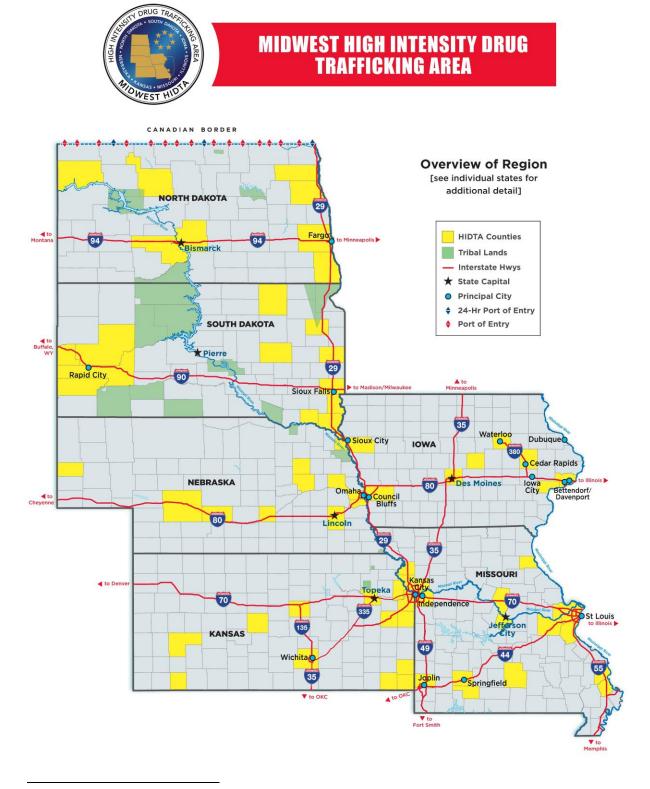
2023 Ranking of the Most Populated Metropolitan Areas						
U.S. Population Ranking City, State 2023 Estimated 1						
23	St. Louis, MO-IL	2,796,999				
31	Kansas City, KS-MO	2,221,343				
56	Omaha-Council Bluffs, NE-IA	983,969				
81	Des Moines, IA	737,164				
90	Wichita, KS	652,939				

Considered the heartland of the country, the population of Midwest HIDTA is diverse, with all races, classes, genders, religions, and socioeconomic statuses represented. Therefore, criminal organizations have the potential to assimilate within a community and conceal their operations to avoid detection.

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<sup>&</sup>lt;sup>e</sup> 2024 metropolitan statistical area data from the U.S. Census Bureau is not yet available.

Figure 1. Overall Map of the Midwest HIDTA Region Depicting HIDTA Designated Counties, Interstate Highway System and Ports of Entry with Canada. f,g



f Individual state maps may be found in Appendix V

g Although not depicted on the map, Madison, St. Clair, and Rock Island, Illinois are HIDTA designated counties within the Midwest HIDTA region.

# **Drug Transportation Methods**

Midwest HIDTA's assessment of the LES, found that private passenger vehicles, the USPS, and commercial mailing services are the primary drug transportation methods used by DTOs to transport illicit drugs into and throughout the Midwest HIDTA region. The Midwest HIDTA region contains more than 4,300 miles of interstate highways and an international border stretching over 300 miles. The key transportation routes are Interstate (I)-70, I-80, I-90, I-94, I-29, and I-35.

With its central location, there are a number of transportation hubs in Midwest HIDTA allowing easy access to other points in the United States. For instance, Kansas City, KS-MO, located near the geographic center of the United States and at the intersection of several of the nation's busiest interstate highways (I-29, I-49, I-35, I-70), is a major transit point for the transportation of drugs and drug proceeds to and from significant market areas across the country.

Furthermore, the convergence of I-44, I-55, I-64, and I-70 in St. Louis, MO, provides easy access for the transportation of drugs and bulk cash via commercial and privately-owned vehicles. Other smaller transportation hubs include Fargo, ND, where I-29 and I-94 intersect; and Des Moines, IA, where I-80 and I-35 intersect. Given the 310-mile border, including the 18 ports of entry North Dakota shares with Canada, there is an expansive roadway infrastructure and a large international border for drug traffickers to exploit.

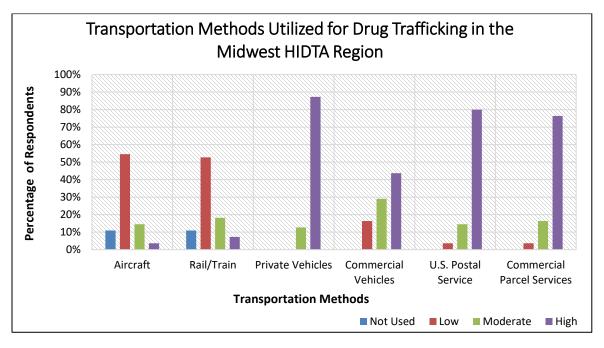
I-35 is a particularly useful transportation route for Mexican DTOs.<sup>4</sup> Converging with I-70 and I-29 in Kansas City, I-35 covers approximately 1,568 miles in the U.S., from Laredo, Texas, to Duluth, Minnesota, and runs directly through Midwest HIDTA in Kansas, Missouri, and Iowa. Following I-35 into Mexico, it becomes Federal Highway 85, which runs southward from Nuevo Laredo, just across the Mexican border from the U.S., through Monterrey, Ciudad Victoria, Pachuca, and to the southern edge of Mexico City.<sup>5</sup>

When asked to indicate the levels at which various transportation methods are utilized in Midwest HIDTA to traffic drugs, 87 percent of Midwest HIDTA initiatives indicated that privately owned vehicles are used at a high level, the highest percentage for any transportation method. Law enforcement initiatives claimed that traffickers often attempt to conceal contraband within natural voids or man-made compartments throughout the vehicle. Traffickers also reportedly concealed contraband within the tires, gas tanks, cardboard boxes, storage totes, and various pieces of luggage within the vehicle.

The second and third-most utilized transportation methods were the USPS (80 percent) and commercial parcel services (76 percent). Commercial vehicles, such as tractor-trailers, were also frequently used to transport drugs in Midwest HIDTA, with 44 percent of Midwest HIDTA initiatives reporting their use as high and 29 percent reporting usage as moderate. Drugs transported via tractor-trailer may be hidden within legitimate cargo items to avoid law enforcement detection or found in the cabin of the tractor. Midwest HIDTA, as a large transshipment area, sees the movement of vehicles such as cars, trucks and SUVS on tractor-

trailers. Drugs continue to be discovered in vehicles that are being hauled by tractor-trailer within the region. The use of aircraft and rail/trains were also utilized, although less than the aforementioned methods. Figure 2 depicts the most commonly used drug transportation methods in the Midwest region, according to Midwest HIDTA initiatives.

Figure 2. LES: Transportation Methods Utilized for Drug Trafficking in the Midwest HIDTA Region.<sup>6</sup>



The roadways that traverse Midwest HIDTA are vital to drug trafficking organizations. The 4,300 miles of interstate connecting the Midwest region to the remainder of the U.S. are an enormous challenge to law enforcement interdiction efforts. Ninety-three percent of Midwest HIDTA initiatives reported a high level of interstate highway use by DTOs. U.S. highways (82 percent) and state highways/rural roads (55 percent) were also reported by Midwest HIDTA initiatives to be highly used by DTOs to traffic drugs.

# IV. Drug Threats

# 1. Overview of All Drug Threats

The Midwest HIDTA assesses that fentanyl, methamphetamine, heroin, cocaine, and marijuana are the primary drug threats to the region. Drug trafficking activities in the Midwest HIDTA region pose significant threats to public health and safety. These activities are a driving force of both violent and property crimes. Midwest HIDTA evaluated the threat posed by each drug type in order to determine a ranking of drug threats. The evaluation consisted of Midwest HIDTA initiative responses to the LES and public health partner responses to the PHS, as well as drug trend and other related information collected over the past 12 months. Midwest HIDTA initiatives were asked to consider the nexus of the drug type to violent and property crimes when determining their rankings. Secondary factors included drug availability, abuse, poisoning rate, and related fatalities. PHS respondents were asked to consider the greatest drug threat to their areas over the past 12 months. Upon the evaluation of these criteria, the Midwest HIDTA rankings of drug threats by drug type are represented in Table 2.

Table 2. Midwest HIDTA Threat Assessment: Drug Threat Ranking.h

	Drug Type	Availability	Use	Characteristics
1	Fentanyl	High	High	Major contributor to drug poisoning deaths; violent and property crime
2	Methamphetamine	High	High	Primary contributor to both violent and property crime
3	Cocaine	Moderate	Moderate	Increase in region and opioid mixtures continue to impact drug poisonings
4	Heroin (Other Opioids)	Moderate	Moderate to Low	Contributor to drug poisoning deaths
5	Marijuana	High	High	Contributor to violent crime
6	Controlled Prescription Drugs	Moderate	Low to Moderate	Opioids constitute majority of abuse
7	Psychedelics (e.g. MDMA, LSD, psilocybin mushrooms)	Moderate to Low	Moderate	Increasing in the region
8	New Psychoactive Substances (e.g. synthetic cathinones and cannabinoids)	Low	Low	Materials soaked in NPSs often mailed into jails/prisons

<sup>&</sup>lt;sup>h</sup> Arrows indicate the movement of drug types within the ranking of drug threats.

As indicated above, an important factor in the determination of threat ranking is the availability of the drug in the Midwest HIDTA region. LES respondents ranked methamphetamine as more available than any other drug type. In fact, 98 percent of survey respondents indicated that methamphetamine is highly available in their respective AORs. By comparison, 89 percent of respondents indicated marijuana as highly available and 80 percent of respondents designated fentanyl pills as highly available. Figure 3 shows the total number of LES responses indicating "low," "moderate," and "high" availability for each drug type.

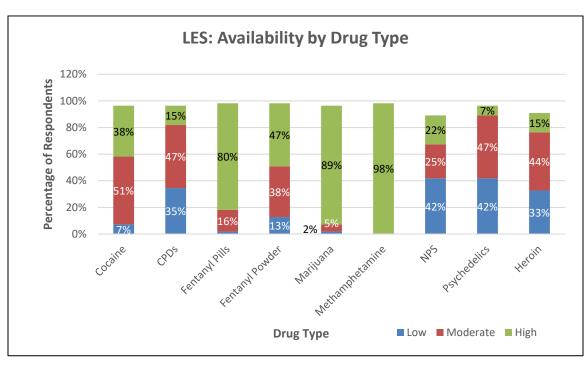


Figure 3. LES: Availability by Drug Type.<sup>7</sup>

# 2. Fentanyl

#### A. Overview

Midwest HIDTA law enforcement initiatives report fentanyl as the greatest drug threat to the region. Fentanyl, the most prevalent synthetic opioid, poses a significant threat in the region due to the link to violent and property crime, the high availability, and the high likelihood of poisoning. Fifty-five percent of law enforcement initiatives ranked fentanyl as the greatest threat in their respective areas of responsibility (AORs), while 31 percent of PHS respondents ranked fentanyl as their greatest drug threat, second to methamphetamine. Fentanyl has infiltrated rural and urban markets, and is the opioid with both the greatest use and abuse within the region.

Fentanyl, fentanyl analogs, and other synthetic opioids such as metonitazene, are usually produced in laboratories by transnational criminal organizations (TCOs) in Mexico, with precursors provided from China, before being transported into the Midwest HIDTA region. Some synthetic opioid abusers in the region purchase the drugs directly through the internet or dark web sources. Laboratory results have confirmed fentanyl's presence in various counterfeit pharmaceuticals, to include opioids and stimulants. Illicit drug users can be unaware that the substances they purchase and ingest may contain fentanyl or another synthetic opioid, thereby increasing their risk of being poisoned. Some

Fentanyl is often found to be mixed with a variety of other drugs including heroin, cocaine, and other synthetic opioids such as metonitazene and n-pryrrolidino etonitazene. An additive of note that is a cause for public health concern is xylazine, an unscheduled veterinary anesthetic. Xylazine is responsible for an increase in poisoning deaths as there is no known treatment for xylazine poisoning. The widely known opioid overdose reversal agent naloxone is not effective against xylazine poisoning as xylazine is not an opioid. Forensic laboratories within the Midwest HIDTA region have identified xylazine within the fentanyl supply in the region. Due to xylazine being unregulated in the Midwest HIDTA region, it is difficult to know the true extent of the issue in the region. Medetomidine, another veterinary anesthetic, which is more potent than xylazine, has been identified in the Midwest HIDTA region illicit fentanyl supply. In the region is not an additive of note that is not an opioid. In the region is not effective against xylazine within the fentanyl supply in the region. In the region is not an opioid overdose reversal agent naloxone is not effective against xylazine poisoning as xylazine within the fentanyl supply in the region. In the region is not an opioid overdose reversal agent naloxone is not effective against xylazine within the fentanyl supply in the region.

## B. Availability

The Midwest HIDTA assesses the availability of fentanyl in the region as high. This was corroborated by the majority of Midwest HIDTA's law enforcement initiatives. The law enforcement respondents to the LES indicated that fentanyl pills (e.g. counterfeit M30/oxycodone) are more prevalent in the Midwest HIDTA region than fentanyl powder. Eighty percent of law enforcement initiatives indicated fentanyl pills as being highly available, while only 47 percent indicated fentanyl powder as being highly available. Fentanyl powder comes in a variety of colors including white, brown, pink, and purple. Fentanyl seizures decreased by 21 percent in the Midwest HIDTA region between 2023 (794 kilograms/1,750 pounds) to 2024 (624 kilograms/1,376 pounds). Figure 4 shows the increase of fentanyl seized by Midwest HIDTA

initiatives between 2019 and 2023 followed by a decrease in 2024 for the region, as reported through the ONDCP Performance Measurement Process (PMP) data.

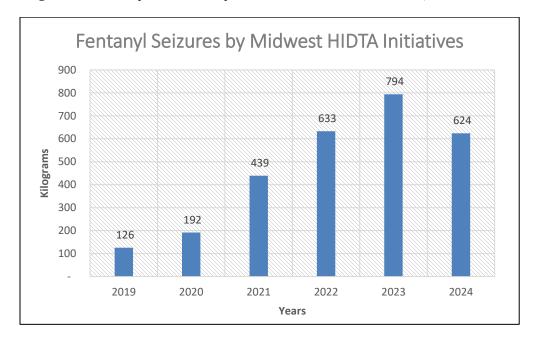


Figure 4. Fentanyl Seizures by Midwest HIDTA Initiatives, 2019-2024. 15

#### C. Use

The Midwest HIDTA assesses the level of use in the region as high for fentanyl, as indicated by 69 percent of law enforcement initiatives responding that fentanyl pill use is high and 49 percent responding that fentanyl powder use is high. Fentanyl abuse and trafficking is frequently associated with violence in the Midwest HIDTA region, although less so than methamphetamine. Twenty-seven percent of initiatives listed fentanyl as the drug responsible for the greatest level of violence, the second highest contributor to violent crimes. Fentanyl is also the second highest contributor to property crimes with 18 percent of initiatives indicating thus.

The PHS respondents that work in treatment noted that fentanyl was the drug with the highest increase of inpatient admissions. Sixty-four percent noted an increase in inpatient admissions for fentanyl in their areas. Fentanyl is often combined with a variety of other drugs in order to achieve a wide range of effects. Methamphetamine was the drug most commonly taken in combination with fentanyl in 2024, according to Midwest HIDTA's public health partners.

Fentanyl was listed as being combined with everything including marijuana and cocaine by public health partners.

Counterfeit controlled prescription drugs (CPDs) have been identified as a threat across both the Midwest HIDTA region and nationally. Counterfeit CPDs are popular

# **Poisoning Deaths in the Midwest HIDTA Region**

Two out of every three drug poisoning deaths in the Midwest HIDTA region in 2023 involved opioids, predominantly fentanyl.

among those that already abuse drugs and those experimenting with them, such as teenagers. The most common counterfeit prescription containing fentanyl takes the form of round, blue in color, oxycodone 30 mg pills. Many poisonings across both the Midwest HIDTA region and the country as a whole have been linked to counterfeit CPDs containing fentanyl. 16

In 2023, the grams of fentanyl pills seized by Midwest HIDTA initiatives also began to be reported to PMP. In 2023 there were 305,628 grams of fentanyl pills seized, and in 2024 there were 424,772 grams of fentanyl pills seized. These seizures translate to approximately 3,033,000 and 4,212,000 fentanyl pills, respectively. 15



The Treatment Episode Data Set (TEDS) is a Substance Abuse and Mental Health Services Administration (SAMHSA) program that includes drug treatment admission data. This data is routinely collected by states in an effort to monitor drug abuse among their populations. Fentanyl is included in a general category called "Other Opiates" that also includes oxycodone, hydrocodone, morphine, and other narcotic analgesics, opiates, or synthetics. Fentanyl is not reported separately. The TEDS data in Table 3 demonstrates a decrease in the number of admissions to drug treatment facilities for a substance use disorder involving opiates other than heroin in Iowa, Nebraska, and South Dakota between 2019 and 2023. The cause for the decrease in other opiates inpatient admissions for the TEDS data is unknown at this time. Kansas, Missouri, and North Dakota reported an increase in treatment admissions for opiates other than heroin in that same time period.<sup>17</sup>

Table 3. Treatment Episode Data Sets – Other Opiates<sup>18</sup>

	Treatment Episode Data Sets (TEDS)					
			Other Opiat	tes*		
	Iowa	Kansas	Missouri	Nebraska	North Dakota	South Dakota
2019	1,166	399	3,686	295	227	264
2020	861	406	3,724	227	177	208
2021	859	629	5,107	138	208	201
2022	597	566	6,500	218	249	244
2023	819	642	8,800	215	262	245

\*Other Opiates includes: Fentanyl, codeine, methadone, morphine, oxycodone, and any other drug with morphine-like effects. SOURCE: Office of Applied Studies, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS). Based on administrative data reported by States to TEDS through September 30, 2024.

#### D. Price

The price of fentanyl in Midwest HIDTA varied significantly from region to region. The purity of the fentanyl product also dictated the price of the drug. The prices per unit of measurement for fentanyl are listed in Table 4 below and was collected from Midwest HIDTA initiatives through debriefs of confidential informants (CIs), proffer interviews of defendants, and undercover CI purchases.

Table 4. 2024 Drug Pricing Data- Fentanyl<sup>19</sup>

	Fentanyl			
Unit of Measurement	Range	Average		
Ounce	\$1,000-\$3,000	\$1,706		
Gram	\$54-\$214	\$119		
1/2 Gram	\$40-\$120	\$78		
1/10 Gram	\$20-\$40	\$29		
Pill	\$2-\$30	\$8		

#### **E.** Production

The Midwest HIDTA assesses that the majority of the region's fentanyl supply originates from Mexico and China. DEA's Fentanyl Signature Profiling Program identified that the primary route of synthetization for fentanyl was the Gupta Method for nationwide fentanyl submissions seized in 2022. The average purity for fentanyl powder was 19.2 percent and fentanyl tablets contained on average 2.4 milligrams (mg) of fentanyl;<sup>20</sup> two milligrams is considered a potentially lethal dose. The DEA's forensic laboratories' testing indicated that 5 out of 10 pills seized by DEA in 2024 contained a lethal dose of fentanyl, a decrease from previous years.<sup>21</sup>

# F. Transportation

Fentanyl is primarily transported into the area via private passenger vehicles and mailing services. Large quantities of fentanyl pills are easily concealed in natural voids and spaces in vehicles, as well as within luggage being transported in the vehicle.

# **G.** Intelligence Gaps

- At what stage is fentanyl added into drug mixtures in the drug distribution process?
- Why is fentanyl being found mixed with non-opioid drugs, specifically stimulants such as cocaine and methamphetamine?
- Is there a demand for xylazine adulterated fentanyl or medetomidine adulterated fentanyl in the Midwest HIDTA region?
- Where in the drug distribution process is xylazine or medetomidine being added to fentanyl?
- What are the factors behind the 2024 decrease in amount of fentanyl seized, compared to the previous two years?

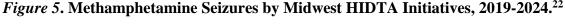
# 3. Methamphetamine

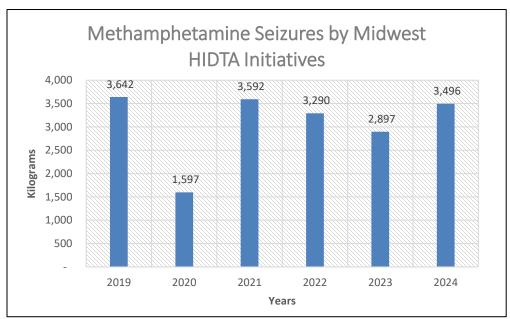
#### A. Overview

Methamphetamine is ranked as the second greatest drug threat to the Midwest HIDTA region, as 53 percent of Midwest HIDTA initiatives ranked it as such in their AORs. Methamphetamine is still the main contributor to violent and property crime in the region. From a public health perspective, methamphetamine is the greatest drug threat, with 48 percent of PHS respondents indicating the drug as the greatest. Forty-six percent of the region's drug poisoning deaths in 2023 involved psychostimulants, which include drugs such as methamphetamine, Adderall, and Ritalin.

## **B.** Availability

The Midwest HIDTA assesses the supply of methamphetamine in the Midwest region as high, with its popularity unlikely to fade. LES respondents ranked methamphetamine as more available than any other drug type. In fact, 98 percent of survey respondents indicated that methamphetamine is highly available in their respective AORs. Midwest HIDTA initiatives seized 3,496 kilograms (7,707 pounds) of methamphetamine in 2024, an increase of 21 percent from 2023 (2,897 kilograms/6,387 pounds). With the exception of marijuana, more methamphetamine was seized than any other drug type. Figure 5 depicts methamphetamine seizure totals by Midwest HIDTA initiatives from 2019 to 2024.





#### C. Use

Ninety-six percent of Midwest HIDTA law enforcement initiatives assessed the level of methamphetamine use in their areas as high. Methamphetamine use and trafficking has long been associated with crime and violence in the Midwest HIDTA region. This is supported by 56 percent of Midwest HIDTA initiatives that identified methamphetamine as the drug responsible for the greatest level of violence while 78 percent of respondents indicated it as the drug most responsible for property crime.

Of the PHS respondents that operated an inpatient/outpatient admissions program, 50 percent noted an increase in inpatient admissions for methamphetamine in their areas, while 43 percent stated that admissions remained the same as the previous year. Methamphetamine is often combined with a variety of other drugs in order to achieve a wide range of effects. The most popular drugs taken in combination with methamphetamine are fentanyl and marijuana.

Based on the TEDS data in Table 5, the number of admissions to drug treatment facilities for a substance use disorder involving amphetamines<sup>i</sup> in South Dakota increased between 2019 and 2023. Iowa, Nebraska and North Dakota have seen a decrease in amphetamine admissions in the same time period. Missouri had a high number of admittances in 2019, with a steep decrease the following year and with subsequent increases each year into 2023. Kansas displays a general decreasing admission rate for amphetamines from 2019 to 2023.

**Table 5. Treatment Episode Data Sets – Amphetamines**<sup>23</sup>

	Treatment Episode Data Sets (TEDS)					
			Amphetami	nes		
Iowa Kansas Missouri Nebraska North Dakota						South Dakota
2019	8,664	5,177	9,985	3,756	1,184	3,360
2020	7,394	4,494	7,288	2,941	1,053	3,020
2021	7,196	5,680	8,306	1,822	988	3,248
2022	5,690	3,879	9,389	1,591	823	3,472
2023	5,659	3,501	10,257	1,580	760	3.503

\*SOURCE: Office of Applied Studies, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS). Based on administrative data reported by States to TEDS through September 30, 2024.

Midwest HIDTA has historically had a high level of methamphetamine use as indicated by high treatment admissions and PHS responses. These high levels of methamphetamine use are likely to continue due to its high purity and relatively cheap price in the Midwest HIDTA AOR.

<sup>&</sup>lt;sup>1</sup> Amphetamines are the general categorization of amphetamine-type stimulants that SAMHSA records in their TEDS data. Methamphetamine is included within this dataset and is not reported separately.

# D. Price

The dominant form of methamphetamine in Midwest HIDTA is crystal methamphetamine, which is reflected in the pricing table below.

Table 6. 2024 Drug Pricing Data- Crystal Methamphetamine<sup>24</sup>

Crystal Methamphetamine					
Unit of Measurement	Range	Average			
Kilogram	\$2,500-\$5,500	\$3,729			
Pound	\$1,000-\$4,000	\$2,454			
1/2 Pound	\$1,100-\$2,000	\$1,615			
1/4 Pound	\$500-\$1,600	\$1,013			
Ounce	\$75-\$600	\$304			
1/2 Ounce	\$100-\$400	\$232			
1/8 Ounce (8-Ball)	\$30-\$250	\$92			
Gram	\$14-\$125	\$45			

#### E. Production

The Midwest HIDTA assesses that the majority of methamphetamine in the region was produced in Mexico. Although 25 percent of Midwest HIDTA law enforcement initiatives stated that methamphetamine production occurred within their AORs, most of this production involved the one-pot method—which typically yields one-ounce quantities for user amounts—or the lithium ammonia/anhydrous ammonia/ephedrine process. Large-scale labs in Mexico have replaced the majority of the Midwest HIDTA region's local clandestine methamphetamine labs since the late 2000s; therefore, the regional supply of methamphetamine is mostly trafficked in from Mexico. Mexico-based "super labs" are capable of producing massive quantities of highly potent methamphetamine. With the shift to Mexican sources of supply, the purity levels for methamphetamine have increased and are typically over 90 percent, with some areas reporting an average purity level of 97 percent. Domestic producers of methamphetamine in the Midwest HIDTA region have been unable to compete with Mexican producers, in part due to laws restricting sales of precursor chemicals utilized during production.

# F. Transportation

Methamphetamine is most commonly transported into the region in either crystal form (i.e. "ice") or suspended in solution by private passenger vehicles, commercial vehicles, and mailing services. While crystal methamphetamine is the most common form encountered by Midwest HIDTA initiatives, reporting suggests drug traffickers consider methamphetamine in solution as a low-risk concealment method. Methamphetamine in solution can be concealed within other

#### **Novel Concealment Method**

In 2024, a roadside stop in North Dakota encountered a novel methamphetamine concealment method in the back of a rented SUV. 6inch square black metal tubes had been welded closed with hooks on the outside to give the appearance of a hanging rack of some sort. The tubes were 6 feet long and in the cargo area of the SUV. When the tubes were examined it was possible to hear there was something within them. Crystal methamphetamine destined for North Dakota from California, was what was concealed inside the metal tubes.

liquids—such as gasoline or other automotive fluids-rendering it more difficult to detect. Methamphetamine in solution is transported into the region in large quantities by commercial vehicle, or in smaller quantities while being concealed in windshield washer fluid reservoirs or other containers in privately owned vehicles. HIDTA initiatives Midwest have methamphetamine in solution disguised in paint buckets and sports drinks. Once transported into the region, methamphetamine in solution is converted into crystal methamphetamine by conversion laboratories using a variety of highly Makeshift conversion flammable materials. laboratories—capable of converting several hundred pounds of methamphetamine—have been uncovered in parts of the Midwest HIDTA region and reported by Midwest HIDTA initiatives. In fact, 25 percent of Midwest HIDTA initiatives

reported the presence of at least one methamphetamine conversion laboratory in their area.

# **G.** Intelligence Gaps

- What is the full extent of methamphetamine conversion laboratory utilization in the Midwest HIDTA region?
- How often is methamphetamine mixed with fentanyl?
- At what step of the distribution process, is methamphetamine and fentanyl combined?
- How many counterfeit prescription pills contain methamphetamine?
- What factors are behind the increase in amount of methamphetamine seized in 2024 after two years of decreases in amount seized?

## 4. Cocaine

#### A. Overview

Midwest HIDTA ranks cocaine as the third greatest drug threat. Seventy-nine percent of Midwest HIDTA law enforcement initiatives reported cocaine as the third (39 percent) and fourth (41 percent) greatest drug threats. PHS respondents considered cocaine to be their fifth primary drug threat, with 34 percent of respondents indicating this. Cocaine's availability, and it being mixed with fentanyl, has increased the threat posed by the drug.

# **B.** Availability

The Midwest HIDTA assesses cocaine availability as moderate throughout the region. This is corroborated by the majority (51 percent) of Midwest HIDTA initiatives reporting cocaine's availability as moderate in their areas while 38 percent report cocaine as highly available in their area. Seizures of cocaine by Midwest HIDTA initiatives in 2024 decreased 27 percent from 2023 with initiatives seizing 804 kilograms (1,773 pounds). Cocaine seizures by Midwest HIDTA initiatives from 2019 to 2024 can be found in Figure 6.

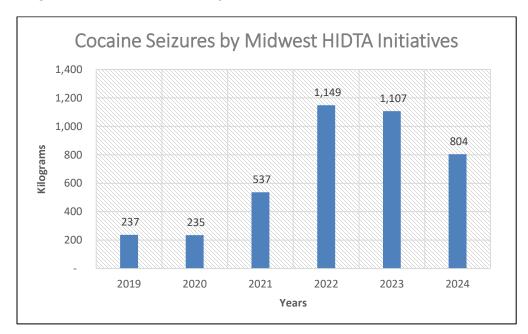


Figure 6. Cocaine Seizures by Midwest HIDTA Initiatives, 2019-2024.<sup>28</sup>

#### C. Use

The Midwest HIDTA assesses cocaine use throughout the region as moderate. Sixty percent of Midwest HIDTA law enforcement initiatives reported moderate levels of cocaine use within their AORs. Of the PHS respondents that operate an inpatient or outpatient admissions program, 59 percent reported that admissions for cocaine had remained the same over the past 12 months. Cocaine may be combined with other substances, the most popular of which being fentanyl.

The TEDS data in Table 7 demonstrates an increase in the number of admissions to drug treatment facilities for a substance use disorder involving cocaine between 2019 and 2023 for South Dakota. Nebraska shows a decrease in admissions in the same time period. Kansas decreased from 2019 to 2022 with an increase in 2023 admissions. Iowa and Missouri both decreased from 2019 to 2021 then began to increase in 2022, continuing to increase into 2023. North Dakota shows no clear trend.

Table 7. Treatment Episode Data Sets – Cocaine<sup>29</sup>

	Treatment Episode Data Sets (TEDS)					
			Cocaine			
	Iowa	Kansas	Missouri	Nebraska	North Dakota	South Dakota
2019	419	393	1,129	164	11	57
2020	346	342	726	132	22	70
2021	266	322	720	100	9	53
<b>2022</b> 326 262 860 78 20 54						
2023	373	281	1,055	92	9	68

\*SOURCE: Office of Applied Studies, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS). Based on administrative data reported by States to TEDS through September 30, 2024.

## D. Price

Cocaine prices in the Midwest HIDTA region vary heavily depending on the location. Pricing information from law enforcement initiatives is available in Table 8.

Table 8. 2024 Drug Pricing Data—Cocaine<sup>30</sup>

Cocaine					
Unit of Measurement Range Average					
Kilogram	\$9,500-\$35,000	\$21,180			
Ounce	\$520-\$2,000	\$1,100			
1/8 Ounce (8-Ball)	\$120-\$350	\$234			
Gram	\$25-\$180	\$94			

#### E. Production

Cocaine is neither cultivated nor produced within the Midwest HIDTA region. The coca plant is native to western South America, which produces the vast majority of the world's supply of cocaine. Cocaine production in Colombia, the largest producer of coca and cocaine, increased 53 percent from 2022 (1,738 tons) to 2023 (2,664 tons) according to United Nations data.<sup>31</sup> Seizures of cocaine by U.S. Customs and Border Protection (CBP) for fiscal year 2024 (68.2 thousand pounds) resulted in a 16 percent decrease from 2023 (81.1 thousand pounds) seizures, suggesting that there may have been a production decrease of cocaine in coca-producing countries

#### F. Transportation

The Midwest HIDTA assesses that the majority of U.S.-bound cocaine is transported from South America into Mexico, where it is then smuggled into the Midwest region. As with other illicit drug types, cocaine is primarily transported into the region via private passenger vehicles, commercial vehicles, and mailing services.<sup>33</sup> Cocaine trafficking organizations also utilize "gofast boats" and undersea submersible vehicles to smuggle cocaine into the U.S., though these methods are believed to be used for transporting cocaine to destinations along the eastern and western seaboards.<sup>34</sup> <sup>35</sup>

in 2024. 32 The Midwest HIDTA region also experienced a decrease in the amount of cocaine seized

in 2024 in the region, a decrease of 27 percent compared to 2023 seizure amounts.

# G. Intelligence Gaps

- What other drugs are mixed with cocaine in the Midwest HIDA region?
- At which step of the distribution system, are other drugs added to cocaine during cocaine trafficking?

## 5. Heroin

#### A. Overview

Midwest HIDTA ranks heroin as the fourth greatest drug threat after cocaine, due to a continuing decrease in availability. Heroin, mixed with stronger opioids such as fentanyl, result in an increased likelihood of poisoning. Thirteen percent of law enforcement initiatives ranked heroin as the fourth greatest threat while 29 percent ranked heroin as their third greatest threat in their respective AORs. Twenty-one percent of PHS respondents ranked heroin as their fourth greatest drug threat. Heroin is usually found mixed with fentanyl or other synthetic opioids.<sup>36</sup>

### **B.** Availability

The Midwest HIDTA assesses the availability of heroin in the region as moderate, which is a decrease for the region. The decrease is partly due to the replacement of heroin with fentanyl. This was corroborated by 44 percent of the Midwest HIDTA's law enforcement initiatives. Seizures of heroin by Midwest HIDTA initiatives decreased by 57 percent from 2023 (57 kilograms/126 pounds) to 2024 (28 kilograms/62 pounds). Figures 7 presents the heroin seized by Midwest HIDTA initiatives between 2019 and 2024.

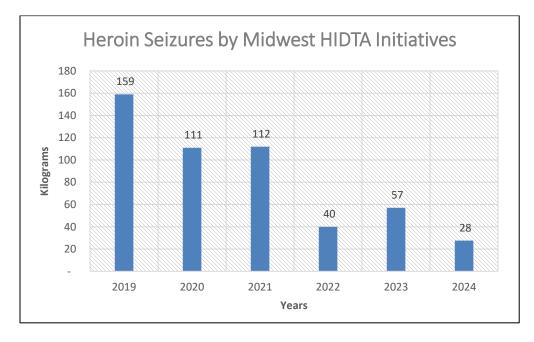


Figure 7. Heroin Seizures by Midwest HIDTA Initiatives, 2019-2024.<sup>37</sup>

#### C. Use

The Midwest HIDTA assesses the level of heroin use in the region as moderate, as indicated by 38 percent of law enforcement initiatives. Fifty-two percent of public health respondents noted that heroin admissions stayed the same in their areas. Heroin is often combined with fentanyl and

other drugs. It can be difficult to source heroin without fentanyl within the Midwest HIDTA region as fentanyl has supplanted the traditional heroin markets.

Based on the TEDS data in Table 9, the number of admissions to drug treatment facilities for a substance use disorder involving heroin, decreased in every Midwest HIDTA state from 2019 to 2023, except for Iowa which saw an increase from 2022 to 2023.

Table 9. Treatment Episode Data Sets – Heroin<sup>38</sup>

	Treatment Episode Data Sets (TEDS)					
			Heroin			
	Iowa	Kansas	Missouri	Nebraska	North Dakota	South Dakota
2019	1,097	258	5,737	150	148	234
2020	1,012	268	4,173	153	132	151
2021	853	468	3,517	97	146	143
<b>2022</b> 633 215 2,595 61 49 91						
2023	690	121	2,560	37	47	74

\*SOURCE: Office of Applied Studies, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS). Based on administrative data reported by States to TEDS through September 30, 2024.

#### D. Price

The price of heroin varies significantly throughout the Midwest HIDTA region. There was a decrease in the heroin buys within the Midwest HIDTA region, demonstrating a decrease in availability of the drug which is supported by survey responses and seizures. The prices per unit of measurement for heroin is listed in Table 10 below.

Table 10. 2024 Drug Pricing Data-Heroin<sup>39</sup>

	Heroin		
Unit of Measurement	Range	Average	
Ounce	\$600-\$2,500	\$1,200	
Gram	\$120-\$250	\$165	
1/2 Gram	\$40-\$180	\$103	

#### E. Production

The Midwest HIDTA assesses that the overwhelming majority of the region's heroin supply is cultivated outside of the region, primarily within Mexico and South America. Midwest HIDTA law enforcement initiatives have reported a decrease in heroin seizures from previous years and an increase in fentanyl seizures, suggesting that Mexican DTOs have shifted their focus from heroin cultivation to fentanyl production.

# F. Transportation

Heroin is primarily transported into the area via private passenger vehicles.  $^{40}$ 

# G. Intelligence Gaps

• What is the demand for unadulterated heroin within the Midwest HIDTA region?

# 6. Marijuana

#### A. Overview

Marijuana is the most widely available and abused illicit drug within the Midwest HIDTA region. Midwest HIDTA initiatives ranked marijuana as a lower significant drug threat with 18 percent ranking it fifth and the same percentage ranking it third. Respondents to the PHS listed marijuana as the lowest ranked drug threat (sixth for the PHS) for their area with 33 percent of respondents indicating marijuana as their lowest ranked drug threat. Due to marijuana's high availability and high use it is ranked as the fifth greatest drug threat for the Midwest HIDTA region.

North Dakota legalized medical marijuana through regulations that became effective in April 2016. Missouri legalized medical marijuana in November 2018 and recreational in 2022; recreational sales in Missouri started February 3, 2023.41 South Dakota legalized medical marijuana in November 2020 and became effective as of July 2021. In November 2024, Nebraska voters legalized medical marijuana, Illinois has also legalized recreational marijuana, while Iowa only allows for specialized cannabidiol (CBD) products as part of its medical CBD program. Currently, Kansas is the only Midwest HIDTA state to not have implemented a public marijuana access program.

Similar to methamphetamine, the region has experienced a change in sources of marijuana. Whereas much of the marijuana in the Midwest HIDTA region was previously grown in Mexico and transported into the region, after being smuggled across the Southwest Border, a majority of the marijuana in the region today now comes from sources within the U.S. Domestically-produced marijuana, a majority of which is grown hydroponically in states where marijuana has been decriminalized and/or legalized in some form, typically has a much higher tetrahydrocannabinol (THC) content than Mexican-sourced marijuana.

Marijuana decriminalization has created a readily available supply of highly potent domestically cultivated marijuana for transport into the region. This now includes states within Midwest HIDTA that have legalized various forms of marijuana

## **B.** Availability

Marijuana is the most widely available drug in the region due in part to the various legalization levels in the Midwest HIDTA states. All but four Midwest HIDTA law enforcement initiatives reported marijuana as highly available within their AORs. Midwest HIDTA initiatives seized 8,783 kilograms (19,363 pounds) of marijuana in 2024, along with 5,161 kilograms (11,378 pounds) worth of marijuana plants. Figure 8 depicts marijuana seizure totals by Midwest HIDTA initiatives from 2019 to 2024, as reported through PMP data.

Marijuana Seizures by Midwest HIDTA **Initiatives** 18,000 16,113 16,000 14,440 13,805 13,192 14,000 2000 House 12,000 Report 10,000 8 000 10.892 8.783 8,000 6,000 4,000 2,000 0 2019 2020 2021 2022 2023 2024 Year

Figure 8. Marijuana Seizures by Midwest HIDTA Initiatives, 2019-2024.42

#### C. Use

Marijuana is the second most widely used illicit drug in the Midwest HIDTA region, according to 87 percent of law enforcement initiatives. Sixteen percent believed marijuana contributed the most to violence in their areas. Of the PHS respondents that operate an inpatient or outpatient admissions program, 50 percent of respondents cited marijuana-related admissions as remaining the same over the past 12 months. Data from the PHS states that marijuana is a drug frequently combined with other substances. The most popular drugs taken in combination with marijuana are methamphetamine and fentanyl.

Based on the TEDS data in Table 11, the number of admissions to drug treatment facilities for a substance use disorder involving marijuana declined for every state in the Midwest HIDTA region, except Iowa which saw an increase from 2022 to 2023. The push for marijuana decriminalization in parts of the Midwest HIDTA region may have played a role in the decreased number of marijuana admissions, especially if court-mandated marijuana substance abuse programs are less prevalent, although this information is currently unsubstantiated.

Table 11. Treatment Episode Data Sets – Marijuana<sup>43</sup>

	Treatment Episode Data Sets (TEDS)					
			Marijuan	a		
	Iowa	Kansas	Missouri	Nebraska	North Dakota	South Dakota
2019	6,257	1,871	5,604	1,261	758	1,577
2020	4,822	1,624	3,718	993	623	1,149
2021	4,383	1,759	3,811	662	590	1,130
2022	3,388	1,347	3,956	564	560	1,036
2023	3,563	1,278	3,930	547	536	863

\*SOURCE: Office of Applied Studies, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS). Based on administrative data reported by States to TEDS through September 30, 2024.

#### D. Price

The price of marijuana in the Midwest HIDTA region is dependent upon the origin of the marijuana and the form that it takes. For example, an ounce of marijuana flower is generally less expensive than an ounce of butane hash oil or other concentrate. Additionally, marijuana originating from a Colorado dispensary is generally more expensive than marijuana originating from Mexico because of its higher THC content. Table 12 depicts marijuana pricing information obtained from Midwest HIDTA law enforcement initiatives.

Table 12. 2024 Drug Pricing Data– Marijuana<sup>44</sup>

Marijuana						
Unit of Measurement	Range	Average				
Pound	\$450-\$3,200	\$1,918				
Ounce	\$55-325	\$155				
Gram	\$5-\$57	\$16				
Gram of Wax	\$30-\$75	\$51				

#### E. Production

The Midwest HIDTA assesses that the majority of marijuana in the region is produced in areas within the U.S. where marijuana has been decriminalized. Twenty-two percent of initiatives stated that illicit marijuana production occurred within their area, with indoor marijuana production more prevalent than outdoor production. Thirty-three percent of the initiatives that reported marijuana production within their areas indicated that indoor marijuana production occurred at a high level in their AORs, while 42 percent of respondents indicated that outdoor marijuana production occurred at a moderate level. Indoor production methods, which protect plants from harsh weather conditions in the region, also allow cultivators greater control over THC content in marijuana. Indoor growing also affords a higher degree of concealment from law

enforcement as the production sites are hidden from public view. Figure 9 shows levels of indoor and outdoor marijuana production in the Midwest HIDTA region, as indicated by law enforcement initiatives.

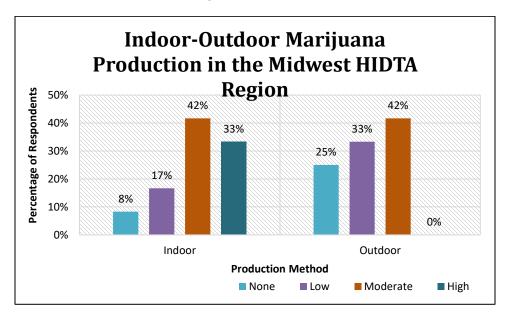


Figure 9. LES: Indoor-Outdoor Marijuana Production in the Midwest HIDTA Region. 45

In December 2018, Congress passed the Agriculture Improvement Act of 2018 (also known as the 2018 Farm Bill), which legalized the production, cultivation, and retail sale of industrial hemp. 46 Industrial hemp and marijuana are the same plant only differentiated by the delta-9 tetrahydrocannabinol (THC) amount in the plant. Hemp must not contain more than 0.3 percent delta-9 THC.<sup>47</sup> Every state within the Midwest HIDTA region now participates in industrial hemp cultivation. Marijuana may be produced under the guise of industrial hemp.<sup>48</sup> Hemp concentrates also contend with the issue of high amounts of delta-9 THC.<sup>49</sup>

#### F. Transportation

The majority of marijuana and marijuana products are transported into the Midwest HIDTA region from California, Colorado, Washington, and Oregon.<sup>50</sup> The source states have all legalized recreational/adult use. Private passenger vehicles are the most common methods of transporting marijuana into the region.

## **G.** Intelligence Gaps

What impact will legal marijuana in Midwest HIDTA states have on the blackmarket marijuana within those states?

# 7. Controlled Prescription Drugs

#### A. Overview

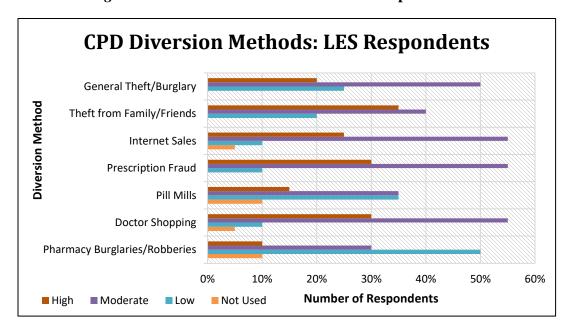
The Midwest HIDTA assesses that CPD abuse within the region is widespread and represents a constant drug threat. A significant percentage of the drugs marketed as CPDs seized by Midwest HIDTA initiatives are actually counterfeit pharmaceuticals. Post seizure laboratory analysis often reveals the presence of fentanyl, methamphetamine, other opioids, or benzodiazepine analogues. Eighteen percent of LES respondents ranked CPDs as the sixth drug threat in their AORs. Though 27 percent of PHS respondents reported CPDs as their second drug threat, CPD's threat ranking is lower due to the lower availability and use compared to the drugs ranked higher in the threat rankings. The legal, yet controlled status of CPDs has resulted in their moderate level of availability and low level of use in the Midwest HIDTA region.

All states within the Midwest HIDTA region now have a Prescription Drug Monitoring Program (PDMP). Missouri's PDMP program was officially launched in December 2023. 51 The prohibition of law enforcement in several Midwest HIDTA states from obtaining PDMP information to identify over-prescribing doctors also limits the overall effectiveness of these programs in addressing the opioid epidemic. There are currently no Midwest HIDTA initiatives focused on CPD diversion.

# **B.** Availability

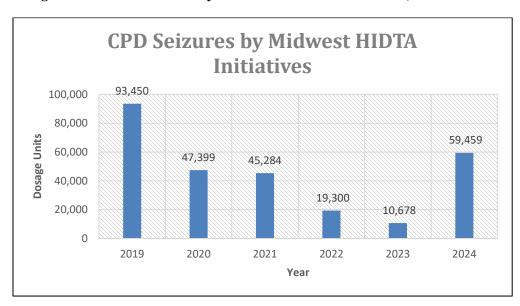
Forty-seven percent of Midwest HIDTA initiatives reported CPD availability as moderate within their AORs. Pharmaceutical diversion is responsible for the majority of illicit use. Thirtysix percent of LES respondents indicated that CPD diversion occurs in their AORs. Of those respondents, all indicated that it happens at a moderate rate, which is a decrease from last year. Figure 10 illustrates the most common CPD diversion methods, as reported by respondents to the LES.

Figure 10. CPD Diversion Methods: LES Respondents. 52, j



Midwest HIDTA initiatives seized 59,459 dosage units of CPDs in 2023.<sup>k</sup> Figure 11 depicts CPD seizure totals by Midwest HIDTA initiatives from 2019 to 2024, as reported in the PMP.

Figure 11. CPD Seizures by Midwest HIDTA Initiatives, 2019-2024.<sup>53</sup>



<sup>&</sup>lt;sup>j</sup> General theft/burglary is the theft of CPDs from individuals in possession of CPDs that do not involve friends/family or a pharmacy. Rx fraud is the illegal acquisition of prescription drugs for profit. Pill mills are clandestine operations where a medical worker offers CPDs to patients in exchange for bribes rather than needs. Doctor shopping is the illegal practice of seeking care from multiple health care providers for an illicit purpose.

k This number is the total for all PMP prescription drug statistics, which include alprazolam, hydrocodone, oxycodone, and other CPD types.

Forty-two percent of Midwest HIDTA initiatives reported low levels of CPD use within their AORs. If an individual with a substance use disorder loses legitimate access to their CPD supply, they may seek out illicit CPDs or transition to cheaper, more potent alternatives, such as heroin or fentanyl.

Of the PHS respondents that operate either an inpatient or outpatient admissions program, 69 percent stated that CPD admissions had remained the same over the past 12 months. According to these PHS respondents, treatment admissions for opioids increased 34 percent, while stimulants increased by 31 percent. The other CPD categories including sedatives remained the same for the plurality of PHS respondents. According to the PHS, CPDs are most often combined with fentanyl, marijuana, and methamphetamine.

#### D. Price

Pricing for diverted CPDs within the Midwest HIDTA region are dependent upon the type of CPD, the dosage, and the regional marketplace. Table 13 illustrates various CPD pricing information for 2024. Benzodiazepine pricing information is available for alprazolam. Opioid pricing information is available for hydrocodone and oxycodone. Stimulant pricing information is available for Adderall®. Prices are based on drugs marketed as illicit CPD's, regardless of whether they are actually illicit CPD's or counterfeit.

Unit of Measurement	Per Pill		
CPD Type	Range	Average	
Alprazolam (Xanax®)	\$3-\$20	\$9	
Hydrocodone	\$8-\$30	\$12	
Oxycodone	\$15-\$80	\$43	
Adderall®	\$13-\$20	\$17	

Table 13. 2024 Drug Pricing Data— CPDs<sup>54</sup>

#### E. Production

Midwest HIDTA is not aware of CPD diversion from regional pharmaceutical manufacturers at this time. However, law enforcement investigations have identified numerous counterfeit CPD operations elsewhere within the U.S. A significant portion of the counterfeit opioid and benzodiazepine pills encountered by Midwest HIDTA initiatives are found to contain a mixture of fentanyl and other substances when sent to a laboratory for further analysis. Similarly, many counterfeit stimulant drugs contain methamphetamine rather than the various stimulants they are marketed as.

# F. Transportation

Midwest HIDTA found that the region's most popular methods of CPD diversion in 2024 were theft from family/friends, doctor shopping, and prescription fraud. Genuine CPDs encountered by regional law enforcement are produced by pharmaceutical companies and distributed to pharmacies nationwide. Counterfeit CPDs are manufactured in China, Mexico, and the United States. Counterfeit CPDs clandestinely produced outside of the Midwest HIDTA region are often shipped via mailing services from overseas, or smuggled across international borders where they ultimately enter into the region transported by private vehicles.

# G. Intelligence Gap

- What percentage of CPD's marketed as genuine are actually counterfeit CPDs?
- What are the factors behind the increase in CPDs seizures in 2024?

# 8. Psychedelics

### A. Overview

A wide variety of psychedelics are abused within the Midwest HIDTA region. The threat posed by these drugs in the region is ever-changing due to the development of new synthetic drugs in source countries such as China, as well as resurgences in other drug types, such as "magic" mushrooms. Several types of psychedelics are available in the region, including methylenedioxymethamphetamine (MDMA), lysergic acid diethylamide (LSD), ketamine, and psilocybin mushrooms (hereafter referred to as "mushrooms"). The breadth of the threat, its variance from area to area in the region, make it difficult to assess the overall drug threat created by psychedelics compared to other drug types. However, only five percent of LES respondents ranked psychedelics within the top three drug threats in their AORs.

### **B.** Availability

The Midwest HIDTA assesses the availability of psychedelics across the region as moderate. This is supported by the 47 percent of law enforcement initiatives that reported psychedelics availability as moderate. Although psychedelics have existed within the Midwest HITA region for decades, their availability has historically remained moderate to low. Psychedelics and other similar drugs are typically purchased at bars, nightclubs, music festivals, or online, and are generally more difficult to obtain compared to drugs such as cocaine or marijuana, though Midwest HIDTA initiatives seized more psychedelics in 2024 than in previous years.

Midwest HIDTA initiatives seized 14,410 dosage units of ketamine and 63 kilograms of PCP in 2024. The 63 kilograms of PCP seized was the highest amount seized in the Midwest HIDTA region in the last five years and an increase of 85 percent compared to 2023. There was a total of 2,501,902 dosage units of LSD seized in 2024 by Midwest HIDTA initiatives, also the most in the last five years and an increase of approximately 12 percent compared to 2023. Initiatives seized 15,589 dosage units of MDMA in 2024. One hundred and eighty-nine kilograms (417 pounds) of mushrooms were seized in 2024, which is a 42 percent decrease from 2023 (329 kilograms/725 pounds). For the third year in a row, Midwest HIDTA initiatives also seized psilocybin edibles including various flavored candy bars and gummies.

#### C. Use

The Midwest HIDTA assesses the use of psychedelics in the region to be moderate. Fortynine percent of LES respondents indicated that psychedelics are used at a moderate level in the Midwest HIDTA region. The plurality of public health respondents (48 percent) stated that inpatient/outpatient admissions for psychedelics remained the same over the past 12 months.

The TEDS data in Table 14 depicts the low levels of hallucinogens abuse across the Midwest HIDTA region between 2019 and 2023. Inpatient admissions decreased in Nebraska and

South Dakota between 2019 and 2023. Iowa peaked in 2020 and has decreased into 2023. North Dakota increased between 2018 to 2022 with a decrease in 2023. Missouri and Kansas do not show a clear trend.

Table 14. Treatment Episode Data Sets – Hallucinogens<sup>55</sup>

Treatment Episode Data Sets (TEDS)								
Hallucinogens								
	Iowa	Kansas	Missouri	Nebraska	North Dakota	South Dakota		
2019	42	16	32	7	1	25		
2020	44	17	21	8	5	14		
2021	34	12	46	4	5	10		
2022	13	17	16	3	10	5		
2023	15	16	32	4	7	4		

SOURCE: Office of Applied Studies, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS). Based on administrative data reported by States to TEDS through September 30, 2024.

#### D. Price

The price of psychedelics varies depending on the purity, location, and ingredients. The price of MDMA in the Midwest HIDTA region varied between \$1 and \$20 per pill and \$50 to \$120 per gram. The price for an ounce of PCP ranges from \$208 to \$400 in the Midwest HIDTA region. The price for a gram of psilocybin mushrooms in the Midwest HIDTA region varies between \$3 to \$20 and the price of an ounce varies from \$88 to \$200 in the region.<sup>56</sup>

#### **E. Production**

Most MDMA seized in the U.S. is primarily synthesized in Canada and the Netherlands.<sup>57</sup> LSD may be produced in clandestine laboratories across the country, although a crucial precursor chemical, known as ergotamine tartrate, is not readily available in the U.S. Ketamine is commercially produced in a number of countries, including the U.S., and is typically either diverted or stolen from legitimate sources, specifically veterinarian sources in the U.S. PCP destined for the Midwest HIDTA region is typically manufactured in clandestine laboratories in Southern California. Psilocybin mushrooms may be grown across the U.S. and have been increasingly discovered alongside illegal marijuana grows. There have been DMT extraction laboratories identified in the Midwest HIDTA region including in Iowa, Kansas, Missouri, and Nebraska.58

#### F. Transportation

The Midwest HIDTA assesses that the majority of the region's MDMA is sourced from foreign countries, such as Canada and the Netherlands, and subsequently being shipped into the Midwest HIDTA region. PCP is transported into the region from clandestine laboratories in Southern California. Ketamine is typically diverted from veterinary clinics and other medical

sources within the U.S. and transported into the region. Most psychedelics are transported into the Midwest HIDTA region in private vehicles.

# G. Intelligence Gaps

- How has the increased research into psychedelics as a treatment for mental health, affected the psychedelic black market?
- How often is methamphetamine marketed as MDMA and/or ecstasy pills in the Midwest HIDTA region?
- What is the reason(s) for the increase in seizures of psychedelics in the Midwest HIDTA region?
- Does the increase in seizures indicate an increased demand and/or usage in the Midwest HIDTA region?

#### 9. New Psychoactive Substances

#### A. Overview

The most commonly abused new psychoactive substances (NPSs) in the Midwest HIDTA region are synthetic cannabinoids, synthetic cathinones, and synthetic phenethylamines. NPSs are a class of synthetic substances that mimic the effects of established illicit drugs. Often referred to as "designer drugs," NPSs have no legitimate industrial or medical uses. Synthetic cannabinoids are typically sprayed onto plant matter or suspended into a liquid and smoked, which are intended to simulate the effects of marijuana. Synthetic cathinones normally reside in powder or crystal form, are either swallowed or insufflated ("snorted"), and are intended to mimic the effects of stimulants. The synthetic phenethylamine drug class possess entactogenic, hallucinogenic, and/or stimulant properties and represent the largest category of designer drugs.

#### **B.** Availability

The Midwest HIDTA assesses NPS availability as low. Debuting in the late 2000s, NPSs were designed to mimic the effects of marijuana, stimulants, and hallucinogens and were most popular among young adults. Although not as prevalent as they once were, NPSs are still available and are a consistent threat to the Midwest HIDTA region. According to 42 percent of Midwest HIDTA initiatives, NPS availability was low. Midwest HIDTA initiatives seized 1.6 kilograms (4 pounds) of synthetic cannabinoids in 2024, a 95 percent decrease from 2023. The dramatic decrease in seizures of synthetic cannabinoids is currently unknown.

#### C. Use

Twenty-five percent of Midwest HIDTA initiatives reported moderate levels, while 42 percent reported low levels of NPS use. While NPSs were not a primary contributor to violence and property crimes in the Midwest HIDTA region, some of these drugs have been linked to assaults, erratic behavior which can result in property damage, and overdoses in the region, especially in jails and prisons.<sup>59</sup> Of the public health respondents that operate a drug treatment program, 24 percent reported that NPS admissions had remained the same over the past 12 months while 24 percent reported an increase.

#### D. Price

The Midwest HIDTA law enforcement initiatives reported no pricing for NPS in 2024. Sales of NPS are most prevalent online and vary in price, depending on the formulation and batch purity.

#### E. Production

There were no reports of NPS production within Midwest HIDTA in 2024. Synthetic cannabinoids are typically produced in foreign laboratories and are purchased by individuals in the U.S. These individuals then spray leafy plant matter or paper with the synthetic cannabinoid

solution and package the product. Synthetic cathinones and phenethylamines are often produced in Chinese laboratories where suppliers misrepresent the drug's intended purpose, often describing the drugs as "research chemicals", in order to pass inspection by CBP.

The chemical blueprints and recipes for many NPSs are catalogued in scientific and patent literature. Many of these substances were originally created to be used in medicine, but were abandoned after they failed to meet medical standards. With the exception of phenethylamines, the relative ease of NPS production is possible by the availability of chemical blueprints on the internet. Once an NPS is scheduled as a controlled substance in the U.S. or any other major market, manufacturers will modify the molecular structure of that chemical to avoid legal penalty. This creates significant challenges for the law enforcement agencies investigating the distribution of these products.

#### F. Transportation

The USPS and other mailing services are the most common methods used to ship NPSs into the Midwest HIDTA region. Semi-trailer trucks and other commercial vehicles are also used to transport NPSs to retailers that offer NPS products.

#### **G.** Intelligence Gaps

- What is the true extent of NPS trafficking in the Midwest HIDTA region?
- What are the factors for the large decrease in the number of synthetic cannabinoids seized in 2024?

#### 10. Source Considerations

Several sources were considered in the preparation of the drug threat section of the 2025 Midwest HIDTA Threat Assessment. Statistics from the Midwest HIDTA PMP aided the section by quantifying the volume, type, and prices of drugs seized. Survey responses from our law enforcement initiatives and public health partners via the 2025 LES and PHS identified the drugs most used and abused in the region. Data collected from SAMHSA's TEDS illustrated the number of individuals seeking treatment for various substance use disorders. Drug and asset seizure data collected by the Midwest HIDTA's Domestic Highway Enforcement (DHE) program allowed for the identification of source states and transportation methods for different drug categories and cash seizures. Open source data provided by CBP illustrated the number of drugs seized, by category, at different ports of entry along the U.S border. Anecdotal information such as HIDTA task force phone interviews, news media reports, law enforcement agency websites, and official press releases proved useful in highlighting specific drug threat issues.

## V. Drug Trafficking Organizations

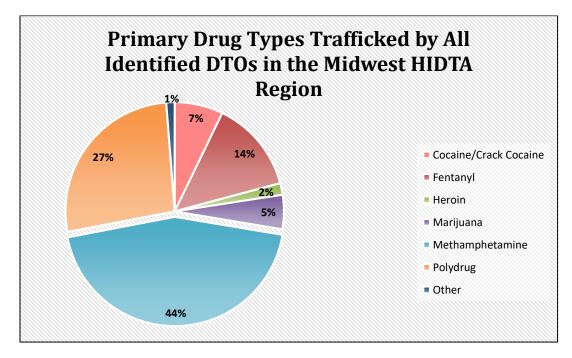
### 1. Overview of All Drug Trafficking Organizations

Midwest HIDTA enforcement initiatives documented 1,046 DTOs operating within the region in 2024, with 8,985 members and 1,399 leaders identified. Mexico-sourced DTOs continue to have the most significant impact in the region. The average identified membership of a DTO was approximately 10 individuals; of which, nine were members and one held a leadership role. Midwest HIDTA-based DTOs operate in both urban and rural areas and vary in terms of size, structure, and trafficking activities. Approximately 28 percent of LES respondents noted the movement of large metropolitan gangs (e.g. Gangster Disciples, Latin Kings) from major cities into smaller more rural areas.

However, neighborhood-based street gangs dominate violence related to drug trafficking in most areas of the Midwest HIDTA region. These groups, which are comprised of individuals that reside on a shared street or locality, are difficult to identify because they lack the traditional hierarchy associated with nationally-affiliated gangs and frequently disband and regroup. Twenty-three percent of DTOs identified in the Midwest HIDTA region were associated to gangs, whether local street, national street, or outlaw motorcycle gangs (OMGs). Thirty-eight percent of the DTOs identified by Midwest HIDTA initiatives in Missouri were gang-related, the highest percentage for any state in the region.

Polydrug DTOs account for about 27 percent of DTOs, and methamphetamine constitutes the majority of single-drug DTOs operating in the Midwest HIDTA region. Missouri contains both the largest population and the most initiatives of any state in the Midwest HIDTA region. As such, Missouri reported more methamphetamine trafficking organizations than any other state, accounting for approximately 26 percent of all methamphetamine trafficking organizations. Missouri also identified the highest percentage of fentanyl (37 percent) and cocaine (37 percent) trafficking organizations operating in the region. Figure 12 depicts the primary drug types trafficked by all DTOs within the Midwest HIDTA region in 2024.

Figure 12. Primary Drug Types Trafficked by All DTOs Identified as Operating in the Midwest HIDTA Region.<sup>61</sup>



Of the 1,046 DTOs operating within the Midwest HIDTA region, 10 percent were international in scope, 52 percent were multi-state, and 38 percent were local. Appendix VII summarizes key characteristics of all identified DTOs in 2024, while Appendix VIII includes a summary table for DTOs identified as operating in each state of the Midwest HIDTA region. According to 2024 data from the PMP, 40 percent of all DTOs identified by Midwest HIDTA initiatives were identified as being violent, posing a significant threat throughout the region. Sixtyfour percent of international DTOs operating in the Midwest HIDTA region were identified as being violent, compared to 37 percent of multi-state and approximately 38 percent of local DTOs. A state-by-state review of violent DTOs identified by Midwest HIDTA initiatives may be found in Table 15.

Table 15. Violent DTOs Identified by Midwest HIDTA Initiatives. 62

Violent DTOs identified by Midwest HIDTA Initiatives							
	Total DTOs	Total DTOs Violent DTOs					
Illinois*	114	25	22%				
Iowa	177	31	18%				
Kansas	75	35	47%				
Missouri	346	206	60%				
Nebraska	146	73	50%				
North Dakota	89	31	35%				
South Dakota	99	19	19%				
All Initiatives	1,046	420	40%				

<sup>\*</sup>This data only originated from the three Midwest HIDTA counties and two Midwest HIDTA initiatives in Illinois

This year's Midwest HIDTA state with the highest percentage of violent DTOs was Missouri (60 percent), which was their same percentage as in 2018. Iowa, Nebraska, North Dakota, and South Dakota experienced an increase in the percentage of violent DTOs within their borders from 2018, which may be found in table 16. Illinois and Kansas saw a decrease in the percentage of violent DTOs between 2018 to 2024.

Table 16. Percentage of Violent DTOs Identified by Midwest HIDTA Initiatives in 2018 & 202463 64

Percentage of Violent DTOs Identified by Midwest HIDTA Initiatives in 2018 & 2024					
	2018	2024			
Illinois <sup>*</sup>	24%	22%			
Iowa	15%	18%			
Kansas	52%	47%			
Missouri	60%	60%			
Nebraska	13%	50%			
North Dakota	0%	35%			
South Dakota	14%	19%			
All Initiatives	33%	40%			

<sup>\*</sup>This data only originated from the three Midwest HIDTA counties and two Midwest HIDTA initiatives in Illinois

Fifty-five percent of all DTOs classified as violent were also classified as gang-related, indicating a direct correlation between gangs and violence in the region. Missouri was the Midwest HIDTA state that had that highest percentage of violent, gang-related DTOs identified. Gangrelated DTOs identified in Midwest HIDTA were highly indicated as being violent with 94 percent in the region being gang-related and violent.

DTOs in the Midwest HIDTA region utilize novel technologies to facilitate communication, obtain payment, and monitor the locations of their drug couriers in real-time. These platforms include the dark web, social media, portable GPS systems, and encrypted messaging applications (apps) available through mobile devices. Many of the apps utilized by DTOs in the region have now implemented end-to-end encryption. Apps with end-to-end encryption, such as WhatsApp, provide an investigative hurdle to law enforcement due to the encryption aspect inherent in their infrastructure. Apps identified by Midwest HIDTA initiatives as being most utilized in the region include Facebook messenger, WhatsApp, Snapchat, and Signal. Cryptocurrency, sometimes concurrent with dark web use, is used by some DTOs to transfer drug proceeds into and outside of the Midwest HIDTA region.<sup>65</sup> The use of complex technology by DTOs in the region is expected to continue to increase in the future.

#### 2. International Drug Trafficking Organizations

#### A. Overview

A total of 110 international DTOs were identified as operating in the Midwest HIDTA region in 2024, with 174 leaders and 1,143 members. Table 17 lists the characteristics of international DTOs identified by Midwest HIDTA initiatives in 2024. Mexico was the primary country affiliated with the identified international DTOs. On average, there were 12 members per international DTO. Approximately 34 percent of the international DTOs trafficked more than one drug type.66

Table 17. International DTOs Identified as Operating in the Midwest HIDTA.<sup>67</sup>

International DTOs Identified by Midwest HIDTA Initiatives						
Characteristics						
Total International DTOs	110					
- Mexico	98					
Total Members (Leaders)	1,143 (174)					
Average DTO Size	11.97					
Gang Related	59					
Violent	70					
Cartel Affiliated	41					
Polydrug	37					
Money Laundering Activities	14					
Federal Case	Federal Case Designations					
OCDETF	21					
CPOT	7					
RPOT	4					

#### **B.** Affiliations and Membership

The Sinaloa Cartel and New Generation Jalisco Cartel (CJNG) exert the most influence over Mexican DTOs operating within Midwest HIDTA. PMP data indicates that 89 percent of international DTOs that operated within the Midwest HIDTA region in 2024 were linked to Mexico. Similarly, 81 percent of Midwest HIDTA law enforcement initiatives indicated that international DTOs operated within their AORs. Of those same respondents, 97 percent listed Mexico as the primary country affiliated with those DTOs.

With their larger scope of operations, international DTOs generally have higher numbers of identified membership than multi-state or local DTOs. The targeted disruption and dismantlement of international DTOs requires a high level of cooperation and coordination amongst HIDTA initiatives, law enforcement task forces, and law enforcement agencies. Thus, investigations targeting the illicit activities of international DTOs often result in a larger number of identified DTO members and leaders. International DTOs operating within the Midwest HIDTA region had an average of 12 identified members in 2024, which is larger than that of multi-state (10) or local DTOs (9).

Approximately 64 percent of international DTOs operating in the Midwest HIDTA region were described as violent. According to law enforcement initiatives, violence associated to international DTOs operating in the region is directly related to their associations with violent Mexico-based drug cartels and gangs. Mexican cartels have significant influence over the region's drug trafficking activities. The Sinaloa cartel is the most prevalent cartel in the region and is involved in international, multi-state, and local DTOs. The Sinaloa cartel, along with the CJNG, are the main sources of supply for illicit drugs for the United States and for the Midwest HIDTA region. 68 69

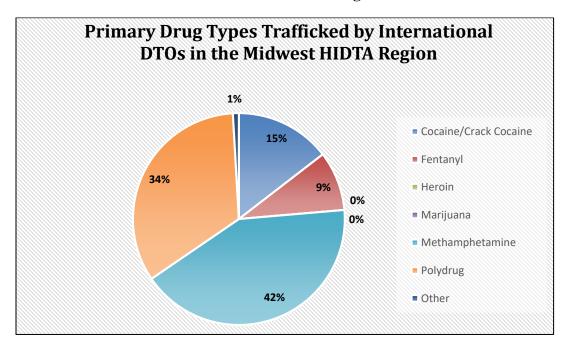
In addition to Mexican cartels, 54 percent of international DTOs within the Midwest HIDTA region have documented affiliations with gangs.<sup>70</sup> The Bloods, Crips, and Latin Kings street gangs have all been identified by law enforcement initiatives as participating in drug trafficking activities with international DTOs in the Midwest region. The Hells Angels OMG were also identified by initiatives as coordinating drug trafficking activities with international DTOs in the region.<sup>71</sup>

#### C. Activities and Methods

Seventy-six percent of the Midwest HIDTA region's international DTOs engaged in money laundering activities, according to law enforcement initiatives. International DTOs in the region utilized money remittances, casinos, and online payment systems (e.g. Cash App, PayPal, Venmo) to launder drug proceeds. Law enforcement initiatives indicated that international DTOs frequently utilized bulk cash smuggling (55 percent) and money remittances (53 percent) to return drug proceeds to the source of supply.

Approximately 34 percent of all international DTOs within the Midwest HIDTA region were polydrug trafficking organizations. Most polydrug DTOs trafficked methamphetamine and/or fentanyl. Forty-two percent of single drug international DTOs trafficked methamphetamine. Other primary drug types trafficked by international DTOs include cocaine (15 percent) and fentanyl (nine percent). Figure 13 shows the primary drug types trafficked by international DTOs identified as operating in the Midwest HIDTA region.

Figure 13. Primary Drug Types Trafficked by International DTOs Identified as Operating in the Midwest HIDTA Region.<sup>72</sup>



#### 3. Multi-State Drug Trafficking Organizations

#### A. Overview

Multi-state DTOs are the most common DTO type encountered by Midwest HIDTA law enforcement initiatives. A total of 542 multi-state DTOs were identified as operating in the Midwest HIDTA region in 2024. Twenty-five percent of multi-state DTOs were linked to California, the state most affiliated with multi-state DTOs. Illinois, Colorado, Arizona, Iowa, and Texas were the other states most closely tied to multi-state DTOs in the region. Midwest HIDTA initiatives identified 712 leaders and 4,894 other members. According to 73 percent of law enforcement initiatives, at least one multi-state DTO within their AOR had a connection to a Mexican cartel. This connection typically involves the use of a cartel member as a source of supply. 73 Table 18 shows the characteristics of multi-state DTOs identified as operating in the Midwest HIDTA region in 2024.

Table 18. Multi-State DTOs Identified as Operating in the Midwest HIDTA Region.<sup>74</sup>

Multi-State DTOs Identified by Midwest HIDTA Initiatives					
Characteristics					
Total Multi-State DTOs	542				
- California	135				
- Illinois	67				
- Colorado	62				
- Arizona	54				
- Iowa	39				
- Texas	35				
Total Members (Leaders)	4,894 (712)				
Average DTO Size	10.34				
Gang Related	109				
Violent	202				
Cartel Affiliated	26				
Polydrug	153				
Money Laundering Activities	29				
Federal Case Designations					
OCDETF	49				
СРОТ	5				
RPOT 2					

#### **B.** Affiliations and Membership

Multi-state DTOs in the Midwest HIDTA region have an average of 10 members per organization, including 1 leader and 9 additional members, slightly higher than local DTOs. This is slightly smaller than the average identified membership of international DTOs that operate within the region. PMP data states that 37 percent of multi-state DTOs in the Midwest HIDTA region were identified as violent and that 20 percent have connections to gangs. According to law

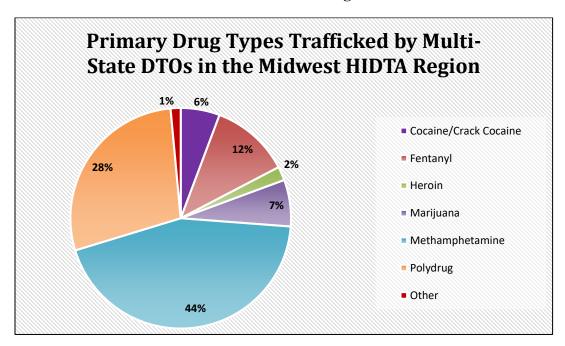
enforcement initiatives, multi-state DTOs operating within the region are linked to nationallyaffiliated street gangs, including the Bloods, Crips, Gangster Disciples, and the Aryan Brotherhood. They are also linked to OMGs, including the Bandidos, Galloping Goose, Hells Angels, and Outlaws.<sup>75</sup>

#### C. Activities and Methods

Approximately 76 percent of law enforcement initiatives reported that multi-state DTOs within their AOR conducted money laundering activities. Similar to international DTOs, multistate DTOs in the Midwest HIDTA region utilize money remittances, and online payment systems. Forty-five percent of Midwest HIDTA initiatives indicated multi-state DTOs in their AORs use money remittances and approximately 52 percent used online payment systems. According to the initiatives, the most common methods utilized to return drug proceeds to the source by multi-state DTOs was through bulk cash smuggling (56 percent) and online payment systems (49 percent).

Twenty-eight percent of multi-state DTOs operating in the region were identified as polydrug trafficking organizations. Methamphetamine trafficking organizations accounted for 44 percent of multi-state DTOs operating in the Midwest HIDTA region, the highest percentage of any drug type. Other primary drug types trafficked by multi-state DTOs operating in the region include fentanyl (12 percent), marijuana (seven percent), cocaine (six percent), and heroin (two percent). Multi-state DTOs are responsible for more marijuana trafficking than any other DTO category. Most of the marijuana in the Midwest HIDTA region is transported in from Western states with recreational and medical marijuana programs (e.g. California, Colorado) but that will potentially shift with Midwest HIDTA states having their own state-approved marijuana markets. Figure 14 shows the primary drug types trafficked by multi-state DTOs identified as operating in the Midwest HIDTA region.

Figure 14. Primary Drug Types Trafficked by Multi-State DTOs Identified as Operating in the Midwest HIDTA Region.<sup>76</sup>



21

27

2

0

#### 4. Local Drug Trafficking Organizations

#### A. Overview

Local DTOs were the second most encountered DTO type encountered by Midwest HIDTA law enforcement initiatives, behind multi-state DTOs. A total of 394 local DTOs were identified as operating in the Midwest HIDTA region in 2024. Of the local DTOs, Midwest HIDTA initiatives identified 513 leaders and 2,948 members. Table 19 lists the traits of local DTOs within the Midwest HIDTA region in 2024.

Local DTOs Identified by Midwest HIDTA Initiatives					
Characteristics					
Total Local DTOs	394				
Total Members (Leaders)	2,948 (513)				
Average DTO Size	8.78				
Gang Related	77				
Violent	148				
Cartel Affiliated	7				
Polydrug 90					

**Federal Case Designations** 

*Table 19.* Local DTOs Identified as Operating in the Midwest HIDTA Region.<sup>77</sup>

#### **B.** Affiliations and Membership

Money Laundering Activities

**OCDETF** 

**CPOT** 

**RPOT** 

Local DTOs operate within each state of the Midwest HIDTA region. Ninety-six percent of law enforcement initiatives indicated that local DTOs were operating within their AORs. Midwest HIDTA initiatives identified 2,948 members and 513 leaders belonging to local DTOs, with an average of 9 members per organization.

More than half (64 percent) of Midwest HIDTA initiatives reported that local DTOs within their AOR were affiliated with Mexican drug cartels. The Sinaloa Cartel and the CNJG were the most cited Mexican cartels affiliated with local DTOs.

According to data from the PMP, approximately 38 percent of local DTOs operating in the Midwest HIDTA region were identified as violent. Approximately 20 percent of local DTOs had connections to street and OMGs. According to law enforcement initiatives, local DTOs coordinated criminal activities with nationally-affiliated street gangs such as the Bloods and Crips. Furthermore, many local DTOs collaborate with local street gangs that have no national affiliation. Law enforcement survey data indicates that neighborhood-based street gangs are responsible for more drug trafficking and violence than nationally affiliated street gangs. Some nationally

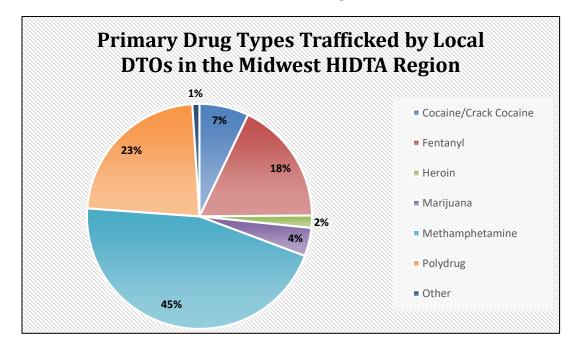
affiliated street gangs associated with local DTOs include the Bloods, Crips, and Florencia 13.78 Hells Angels, Sons of Silence, Galloping Goose, and Saddle Tramps OMGs are believed to be affiliated with local DTOs within the Midwest HIDTA region.<sup>79</sup>

#### C. Activities and Methods

Sixty-nine percent of LES respondents stated that local DTOs within their AORs engaged in money laundering activities. Online payment systems (58 percent), money remittances (40 percent) and casinos (40 percent) were the top methods utilized by local DTOs. Initiatives indicated local DTOs primarily utilize online payments systems (approximately 56 percent) and bulk cash smuggling (approximately 47 percent) to return the drug proceeds to the source of supply.

Methamphetamine trafficking organizations accounted for 45 percent of local DTOs operating in the Midwest HIDTA region. Twenty-three percent of local DTOs were identified by Midwest HIDTA initiatives as polydrug trafficking organizations. Other primary drug types trafficked by local DTOs include fentanyl (18 percent), cocaine/crack (seven percent), marijuana (four percent), and heroin (two percent). Figure 15 shows the primary drug types trafficked by local DTOs identified as operating in the Midwest HIDTA region.

Figure 15. Primary Drug Types Trafficked by Local DTOs Identified as Operating in the Midwest HIDTA Region.<sup>80</sup>



#### 5. Tren de Aragua

The Midwest HIDTA region queried the Midwest HIDTA initiatives about the presence of Tren de Aragua (TdA), a gang that started in a Venezuelan prison in 2014. The TdA spread its power and influence to other countries including Colombia, Peru and Chile. The gang has been linked to drug smuggling, human trafficking, and extortion rackets. In February 2025, TdA was designated as a foreign terrorist organization by U.S. State Department.<sup>81</sup> Midwest HIDTA initiatives in Topeka (Kansas), Lincoln and Omaha (Nebraska), each reported TdA members were operating as part of a DTO in their AOR. As a group of interest, activity by TdA will continue to be monitored by the Midwest HIDTA.

#### 6. Intelligence Gaps

- What methods and recruitment strategies do local DTOs use in order to recruit drivers to transport drugs?
- What is the true extent of cartel associations to Midwest HIDTA-based DTOs?
- Beyond acting as the source of supply, how involved are Mexico-associated DTOs with street gangs and OMGs in the Midwest HIDTA region?

#### 7. Source Considerations

There were several sources consulted in the development of the DTO section of the 2025 Midwest HIDTA Threat Assessment. These sources include Midwest HIDTA PMP data, law enforcement initiative responses to the 2025 LES, and the DEA's 2024 National Drug Threat Assessment.

## VI. Money Laundering Organizations

#### A. Overview of All Money Laundering Organizations

Four money laundering organizations (MLOs) were identified within the Midwest HIDTA region in 2024, according to PMP data. Most DTOs operating in the Midwest HIDTA region conduct their own money laundering activities without the use of separate and distinct MLOs. Approximately 9 percent of the LES participants reported that MLOs independent of a DTO existed within their AOR, and these MLOs were described as international in scope. Only one LES respondent indicated local MLOs were operating within their AOR.<sup>82</sup>

Converting to cryptocurrency was the most-utilized technique by Midwest HIDTA-based MLOs. Business fronts and the banking system (deposit with a quick withdrawal in a different area) were also indicated as being highly used by MLOs in the region.

Table 20. Money Laundering Organizations Identified as Operating in the Midwest HIDTA Region.<sup>83</sup>

Money Laundering Organizations Identified by Midwest HIDTA Initiatives							
Total Identified International Multi-State Local							
4	1	1	2				

#### **B.** Affiliations and Membership

Mexico was the country affiliated with the international MLO according to PMP data. Law enforcement initiatives also indicated China as being affiliated with international MLOs in their AOR. Initiatives reported that the international MLOs were linked to Mexican drug cartels, both the Sinaloa cartel and the CJNG. Midwest HIDTA initiatives reported a single multi-state MLO in PMP. Local MLOs were linked to Mexican cartels, both the CJNG and Sinaloa cartel, according to survey responses.

#### C. Activities and Methods

The utilization of the banking system is used more by MLOs than DTOs. The method is a quick withdrawal scheme where a member of the MLO deposits money in a bank branch in the Midwest HIDTA region then another member of the MLO withdrawals the money quickly from another state, usually a Southwest border state. Business fronts and conversion to cryptocurrency were both indicated to be more used by MLOs than DTOs in the Midwest HIDTA region.

#### D. Intelligence Gaps

• How prevalent is cryptocurrency use by MLOs within the Midwest HIDTA region?

- What is the true number of organizations within Midwest HIDTA whose sole purpose is to launder money?
- Are identified MLOs in reality engaged in drug trafficking or other criminal ventures?

#### **E. Source Considerations**

There were two sources consulted in the development of the MLO section of the 2025 Midwest HIDTA Threat Assessment. These sources are Midwest HIDTA PMP data and law enforcement initiative responses to the 2025 LES.

## VII. Drug-Related Poisoning Deaths in the Midwest HIDTA Region

#### 1. Centers for Disease Control and Prevention's (CDC) WONDER Data

Data collected from the CDC WONDER database illustrates that the Midwest HIDTA region experienced a 10.3 percent decrease in unintentional drug-related poisoning fatalities from 2022 to 2023. There was a 2.4 percent decrease in unintentional drug poisoning deaths across the U.S. as a whole during the same period. States within the Midwest HIDTA region reported 3,117 unintentional drug poisoning deaths in 2023, down from 3,474 in 2022. Provisional data from the CDC WONDER database for 2024 currently shows 1,813 unintentional drug poisoning deaths for the region thus far. Due to incomplete information, as lab results and validation are still pending, it is not possible to compare 2024 to previous years.<sup>84</sup>

Midwest HIDTA utilized CDC WONDER data in this section due to poisoning death data reporting not being standardized across the Midwest HIDTA states, which makes it difficult to accurately compare one state to another. Table 21 shows the change in the number of drug poisoning deaths across the Midwest HIDTA region from 2022 to 2023 with provisional data for 2024.

Table 21. Drug Poisoning Deaths in the Midwest HIDTA Region, 2022 to 2024.85

Drug Poisoning Deaths in the Midwest HIDTA Region, 2022 to 2024*							
	2022	2022 2023 2024 (Provisional) Perc		Percent Change 2022 to 2023			
Iowa	378	374	255	-1.1%			
Kansas	674	572	364	-15.1%			
Missouri	2,015	1,840	975	-8.7%			
Nebraska	197	148	92	-24.9%			
North Dakota	127	110	70	-13.4%			
South Dakota	83	73	57	-12.1			
All Midwest HIDTA states**	3,474	3,117	1,813	-10.3%			

<sup>\*</sup>These numbers reflect ICD-10 Codes: T36-50 (drug poisoning) and X40-44 (unintentional overdose)

Cocaine poisoning death data was not available for every state within the region and may be found in Table 22. As a result, the percentage change for 2022 and 2023 represents only the data for Iowa, Kansas, Missouri, and Nebraska. All Midwest HIDTA states reported a decrease in cocaine-involved fatalities with the exception of Nebraska.

<sup>\*\*</sup>The sum of the poisoning deaths for specific drug categories may exceed the total poisoning deaths in this table as more than one drug may be present in a poisoning death case.

Table 22. Cocaine Poisoning Deaths in the Midwest HIDTA Region, 2022 to 2024.86

Cocaine Poisoning Deaths in the Midwest HIDTA Region, 2022 to 2024*					
2022	2023	2024 (Provisional)	Percent Change 2022 to 2023		
49	45	27	-8.2%		
98	84	60	-14.3%		
379	368	225	-2.9%		
13	16	14	+23.1%		
550	528	334	-4.0%		
	2022 49 98 379 13	2022 2023   49 45   98 84   379 368   13 16	2022     2023     2024 (Provisional)       49     45     27       98     84     60       379     368     225       13     16     14		

Deaths involving psychostimulants moderately declined in the Midwest HIDTA region as a whole, with only Iowa experiencing a modest increase. Table 23 shows the change in psychostimulant poisoning deaths across the Midwest HIDTA region from 2022 to 2023 with provisional data for 2024.

Table 23. Psychostimulant Poisoning Deaths in the Midwest HIDTA Region, 2022 to 2024.87

Psychostimulant Poisoning Deaths in the Midwest HIDTA Region, 2022 to 2024*						
	2022	2023	2024 (Provisional)	Percent Change 2022 to 2023		
Iowa	268	275	229	+2.6%		
Kansas	396	330	213	-16.7%		
Missouri	865	860	494	-0.6%		
Nebraska	86	68	46	-20.9%		
North Dakota	52	42	18	-19.2%		
South Dakota	50	34	30	-32.0%		
All Midwest HIDTA	1,717	1,609	1,030	-6.3%		
states						

<sup>\*</sup>These numbers reflect ICD-10 code T43.6 and include: Adderall (dextroamphetamine), Ritalin (methylphenidate), and other amphetamine-type stimulants (methamphetamine, etc.)

Opioid poisoning deaths for the entire Midwest HIDTA region decreased nearly 10 percent from 2022 to 2023. The number of opioid poisoning deaths decreased in every Midwest HIDTA state with the exception of Iowa. Table 25 shows information on opioid poisoning deaths in the Midwest HIDTA region from 2022 to 2023 with provisional data for 2024.

<sup>\*\*</sup>Data suppressed by CDC WONDER due to their being less than 10.

Opioid Poisoning Deaths in the Midwest HIDTA Region, 2022 to 2024\* 2024 2022 2023 Percent Change 2022 to 2023 (Provisional) 127 +7.9% 241 260 Iowa Kansas 523 431 256 -17.6% 731 -7.9% Missouri 1,629 1.501 55 Nebraska 126 80 -36.5% North Dakota 99 90 58 -9.1% South Dakota 48 48 31 0.0% All Midwest HIDTA 2,410 1,258 -9.6% 2,666 states \*These numbers reflect ICD-10 codes T40.0-T40.4, T40.6.

Table 24. Opioid Poisoning Deaths in the Midwest HIDTA Region, 2022 to 2024.88

Using the most recent CDC WONDER data, the Midwest HIDTA assesses that the regional drug poisoning deaths are primarily attributable to opioids and psychostimulant abuse. Opioids were linked to 69 percent of poisoning deaths in Midwest HIDTA. Psychostimulants were linked to 46 percent of poisoning deaths, some of which also included opioids. The increasing availability and potency of both psychostimulants and synthetic opioids in Midwest HIDTA has significantly contributed to both fatal and non-fatal poisoning statistics. Synthetic opioids continue to be mixed with other drugs, often unbeknownst to users, which increase the chance of poisoning.

#### 2. Intelligence Gaps

What impact has naloxone availability had on reducing drug poisoning deaths in the Midwest HIDTA region?

#### 3. Source Considerations

The drug-related poisoning mortality section relied upon one data source: the CDC WONDER dataset. The CDC WONDER dataset represents the most recent drug mortality data that Midwest HIDTA is able to access for each of its six states. This data is based on the residence (state) of the decedent and not the location (state) of occurrence.

## VIII. Outlook

The Midwest HIDTA region serves as an attractive area for drug trafficking and money laundering organizations because of its extensive transportation network, varied demographics, substantial population, and centralized geography. For these reasons, the Midwest HIDTA region serves as the principal transit corridor for drug trafficking between the east and west coasts of the United States. Midwest HIDTA, having herein presented the drug threat status in this region, provides its assessment of what is expected to occur within the next year.

The Midwest HIDTA assesses with a high degree of confidence that:

- ❖ Fentanyl, marijuana, and methamphetamine will continue to be highly available in the Midwest HIDTA region.
- ❖ Cocaine will increase in availability until it is highly available across the region.
- ❖ Fentanyl will continue to pose a significant threat to the region as it is the greatest driver of drug poisoning deaths. Adulterants such as xylazine and medetomidine are of great concern to Midwest HIDTA and will continue to be such, especially as they impact poisoning deaths in the region.
- ❖ Methamphetamine will continue to pose a significant threat, with its high levels of availability, demand, use, and transportation to and through the region. Low-cost, high potency methamphetamine transported from the Southwest Border will continue to saturate both rural and metropolitan drug markets. The level of violence and crime surrounding methamphetamine production, trafficking, and use will remain a threat to both law enforcement and the public.
- Heroin and CPDs will remain threats in the region, despite their reduced and inconsistent seizure numbers, respectively.
- ❖ The availability, demand, use, and transportation of marijuana will increase as the medical marijuana programs in Nebraska, North Dakota, and South Dakota, and the recreational marijuana programs of Illinois and Missouri mature. Midwest HIDTA will continue to see high levels of marijuana trafficking as more states loosen restrictions on marijuana.
- Mexico-based DTOs will remain the primary suppliers of fentanyl, methamphetamine, heroin, cocaine, and counterfeit prescription drugs. Mexican cartels and their affiliated DTOs will continue to expand their influence in the region's illicit drug trade as they increasingly control each stage of the drug distribution process. TdA expansion is likely to spread from areas indicated to other areas of the Midwest HIDTA region.
- ❖ The use of mailing services by DTOs to smuggle illicit drugs will continue to increase as criminals realize the decreased risk of detection and anonymity that accompany this technique over traditional transportation methods.
- ❖ The use of encrypted mobile applications (e.g. WhatsApp, Signal) and social media platforms (e.g. Facebook Messenger, Snapchat) are frequently utilized by both DTOs and

- MLOs, and will continue to be utilized to avoid law enforcement interception of group communications.
- ❖ The mixing of opioids with other drugs will continue to impact drug poisoning statistics in the Midwest HIDTA region.

## IX. Appendices

#### **Appendix I: Methodology**

The 2025 Midwest HIDTA Threat Assessment addresses the current drug threat within the region. The Midwest HIDTA Investigative Support Center (ISC), the Kansas Intelligence and Information Exchange, The St. Louis Intelligence Group, the Omaha DEA Intelligence Group, and the Midwest HIDTA Overdose Response Strategy (ORS) team prepared the Threat Assessment. Both quantitative and qualitative data were utilized to complete the Threat Assessment. The Threat Assessment process began with the development of a Law Enforcement Survey and Public Health Survey. The surveys were created to assess the drug threat in the Midwest HIDTA region and to fulfill ONDCP annual reporting requirements. The LES was sent to all HIDTA enforcement and intelligence initiatives, while the PHS was sent to its public health partners across the Midwest region. Survey respondents completed the survey online. Respondents were asked to consider only their initiative's AORs when responding to survey questions. The results of the survey, combined with information from other data sources, were used to form the Midwest HIDTA Threat Assessment. Additional informational sources that were utilized to develop the Threat Assessment include: CDC WONDER data, DEA's *National Drug Threat Assessment*, PMP data, SAMHSA's TEDS dataset, CBP Seizure Data, and information from the U.S. Census Bureau.

The assessment of the drug threat in the Midwest HIDTA region was made while considering limitations of data sources utilized. For example, the survey was only disseminated to Midwest HIDTA enforcement and intelligence initiatives and may not represent the illicit drug threat outside of those areas represented by Midwest HIDTA initiatives. However, HIDTA initiatives have been established in areas of the region that are believed to have the greatest drug threats. Likewise, PMP data is obtained only from HIDTA initiatives. The public health survey is limited in that the information is from those that responded to the survey and may not be the complete picture of the region. Quantitative data reported in the Threat Assessment was obtained on the following dates: PMP (MLO-related information) – March 4, 2025; PMP (DTO-related information) – March 4, 2025; PMP (drug seizure-related information) – March 4, 2025. The information provided by these sources, though incomplete, provides an important perspective into Midwest HIDTA regional drug threats and any DTO/MLO presence in 2024. An explanation of primary sources utilized to develop the Threat Assessment is provided below.

#### **Appendix II: Explanation of Sources**

Office of National Drug Control Policy (ONDCP) Performance Management Process (PMP) Data-A component of the Executive Office of the President, ONDCP was created by the Anti-Drug Abuse Act of 1988. ONDCP advises the President on drug-control issues, coordinates drug-control activities and related funding across the Federal government, and produces the annual National Drug Control Strategy, which outlines Administration efforts to reduce illicit drug use, manufacturing and trafficking, drug-related crime and violence, and drug-related health consequences. PMP data contains information related to drug seizures, drug trafficking organizations (DTOs), and money laundering organizations (MLOs) known to operate in the HIDTA region. At least quarterly, each HIDTA funded task force and HIDTA are required to update the PMP database with information regarding seizures of drugs and drug-related assets, as well as changes in the status of a DTO/MLO, including when a DTO/MLO has been disrupted or dismantled.

Centers for Disease Control and Prevention (CDC) National Center for Health Statistics Mortality Data on CDC WONDER – This dataset is updated annually by the CDC. The data captures drugspecific poisoning death data using the International Classification of Diseases, Tenth Revision (ICD-10). Drug poisoning deaths are identified using underlying cause-of-death codes T36-T42 and T44-T50.

Midwest HIDTA Law Enforcement Survey (LES) – Annual Survey administered by the Midwest HIDTA ISC and used to obtain information related to the various drug threats within the Midwest HIDTA region covering: specific threats, drug-related violence and crime, distribution, smuggling, money laundering, and drug trafficking organizations. Responses are collected from HIDTA funded task forces within the Midwest HIDTA region. There were 55 responses to this year's Midwest HIDTA Threat Assessment Survey. Appendix III lists the Midwest HIDTA initiatives who responded to the 2025 LES.

Midwest HIDTA Public Health Survey (PHS) – Midwest HIDTA ISC and Overdose Response Strategy (ORS) teams developed and administered this survey to public health agencies throughout Midwest HIDTA to obtain information related to the various drug threats from a public health perspective in order to supplement LES data. There were 117 responses to this year's Midwest HIDTA PHS, listed in Appendix IV.

U.S. Customs and Border Protection (CBP) Drug Seizure Statistics – This data is publicly available via CBP's public-facing website. This data represents the total weight of drug seizures interdicted at various ports of entry along the U.S. border. Drug seizure statistics are represented in pounds and may be refined using several filters.

#### **Appendix III: Midwest HIDTA Initiatives**

The following Midwest HIDTA initiatives are grouped according to the state in which they are located. Those marked with an \* participated in the 2025 LES.

#### **Illinois**

Drug and Crime Reduction Initiative of the Metro East (DCRIME)\* Quad Cities Metropolitan Enforcement Group\*

#### Iowa

Cedar Rapids DEA Task Force\* Des Moines DEA Task Force\* Iowa Interdiction Support\* Muscatine Drug Task Force\* Tri-State Sioux City DEA Task Force\*

#### Kansas

Garden City/Finney County Drug Task Force\* Kansas City/Overland Park DEA Task Force\* Kansas Intelligence and Information Exchange\* Kansas Interdiction Support\* Kansas Parcel Interdiction Task Force\* Northeast Kansas Drug Task Force\* Topeka DEA Task Force\* Wichita DEA Task Force\*

#### **Missouri**

ATF Crime Gun Intelligence Center\* Cape Girardeau DEA Drug Task Force\* Franklin County Narcotics Enforcement Unit\* Jackson County Drug Task Force\* Jefferson City DEA Task Force\* Jefferson County Municipal Enforcement Group\* Kansas City DEA Interdiction Task Force\*

Kansas City DEA Northland Task Force\*

Kansas City FBI Combined Task Force\*

Kansas City HSI Financial Task Force\*

Kansas City, Missouri Metro Task Force\*

Midwest HIDTA Investigative Support Center

Missouri Interdiction and Information Exchange\*

Office of the Director

Ozark Drug Enforcement Team (ODET)\*

Regional Training Initiative

St. Charles County Drug Task Force\*

St. Louis County Multi-Jurisdictional Drug Enforcement Task Force\*

St Louis County Multi-Jurisdictional Heroin Prevention Initiative

St. Louis DEA Intelligence Group\*

St. Louis DEA Major Investigations/Conspiracy Group 37\*

St Louis DEA Regional Intercept Center

St. Louis DEA Violent Traffickers Task Force\*

St. Louis FBI Squad 5\*

St Louis HSI Border Enforcement Task Force (BEST)\*

Southeast Missouri Drug Task Force\*

Springfield DEA Task Force\*

**Technology Coordination** 

#### **Nebraska**

C.O.D.E Task Force\*

Greater Omaha Safe Streets Task Force\*

Lincoln/Lancaster Drug Task Force\*

Nebraska Interdiction Support\*

Omaha ATF Illegal Firearms Task Force\*

Omaha DEA Drug Task Force\*

Omaha Metro Drug Task Force\*

TRIDENT (Tri-City Drug Enforcement Team) \*

WING Drug Task Force\*

#### North Dakota

Fargo DEA Task Force\*

Grand Forks Narcotics Task Force\*

Metro Area Narcotics Task Force\*

North Dakota Interdiction\*

#### South Dakota

Sioux Falls Task Force\*

South Dakota Interdiction Support\*

Unified Narcotics Enforcement Team (UNET)\*

#### **Appendix IV: 2025 Public Health Survey Participating Agencies**

The following agencies/organizations participated in the 2025 Midwest HIDTA PHS and are grouped according to the state in which they are located.

#### Iowa

Alcohol and Drug Dependency Services Iowa Office of Drug Control Policy

Appanoose County Public Health

ASAC/Iowa Alliance of Coalitions for North Fayette Valley Community Coalition

(NFVCC) Change

Perry High School **CAUSE** 

Sieda Community Action Cedar County Public Health Steps of Hope Iowa CG Public Health

**UCS** Healthcare Clinton Substance Abuse Council (CSAC)

Webster County Sheriff's Office Elevate CCBHC

**Employee And Family Resources** YWCA Fort Dodge

Globe Gazette

#### Kansas

COMCARE-Addiction Treatment Services New Dawn Wellness & Recovery Center, Inc

Recovery Concepts Inc **DCCCA** 

Tiyospaye Inc DBA Higher Ground Labette Center for Mental Health Services. Inc

Mirror

#### Missouri

Barry County Health Department **Knox County Health Department** Livingston County Health Center Beacon Mental Health

Mercer County Health Department Behavioral Health Group (BHG) Missouri Department of Mental Health Burrell Behavioral Health/EPICC Newton County Health Department Caldwell County Health Department

Cass County Health Department PFH/EPICC Central Ozarks Medical Centers Places for People

Platte County Health Department City of St. Joseph Health Department Polk County Health Center Clinton County Health Department

CMHS/Burrell Probation & Parole

Scotland County Health Department Commcare EPICC

Comprehensive Mental Health Services Springfield-Greene County Health Department Stoddard County Public Health Department Cooper County Public Health Center

Crawford County Health Department Sullivan County Health Department EPICC - Compass Health Warren County Health Department

Washington County Health Department Gasconade County Health Department

Gibson Center for Behavioral Change Wayne County Health Center Heartland Center for Behavioral Change Wright County Health Department

Henry County Health Center

#### Nebraska

Douglas County Health Department Nance County Sheriff's Office

Four Corners Health Department Lincoln-Lancaster County Health Department Loup Basin Public Health Department

South Heartland District Health Department Two Rivers Public Health Department

#### North Dakota

Life Care Unites Foundation

West River Head Start

#### South Dakota

Addiction Recovery Centers of the Black

Hills

Avera Addiction Care Center

Avera Carefligh

Avera ED Freestanding

Avera McKennan

Avera McKennan Emergency Department

Avera Sacred Heart Hospital

Avera St. Luke's Hospital/Addiction Care

Center

Avera St. Mary's Hospital Bowdle Healthcare Center

Carroll Institute

Community Memorial Hospital

ED

**Encompass Health Hospital** 

Faulkton Area Medical Center

Hope House

Main Gate Counseling Services Michael Glynn Memorial Coalition Passages Woman's Transitional Living

Project Recovery

Sanford Canton Inwood Medical Center

Southeastern Directions for Life

Tallgrass Recovery

Volunteers of America, Dakotas

Wagner Community Memorial Hospital

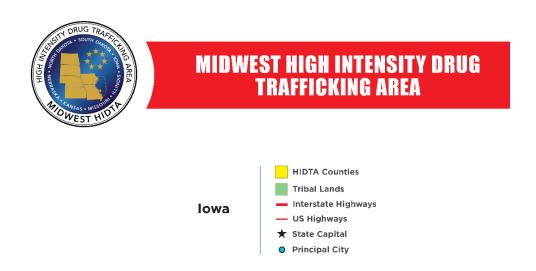
Watertown Police Department

Western Prevention Resource Center

#### **Appendix V: State Maps**

Individual state maps may be found in the following figures: Iowa may be found in Figure 16, Kansas in Figure 17, Missouri in Figure 18, Nebraska in Figure 19, North Dakota in Figure 20, and South Dakota in Figure 21. Midwest HIDTA does not have a map for the three HIDTAdesignated counties within Illinois. The maps include HIDTA designated counties, major highways and, in North Dakota's case, the ports of entries shared with Canada.

Figure 16: Detailed Map of Iowa Depicting HIDTA Designated Counties and Major Highway Systems.



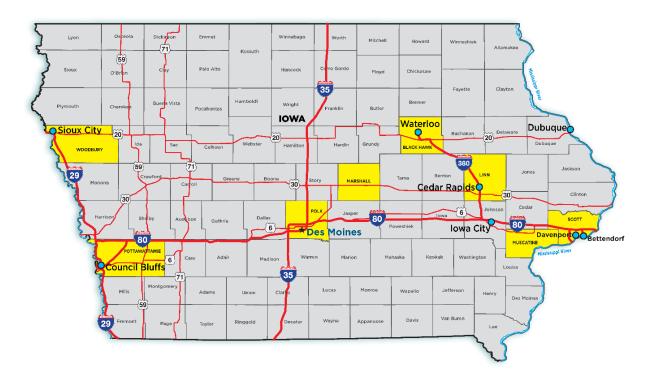


Figure 17. Detailed Map of Kansas Depicting HIDTA Designated Counties and Major Highway Systems.



★ State Capital Principal City

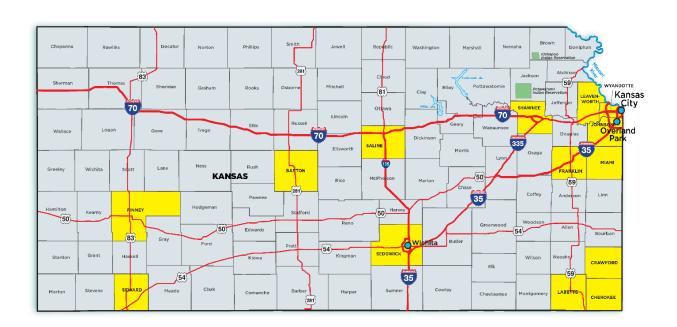


Figure 18. Detailed Map of Missouri Depicting HIDTA Designated Counties and Major Highway Systems.

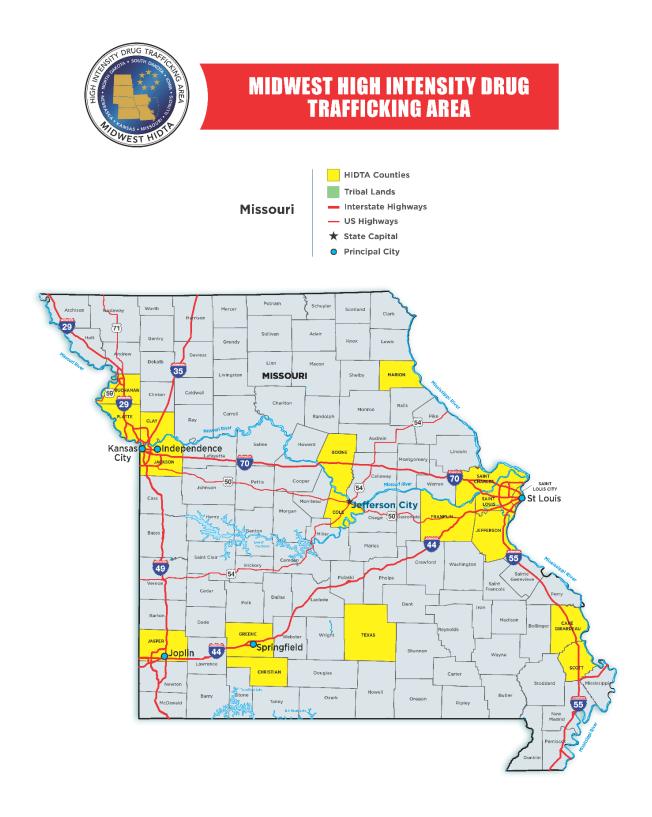


Figure 19. Detailed Map of Nebraska Depicting HIDTA Designated Counties and Major Highway Systems.



Nebraska

Interstate Highways

 US Highways ★ State Capital Principal City



Figure 20. Detailed Map of North Dakota Depicting HIDTA Designated Counties, Ports of Entry with Canada, and Major Highway Systems.



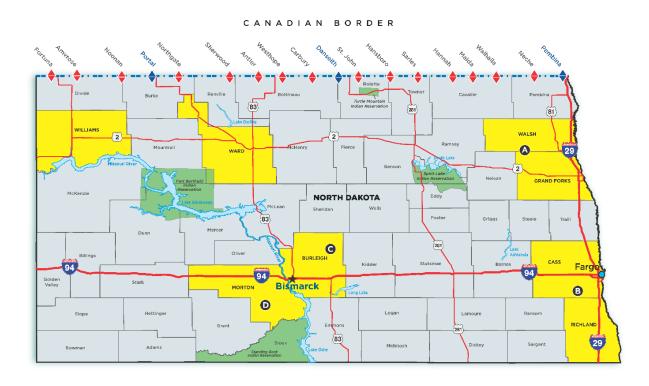
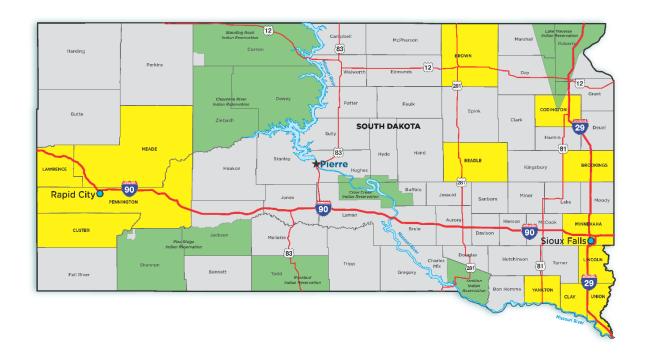




Figure 21. Detailed Map of South Dakota Depicting HIDTA Designated Counties and Major Highway Systems.





# **Appendix VI: State-Level Data Tables**

Table 25. LES and PHS: Greatest Drug Threats by State

Law Enforcement Survey: Top Drug Threats By State							
	Primary Threat	Secondary Threat					
	TIED:	TIED:					
Illinois	Fentanyl	Cocaine					
	Methamphetamine	Methamphetamine					
Iowa	Fentanyl	Methamphetamine					
Kansas	Fentanyl	Methamphetamine					
Missouri	Fentanyl	Methamphetamine					
Nebraska	Methamphetamine	Fentanyl					
	TIED:	TIED:					
North Dakota	Fentanyl	Fentanyl					
	Methamphetamine	Methamphetamine					
South Dakota	Methamphetamine	Fentanyl					
Public 1	Health Survey: Top Drug	Threats By State					
	Primar	y Threat					
Iowa	Metham	phetamine					
Kansas	Fen	tanyl					
Missouri	Fentanyl						
Nebraska	Methamphetamine						
North Dakota	TIED: Fentanyl and Methamphetamine						
South Dakota	Metham	phetamine					

Table 26. LES: Drug Availability by State

	Law Enforcement Survey: Level of Availability By State (LES)							
	Illinois	Iowa	Kansas	Missouri	Nebraska	North Dakota	South Dakota	
Cocaine	High	High	Moderate	High	Moderate	High	Moderate	
CPDs	Moderate	Low	Moderate	Moderate	Low	Moderate	Low	
Fentanyl Pills	Moderate- High	High	High	High	High	High	High	
Fentanyl Powder	Moderate- High	Low	Moderate	High	Moderate	High	High	
Marijuana	High	High	High	High	High	High	High	
Methamphetamine	High	High	High	High	High	High	High	
NPSs	Moderate	Low	Low	Low	High	Low	Moderate	
Psychedelics	Moderate	Low	Moderate	Moderate	Low	Moderate- Low	High	
Other Opioids (e.g. Heroin)	Moderate	High	Moderate	Moderate	Low	Moderate- Low	Moderate	

Table 27. DTO Summary Table for All Identified DTOs Operating in the Midwest HIDTA Region.

Midwest HIDTA DTOs Identified in 2024		
Characteristics		
Identified	1,039	
- International	123	
- Multi-State	542	
- Local	374	
Total Members (Leaders)	8,680 (1,447)	
Average DTO Size	9.75	
Gang Related	264	
Violent	464	
Polydrug	283	
Cartel Affiliated	74	
Money Laundering Activities	90	
Federal Case Designations		
OCDETF	99	
CPOT	11	
RPOT	4	

## Appendix VIII: Drug Trafficking Organization Summary Table by State

The individual DTO summary table for each state may be found in the following figures. Illinois may be found in Table 28, Iowa may be found in Table 29, Kansas in Table 30, Missouri in Table 31, Nebraska in Table 32, North Dakota in Table 33, and South Dakota in Table 34. The tables present information on the DTOs found in each state that were identified in 2024.

Table 28. DTO Summary Table for all DTOs Identified in Illinois.

Illinois DTOs Identified*	
Characteristics	
Identified	114
- International	6
- Multi-State	74
- Local	34
Total Members (Leaders)	464 (115)
Average DTO Size	5.08
Gang Related	11
Violent	25
Cartel Affiliated	4
Polydrug	22
Federal Case Designations	
OCDETF	0
CPOT	0
RPOT	0

<sup>\*</sup>This data only originated from the three Midwest HIDTA counties and two Midwest HIDTA initiatives in Illinois

Table 29. DTO Summary Table for all Identified DTOs Operating in Iowa.

Iowa DTOs Identified		
Characteristics		
Identified	177	
- International	5	
- Multi-State	107	
- Local	65	
Total Members (Leaders)	1,011 (194)	
Average DTO Size	6.81	
Gang Related	14	
Violent	31	
Cartel Affiliated	0	
Polydrug	27	
Federal Case Designations		
OCDETF	6	
CPOT	1	
RPOT	0	

Kansas DTOs Identified		
Characteristics		
Identified	75	
- International	16	
- Multi-State	31	
- Local	28	
Total Members (Leaders)	606 (120)	
Average DTO Size	9.68	
Gang Related	20	
Violent	35	
Cartel Affiliated	11	
Polydrug	33	
Federal Case Designations		
OCDETF	11	
CPOT	1	
RPOT	3	

Table 31. DTO Summary Table for all Identified DTOs Operating in Missouri.

Missouri DTOs Identified		
Characteristics		
Identified	346	
- International	40	
- Multi-State	129	
- Local	177	
Total Members (Leaders)	3,572 (564)	
Average DTO Size	11.95	
Gang Related	132	
Violent	206	
Cartel Affiliated	39	
Polydrug	128	
Federal Case Designations		
OCDETF	61	
CPOT	11	
RPOT	1	

Nebraska DTOs Identified		
Characteristics		
Identified	146	
- International	36	
- Multi-State	58	
- Local	52	
Total Members (Leaders)	1,219 (201)	
Average DTO Size	9.73	
Gang Related	45	
Violent	73	
Cartel Affiliated	16	
Polydrug	25	
Federal Case Designations		
OCDETF	12	
CPOT	0	
RPOT	1	

Table 33. DTO Summary Table for all Identified DTOs Operating in North Dakota.

North Dakota DTOs Identified		
Characteristics		
Identified	89	
- International	3	
- Multi-State	61	
- Local	25	
Total Members (Leaders)	1,375 (106)	
Average DTO Size	16.64	
Gang Related	7	
Violent	31	
	4	
Polydrug	15	
Federal Case Designations		
OCDETF	5	
CPOT	0	
RPOT	0	

South Dakota DTOs Identified		
Characteristics		
Identified	99	
- International	4	
- Multi-State	82	
- Local	13	
Total Members (Leaders)	738 (99)	
Average DTO Size	8.45	
Gang Related	16	
Violent	19	
Cartel Affiliated	0	
Polydrug	30	
Federal Case Designations		
OCDETF	2	
CPOT	1	
RPOT	1	

## **Appendix IX: Money Laundering Organization Summary Table by State**

Table 35. MLO Summary Table for all Identified MLOs Operating in Illinois.

Illinois MLOs Identified*		
Characteristics		
Identified	2	
- International	1	
- Multi-State	1	
- Local	0	
Total Members (Leaders)	8 (2)	
Gang Related	0	
Violent	0	
Federal Case Designations		
OCDETF	0	
CPOT	0	
RPOT	0	

<sup>\*</sup>This data only originated from the three Midwest HIDTA counties and two Midwest HIDTA initiatives in Illinois

Table 36. MLO Summary Table for all Identified MLOs Operating in Missouri.

Missouri MLOs Identified		
Characteristics		
Identified	1	
- International	0	
- Multi-State	0	
- Local	1	
Total Members (Leaders)	21 (2)	
Gang Related	1	
Violent	1	
Federal Case Designations		
OCDETF	0	
CPOT	0	
RPOT	0	

North Dakota MLOs Identified		
Characteristics		
Identified	1	
- International	0	
- Multi-State	0	
- Local	1	
Total Members (Leaders)	6 (1)	
Gang Related	0	
Violent	0	
Federal Case Designations		
OCDETF	0	
CPOT	0	
RPOT	0	

# **Appendix X: List of Figures and Tables Figures**

Ι.	Overall Map of the Midwest HIDTA Region Depicting HIDTA Designated Counties,	
	Interstate Highway System and Ports of Entry with Canada.	6
2.	LES: Transportation Methods Utilized for Drug Trafficking in the Midwest HIDTA	
	region	8
3.	LES: Availability by Drug Type	.10
4.	Fentanyl Seizures by Midwest HIDTA Initiatives, 2019-2024	12
5.	Methamphetamine Seizures by Midwest HIDTA Initiatives, 2019-2024	16
6.	Cocaine Seizures by Midwest HIDTA Initiatives, 2019-2024	.20
7.	Heroin Seizures by Midwest HIDTA Initiatives, 2019-2024	.23
8.	Marijuana Seizures by Midwest HIDTA Initiatives, 2019-2024	27
9.	LES: Indoor-Outdoor Marijuana Production in the Midwest HIDTA Region	.29
10.	CPD Diversion Methods: LES Respondents	31
11.	CPD Seizures by Midwest HIDTA Initiatives, 2019-2024	31
12.	Primary Drug Types Trafficked by All DTOs Identified as Operating in the Midwest	
	HIDTA Region.	41
13.	Primary Drug Types Trafficked by International DTOs Identified as Operating in the	
	Midwest HIDTA Region	45
14.	Primary Drug Types Trafficked by Multi-State DTOs Identified as Operating in the	
	Midwest HIDTA Region.	48
15.	Primary Drug Types Trafficked by Local DTOs Identified as Operating in the Midwest	t
	HIDTA Region.	50
16.	Detailed Map of Iowa Depicting HIDTA Designated Counties and Major Highway	
	Systems.	65
17.	Detailed Map of Kansas Depicting HIDTA Designated Counties and Major Highway	
	Systems.	66
18.	Detailed Map of Missouri Depicting HIDTA Designated Counties and Major Highway	,
	Systems.	67
19.	Detailed Map of Nebraska Depicting HIDTA Designated Counties and Major Highway	y
	Systems.	68
20.	Detailed Map of North Dakota Depicting HIDTA Designated Counties, Ports of Entry	
	with Canada, and Major Highway Systems.	69
21.	Detailed Map of South Dakota Depicting HIDTA Designated Counties and Major	
	Highway Systems	70

### **Tables**

1.	2023 U.S. Population Ranking of the Most Populated Metropolitan Statistical Areas i	n
	the Midwest HIDTA Region.	5
2.	Midwest HIDTA Threat Assessment: Drug Threat Ranking	9
3.	Treatment Episode Data Sets - Other Opiates	14
4.	2024 Drug Pricing Data – Fentanyl	
5.	Treatment Episode Data Sets - Amphetamines	17
6.	2024 Drug Pricing Data – Crystal Methamphetamine	18
7.	Treatment Episode Data Sets - Cocaine	21
8.	2024 Drug Pricing Data – Cocaine	21
9.	Treatment Episode Data Sets – Heroin	24
	. 2024 Drug Pricing Data – Heroin	
11.	. Treatment Episode Data Sets - Marijuana	28
12.	. 2024 Drug Pricing Data – Marijuana	28
13.	. 2024 Drug Pricing Data – CPDs	32
14.	. Treatment Episode Data Sets - Hallucinogens	35
15.	. Violent DTOs Identified by Midwest HIDTA Initiatives	41
16.	. Percentage of Violent DTOs Identified by Midwest HIDTA Initiatives in 2018 & 202	4.42
17.	. International DTOs Identified as Operating in Midwest HIDTA	43
18.	. Multi-State DTOs Identified as Operating in the Midwest HIDTA Region	46
19.	. Local DTOs Identified as Operating in the Midwest HIDTA Region	49
20.	. Money Laundering Organizations Identified as Operating in the Midwest HIDTA	
	Region.	52
21.	. Drug Poisoning Deaths in the Midwest HIDTA Region, 2022 to 2024	54
22.	. Cocaine Poisoning Deaths in the Midwest HIDTA Region, 2022 to 2024	55
23.	. Psychostimulant Poisoning Deaths in the Midwest HIDTA Region, 2022 to 2024	55
24.	. Opioid Poisoning Deaths in the Midwest HIDTA Region, 2022 to 2024	56
25.	. LES and PHS: Greatest Drug Threats by State	71
26.	. LES: Drug Availability by State	72
27.	. DTO Summary Table for all Identified DTOs Operating in the Midwest HIDTA	
	Region.	73
28.	. DTO Summary Table for all Identified DTOs Operating in Illinois	74
29.	. DTO Summary Table for all Identified DTOs Operating in Iowa	74
30.	. DTO Summary Table for all Identified DTOs Operating in Kansas	75
31.	. DTO Summary Table for all Identified DTOs Operating in Missouri	75
32.	. DTO Summary Table for all Identified DTOs Operating in Nebraska.	76
33.	. DTO Summary Table for all Identified DTOs Operating in North Dakota	76
34.	. DTO Summary Table for all Identified DTOs Operating in South Dakota	77
35.	. MLO Summary Table for all Identified MLOs Operating in Illinois	78
36.	. MLO Summary Table for all Identified MLOs Operating in Missouri	78
37.	. MLO Summary Table for all Identified MLOs Operating in North Dakota	79

#### **Appendix XI: Endnotes**

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