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**UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA**

MICHELE S. MORGAN-GOMEZ,)	No. ED CV13-53-AS
)	
Plaintiff,)	MEMORANDUM DECISION AND ORDER
v.)	
)	
CAROLYN W. COLVIN,)	
Acting Commissioner of the)	
Social Security Administration,)	
)	
Defendant.)	

I.

INTRODUCTION

On January 18, 2013, Plaintiff Michele S. Morgan-Gomez ("Plaintiff") filed a Complaint, pursuant to 42 U.S.C. §§ 405(g) and 1383(c) (Docket Entry No. 3). The Complaint seeks to reverse the decision of the Commissioner of the Social Security Administration ("Commissioner" or "Defendant") denying Plaintiff's applications for a period of disability, disability insurance benefits, and supplemental security income. (Compl. 1-2.) The Complaint requests the Court to award benefits or, in the alternative, remand the matter

1 for a new hearing. (See id. at 2-3.) On August 1, 2013, Defendant
2 filed an Answer to the Complaint (Docket Entry No. 13) and a
3 Certified Administrative Record ("AR") (Docket Entry No. 14). On
4 August 23 and August 27, 2013, respectively, the parties consented to
5 the jurisdiction of the undersigned United States Magistrate Judge,
6 pursuant to 28 U.S.C. § 636(c) (Docket Entry Nos. 17, 18). On
7 October 17, 2013, the parties filed a Joint Stipulation for
8 Disposition ("Joint Stip.") (Docket Entry No. 23). For the reasons
9 stated below, the decision of the Commissioner denying benefits is
10 REVERSED and this matter is REMANDED to the Commissioner for further
11 administrative action consistent with this Order.

12 13 **II.**

14 **PROCEDURAL HISTORY**

15
16 On July 9, 2009, Plaintiff filed applications for a period of
17 disability, disability insurance benefits, and supplemental security
18 income, alleging a period of disability beginning on November 6,
19 2006. (AR 138-41, 142-49.) On September 26, 2009, the Commissioner
20 issued an initial denial of Plaintiff's applications. (Id. at
21 69-73.) On March 11, 2010, the Commissioner denied Plaintiff's
22 applications upon reconsideration. (Id. at 76-81.) On May 6, 2010,
23 Plaintiff requested a de novo hearing before an Administrative Law
24 Judge ("ALJ"). (Id. at 82-84.)

25
26 On June 2, 2011, ALJ Joseph D. Schloss conducted a hearing in
27 this matter in San Bernardino, California. (Id. at 37-64.) At the
28 hearing, Plaintiff, represented by counsel, appeared and testified.

1 (Id. at 37, 43-58.) Moreover, William Debolt, a board-certified
2 neurologist who did not examine Plaintiff, and Sandra Fioretti, a
3 vocational expert, both testified at the hearing as well. (Id. at
4 30, 37, 39-44, 47, 58-61.) On August 10, 2011, the ALJ issued a
5 decision unfavorable to Plaintiff. (Id. at 21-32.)
6

7 On October 6, 2011, Plaintiff requested that the Appeals Council
8 review the ALJ's decision. (Id. at 17-19.) On October 26, 2012, the
9 Appeals Council denied Plaintiff's request for review, rendering the
10 ALJ's decision final. (Id. at 1-3.) On January 18, 2013, Plaintiff
11 filed her Complaint in this Court, seeking to reverse the ALJ's
12 decision. (Compl. 1-3.) The parties stipulate that Plaintiff's
13 initiation of this civil action was timely and that the Court has
14 jurisdiction to review the final decision of the Commissioner.
15 (Joint Stip. 3.)
16

17 III.

18 FACTUAL BACKGROUND

19 20 A. Plaintiff's Allegations During The Administrative 21 Proceedings 22

23 When Plaintiff applied for benefits, she asserted that she was
24 disabled because she had "[e]pilepsy, grand-mal seizures, memory
25 loss, asthma, [and] migraines." (AR 69.) At the hearing, she
26 testified about each of these purported conditions, and also asserted
27 that she had anxiety. (See id. at 40 (seizures); id. at 45, 50-51,
28 54, 55 (memory loss); id. at 55-56 (migraines); id. at 57-58

1 (anxiety).) With regard to Plaintiff's alleged memory loss, she
2 claimed that she had difficulty remembering several things, including
3 the obligation to take her seizure medication and the dates on which
4 she had certain seizures. (See id. at 45, 50-51, 54, 55.) Although
5 Plaintiff did not argue before the ALJ that she was disabled because
6 she met the Commissioner's listing for mental retardation, (see id.
7 at 37-64 (transcript of administrative hearing)), Plaintiff raised
8 the issue before the Appeals Council. (See id. at 223-24; see infra
9 Parts IV, VII.A (discussing the effect of meeting the listing for
10 mental retardation).) In the Joint Stip. filed by the parties in
11 this civil action, Plaintiff again asserts that she is disabled
12 because her impairments met the Commissioner's listing for mental
13 retardation. (See Joint Stip. 6-9, 18.)

14
15 **B. Dr. Taylor's Report**

16
17 On an unspecified date, Dr. Clifford Taylor, a licensed clinical
18 psychologist, examined Plaintiff at the request of the California
19 Department of Social Services. (See AR 273, 278.) On August 28,
20 2009, Dr. Taylor issued a report summarizing that evaluation. (Id.
21 at 273-78.) According to the report, Dr. Taylor subjected Plaintiff
22 to several tests including, *inter alia*, the Wechsler Adult
23 Intelligence Scale, Fourth Edition ("WAIS-IV"), and the Wechsler
24 Memory Scale, Third Edition ("WMS-III"). (See id. at 276-77.)

25
26 The WAIS-IV has a "full scale IQ score," which is comprised of
27 four composite scores: verbal comprehension, perceptual reasoning,
28 working memory, and processing speed. (See id. at 276; Press

1 Release, Pearson Educ., Inc., Wechsler Adult Intelligence Scale,
2 Fourth Edition Now Available from Pearson (Aug. 28, 2008),
3 [http://www.pearsonclinical.com/psychology/news/2008/wechsler-adult-](http://www.pearsonclinical.com/psychology/news/2008/wechsler-adult-intelligence-scale-fourth-edition-now-available-from-pearson.html)
4 [intelligence-scale-fourth-edition-now-available-from-pearson.html.](http://www.pearsonclinical.com/psychology/news/2008/wechsler-adult-intelligence-scale-fourth-edition-now-available-from-pearson.html))
5 Here, Dr. Taylor concluded that Plaintiff had a verbal comprehension
6 score of 72 (borderline classification), a perceptual reasoning score
7 of 86 (low average classification), a working memory score of 63
8 (borderline classification), a processing speed score of 71
9 (borderline classification), and a full scale IQ score of 70
10 (borderline classification). (AR 276.) After administering the WMS-
11 III on Plaintiff, Dr. Taylor concluded that Plaintiff's score
12 "plac[ed] her in the extremely low range." (Id. at 276-77.) Dr.
13 Taylor also opined that "[Plaintiff's] delayed auditory memory was
14 assessed to be in the low range as evidenced by an Auditory Delayed
15 Subtest Composite score . . . [from] the [WMS-III]. Her sustained
16 concentration was poor as she could repeat only 3 digits backward.
17 Her long-term memory was intact for events and situations." (Id. at
18 276.)

19
20 **C. Dr. Amado's Report**

21
22 On September 9, 2009, Dr. H. Amado, a physician who did not
23 examine Plaintiff, rendered an opinion after evaluating Dr. Taylor's
24 report and other evidence concerning Plaintiff's purported
25 impairments. (See AR 282-92.) Dr. Amado concluded that there was
26 "[i]nsufficient evidence to substantiate the presence [of impairments
27 meeting or equaling the listing for mental retardation]." (See AR
28 285.) Dr. Amado reasoned that Plaintiff had "no [history of] mental

1 health care, . . . no history of special education services in
2 school, and no [Drug Addiction and/or Alcoholism]^[1] involvement."
3 (Id. at 292.) Dr. Amado also opined that there was a "likely
4 suppression of [the full scale IQ score] by very low [working
5 memory/processing speed scores] that were commensurate with [her WMS-
6 III] scores." (Id. at 292; see also id. at 276 (Dr. Taylor's opinion
7 provides a key for these abbreviations).) Dr. Amado concluded that
8 "[Plaintiff's] [m]ental allegations are credible but not quite at
9 listing levels." (Id. at 292.)

10
11 **D. Dr. Debolt's Testimony**

12
13 Dr. Debolt reviewed Plaintiff's medical records and testified at
14 the administrative hearing. (See AR 30, 37.) During Dr. Debolt's
15 testimony, he briefly addressed Dr. Taylor's report: "[Plaintiff]
16 alleges that there is some memory problems [sic], but [Dr. Taylor's]
17 psychological testing . . . did not confirm that. So that in my
18 opinion, she does not meet the listing for neurological conditions
19 nor psychiatric conditions." (Id. at 41.) The remainder of Dr.
20 Debolt's testimony addressed Plaintiff's alleged seizures, asthma,
21 and migraines. (See id. at 39-44, 47.)

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27 ¹ To decipher the abbreviation "DAA," the Court referred to a
28 list of acronyms provided by the Social Security Administration.
GN 0440.001 List of Acronyms, Soc. Sec. Admin. (July 2, 2012),
<https://secure.ssa.gov/apps10/poms.nsf/lrx/0204440001>.

1 IV.

2 THE FIVE-STEP SEQUENTIAL EVALUATION PROCESS

3
4 "To qualify for disability benefits, a claimant must show that a
5 medically determinable physical or mental impairment prevents [him
6 or] her from engaging in substantial gainful activity[,]^[2] and that
7 the impairment is expected to result in death or to last for a
8 continuous period of at least twelve months." Reddick v. Chater, 157
9 F.3d 715, 721 (9th Cir. 1998) (citing 42 U.S.C. § 423(d)(1)(A)). The
10 impairment must "render[] the claimant incapable of performing the
11 work [he or she] previously performed and . . . of performing any
12 other substantial gainful employment that exists in the national
13 economy." Tackett v. Apfel, 180 F.3d 1094, 1098 (9th Cir. 1999)
14 (citing 42 U.S.C. § 423(d)(2)(A)).

15
16 To decide if a claimant is entitled to benefits, an ALJ conducts
17 a five-step sequential inquiry. 20 C.F.R. §§ 404.1520, 416.20. The
18 steps are:

- 19
20 1. Is [the] claimant presently working in a substantially
21 gainful activity? If so, then the claimant is not disabled
22 within the meaning of the Social Security Act. If not,
23 proceed to step two.
24 2. Is the claimant's impairment severe? If so, proceed to
25 step three. If not, then the claimant is not disabled.
26 3. Does the impairment "meet or equal" one of a list of
specific impairments described in 20 C.F.R. Part [404,
27 Subpart P,] Appendix 1 ["Appendix 1"]? If so, then the
28 claimant is disabled. If not, proceed to step four.

2 "Substantial gainful activity" is defined as "work that . . .
[i]nvolves doing significant and productive physical or mental
duties[] and . . . [i]s done (or intended) for pay or profit." 20
C.F.R. §§ 404.1510, 416.910.

1 4. Is the claimant able to do any work that he or she has
2 done in the past? If so, then the claimant is not
disabled. If not, proceed to step five.

3 5. Is the claimant able to do any other work? If so, then
4 the claimant is not disabled. If not, then the claimant is
disabled.

5
6 Bustamante v. Massanari, 262 F.3d 949, 954 (9th Cir. 2001) (citations
7 omitted) (citing 20 C.F.R. §§ 404.1520(b)-(f), 416.920(b)-(f)).

8
9 The claimant has the burden of proof at steps one through four,
10 and the Commissioner has the burden of proof at step five. Id. at
11 953-54 (citing Tackett, 180 F.3d at 1098). "Additionally, the ALJ
12 has an affirmative duty to assist the claimant in developing the
13 record at every step of the inquiry." Id. at 954 (citing Tackett,
14 180 F.3d at 1098 n.3). This "special duty" requires the ALJ "to
15 develop the record fully and fairly and to ensure that the claimant's
16 interests are considered, even when the claimant is represented by
17 counsel." Mayes v. Massanari, 276 F.3d 453, 459 (9th Cir. 2001)
18 (citing Tonapetyan v. Halter, 242 F.3d 1144, 1150 (9th Cir. 2001));
19 Brown v. Heckler, 713 F.2d 441, 443 (9th Cir. 1983)).

20
21 If a claimant has an impairment (or impairments) that meets any
22 of the listings in Appendix 1 and satisfies the durational
23 requirement, that claimant is disabled, regardless of that
24 individual's age, education, or work experience. See 20 C.F.R.
25 §§ 404.1520(d), 416.920(d); see also Celaya v. Halter, 332 F.3d 1177,
26 1181 (9th Cir. 2003) ("If a claimant does meet the listing criterion
27 for one or more impairments, [he or] she is judged to be disabled
28 without the need to conduct any further analysis."). To "meet" a

1 listing, the claimant must establish that his or her condition(s)
2 satisfies each element of the listed impairment. See Tackett, 180
3 F.3d at 1099.

4
5 Moreover, if a claimant has an impairment that is "medically
6 equivalent" to one or more listed impairments, or if the combined
7 effect of all impairments is "medically equivalent" to a listed
8 impairment, then a claimant is conclusively presumed to be disabled.
9 See 20 C.F.R. §§ 404.1520(d), 404.1526(b)(2)-(3), 416.920(d),
10 416.926(b)(2)-(3); see also Lewis v. Apfel, 236 F.3d 503, 514 (9th
11 Cir. 2001) (alteration in original) (citation omitted) (citing 20
12 C.F.R. § 404.1520(d)) ("If a claimant's impairment does not meet the
13 criteria specified in the listings, he or she is still disabled if
14 the impairment equals a listed impairment. If a claimant has more
15 than one impairment, the Commissioner must determine 'whether the
16 combination of [the] impairments is medically equal to any listed
17 impairment.'"). An impairment (or impairments) is medically
18 equivalent to a listed impairment if it is "at least equal in
19 severity and duration to the criteria of any listed impairment." 20
20 C.F.R. §§ 404.1526(a), 416.926(a).

21
22 **V.**

23 **THE ALJ'S DECISION**

24
25 The ALJ employed the five-step sequential evaluation procedure
26 discussed above. (See AR 24-31.) At the first step, the ALJ
27 concluded that Plaintiff has not engaged in substantial gainful
28 activity since November 6, 2006. (Id. at 26.) At the second step,

1 the ALJ found that Plaintiff suffered from the following severe
2 impairments: a seizure disorder and asthma. (Id. at 26.) At step
3 three, the ALJ concluded the following:

4
5 The evidence does not support a finding that the claimant
6 has the severity of symptoms required either singly or in
7 combination to meet or equal any medical listing, including
8 those found under 11.00 [(neurological impairments)] and
9 3.00 [(respiratory impairments)]. No treating or examining
10 physician has recorded findings equivalent in severity to
11 the criteria of any listed impairment, nor does the
12 evidence show medical findings that are the same or
13 equivalent to those of any listed impairment. A more
14 detailed discussion [is provided in the analysis of
15 Plaintiff's residual functional capacity].

16 (Id. at 27.)

17 Before proceeding to step four, the ALJ concluded that:

18 [Plaintiff] has the residual functional capacity to perform
19 a full range of work at all exertional levels but with the
20 following nonexertional limitations: the claimant cannot
21 work at unprotected heights; she is precluded from climbing
22 ladders, ropes or scaffolds; she is precluded from driving;
23 she is precluded from working around unprotected bodies of
24 water; she should not be responsible for the safety of
25 others; she should not work in an environment with fumes,
26 dust, odors or poor ventilation or gases.

27 (Id.) In the ALJ's analysis of Plaintiff's residual functional
28 capacity, the ALJ considered Plaintiff's purported seizures, asthma,
migraines, anxiety, and memory loss, and the alleged severity of
those conditions. (See id. at 27-31.) With regard to Plaintiff's
memory loss, the ALJ rejected the memory impairments found by Dr.

1 Taylor because they were "not supported by the claimant's admitted
2 activities [(e.g., self care without assistance, ability to complete
3 household chores)] or mental health treatment history." (See id. at
4 28, 30.) The ALJ also noted that "[Plaintiff] testified that she
5 completed high school and was not in special education." (Id. at
6 30-31.)

7
8 At step four, the ALJ concluded that, given Plaintiff's residual
9 functional capacity, "[she] is capable of performing past relevant
10 work as a fast food worker, and a stock sales attendant." (Id. at
11 31.) Because of the ALJ's findings at step four, he did not reach
12 step five of the analysis. (See id.) Rather, he concluded that
13 Plaintiff was not disabled. (Id.)

14 15 VI.

16 STANDARD OF REVIEW

17
18 Under 42 U.S.C. § 405(g), a District Court may review the
19 Commissioner's decision to deny benefits. The Court may set aside
20 the Commissioner's decision when the ALJ's findings are based on
21 legal error or are not supported by substantial evidence in the
22 record as a whole. Aukland v. Massanari, 257 F.3d 1033, 1035 (9th
23 Cir. 2001). "Substantial evidence is more than a scintilla, but less
24 than a preponderance." Reddick v. Chater, 157 F.3d 715, 720 (9th
25 Cir. 1998) (citing Jamerson v. Chater, 112 F.3d 1064, 1066 (9th Cir.
26 1997)). It is "relevant evidence which a reasonable person might
27 accept as adequate to support a conclusion." Id. (citing Jamerson,
28 112 F.3d at 1066; Smolen v. Chater, 80 F.3d 1273, 1279 (9th Cir.

1 1996)). To determine whether substantial evidence supports a
2 finding, "a court must 'consider the record as a whole, weighing both
3 evidence that supports and evidence that detracts from the
4 [Commissioner's] conclusion.'" Aukland, 257 F.3d at 1035 (quoting
5 Penny v. Sullivan, 2 F.3d 953, 956 (9th Cir. 1993)). "If the
6 evidence can reasonably support either affirming or reversing the
7 [Commissioner's] conclusion, [a] court may not substitute its
8 judgment for that of the [Commissioner]." Reddick, 157 F.3d at
9 720-21 (citing Flaten v. Sec'y of Health & Human Servs., 44 F.3d
10 1453, 1457 (9th Cir. 1995)).

11
12 **VII.**

13 **DISCUSSION**

14
15 The parties have stipulated that the sole issue on review is
16 "[w]hether the ALJ properly considered whether [Plaintiff's] mental
17 limitations met or equaled . . . Listing § 12.05[] [(the listing for
18 mental retardation)]." (Joint Stip. 4.)

19
20 **A. Listing § 12.05**

21
22 The listings provide criteria for determining whether an
23 individual is conclusively disabled by virtue of "[m]ental
24 retardation." See 20 C.F.R. pt. 404, subpt. P, app. 1, § 12.05
25 [hereinafter Listing § 12.05]. The "introductory paragraph" of
26 Listing § 12.05 explains that:

1 [m]ental retardation refers to significantly subaverage
2 general intellectual functioning with deficits in adaptive
3 functioning initially manifested during the developmental
4 period; *i.e.*, the evidence demonstrates or supports onset
5 of the impairment before age 22.

6 Id. The next paragraph of Listing § 12.05 states that "the required
7 level of severity for this disorder is met when the requirements in
8 [paragraphs] A, B, C, or D are satisfied." Id. Paragraph C (or
9 "Listing § 12.05C") provides the following requirements:

10
11 [a] valid verbal, performance, or full scale IQ of 60
12 through 70 and a physical or other mental impairment
13 imposing an additional and significant work-related
14 limitation of function[.]

15 Listing § 12.05C.

16
17 To meet Listing § 12.05 by relying on paragraph C, a claimant
18 must satisfy the criteria of that paragraph *and* the criteria set out
19 in the introductory paragraph. Maresh v. Barnhart, 438 F.3d 897, 899
20 (8th Cir. 2006). Nevertheless, several circuits have held that if
21 the claimant presents evidence of an IQ score of 60 through 70 (*i.e.*,
22 the first prong of Listing § 12.05C), then the claimant presumptively
23 meets the introductory paragraph's criteria.³ See, e.g., Hodges v.
24 Barnhart, 276 F.3d 1265, 1268-69 (11th Cir. 2001) (citing Muncy v.
25 Apfel, 247 F.3d 728, 734 (8th Cir. 2004)); Luckey v. U.S. Dep't of
26 Health and Human Servs., 890 F.2d 666, 668-69 (4th Cir. 1989). Other
27 circuits have declined to adopt this presumption. See, e.g., Markle

28 ³ As a shorthand, the Court refers to this approach as the "IQ
presumption."

1 v. Barnhart, 324 F.3d 182, 188-89 (3d Cir. 2003); Foster v. Halter,
2 279 F.3d 348, 354-55 (6th Cir. 2001). The Ninth Circuit has not yet
3 decided whether to adopt the IQ presumption. See Applestein-Chakiris
4 v. Astrue, No. 09-00009, 2009 WL 2406358, at *8 (S.D. Cal. Aug. 5,
5 2009). Moreover, District Courts in the Ninth Circuit appear to be
6 split on this issue. Compare Schuler v. Astrue, No. 09-2126, 2010 WL
7 1443892, at *6 (C.D. Cal. Apr. 7, 2010) (“[A] valid qualifying IQ
8 score obtained by the claimant after the age of 22 creates a
9 rebuttable presumption that the claimant’s mental retardation began
10 prior to the age of 22, as it is presumed that IQ scores remain
11 relatively constant during a person’s lifetime.”), and Flores v.
12 Astrue, No. 11-10714, 2013 WL 146190, at *4 (C.D. Cal. Jan. 11, 2013)
13 (“This Court finds [Schuler’s] reasoning persuasive.”), with Rhein v.
14 Astrue, No. 09-01754, 2010 WL 4877796, at *7-8 (E.D. Cal. Nov. 23,
15 2010) (“[T]he Court declines to accept Plaintiff’s argument [that]
16 she is entitled to a *per se* ‘presumption’ that her impairment existed
17 prior to age 22 based solely on valid, qualifying, post-developmental
18 IQ scores.”), and Clark v. Astrue, No. 10-2863, 2012 WL 423635, at *5
19 (E.D. Cal. Feb. 8, 2012) (relying upon Rhein’s holding).

20
21 To meet the “physical or other mental impairment” prong of
22 Listing § 12.05C, a claimant must show that he or she has a “severe
23 impairment,” as defined in step two of the Commissioner’s five-step
24 sequential evaluation process. See 20 C.F.R. pt. 404, subpt. P, app.
25 1, § 12.00A [hereinafter Listing § 12.00A] (“For [Listing § 12.05C],
26 we will assess the degree of functional limitation the additional
27 impairment(s) imposes to determine if it significantly limits your
28 physical or mental ability to do work activities, *i.e.*, is a ‘severe’

1 impairment(s), as defined in §§ 404.1520(c) and 416.920(c).");
2 Schuler, 2010 WL 1443892, at *5.

3
4 Therefore, assuming the IQ presumption applies, a claimant may
5 demonstrate that he or she meets the listing for mental retardation
6 by showing that he or she has a valid IQ score of 60 to 70 and
7 possesses a physical or other mental impairment that satisfied step
8 two of the five-step sequential evaluation process. See Schuler,
9 2010 WL 1443892, at *5-6. The presumption can be rebutted by showing
10 that the IQ score is invalid. See Lowery v. Sullivan, 979 F.2d 835,
11 837-38 (11th Cir. 1992) (citing Popper v. Heckler, 779 F.2d 1497,
12 1499 (11th Cir. 1986)), cited with approval in Hodges, 276 F.3d at
13 1269; Schuler, 2010 WL 1443892, at *6 (citing Lowery, 979 F.2d at
14 837). To reject the validity of an IQ score, the ALJ may rely on
15 "the claimant's daily activities and behavior."⁴ Lowery, 979 F.2d at
16 837. The IQ presumption may also be rebutted by showing that,
17 notwithstanding the IQ score, the claimant did not have deficits in
18 adaptive functioning that initially manifested before the age of
19 twenty-two. See id. at 838-39.

20
21 ⁴ While it is clear that an ALJ can reject the validity of an IQ
22 score, the Ninth Circuit has not yet adopted an approach for
23 conducting this analysis. See Thresher v. Astrue, 283 F.3d App'x
24 473, 475 & n.6 (9th Cir. 2008). The circuits appear to have
25 advanced different methods for evaluating a claimant's activities.
26 See id. The Sixth Circuit appears to hold that, if an ALJ rejects a
27 claimant's IQ scores because they are inconsistent with that
28 individual's activities, the ALJ's conclusion must be supported by
psychiatric authority or empirical evidence. See Brown v. Sec'y of
Health & Human Servs., 948 F.2d 268, 269-71 (6th Cir. 1991) (quoting
Diagnostic and Statistical Manual of Mental Disorders § 317.00 (3d
ed. 1987)). On the other hand, the Eleventh Circuit has rejected
scores without requiring such support. See Popp v. Heckler, 779
F.2d 1497, 1498-1500 (11th Cir. 1986).

1 **B. The Court Adopts The IQ Presumption**

2
3 Plaintiff argues that she meets Listing § 12.05 because (1) she
4 satisfies the IQ presumption and (2) the record shows that she met
5 Listing § 12.05C's "physical or other mental impairment" prong. (See
6 Joint Stip. 4, 7 (citing Schuler v. Astrue, No. 09-2126, 2010 WL
7 1443892, at *6 (C.D. Cal. Apr. 7, 2010)). To evaluate Plaintiff's
8 contentions, the Court must first determine whether it should adopt
9 the IQ presumption.

10
11 The Eleventh Circuit in Hodges v. Barnhart articulated the
12 rationale for the IQ presumption. 276 F.3d 1265, 1268-69 (11th Cir.
13 2001). Hodges reasoned that, because courts have held that IQ scores
14 generally remain fairly constant throughout a person's life, "a
15 [present] valid I.Q. score of 60 to 70 and evidence of [an]
16 additional mental or physical impairment" presumptively satisfy
17 Listing § 12.05.⁵ See id. (citing Muncy v. Apfel, 247 F.3d 728, 734
18 (8th Cir. 2001); Luckey v. U.S. Dep't of Health and Human Servs., 890
19 F.2d 666, 668 (4th Cir. 1989)); see also Guzman v. Bowen, 801 F.2d
20 273, 275 (7th Cir. 1986) (concluding that an IQ score taken after the
21 insured period presumptively "reflects the person's IQ during th[at]
22 insured period"). The court further noted that the Commissioner has
23 made official statements suggesting that intelligence testing during
24
25

26 ⁵ The Fourth Circuit in Luckey v. U.S. Dep't of Health and Human
27 Servs. also adopted this factual premise. 890 F.2d 666, 668 (4th
28 Cir. 1989). Nonetheless, the court focuses its discussion on Hodges
because the Eleventh Circuit provided more detail when discussing the
IQ presumption's rationale.

1 the developmental years would not be required to meet the
2 introductory paragraph of Listing § 12.05:

3
4 The proposed listing . . . stated that the significantly
5 subaverage general intellectual functioning with deficits
6 in adaptive behavior must have been initially "manifested"
7 during the developmental period. *We have always*
8 *interpreted this word to include the common clinical*
9 *practice of inferring a diagnosis of mental retardation*
10 *when the longitudinal history and evidence of current*
11 *functioning demonstrate that the impairment existed before*
12 *the end of the developmental period.*

13 Id. (emphasis in original) (quoting Revised Medical Criteria for
14 Evaluating Mental Disorders and Traumatic Brain Injury, 65 Fed. Reg.
15 50746, 50772 (Aug. 21, 2000) [hereinafter Revised Medical Criteria]).

16 Moreover, the Commissioner made another statement that supports
17 the validity of the IQ presumption. When discussing the changes made
18 to Listing § 12.05 in August 2000, the Commissioner stated:

19 [W]e expanded the phrase setting out the age limit for
20 [Listing § 12.05's] "developmental period." The final
21 rules clarify that *we do not necessarily require evidence*
22 *from the developmental period to establish that the*
23 *impairment began before the end of the developmental*
24 *period. The final rules permit us to use judgment, based*
25 *on current evidence, to infer when the impairment began.*

26 Revised Medical Criteria at 50753 (emphasis added). Hodges and the
27 Commissioner's public statements collectively provide a strong basis
28 for the adoption of the IQ presumption.

1 Decisions from the Third and Sixth Circuits do not rebut this
2 reasoning. In Markle v. Barnhart, the Third Circuit declined to
3 adopt the IQ presumption. 324 F.3d 182, 188-89 (3d Cir. 2003).
4 However, the panel did not reject Hodges's reasoning to arrive at
5 this conclusion. Rather, the court explicitly stated that a Third
6 Circuit procedural rule prohibited the panel from overruling
7 precedent inconsistent with the IQ presumption. Id. at 188-89 & n.2.
8 The court went on to point out that "a different result might be
9 suggested by the subsequently enacted August 21, 2000 Revised Medical
10 Criteria [(i.e., the Commissioner's statements that were quoted in
11 Hodges)]." See id. at 188-89. Moreover, the panel noted that the
12 binding precedent at issue was decided before the Revised Medical
13 Criteria were issued. See id. at 188.

14
15 Furthermore, the Sixth Circuit's decision in Foster v. Halter
16 does little to weaken Hodges's rationale. 279 F.3d 348 (6th Cir.
17 2001). There, the plaintiff produced several IQ scores, recorded
18 after the age of twenty-two, that were within the range provided by
19 Listing § 12.05C. See id. at 352. Nonetheless, the Court found that
20 these IQ scores were insufficient to presumptively meet the
21 introductory paragraph of Listing § 12.05. See id. at 354-55. In so
22 doing, the court did not address Hodges's reasoning in any way. See
23 id.

24
25 Moreover, decisions within this circuit that reject the IQ
26 presumption are not persuasive. For instance, the Eastern District
27 of California in Rhein v. Astrue reasoned that the presumption was
28 inappropriate because it would improperly shift the burden of proof

1 at step three of the five-step evaluation process to the Commissioner
2 and turn the introductory paragraph into "mere surplusage." No. 09-
3 01754, 2010 WL 4877796, at *8 (E.D. Cal. Nov. 23, 2010). The court
4 further stated that, even in cases that applied the IQ presumption,
5 there were "no intervening circumstances" between the developmental
6 period and the point at which the IQ scores were recorded that had
7 caused a change in "intellectual functioning." See id. at *7
8 (quoting Lawson v. Astrue, No. 08-2008, 2010 WL 961722, at *5 (E.D.
9 Cal. Mar. 16, 2010)) (internal quotation marks omitted).
10 Consequently, the court held that the IQ presumption should apply
11 only when Plaintiff has "provide[d] evidence supporting early onset
12 of the mental impairment *and* that no intervening circumstances have
13 occurred that impact Plaintiff's IQ." Id. at *8 (citing Markle, 324
14 F.3d at 189).

15
16 Rhein's reasoning is unconvincing. There, the court did nothing
17 to rebut the validity of Hodges's premise that IQ scores *generally*
18 remain fairly constant throughout a person's life. See id. at *7-8.
19 At most, the court demonstrated that intervening circumstances (*e.g.*,
20 a car accident)⁶ can cause a reduction in IQ score. See id. at *7.
21 Furthermore, the insistence upon requiring proof of the *absence* of
22 intervening circumstances is quite odd, especially given the fact
23 that the key unpublished District Court case upon which Rhein relied
24 did not put claimants in the awkward position of *proving a negative*.
25 See Lawson, 2010 WL 961722, at *5 (citing Branham v. Heckler, 775
26 F.2d 1271, 1274 (4th Cir. 1985); Muncy, 247 F.3d at 734) (emphasis

27 ⁶ See Lawson, 2010 WL 961722, at *4-5, cited with approval in
28 Rhein, 2010 WL 4877796, at *7.

1 added) (explaining that those cases applied the “rebuttable [IQ]
2 presumption *unless* [there was a] change in intellectual
3 functioning”). Furthermore, Rhein’s contention that the IQ
4 presumption turns the introductory paragraph into “mere
5 surplusage[,]” Rhein, 2010 WL 4877796, at *8, entirely misses the
6 fact that the IQ presumption can be rebutted by, *inter alia*, evidence
7 that the claimant did not have deficits in adaptive functioning that
8 initially manifested before the age of twenty-two.⁷ See Lowery v.
9 Sullivan, 979 F.2d 835, 838-39 (11th Cir. 1992).

10
11 In sum, because Hodges’s reasoning is persuasive, the Court
12 joins the other District Courts that have adopted the IQ
13 presumption.⁸ See, e.g., Flores v. Astrue, No. 11-10714, 2013 WL
14 146190, at *4 (C.D. Cal. Jan. 11, 2013); Woods v. Astrue, No. 10-
15 2031, 2012 WL 761720, at *3-4 (E.D. Cal. Mar. 7, 2012); Forsythe v.
16 Astrue, No. 11-01515, 2012 WL 217751, at *7 (E.D. Cal. Jan. 24,
17 2012); Campbell v. Astrue, No. 09-00465, 2011 WL 444783, at *16-17
18 (E.D. Cal. Feb. 8, 2011); Schuler v. Astrue, No. 09-2126, 2010 WL
19 1443892, at *6 (C.D. Cal. Apr. 7, 2010); Walberg v. Astrue, No. 08-
20 0956, at *8-9 (W.D. Wash. June 18, 2009); Jackson v. Astrue, No. 08-
21 1623, 2008 WL 5210668, at *6 (C.D. Cal. Dec. 11, 2008).

22
23 ⁷ Although Clark v. Astrue also refused to adopt the IQ
24 presumption, it did so by relying on Rhein’s reasoning. No. 10-2863,
25 2012 WL 423635, at *5 (E.D. Cal. Feb. 8, 2012). Thus, the Court need
26 not address this case.

27 ⁸ To defend against the imposition of the IQ presumption,
28 Defendant advances the bare conclusion that the presumption
“inappropriately shifts the burden of proof from Plaintiff to
Commissioner.” (Joint Stip. 15 n. 4.)

1 **C. The ALJ's Determination That Plaintiff Does Not Meet A**
2 **Listing Is Not Supported By Substantial Evidence**

3
4 At step three of the five-step sequential evaluation process,
5 the ALJ found that "[t]he evidence does not support a finding that
6 the claimant has the severity of symptoms required either singly or
7 in combination to meet or equal any medical listing." (AR 27.)
8 Plaintiff argues that the Court should reverse the ALJ's decision
9 because the evidence in the record demonstrates that she met Listing
10 § 12.05.⁹ (See Joint Stip. 7-8, 22.) Although the Court cannot
11 conclude on this record that Plaintiff met Listing § 12.05, the Court
12 does hold that reversal is required because the ALJ's conclusion that
13 Plaintiff did not "meet . . . any medical listing" is not supported
14 by substantial evidence.¹⁰

15
16 ⁹ Because Plaintiff relies upon the IQ presumption, see supra
17 Part VII.B, she appears to be arguing that the ALJ should have
18 considered whether her impairments *met* Listing § 12.05, and not
whether they were *medically equivalent* to that listing.

19 ¹⁰ Defendant argues that the ALJ was not required to apply
20 Listing § 12.05 because Plaintiff did not allege (prior to the
21 issuance of the ALJ's decision) that she was mentally retarded. (See
22 Joint Stip. 18-19.) Even assuming that the ALJ's "special duty to
23 develop the record fully and fairly" did not require him to address
24 Listing § 12.05 in his decision, Mayes v. Massanari, 276 F.3d 453,
25 459 (9th Cir. 2001), the Commissioner had the opportunity to address
26 the listing prior to the filing of this civil action. This is
27 because Plaintiff raised the issue before the Appeals Council. (See
28 AR 223-24 (correspondence from Plaintiff's counsel asserting
applicability of Listing § 12.05). The Appeals Council could have
reversed the ALJ's decision on the basis that it was not supported by
substantial evidence, 20 C.F.R. §§ 404.970(a)(2), 404.979,
416.1470(a)(2), 416.1479, and permitted the ALJ to apply the listing
on remand. See 20 C.F.R. §§ 404.979, 416.1479 (permitting the
Appeals Council to remand case to ALJ). Therefore, Defendant's
argument is meritless.

1 Plaintiff has advanced evidence, which the ALJ did not expressly
2 refute, demonstrating that she is entitled to the IQ presumption and
3 that she has a "physical or other mental impairment." Listing
4 § 12.05C. Specifically, Plaintiff has directed the Court to the full
5 scale IQ score of 70 provided by Dr. Taylor, (Joint Stip. 5 (citing
6 AR 278)), and the fact that the ALJ found that Plaintiff suffered
7 from severe impairments that would satisfy Listing § 12.05C's
8 "physical or other mental impairment" prong (*i.e.*, a seizure disorder
9 and asthma).¹¹ (Id. at 4 (citing AR 26).) As discussed in Part
10 VII.A infra, satisfaction of the IQ presumption and the "physical or
11 other mental impairment prong" can be sufficient to meet Listing
12 § 12.05. Thus, the ALJ's conclusion that Plaintiff did not meet any
13 listing lacks substantial evidence.

14
15 Here, Defendant does not contend that Plaintiff failed to meet
16 the "physical or other mental impairment" prong. (See id. at 9-19.)
17 However, Defendant does contend that the IQ score is invalid and that
18 the evidence in the record shows that she did not manifest deficits
19 in adaptive functioning before the age of twenty-two. (See id. at
20 11-18.)

21
22 Defendant argues that, even though the ALJ never expressly
23 addressed the validity of Plaintiff's full scale IQ score, that score
24

25 ¹¹ Plaintiff also asserts that Dr. Taylor's diagnosis of anxiety
26 satisfies the "physical or other mental impairment" prong of Listing
27 § 12.05C. (Joint Stip. 7.) However, the ALJ explicitly found that
28 this impairment was not severe. (AR 31.) Because the ALJ found that
Plaintiff's seizure disorder and asthma constituted "severe
impairments," (id. at 26), the Court need not review the ALJ's
finding concerning anxiety. See Listing § 12.00A.

1 is invalid. (See Joint Stip. 12-13, 15-18.) Defendant contends that
2 the ALJ's rejection of the low memory scores provided by Dr. Taylor
3 necessarily implies that Plaintiff's full scale IQ score does not
4 fall within the range provided by Listing § 12.05C. (See id. (citing
5 AR 30 (ALJ's decision)).) Defendant's premise relies upon the
6 portion of Dr. Amado's opinion that states "[there was] likely
7 suppression of [the full scale IQ score] by very low [working
8 memory/processing speed scores] that were commensurate with [her WMS-
9 III] scores." (See id. at 12 (quoting AR 292) (internal quotation
10 marks omitted).)

11
12 Even if (1) the ALJ properly rejected the validity of the low
13 working memory score and (2) Dr. Amado's opinion is accurate, the
14 Court cannot conclude at this stage that "setting aside [just] the
15 working memory score, the full scale IQ score would not meet Listing
16 [§] 12.05C." (Id. at 12.) This is because both the low working
17 memory score *and the low processing speed score* would have
18 contributed to the likely suppression of the full scale IQ score.
19 Because Defendant does not inform the Court as to how full scale IQ
20 scores are calculated, the Court cannot determine whether the low
21 processing speed score, even in the absence of the working memory
22 score, would have brought the full scale IQ within Listing § 12.05C's
23 range. Thus, the Court cannot conclude, on this record, that the
24 exclusion of the working memory score would increase the full scale
25 IQ score to a figure above 70.¹²

26
27 ¹² Additionally, Defendant claims that the working memory score
28 would have been irrelevant to any analysis of the full scale IQ
score, even if the ALJ had not rejected the working memory score.
(See Joint Stip. 11-12, 15.) Specifically, the Defendant contends

1 Further, Defendant contends that Dr. Taylor's failure to
2 *explicitly* opine on the validity of the full scale IQ score renders
3 it invalid. (See *id.* at 15.) Defendant cites a portion of Listing
4 § 12.00 for this proposition, which states in relevant part that
5 "since the results of intelligence tests are only part of the overall
6 assessment of [mental retardation], the narrative report that
7 accompanies the results *should* comment on whether the IQ scores are
8 considered valid and consistent with the developmental history and
9 the degree of functional limitation." 20 C.F.R. pt. 404, subpt. P,
10 app. 1, § 12.00D.6.a (emphasis added). Defendant cites no other
11 authority for this contention. (See Joint Stip. 15.) The Court
12 rejects Defendant's position because such a strained construction of
13 the regulations would appear to elevate form over substance.

14
15 Moreover, Defendant contends that the validity of the IQ score
16 is rebutted by substantial evidence in the form of: Dr. Amado's and
17 Dr. Debolt's opinions, Plaintiff's lack of mental health treatment
18 history, and her admitted functional activities (e.g., self care
19 without assistance). (See *id.* at 18; AR 28.) However, because the
20 ALJ did not refer to Listing § 12.05 when concluding that Plaintiff's

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22
23
24 that WAIS-IV's working memory score is not a component of the full
25 scale IQ score contemplated by Listing § 12.05C. (See *id.* at 11-12.)
26 The Court need not address this issue because, regardless of the
27 rationale for omitting the working memory score from the full scale
28 IQ score, the Court cannot conclude on this record that the exclusion
of the former score would cause the latter score to exceed the range
of Listing § 12.05C.

1 impairments failed to meet or equal any listing, reversal and remand
2 for clarification, as opposed to affirmance, is appropriate.¹³

3
4 In Thresher v. Astrue, the Ninth Circuit arrived at the same
5 conclusion when considering similar facts. 283 Fed. App'x 473,
6 474-75 (9th Cir. 2008). There, Thresher had advanced evidence
7 (including IQ scores) tending to establish that she met Listing
8 § 12.05 via paragraph C. See id. Although the ALJ had suggested
9 that "Thresher was not mentally retarded[,]” the ALJ did not
10 reference Listing § 12.05 in her decision. Id. at 475.
11 Notwithstanding the ALJ's failure to reference the listing, the
12 District Court upheld the decision, reasoning that it was supported
13 by substantial evidence. Report & Recommendation at 3-4 Thresher v.
14 Barnhart, No. 06-5071 (W.D. Wash. Oct. 20, 2006); Order Adopting
15 Report & Recommendation Thresher v. Barnhart, No. 06-5071 (W.D. Wash.
16 Jan. 8, 2007). Specifically, the District Court found that the ALJ
17 could have rejected the IQ scores on the basis of (1) a psychiatric
18 expert's opinion that Thresher was not mentally retarded and (2)
19 Thresher's daily activities and behavior. See Report &
20 Recommendation at 3-4 Thresher v. Barnhart, No. 06-5071 (W.D. Wash.
21 Oct. 20, 2006). On appeal, the Ninth Circuit reversed the District
22

23 ¹³ Moreover, when discussing Plaintiff's admitted functional
24 activities, Defendant fails to cite any psychiatric authority or
25 empirical evidence demonstrating that such activities are
26 inconsistent with a full scale IQ score of 70. (See Joint Stip. 12,
27 14-16, 18.) Thus, under the Brown v. Secretary of Health & Human
28 Services, 948 F.2d 268 (6th Cir. 1991) approach, the Court could not
reject Plaintiff's full scale IQ score on that basis. See infra note
4. Defendant fails to explain why the Court should not follow the
reasoning of Brown. (See Joint Stip. 9-19.) Accordingly,
Defendant's position on this issue is weak.

1 Court's decision. Thresher, 283 Fed. App'x at 474. The court
2 reasoned that the ALJ's failure to explicitly reject the IQ score
3 indicated that "it [was] unclear whether the ALJ came to grips with
4 the specific requirements of [Listing § 12.05] when she issued her
5 decision." Id. at 475. Thus, notwithstanding the evidence in the
6 record that could have rebutted the validity of the IQ score, remand
7 for clarification was appropriate. See id.

8
9 In light of Thresher, the court reverses the decision of the ALJ
10 and remands for clarification regarding the validity of Plaintiff's
11 IQ score such that the ALJ can articulate "precisely what was decided
12 and why." Id. (citing Pinto v. Massanari, 249 F.3d 840, 848 (9th
13 Cir. 2001); Christner v. Astrue, 498 F.3d 790, 794 (8th Cir. 2007)).

14
15 Defendant further argues that "the available evidence forecloses
16 any conceivable inference that Plaintiff had any adaptive deficits
17 before age 22." (Joint Stip. 14.) Again, notwithstanding the
18 presence of evidence that could rebut the IQ presumption, "it [is]
19 unclear whether the ALJ came to grips with the specific requirements
20 of [Listing § 12.05] when [the ALJ] issued [his] decision."
21 Thresher, 283 Fed. App'x at 475. Thus, reversal of the ALJ's
22 decision and remand for clarification on this issue is appropriate.¹⁴
23 See id.

24
25 ¹⁴ Defendant further argues that, even if the ALJ erred by
26 failing to discuss Listing § 12.05, the error was harmless because
27 there is evidence in the record that Defendant believes would rebut
28 the IQ presumption. (See Joint Stip. 19 (citing Tommasetti v.
Astrue, 533 F.3d 1035, 1038 (9th Cir. 2008)).) Nonetheless, District
Courts "review only the reasons provided by the ALJ in the disability
determination and *may not affirm* the ALJ on a ground *upon which he*

1 **D. Scope Of Remand**

2
3 Remanding a matter for further proceedings, as opposed to
4 remanding for an award of benefits, is inappropriate when the record
5 demonstrates that "the ALJ would clearly be required to award
6 benefits." Lingenfelter v. Astrue, 504 F.3d 1028, 1041 (9th Cir.
7 2007). On the other hand, when there are outstanding issues that
8 must be resolved before a determination can be made, and it is not
9 clear from the record that the ALJ would be required to find the
10 plaintiff disabled, a court should remand for further administrative
11 proceedings. See Benecke v. Barnhart, 379 F.3d 587, 593-96 (9th Cir.
12 2004); see also Thresher, 283 Fed. App'x at 475 (remanding case when
13 it was unclear whether ALJ "came to grips" with specific requirements
14 of Listing § 12.05C). For the reasons discussed in Part VII.C infra,
15 it is not clear whether the ALJ would be required to find Plaintiff
16 disabled had the ALJ applied Listing § 12.05. Thus, the Court
17 remands this matter for further administrative proceedings.

18
19 In an effort to terminate these proceedings and avoid any
20 confusion or misunderstanding as to what the Court intends, the Court
21 shall set forth the scope of the remand proceedings. Upon remand,

22
23 *[or she] did not rely."* Orn v. Astrue, 495 F.3d 625, 630 (9th Cir.
24 2007) (emphasis added) (citing Connett v. Barnart, 340 F.3d 871, 874
25 (9th Cir. 2003)). Here, although the ALJ relied on some of the
26 evidence cited by Defendant to reject Plaintiff's low memory scores,
27 the ALJ did not address much of Defendant's other evidence (e.g., Dr.
28 Amado's opinion). (See infra Part V; Joint Stip. 11-18.) Thus,
Defendant has failed to properly show that it is "clear from the
record that the ALJ's error was inconsequential to the ultimate
nondisability determination." Tommasetti, 533 F.3d at 1038 (internal
quotation marks omitted) (quoting Stout v. Comm'r, Soc. Sec. Admin.,
454 F.3d 1050, 1055-56 (9th Cir. 2006)).

1 the ALJ shall assess whether Plaintiff's impairments, either
2 individually or in combination, meet Listing § 12.05. Specifically,
3 the ALJ shall consider: (1) whether Plaintiff's full scale IQ score
4 of 70 is valid, and (2) whether Plaintiff manifested deficits in
5 adaptive functioning before the age of twenty-two. In so doing, the
6 ALJ shall further develop the factual record if he finds that "there
7 is ambiguous evidence or . . . the record is inadequate to allow for
8 proper evaluation of the evidence." Mayes v. Massanari, 276 F.3d
9 453, 459-60 (9th Cir. 2001). In the event that the ALJ concludes
10 that Plaintiff's impairments, either individually or in combination,
11 do not meet Listing § 12.05, the ALJ shall adequately articulate the
12 rationale for that conclusion. See Lewis v. Apfel, 236 F.3d 503, 512
13 (9th Cir. 2001) ("An ALJ must evaluate the relevant evidence before
14 concluding that a claimant's impairments do not meet or equal a
15 listed impairment. A boilerplate finding is insufficient to support
16 a conclusion that a claimant's impairment does not do so.").

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