BEFORE THE
OFFICE OF ADMINISTRATIVE HEARINGS
STATE OF CALIFORNIA

In the Matter of:

CLAIMANT

and

NORTH BAY REGIONAL CENTER, Service Agency.

DDS No. CS0036653

OAH No. 2026050779

DECISION

Administrative Law Judge Mario M. Choi, State of California, Office of Administrative Hearings, served as the hearing officer for and heard this matter on July 30, 2026, by videoconference.

Attorney Deanne Buckman represented claimant, who was not present.

Attorney Jay Stebner represented service agency North Bay Regional Center.

The record closed and the matter was submitted for decision on July 30, 2026.

ISSUE

Does claimant have a developmental disability as defined under the Lanterman Developmental Disabilities Services Act (Lanterman Act, Welf. & Inst. Code, § 4500 et seq.)[1] such that he is eligible for further evaluation for services from North Bay Regional Center (NBRC)?

FACTUAL FINDINGS

Background and History

1. Claimant is a 40-year-old individual who was referred to NBRC by the Superior Court of California, County of Solano, for an evaluation and determination of eligibility for regional center services. Pursuant to Penal Code section 1369, NBRC was ordered to assess claimant due to concerns related to claimant's learning and cognitive skills. Claimant is currently facing criminal charges in that court.

NEUROPSYCHOLOGICAL EXAMINATION

2. Prior to the court's referral for an evaluation by NBRC, claimant was evaluated for neurocognitive and psychological functioning by Laeeq Evered, Psy.D., on June 18, 2025. In addition to observing claimant in person and asking questions about his history, Dr. Evered administered several neuropsychological assessments. In his report dated July 16, 2025, and based solely on his examination of claimant,

[1] All subsequent statutory references are to the Welfare and Institutions Code, unless otherwise stated.

Dr. Evered determined that claimant has, among other things, an intellectual disability, and believes that he is eligible for Lanterman Act services.

3. Claimant reported to Dr. Evered that he has three sons with his wife, whom he has been with for 23 years and married for 12 years. Prior to his arrest, claimant spent his time caring for his children, performing basic household chores, and working on cars. He indicated that he is functionally illiterate and expressed being dependent on his wife for paying bills, making medical appointments, and structuring his day. He stated that he showered and brushed his teeth once a week. Claimant worked as a self-employed and self-taught automobile mechanic out of his home, using YouTube videos to learn how to make repairs. He further reported to Dr. Evered that he had participated in individual therapy at school, was shot at approximately six times growing up, and has sustained four concussions with loss of consciousness.

4. In testing administered by Dr. Evered, claimant scored in the low average to seriously deficient range in spatial abilities; borderline to seriously deficient range in verbal abilities; average to deficient range in attention and concentration; in the seriously deficient range in verbal learning; in the borderline to seriously deficient range in memory; in the low average to seriously deficient range in planning and problem solving; and in the below low average to extremely low range in intelligence. Claimant achieved a Full-Scale IQ score of 72, falling in the very low range.

Eligibility Determination

INTAKE SOCIAL ASSESSMENT

5. René Hernández Pérez, an assessment counselor at NBRC, conducted an in-person intake social assessment of claimant on February 11, 2026. He also spoke with claimant's wife and one of claimant's sisters by telephone. In his report dated

February 20, 2026, Hernández Pérez wrote, "At this time, it is unclear whether [claimant] meets the criteria for Lanterman services at NBRC."

6. Claimant reported to Hernández Pérez that he experienced multiple traumatic events throughout his life, including the death of one of his children and one of his sisters, seizure activity in multiple family members, a history of bipolar disorder, schizophrenia, addictions, anxiety, and suicide. He stated that his oldest child has seizure activity and that his middle child has autism spectrum disorder (ASD or autism) and attention deficit hyperactivity disorder (ADHD). Claimant was diagnosed with ADHD and dyslexia. He drinks alcohol daily and regularly smokes marijuana.

7. Hernández Pérez observed that claimant was cooperative, pleasant, and spoke in full sentences. Although it was not clear to Hernández Pérez how much and what he understood, claimant was able to identify and point out when he did not know information. Hernández Pérez observed that claimant had noticeable difficulties in reading and writing.

8. Hernández Pérez reported that claimant can complete all his activities of daily living independently and has good hygiene. Claimant's sister stated that other than bedwetting while he was growing up, there were no noticeable concerns about claimant's self-care needs. It was further reported that claimant is the cook in the family and that he can use the microwave, stove, and oven independently. Claimant's wife shared that claimant is "an amazing cook." She further reported that she typically handles the family finances, medical arrangements, and bills, as well as grocery and household shopping, explaining that claimant has a basic understanding of money but struggles with reading and writing. Claimant's wife stated that claimant is a good caregiver to her and their children, and that he can assist with the administration of medication. There were no concerns about safety.

9. Hernández Pérez reported that claimant is verbal and is generally easily understood. Claimant's wife shared that claimant is soft-spoken and is normally very quiet, but he can talk to her with no difficulties and can be talkative with his children. Claimant is more of a visual learner as he struggles with understanding verbal language and instruction. Claimant typically keeps to himself and his family, although he does have some friends with whom he would talk to about cars or play video games. While claimant's sister reported that claimant "has always been anti-social and had restricted interests," claimant's wife described claimant as easy going.

PSYCHOLOGICAL ASSESSMENT

10. Kathryn Pedgrift, Psy.D., evaluated claimant for ASD and intellectual disability. She met with claimant by secure video communication on March 5 and 9, 2026, and administered several tests. She also spoke with claimant's wife on March 16, 2026. In her report dated March 18, 2026, Dr. Pedgrift determined that claimant has specific learning disorders, with severe impairment, in reading and written expression.

11. In addition to informing Dr. Pedgrift that he was diagnosed with dyslexia and never learned to read or write at a functional level, claimant reported that he was incarcerated from the age of 14 until 17 during which time he attended school in a juvenile detention facility. Claimant dropped out of school when he was released from juvenile detention and did not earn a high school diploma.

12. Claimant stated to Dr. Pedgrift that he was employed at a tire shop from the age of 18 to 25 or 26. He started working on cars more informally as a mechanic, including fixing brakes, transmissions, and engines. Claimant reported that he was a "stay-at-home dad whose income was sporadic and job based."

13. When Dr. Pedgrift asked claimant questions related to symptoms of autism, claimant did not "clearly endorse symptoms," including that he described himself as a quiet person, that he likes to be with his children, work on cars, and cook. He also expressed knowledge of cars and mechanics.

14. Based on testing administered by Dr. Pedgrift, claimant scored in the low average range for verbal comprehension and a Full-Scale IQ of 78; in the average to low average range in verbal comprehension and arithmetic; in the low average range in receptive vocabulary abilities; in the borderline-extremely low range in expressive vocabulary; and in the low average to extremely low range in reading. Dr. Pedgrift did not observe language and communication deficits, reciprocal social interaction deficits, or stereotyped behavior and restricted interests consistent with an ASD diagnosis.

15. Claimant's wife informed Dr. Pedgrift that she met claimant when they were 17 years old. She described claimant as a quiet person who can speak at length about a topic he knows about and can give good advice. Claimant's wife reported that claimant has a relatively narrow range of interests, including very strong interests in cars, cooking, and his children. Claimant's wife confirmed that claimant did not demonstrate criteria consistent with an ASD diagnosis.

16. Based on her interactions with claimant and claimant's wife, Dr. Pedgrift determined that claimant does not have ASD or an intellectual disability. Although his general intelligence appeared to be in the low average to borderline range, Dr. Pedgrift noted that claimant did not demonstrate functional impairment in his adaptive functioning because he is able to manage his personal care, care of his children, food preparation, and self-employment.

17. At the time Dr. Pedgrift determined that claimant did not have an intellectual disability or ASD, she had not reviewed Dr. Evered's evaluation. After receiving and studying Dr. Evered's evaluation, Dr. Pedgrift wrote an addendum to her original report, dated June 1, 2026, and adhered to her original clinical impressions.

OTHER AVAILABLE RECORDS

18. NBRC received and its assessment team reviewed claimant's available academic records, which only included claimant's report cards for middle school and for his junior year in high school. Although claimant stated to Dr. Evered that he was enrolled in special education, he stated to Dr. Pedgrift that he attended general education classes and received extra support about once a week from a special educator. There was no documentary evidence that claimant was given or placed on an individualized education program.

19. Claimant informed Dr. Evered, Dr. Pedgrift, and Hernández Pérez of persistent leg pain and impaired mobility. Claimant's medical records confirm that claimant suffered a leg injury and had undergone surgery.

DETERMINATION

20. Kuldip Raju, Psy.D., the staff psychologist on the assessment team at NBRC, testified that, based on the presented documentation and the interviews that were conducted, NBRC's assessment team determined that claimant was not eligible for services because claimant did not have a developmental disability as defined in California Code of Regulations, title 16, section 54000. NBRC did not evaluate whether claimant had significant functional limitations in three or more of the areas of major life activity set forth in California Code of Regulations, title 16, section 54001.

21. Dr. Raju pointed out that, in determining whether claimant has an intellectual disability under the Lanterman Act, claimant must meet the three criteria set out in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision, also known as DSM-5-TR, for intellectual disability. Specifically, claimant must show that: (1) he has deficits in intellectual functioning; (2) he has deficits in adaptive functioning; and (3) that the onset of the deficits in both intellectual functioning and adaptive functioning occurred during the developmental period, or before the age of 18. Dr. Raju explained that claimant did not show a large deficit in intellectual functioning, did not show deficits in adaptive functioning, and did not show that those deficits occurred before the age of 18.

22. As it concerned intellectual functioning, Dr. Raju explained that claimant's IQ score was in the borderline range and the other cognitive assessments showed a substantial spread in his intellectual functioning, demonstrating that claimant does not have "pervasive global impairment" in intellect. Dr. Raju pointed out that although claimant was not able to read or follow instructions in a written format, he was able to use YouTube to gain knowledge on how to work on cars, which demonstrates his ability to take in and make use of complex information. Claimant also plans meals and has demonstrated the skills required to be a stay-at-home father and to take care of his children.

23. The assessment team also did not find any concerns with claimant's adaptive functioning, which were confirmed by claimant's wife and sister. Claimant was found to be generally clean and have good hygiene. He can live independently, take care of his family, and cook using cooking ware. Claimant can also communicate with his family and his friends, play video games, and talk about his interests. Claimant is a

mechanic and can work on complicated vehicles. There were also no known safety concerns.

24. Dr. Raju also expressed that there was little evidence that claimant's deficits occurred before the age of 18. Claimant's report cards did not clearly show that claimant had either intellectual or adaptive functioning deficits, and there were no records concerning any special education received by claimant. Claimant's wife and sister, both of whom have known claimant before he was 18 years old, also did not relay information that, except for issues concerning claimant's reading and writing abilities, would put into issue his intellectual or adaptive functioning.

25. Dr. Raju explained that to be considered for the fifth category under the Lanterman Act, claimant needed to show that his disability is closely related to intellectual disability or would require treatment similar to that required for individuals with an intellectual disability. Importantly, the disability cannot be solely psychiatric, physical, or intellectual. Dr. Raju credibly testified that claimant did not meet the fifth category eligibility standard under the Lanterman Act.

26. Dr. Raju noted that Dr. Evered evaluated and observed claimant while he was in custody, and thus he did not have a clear picture of claimant's adaptive functioning. Dr. Raju also observed that, other than claimant, Dr. Evered did not interview anyone else to obtain further information about claimant, which is important in determining whether an individual has intellectual and adaptive functioning deficits and whether those deficits occurred at the developmental stage. And while Dr. Evered criticized Dr. Pedgrift for using outdated examination tools (see Factual Finding 27), Dr. Raju explained that the assessments used by Dr. Pedgrift are standard and are used by professionals in determining whether an individual has intellectual and/or adaptive functioning deficits.

Claimant's Additional Evidence

27. Claimant presented a letter dated July 21, 2026, from Dr. Evered in response to Dr. Pedgrift's psychological report and addendum. He criticized Dr. Pedgrift for completing ASD testing, noting that "[t]he primary concern is in regard to [claimant's] cognitive and functional deficits which are noted in [Dr. Evered's] 7/17/25 report." Dr. Evered further disapproved of certain tests administered by Dr. Pedgrift because he believed them to be outdated. Dr. Evered reiterated that claimant has a "Full Scale IQ score of only 72," is "functionally illiterate," and has "attention, learning, memory, and executive functioning deficits."

Ultimate Findings

28. Claimant has not demonstrated by a preponderance of the evidence that he has an intellectual disability or a disability closely related to an intellectual disability that originated during the developmental period. Claimant has not shown that he has such deficits in intellectual functioning that would present as a disability. Even if claimant had demonstrated deficits in intellectual functioning, he has not shown deficits in adaptive functioning. And claimant has not demonstrated that the onset of those deficits occurred before he was 18 years old.

LEGAL CONCLUSIONS

1. The State of California accepts responsibility for persons with developmental disabilities under the Lanterman Act. The purpose of the Act is to rectify the problem of inadequate treatment and services for the developmentally disabled, and to enable developmentally disabled individuals to lead independent and productive lives in the least restrictive setting possible. (§§ 4501, 4502; *Assn. for*

Retarded Citizens v. Dept. of Developmental Services (1985) 38 Cal.3d 384.) Because the Act is a remedial statute, it must be interpreted broadly. (*Cal. State Restaurant Assn. v. Whitlow* (1976) 58 Cal.App.3d 340, 347.)

2. To establish eligibility for regional center services under the Lanterman Act, claimant has the burden of proving by a preponderance of the evidence that he suffers from a developmental disability, and that he is substantially disabled by that developmental disability. (§§ 4501, 4512, subd. (a); Evid. Code, §§ 115, 500.)

3. A "developmental disability" potentially qualifying a person for services under the Lanterman Act includes intellectual disability, autism, epilepsy, cerebral palsy, and other "disabling conditions found to be closely related to intellectual disability or to require treatment similar to that required for individuals with an intellectual disability." (§ 4512, subd. (a)(1).) The developmental disability "originates before an individual attains 18 years of age, continues, or can be expected to continue, indefinitely, and constitutes a substantial disability for that individual." (*Ibid.*) For the reasons set forth in Factual Finding 28, claimant has not demonstrated by a preponderance of the evidence that he suffers from an intellectual disability or a condition closely related to intellectual disability, or that he requires treatment similar to that required for individuals with an intellectual disability, or that his disability originated before he attained the age of 18. Because claimant does not have a qualifying disability, claimant is ineligible for regional center services.

4. The qualifying disability must also be "substantial," which is defined as "the existence of significant functional limitations in three or more of the following areas of major life activity, as determined by a regional center, and as appropriate to the age of the person: (A) Self-care. (B) Receptive and expressive language. (C) Learning. (D) Mobility. (E) Self-direction. (F) Capacity for independent living. (G)

Economic self-sufficiency." (§ 4512, subd. (l)(1); Cal. Code Regs., tit. 17, § 54001, subd. (a)(2).) NBRC did not examine whether claimant's disability was substantial such that there are significant functional limitations in three or more major life activities. (Factual Finding 20.) However, because claimant did not demonstrate that he has a qualifying disability under the Lanterman Act, NBRC was not required to conduct such an analysis.

ORDER

Claimant's appeal from NBRC's determination that claimant does not have a qualifying developmental disability under the Lanterman Act is denied.

DATE:

MARIO M. CHOI
Administrative Law Judge
Office of Administrative Hearings

NOTICE

This is the final administrative decision. Each party is bound by this decision. Either party may request reconsideration pursuant to subdivision (b) of Welfare and Institutions Code section 4713 within 15 days of receiving the decision, or appeal the decision to a court of competent jurisdiction within 180 days of receiving the final decision.