

UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF
VIRGINIA, ROANOKE DIVISION

Linda M. v. Commissioner of Social Security Administration

Civil Action No. 7:25-CV-00138 (W.D. Va. Dec. 1, 2025) (report and recommendation) · No. 7:25-CV-00138 ·
Decided December 1, 2025

SUMMARY

This Report and Recommendation addresses Linda M.’s challenge to the Commissioner of Social Security’s denial of disability insurance benefits. The magistrate judge recommends reversal and remand because the Administrative Law Judge failed to adequately explain the evaluation of Dr. Christine Jordan’s medical opinion under 20 C.F.R. § 404.1520c, preventing meaningful judicial review. The court declines to address the claimant’s additional challenge to the evaluation of her subjective allegations, but instructs that issue be reconsidered on remand.

CASE DETAILS

COURT	United States District Court for the Western District of Virginia, Roanoke Division
WRITING FOR THE COURT	C. Kailani Memmer
JURISDICTION	United States District Court for the Western District of Virginia, Roanoke Division
DECIDED	December 1, 2025
DOCKET	7:25-CV-00138
DISPOSITION	reversed_and_remanded
PROCEDURAL POSTURE	Plaintiff sought judicial review of the Commissioner's final decision denying disability insurance benefits. The magistrate judge, acting under referral pursuant to 28 U.S.C. § 636(b)(1)(B), issued a report and recommendation recommending reversal and remand under the fourth sentence of 42 U.S.C. § 405(g).
STANDARD OF REVIEW	The court reviews whether the ALJ applied the correct legal standards and whether substantial evidence supports the factual findings. The court may not reweigh conflicting evidence, make credibility determinations, or substitute its judgment for the Commissioner's. Remand is appropriate when the ALJ's analysis is so deficient that it frustrates meaningful judicial review.

PRECEDENTIAL VALUE	nonprecedential
PARTIES	Linda M. v. Commissioner of Social Security Administration

TOPICS

judicial review of agency action

agency adjudication

administrative law

administrative procedure act

PRACTICE AREAS

social security disability

administrative law

judicial review of agency action

QUESTIONS PRESENTED

1. Whether the ALJ properly evaluated the supportability and consistency of Dr. Christine Jordan's medical opinion under 20 C.F.R. § 404.1520c.
2. Whether the ALJ adequately evaluated Linda's subjective allegations under 20 C.F.R. § 404.1529 and SSR 16-3p.

HOLDINGS

1. The ALJ failed to provide the analysis required by 20 C.F.R. § 404.1520c for evaluating the supportability and consistency of Dr. Jordan's medical opinion. The conclusory statement that the opinion was not persuasive because it was unsupported by the record and the provider's treatment notes did not permit meaningful judicial review.
2. The court did not decide this issue because the deficient evaluation of Dr. Jordan's opinion independently required remand. The court directed that the ALJ reconsider and reevaluate the subjective-allegations issue on remand.

KEY QUOTATIONS

“Such conclusory statement provides nothing for this court to review.” (R. 23)

“As meaningful review is not possible in this case, I find such error is harmful and warrants remand.” (R. 23)

“ALJs must not only reach a conclusion supported by substantial evidence but must also “build an accurate and logical bridge from the evidence to their conclusions.”” (R. 19-25)

FACTUAL BACKGROUND

Linda M. alleged disability based on physical and mental impairments, including Guillain-Barre syndrome, neuropathy, arthralgia, hypothyroidism, obesity, depressive disorder, bipolar disorder, borderline personality disorder, and ADHD. Dr. Christine Jordan provided a March 22, 2024 medical source statement describing severe mental-health-related limitations, including extreme limitations in maintaining attendance and dealing with normal work stress. The ALJ found Linda not disabled and determined that she could perform light work with additional physical and mental restrictions, including jobs such as price marker, router, and routing clerk.

PROCEDURAL HISTORY

Linda M. applied for disability insurance benefits in November 2021, alleging disability beginning March 29, 2020. Her claim was denied initially and on reconsideration. After an April 11, 2024 administrative hearing, the ALJ issued a May 1, 2024 decision finding her not disabled, and the Appeals Council denied review on December 30, 2024. Linda then filed this action challenging the ALJ's decision.

DISPOSITION

reversed_and_remanded

REMAND INSTRUCTIONS

The report recommends reversal and remand under the fourth sentence of 42 U.S.C. § 405(g). On remand, the ALJ should properly analyze the supportability and consistency of Dr. Jordan's medical opinion and reconsider Linda's subjective-allegations claim and the evidence as a whole.

CASES CITED

- Arakas v. Commissioner of Social Security Administration, 983 F.3d 83, 94-95 (4th Cir. 2020)
- Craig v. Chater, 76 F.3d 585, 589 (4th Cir. 1996)
- Biestek v. Berryhill, 587 U.S. 97, 103 (2019)
- Mastro v. Apfel, 270 F.3d 171, 176 (4th Cir. 2001)
- Mascio v. Colvin, 780 F.3d 632, 636 (4th Cir. 2015)
- Johnson v. Barnhart, 434 F.3d 650, 654 n.1 (4th Cir. 2005) (per curiam)
- Heckler v. Campbell, 461 U.S. 458, 460-62 (1983)
- Taylor v. Weinberger, 512 F.2d 664, 666 (4th Cir. 1975)
- Shelley C. v. Commissioner of Social Security Administration, 61 F.4th 341, 353 (4th Cir. 2023)
- Oakes v. Kijakazi, 70 F.4th 207, 212 (4th Cir. 2023)
- Drumgold v. Commissioner of Social Security, 144 F.4th 596, 605 (4th Cir. 2025)
- Keene v. Berryhill, 732 F. App'x 174, 177 (4th Cir. 2018)
- Jeremy C. v. Kijakazi, No. 7:22-CV-00029, 2023 WL 2474217, at *6 (W.D. Va. Mar. 13, 2023)
- Monroe v. Colvin, 826 F.3d 176, 189 (4th Cir. 2016)
- Patterson v. Commissioner of Social Security Administration, 846 F.3d 656, 662-63 (4th Cir. 2017)
- Radford v. Colvin, 734 F.3d 288, 295 (4th Cir. 2013)
- Hancock v. Barnhart, 206 F. Supp. 2d 757, 763 n.3 (W.D. Va. 2002)