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8	UNITED STATES DISTRICT COURT	
9	CENTRAL DISTRICT OF CALIFORNIA	
10	MARIA C. MOTA,	Case No. CV 09-7047 PJW
11	Plaintiff,))) MEMORANDUM OPINION AND ORDER))
12	v. ()	
13 14	MICHAEL J. ASTRUE, () Commissioner of the () Social Security Administration, ()	
15) Defendant.	
16	/	
17	I.	
18	INTRODUCTION	
19	Plaintiff appeals a decision by Defendant Social Security	
20	Administration ("the Agency"), denying her application for Disability	
21	Insurance benefits ("DIB"). She claims that the Administrative Law	
22	Judge ("ALJ") erred when she: (1) found that Plaintiff was not	
23	credible; and (2) failed to properly consider the limitations imposed	
24	by Plaintiff's mental impairment.	(Joint Stip. at 5-16, 23-28.) For
25	the following reasons, the Court c	oncludes that the ALJ erred in

addressing Plaintiff's mental impairment and remands the case to the

Agency for further proceedings consistent with this Opinion.

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SUMMARY OF PROCEEDINGS

On December 15, 2000, Plaintiff protectively filed for DIB. (Administrative Record ("AR") 124-26.) After the Agency denied the application initially and on reconsideration, she requested and was granted an administrative hearing. (AR 68-69, 94-100.) On September 4, 2002, Plaintiff appeared with counsel at the hearing and testified. (AR 556-604.) On November 27, 2002, the ALJ issued a decision denying Plaintiff's application. (AR 70-82.)

On November 27, 2005, the Appeals Council granted Plaintiff's 10 request for review and remanded the case to the ALJ to obtain 11 12 additional evidence concerning Plaintiff's depression and anxiety, including, "if warranted and available, a consultative mental health 13 examination with psychological testing and medical source statements 14 " (AR 118.) The Appeals Council also ordered the ALJ to 15 obtain evidence from a medical doctor to "clarify the nature and 16 17 severity of [Plaintiff's] back impairment." (AR 119.)

On January 22, 2007, the ALJ held a hearing, at which Plaintiff again appeared with counsel and testified. (AR 605-44.) On March 27, 2007, the ALJ issued a new decision denying benefits. (AR 13-34.) Plaintiff appealed the ALJ's decision to the Appeals Council and the Appeals Council denied review. (AR 7-11.) She then commenced this action.¹

²⁵ ¹ The ALJ failed to comply with the Appeal's Council's ²⁶ instructions to obtain medical and psychological testing/examinations. ²⁷ (AR 16.) Instead, she pointed out the fallacy of the Appeals ²⁷ Council's reasoning and explained that, as a result, she would not ²⁸ comply with the mandate. (AR 16.) After she issued her decision, ²⁸ Plaintiff appealed to the Appeals Council again, and the Appeals

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III. ANALYSIS

The Credibility Determination

Plaintiff argues that the ALJ erred when she concluded that Plaintiff was not credible. She contends that the ALJ did not provide clear and convincing reasons for rejecting her testimony. (Joint Stip. at 9-16.) For the following reasons, the Court concludes that the ALJ did not err.

9 ALJ's are tasked with judging the credibility of witnesses. Where a claimant has produced objective medical evidence of an 10 impairment which could reasonably be expected to produce the symptoms 11 alleged and there is no evidence of malingering, the ALJ can only 12 reject the claimant's testimony for specific, clear, and convincing 13 Smolen v. Chater, 80 F.3d 1273, 1283-84 (9th Cir. 1996). 14 reasons. In making a credibility determination, the ALJ may take into account 15 ordinary credibility evaluation techniques as well as the claimant's 16 daily activities. Id. at 1284.² 17

Plaintiff alleged that she suffered from severe pain that limited 18 the use of her left side as a result of an injury she sustained at work in 1997. (AR 146, 284.) At the initial hearing in 2002,

Council apparently chose to ignore the ALJ's refusal to follow its 22 mandate.

2 Some of Plaintiff's doctors included in their reports subtle 24 and not so subtle comments suggesting that they believed that Plaintiff was exaggerating her symptoms. These comments ranged from 25 noting that Plaintiff "does exaggerate somewhat" (AR 293), to the more nuanced, "Her subjective complaints are considerably out of proportion 26 to the objective findings." (AR 334.) Ultimately, though, the ALJ did not find that Plaintiff was malingering, so the Court will apply 27 the more stringent standard--i.e., specific, clear, and convincing 28 evidence--in evaluating the ALJ's credibility findings.

Plaintiff testified that her back and hips hurt when she sat for a 1 2 long time. (AR 564.) She estimated that she could sit for about one hour before having to get up and walk around for about 15 minutes and 3 that she could walk comfortably for about 45 minutes before having to 4 sit down for 20 to 30 minutes. (AR 564, 565.) She also testified 5 that she could stand comfortably for no longer than ten or 15 minutes. 6 7 (AR 566.) Plaintiff complained that her left shoulder hurt when she raised her arms, that her left knee hurt whenever she bent it, and 8 9 that her left ankle hurt when she stood for a long time. (AR 565, 566.) She testified that she had been using a prescription cane to 10 walk for the past year. (AR 567.) Plaintiff also complained of 11 12 losing her grip when she lifted heavy objects with her left hand and that her left hand hurt when she lifted it. (AR 568-69.) She 13 testified that she was taking pain medication, which helped a little 14 bit, and receiving physical therapy twice a week, which also relieved 15 her pain somewhat. (AR 570-71.) She explained that her doctor had 16 prescribed daily exercises, but the exercises caused her pain. 17 (AR 571-72.) According to Plaintiff, she had to lie down once or twice a 18 19 day for a half hour to relieve her pain. (AR 572.) She also testified that she suffered from memory and concentration problems and 20 depression. (AR 569-70, 580-81, 610.) 21

The ALJ did not find Plaintiff's testimony credible. (AR 25-26.) She based this finding on the fact that: (1) Plaintiff's allegations were "out of proportion" to the objective medical findings; (2) Plaintiff's treatment for her physical and mental ailments was limited; (3) There was no objective evidence that Plaintiff suffered memory or attention problems; (4) Plaintiff's recitation of her daily physical activities suggested that she was not as limited as she

1 claimed; and (5) The evidence suggested that Plaintiff exaggerated her 2 claims with her doctors and with the ALJ. (AR 25-26.) As explained 3 below, the ALJ's reasons are legitimate and her findings are supported 4 for the most part by this record. As such, her determination that 5 Plaintiff was not credible will be affirmed.

The first reason offered by the ALJ to discount Plaintiff's 6 7 credibility was that Plaintiff's subjective complaints could not be explained by the medical evidence. (AR 25.) The ALJ noted that 8 9 Plaintiff "presents to doctors with exaggerated and out of proportion 10 subjective complaints and non-anatomic complaints." (AR 26.) This is an appropriate basis for discounting a claimant's testimony, see 11 12 Tonapetyan v. Halter, 242 F.3d 1144, 1148 (9th Cir. 2001), and is supported by the record. 13

Dr. M.I. Sami examined Plaintiff in December 1997 and noted that 14 15 her complaints were "considerably out of proportion to the objective findings" and did not "correlate with normal anatomic relationships." 16 17 (AR 334.) In May 2000, Dr. Wertheimer noted that Plaintiff "does 18 exaggerate somewhat, especially in the area of the left ankle and the left shoulder." (AR 293.) After reexamining Plaintiff in July 2003, 19 Dr. Wertheimer noted once again that she tended to exaggerate. 20 (AR 390.) Dr. Ibrahim Yashruti examined Plaintiff in 2001 and determined 21 22 that "the sensory deficit in the left arm and left leq is 23 nonanatomic." (AR 186.) Though Plaintiff's other doctors did not 24 report similar findings, the ALJ was tasked with resolving the 25 conflicts in the medical evidence. See, e.g., Thomas v. Barnhart, 278 26 F.3d 947, 956-57 (9th Cir. 2002). Given this record, the ALJ's 27 finding that Plaintiff should not be believed because she exaggerated 28 her symptoms will be upheld.

The second reason offered by the ALJ to discount Plaintiff's 1 testimony was that she was receiving very little, if any, treatment/ 2 medication for what she claimed was debilitating pain. (AR 25.) 3 The ALJ noted that Plaintiff had undergone steroid injections and had 4 taken pain medication in the past, but also noted, for example, that 5 in February 2001 Plaintiff reported that she was not taking any pain 6 medication at all. (AR 25.) Almost six years later, when she testified at the second administrative hearing, Plaintiff testified that she was not receiving any treatment and that the only medication that she was taking was Motrin. (AR 610.)

An unexplained failure to obtain medical treatment for a serious medical condition is a legitimate basis to question a claimant's testimony. See, e.g., Meanel v. Apfel, 172 F.3d 1111, 1114 (9th Cir. 1999) ("[T]he ALJ properly considered [the treating physician's] failure to prescribe ... any serious medical treatment for this supposedly excruciating pain"). Plaintiff failed to provide a legitimate reason for the fact that she was purportedly suffering debilitating pain but was not being treated for it or taking medication for it. As such, the Court concludes that the ALJ's second reason for finding Plaintiff incredible is legitimate and is supported by the record.

The third reason offered by the ALJ to discount Plaintiff's testimony was that she did not demonstrate any memory or attention problems--which she claimed she suffered from--when she was being examined by the examining psychiatrist or when she was testifying in the administrative hearings. (AR 25.) This finding is supported in part by the record. For example, psychiatrist Eden Magpayo, who examined Plaintiff in May 2001 in connection with her application for

benefits, found few objective abnormalities. (AR 79, 198-201.) 1 Dr. Magpayo did not note any memory loss. (AR 200.) On the other hand, 2 she found that Plaintiff's memory was affected by her depression and 3 that she would be limited in her ability to focus her attention. (AR 4 200-01.) As to Plaintiff's testimony at the 2002 and 2007 5 administrative hearings, the transcripts do not reveal that Plaintiff 6 7 exhibited memory or concentration problems. (AR 559-82, 609-12.) In the end, the Court finds that, though some of the evidence contradicts 8 9 the ALJ's findings in this regard, her findings are, for the most 10 part, supported by the record. For this reason, they will not be disturbed. 11

The fourth reason relied on by the ALJ to find that Plaintiff's claimed limitations were not credible was that her daily activities were inconsistent with her alleged limitations. Though this, too, is a legitimate reason for discounting a claimant's credibility, Orn v. Astrue, 495 F.3d 625, 639 (9th Cir. 2007); Thomas, 278 F.3d at 958-59, it is not fully supported by the record.

18 In a written submission prior to the first administrative hearing 19 in 2002, Plaintiff reported that she was able to take her daughter to school, do household chores, cook dinner, grocery shop, fold and put 20 away clothes, watch television, read the newspaper, go to church, 21 22 drive, socialize, and talk on the telephone. (AR 158-62.) At the 23 2002 hearing, however, Plaintiff qualified many of these statements. 24 For example, she testified that she could cook "with some help," that 25 she could dust "a little," that she could do laundry with her daughters' help, and that she needed help with grocery shopping. 26 (AR 27 574-76.) The ALJ determined that these activities were inconsistent

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with Plaintiff's claim that she was limited in her ability to sit,
stand, and drive. (AR 25.)

Based on Plaintiff's qualifications regarding these chores, it is 3 difficult for the Court to conclude that her ability to perform them 4 proves that she is not being candid when she claims that she cannot 5 In fact, the level of activity claimed by Plaintiff--both in 6 work. her written submission and in her testimony--is not so great as to 7 undermine her claim that she cannot work for eight hours a day, forty 8 9 hours a week. For this reason, the Court rejects the ALJ's finding 10 that Plaintiff's daily activities support a finding that she is not credible. 11

12 The fifth reason relied on by the ALJ to discount Plaintiff's 13 testimony was that the evidence did not support her claimed impairments. (AR 26.) The ALJ pointed out, for example, that, even 14 though Plaintiff claimed that she had trouble thinking and reasoning 15 and did not understand English, Plaintiff passed the U.S. Citizenship 16 17 test in English. (AR 26.) The ALJ also pointed to the fact that, in 18 the first administrative hearing, Plaintiff testified while standing 19 and leaning on her left arm for 15 minutes, though she complained that her left arm caused her extreme discomfort. (AR 26.) The ALJ noted 20 21 that, when she asked Plaintiff about this apparent contradiction at 22 the hearing, Plaintiff denied that she had been leaning on her left 23 arm. (AR 26.) These inconsistencies are supported by the record and 24 are valid reasons to question a claimant's testimony. See, e.g., 25 Verduzco v. Apfel, 188 F.3d 1087, 1090 (9th Cir. 1999) (ALJ may rely 26 on behavior exhibited by claimant at a hearing that undermines a claimant's alleged symptoms.)

In the end, though the Court might quibble with some of the 1 reasons relied on by the ALJ for discounting Plaintiff's credibility, 2 her overall finding that Plaintiff was not credible is supported by 3 the record and will be affirmed. See Carmickle v. Comm'r, Soc. Sec. 4 Admin., 533 F.3d 1155, 1162 (9th Cir. 2008) (Explaining that, in the 5 context of credibility findings, an error is harmless "[s]o long as 6 there remains substantial evidence supporting the ALJ's conclusions on 7 . . . credibility and the error does not negate the validity of the 8 9 ALJ's ultimate credibility conclusion." Id. (quoting Batson v. Comm'r, Soc. Sec. Admin., 359 F.3d 1190, 1197 (9th Cir. 2004)). 10

B. <u>Plaintiff's Mental Impairment</u>

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Relying on the opinion of reviewing psychiatrist Paul Balson, the 12 13 ALJ concluded that Plaintiff was capable of performing simple, repetitive tasks, despite a mental impairment. (AR 24.) Plaintiff 14 contends that this conclusion was in error. (Joint Stip. at 23-28.) 15 She argues that the ALJ did not account for limitations noted by 16 17 examining psychiatrist Eden Magpayo and did not provide specific and 18 legitimate reasons for rejecting Dr. Magpayo's opinion. (Joint Stip. at 23-28.) For the following reasons, the Court agrees. 19

As a general rule, among the three types of physicians--20 21 (1) treating physicians (those who treat the claimant), (2) examining 22 physicians (those who examine but do not treat), and (3) non-examining 23 physicians (those who neither examine or treat) -- the ALJ should grant 24 the most weight to the opinion of a treating source. See Lester v. 25 Chater, 81 F.3d 821, 830 (9th Cir. 1995) (citations omitted). "The opinion of an examining physician is, in turn, entitled to greater 26 27 weight than the opinion of a nonexamining physician." Id. Thus, in 28 general, the opinion of the non-treating, non-examining physician is

given the least weight. As with the opinion of a treating physician, however, the ALJ can reject an examining physician's opinion in favor of a non-treating, non-examining physician's opinion for specific and legitimate reasons supported by substantial evidence in the record. *Id.* at 830-31 (citing *Andrews v. Shalala*, 53 F.3d 1035, 1043 (9th Cir. 1995)).

7 Psychiatrist Eden Magpayo performed a complete psychiatric evaluation of Plaintiff in May 2001. (AR 198-201.) Her examination 8 9 revealed, among other things, that Plaintiff had depressive symptoms which "distract[ed] her from activities requiring some concentration 10 and good memory. When she is depressed, her ability to focus 11 12 attention and her capacity to interact with others is limited." (AR 13 200-01.) The ALJ read Dr. Magpayo's opinion to mean that Plaintiff's "untreated depression causes some moderate limitations." (AR 24.) 14

Reviewing psychiatrist Paul Balson did not examine Plaintiff. 15 Instead, he read Dr. Magpayo's report, considered the other mental 16 health records (of which there were few), and determined that 17 18 Plaintiff was capable of performing "simple, repetitive tasks." (AR 202-19.) In Dr. Balson's view, Plaintiff was not restricted in 19 activities of daily living, had mild difficulties in maintaining 20 social functioning and moderate difficulties in maintaining 21 22 concentration, persistence, and pace. (AR 212.) The ALJ accepted Dr. 23 Balson's opinion, explaining, "In the absence of a supported residual 24 functional capacity assessment from a treating source showing greater 25 functional limitations, I accept the assessment from [Dr. Balson.]" (AR 24.) 26

The ALJ erred in silently rejecting Dr. Magpayo's opinion and accepting Dr. Balson's opinion instead. All things being equal, the

ALJ was required to give greater weight to Dr. Magpayo's opinion. Lester, 81 F.3d at 830. At a minimum, she was required to provide specific and legitimate reasons for choosing Dr. Balson's opinion over Dr. Magpayo's. *Id.* at 830-31. As such, the case must be remanded for further analysis.

The Agency disagrees. Though it implicitly concedes that the ALJ did not set forth specific and legitimate reasons for rejecting Dr. Magpayo's opinion, it argues that she was not required to because she was, in effect, accepting Dr. Magpayo's opinion, which the Agency contends was consistent with Dr. Balson's. (Joint Stip. at 28-31.) The record does not support this view.

12 The Court reads the ALJ's unambiguous statement that she is 13 accepting Dr. Balson's opinion as an equally unambiguous statement that she is rejecting Dr. Magpayo's opinion. The Court's conclusion 14 is bolstered by the ALJ's 2002 decision. There, after summarizing Dr. 15 Magpayo's report, she discounted her opinion that Plaintiff suffered 16 17 from a mental impairment because it was primarily based on Plaintiff's 18 subjective complaints to Dr. Magpayo and the ALJ found that Plaintiff 19 was not credible. (AR 79.) The ALJ's analysis in the 2002 decision highlights the fact that she did not believe that Dr. Magpayo's and 20 21 Dr. Balson's opinions were consistent. Thus, the Court will not read the 2007 decision to mean that the ALJ had concluded that the critical 22 23 portions of the opinions were the same and that, therefore, when she 24 accepted Dr. Balson's opinion, she was, in effect, accepting Dr. 25 Magpayo's opinion, too. Even were this the case, the ALJ should have

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accepted Dr. Magpayo's opinion in the first instance, not Dr.
Balson's.³

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3 On remand, the ALJ will be required to address Plaintiff's alleged mental impairment and Dr. Magpayo's and Dr. Balson's opinions 4 regarding it. If the ALJ finds that the opinions are the same, she 5 can and should rely on Dr. Magpayo's opinion, since under the law that 6 opinion is entitled to priority. If, instead, she determines that the 7 opinions are not the same and further determines that Dr. Magpayo's 8 9 opinion is infirm, she should provide specific and legitimate reasons 10 for rejecting Dr. Magpayo's opinion and accepting Dr. Balson's.⁴

³ In the 2007 decision, the ALJ incorporated by reference "the medical evidence reported in [her 2002] decision." (AR 19.) The Court has interpreted this to mean that the ALJ was incorporating only the medical evidence, not the analysis of that evidence, e.g., her 2002 finding that Dr. Magpayo's opinion should be discounted because it was based on Plaintiff's subjective complaints that the ALJ found incredible. (AR 79.)

There are spots in the Agency's brief where it appears to be 21 arguing that the ALJ rejected Dr. Magpayo's opinion for specific and legitimate reasons. For example, in arguing that the ALJ's decision 22 should be affirmed, it points out that the ALJ considered the fact that there was no history of mental health treatment in the medical 23 record and that neither Plaintiff's doctor or her lawyer referred her 24 for treatment. (Joint Stip. at 30.) The Agency also notes that the ALJ considered Plaintiff's daily activities in determining that she 25 was not severely impaired. (Joint Stip. at 30.) The Court has thoroughly reviewed the ALJ's decisions in this case and recognizes 26 that it is possible that the ALJ was attempting to set forth specific reasons for rejecting Dr. Magpayo's opinion in her 2007 decision. 27 Ultimately, however, the Court concludes that the decision is not 28 clear and, therefore, remand is required.

1	IV.		
2	CONCLUSION		
3	For these reasons, the Agency's decision is reversed and the case		
4	is remanded to the Agency for further proceedings consistent with this		
5	Opinion. ⁵		
б	IT IS SO ORDERED.		
7	DATED: <u>March 18, 2011</u>		
8	Patrich S. Walsh		
9	PATRICK J. WALSH UNITED STATES MAGISTRATE JUDGE		
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25 26	⁵ By setting forth that the ALJ is required to reconsider the psychiatrists' opinions, the Court is not suggesting that the ALJ is		
20	limited to only that narrow issue on remand. The ALJ may consider additional evidence and conduct any further hearing she deems		
28	appropriate, provided that she addresses the psychiatrists' opinions and explains her decision regarding them.		

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