Stenberg v.	(ijakazi Case 2:22-cv-00239-SAB ECF	No. 22 filed 0	7/25/23	PageID.1786	Page 1 of 10	
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3	FILED IN THE U.S. DISTRICT COURT					
3 4	EASTERN DISTRICT OF WASHINGTON					
5	SEAN F. MCAVOY, CLERK					
6	UNITED STATES DISTRICT COURT					
7	EASTERN DISTRICT OF WASHINGTON					
8						
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10	NORMAN S.,	No.2	2:22-CV-	00239-SAB		
11	Plaintiff,					
12	V.					
13	COMMISSIONER OF SOCIA	L ORI	DER AFI	FIRMING DE	CISION OF	
14	SECURITY ADMINISTRATI	ON, CON	AMISSI	ONER		
15	Defendant.					
16						
17	Plaintiff brings this action seeking judicial review of the Commissioner of					
18	Social Security's final decision denying his application for social security benefits.					
19	Plaintiff is represented by Chad L. Hatfield. The Commissioner is represented by					
20	Franco Becia, Frederick Fripps, and Brian M. Donovan. Pending before the Court					
21	are Plaintiff's Opening Brief, ECF No. 18, the Commissioner's Brief, ECF No. 20,					
22	and Plaintiff's Reply Brief, ECF No. 21.					
23	After reviewing the administrative record, briefs filed by the parties, and					
24	applicable case law, the Court is fully informed. For the reasons set forth below,					
25 26	the Court affirms the Commissioner's decision.					
26 27	I. Jurisdiction					
27 28	On May 24, 2018, Plaintiff filed an application for Title II disability					
28	insurance benefits and application for Supplements Security Income, with the onset					
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date of March 2, 2017. Plaintiff's applications were denied initially and on
 reconsideration. Plaintiff requested a hearing before an ALJ. On January 24, 2021,
 a hearing was held by telephone. Plaintiff participated and was represented by
 Chad Hatfield. On July 14, 2021, the ALJ issued its decision finding that Plaintiff
 was not disabled.

6 Plaintiff requested review by the Appeals Council, and the Appeals Council
7 denied the request on August 15, 2022. The Appeals Council's denial of review
8 makes the ALJ's decision the "final decision" of the Commissioner of Social
9 Security, which this Court is permitted to review. 42 U.S.C. § 405(g),
10 1383(c)(1)(3). Plaintiff filed a timely appeal on October 19, 2022. ECF No. 1. The
11 matter is before this Court pursuant to 42 U.S.C. § 405(g).

II. Five-Step Sequential Evaluation Process

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13 The Social Security Act defines disability as the "inability to engage in any substantial gainful activity by reason of any medically determinable physical or 14 15 mental impairment which can be expected to result in death or which has lasted or 16 can be expected to last for a continuous period of not less than twelve months." 42 17 U.S.C. § 423(d)(1)(A), 1382c(a)(3)(A). A claimant shall be determined to be under 18 a disability only if their impairments are of such severity that the claimant is not only unable to do their previous work, but cannot, considering claimant's age, 19 education, and work experiences, engage in any other substantial gainful work that 20exists in the national economy. 42 U.S.C. §§ 423(d)(2)(A), 1382c(a)(3)(B). The 21 Commissioner has established a five-step sequential evaluation process to 22 determine whether a person is disabled in the statute. See 20 C.F.R. 23 § 404.1520(a)(4)(i)–(v), 416.920(a)(4)(i)–(v). 24

Step One: Is the claimant engaged in substantial gainful activities? *Id.*404.1520(a)(4)(i), 416.920(a)(4)(i). Substantial gainful activity is work done for
pay and requires compensation above the statutory minimum. *Keyes v. Sullivan*,
894 F.2d 1053, 1057 (9th Cir. 1990). If the claimant is engaged in substantial

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activity, benefits are denied. *Id.* § 404.1520(b), 416.920(b). If the claimant is not,
 the ALJ proceeds to step two.

Step Two: Does the claimant have a medically-severe impairment or
combination of impairments? *Id.* § 404.1520(a)(4)(ii), 416.920(a)(4)(ii). A severe
impairment is one that lasted or must be expected to last for at least 12 months and
must be proven through objective medical evidence. *Id.* §§ 404.1509, 416.909. If
the claimant does not have a severe impairment or combination of impairments, the
disability claim is denied. *Id.* §§ 404.1520(a)(4)(ii), 416.920(a)(4)(ii). If the
impairment is severe, the evaluation proceeds to the third step.

Step Three: Does the claimant's impairment meet or equal one of the listed
impairments acknowledged by the Commissioner to be so severe as to preclude
substantial gainful activity? *Id.* § 404.1520(a)(4)(iii), 416.920(a)(4)(iii). If the
impairment meets or equals one of the listed impairments, the claimant is
conclusively presumed to be disabled. *Id.* § 404.1520(d), 416.920(d). If the
impairment is not one conclusively presumed to be disabling, the evaluation
proceeds to the fourth step.

Before proceeding to the fourth step, the ALJ must first determine the
claimant's residual functional capacity (RFC). An individual's residual functional
capacity is their ability to do physical and mental work activities on a sustained
basis despite limitations from their impairments. *Id.* § 404.1545(a)(1),
416.945(a)(1). The RFC is relevant to both the fourth and fifth steps of the
analysis.

Step Four: Does the impairment prevent the claimant from performing work
they have performed in the past? *Id.* § 404.1520(a)(4)(iv), 416.920(a)(4)(iv). If the
claimant is able to perform their previous work, they are not disabled. *Id.*§ 404.1520(f), 416.920(f). If the claimant cannot perform this work, the evaluation
proceeds to the fifth and final step.

Step Five: Is the claimant able to perform other work in the national

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1 economy in view of their age, education, and work experience? *Id.*

2 § 404.1520(a)(4)(v), 416.920(a)(4)(v). The initial burden of proof rests upon the
3 claimant to establish a prima facie case of entitlement to disability benefits. *Tackett*4 *v. Apfel*, 108 F.3d 1094, 1098 (9th Cir. 1999). This burden is met once a claimant
5 establishes that a physical or mental impairment prevents him from engaging in her
6 previous occupation. *Id.* At step five, the burden shifts to the Commissioner to
7 show that the claimant can perform other substantial gainful activity. *Id.*

III. Standard of Review

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9 The Commissioner's determination will be set aside only when the ALJ's
10 findings are based on legal error or are not supported by substantial evidence in the
11 record as a whole. *Matney v. Sullivan*, 981 F.2d 1016, 1018 (9th Cir. 1992) (citing
12 42 U.S.C. § 405(g)). Substantial evidence is "more than a mere scintilla,"
13 *Richardson v. Perales*, 402 U.S. 389, 401 (1971), but "less than a preponderance,"
14 *Sorenson v. Weinberger*, 514 F.2d 1112, 1119 n.10 (9th Cir. 1975). Substantial
15 evidence is "such relevant evidence as a reasonable mind might accept as adequate
16 to support a conclusion." *Richardson*, 402 U.S. at 401.

A decision supported by substantial evidence will be set aside if the proper 17 18 legal standards were not applied in weighing the evidence and making the decision. 19 Brawner v. Secr'y of Health & Human Servs., 839 F.2d 432, 433 (9th Cir. 1988). 20 An ALJ is allowed "inconsequential" errors as long as they are immaterial to the ultimate nondisability determination. Stout v. Comm'r, Soc. Sec. Admin., 454 F.3d 21 1050, 1055 (9th Cir. 2006). The court must uphold the ALJ's denial of benefits if 22 the evidence is susceptible to more than one rational interpretation, one of which 23 supports the decision of the administrative law judge. Batson v. Barnhart, 359 F.3d 24 1190, 1193 (9th Cir. 2004). It "must consider the entire record as a whole, 25 weighing both the evidence that supports and the evidence that detracts from the 26 27 Commissioner's conclusion, and may not affirm simply by isolating a specific quantum of supporting evidence." Revels v. Berryhill, 874 F.3d 648, 654 (9th Cir. 28

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 2017) (quotation omitted). "If the evidence can support either outcome, the court may not substitute its judgment for that of the ALJ." *Matney*, 981 F.2d at 1019.

IV. Statement of Facts

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The facts have been presented in the administrative record, the ALJ's
decision, and the briefs to this Court. Only the most relevant facts are summarized
here.

At the time of the hearing, Plaintiff was 58 years old. He was living with his
wife, who was on disability for mental health issues. He owns a tow truck business,
which he has been working with his daughter and son-in-law to take over. Plaintiff
continues to help at the business, filling out paperwork, ordering supplies,
answering the phone, interacting with customers, and occasionally driving a tow
truck.

He earned a B.A. in Business Administration and has training in criminal
justice. He is obese and suffers from diabetes. He complains of lower back,
shoulder, and neck pain, as well as depression and PTSD.

16 V. The ALJ's Findings

The ALJ issued an opinion affirming denial of benefits. AR 23-36. The ALJ
found overcame the presumptions addressed in *Chavez v. Bowen*, 844 F.2d 691
(9th Cir. 1988), due to changed circumstances. AR 24.

At step one, the ALJ found that Plaintiff has not engaged in substantial gainful activity since March 2, 2017, the alleged onset date. AR 26.

At step two, the ALJ identified the following severe impairments: cervical
spondylosis/degenerative disc disease and radicular symptoms; chronic left
shoulder pain greater on the right; bilateral carpal and cubital tunnel syndrome;
type 2 diabetes mellitus; hypertension; and obesity. AR 27.

At step three, the ALJ found that Plaintiff did not have an impairment or
combination of impairments that meets or medically equals the severity of one of
the listed impairments. AR 30.

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1	The ALJ concluded that Plaintiff has an RFC to perform: medium work as defined in 20 CFR 404.1567(c) and 416.967(c) with certain exceptions. Specifically, climbing, balancing, stooping, kneeling, crouching, and crawling must be limited to occasionally while overhead reaching and handling with the bilateral upper extremities must be limited to frequently. AR 31.					
2 3 4 5						
0 7	At step four, the ALJ found that Plaintiff was capable of performing past					
8	relevant work of a composite job consisting of being a tow truck driver,					
9	automobile mechanic and general office clerk. AR 35.					
10	Consequently, the ALJ found that Plaintiff was not disabled.					
11	VI. Discussion					
12	A. Step Two Analysis					
13	Plaintiff asserts the ALJ erred in the Step Two analysis by failing to find that					
14	4 his mental impairments were not severe. Specifically, the ALJ concluded that Plaintiff's major depressive disorder and PTSD did not cause more than minimal					
15						
16	limitation in Plaintiff's residual function ability to perform basic mental work					
17	activities.					
18	The ALJ reviewed the record and concluded that Plaintiff possessed no more					
19	than mild mental limitations. Based on this review, it was reasonable that the ALJ					
20	found that his mental health symptoms do not limit Plaintiff's ability to perform					
21	basic work activities beyond the residual functional capacity addressed in its					
22	decision. There is little evidence in the record beyond his own testimony and a few					
23	incidents in the record to support that he is unable to work because of his mental					
24	conditions. Instead, the record demonstrates that Plaintiff answers phones, interacts					
25	with customers, spends time at the restaurant near his house and goes out on calls					
26	with the tow trucks, all of which indicate that Plaintiff's mental impairments do not					
20	limit his ability to perform basic work activities. As such, the ALJ's step two					
28	analysis is supported by substantial evidence.					

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B. Evaluation of Plaintiff's Subjective Complaints

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2 Plaintiff argues the ALJ erred in discounting his subjective symptoms3 testimony.

In determining whether a claimant's testimony regarding subjective pain or 4 5 symptoms is credible, the ALJ engages in a two-step analysis. Garrison, 759 F.3d at 1014. "First, the ALJ must determine whether the claimant has presented 6 objective medical evidence of an underlying impairment which could reasonably 7 be expected to produce the pain or other symptoms alleged." Id. (citation and 8 9 quotation omitted). If the claimant satisfies the first step of the analysis, and there 10 is no evidence of malingering, the ALJ can reject the claimant's testimony about 11 the severity of their symptoms "only by offering specific, clear and convincing reasons for doing so." Id. (citation and quotation omitted). "This is not an easy 12 requirement to meet: The clear and convincing standard is the most demanding 13 14 required in Social Security cases." Id. (citation and quotation omitted). That said, if the ALJ's credibility finding is supported by substantial evidence in the record, the 15 Court may not engage in second-guessing. Thomas v. Barnhart, 278 F.3d 947, 959 16 (9th Cir. 2002). 17

Here, the ALJ reasonably evaluated Plaintiff's subjective symptom 18 testimony. The ALJ provided clear and convincing reasons for finding that 19 Plaintiff's testimony regarding his limitations was not entirely credible. The ALJ 20noted that Plaintiff's complaints were inconsistent with the medical evidence. The 21 ALJ also noted that Plaintiff's activities were not consistent with his testimony that 22 he could not work. Most important, even with the symptoms that Plaintiff 23 experienced, he was able to work for his tow truck business, including answering 24 phones, ordering supplies, completing paperwork and occasionally driving tow 25 trucks. He also worked on cars in his spare time and worked out at the gym. These 26 activities cast significant doubt over his claims that he is unable to work due to his 27 impairments. Substantial evidence supports the ALJ's evaluation of Plaintiff's 28

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1 symptom testimony.

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C. Evaluation of the Medical Opinion Evidence

3 In evaluating medical opinion evidence, the ALJ considers the persuasiveness of each medical opinion and prior administrative medical finding 4 5 from medical sources. 20 C.F.R. § 416.920c(a), (b). The ALJ is required to 6 consider multiple factors, including supportability, consistency, the source's relationship with the claimant, any specialization of the source, and other factors 7 8 (such as the source's familiarity with other evidence in the file or an understanding of Social Security's disability program). *Id.* § 416.920c(c)(1)–(5). Supportability 9 10 and consistency of an opinion are the most important factors, and the ALJ must 11 articulate how they considered those factors in determining the persuasiveness of 12 each medical opinion or prior administrative medical finding. *Id.* § 416.920c(b)(2). 13 The ALJ may explain how they considered the other factors, but is not required to do so, except in cases where two or more opinions are equally well-supported and 14 15 consistent with the record. Id.

16 Supportability and consistency are further explained in the regulations:

17 (1) Supportability.

The more relevant the objective medical evidence and supporting
 explanations presented by a medical source are to support his or her medical
 opinion(s) or prior administrative medical finding(s), the more persuasive
 the medical opinions or prior administrative medical finding(s) will be.

(2) Consistency.

The more consistency.
 The more consistency.
 finding(s) is with the evidence from other medical sources and nonmedical sources in the claim, the more persuasive the medical opinion(s) or prior administrative medical finding(s) will be.

 $\begin{bmatrix} 24 \\ 25 \end{bmatrix} Id. \ \S \ 404.1520c(c); \ 416.920c(c).$

Plaintiff argues the ALJ erred in rejecting Dr. Fitterer's opinion what

26 limited Plaintiff to less than a full range of light work.

The ALJ found that Dr. Platter's opinion, limiting Plaintiff to less than a full

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range of medium work, to be more persuasive, relying on the record that indicated
 Plaintiff continued to work in his tow truck business, occasionally drive a tow
 truck, service his car, and exercise at the gym.

The ALJ's evaluation of Dr. Fitterer's and Dr. Platter's opinion is supported
by substantial evidence. Dr. Platter's opinion is more supported and more
consistent with the record and therefore, the ALJ is entitled to find it is more
persuasive.

D. Lay Witness Testimony

9 The ALJ did not address Plaintiff's wife's testimony. However, the ALJ is
10 not required to do so. Plaintiff's wife did not provide any additional evidence that
11 was not considered as part of Plaintiff's own testimony. Given that it was
12 reasonable to view Plaintiff's symptom testimony as unreliable, it was not
13 necessary for the ALJ to address the wife's testimony.

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E. Step Four Findings

The ALJ's Step Four Findings are supported by substantial evidence. Based on the hypothetical given to the vocational expert, it is clear that Plaintiff could perform past work as a general office clerk, and in fact, is performing work as an office clerk. Also, it is clear from the record that Plaintiff is capable of performing less than a full range of medium work, so the ALJ's conclusion that he is able to perform the other components of the composite job of tow truck driver and automobile mechanic is also supported by substantial evidence in the record.

22 VII. Conclusion

The ALJ's decision is supported by substantial evidence the decision is free
of harmful error. As such, the Court affirms the Commissioner's decision.

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Accordingly, IT IS HEREBY ORDERED:

For docket purposes, Plaintiff's Opening Brief, ECF No. 18, and
 Reply Brief, ECF No. 21, are **DENIED**.

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2. For docket purposes, the Commissioner's Response Brief, ECF No. 20,

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1 is **GRANTED**.

3. The decision of the Commissioner is **AFFIRMED**.

4. Judgment shall be entered in favor of Defendant and against Plaintiff.

IT IS SO ORDERED. The District Court Executive is hereby directed to file this Order, provide copies to counsel, and **close** the file.

DATED this 25th day of July 2023.

Stanley A. Bastian Chief United States District Judge