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6 **IN THE UNITED STATES DISTRICT COURT**
7 **FOR THE DISTRICT OF ARIZONA**
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9 Jesus Zamora,

10 Plaintiff,

11 v.

12 Carolyn W. Colvin,

13 Defendant.

No. CV-13-01970-PHX-DGC

ORDER

14
15 Pursuant to 42 U.S.C. § 405(g), Plaintiff Jesus Zamora seeks judicial review of the
16 Commissioner's decision finding him not disabled within the meaning of the Social
17 Security Act. Doc. 13. For the reasons that follow, the Court will remand the case for an
18 award of benefits.

19 **I. Background.**

20 Plaintiff applied for disability and supplemental security insurance benefits in July
21 2007, alleging disability beginning October 26, 2006. Doc. 14 at 1. After a hearing on
22 April 28, 2009 (A.R. 95-132), an administrative law judge ("ALJ") issued an opinion on
23 August 24, 2009, finding Plaintiff not disabled (A.R. 140-49). The Appeals Council
24 granted Plaintiff's request for review and remanded the case for further proceedings.
25 Doc. 14 at 2. A second hearing was held on March 6, 2012 (A.R. 35-88), and the ALJ
26 issued an opinion on April 27, 2012, again finding Plaintiff not disabled (A.R. 13-34). A
27 second request for review was denied by the Appeals Council and the ALJ's April 2012
28 opinion became the Commissioner's final decision. Doc. 14 at 2.

1 **II. Legal Standard.**

2 The district court reviews only those issues raised by the party challenging the
3 ALJ’s decision. *See Lewis v. Apfel*, 236 F.3d 503, 517 n.13 (9th Cir. 2001). The court
4 may set aside the Commissioner’s disability determination only if the determination is
5 not supported by substantial evidence or is based on legal error. *Orn v. Astrue*, 495 F.3d
6 625, 630 (9th Cir. 2007). Substantial evidence is more than a scintilla, less than a
7 preponderance, and relevant evidence that a reasonable person might accept as adequate
8 to support a conclusion considering the record as a whole. *Id.* In determining whether
9 substantial evidence supports a decision, the court must consider the record as a whole
10 and may not affirm simply by isolating a “specific quantum of supporting evidence.” *Id.*
11 As a general rule, “[w]here the evidence is susceptible to more than one rational
12 interpretation, one of which supports the ALJ’s decision, the ALJ’s conclusion must be
13 upheld.” *Thomas v. Barnhart*, 278 F.3d 947, 954 (9th Cir. 2002) (citations omitted).

14 To determine whether a claimant is disabled for purposes of the Social Security
15 Act, the ALJ follows a five-step process. 20 C.F.R. § 404.1520(a). The claimant bears
16 the burden of proof on the first four steps, but at step five the burden shifts to the
17 Commissioner. *Tackett v. Apfel*, 180 F.3d 1094, 1098 (9th Cir. 1999).

18 At the first step, the ALJ determines whether the claimant is engaging in
19 substantial gainful activity. 20 C.F.R. § 404.1520(a)(4)(i). If so, the claimant is not
20 disabled and the inquiry ends. *Id.* At step two, the ALJ determines whether the claimant
21 has a “severe” medically determinable physical or mental impairment. § 404.1520(a)
22 (4)(ii). If not, the claimant is not disabled and the inquiry ends. *Id.* At step three, the
23 ALJ considers whether the claimant’s impairment or combination of impairments meets
24 or medically equals an impairment listed in Appendix 1 to Subpart P of 20 C.F.R. Pt.
25 404. § 404.1520(a)(4)(iii). If so, the claimant is automatically found to be disabled. *Id.*
26 If not, the ALJ proceeds to step four. At step four, the ALJ assesses the claimant’s
27 residual functional capacity and determines whether the claimant is still capable of
28 performing past relevant work. § 404.1520(a)(4)(iv). If so, the claimant is not disabled

1 and the inquiry ends. *Id.* If not, the ALJ proceeds to the fifth and final step, where he
2 determines whether the claimant can perform any other work based on the claimant’s
3 residual functional capacity, age, education, and work experience. § 404.1520(a)(4)(v).
4 If so, the claimant is not disabled. *Id.* If not, the claimant is disabled. *Id.*

5 At step one, the ALJ determined that Plaintiff meets the insured status
6 requirements of the Social Security Act and that he has not engaged in substantial gainful
7 activity since October 26, 2006. At step two, the ALJ found that Plaintiff has the severe
8 impairments of major depressive disorder, anxiety disorder, personality disorder, and
9 poly-substance dependence, in sustained remission since 2008. At step three, the ALJ
10 found that Plaintiff does not have an impairment or combination of impairments that
11 meet or medically equal an impairment listed in Appendix 1 to Subpart P of 20 C.F.R.
12 Pt. 404. At step four, the ALJ found that Plaintiff “has the residual functional capacity to
13 perform a full range of work at all exertional levels,” with the following non-exertional
14 limitations: he “retains the ability to understand, carry out, and remember simple
15 instructions,” “works best if not working in a team, and in a routine work setting where
16 there is little change and any change can be easily explained.” At step five, the ALJ
17 concluded that the Plaintiff is capable of performing his past relevant work.

18 **III. Analysis.**

19 Plaintiff argues the ALJ’s decision is defective for six reasons: (1) the ALJ’s
20 decision is not supported by substantial evidence because it is based solely on the
21 opinions of two State-agency physicians; (2) the ALJ committed legal error in assigning
22 great weight to the opinion of Dr. Bencomo; (3) the ALJ committed reversible error by
23 rejecting the opinions of Plaintiff’s treating doctors without specific and legitimate
24 reasons; (4) the ALJ committed legal error by failing to address or consider the Arizona
25 Department of Health’s determination that Plaintiff is Seriously Mentally Ill (“SMI”);
26 (5) the ALJ committed legal error by rejecting third-party statements; and (6) the ALJ
27 committed legal error by discounting Plaintiff’s credibility. Doc. 13 at 1-2.

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1 **A. Weighing of Medical Source Evidence.**

2 **1. Legal Standard.**

3 The Ninth Circuit distinguishes between the opinions of treating physicians,
4 examining physicians, and non-examining physicians. *See Lester v. Chater*, 81 F.3d 821,
5 830 (9th Cir. 1995). Generally, an ALJ should give greatest weight to a treating
6 physician’s opinion and more weight to the opinion of an examining physician than to
7 one of a non-examining physician. *See Andrews v. Shalala*, 53 F.3d 1035, 1040-41 (9th
8 Cir. 1995); *see also* 20 C.F.R. § 404.1527(c)(2)-(6) (listing factors to be considered when
9 evaluating opinion evidence, including length of examining or treating relationship,
10 frequency of examination, consistency with the record, and support from objective
11 evidence). If it is not contradicted by another doctor’s opinion, the opinion of a treating
12 or examining physician can be rejected only for “clear and convincing reasons.” *Lester*,
13 81 F.3d at 830 (citing *Embrey v. Bowen*, 849 F.2d 418, 422 (9th Cir. 1988)). A
14 contradicted opinion of a treating or examining physician “can only be rejected for
15 specific and legitimate reasons that are supported by substantial evidence in the record.”
16 *Lester*, 81 F.3d at 830-31 (citing *Andrews*, 53 F.3d at 1043).

17 An ALJ can meet the “specific and legitimate reasons” standard “by setting out a
18 detailed and thorough summary of the facts and conflicting clinical evidence, stating his
19 interpretation thereof, and making findings.” *Cotton v. Bowen*, 799 F.2d 1403, 1408 (9th
20 Cir. 1986). But “[t]he ALJ must do more than offer [her] conclusions. [She] must set
21 forth [her] own interpretations and explain why they, rather than the doctors’, are
22 correct.” *Embrey*, 849 F.2d at 421-22. The Commissioner is responsible for determining
23 whether a claimant meets the statutory definition of disability and does not give
24 significance to a statement by a medical source that the claimant is “disabled” or “unable
25 to work.” 20 C.F.R. § 416.927(d).

26 **2. Dr. Bencomo.**

27 Plaintiff argues that the ALJ erred in her consideration of examining physician Dr.
28 Armando Bencomo and treating physicians Dr. Crowley and Dr. Chaney. Although the

1 ALJ purported to give Dr. Bencomo's opinion great weight, Plaintiff argues that the ALJ
2 effectively rejected limitations assessed by Dr. Bencomo that would have precluded him
3 from doing any work. Doc. 13 at 17. As support, Plaintiff points to the testimony of the
4 vocational expert, Dr. George Bluth, from Plaintiff's first hearing. A.R. 126. The ALJ
5 asked Dr. Bluth to consider a hypothetical individual with the limitations assessed in Dr.
6 Bencomo's opinion (A.R. 584-90) and asked whether such an individual would be
7 capable of performing past relevant work or any other type of work (A.R. 126). Dr.
8 Bluth responded in the negative to both questions. *Id.* The ALJ then asked Dr. Bluth
9 which factors would prevent the hypothetical individual from performing any work. *Id.*
10 Dr. Bluth identified several limiting factors, including that the hypothetical individual
11 "has a number of fair . . . limitations completing a workday and work week without
12 interruptions from symptoms," that "[a]ccepting instruction and getting along with
13 coworkers varies from good to fair," that "[r]esponding . . . to changes in a work setting
14 [is] fair," and that setting realistic goals or making plans independently is also fair.
15 A.R. 126-27. Each of these limitations appears in Dr. Bencomo's report. *See* A.R. 589.
16 Plaintiff argues that by failing to address these, the ALJ has effectively rejected them.

17 The ALJ did not provide any reasons for rejecting any portion of Dr. Bencomo's
18 opinion. She instead purported to give it great weight. In light of the testimony of the
19 vocational expert, however, the limitations identified by Dr. Bencomo were sufficient to
20 show that Plaintiff could not work. The Court concludes that the ALJ effectively rejected
21 Dr. Bencomo's opinion without providing clear and convincing reasons for doing so.
22 This was legal error.

23 **3. Dr. Chaney.**

24 Both Dr. Chaney and Dr. Cowley found that Plaintiff was limited in his ability to:
25 (1) understand and remember detailed instructions; (2) carry out detailed instructions;
26 (3) maintain attention and concentration for extended periods; (4) complete a normal
27 workday and work week without interruption from psychologically-based symptoms;
28 (5) accept instructions and respond appropriately to criticism from supervisors; (6) get

1 along with co-workers or peers without distracting them or exhibiting behavioral
2 extremes; (7) respond appropriately to changes in the work setting; and (8) set realistic
3 goals or make plans independently of others. See A.R. 833-35 (Chaney); 1161-63
4 (Cowley).

5 The ALJ does not explicitly identify any medical opinions that contradict the
6 opinions of Drs. Chaney and Cowley, but does state that she gave “great weight” to the
7 opinions of the state-agency reviewing physicians “based on their consistency with the
8 greater objective medical evidence of record[.]” It is not clear, however, that these
9 opinions actually contradict those of Chaney and Cowley. The opinion of Dr. Ahn, a
10 state agency physician, which was cited by Defendant as supporting the ALJ’s
11 conclusion, actually assesses limitations similar to those assessed by Drs. Chaney and
12 Cowley. See A.R. 607-08 (noting that Plaintiff was “moderately limited” in (1) the
13 ability to carry out detailed instructions, (2) the ability to maintain attention and
14 concentration for extended periods, (3) the ability to complete a normal workweek
15 without interruptions from psychologically-based symptoms, (4) the ability to accept
16 instructions and respond appropriately to criticism from supervisors, and (5) the ability to
17 get along with coworkers or peers without distracting them or exhibiting behavioral
18 extremes). Dr. Ahn found that Plaintiff was “moderately limited” in five of the eight
19 categories in which Drs. Chaney and Cowley also found Plaintiff to be limited.
20 Additionally, the only other state-agency opinion cited by the ALJ as receiving great
21 weight simply states that “the prior decision is affirmed” without identifying the “prior
22 decision.” A.R. 692. Accordingly, the Court cannot conclude that either state-agency
23 medical opinion contradicts the opinions of Drs. Chaney and Cowley. Because the ALJ
24 did not identify any other medical opinion that contradicts the opinions of Drs. Chaney
25 and Cowley, she was required to provide clear and convincing reasons for rejecting them.
26 *Lester*, 81 F.3d at 830.

27 The ALJ stated that she gave Dr. Chaney’s opinion little weight because it was
28 inconsistent with her treatment notes, “which show of generally unremarkable mental

1 status examinations and improved mood.” A.R. 24. The Court was able to locate only
2 one reference in Dr. Chaney’s treatment notes (A.R. 837-870) where the doctor noted that
3 Plaintiff’s mood was improved. *See* A.R. 842. It is unclear what the ALJ meant by
4 “unremarkable mental status examinations,” but a review of Dr. Chaney’s treatment notes
5 (A.R. 837-870) reveals that Plaintiff usually presented with good appearance, normal
6 alertness, good eye contact, either appropriate or blunted affect, unremarkable stream of
7 thought, logical associations, euthymic mood, good concentration, intact memory, and
8 good intelligence, insight, and judgment. A.R. 841-863. Although at first blush these
9 observations appear to contradict Dr. Chaney’s opinion, Dr. Chaney noted in her opinion
10 that Plaintiff was “always clean, well groomed, [and] attends to daily needs.” A.R. 835.
11 Thus, it is evident that Dr. Chaney took Plaintiff’s presentation at appointments into
12 account when assessing his limitations, and the ALJ does not explain how Dr. Chaney’s
13 observations are inconsistent with those limitations. The ALJ also noted that Dr.
14 Chaney’s opinion “is generally not consistent with the evidence of record,” but did not
15 identify any allegedly inconsistent evidence other than Dr. Chaney’s treatment notes.
16 A.R. 24.

17 The ALJ stated that Plaintiff’s “activities of daily living” show that he is “able to
18 perform more than as outlined by Dr. Chaney,” specifically that Plaintiff is able to utilize
19 public transportation, shop outside the home, attend church services, and manage his
20 finances. A.R. 24. This is a valid reason for rejecting portions of Dr. Chaney’s opinion,
21 specifically her conclusion that Plaintiff is uncomfortable around others, but the ALJ
22 does not explain how these activities conflict with Dr. Chaney’s determination that
23 Plaintiff has limited ability to get along with co-workers or peers without distracting them
24 or exhibiting behavioral extremes, to respond appropriately to changes in the work
25 setting, or to understand, remember, and carry out detailed instructions. Because the ALJ
26 failed to identify objective medical evidence that contradicted Dr. Chaney’s opinion, and
27 failed to support her assertions that Dr. Chaney’s opinion conflicted with the treatment
28 notes and Plaintiff’s daily activities, the Court concludes that the ALJ failed to identify

1 clear and convincing reasons for rejecting Dr. Chaney’s opinion. This too was legal
2 error.

3 **B. Remand.**

4 The Court need proceed no further. Having concluded that the ALJ committed
5 legal error in rejecting the opinions of Drs. Bencomo and Chaney, the Court must vacate
6 Defendant’s decision.¹

7 The Court has the discretion to remand the case for further development of the
8 record or for an award benefits. *See Reddick*, 157 F.3d at 728. In *Smolen v. Chater*, the
9 Ninth Circuit held that evidence should be credited as true and an action remanded for an
10 immediate award of benefits when the following three factors are satisfied: (1) the ALJ
11 has failed to provide legally sufficient reasons for rejecting evidence, (2) there are no
12 outstanding issues that must be resolved before a determination of disability can be made,
13 and (3) it is clear from the record that the ALJ would be required to find the claimant
14 disabled were such evidence credited as true. 80 F.3d 1273, 1292 (9th Cir. 1996); *see*
15 *Varney v. Sec. of Health & Human Servs.*, 859 F.2d 1396, 1400 (9th Cir. 1988) (“In cases
16 where there are no outstanding issues that must be resolved before a proper determination
17 can be made, and where it is clear from the record that the ALJ would be required to
18 award benefits if the claimant’s excess pain testimony were credited, we will not remand
19 solely to allow the ALJ to make specific findings regarding that testimony.”); *Swenson v.*
20 *Sullivan*, 876 F.2d 683, 689 (9th Cir. 1989) (same); *Rodriguez v. Bowen*, 876 F.2d 759,
21 763 (9th Cir. 1989) (“In a recent case where the ALJ failed to provide clear and
22 convincing reasons for discounting the opinion of claimant’s treating physician, we
23 accepted the physician’s uncontradicted testimony as true and awarded benefits.”) (citing
24 *Winans v. Bowen*, 853 F.2d 643, 647 (9th Cir. 1988)); *Hammock v. Bowen*, 879 F.2d 498,
25 503 (9th Cir. 1989) (extending *Varney*’s “credit as true” rule to a case with outstanding

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27 ¹ The Court considered whether the ALJ’s rejection of the Bencomo and Chaney
28 opinions could be harmless error in light of the reasons she provided for rejecting the
Cowley opinion, but found the Cowley rejection to be problematic as well. Moreover,
the reasons given by the ALJ for rejecting the Cowley opinion are not readily transferable
to the opinions of Drs. Bencomo and Chaney, precluding a harmless error finding.

1 issues where the claimant already had experienced a long delay and a treating doctor
2 supported the claimant's testimony).

3 Defendant argues that it would be contrary to the Act to remand for an award of
4 benefits. Doc. 26 at 18. Defendant cites *Strauss v. Commissioner of the Social Security*
5 *Administration*, 635 F.3d 1135, 1138 (9th Cir. 2011), for the proposition that “[a]
6 claimant is not entitled to benefits under the Act unless the claimant is, in fact, ‘disabled’
7 as defined by the statute.” Doc. 14 at 19. Defendant argues that “[t]he court may not
8 move from the conclusion that the ALJ erred directly to an order requiring payment of
9 benefits without the intermediate step of analyzing whether the claimant was, in fact,
10 disabled.” *Id.* (citing *Strauss*, 635 F.3d at 1138). Defendant further argues that “[w]here,
11 as here, there is, at best, conflicting evidence as to whether the statutory standard for
12 disability has been met, the Court should remand for further proceedings.” *Id.* at 20.

13 The Court has found that the ALJ failed to provide legally sufficient reasons for
14 rejecting the opinions of Drs. Bencomo and Chaney, an examining and a treating
15 physician. During the first hearing, the vocational expert was asked a hypothetical based
16 on Dr. Chaney's opinion (Exhibit 23F). A.R. 128-30. The vocational expert noted that,
17 with the limitations assessed in Dr. Chaney's opinion, there would be no work for
18 Plaintiff. A.R. 129. As discussed above, the vocational expert also testified that there
19 would be no work for Plaintiff based on the similar limitations assessed by Dr. Bencomo.
20 A.R. 126-27. The procedural error the Court finds in this case is precisely the type of
21 error that requires a remand for an award of benefits under the Ninth Circuit's decision in
22 *Strauss*: one in which the ALJ erred in discrediting evidence and, absent any outstanding
23 issues to be resolved, “it is clear from the record that the ALJ would be required to find
24 the claimant disabled were such evidence credited.” *Strauss*, 635 F.3d at 1138 (quoting
25 *Benecke v. Barnhart*, 379 F.3d 587, 593 (9th Cir. 2004)).

26 Moreover, the overwhelming authority in this Circuit makes clear that the “credit
27 as true” doctrine is mandatory. *See Lester*, 81 F.3d at 834; *Smolen*, 80 F.3d at 1292;
28 *Reddick*, 157 F.3d at 729; *Harman v. Apfel*, 211 F.3d 1172, 1178 (9th Cir. 2000); *Moore*

1 v. *Comm'r of Soc. Sec.*, 278 F.3d 920, 926 (9th Cir. 2002); *McCartey v. Massanari*, 298
2 F.3d 1072, 1076-77 (9th Cir. 2002); *Moisa v. Barnhart*, 367 F.3d 882, 887 (9th Cir.
3 2004); *Benecke*, 379 F.3d at 593-95; *Orn v. Astrue*, 495 F.3d 625, 640 (9th Cir. 2007);
4 *Lingenfelter v. Astrue*, 504 F.3d. at 1041 (“[W]e will not remand for further proceedings
5 where, taking the claimant’s testimony as true, the ALJ would clearly be required to
6 award benefits[.]”).²

7 Applying these cases, the Court concludes that the improperly rejected opinions of
8 Drs. Chaney and Bencomo must be credited as true and, when credited as true and
9 combined with the vocational expert’s opinion, require an award of benefits.

10 **IT IS ORDERED:**

- 11 1. This case is **remanded** for an award of benefits.
- 12 2. The Clerk is directed to enter judgment and **terminate** this action.

13 Dated this 6th day of June, 2014.

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18 David G. Campbell
19 United States District Judge
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² This Court disagrees with the Ninth Circuit’s credit as true doctrine, but is bound to follow Ninth Circuit precedent.