1 2 3 4 5 6 7 8 UNITED STATES DISTRICT COURT 9 CENTRAL DISTRICT OF CALIFORNIA 10 IRMA O. L., NO. CV 19-3115-E 11 12 Plaintiff, MEMORANDUM OPINION 13 v. ANDREW SAUL, Commissioner of 14 AND ORDER OF REMAND Social Security, 15 Defendant. 16 17 Pursuant to sentence four of 42 U.S.C. section 405(g), IT IS 18 19 HEREBY ORDERED that this matter is remanded for further administrative 20 action consistent with this Opinion. 21 **PROCEEDINGS** 22 23 Plaintiff filed a complaint on April 22, 2019, seeking review of 24 the Commissioner's denial of benefits. The parties consented to 25 proceed before a United States Magistrate Judge on May 28, 2019. 26 27 The parties filed a Joint Stipulation on February 20, 2020. Following the retirement of Magistrate Judge Mumm, the case was transferred to 28

Magistrate Judge Eick on April 29, 2020. The Court has taken the matter under submission without oral argument. <u>See</u> L.R. 7-15; "Case Management Order," filed April 29, 2019.

BACKGROUND

Plaintiff, a former cafeteria helper, alleges disability based primarily on orthopedic impairments (Administrative Record ("A.R.") 74, 86-87, 90-96, 237, 244, 285, 298-300). Plaintiff claims to suffer from knee and back pain of disabling severity despite pain management treatment that has included narcotic pain medication (Tramadol) and pain injections (A.R. 26, 74, 86-87, 90-96, 266, 298-300, 634, 643, 724, 725, 753, 770, 788, 1042-50, 1062, 1088-94).

The Administrative Law Judge ("ALJ") found Plaintiff has several "severe" orthopedic impairments, including left knee osteoarthritis and degenerative disc disease of the spine (A.R. 22). However, the ALJ discounted the claimed severity of Plaintiff's pain and functional limitations in deeming Plaintiff not disabled (A.R. 22-27). The Appeals Council denied review (A.R. 1-3).

STANDARD OF REVIEW

Under 42 U.S.C. section 405(g), this Court reviews the Administration's decision to determine if: (1) the Administration's findings are supported by substantial evidence; and (2) the Administration used correct legal standards. See Carmickle v. Commissioner, 533 F.3d 1155, 1159 (9th Cir. 2008); Hoopai v. Astrue,

499 F.3d 1071, 1074 (9th Cir. 2007); see also Brewes v. Commissioner, 682 F.3d 1157, 1161 (9th Cir. 2012). Substantial evidence is "such relevant evidence as a reasonable mind might accept as adequate to support a conclusion." Richardson v. Perales, 402 U.S. 389, 401 (1971) (citation and quotations omitted); see also Widmark v. Barnhart, 454 F.3d 1063, 1066 (9th Cir. 2006).

If the evidence can support either outcome, the court may not substitute its judgment for that of the ALJ. But the Commissioner's decision cannot be affirmed simply by isolating a specific quantum of supporting evidence.

Rather, a court must consider the record as a whole, weighing both evidence that supports and evidence that detracts from the [administrative] conclusion.

Tackett v. Apfel, 180 F.3d 1094, 1098 (9th Cir. 1999) (citations and quotations omitted).

DISCUSSION

After consideration of the record as a whole, the Court reverses the Administration's decision in part and remands the matter for further administrative proceedings.

Where, as here, an ALJ finds that a claimant's medically determinable impairments reasonably could be expected to cause some degree of the alleged symptoms of which the claimant subjectively complains, any discounting of the claimant's complaints must be

supported by "specific, cogent" findings. See Berry v. Astrue, 622 F.3d 1228, 1234 (9th Cir. 2010); Lester v. Chater, 81 F.3d 821, 834 (9th Cir. 1995); but see Smolen v. Chater, 80 F.3d 1273, 1282-84 (9th Cir. 1996) (indicating that ALJ must state "specific, clear and convincing" reasons to reject a claimant's testimony where there is no evidence of malingering). Generalized, conclusory findings do not suffice. See Moisa v. Barnhart, 367 F.3d 882, 885 (9th Cir. 2004) (the ALJ's credibility findings "must be sufficiently specific to allow a reviewing court to conclude the ALJ rejected the claimant's testimony on permissible grounds and did not arbitrarily discredit the claimant's testimony") (internal citations and quotations omitted); Holohan v. Massanari, 246 F.3d 1195, 1208 (9th Cir. 2001) (the ALJ must "specifically identify the testimony [the ALJ] finds not to be credible and must explain what evidence undermines the testimony"); Smolen v. Chater, 80 F.3d at 1284 ("The ALJ must state specifically which symptom testimony is not credible and what facts in the record lead to that conclusion."); see also Social Security Ruling ("SSR") 96-7p (explaining how to assess a claimant's credibility), superseded, ///

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In the absence of an ALJ's reliance on evidence of "malingering," most recent Ninth Circuit cases have applied the "clear and convincing" standard. See, e.g., Leon v. Berryhill, 880 F.3d 1041, 1046 (9th Cir. 2017); Brown-Hunter v. Colvin, 806 F.3d 487, 488-89 (9th Cir. 2015); Burrell v. Colvin, 775 F.3d 1133, 1136-37 (9th Cir. 2014); Treichler v. Commissioner, 775 F.3d 1090, 1102 (9th Cir. 2014); Ghanim v. Colvin, 763 F.3d 1154, 1163 n.9 (9th Cir. 2014); Garrison v. Colvin, 759 F.3d 995, 1014-15 & n.18 (9th Cir. 2014); see also Ballard v. Apfel, 2000 WL 1899797, at *2 n.1 (C.D. Cal. Dec. 19, 2000) (collecting earlier cases). In the present case, the ALJ's findings are insufficient under either standard, so the distinction between the two standards (if any) is academic.

SSR 16-3p (eff. March 28, 2016).²

In the present case, the ALJ stated only two specific reasons for discounting Plaintiff's subjective complaints of pain and functional limitations: (1) the objective medical evidence ("there does not appear to be sufficient clinical signs and laboratory findings to objectively support those subjective limitations"; and (2) the assertedly "conservative" nature of the treatment Plaintiff has received for her pain ("the claimant's seeming acceptance of only conservative treatment after June 2014 [when Plaintiff underwent knee surgery], serves to undermine the extent and persistence of her subjective pain symptoms and limitations as alleged") (A.R. 27). As demonstrated below, these stated reasons are legally insufficient under the circumstances of this case.

With regard to the first stated reason, inconsistencies between a claimant's subjective complaints and the objective medical evidence can be a factor in discounting a claimant's subjective complaints, but cannot "form the sole basis." See Burch v. Barnhart, 400 F.3d 676, 681 (9th Cir. 2005); Rollins v. Massanari, 261 F.3d 853, 857 (9th Cir. 2001). Therefore, the validity of the ALJ's discounting of Plaintiff's complaints stands or falls with the second stated reason,

SSRs are binding on the Administration. See Terry v. Sullivan, 903 F.2d 1273, 1275 n.1 (9th Cir. 1990). The appropriate analysis under the superseding SSR is substantially the same as the analysis under the superseded SSR. See R.P. v. Colvin, 2016 WL 7042259, at *9 n.7 (E.D. Cal. Dec. 5, 2016) (stating that SSR 16-3p "implemented a change in diction rather than substance") (citations omitted); see also Trevizo v. Berryhill, 871 F.3d 664, 678 n.5 (9th Cir. 2017) (suggesting that SSR 16-3p "makes clear what our precedent already required").

the assertedly "conservative" nature of the treatment Plaintiff has received.

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A limited course of treatment sometimes can justify the discounting of a claimant's subjective complaints, at least where the complaints concern physical problems. See, e.g., Burch v. Barnhart, 400 F.3d at 681 (lack of consistent treatment, such as where there was a three to four month gap in treatment, properly considered in discrediting claimant's back pain testimony); Meanel v. Apfel, 172 F.3d 1111, 1114 (9th Cir. 1999) (in assessing the credibility of a claimant's pain testimony, the Administration properly may consider the claimant's failure to request treatment and failure to follow treatment advice) (citing Bunnell v. Sullivan, 947 F.2d 341, 346 (9th Cir. 1991) (en banc)); Matthews v. Shalala, 10 F.3d 678, 679-80 (9th Cir. 1993) (permissible credibility factors in assessing pain testimony include limited treatment and minimal use of medications); see also Johnson v. Shalala, 60 F.3d 1428, 1434 (9th Cir. 1995) (absence of treatment for back pain during half of the alleged disability period, and evidence of only "conservative treatment" when the claimant finally sought treatment, sufficient to discount claimant's testimony).

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In the present case, however, it is doubtful Plaintiff's treatment with narcotic pain medication and pain injections over an extended period of time properly may be characterized as "conservative" within the meaning of Ninth Circuit jurisprudence.

See, e.g., Garrison v. Colvin, 759 F.3d 995, 1015 n.20 (9th Cir. 2014)

("we doubt that epidural steroid shots to the neck and lower back

qualify as "conservative' medical treatment"); Shepard v. Colvin, 2015 WL 9490094, at *7 (E.D. Cal. Dec. 30, 2015) ("[p]rior cases in the Ninth Circuit have found that treatment was conservative when the claimant's pain was adequately treated with over-the-counter medication and other minimal treatment," however where record reflected heavy reliance on Tramadol and Oxycodone and other prescriptions for pain, record did not support finding that treatment was "conservative") (internal citations omitted; citing for comparison Lapeirre-Gutt v. Astrue, 382 Fed. App'x. 662, 664 (9th Cir. 2010) (doubting whether "copious amounts of narcotic pain medication" as well as nerve blocks and trigger point injections constituted "conservative" treatment)); Aguilar v. Colvin, 2014 WL 3557308, at *8 (C.D. Cal. July 18, 2014) ("It would be difficult to fault Plaintiff for overly conservative treatment when he has been prescribed strong narcotic pain medications"); Christie v. Astrue, 2011 WL 4368189, at *4 (C.D. Cal. Sept. 16, 2011) (refusing to characterize as "conservative" treatment that included narcotic pain medication and epidural injections); Eicholtz v. Astrue, 2008 WL 4642976, at *3 (C.D. Cal. Oct. 20, 2008) (court acknowledged the precept that "[a]n ALJ may discount a claimant's testimony based on conservative treatment," but appeared to deem this precept inapplicable because the claimant took Tramadol).

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Furthermore, the ALJ appears to have inferred that, if Plaintiff's pain truly were as intense as she claims, she would have received more aggressive treatment (such as surgery) and that such treatment would have been effective in reducing pain and restoring function. The ALJ was not competent to make the medical judgments

underlying these apparent inferences. <u>See Balsamo v. Chater</u>, 142 F.3d 75, 81 (2d Cir. 1998); <u>see also Rohan v. Chater</u>, 98 F.3d 966, 970 (7th Cir. 1996) ("ALJs must not succumb to the temptation to play doctor and make their own independent medical findings"); <u>Day v. Weinberger</u>, 522 F.2d 1154, 1156 (9th Cir. 1975) (an ALJ is forbidden from making his or her own medical assessment beyond that demonstrated by the record). No substantial evidence supports the ALJ's lay inferences on these medical matters. To the contrary, Plaintiff's pain management specialist reportedly believes that surgery would not help Plaintiff (A.R. 87-88).

The Court is unable to conclude that the ALJ's failure to state legally sufficient reasons for discounting Plaintiff's subjective complaints was harmless. See Molina v. Astrue, 674 F.3d 1104, 1115 (9th Cir. 2012) (an error "is harmless where it is inconsequential to the ultimate non-disability determination") (citations and quotations omitted); McLeod v. Astrue, 640 F.3d 881, 887 (9th Cir. 2011) (error not harmless where "the reviewing court can determine from the 'circumstances of the case' that further administrative review is needed to determine whether there was prejudice from the error").

Contrary to Plaintiff's argument, a remand for further administrative proceedings, rather than an order for the immediate calculation of benefits, is the appropriate remedy in this case. See McLeod v. Astrue, 640 F.3d at 888; see also INS v. Ventura, 537 U.S. 12, 16 (2002) (upon reversal of an administrative determination, the proper course is remand for additional agency investigation or explanation, except in rare circumstances); Leon v. Berryhill, 880

F.3d 1041, 1044 (9th Cir. 2017) (reversal with a directive for the immediate calculation of benefits is a "rare and prophylactic exception to the well-established ordinary remand rule"); Dominguez v. Colvin, 808 F.3d 403, 407 (9th Cir. 2015) ("Unless the district court concludes that further administrative proceedings would serve no useful purpose, it may not remand with a direction to provide benefits"); Treichler v. Commissioner, 775 F.3d 1090, 1101 n.5 (9th Cir. 2014) (remand for further administrative proceedings is the proper remedy "in all but the rarest cases"); Harman v. Apfel, 211 F.3d 1172, 1180-81 (9th Cir.), cert. denied, 531 U.S. 1038 (2000) (remand for further proceedings rather than for the immediate payment of benefits is appropriate where there are "sufficient unanswered questions in the record"); Connett v. Barnhart, 340 F.3d 871, 876 (9th Cir. 2003) ("Connett") (remand is an option where the ALJ fails to state sufficient reasons for rejecting a claimant's excess symptom testimony); but see Orn v. Astrue, 495 F.3d 625, 640 (9th Cir. 2007) (citing Connett for the proposition that "[w]hen an ALJ's reasons for rejecting the claimant's testimony are legally insufficient and it is clear from the record that the ALJ would be required to determine the claimant disabled if he had credited the claimant's testimony, we remand for a calculation of benefits") (quotations omitted); see also Brown-Hunter v. Colvin, 806 F.3d 487, 495-96 (9th Cir. 2015) (discussing the narrow circumstances in which a court will order a benefits calculation rather than further proceedings); Ghanim v. Colvin, 763 F.3d 1154, 1166 (9th Cir. 2014) (remanding for further proceedings where the ALJ failed to state sufficient reasons for deeming a claimant's testimony not credible); Vasquez v. Astrue, 572 F.3d 586, 600-01 (9th Cir. 2009) (a court need not "credit as true"

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improperly rejected claimant testimony where there are outstanding issues that must be resolved before a proper disability determination can be made). There remain significant unanswered questions in the present record. Furthermore, an order for the immediate calculation of benefits is improper where, as here, "evaluation of the record as a whole creates serious doubt that a claimant is, in fact, disabled." Garrison v. Colvin, 759 F.3d at 1021. CONCLUSION For all of the foregoing reasons, this matter is remanded for further administrative action consistent with this Opinion. LET JUDGMENT BE ENTERED ACCORDINGLY. DATED: May 6, 2020. CHARLES F. EICK UNITED STATES MAGISTRATE JUDGE