IN THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF NEW YORK

GARY L. W.,

Plaintiff,

٧.

Civil Action No. 6:17-CV-1183 (DEP)

COMMISSIONER OF SOCIAL SECURITY,

Defendant.

<u>APPEARANCES</u>: <u>OF COUNSEL</u>:

FOR PLAINTIFF:

DOLSON LAW OFFICE 124 North Salina Street Suite 3B Syracuse, NY 13202 STEVEN R. DOLSON, ESQ. GREGORY P. FAIR, ESQ.

FOR DEFENDANT:

HON. GRANT C. JAQUITH
U.S. Attorney for the
Northern District of New York
P.O. Box 7198
100 S. Clinton Street
Syracuse, NY 13261-7198

LUCY WEILBRENNER, ESQ. LORIE E. LUPKIN, ESQ. Special Assistant U.S. Attorneys

DAVID E. PEEBLES CHIEF U.S. MAGISTRATE JUDGE

ORDER

Currently pending before the court in this action, in which plaintiff seeks judicial review of an adverse administrative determination by the Acting Commissioner, pursuant to 42 U.S.C. § 405(g), are cross-motions for judgment on the pleadings. Oral argument was conducted in connection with those motions on September 11, 2018, during a telephone conference held on the record. At the close of argument, I issued a bench decision in which, after applying the requisite deferential review standard, I found that the Acting Commissioner's determination did not result from the application of proper legal principles and is not supported by substantial evidence, providing further detail regarding my reasoning and addressing the specific issues raised by the plaintiff in this appeal.

After due deliberation, and based upon the court's oral bench decision, a transcript of which is attached and incorporated herein by reference, it is hereby

ORDERED, as follows:

(1) Plaintiff's motion for judgment on the pleadings is GRANTED.

This matter, which is before me on consent of the parties pursuant to 28 U.S.C. § 636(c), has been treated in accordance with the procedures set forth in General Order No. 18. Under that General Order once issue has been joined, an action such as this is considered procedurally, as if cross-motions for judgment on the pleadings had been filed pursuant to Rule 12(c) of the Federal Rules of Civil Procedure.

(2) The Acting Commissioner's determination that plaintiff was not

disabled at the relevant times, and thus is not entitled to benefits under the

Social Security Act, is VACATED.

(3) The matter is hereby REMANDED to the Acting Commissioner,

without a directed finding of disability, for further proceedings consistent with

this determination.

(4) The clerk is respectfully directed to enter judgment, based upon

this determination, remanding the matter to the Acting Commissioner

pursuant to sentence four of 42 U.S.C. § 405(g) and closing this case.

David E. Peebles

U.S. Magistrate Judge

Dated:

September 12, 2018

Syracuse, NY

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF NEW YORK

____X

GARY L. W.,

Plaintiff,

VS.

6:17-CV-1183

COMMISSIONER OF SOCIAL SECURITY,

Defendant.

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Transcript of a **Decision** held during a

Telephone Conference on September 11, 2018, at the

James Hanley Federal Building, 100 South Clinton

Street, Syracuse, New York, the HONORABLE DAVID E.

PEEBLES, United States Magistrate Judge, Presiding.

APPEARANCES

(By Telephone)

For Plaintiff:

LAW OFFICES OF STEVEN R. DOLSON Attorneys at Law 126 N. Salina Street, Suite 3B Syracuse, New York 13202 BY: GREGORY P. FAIR, ESQ.

For Defendant:

SOCIAL SECURITY ADMINISTRATION 625 JFK Building 15 New Sudbury Street Boston, Massachusetts 02203 BY: LUCY WEILBRENNER, ESQ.

Jodi L. Hibbard, RPR, CSR, CRR
Official United States Court Reporter
100 South Clinton Street
Syracuse, New York 13261-7367
(315) 234-8547

1 (In Chambers, Counsel present by telephone.)

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THE COURT: So I have before me a request for judicial review of an adverse determination by the Acting Commissioner pursuant to 42 United States Code Section 405(g).

The background is as follows: The plaintiff was born in September of 1962 and is currently 56 years of age. He was 53 years old at the time of the administrative hearing in this matter, and 51 at the time of his alleged disability onset. Plaintiff lives with his wife in Ava, New York. He is 5 foot 10 inches in height and weighs 297 pounds and has been diagnosed as suffering from obesity. Plaintiff completed the 11th grade but -- and has not achieved a GED. He has a driver's license and drives. Plaintiff has worked as a mechanic since the 1980s in a very physical capacity, often lifting up to 150 pounds.

In terms of health, plaintiff's primary complaint is fatigue, he has heart issues. In November of 2009, he suffered a myocardial infarction and underwent a stent and catheterization — a stent, and he underwent catheterization later in August of 2013 when he was hospitalized with chest pain. He was hospitalized again in October of 2015 with chest pain, that's 10F. The August 2013 is reported at 11F. Plaintiff suffers from sleep apnea and has been prescribed a CPAP machine, although he testified he does not regularly use

it. Plaintiff also suffers from Meniere's disease, he was diagnosed in 2013. It causes intermittent dizzy spells but he has not suffered any hearing loss.

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Plaintiff was treating with the Boonville Family
Care practice but switched to Slocum-Dickson in October 2015
where he is now treated by Dr. George Tomy.

In terms of medication, plaintiff has been prescribed Toprol for the heart, Simvastatin for cholesterol, Prilosec for his stomach, aspirin — baby aspirin, and atorvastatin which is also for cholesterol. For his heart he's also been in the past prescribed metoprolol and has nitrogen pills which he uses as needed.

Plaintiff cooks. The record is somewhat unclear as to whether he cleans. In 4F he reported that he does; at the hearing he stated he does not. He does laundry, shops, takes care of daily hygiene, watches television, and uses the computer.

The plaintiff applied for Title II Disability
Insurance benefits on March 19, 2014. He also protectively
filed under Title XVI for Supplemental Security Income
payments. He alleged an onset date of January 1, 2013. That
onset date was later amended to March 19, 2014.

The hearing was conducted by Administrative Law Judge Barry Ryan on April 28, 2016. The administrative law judge issued a decision subsequently on June 16, 2016 that

was unfavorable to the plaintiff. The Social Security

Administration Appeals Council denied plaintiff's request for review on August 31, 2017, making the administrative law judge's opinion a final determination of the agency.

In his decision, ALJ Ryan applied the familiar five-step sequential test for determining disability.

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At step one he concluded that plaintiff had not engaged in substantial gainful activity since the amended onset date of March 19, 2014. He did note that plaintiff's last date of insured status was December 31, 2017.

At step two, the administrative law judge concluded that plaintiff suffers from severe impairments within the meaning of the regulations, including coronary artery disease status post myocardial infarction, obesity, and sleep apnea. He rejected the other claimed impairments, including Meniere's disease, as not significantly limiting plaintiff's ability to perform work functions.

At step three, plaintiff, according to the ALJ, did not — his condition did not meet or medically equal any of the listed presumptively disabling conditions set forth in the regulations, specifically looking at Listing 3.10 relating to sleep apnea, 4.04 relating to ischemic heart disease. He then concluded, after reviewing the evidence in the record, that plaintiff retains the residual functional capacity to perform a full range of light work as defined in

the regulations. As you know, that includes lifting no more than 20 pounds at a time with frequent lifting or carrying of objects weighing up to 10 pounds. It requires a good deal of walking or standing, and when it involves sitting, most of the time with some pushing and pulling of arm or leg controls. The ALJ then concluded that plaintiff was unable to perform his past relevant work based upon the exertional requirement associated with it.

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At step five, applying the Medical Vocational Guidelines or Grids, and specifically Rule 202.11, he concluded that plaintiff was not disabled at the relevant times, and therefore ineligible for the benefits requested.

As you know, my task is limited, I apply an extremely deferential standard of review and determine whether correct medical -- legal, I'm sorry, principles were applied and the determination is supported by substantial evidence.

The primary argument here relates to the administrative law judge's analysis of plaintiff's reported symptomology, which includes weakness, fatigue, and dizziness. 20 CFR Section 404.1529 and SSR 16-03p prescribe a two-step process for determining credibility.

Administrative Law Judge Ryan correctly cited at page 22 of the administrative transcript the test. The problem here is determining whether he found at step one that the conditions

that he found under the modest step two test were severe, rose to a level that could reasonably be expected to produce the reported symptomology, or instead, he went to step two and concluded, after analyzing the intensity, persistence, and limiting effects of the symptomology that plaintiff's reports were not fully credible.

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In my view, I could guess at what the analysis was but it would simply be a guess, and I don't think that that's what the law intended.

I agree with plaintiff's counsel that this case looks to fall within the four corners of *Meadors v. Astrue*, 370 Fed.Appx. 179 from the Second Circuit, 2010; and also *Martone v. Apfel*, 70 F.Supp.2d 145, a 1999 decision from this court, specifically Judge Hurd.

In my view, Judge Ryan, who is a seasoned administrative law judge, I have a great deal of respect for him, simply didn't go through the steps required to make the analysis under SSR 16-03p such that it would permit a meaningful review by the court. So it's not at all clear to me that this plaintiff can carry his burden of demonstrating limiting conditions that would rise to a level to support a finding of disability, but I have no choice but to grant judgment on the pleadings to the plaintiff and remand the matter, without a directed finding, for a better analysis of the plaintiff's symptoms.

1	Thank you both for excellent presentations, and
2	hope you have a good afternoon.
3	MR. FAIR: Thanks, Judge, you, too.
4	MS. WEILBRENNER: You too, thank you.
5	(Proceedings Adjourned, 10:22 a.m.)
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1	CERTIFICATE OF OFFICIAL REPORTER
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4	I, JODI L. HIBBARD, RPR, CRR, CSR, Federal
5	Official Realtime Court Reporter, in and for the
6	United States District Court for the Northern
7	District of New York, DO HEREBY CERTIFY that
8	pursuant to Section 753, Title 28, United States
9	Code, that the foregoing is a true and correct
10	transcript of the stenographically reported
11	proceedings held in the above-entitled matter and
12	that the transcript page format is in conformance
13	with the regulations of the Judicial Conference of
14	the United States.
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16	Dated this 11th day of September, 2018.
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19	/S/ JODI L. HIBBARD
20	JODI L. HIBBARD, RPR, CRR, CSR
21	Official U.S. Court Reporter
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