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FILED IN THE  
U.S. DISTRICT COURT  
EASTERN DISTRICT OF WASHINGTON

Sep 28, 2018

SEAN F. MCAVOY, CLERK

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF WASHINGTON

CRYSTAL F.,

Plaintiff,

v.

COMMISSIONER OF SOCIAL  
SECURITY,

Defendant.

No. 2:17-CV-00174-JTR

ORDER GRANTING IN PART  
PLAINTIFF’S MOTION FOR  
SUMMARY JUDGMENT AND  
REMANDING FOR FURTHER  
PROCEEDINGS

**MOTION GRANTED in part  
(ECF No. 14)**

**MOTION DENIED  
(ECF No. 15)**

Before the Court are cross-motions for summary judgment. ECF Nos. 14, 15. Plaintiff, Crystal F., is represented by counsel Dana Chris Madsen. Defendant, the Commissioner of Social Security, is represented by counsel David J. Burdett. The parties have consented to proceed before a magistrate judge. ECF No. 6. After reviewing the administrative record and the briefs submitted by both parties, the Court GRANTS in part Plaintiff’s Motion for Summary Judgment, ECF No. 14, DENIES Defendant’s Motion for Summary Judgment, ECF No. 15, and REMANDS for further proceedings consistent with this opinion.

1 **JURISDICTION**

2 Plaintiff protectively filed an application for Disability Insurance Benefits  
3 (DIB) and Supplemental Security Income (SSI) on May 13, 2013, alleging  
4 disability beginning December 23, 2012. Tr. 210-211, 212-217. The applications  
5 were denied, both initially, and upon reconsideration. Tr. 159-162, 165-169.  
6 Administrative Law Judge (ALJ) Marie Palachuk held a hearing on January 21,  
7 2016, and heard testimony from Plaintiff, vocational expert, Daniel R. McKinney,  
8 Sr., and medical expert, Nancy Winfrey, Ph.D. Tr. 64-99. The ALJ issued an  
9 unfavorable decision on February 10, 2016. Tr. 37-57. The Appeals Council  
10 denied Plaintiff's request for review of this decision on April 7, 2017. Tr. 1-7.  
11 The ALJ's decision became the final decision of the Commissioner, which is  
12 appealable to the district court pursuant to 42 U.S.C. § 405(g). Plaintiff filed this  
13 action for judicial review on May 23, 2017. ECF Nos. 1, 4.

14 **STATEMENT OF FACTS**

15 The facts of the case are set forth in the administrative hearing transcript, the  
16 ALJ's decision, and the briefs of the parties. They are only briefly summarized  
17 here.

18 Plaintiff was 27 years old at the alleged onset date. Tr. 210, 212. Plaintiff  
19 graduated from Medical Lake High School in 2004, attending special education  
20 classes since she was in kindergarten. Tr. 240, 81. Plaintiff's reported work  
21 history includes her employment as a courtesy clerk and a grocery bagger. Tr. 227.  
22 Plaintiff testified she also worked as a garment sorter. Tr. 94-98. Plaintiff stated  
23 she stopped working on December 23, 2012 due to her conditions. Tr. 240.

24 **STANDARD OF REVIEW**

25 The ALJ is responsible for determining credibility, resolving conflicts in  
26 medical testimony, and resolving ambiguities. *Andrews v. Shalala*, 53 F.3d 1035,  
27 1039 (9th Cir. 1995). The Court reviews the ALJ's determinations of law de novo,  
28 deferring to a reasonable interpretation of the statutes. *McNatt v. Apfel*, 201 F.3d

1 1084, 1087 (9th Cir. 2000). The decision of the ALJ may be reversed only if it is  
2 not supported by substantial evidence or if it is based on legal error. *Tackett v.*  
3 *Apfel*, 180 F.3d 1094, 1097 (9th Cir. 1999).

4 Substantial evidence is defined as being more than a mere scintilla, but less  
5 than a preponderance. *Id.* at 1098. Put another way, substantial evidence is such  
6 relevant evidence as a reasonable mind might accept as adequate to support a  
7 conclusion. *Richardson v. Perales*, 402 U.S. 389, 401 (1971). If the evidence is  
8 susceptible to more than one rational interpretation, the Court may not substitute its  
9 judgment for that of the ALJ. *Tackett*, 180 F.3d at 1091.

10 If substantial evidence supports the administrative findings, or if conflicting  
11 evidence supports a finding of either disability or non-disability, the ALJ's  
12 determination is conclusive. *Sprague v. Bown*, 812 F.2d 1226, 1229-1230 (9th Cir.  
13 1987). Nevertheless, a decision supported by substantial evidence will be set aside  
14 if the proper legal standards were not applied in weighing the evidence and making  
15 the decision. *Brawner v. Secretary of Health and Human Services*, 839 F.2d 432,  
16 433 (9th Cir. 1988).

### 17 SEQUENTIAL EVALUATION PROCESS

18 The Commissioner has established a five-step sequential evaluation process  
19 for determining whether a person is disabled. 20 C.F.R. §§ 404.1520(a);  
20 416.920(a); *see Bowen v. Yuckert*, 482 U.S. 137, 140-42 (1987). In steps one  
21 through four, the burden of proof rests upon the claimant to establish a prima facie  
22 case of entitlement to disability benefits. *Tackett*, 180 F.3d at 1098-99. This  
23 burden is met once the claimant establishes that physical or mental impairments  
24 prevent her from engaging in her previous occupations. 20 C.F. R. §§  
25 404.1520(a)(4); 416.920(a)(4). If the claimant cannot do her past relevant work,  
26 the ALJ proceeds to step five, and the burden shifts to the Commissioner to show  
27 that (1) the claimant can make an adjustment to other work, and (2) specific jobs  
28 which the claimant can perform exist in the national economy. *Baston v. Comm'r*

1 *of Soc. Sec. Admin*, 359 F.3d 1190, 1193-94 (9th Cir. 2004). If the claimant cannot  
2 make an adjustment to other work in the national economy, a finding of “disabled”  
3 is made. 20 C.F.R. §§ 404.1520(a)(4)(v); 416.920(a)(4)(v).

#### 4 **ADMINISTRATIVE DECISION**

5 On February 10, 2016, the ALJ issued a decision finding Plaintiff was not  
6 disabled under the Social Security Act. Tr. 37-57.

7 At step one, the ALJ found that Plaintiff had not engaged in substantial  
8 gainful activity since December 23, 2012. Tr. 42.

9 At step two, the ALJ determined Plaintiff had the following severe  
10 impairments: learning disorders; attention deficit hyperactive disorder (ADHD);  
11 depression; anxiety; and alcohol dependence. Tr. 43.

12 At step three, the ALJ found Plaintiff did not have an impairment or  
13 combination of impairments that met or medically equaled the severity of one of  
14 the listed impairments. Tr. 49-50.

15 At step four, the ALJ assessed Plaintiff’s residual function capacity  
16 (RFC) as follows:

17 The . . . capacity to perform a full range of work at all exertional levels  
18 but with the following nonexertional limitations: She is able to  
19 understand, remember, and carry out simple, routine, and repetitive  
20 tasks. She is able to maintain attention and concentration on simple,  
21 routine, and repetitive tasks for two-hour intervals between regularly  
22 scheduled breaks. There should be no judgment or decision making and  
23 no production rate of pace (defined as fast paced assembly line type  
24 work). She is capable of only brief and superficial (defined as non-  
25 collaborative) interaction with the public, coworkers, and supervisors.  
26 She cannot work around crowds (defined as more than 3-4 people in the  
27 surrounding area) or where reading and writing is an essential function  
28 of the job. She would need additional time to adjust to changes in the  
work routine.

Tr. 50.

The ALJ then identified Plaintiff’s past relevant work as a garment sorter.  
Tr. 55. The ALJ found that Plaintiff could perform this past relevant work as

1 actually and generally performed. Tr. 55.

2 In an alternative step five determination, the ALJ went on to find there were  
3 other jobs in the national economy that exist in significant numbers that Plaintiff  
4 could also perform. The ALJ considered Plaintiff's RFC and the testimony of the  
5 vocational expert and found Plaintiff had the capacity to work as a housekeeping  
6 cleaner or an inspector and hand packager. Tr. 55-56.

7 The ALJ concluded Plaintiff was not disabled within the meaning of the  
8 Social Security Act at any time from the alleged onset date, December 23, 2012,  
9 through the date of the ALJ's decision. Tr. 56.

## 10 ISSUES

11 The question presented is whether substantial evidence supports the ALJ's  
12 decision denying benefits, and, if so, whether that decision is based on proper legal  
13 standards. Plaintiff contends the ALJ erred by: (1) improperly discrediting  
14 Plaintiff's symptom claims; and (2) improperly considering and weighing the  
15 opinion evidence. Additionally, Plaintiff contends that such errors are not  
16 harmless and that a remand for an immediate award of benefits is the proper  
17 remedy.

## 18 DISCUSSION<sup>1</sup>

### 19 A. Plaintiff's Symptom Statements

20 An ALJ must engage in a two-step analysis when making a credibility

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21  
22 <sup>1</sup>In *Lucia v. S.E.C.*, 138 S.Ct. 2044 (2018), the Supreme Court recently held  
23 that ALJs of the Securities and Exchange Commission are "Officers of the United  
24 States" and thus subject to the Appointments Clause. To the extent *Lucia* applies to  
25 Social Security ALJs, the parties have forfeited the issue by failing to raise it in their  
26 briefing. See *Carmickle v. Comm'r of Soc. Sec. Admin.*, 533 F.3d 1155, 1161 n.2  
27 (9th Cir. 2008) (the Court will not consider matters on appeal that were not  
28 specifically addressed in an appellant's opening brief).

1 assessment of a claimant's symptom testimony. *Garrison v. Colvin*, 759 F.3d 995,  
2 1014 (9th Cir. 2014). First, the ALJ must determine whether there is objective  
3 medical evidence of an underlying impairment that could reasonably be expected  
4 to produce the symptoms alleged. *Id.* Second, absent a finding of malingering, the  
5 ALJ must provide specific, clear, and convincing reasons for finding claimant's  
6 symptoms are not as severe as alleged. *Id.* The clear and convincing standard is  
7 the most demanding in Social Security cases. *Id.*

8 The ALJ found Plaintiff's medically determinable impairments could  
9 reasonably be expected to cause the symptoms as alleged. Tr. 51. However, the  
10 ALJ found Plaintiff's allegations as to the disabling effects of these symptoms to  
11 be not fully credible. Tr. 51. The ALJ gave three reasons in support of this  
12 finding: (1) Plaintiff's demeanor was inconsistent with her allegations; (2)  
13 Plaintiff's activities of daily living were inconsistent with her allegations; and (3)  
14 Plaintiff made multiple inconsistent statements.

15 The ALJ's first reason, that Plaintiff's presentment at the hearing was  
16 inconsistent with her alleged degree of limitation, is not specific, clear and  
17 convincing. The ALJ found Plaintiff to be "articulate, composed, and [that she]  
18 presents well," Tr. 51, and that this was inconsistent with her allegations of  
19 intellectual disability.

20 Plaintiff argues the ALJ engaged in the "sit and squirm" test, which has been  
21 rejected by the Ninth Circuit. ECF No. 14 at 7, (citing *Perminter v. Heckler*, 765  
22 F.2d 870, 872 (9th Cir. 1985), citing *Freeman v. Schweiker*, 681 F.2d 727, 731  
23 (11th Cir. 1982) (admonishing an ALJ, who is not a medical expert, for  
24 substituting his own judgment of Plaintiff's condition based on his presentment at  
25 the hearing for that of the medical and vocational experts)). Plaintiff argues that  
26 her mental impairments are well documented by her treating and examining  
27 doctors and are consistent with her testimony. ECF No. 14 at 7. She asserts that  
28 the fact she did not appear as limited as the ALJ would have expected to see at the

1 hearing is not an acceptable basis for discrediting her testimony. *Freeman*, 681  
2 F.2d at 731. Defendant failed to raise a challenge to Plaintiff's argument. *See*  
3 ECF No. 15 at 3-5.

4 The ALJ is not a medical expert and cannot accurately judge a claimant's  
5 limitations by her observations of the claimant at the hearing alone. *Perminter*,  
6 765 F.2d at 872. Further, the record is replete with the longitudinal records of  
7 Plaintiff's mental limitations; records which are more authoritative than the ALJ's  
8 impression of Plaintiff's comportment after a single interaction. *See* Tr. 317, 322,  
9 324, 335-37, 343, 345, 383, 389, 395, 410, 443, 450, 454, 457, 484, 511, 529, 537.

10 The ALJ's second reason for discrediting Plaintiff, that her reported  
11 activities of daily living belie her complaints of limitation, is not supported by  
12 substantial evidence. Tr. 51, 52.

13 To support her findings, the ALJ relies on a medical report created six years  
14 before the alleged onset date, Tr. 323-333, Tr. 53, a Rockwood Clinic record of an  
15 annual visit conducted nearly two years prior to the alleged onset date, Tr. 375, and  
16 treatment records for counseling sessions that took place on September 11, 2012  
17 and October 8, 2012, two and three months before the onset date. Tr. 380-388.  
18 The ALJ juxtaposed Plaintiff's reported daily activities from these records with her  
19 symptom statements made after the onset date as if they were made  
20 contemporaneously, creating the impression of inconsistency. The Ninth Circuit  
21 has held that medical reports which predate the alleged date of onset are of limited  
22 relevance. *Carmickle v. Comm'r, Soc. Sec. Admin*, 533 F.3d 1155, 1165 (9th Cir.  
23 2008). For the same reasons, Plaintiff's reports of daily activities in these predated  
24 reports are of limited relevance because they do not describe her daily activities as  
25 they stood at, or after, the date of onset. Tr. 323-33, 345-79.

26 The ALJ's third reason for discrediting Plaintiff's symptom statements, that  
27 she made inconsistent statements about her alcohol use and her use of public  
28 transportation, is not supported by substantial evidence.

1           1. Alcohol Use

2           Plaintiff's statements when placed in chronological order are not  
3 inconsistent.

4           In September of 2012, Plaintiff reported to her counselor that lately she had  
5 been drinking 4-5 shots of brandy once a day, and prior to that she was drinking  
6 once a week "to relax." Tr. 386. In late January of 2013, Plaintiff reported she had  
7 not been drinking since December of 2012, *i.e.* she had been sober for the last  
8 month. Tr. 353. Then, in early March of 2013, Plaintiff reported to two separate  
9 physicians that she had not been drinking for two months. Tr. 333, 345. This  
10 relates back to December 2012, the date Plaintiff reported she had quit drinking.  
11 Tr. 353. In December of 2013, Dr. Gwinn reported a "recent relapse" in Plaintiff's  
12 alcohol use, but is otherwise nonspecific as to details. Tr. 443. Next, in mid-  
13 January of 2014, Plaintiff reported she has been sober for the month of January  
14 2014, but that in November and December of 2013 she had been drinking up to a  
15 pint of brandy a day. Tr. 448. This is consistent with Dr. Gwinn's report of a  
16 relapse occurring in late 2013. Finally, at the hearing, occurring four years later,  
17 Plaintiff reported having been sober since "maybe 2012, 2013." Tr. 82.

18           In sum, the record supports the conclusion that Plaintiff quit drinking at the  
19 end of 2012, was successfully sober until her relapse in late 2013, and then  
20 maintained sobriety following that relapse through the date of the hearing. The  
21 ALJ's characterization of these reports as inconsistent is not supported by the  
22 record.

23           2. Public Transportation

24           The ALJ found Plaintiff's statements regarding her use of public  
25 transportation to be inconsistent, citing a March 7, 2013 evaluation with Dr.  
26 Mabee, wherein Plaintiff reported that she "relies on the bus or others for  
27 transportation." Tr. 335. The ALJ compares this to a Rockwood report dated  
28 January 20, 2014, Tr. 446, wherein Plaintiff came with her mother for completion



1 of paratransit forms saying she has never ridden the bus and believed she would  
2 get lost if she tried due to difficulty with mentation, getting easily confused, and  
3 difficulty managing transit. Tr. 52. When asked at the hearing, Plaintiff stated “I  
4 can take the bus okay, but” and appears to be cut off by the ALJ before completion  
5 of her thought. Tr. 87. The ALJ then asked if that was the primary way she got  
6 around, to which she said, “Yeah, and--” before she was cut off again. Tr. 87.  
7 Other than the bus, Plaintiff reported that her parents drive her around. Tr. 87.

8 Plaintiff’s statement that she “can take the bus okay,” is not inconsistent  
9 with taking paratransit. Without further information, neither the ALJ, nor the  
10 Court can conjecture as to what taking the bus “okay” means in terms of  
11 Plaintiff’s capacity to understand routes, take directions, and schedule her trips. In  
12 the absence of more information, this reason is not supported by substantial  
13 evidence.

14 In sum, the three reasons provided by the ALJ fail to meet the legal standard  
15 or are not supported by substantial evidence as necessary to reject Plaintiff’s  
16 symptom statements. Where an ALJ improperly rejects the claimant’s testimony  
17 regarding her limitations, and the claimant would be disabled if her testimony was  
18 credited, the Court will not remand solely to allow the ALJ to make specific  
19 findings regarding that testimony. *Varney v. Sec. of Health and Human Services*,  
20 859 F.2d 1396, 1401 (9th Cir. 1988).

## 21 **B. Opinion Evidence**

22 Plaintiff argues that the ALJ erred in her treatment of the medical opinions  
23 in the record.

24 In weighing medical source opinions, the ALJ should distinguish between  
25 three different types of physicians: (1) treating physicians, who actually treat the  
26 claimant; (2) examining physicians, who examine but do not treat the claimant;  
27 and, (3) nonexamining physicians who neither treat nor examine the claimant.  
28 *Lester*, 81 F.3d at 830. The ALJ should give more weight to the opinion of a

1 treating physician than to the opinion of an examining physician. *Orn v. Astrue*,  
2 495 F.3d 625, 631 (9th Cir. 2007). Likewise, the ALJ should give more weight to  
3 the opinion of an examining physician than to the opinion of a nonexamining  
4 physician. *Id.*

5 When a treating physician's opinion is not contradicted by another  
6 physician, the ALJ may reject the opinion only for "clear and convincing" reasons.  
7 *Baxter v. Sullivan*, 923 F.2d 1391, 1396 (9th Cir. 1991). When a treating  
8 physician's opinion is contradicted by another physician, the ALJ is only required  
9 to provide "specific and legitimate reasons" for rejecting the opinion. *Murray v.*  
10 *Heckler*, 722 F.2d 499, 502 (9th Cir. 1983). Likewise, when an examining  
11 physician's opinion is not contradicted by another physician, the ALJ may reject  
12 the opinion only for "clear and convincing" reasons, and when an examining  
13 physician's opinion is contradicted by another physician, the ALJ is only required  
14 to provide "specific and legitimate reasons." *Lester*, 81 F.3d at 830-31.

15 The specific and legitimate standard can be met by the ALJ setting out a  
16 detailed and thorough summary of the facts and conflicting clinical evidence,  
17 stating his interpretation thereof, and making findings. *Magallanes v. Bowen*, 881  
18 F.2d 747, 751 (9th Cir. 1989). The ALJ is required to do more than offer his  
19 conclusions, he "must set forth his own interpretations and explain why they,  
20 rather than the doctors' opinions, are correct." *Embrey v. Bowen*, 849 F.2d 418,  
21 421-22 (9th Cir. 1988).

22 The opinion of a nonexamining physician cannot by itself constitute  
23 substantial evidence that justifies the rejection of the opinion of either an  
24 examining physician or a treating physician. *Lester*, 81 F.3d at 831. However, in  
25 some cases, an ALJ's rejection of an examining physician's opinion in favor of a  
26 nonexamining, nontreating physician's opinion will be upheld if the ALJ gives  
27 specific, legitimate reasons supported by substantial record evidence. *Id.*, see  
28 also *Magallanes*, 881 F.2d at 751-55 (ALJ's

1 decision to reject opinion of treating physician supported where there was an  
2 abundance of evidence to support the ALJ's decision, there were contrary reports  
3 from examining physicians, and the claimant's testimony also conflicted with the  
4 treating physician's opinion).

5 1. Douglas Gwinn, M.D.

6 The ALJ gave little weight to the opinion of Plaintiff's treating physician,  
7 Douglas Gwinn, M.D., expressed in his December 2014 Mental Residual  
8 Functional Capacity Assessment. Tr. 483-86. The ALJ gave two reasons for  
9 rejecting this opinion: (1) that his diagnoses were not supported by the evidence;  
10 and (2) that he made internally inconsistent statements in his reports.

11 Dr. Gwinn's opinion was contradicted at the hearing by medical expert,  
12 Nancy Winfrey, Ph.D. Therefore, the ALJ was only required to provide specific  
13 and legitimate reasons for rejecting his opinion. *Bayliss*, 427 F.3d at 1216.

14 The ALJ's first reason, that Dr. Gwinn's diagnoses are inconsistent with the  
15 evidence, is not specific and legitimate. The ALJ found that "Dr. Gwinn assessed  
16 multiple diagnoses that are completely unsupported by DSM criteria, including  
17 borderline personality disorder and bipolar." Tr. 54. In support of this  
18 conclusion, the ALJ points to Dr. Winfrey's testimony and appears to adopt Dr.  
19 Winfrey's reasons as her own. Without more, this does not meet the specific and  
20 legitimate standard. Dr. Winfrey's reasons comprise her opinion, they do not  
21 stand apart as individual reasons for the ALJ to also reject Dr. Gwinn's opinion  
22 without pointing to other facts or evidence in the record. *See Magallanes v.*  
23 *Bowen*, 881 F.2d 747, 751 (9th Cir. 1989) (the specific and legitimate standard  
24 can be met by the ALJ setting out a detailed and thorough summary of the facts  
25 and conflicting clinical evidence, stating her interpretation thereof, and making  
26 findings); *Embrey v. Bowen*, 849 F.2d 418, 421-22 (9th Cir. 1988) (the ALJ is  
27 required to do more than offer her conclusions, she "must set forth [her]  
28 interpretations and explain why they, rather than the doctors', are correct.").

1 The ALJ's second reason, that Dr. Gwinn's opinion is internally  
2 inconsistent, does not meet the specific and legitimate standard. The ALJ points  
3 to Dr. Gwinn's diagnosis of developmental delay which he characterized as  
4 "mild" in January of 2014, Tr. 444, as being inconsistent with his other records.  
5 However, the ALJ fails to point to any of Dr. Gwinn's records to support her  
6 finding. An ALJ's bare conclusion, without specific facts or evidence, does not  
7 meet the specific and legitimate standard. *See Magallanes*, 881 F.2d at 751;  
8 *Embrey*, 849 F.2d at 421-22.

9 The ALJ's two reasons for rejection of Dr. Gwinn's opinion do not meet  
10 the specific and legitimate standard. An ALJ's failure to properly address the  
11 opinion of a treating physician is clear error, requiring remand. *Garrison*, 759  
12 F.3d at 1019.

### 13 2. Other Providers

14 Plaintiff also alleges that the ALJ erred in her treatment of the opinions of  
15 Scott Mabee, Ph.D., Craig Lammers, Ph.D., Brian Campbell, Ph.D., John F.  
16 McRae, Ph.D., and Jennifer VanWey, Psy.D. As this case is being remanded to  
17 readdress Plaintiff's testimony and the opinion of Dr. Gwinn, the ALJ is directed to  
18 readdress all the medical evidence in the record.

### 19 3. Dr. Winfrey

20 The Court notes that Dr. Winfrey testified at the hearing that Plaintiff met  
21 the Listings. Tr. 75-76 (after finding the Paragraph A criteria were met, Dr.  
22 Winfrey testified that Plaintiff meets the Paragraph C criteria under 12.04 and  
23 12.06; "I think she equals the Listing"). Neither party raised this issue in their  
24 briefing and the Court is constrained against raising it *sua sponte*. *See Carmickle*,  
25 533 F.3d at 1161 n.2 (the Court will not consider matters on appeal that were not  
26 specifically addressed in an appellant's opening brief). However, the Court directs  
27 the ALJ to reconsider Dr. Winfrey's testimony on remand, specifically regarding  
28 whether or not Plaintiff meets a listing at step three.

1 **REMEDY**

2 The decision whether to remand for further proceedings or reverse and  
3 award benefits is within the discretion of the district court. *McAllister v. Sullivan*,  
4 888 F.2d 599, 603 (9th Cir. 1989). An immediate award of benefits is appropriate  
5 where “no useful purpose would be served by further administrative proceedings,  
6 or where the record has been thoroughly developed,” *Varney v. Secretary of Health*  
7 *& Human Servs.*, 859 F.2d 1396, 1399 (9th Cir. 1988), or when the delay caused  
8 by remand would be “unduly burdensome,” *Terry v. Sullivan*, 903 F.2d 1273, 1280  
9 (9th Cir. 1990). *See also Garrison v. Colvin*, 759 F.3d 995, 1021 (9th Cir. 2014)  
10 (noting that a district court may abuse its discretion not to remand for benefits  
11 when all of these conditions are met). This policy is based on the “need to  
12 expedite disability claims.” *Varney*, 859 F.2d at 1401. Where there are  
13 outstanding issues that must be resolved before a determination can be made, and it  
14 is not clear from the record that the ALJ would be required to find a claimant  
15 disabled if all the evidence were properly evaluated, remand is appropriate. *See*  
16 *Benecke v. Barnhart*, 379 F.3d 587, 595-96 (9th Cir. 2004); *Harman v. Apfel*, 211  
17 F.3d 1172, 1179-80 (9th Cir. 2000).

18 In this case, it is not clear from the record that the ALJ would be required to  
19 find Plaintiff disabled if all the evidence were properly evaluated. Therefore, on  
20 remand, the ALJ shall make a new credibility determination, shall readdress the  
21 medical opinion evidence, and shall readdress Dr. Winfrey’s testimony.

22 **CONCLUSION**

23 Accordingly, **IT IS ORDERED:**

- 24 1. Defendant’s Motion for Summary Judgment, **ECF No. 15**, is **DENIED**.  
25 2. Plaintiff’s Motion for Summary Judgment, **ECF No. 14**, is  
26 **GRANTED in part**, and the matter is **REMANDED** to the Commissioner for  
27 further proceedings consistent with this opinion.  
28 3. Application for attorney fees may be filed by separate motion.

1           The District Court Executive is directed to file this Order and provide a copy  
2 to counsel for Plaintiff and Defendant. **Judgment shall be entered for Plaintiff**  
3 and the file shall be **CLOSED**.

4  
5           DATED September 25, 2018.

A handwritten signature in black ink, appearing to be "M" or "Rodgers".

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JOHN T. RODGERS  
UNITED STATES MAGISTRATE JUDGE