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8	UNITED STATES DISTRICT COURT WESTERN DISTRICT OF WASHINGTON	
9		COMA
10	MICHELE NICOLE GIPSON,	CASE NO. 3:17-CV-05738-DWC
11	Plaintiff,	
12	v.	ORDER AFFIRMING DEFENDANT'S DECISION TO DENY BENEFITS
13	NANCY A. BERRYHILL, Acting Commissioner of Social Security,	
14	Defendant.	
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16	Plaintiff Michele Nicole Gipson filed this	s action, pursuant to 42 U.S.C. § 405(g), for
17	judicial review of the Acting Commissioner of S	ocial Security's ("Commissioner") denial of
18	Plaintiff's applications for disability insurance be	enefits ("DIB") and supplemental security
19	income ("SSI"). Pursuant to 28 U.S.C. § 636(c),	Federal Rule of Civil Procedure 73, and Local
20	Rule MJR 13, the parties have consented to have	this matter heard by the undersigned Magistrate
21	Judge. See generally Dkt.	
22	After considering the record, the Court co	oncludes the Administrative Law Judge ("ALJ")
23	erred regarding the medical opinion evidence fro	m Dr. Kristine S. Harrison, Psy.D., but this error
24	was harmless. In addition, Plaintiff failed to show	w the ALJ erred by not including a limitation

1 reflecting excessive absences in the residual functional capacity ("RFC"). Accordingly, the 2 decision of the Acting Commissioner of Social Security ("Commissioner") is affirmed pursuant to 3 sentence four of 42 U.S.C. § 405(g). 4 FACTUAL AND PROCEDURAL HISTORY 5 On July 16, 2014, Plaintiff filed applications for DIB and SSI, alleging disability as of 6 May 4, 2013. See Dkt. 7, Administrative Record ("AR") 21. The applications were denied upon 7 initial administrative review and on reconsideration. See AR 21. ALJ Kelly Wilson held a hearing on February 10, 2016. See AR 48-78. In a decision dated May 31, 2016, the ALJ 8 9 determined Plaintiff to be not disabled. AR 21-40. The Appeals Council denied Plaintiff's 10 request for review of the ALJ's decision, making the ALJ's decision the final decision of the 11 Commissioner. See AR 1-4; 20 C.F.R. § 404.981, § 416.1481. 12 In Plaintiff's Opening Brief, Plaintiff maintains the ALJ erred: (1) in her treatment of the medical opinion evidence from Dr. Harrison; and (2) by failing to include a limitation regarding 13 14 absenteeism in the RFC. Dkt. 9, pp. 4-11. 15 STANDARD OF REVIEW 16 Pursuant to 42 U.S.C. § 405(g), this Court may set aside the Commissioner's denial of 17 social security benefits if the ALJ's findings are based on legal error or not supported by 18 substantial evidence in the record as a whole. Bayliss v. Barnhart, 427 F.3d 1211, 1214 n.1 (9th 19 Cir. 2005) (citing Tidwell v. Apfel, 161 F.3d 599, 601 (9th Cir. 1999)). 20 21 22 23 24

1	DISCUSSION
2	I. Whether the ALJ properly considered the medical opinion evidence from examining physician Dr. Harrison.
3 4	Plaintiff argues the ALJ erred by failing to include limitations in the RFC which reflect
5	all of the mental restrictions described by Dr. Harrison. Dkt. 9, pp. 4-10. Plaintiff also briefly
6	mentions Dr. Harrison's opinion regarding Plaintiff's credibility. Id. at 5.
7	An ALJ must provide "clear and convincing" reasons for rejecting the uncontradicted
8	opinion of either a treating or examining physician. Lester v. Chater, 81 F.3d 821, 830 (9th Cir.
9	1996) (citing Pitzer v. Sullivan, 908 F.2d 502, 506 (9th Cir. 1990); Embrey v. Bowen, 849 F.2d
10	418, 422 (9th Cir. 1988)). When a treating or examining physician's opinion is contradicted, the
11	opinion can be rejected "for specific and legitimate reasons that are supported by substantial
12	evidence in the record." <i>Lester</i> , 81 F.3d at 830-31 (citing <i>Andrews v. Shalala</i> , 53 F.3d 1035, 1043 (0th Cir. 1005); <i>Mummus, Hackler</i> , 722 F.2d 400, 502 (0th Cir. 1082)). The ALL con
13	1043 (9th Cir. 1995); <i>Murray v. Heckler</i> , 722 F.2d 499, 502 (9th Cir. 1983)). The ALJ can accomplish this by "setting out a detailed and thorough summary of the facts and conflicting
14	clinical evidence, stating [her] interpretation thereof, and making findings." <i>Reddick v. Chater</i> ,
15	157 F.3d 715, 725 (9th Cir. 1998) (citing <i>Magallanes v. Bowen</i> , 881 F.2d 747, 751 (9th Cir.
16	1989)).
17	Dr. Harrison conducted a psychological evaluation of Plaintiff on October 6, 2014. See
18	AR 603-07. As part of her evaluation of Plaintiff, Dr. Harrison reviewed records, conducted a
19	clinical interview, and performed a mental status examination. See AR 603-07. Dr. Harrison also
20 21	reviewed Plaintiff's psychosocial history, which included discussions of Plaintiff's employment,
21	medical, and family histories. AR 604-05. In relevant part, Plaintiff told Dr. Harrison she began
22	feeling depressed about nine to ten years ago. AR 604. She described her depression "as not
24	wanting to do anything, wishing 'it' would be over and isolating in her room after doing the

things that must be done." AR 604. Furthermore, Dr. Harrison noted that due to Plaintiff's
 "significant history of trauma" – including the drowning of her first husband and near-drowning
 of her child – Plaintiff "is fearful of water and driving in the rain," avoids "going outside when it
 is raining heavily," and avoids "being around water." AR 605; *see also* AR 604.

In the mental status examination, Dr. Harrison found Plaintiff "alert and oriented," "wellspoken" with normal speech and coherent content, and able to concentrate "without evidence of
unusual distractibility." AR 605. Plaintiff "was tearful at appropriate times" and reluctant to talk
about personal problems. AR 605. Further, on a scale of 1 to 10 – with 1 being depressed and 10
being happy – Plaintiff "described her mood two days prior to this assessment as a 7." AR 605.
She told Dr. Harrison "her mood varies week by week." AR 605; *see also* AR 607.

With respect to mental diagnoses, Dr. Harrison opined Plaintiff had "mild to moderate"
unspecified depressive disorder, as well as posttraumatic stress disorder. AR 607. Dr. Harrison
concluded Plaintiff is "hypervigilant, particularly around water." AR 607. She also concluded
Plaintiff becomes angry when she sees "abuse of others" and avoids situations involving "anger
or abuse." AR 607. Lastly, Dr. Harrison determined Plaintiff avoids "close relationships" and
"discussing her history with others." AR 607.

The ALJ mentioned Dr. Harrison's evaluation twice in her decision. First, the ALJ stated:
In October 2014, when the claimant met with consultative examiner, Kristine S. Harrison, Psy.D the claimant was diagnosed with unspecified depressive disorder, mild to moderate and post-traumatic stress disorder. Prior to meeting with the consultative examiner in 2014, the claimant had not been involved in psychotherapy or counseling and she was not taking prescribed psychiatric medications. The claimant reported feeling depressed for approximately nine to ten years, but stated she never informed a doctor of her depressed mood.

- 22 AR 35 (internal citations omitted).
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2 subjective symptom testimony, stating: 3 Furthermore, [Plaintiff] reported to consultative examiner, Dr. Harrison that on a typical day she gets up early with her children and gets them ready for the school bus, the first of which arrives at 6:52am. She also reported to Dr. Harrison, she 4 was able to stand to shower and dress herself because the pains in her feet were improved after recent treatments. Additionally, she reported being able to drive 5 and use the bus if needed and handle the finances jointly with her husband. She reported to Dr. Harrison that she was able to use a computer and the claimant 6 helped her children with their homework . . . The claimant's statements regarding her activities of daily living support a finding she could do some light level work. 7 AR 36 (internal citations omitted). 8 9 Hence, the ALJ mentioned Dr. Harrison's evaluation twice but failed to state how she considered this evaluation. Thus, it is unclear whether the ALJ intended to discount Dr. 10 11 Harrison's evaluation, and as such, the Court cannot determine whether the ALJ properly 12 considered this evaluation. The ALJ therefore erred by failing to adequately explain her 13 consideration of Dr. Harrison's evaluation. See Flores v. Shalala, 49 F.3d 562, 570-71 (9th Cir. 14 1995) (citation and internal quotation marks omitted) (the ALJ "may not reject significant 15 probative evidence without explanation"); see also Brown-Hunter v. Colvin, 806 F.3d 487, 492 (9th Cir. 2015) (the ALJ must "set forth the reasoning behind [her] decisions in a way that allows 16 17 for meaningful review"). 18 Notably, however, harmless error principles apply in the Social Security context. Molina v. Astrue, 674 F.3d 1104, 1115 (9th Cir. 2012). An error is harmless only if it is not prejudicial to 19 20 the claimant or "inconsequential" to the ALJ's "ultimate nondisability determination." Stout v. 21 Comm'r of Soc. Sec. Admin., 454 F.3d 1050, 1055 (9th Cir. 2006); see also Molina, 674 F.3d at 22 1115. The determination as to whether an error is harmless requires a "case-specific application of judgment" by the reviewing court, based on an examination of the record made "without 23

Second, the ALJ referenced Dr. Harrison's evaluation when discounting Plaintiff's

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regard to errors' that do not affect the parties' 'substantial rights.'" *Molina*, 674 F.3d at 1118 1119 (quoting *Shinseki v. Sanders*, 556 U.S. 396, 407 (2009) (quoting 28 U.S.C. § 2111)).

In this case, the ALJ erred by failing to explain her consideration of Dr. Harrison's
opinion. Plaintiff acknowledges "Dr. Harrison did not specifically articulate any specific
functional restrictions," but argues Dr. Harrison's evaluation nevertheless "provide[s] insight"
into Plaintiff's "functional restrictions." Dkt. 9, p. 5. Yet a close examination of Dr. Harrison's
report reveals she did not, as Plaintiff acknowledges, opine to any functional limitations. For
example, although Dr. Harrison described Plaintiff as depressed and hypervigilant, Dr. Harrison
did not state these symptoms translate into functional limitations. See AR 604, 605, 607.

10 Dr. Harrison also wrote Plaintiff "is fearful of water and driving in the rain" and therefore 11 "avoids" going out in the rain. AR 604, 605. Moreover, Dr. Harrison stated Plaintiff "avoids" 12 abusive situations and close relationships. AR 605, 607. However, while Dr. Harrison wrote 13 Plaintiff avoids these situations, she did not opine Plaintiff cannot encounter them. Furthermore, 14 Dr. Harrison again did not state these traits and symptoms translate into functional limitations. 15 Thus, while the ALJ erred with respect to Dr. Harrison's opinion, this error was harmless and 16 does not require reversal, as it was inconsequential to the ultimate disability determination. See 17 Molina, 674 F.3d at 1115 (an error is harmless if it "did not alter the ALJ's decision").

Furthermore, the Court notes Plaintiff briefly mentioned in her Opening Brief that Dr.
Harrison found her credible, with "no evidence of symptom exaggeration." Dkt. 9, p. 5 (quoting
AR 603). The ALJ, on the other hand, discounted Plaintiff's subjective symptom testimony for
several reasons, including inconsistency with the medical records, failure to seek mental health
treatment, noncompliance with treatment recommendations, previously working despite her
mental impairments, and her activities of daily living. AR 27-36.

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Despite briefly mentioning Dr. Harrison's credibility determination, Plaintiff failed to
articulate any argument in her Opening Brief regarding the ALJ's treatment of her subjective
symptom testimony. *See generally* Dkt. 9. Thus, to the extent Plaintiff attempted to argue the
ALJ erred in her treatment of the subjective symptom testimony, the Court finds Plaintiff failed
to show the ALJ erred on this issue. *See Carmickle v. Comm'r of Soc. Sec. Admin.*, 533 F.3d
1155, 1161 n.2 (9th Cir. 2007) (citation omitted) (the court will not consider an issue that a
plaintiff fails to argue "with any specificity in [her] briefing").

8 In sum, Plaintiff failed to show the ALJ made any harmful error regarding either Dr.
9 Harrison's opinion or Plaintiff's subjective symptom testimony. Therefore, reversal is not
10 warranted on these issues.

II. Whether the ALJ properly considered Plaintiff's potential work absences.
 Plaintiff next argues the RFC is unsupported by substantial evidence in the record
 because the record indicates she would miss more than one day of work per month due to
 headaches. Dkt. 9, pp. 9-10.

15 An RFC is "an assessment of an individual's ability to do sustained work-related physical and mental activities in a work setting on a regular and continuing basis." SSR 96-9p, 1996 WL 16 17 374184, at \*1 (1996). An RFC must include an individual's functional limitations or restrictions and assess "her work-related abilities on a function-by-function basis." Id. Furthermore, an RFC 18 19 must take into account all of an individual's limitations. Valentine v. Comm'r of Soc. Sec. 20Admin., 574 F.3d 685, 690 (9th Cir. 2009). Thus, an ALJ errs when she provides an incomplete 21 RFC ignoring "significant and probative evidence." Jones v. Colvin, 2015 WL 71709, at \*5 22 (W.D. Wash. Jan. 6, 2015) (citing Hill v. Astrue, 698 F.3d 1153, 1161 (9th Cir. 2012)). 23

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In the RFC, the ALJ included no limitation regarding how often Plaintiff would be absent
from work. *See* AR 27. By contrast, at the hearing, the ALJ asked the vocational expert to
consider an individual who would have one unexpected work absence per month. AR 77; *see also* AR 40. Regardless, Plaintiff maintains the ALJ erred in the RFC assessment, arguing her
history of "severe" headaches and migraines indicates she would likely miss more than one day
of work per month. Dkt. 9, pp. 9-10.

Plaintiff cites three record citations to support her assertion. First, on June 6, 2012,
Plaintiff reported to the hospital for a "mild frontal headache" that had been present for two days. *Id.* at 10 (citing AR 299). Second, on March 19, 2013, a medical record containing Plaintiff's
"Problem List" indicated she had right-sided headaches about three times per week. *Id.* (citing
AR 364). Third, on July 23, 2013, Plaintiff reported to a physician "for reevaluation of a
headache" that was "continuous for one week." *Id.* (citing AR 487, 569).

13 Nevertheless, Plaintiff's argument is unsupported by the record. While these records 14 indicate Plaintiff suffers from headaches, they do not state she would have work absences due to 15 headaches. Therefore, Plaintiff failed to show the ALJ erred by not including a limitation in the 16 RFC accounting for work absences. See Gorder v. Colvin, 2014 WL 1466450, at \*5 (W.D. 17 Wash. April 15, 2014) ("None of [Plaintiff's] cited treatment notes [on headaches] reference any 18 particular limitation related to absenteeism, and thus [P]laintiff's argument is based on 19 extrapolation ... rather than substantial evidence in the record. Plaintiff has not established that 20the ALJ erred in failing to include an absenteeism limitation in her RFC."); see also Ludwig v. 21 Astrue, 681 F.3d 1047, 1054 (9th Cir. 2012) ("The burden is on the party claiming error to 22 demonstrate not only the error, but also that it affected [her] 'substantial rights.""); Allen v. 23

1	Heckler, 749 F.2d 577, 579 (9th Cir. 1984) (citation omitted) ("If the evidence admits of more
2	than one rational interpretation," the Commissioner's decision must be upheld).
3	CONCLUSION
4	Based on the foregoing reasons, the Court hereby finds the ALJ properly concluded
5	Plaintiff was not disabled. Accordingly, Defendant's decision to deny benefits is affirmed and
6	this case is dismissed with prejudice.
7	Deted this 1st day of Marsh 2019
8	Dated this 1st day of March, 2018.
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10	David W. Christel United States Magistrate Judge
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