

UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF
ILLINOIS

Michelle L. v. Frank Bisignano, Commissioner of Social Security

Michelle L. · No. 3:25-CV-498-SMY · Decided March 30, 2026

SUMMARY

The United States District Court for the Southern District of Illinois reviewed the denial of Michelle L.'s application for Disability Insurance Benefits under 42 U.S.C. § 405(g). The court rejected her challenges concerning development of the medical record, evaluation of state-agency medical opinions, and the treatment of her concentration, persistence, and pace limitations, and affirmed the Commissioner's decision.

CASE DETAILS

COURT	United States District Court for the Southern District of Illinois
WRITING FOR THE COURT	Staci M. Yandle
JURISDICTION	United States District Court for the Southern District of Illinois
DECIDED	March 30, 2026
DOCKET	3:25-CV-498-SMY
DISPOSITION	affirmed
PROCEDURAL POSTURE	Judicial review under 42 U.S.C. § 405(g) of the Commissioner's final decision denying Disability Insurance Benefits.
STANDARD OF REVIEW	The court reviews whether the ALJ's findings are supported by substantial evidence and whether the ALJ applied the correct legal standards. The court considers the entire administrative record but does not reweigh evidence, resolve evidentiary conflicts, determine credibility, or substitute its judgment for the ALJ's.
PRECEDENTIAL VALUE	unpublished
PARTIES	Michelle L. v. Frank Bisignano, Commissioner of Social Security

TOPICS

- judicial review of agency action
- agency adjudication
- administrative law
- disability definition

PRACTICE AREAS

QUESTIONS PRESENTED

1. Whether the ALJ failed to develop the administrative record by not obtaining a medical opinion interpreting lumbar-spine x-rays taken after the state-agency consultants issued their opinions.
2. Whether the ALJ properly evaluated the opinions of the state-agency physicians who limited Plaintiff to standing for two hours in an eight-hour workday and recommended alternating sitting and standing.
3. Whether the ALJ properly incorporated Plaintiff's moderate limitation in concentration, persistence, and pace into the residual functional capacity finding by limiting her to simple instructions but not detailed or complex instructions.

HOLDINGS

1. The ALJ did not err by declining to obtain an additional medical opinion interpreting the September 2021 x-rays because the existing record, including later treatment records, was adequate to determine disability.
2. Even assuming the ALJ erred in stating that the x-rays did not show a 'bone-on-bone' condition, the error was harmless because Plaintiff did not identify evidence that the condition caused work-related limitations beyond those included in the RFC.
3. The ALJ properly discounted portions of the state-agency physicians' opinions because, for claims filed after 2017, the regulations do not require deference or specific evidentiary weight for prior administrative medical findings, and the ALJ gave adequate reasons grounded in the record.
4. The ALJ properly accounted for Plaintiff's moderate limitation in concentration, persistence, and pace by limiting her to understanding, remembering, and carrying out simple instructions while finding no comparable limitation for simple tasks.

KEY QUOTATIONS

“ALJs “may not play[] doctor and interpret new and potentially decisive medical evidence without medical scrutiny.”” (Discussion)

“The findings of the Commissioner of Social Security as to any fact, if supported by substantial evidence, shall be conclusive....” (Legal Standard)

“After careful review of the record, the Court finds the ALJ’s decision is supported by substantial evidence.” (Conclusion)

FACTUAL BACKGROUND

Plaintiff alleged disability beginning May 16, 2019, based principally on back conditions, diabetes, fibromyalgia, mental-health conditions, and other physical impairments. The ALJ found severe impairments including degenerative disk disease, fibromyalgia, diabetes, obesity, depression, anxiety, and PTSD, but determined that Plaintiff retained the residual functional capacity for restricted light work with simple instructions and specified postural, environmental, manipulative, and social limitations. Lumbar x-rays taken in

September 2021 showed facet-joint osteoarthritis, reduced disc height, and osteophytes, but later records did not show worsening lumbar symptoms or additional treatment supporting greater limitations. The ALJ found that Plaintiff could not perform her past work but could perform several jobs existing in significant numbers in the national economy.

PROCEDURAL HISTORY

Plaintiff's application for Disability Insurance Benefits was denied initially and on reconsideration. After a hearing, the ALJ issued an unfavorable decision, and the Appeals Council declined review. Plaintiff previously sought judicial review, and the case was remanded by joint stipulation. On remand, the Appeals Council directed further consideration of the state-agency consultants' findings concerning alternating sitting and standing. Following a second hearing, the ALJ again denied benefits, and Plaintiff filed this action. The district court denied the complaint and affirmed the Commissioner's final decision.

DISPOSITION

affirmed

CASES CITED

- Zurawski v. Halter, 245 F.3d 881, 886 (7th Cir. 2001)
- Lopez ex rel. Lopez v. Barnhart, 336 F.3d 535, 539 (7th Cir. 2003)
- Biestek v. Berryhill, 139 S. Ct. 1148, 1154 (2019)
- Burmester v. Berryhill, 920 F.3d 507, 510 (7th Cir. 2019)
- Parker v. Astrue, 597 F.3d 920, 921 (7th Cir. 2010)
- McHenry v. Berryhill, 911 F.3d 866, 871 (7th Cir. 2018)
- Skarbek v. Barnhart, 390 F.3d 500, 504 (7th Cir. 2004)
- Carradine v. Barnhart, 360 F.3d 751, 754 (7th Cir. 2004)
- Beardsley v. Colvin, 758 F.3d 834 (7th Cir. 2014)
- Martin v. Saul, 950 F.3d 369, 373 (7th Cir. 2020)
- Pavlicek v. Saul, 994 F.3d 777, 783 (7th Cir. 2021)