UNITED STATES DISTRICT COURT FOR THE CENTRAL DISTRICT OF CALIFORNIA

Maria T. L. v. Frank Bisignano, Commissioner of Social Security

No. 2:25-01859 ADS, United States District Court for the Central District of California (January 5, 2026)

SUMMARY

The United States District Court for the Central District of California reviews the denial of Maria T. L.'s application for Disability Insurance Benefits. The court holds that the Administrative Law Judge failed to provide legally sufficient, specific, clear, and convincing reasons for discounting Plaintiff's subjective symptom testimony. The court reverses the Commissioner's decision and remands the matter for further administrative proceedings.

CASE DETAILS

COURT	United States District Court for the Central District of California
WRITING FOR THE COURT	Autumn D. Spaeth
JURISDICTION	United States District Court for the Central District of California
DECIDED	January 5, 2026
DOCKET	2:25-01859 ADS
DISPOSITION	reversed_and_remanded
PROCEDURAL POSTURE	Plaintiff sought judicial review under 42 U.S.C. § 405(g) of the Commissioner of Social Security's denial of Disability Insurance Benefits.
STANDARD OF REVIEW	The court reviewed the Commissioner's decision under 42 U.S.C. § 405(g), affirming factual findings supported by substantial evidence and applying the proper legal standards. The court was limited to the reasons provided by the ALJ and could not affirm on a ground on which the ALJ did not rely.
PRECEDENTIAL VALUE	District-court memorandum opinion; precedential status unknown
PARTIES	Maria T. L. v. Frank Bisignano, Commissioner of Social Security

TOPICS

judicial review of agency action · administrative law · remedies · civil procedure

PRACTICE AREAS

social security disability | administrative law | civil procedure

QUESTIONS PRESENTED

1. Whether the ALJ provided legally sufficient, specific, clear, and convincing reasons supported by substantial evidence for discounting Plaintiff's subjective symptom testimony.
2. Whether the ALJ properly evaluated the medical evidence.
3. Whether the ALJ's residual functional capacity assessment included all of Plaintiff's limitations.
4. Whether the ALJ properly relied on vocational-expert testimony to find that Plaintiff could perform other work.

HOLDINGS

1. The ALJ failed to provide specific, clear, and convincing reasons supported by substantial evidence for discounting Plaintiff's subjective symptom testimony because the ALJ summarized medical evidence and made generalized conclusions without identifying the specific testimony rejected or explaining which evidence contradicted it.
2. Further administrative proceedings, rather than an immediate award of benefits, were warranted because the record did not clearly establish that Plaintiff was disabled and further review could remedy the ALJ's error.

KEY QUOTATIONS

> *"Although the ALJ provided a detailed summary of the medical record, noting both normal and abnormal findings (AR 25-33), it is not sufficient for an ALJ simply to summarize the medical evidence at issue in the case and make a generalized statement that the record undermines the claimant's testimony."* (Opinion at 8)

> *"The Court finds the ALJ failed to provide legally sufficient reasons, supported by substantial evidence, for discounting Plaintiff's subjective symptom testimony."* (Opinion at 11)

FACTUAL BACKGROUND

Plaintiff, a former registered nurse, alleged disability based on depression, anxiety, panic attacks, degenerative spine conditions, bilateral carpal tunnel syndrome, pain, numbness, fatigue, and cognitive limitations. The ALJ found severe physical and mental impairments but determined that Plaintiff retained the residual functional capacity for medium work with exertional, environmental, social, and mental limitations. The ALJ concluded that Plaintiff could not perform her past work but could perform other jobs existing in significant numbers in the national economy.

PROCEDURAL HISTORY

Plaintiff applied for Disability Insurance Benefits, alleging disability beginning April 27, 2018. The application was denied initially and on reconsideration; following administrative hearings, the ALJ found Plaintiff not

disabled on March 12, 2024, and the Appeals Council denied review on January 13, 2025. Plaintiff then filed this action, and the parties consented to magistrate-judge jurisdiction.

DISPOSITION

reversed_and_remanded

REMAND INSTRUCTIONS

The Commissioner's decision denying benefits was reversed, and the matter was remanded for further administrative proceedings consistent with the opinion. The court directed that the remaining issues could be addressed on remand if necessary.

CASES CITED

- Garrison v. Colvin, 759 F.3d 995, 1010, 1017, 1021 (9th Cir. 2014)
- Connett v. Barnhart, 340 F.3d 871, 874 (9th Cir. 2003)
- Mayes v. Massanari, 276 F.3d 453, 458-59 (9th Cir. 2001)
- Reddick v. Chater, 157 F.3d 715, 725 (9th Cir. 1998)
- Aukland v. Massanari, 257 F.3d 1033, 1035 (9th Cir. 2001)
- Ryan v. Commissioner of Social Security, 528 F.3d 1194, 1198 (9th Cir. 2008)
- Burch v. Barnhart, 400 F.3d 676, 679 (9th Cir. 2005)
- Robbins v. Social Security Administration, 466 F.3d 880, 882 (9th Cir. 2006)
- Orn v. Astrue, 495 F.3d 625, 630 (9th Cir. 2007)
- Brown-Hunter v. Colvin, 806 F.3d 487, 492, 494-96 (9th Cir. 2015)
- Molina v. Astrue, 674 F.3d 1104, 1115 (9th Cir. 2012)
- Smith v. Kijakazi, 14 F.4th 1108, 1111 (9th Cir. 2021)
- Benton ex rel. Benton v. Barnhart, 331 F.3d 1030, 1040 (9th Cir. 2003)
- Bunnell v. Sullivan, 947 F.2d 341, 345 (9th Cir. 1991) (en banc)
- Light v. Social Security Administration, 119 F.3d 789, 792 (9th Cir. 1997)
- Thomas v. Barnhart, 278 F.3d 948, 958-59 (9th Cir. 2002)
- Morgan v. Commissioner of Social Security Administration, 169 F.3d 595, 599-600 (9th Cir. 1999)
- Lingenfelter v. Astrue, 504 F.3d 1028, 1040 (9th Cir. 2007)
- Diedrich v. Berryhill, 874 F.3d 634, 643 (9th Cir. 2017)
- Hiler v. Astrue, 687 F.3d 1208, 1212 (9th Cir. 2012)
- Augustine ex rel. Ramirez v. Astrue, 536 F. Supp. 2d 1147, 1153 n.7 (C.D. Cal. 2008)