

UNITED STATES DISTRICT COURT FOR THE CENTRAL DISTRICT OF
CALIFORNIA

Danny A. N. v. Frank Bisignano, Commissioner of Social Security

Danny A. N. v. Bisignano, Case No. EDCV 25-00576-AS (C.D. Cal. Nov. 21, 2025) · No. EDCV 25-00576-AS ·
Decided November 21, 2025

SUMMARY

The United States District Court for the Central District of California reviewed the denial of the plaintiff's applications for disability insurance benefits and supplemental security income. The court held that the administrative law judge failed to provide legally sufficient reasons for discounting the plaintiff's testimony and statements concerning his physical limitations. The matter was remanded for further administrative action pursuant to Sentence Four of 42 U.S.C. § 405(g).

CASE DETAILS

COURT	United States District Court for the Central District of California
WRITING FOR THE COURT	Alka Sagar
JURISDICTION	United States District Court for the Central District of California
DECIDED	November 21, 2025
DOCKET	EDCV 25-00576-AS
DISPOSITION	reversed_and_remanded
PROCEDURAL POSTURE	Plaintiff sought judicial review under 42 U.S.C. § 405(g) of the Commissioner's final decision denying disability insurance benefits and supplemental security income. The district court reversed and remanded for further administrative proceedings under Sentence Four of § 405(g).
STANDARD OF REVIEW	The court reviews the Commissioner's decision for legal error and substantial evidence, considering the record as a whole and weighing both evidence that supports and evidence that detracts from the Commissioner's conclusion.
PRECEDENTIAL VALUE	Unpublished district court memorandum opinion; precedential status not specified in the source.
PARTIES	Danny A. N. v. Frank Bisignano, Commissioner of Social Security

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QUESTIONS PRESENTED

1. Whether the ALJ provided legally sufficient, specific, clear, and convincing reasons for discounting Plaintiff's testimony and statements concerning the severity of his physical limitations.
2. Whether the record supported remand for further administrative proceedings rather than an immediate award of benefits.

HOLDINGS

1. The ALJ failed to provide legally sufficient reasons for discounting Plaintiff's testimony and statements. The ALJ appeared to rely primarily on a lack of supporting objective medical evidence, did not identify specific inconsistencies, and failed to address significant evidence concerning Plaintiff's balance problems, fall risk, shoulder impairments, and ongoing pain-management treatment.
2. Remand for further administrative proceedings was appropriate because additional administrative review could remedy the ALJ's failure to properly assess Plaintiff's testimony and statements.

KEY QUOTATIONS

"If the claimant satisfies this first step, and there is no evidence of malingering, the ALJ must provide specific, clear and convincing reasons for rejecting the claimant's testimony about the symptom severity." (Discussion § B.2)

"The ALJ's reasoning in this case is not sufficiently specific for the Court to conclude that the ALJ rejected Plaintiff's testimony and statements suggesting greater physical limitations on permissible grounds." (Discussion § B.4)

"For the foregoing reasons, the decision of the Commissioner is reversed, and the matter is remanded for further proceedings pursuant to Sentence 4 of 42 U.S.C. § 405(g)." (Order)

FACTUAL BACKGROUND

Plaintiff alleged disability based primarily on physical impairments including cervical degenerative disc disease, diabetes with neuropathy, vertigo, and injuries sustained in a 2019 rollover automobile accident. The medical record contained varying observations concerning Plaintiff's gait, need for an assistive device, balance, strength, pain, and ability to perform daily activities, including ongoing monthly pain-management treatment. Plaintiff testified and reported substantially greater physical limitations than those reflected in the ALJ's residual functional capacity assessment. The ALJ found that Plaintiff could perform a restricted range of light work and denied benefits.

PROCEDURAL HISTORY

Plaintiff filed applications for disability insurance benefits and supplemental security income alleging disability beginning June 5, 2018. The applications were denied initially and on reconsideration; after a hearing, the ALJ denied benefits on April 12, 2024. The Appeals Council denied review on January 27, 2025. The district court concluded that the ALJ inadequately evaluated Plaintiff's testimony and statements about his physical limitations and remanded for further proceedings.

DISPOSITION

reversed_and_remanded

REMAND INSTRUCTIONS

Remand for further administrative proceedings consistent with the opinion, including proper consideration of Plaintiff's testimony and statements regarding his physical impairments in the context of the medical record as a whole.

CASES CITED

- Brewes v. Commissioner of Social Security, 682 F.3d 1157, 1161 (9th Cir. 2012)
- Garrison v. Colvin, 759 F.3d 995, 1009, 1014-15 (9th Cir. 2014)
- Revels v. Berryhill, 874 F.3d 648, 654 (9th Cir. 2017)
- Aukland v. Massanari, 257 F.3d 1033, 1035 (9th Cir. 2001)
- Robbins v. Social Security Administration, 466 F.3d 880, 882-83 (9th Cir. 2006)
- Trevizo v. Berryhill, 871 F.3d 664, 678 & n.5 (9th Cir. 2017)
- Ghanim v. Colvin, 763 F.3d 1154, 1163 (9th Cir. 2014)
- Burrell v. Colvin, 775 F.3d 1133, 1137 (9th Cir. 2014)
- Smolen v. Chater, 80 F.3d 1273, 1284 (9th Cir. 1996)
- Smartt v. Kijakazi, 53 F.4th 489, 498 (9th Cir. 2022)
- Bray v. Commissioner of Social Security Administration, 554 F.3d 1219, 1227 (9th Cir. 2009)
- Tommasetti v. Astrue, 533 F.3d 1035, 1039 (9th Cir. 2008)
- Brown-Hunter v. Colvin, 806 F.3d 487, 493-94 (9th Cir. 2015)
- Rollins v. Massanari, 261 F.3d 853, 857 (9th Cir. 2001)
- Pinto v. Massanari, 249 F.3d 840, 847 (9th Cir. 2001)
- Connett v. Barnhart, 340 F.3d 871, 874 (9th Cir. 2003)
- Harman v. Apfel, 211 F.3d 1172, 1175-81 (9th Cir. 2000)
- McLeod v. Astrue, 640 F.3d 881, 888 (9th Cir. 2011)

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