UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF NEW YORK

# Kara L. v. Commissioner of Social Security

Kara L. · No. 5:25-cv-00086 (ML) · Decided March 24, 2026

## SUMMARY

The United States District Court for the Northern District of New York granted Plaintiff's motion for judgment on the pleadings and denied the Commissioner's cross-motion in a Social Security disability case. The court reversed the Commissioner's decision and remanded the matter under sentence four of 42 U.S.C. § 405(g) for consideration of new and material opinion evidence from Plaintiff's treating primary care physician. The court found that Plaintiff's separate challenge concerning the evaluation of a consultative examiner's opinion did not independently require remand.

## CASE DETAILS

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| COURT | United States District Court for the Northern District of New York |
| WRITING FOR THE COURT | Miroslav Lovric |
| JURISDICTION | United States District Court for the Northern District of New York |
| DECIDED | March 24, 2026 |
| DOCKET | 5:25-cv-00086 (ML) |
| DISPOSITION | reversed_and_remanded |
| PROCEDURAL POSTURE | Plaintiff sought judicial review under 42 U.S.C. § 405(g) of the Commissioner's final administrative decision denying Social Security benefits. The parties filed cross-motions for judgment on the pleadings, and the court reviewed the administrative determination. |
| STANDARD OF REVIEW | The court reviews whether the Commissioner applied correct legal principles and whether the determination is supported by substantial evidence. Substantial evidence is relevant evidence that a reasonable mind would find sufficient to support a conclusion; a factual finding may be rejected only if a reasonable factfinder would have to conclude otherwise. |
| PRECEDENTIAL VALUE | Unpublished district court order; limited persuasive value |
| PARTIES | Kara L. v. Commissioner of Social Security |

## TOPICS

judicial review of agency action | agency adjudication | motion for judgment on the pleadings | administrative law | remedies

## PRACTICE AREAS

Social Security disability | administrative law | federal civil procedure

## QUESTIONS PRESENTED

1. Whether the Appeals Council and Commissioner properly considered Dr. Bradley Layton's previously unavailable, new, and material medical opinion.
2. Whether the ALJ properly incorporated consultative examiner Dr. Jeanne Shapiro's moderate-to-marked mental limitations into the residual functional capacity assessment.

## HOLDINGS

1. Remand was required because Dr. Layton's April 29, 2024 opinion was new, plaintiff had good cause for not submitting it earlier, and the opinion was material because it related back to the alleged onset date and created more than a reasonable possibility of affecting the disability determination.
2. The alleged error in the ALJ's discussion of Dr. Shapiro's opinion did not independently require remand because the RFC's restrictions to low-stress work and only occasional social interaction, decisionmaking, changes in work setting, and judgment were compatible with the assessed moderate-to-marked limitations and any error was harmless.
3. The Commissioner's decision denying benefits was reversed and the matter was remanded for further administrative proceedings without a directed finding of disability.

## KEY QUOTATIONS

> *"The Court must determine whether correct legal principles were applied and whether the determination is supported by substantial evidence, which is defined as such relevant evidence as a reasonable mind would find sufficient to support a conclusion."* (Transcript at 4)

> *"It thus appears a "more than reasonable" possibility that the opinion of plaintiff's primary care physician, who had direct observation of plaintiff's physical and mental health over an 11-year period, could influence the ALJ to reach a different disability determination."* (Transcript at 6-7)

## FACTUAL BACKGROUND

Plaintiff alleged disability based on back pain, depression, and anxiety. Her medical history included lumbar disc disease with radiculopathy, lumbar decompression and fusion, cervical fusion, rheumatoid arthritis, anxiety, and major depressive disorder. She submitted a previously unavailable opinion from her primary care physician, Dr. Bradley Layton, who had treated her for approximately eleven years and described significantly restrictive physical and mental functional limitations, including an inability to meet competitive attendance and pace standards. The ALJ had denied benefits after finding that plaintiff retained the residual functional capacity for

less than the full range of light work and could perform jobs existing in significant numbers in the national economy.

## PROCEDURAL HISTORY

Plaintiff applied for Title II and Title XVI benefits on November 24, 2021, alleging disability beginning April 9, 2019. After a hearing on April 18, 2024, the ALJ denied benefits on April 26, 2024; the Appeals Council denied review on December 10, 2024, making the ALJ's decision final. Plaintiff commenced this action on January 16, 2025. The district court granted plaintiff's motion for judgment on the pleadings, denied the Commissioner's motion, reversed the decision, and remanded for further administrative proceedings under sentence four of 42 U.S.C. § 405(g).

## DISPOSITION

reversed_and_remanded

## REMAND INSTRUCTIONS

Remand to the Commissioner under sentence four of 42 U.S.C. § 405(g) for further administrative proceedings consistent with the opinion and oral bench decision, including proper consideration of Dr. Layton's new and material opinion and likely reassessment of the supportability and consistency of Dr. Shapiro's opinion. No directed finding of disability was ordered.

## CASES CITED

- Brault v. Social Security Administration Commissioner, 683 F.3d 443 (2d Cir. 2012)