

UNITED STATES DISTRICT COURT FOR THE CENTRAL DISTRICT OF
CALIFORNIA

Ana M. L. v. Bisignano

No. 2:24-07643 ADS (C.D. Cal. Sept. 24, 2025) · No. 2:24-07643 ADS · Decided September 24, 2025

SUMMARY

The United States District Court for the Central District of California reviewed the denial of Ana M. L.'s applications for disability insurance benefits and supplemental security income. The court held that the Administrative Law Judge failed to clearly explain how later-period evidence supported discounting evidence and symptom allegations from earlier years, preventing meaningful review and rendering the decision unsupported by substantial evidence. The court reversed the Commissioner's decision and remanded 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	September 24, 2025
DOCKET	2:24-07643 ADS
DISPOSITION	reversed_and_remanded
PROCEDURAL POSTURE	Plaintiff sought judicial review under 42 U.S.C. § 405(g) of the Commissioner's denial of disability insurance benefits and supplemental security income. The court reviewed the administrative decision and remanded for further administrative proceedings.
STANDARD OF REVIEW	The court reviews the Commissioner's decision under 42 U.S.C. § 405(g) to determine whether it is supported by substantial evidence and whether the proper legal standards were applied. The court may review only the reasons provided by the ALJ and may not affirm on a ground on which the ALJ did not rely. An error is harmless if it is inconsequential to the ultimate nondisability determination or if the agency's path can reasonably be discerned.
PRECEDENTIAL VALUE	unknown
PARTIES	Ana M. L. v. Frank Bisignano, Commissioner of Social Security

TOPICS

judicial review of agency action

administrative law

disability definition

remedies

PRACTICE AREAS

Social Security disability benefits

administrative law

judicial review of agency action

QUESTIONS PRESENTED

1. Whether the ALJ's decision finding Plaintiff not disabled was supported by substantial evidence and applied the proper legal standards.
2. Whether the ALJ provided legally sufficient, specific, clear, and convincing reasons for discounting Plaintiff's symptom testimony.
3. Whether the ALJ properly determined Plaintiff's residual functional capacity.

HOLDINGS

1. The ALJ's decision was not supported by substantial evidence because it did not clearly identify or explain the relevant periods being evaluated, particularly how evidence from later years affected the alleged disability period beginning in 2014.
2. The ALJ failed to provide specific, clear, and convincing reasons supported by substantial evidence for discounting portions of Plaintiff's symptom testimony because the ALJ did not explain how later-period medical evidence undermined allegations and evidence from substantially earlier years.
3. Remand for further administrative proceedings on an open record, rather than an immediate award of benefits, was appropriate.

KEY QUOTATIONS

“An ALJ must set forth the reasoning behind her decisions in a way that “allows for meaningful review.””
(Analysis, § IV.C)

“The ALJ failed to provide specific, clear, and convincing reasons supported by substantial evidence for discounting some of Plaintiff’s symptom testimony.” (Analysis, § IV.D.2)

“The decision of the Commissioner denying benefits is hereby reversed, and the matter is remanded for further proceedings consistent with this Order.” (Conclusion)

FACTUAL BACKGROUND

Plaintiff alleged disability based on spinal degeneration, knee, shoulder, and hand conditions, fibromyalgia, and migraine headaches. The record included a 2014 workplace spinal injury, a 2016 fibromyalgia diagnosis, recurrent migraines requiring treatment including occipital nerve blocks, and multiple trigger-finger surgeries. Plaintiff testified about continuing pain and functional limitations, although she also worked full time as a companion during part of 2023. The ALJ relied in part on later-period examinations and activities in evaluating Plaintiff's symptoms and residual functional capacity.

PROCEDURAL HISTORY

Plaintiff filed applications for DIB and SSI in August 2018, alleging disability beginning May 31, 2014. The claims were denied initially and on reconsideration; an ALJ found Plaintiff not disabled in December 2020, and the Appeals Council denied review. Plaintiff filed an earlier district court action, which was remanded by stipulation for further ALJ proceedings. After a second hearing on April 18, 2024, the ALJ again found Plaintiff not disabled on May 8, 2024. Plaintiff filed this action on September 6, 2024. The district court reversed the Commissioner's decision and remanded for further proceedings.

DISPOSITION

reversed_and_remanded

REMAND INSTRUCTIONS

The matter is remanded for further administrative proceedings consistent with the order. The ALJ must clarify the relevant periods assessed and reevaluate Plaintiff's symptom testimony with legally sufficient reasons supported by substantial evidence. The court left Plaintiff's remaining arguments concerning symptom testimony and the RFC for consideration on remand if necessary.

CASES CITED

- Garrison v. Colvin, 759 F.3d 995, 1010, 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, 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, 488-89, 492, 495-96 (9th Cir. 2015)
- Molina v. Astrue, 674 F.3d 1104, 1115 (9th Cir. 2012)
- Smith v. Kijakazi, 14 F.4th 1108, 1111, 1114 (9th Cir. 2021)
- Armstrong v. Commissioner of the SSA, 160 F.3d 587, 589 (9th Cir. 1998)
- Bunnell v. Sullivan, 947 F.2d 341, 345-46 (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, 600 (9th Cir. 1999)
- 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)

OPINION

Ana M. L. v. Bisignano

PER CURIAM.

1 2 3 4 5 6 7

8 UNITED STATES DISTRICT COURT

9 CENTRAL DISTRICT OF CALIFORNIA

10 11 ANA M. L., an Individual, Case No.: 2:24-07643 ADS 12 Plaintiff,

13 v. MEMORANDUM OPINION AND ORDER

14 FRANK BISIGNANO, Commissioner of Social Security, 15 Defendant. 16

17 I. INTRODUCTION

18 Plaintiff (“Plaintiff”) challenges Defendant Frank Bisignano, Commissioner of 19 Social Security’s (hereinafter “Commissioner” or “Defendant”) denial of her applications 20 for disability insurance benefits (“DIB”) under Title II of the Social Security Act and 21 1 Plaintiff’s name has been partially redacted in compliance with Federal Rule of Civil 22 Procedure 5.2(c)(2)(B) and the recommendation of the Committee on Court Administration and Case Management of the Judicial Conference of the United States. 23 2 Frank Bisignano became Commissioner of Social Security on May 7, 2025. Under Federal Rule of Civil Procedure 25(d), she is automatically substituted for Martin 24 O’Malley as Defendant in this suit. 1 supplemental security income (“SSI”) under Title XVI of the Social Security Act. 2 Plaintiff contends that the Administrative Law Judge’s (“ALJ”) decision was not 3 supported by substantial evidence and that the ALJ erred in evaluating Plaintiff’s 4 symptom testimony and erred in the determination of Plaintiff’s residual functional 5 capacity (“RFC”) (Docket (“Dkt.”) No. 15, Plaintiff’s Brief (“Pl. Br.”).) For the reasons 6 stated below, the ALJ’s decision is reversed, and the case is remanded for further 7 proceedings consistent with the opinion below.

8 II. FACTS RELEVANT TO THE APPEAL

9 A review of the entire record reflects certain facts relevant to this appeal. Plaintiff 10 has a ninth-grade education. (Dkt. No. 11, Administrative Record (“AR”) 2895.) 11 Plaintiff has previous work experience as a nurse assistant, working in a nursing home. 12 (AR 50, 2880.) Plaintiff alleges disability due to spinal degeneration, degeneration of 13 the knees, shoulders and hands, fibromyalgia and migraines. (AR 2874.) 14 In January 2014, Plaintiff suffered an injury to the spine at work. (AR 998.) 15 Plaintiff was diagnosed with lumbar spine myofascitis with radicular pain (AR 1009). 16 Plaintiff was diagnosed with fibromyalgia in 2016. (AR 456-8.) 17 Between at least 2016 and 2019, Plaintiff was seen by medical providers for 18 migraine headaches (AR 300-3, 377-8, 382-3, 407-8, 447-9). Plaintiff was noted to have 19 chronic relapsing headaches with tingling in the face, twitching of the left eye and 20 blurred vision. (AR 383). Plaintiff received injections for occipital nerve blocks and 21 Toradol for the migraine pain. (AR 382-3, 408, 426.) Plaintiff continued to have visual 22 disturbance, nausea, light sensitivity, noise sensitivity and vomiting. (AR 447-8, 450).

23 In 2016, Plaintiff's MRI was normal. (AR 449).

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1 In 2016, Plaintiff was seen for multiple trigger fingers, left long and ring fingers.

2 (AR 427-8, 431). Plaintiff underwent multiple surgeries for her trigger fingers. 3 (AR 343-4, 348-9.) Plaintiff continued to experience pain and tenderness in her hands. 4 (AR 2118.) 5 At the first hearing before an ALJ, on September 29, 2020, Plaintiff testified that 6 she suffers from migraine headaches requiring injections. (AR 50, 53.) Plaintiff 7 described problems with her left hand, and that both of her hands are weak and swollen 8 with pain. (AR 50.) At the second hearing before an ALJ, on April 18, 2024, among 9 other things, Plaintiff testified that she suffered from migraine headaches, fibromyalgia 10 pain, hand problems, and knee problems. (AR 2899, 2903, 2904, 2907.) 11 Plaintiff testified that in January 2023, she began working full time as a 12 companion for a woman with chronic physical disabilities. (AR 2870.) In that job, 13 Plaintiff accompanies the woman and participates in activities with her. (Id.)

14 III. PROCEEDINGS BELOW

15 A. Procedural History 16 On August 8, 2018, Plaintiff protectively filed a Title II application for a period of 17 disability and disability insurance benefits. (AR 21.) On August 9, 2018, Plaintiff also 18 filed a Title XVI application for supplemental security income. (Id.) In both 19 applications, the claimant alleged disability beginning May 31, 2014. (Id.) Plaintiff's 20 claims were denied initially on October 23, 2018, and upon reconsideration on March 8, 21 2019. (Id.) Plaintiff filed a written request for a hearing on May 8, 2019. (Id.) The ALJ 22 held a telephonic hearing on September 29, 2020. (Id.) On December 1, 2020, the ALJ 23 issued a written decision finding that Plaintiff was not disabled. (AR 33.) The ALJ's 24 decision became the Commissioner's final decision when the Appeals Council denied 1 Plaintiff's request for review on December 1, 2020. (AR 1.) Plaintiff then filed an action 2 in District Court on September 21, 2021. *Ana Maria Lopez v. Kilolo Kijakazi*, Case No: 3 2:21-cv-07559-ADS (C.D. Cal. Sep. 21, 2021). Based upon the parties' stipulation, the 4 Court remanded the case for further proceedings before the ALJ. (Id. at Dkt. 26.) 5 The ALJ held a telephone hearing on April 18, 2024. (AR 2892.) Plaintiff, 6 represented by counsel, testified at the hearing, as did a vocational expert. (Id. at 2893.) 7 On May 8, 2024, the ALJ found Plaintiff was not disabled within the meaning of the 8 Social Security Act. (AR 2883.) Plaintiff then filed this action in District Court on

9 September 6, 2024, challenging the ALJ's decision. (Dkt. No. 1.) The case is ready for

10 decision.³ 11 B. Summary of ALJ Decision After Hearing 12 As an initial matter, the ALJ determined that Plaintiff met the insured status 13 requirements for DIB through December 31, 2020. (AR 2868.) 14 In the decision (AR 2867-83), the ALJ followed the required five-step sequential 15 evaluation process under the Social Security Act to assess whether Plaintiff was 16 disabled.⁴ See 20 C.F.R. § 404.1520(a). At step one, the ALJ found that Plaintiff had 17 3 The parties filed consents to proceed before a United States Magistrate Judge, 18 pursuant to 28 U.S.C. § 636(c), including for entry of final Judgment. (Dkt. Nos. 9-10.) 4 The ALJ follows a five-step

sequential evaluation process to assess whether a claimant is disabled: Step one: Is the claimant engaging in substantial gainful activity? If so, the claimant is found not disabled. If not, proceed to step two. Step two: Does the claimant have a “severe” impairment? If so, proceed to step three. If not, then a finding of not disabled is appropriate. Step three: Does the claimant’s impairment or combination of impairments meet or equal an impairment listed in 20 C.F.R., Pt. 404, Subpt. P, App. 1? If so, the claimant is automatically determined disabled. If not, proceed to step four. Step four: Is the claimant capable of performing his past work? If so, the claimant is not disabled. If not, proceed to step five. Step five: Does the claimant have the residual functional capacity to perform any other work? If so, the claimant is not disabled. If not, the claimant is disabled. *Lester v. Chater*, 81 F.3d 821, 828 n.5 (9th Cir. 1996) (as amended). Plaintiff engaged in substantial gainful activity during the period of January 2023 to December 2 2023. (AR 2870.) The ALJ also found that there have been continuous 12-month periods during which claimant did not engage in substantial gainful activity and stated that the rest of the findings are limited to those periods, without explicitly identifying those periods. At step two, the ALJ found that Plaintiff had the following severe impairments: degenerative disc disease of the cervical and lumbar spine; degenerative joint disease of the knees with meniscus repair; degenerative joint disease of the shoulders with arthroscopic surgery; trigger fingers and de Quervain’s tenosynovitis of the hands; fibromyalgia; and migraine headaches (AR 2871.) At step three, the ALJ found that Plaintiff did not have an impairment or combination of impairments that met or medically equaled the severity of one of the listed impairments in 20 CFR Part 404, Subpart P, Appendix 1 (the “Listings”). (AR 2873.) The ALJ then found that Plaintiff had the RFC to perform to perform a full range of light work as defined in 20 CFR 404.1567(b) and 416.967(b), except as follows: She needs an opportunity to change positions as often as every thirty minutes for one to two minutes. The claimant is precluded from any ladder, rope, and scaffold climbing, all crawling tasks, and all dangerous work hazards exposure. The claimant is limited to performing the remaining postural motions occasionally. With the bilateral upper extremities, the claimant is limited to occasional overhead reaching tasks, and is limited to frequent, but not constant, forward reaching, handling, and fingering tasks. She is limited to having occasional exposure to extreme heat, humidity, and cold conditions. The claimant is limited to performing up to detailed, but not complex, work tasks, work not requiring a production quota pace (ie assembly line environment where one’s work impacts work down the line), and work allowing the claimant to be off task up to three percent of a workday due to momentary symptom distractions. An RFC is what a claimant can still do despite existing exertional and nonexertional limitations. See 20 C.F.R. § 404.1545(a)(1). At step four, the ALJ found Plaintiff has been unable to perform any past relevant work. (AR 2880.) At step five, considering Plaintiff’s age, education, work experience, and RFC, the ALJ found that there were jobs existing in significant numbers in the national economy that Plaintiff could perform, including representative occupations such as router, counter attendant, storage facility rental clerk, and

small 7 products assembler. (AR 2881.) Accordingly, the ALJ determined that Plaintiff was not 8 disabled from May 31, 2014, through the date of the decision, May 8, 2024. (AR 2882– 9 83.)

10 IV. ANALYSIS

11 A. Issues on Appeal 12 Plaintiff raises the following issues for review: (1) whether the ALJ's decision was 13 supported by substantial evidence; (2) whether the ALJ erred in evaluating Plaintiff's 14 symptom testimony and (3) whether the ALJ erred in her determination of the RFC. (Pl. 15 Br., Dkt. No. 15 at 17, 18, 27.) 16 B. Standard of Review 17 A United States District Court may review the Commissioner's decision to deny 18 benefits pursuant to 42 U.S.C. § 405(g). The District Court is not a trier of the facts but 19 is confined to ascertaining by the record before it if the Commissioner's decision is 20 based upon substantial evidence. *Garrison v. Colvin*, 759 F.3d 995, 1010 (9th Cir. 2014) 21 (District Court's review is limited to only grounds relied upon by ALJ) (citing *Connett v. 22 Barnhart*, 340 F.3d 871, 874 (9th Cir. 2003)). A court must affirm an ALJ's findings of 23 fact if they are supported by substantial evidence and if the proper legal standards were 24 applied. *Mayes v. Massanari*, 276 F.3d 453, 458-59 (9th Cir. 2001) (as amended). An 1 ALJ can satisfy the substantial evidence requirement "by setting out a detailed and 2 thorough summary of the facts and conflicting clinical evidence, stating his 3 interpretation thereof, and making findings." *Reddick v. Chater*, 157 F.3d 715, 725 (9th 4 Cir. 1998) (citation omitted).

5 "[T]he Commissioner's decision cannot be affirmed simply by isolating a specific 6 quantum of supporting evidence. Rather, a court must consider the record as a whole, 7 weighing both evidence that supports and evidence that detracts from the Secretary's 8 conclusion." *Aukland v. Massanari*, 257 F.3d 1033, 1035 (9th Cir. 2001) (citations and 9 internal quotation marks omitted). "Where evidence is susceptible to more than one 10 rational interpretation,' the ALJ's decision should be upheld." *Ryan v. Comm'r*, 528 11 F.3d 1194, 1198 (9th Cir. 2008) (citing *Burch v. Barnhart*, 400 F.3d 676, 679 (9th Cir. 12 2005)); see *Robbins v. Soc. Sec. Admin.*, 466 F.3d 880, 882 (9th Cir. 2006) ("If the 13 evidence can support either affirming or reversing the ALJ's conclusion, we may not 14 substitute our judgment for that of the ALJ."). However, the Court may review only "the 15 reasons provided by the ALJ in the disability determination and may not affirm the ALJ 16 on a ground upon which he did not rely." *Orn v. Astrue*, 495 F.3d 625, 630 (9th Cir. 17 2007) (citation omitted). 18 Lastly, even if an ALJ errs, the decision will be affirmed where such error is 19 harmless, that is, if it is "'inconsequential to the ultimate nondisability determination,'" 20 or if "'the agency's path may reasonably be discerned, even if the agency explains its 21 decision with less than ideal clarity.'" *Brown-Hunter v. Colvin*, 806 F.3d 487, 492 (9th

22 Cir. 2015) (as amended) (citation omitted); *Molina v. Astrue*, 674 F.3d 1104, 1115 (9th 23 Cir. 2012), superseded by regulation on other grounds as stated in *Smith v. Kijakazi*, 14 24 F.4th 1108, 1111 (9th Cir. 2021). 1 C. The ALJ's Decision is Not Supported by Substantial Evidence 2 Plaintiff argues generally that the ALJ's decision is not supported by substantial 3

evidence and contains legal error. (Pl. Br. at 18.) More specifically, Plaintiff argues that the ALJ erred in evaluating and discounting Plaintiff's symptom testimony and in developing the RFC. In opposition, Defendant argues that the ALJ's decision is supported by substantial evidence. Defendant contends that the ALJ properly considered Plaintiff's work, daily activities and treatment noncompliance as inconsistent with Plaintiff's subjective complaints. (Def. Br., Dkt. No. 19 at 4–6.) According to Defendant, the ALJ properly evaluated Plaintiff's RFC because she did not have a duty to incorporate unsupported limitations into the RFC. (Def. Br. at 9–10.) The Court finds generally that ALJ's decision is lacking sufficient clarity regarding the relevant time period assessed, which hinders the Court's ability to provide meaningful review. An ALJ must set forth the reasoning behind her decisions in a way that "allows for meaningful review." *Brown-Hunter v. Colvin*, 806 F.3d 487, 492 (9th Cir. 2015). A "reviewing court should not be forced to speculate as to the grounds for an adjudicator's rejection of a claimant's allegations". *Bunnell v. Sullivan*, 947 F.2d 341, 346 (9th Cir. 1991) (citing *Murray v. Heckler*, 722 F.2d 499, 502 (9th Cir.1983)). Here, the ALJ's decision has not met this bar. The ALJ's opinion fails to clearly explain its reasoning for finding that Plaintiff was not disabled for the entire ten-year period described in the opinion. Plaintiff alleged a disability onset date of May 31, 2014. (AR 2867.) The ALJ found Plaintiff's date last insured was December 31, 2020. (AR 1867, 2869.) Therefore, to obtain disability benefits, Plaintiff must demonstrate that she was disabled prior to her last insured date. See *Armstrong v. Commissioner of the SSA*, 160 F.3d 587, 589 (9th Cir. 1998) (citing 42 U.S.C. § 423(c)). The ALJ's May 8, 2024 opinion found Plaintiff not disabled from May 2014 through the date of the opinion. The ALJ's decision states that there have been "continuous 12-month periods during which the claimant did not engage in substantial gainful activity" and that the ALJ's remaining findings "address the periods the claimant did not engaged in substantial gainful activity." (AR 2869.) The decision does not further specify the periods it addresses. The parties do not clarify in their briefing which time period(s) they are arguing about either. Plaintiff argues the ALJ improperly relied on evidence from 2023 to discredit evidence from much earlier in the relevant period. (Pl. Br. at 19, 24–23, 25.) Defendant argues the ALJ properly evaluated the evidence. (Def. Br. at 6.) However, a review of the ALJ's decision reflects that the ALJ never explained how evidence from later in the time period examined, such as 2022–2023, properly discounts evidence from much earlier in the time period, such as 2014–2017. This hinders the Court's review of the issues because Plaintiff's symptoms may have waxed and waned at times between 2014 and 2023. (Pl. Br. at 19.) However, temporary improvement does not preclude the possibility that Plaintiff was "was disabled for a qualifying portion of the time from [her] alleged onset date, even if not for the full period." See *Smith v. Kijakazi*, 18 F.4th 1108, 1114 (9th Cir. 2021) (holding the ALJ erred in rejecting claimant's testimony wholesale without explaining how her rationale for finding the late-period testimony not credible applied to the early-period testimony). The ALJ concluded that Plaintiff was not disabled from May 31, 2014,

through

22 May 8, 2024. (AR 2882–83.) Besides the period from January 2023 to December

23 2023, when the ALJ found Plaintiff had been engaged in substantial gainful activity, the 24 conclusion that Plaintiff was not under a disability for the rest of the time, is not 1 supported by substantial evidence. 2 D. The ALJ’s Evaluation of Plaintiff’s Testimony 3 Plaintiff argues that the ALJ erred in evaluating and discounting Plaintiff’s 4 symptom testimony. Specifically, Plaintiff asserts that the ALJ erred by citing normal 5 findings to discount the severity of Plaintiff’s complaints regarding her fibromyalgia, 6 knee pain, shoulder degeneration with tear, neck pain, back pain, hand arthritis with 7 trigger fingers and migraines. (Pl. Br. 18, 20, 21, 24, 25.) Plaintiff argues that the ALJ 8 erred by failing to look at the record as whole when evaluating Plaintiff’s symptom 9 testimony. (Id. at 23, 25.) Plaintiff reiterates her interpretation of the medical records 10 before the ALJ. (Id. at 16–17.) In opposition, Defendant argues that the ALJ properly 11 considered Plaintiff’s work, daily activities and treatment noncompliance as inconsistent 12 with Plaintiff’s subjective complaints. (Def. Br., Dkt. No. 19 at 4–6.) 13 1. Legal Standard for Evaluating Plaintiff’s Testimony 14 A claimant carries the burden of producing objective medical evidence of his or 15 her impairments and showing that the impairments could reasonably be expected to 16 produce some degree of the alleged symptoms. See *Benton ex rel. Benton v. Barnhart*, 17 331 F.3d 1030, 1040 (9th Cir. 2003). Once the claimant meets that burden, medical 18 findings are not required to support the alleged severity of pain. See *Bunnell v. Sullivan*, 19 947 F.2d 341, 345 (9th Cir. 1991) (en banc) (“an adjudicator may not reject a claimant’s 20 subjective complaints based solely on a lack of objective medical evidence to fully 21 corroborate the alleged severity of pain”); *Light v. Soc. Sec. Admin.*, 119 F.3d 789, 792 22 (9th Cir. 1997) (same). 23 If the claimant provides objective medical evidence of the impairments which 24 might reasonably produce the symptoms or pain alleged and there is no evidence of 1 malingering, the ALJ “may reject the claimant’s testimony about the severity of those 2 symptoms only by providing specific, clear and convincing reasons for doing so.” 3 *Brown-Hunter*, 806 F.3d at 488-89 (“we require the ALJ to specify which testimony she 4 finds not credible, and then provide clear and convincing reasons, supported by 5 evidence in the record, to support that credibility determination”); *Benton*, 331 F.3d at 6 1040 (explaining that after a claimant has met the burden of producing objective 7 medical evidence, an ALJ can reject the claimant’s subjective complaints “only upon (1) 8 finding evidence of malingering, or (2) expressing clear and convincing reasons for 9 doing so.”); see also Social Security Ruling (“SSR”) 16-3p (findings “must contain 10 specific reasons for the weight given to the individual’s symptoms, be consistent with 11 and supported by the evidence, and be clearly articulated so the individual and any 12 subsequent reviewer can assess how the adjudicator evaluated the individual’s 13 symptoms”). 14 The ALJ may consider a number of factors when weighing the claimant’s 15 credibility, including: (1) his or her reputation for truthfulness; (2) inconsistencies 16 either in the claimant’s testimony or between the claimant’s testimony and his or her 17 conduct; (3) his or her daily activities; (4) his or her work record; and

(5) testimony 18 from physicians and third parties concerning the nature, severity, and effect of the 19 symptoms of which he or she complains. See *Thomas v. Barnhart*, 278 F.3d 948, 958-59 20 (9th Cir. 2002) (citing *Light*, 119 F.3d at 792). “If the ALJ’s credibility finding is 21 supported by substantial evidence in the record, [the court] may not engage in second- 22 guessing.” *Thomas*, 278 F.3d at 959 (citing *Morgan v. Comm’r of Soc. Sec. Admin.*, 169 23 F.3d 595, 600 (9th Cir. 1999)). 24 1 2. The ALJ Erred in Discounting Plaintiff’s Symptom Testimony 2 Here, the ALJ found Plaintiff’s medically determinable impairments could reasonably 3 be expected to cause the alleged symptoms, but Plaintiff’s testimony was not entirely 4 consistent with the medical evidence and other evidence in the record. (AR 2875.) The 5 ALJ failed to provide specific, clear, and convincing reasons supported by substantial 6 evidence for discounting some of Plaintiff’s symptom testimony. Specifically, the ALJ 7 failed to explain how later evidence discounts evidence from earlier years, including 8 substantially earlier years. 9 For example, in discounting Plaintiff’s testimony regarding knee symptoms, the ALJ 10 states that Plaintiff underwent knee surgery in 2016 and “examinations have not 11 indicated limitations consistent with the claimant’s allegations since that time.” 12 (AR 2876.) 13 While the claimant’s gait was characterized as slow in August 2018, 14 providers stated it was normal in September 2018 (Exhibit 2F/ 8, 12). Evaluation in October 2018 showed no findings of a limp, and the claimant 15 additionally had a normal gait and posture in October 2020 (Exhibit 4F/ 26; Exhibit 12F/ 225). While the claimant had some knee crepitus in 16 October 2018, the claimant did not exhibit tenderness to either knee (Exhibit 4F/ 26). The record does suggest some subsequent worsening of 17 knee pain with observations of bilateral tenderness in May 2023, as well as imaging showing a subtle meniscus tear in the left knee (Exhibit 11F/ 32; 18 Exhibit 12F/ 721). Nonetheless, the claimant continued to have good range of motion and stability in July 2023 and November 2023, and walked 19 without a limp in November 2023 (Exhibit 12F/ 796, 873). Because the evidence does indicate a period of significant limitations due to meniscus 20 tear in the right knee, but the claimant has generally demonstrated good knee mobility and intact gait since knee surgery, the undersigned does not 21 find these allegations fully supported. (AR 2876.) The ALJ does not explain how medical evidence from 2018 and 2023 22 speaks to the Plaintiff’s allegations regarding knee pain between 2014 and 2017. 23 Therefore, the ALJ’s the ALJ’s discounting of Plaintiff’s symptom testimony regarding 24 1 her knee condition is not supported by substantial evidence. 2 In another example, the ALJ used evidence from 2020 and later to discount 3 allegations of shoulder limitations from the entire prior period. Regarding Plaintiff’s 4 shoulder, the ALJ acknowledged Plaintiff’s reduced strength, flexion and abduction in 5 2017; impingement, diminished range of motion and tenderness in 2017; and imaging 6 from 2018 establishing a history of tendinosis and acromioclavicular arthritis in the 7 right shoulder. (AR 2876.) To discount this evidence the ALJ stated, “[h]owever, the 8 claimant had recovered full active range of motion and full strength despite some pain 9 and

minimal crepitus in January 2020”, noting that Plaintiff had a shoulder surgery in 10 2018. (Id.) The ALJ further states, 11 Nevertheless, the claimant had well-preserved range of motion and strength 12 despite pain in April 2023 and July 2023, inconsistent with serious worsening in that shoulder (Exhibit 12F/ 544, 705). Accordingly, because 13 the claimant’s range of motion and strength in the right shoulder improved with surgery, and the claimant has not displayed similar impairment in the 14 left shoulder despite new evidence of arthritis and tendinosis, the undersigned finds these allegations partially supported. 15 16 (AR 2876.) The ALJ provided no explanation for how evidence from 2020 and 2023 17 discounted allegations and evidence from as early as 2014. Therefore, the ALJ’s 18 discounting of Plaintiff’s symptom testimony regarding her shoulder condition is not 19 supported by substantial evidence. 20 In yet another example, the ALJ similarly used late period evidence to discount 21 earlier period evidence regarding Plaintiff’s migraines without explanation. The 22 decision states, 23 However, the medical evidence does not consistently indicate distress 24 commensurate with her pain complaints, with the claimant exhibiting only 1 mild distress in January 2023 despite reports of severe had pain (Exhibit 11F/ 3). Likewise, despite seeking treatment for a headache in February 2 2018, she had conceded that she was not in severe pain (Exhibit 2F/ 44-45). Moreover, the claimant had normal cranial nerves in November 2016 and 3 no apparent neurological deficits in September 2022 despite complaints of facial tingling (Exhibit 2F/ 113; Exhibit 12F/ 586-88). Additionally, while 4 the claimant has received injections including occipital nerve blocks for these headaches, the claimant had reported sustained relief lasting more 5 than three months at a time, inconsistent with the persistence and frequency of headaches that the claimant alleges (Exhibit 2F/ 45, 108; 6 Exhibit 8F/ 481).

7 (AR 2877.) The evidence cited regarding Plaintiff receiving occipital nerve blocks was 8 from 2018 and 2019. (AR 379, AR 1067.) Again, the ALJ provided no explanation for 9 how evidence from 2018, 2019, 2022 and 2023 discounted allegations and evidence 10 from as early as 2014. Therefore, the ALJ’s the ALJ’s discounting of Plaintiff’s migraine 11 symptom testimony is not supported by substantial evidence. 12 A. Remand For Further Administrative Proceedings 13 The Court finds the ALJ failed to provide legally sufficient reasons, supported by 14 substantial evidence, to support the finding Plaintiff was not disabled from May 2014 15 through at least the date last insured. Remand for further administrative proceedings, 16 rather than an award of benefits, is warranted here, as further administrative review 17 could remedy the ALJ’s error. See Brown-Hunter, 806 F.3d at 495 (remanding for an 18 award of benefits is appropriate in rare circumstances). As it is unclear whether 19 Plaintiff is in fact disabled, remand is on an “open record.” Id. at 496 (“We may remand 20 on an open record for further proceedings ‘when the record as a whole creates serious 21 doubt as to whether the claimant is, in fact, disabled within the meaning of the Social 22 Security Act.’” (quoting Garrison, 759 F.3d at 1021)). 23 24 1 E. Plaintiff’s Remaining Arguments 2 Given that remand is warranted, the Court declines to address Plaintiff’s 3 remaining arguments regarding further symptom testimony and the RFC. Those

issues, 4 if necessary, may be addressed on remand. See *Hiler v. Astrue*, 687 F.3d 1208, 1212 (9th Cir. 2012) (“Because we remand the case to the ALJ for the reasons stated, we decline to reach [plaintiff’s] alternative ground for remand.”); *Augustine ex rel. Ramirez v. Astrue*, 753 F. Supp. 2d 1147, 1153 n.7 (C.D. Cal. 2008) (“[The] Court need not address the other 8 claims plaintiff raises, none of which would provide plaintiff with any further relief than 9 granted, and all of which can be addressed on remand.”).

10 V. CONCLUSION

11 The decision of the Commissioner denying benefits is hereby reversed and the 12 matter is remanded for further proceedings consistent with this Order. Judgment shall 13 be entered accordingly. 14 DATED: September 24, 2025 15 /s/ Autumn D. Spaeth

THE HONORABLE AUTUMN D. SPAETH

16 United States Magistrate Judge 17 18 19 20 21 22 23 24