

**UNITED STATES DISTRICT COURT FOR THE CENTRAL DISTRICT OF
CALIFORNIA**

Hilary Ann S. v. Frank Bisignano

Hilary Ann S. · No. 5:25-cv-00113-KES · Decided June 27, 2025

OPINION

Hilary Ann Stensen v. Carolyn Colvin

PER CURIAM.

1 O 2 3 4 5 6 7

8 UNITED STATES DISTRICT COURT

9 CENTRAL DISTRICT OF CALIFORNIA

10 11 HILARY ANN S., Case No. 5:25-cv-00113-KES 12 Plaintiff,

13 v. MEMOR ANDUM OPINION

14 FRANK BISIGNANO, AND ORDER

15 Commissioner of Social Security, 16 Defendant.1 17 18 I.

19 INTRODUCTION

20 On January 15, 2025, Plaintiff Hilary Ann S. (“Plaintiff”) filed a Complaint 21 for review of
denial of social security disability benefits. (Dkt. 1.) Plaintiff filed a 22 Plaintiff’s Brief under
Rule 6 of the Supplemental Rules for Social Security Actions 23 under 42 U.S.C. § 405(g). (“PB”
at Dkt. 12.) Defendant filed a responding 24 Commissioner’s Brief under Rule 7. (“CB” at Dkt.
14.) Plaintiff filed a Reply 25 1 Frank Bisignano became Commissioner of Social Security on
May 7, 2025. 26 Under Federal Rule of Civil Procedure 25(d), he is automatically substituted as
27 Defendant in this suit. The Clerk is directed to update the electronic docket accordingly. 28 1
Brief. (“PRB” at Dkt. 15.) For the reasons stated below, the Commissioner’s 2 decision denying
benefits is AFFIRMED. 3 II.

4 BACKGROUND

5 Plaintiff was born in September 1983. Administrative Record (“AR”) 454. 6 After graduating
from high school, she did parttime data entry/telemarketing for a 7 mortgage business from
January 2000 to October 2010. AR 67, 292. Due to 8 mental illness, she initially filed for Social
Security Disability Insurance Benefits 9 (“DIB”) and was awarded with an entitlement date of
July 2008. AR 99, 441. In

10 April 2016, she was again found disabled. AR 25, 105.

11 The Social Security Administration (“SSA”) later conducted a review and 12 notified Plaintiff
that her benefits ceased as of October 1, 2019, due to medical 13 improvement. AR 110-13, 441.
In October 2019, Plaintiff had full custody of her 14 five-month-old daughter. AR 643, 718-19,
805. She lived with and cared for her 15 daughter without assistance. AR 63, 69. By October

2020, Plaintiff returned to 16 work as a loan processor. AR 53. After she was laid off in April 2021, she worked 17 a second job from July 2021 until November 2021. AR 55. She was laid off 18 because there was “not enough work” to hit her goals. AR 55. She worked a third 19 loan processing job from January to March 2022 making \$8,000/month. AR 57. 20 She was laid off again because “there just wasn’t enough business coming in.” AR 21 56-7. In February 2024, she testified that she would still be doing that job had she 22 not been laid off. AR 72. These positions were remote, allowing her to work from 23 home while providing childcare. AR 56. 24 Plaintiff, acting through counsel, challenged the determination that her 25 disability had ended in October 2019. On February 16, 2024, the ALJ conducted a 26 telephonic hearing at which a vocational expert (“VE”) and Plaintiff testified. AR 27 47-80. On April 4, 2024, the ALJ published an unfavorable opinion. AR 20-46. 28 The ALJ found that Plaintiff suffered from the severe, medically determinable 1 impairments (“MDIs”) of “bipolar disorder, generalized anxiety disorder, 2 borderline personality disorder, substance use disorder, obesity, and post-partum 3 depression.” AR 25. The ALJ determined that without substance abuse, Plaintiff’s 4 mental impairments were severe, but not so severe as to satisfy a medical listing. 5 AR 27-28. The ALJ further determined that if Plaintiff stopped abusing substances, 6 she would have the residual functional capacity (“RFC”) to perform work at all 7 exertional levels with the following non-exertional limitations: 8 [Plaintiff] can understand, remember, and carryout simple routine 9 tasks for up to two-hour periods of time with only occasional 10 interaction with the general public; no fast-paced production or 11 assembly line type work (fast-paced work is defined as work requiring 12 more than frequent use of the hands); and only minimal changes in the 13 workplace setting or routine. 14 AR 31. 15 Based on these RFC findings, the VE’s testimony, and other evidence, the 16 ALJ concluded that if Plaintiff were not abusing substances, Plaintiff could work as 17 a counter supply worker, hospital cleaner, and store laborer. AR 38. The ALJ 18 concluded that Plaintiff was not disabled as of October 2019. AR 39. 19 III.

20 ISSUE PRESENTED

21 Issue One: Whether the ALJ erred in evaluating the August 2023 medical 22 opinions of Celina Marciano, LMFT, Psy.D.2 (PB at 8.) 23 2 Judge Scott instructs plaintiffs appealing the denial of social security 24 disability benefits to include in their brief “a section labeled ‘Issues Presented’ that enumerates each claimed error by the Administrative Law Judge.” See 25 <https://www.cacd.uscourts.gov/honorable-karen-e-scott>, ¶ 27. Plaintiff did not do 26 so, and her first argument heading (i.e., that the ALJ failed to evaluate “medical opinions in the record” properly (PB at 7)), is too broad to identify adequately a 27 particular error by the ALJ. The Court construes Plaintiff’s brief as challenging the 28 ALJ’s decision to give “little weight” to the August 2023 opinions of Dr. Marciano, 1 Issue Two: Whether the ALJ erred by failing to articulate clear and 2 convincing reasons for discounting Plaintiff’s subjective symptom testimony. (PB 3 at 13.) 4 IV.

5 DISCUSSION

6 A. ISSUE ONE: Dr. Marciano. 7 1. Relevant Law. 8 In January 2017, the Social Security Administration (“SSA”) issued revised 9 regulations for evaluating medical opinions for claims filed on or after March 27, 10 2017. See Revisions to Rules Regarding the Evaluation of Medical Evidence, 82 11 Fed. Reg. 5844-01 (Jan. 18, 2017) (codified at 20 C.F.R. pts. 404 & 416). The 12 regulations set “supportability” and “consistency” as “the most important factors” 13 when determining the opinions’ persuasiveness. 20 C.F.R. § 404.1520c(b)(2). 14 Although the regulations eliminate the “physician hierarchy,” deference to specific 15 medical opinions, and assigning “weight” to a medical opinion, the ALJ must still 16 “articulate how [they] considered the medical opinions” and “how persuasive [they] 17 find all of the medical opinions.” 20 C.F.R. § 404.1520c(a)-(b). 18 Recently, the Ninth Circuit provided the following guidance regarding 19 treatment of physicians’ opinions under the revised regulations: 20 The revised social security regulations are clearly irreconcilable with 21 our caselaw according special deference to the opinions of treating and 22 examining physicians on account of their relationship with the 23 claimant. See 20 C.F.R. § 404.1520c(a) (“We will not defer or give 24 any specific evidentiary weight, including controlling weight, to any 25 medical opinion(s) ..., including those from your medical sources.”). 26 Our requirement that ALJs provide “specific and legitimate reasons” 27 because that is what Plaintiff’s brief mainly discusses. (PB at 8-12.) 28 1 for rejecting a treating or examining doctor’s opinion, which stems 2 from the special weight given to such opinions, see *Murray [v. 3 Heckler]*, 722 F.2d [499,] 501-02 [(9th Cir. 1983)], is likewise 4 incompatible with the revised regulations. Insisting that ALJs provide 5 a more robust explanation when discrediting evidence from certain 6 sources necessarily favors the evidence from those sources—contrary 7 to the revised regulations. 8 *Woods v. Kijakazi*, 32 F.4th 785, 792 (9th Cir. 2022). Accordingly, under the new 9 regulations, “the decision to discredit any medical opinion, must simply be 10 supported by substantial evidence.” *Id.* at 787. 11 In conjunction with this requirement, “[t]he agency must ‘articulate ... how 12 persuasive’ it finds ‘all of the medical opinions’ from each doctor or other source, 13 and ‘explain how [it] considered the supportability and consistency factors’ in 14 reaching these findings.” *Id.* at 792 (citing 20 C.F.R. § 404.1520c(b)); see also 20 15 C.F.R. § 416.920c(b). “Supportability means the extent to which a medical source 16 supports the medical opinion by explaining the ‘relevant ... objective medical 17 evidence.’” *Id.* at 791-92 (quoting 20 C.F.R. § 404.1520c(c)(1)). “Consistency 18 means the extent to which a medical opinion is ‘consistent ... with the evidence 19 from other medical sources and nonmedical sources in the claim.’” *Id.* at 792 20 (quoting 20 C.F.R. § 404.1520c(c)(2)). 21 2. Summary of Dr. Marciano’s August 2023 Opinions. 22 On August 29, 2023, Dr. Marciano wrote a “psychological evaluation” of 23 Plaintiff. AR 685-90. She also completed a mental impairment questionnaire form. 24 AR 691-95. In her evaluation, Dr. Marciano indicated that she had reviewed 25 Plaintiff’s outpatient mental health treatment records, including those from Inland 26 Psychiatric Medical Group. AR 685. Dr. Marciano listed the conditions with 27 which Plaintiff had been diagnosed, provided a general explanation of those 28 conditions, and summarized the symptoms

that Plaintiff reported. AR 686-89. She then assessed that Plaintiff had “severe cognitive impairment.” AR 690. Dr. Marciano concluded that Plaintiff’s psychological symptoms caused her “to experience marked restriction of daily life activities along with marked difficulties in maintaining focus and concentration.” AR 690. In the questionnaire, Dr. Marciano indicated that Plaintiff had “marked” or “moderate-to-marked” limitations in thirteen areas of mental functioning, including understanding and remembering detailed instructions, carrying out detailed instructions, and sustaining an ordinary routine without supervision. AR 694. She opined that Plaintiff had “moderate” limitations in performing even simple mental tasks, such as understanding, remembering, and carrying out “one-to-two step instructions,” asking “simple questions,” making “simple decisions,” and taking precautions against hazards. AR 694. In the context of social security regulations addressing mental illness, an “extreme” limitation means an inability to function independently, appropriately, or effectively, and on a sustained basis. A “marked” limitation means the ability to function independently, appropriately, or effectively, and on a sustained basis is seriously limited. A “moderate” limitation means the ability to function independently, appropriately, or effectively, and on a sustained basis is “fair.” 20 C.F.R. Pt. 404, Subpt. P, App. 1, § 12.00F2. At the February 2024 hearing, the ALJ asked Plaintiff, “Who is Dr. Celina Marciano?” AR 77. Plaintiff responded, “She is a clinical psychiatrist that Omar Ortega Disability Group, my attorney, referred to me to do a psychological evaluation.” AR 77. When asked how often she had seen Dr. Marciano, Plaintiff explained, “Oh, I just did an evaluation with her over the phone last year. So I think once or twice I’ve spoken to her.” AR 77. 3. Relevant Administrative Proceedings. The ALJ summarized the August 2023 medical opinions of Dr. Marciano, assigning them “little weight.” AR 36. The ALJ found that Dr. Marciano failed to support her opinions with “references to medically acceptable objective clinical or diagnostic findings.” Id. The ALJ also found Dr. Marciano’s opinions “inconsistent with evidence from other medical and nonmedical sources.” AR 36. 4. Analysis of Claimed Error. First, Plaintiff argues that Dr. Marciano adequately supported her findings by reviewing Plaintiff’s medical records and conducting a “full examination.” (PB at 7 8.) But Dr. Marciano’s report does not explain how any facts learned from Plaintiff’s medical records or during her telephonic examination supported her findings. When asked to identify the clinical findings that supported her assessments, Dr. Marciano wrote “N/A.” AR 693. Next, Plaintiff argues that the ALJ cherry-picked the medical evidence by citing “normal mental status examinations” (“MSEs”) as inconsistent with Dr. Marciano’s opinions. (PB at 10-11, citing AR 36, which cites AR 651, 652, 655, 716). The MSE evidence cited by the ALJ is as follows: • AR 651-52: This October 2019 psychiatric evaluation by Inland Psychiatric Medical Group notes that Plaintiff was diagnosed with bipolar disorder by age 13, but she had been taking Risperdal “on and off since 2015, this time since Aug. 2019 with good result.” AR 651. She was “feeling better” with a “more stable mood” and “better concentration.” AR 651. She was a “stay at home mom” who was caring fulltime

for her five-month-old daughter and fighting to get 50/50 custody of 21 her three-year-old son. AR 651-52. Her cognition was “within normal limits.” AR 22 652. 23 • AR 655: This November 2019 psychiatric evaluation by Inland Psychiatric 24 Medical Group notes that Plaintiff’s mental status was “unremarkable” with 25 “normal” cognition and judgment. AR 656. 26 • AR 715-16: This January 2021 psychiatric evaluation by Inland Psychiatric 27 Medical Group notes that Plaintiff was “compliant” with her medication. AR 715. 28 She had “good” concentration. AR 715. She had “intact” memory, “average” 1 intellectual functioning, and “adequate” insight and judgment. AR 715-16. 2 The evidence cited by the ALJ spans multiple years from 2019 to 2021. It is 3 inconsistent with Dr. Marciano’s opinions. Compare AR 694 (“marked” limitation 4 maintaining concentration) with AR 715 (“good” concentration); AR 692 (“poor 5 memory”) and AR 694 (“moderate” difficulty remembering even simple 6 instructions) with AR 715 (“intact” memory); AR 689 (“marked restriction of daily 7 life activity”) with AR 651-52 (caring independently for her five-month-old 8 daughter); AR 690 (“severe” cognitive impairment) with AR 652 and 656 9 (“normal” cognition). The ALJ’s finding of inconsistency is supported by 10 substantial evidence. 11 Finally, Plaintiff argues that the ALJ failed to show how Dr. Marciano’s 12 opinions were inconsistent with Plaintiff’s activities. (PB at 12.) But the ALJ 13 noted that Plaintiff took care of her young daughter, “drove, dressed her daughter, 14 drove her daughter to school, cleaned, looked for work, attended family events, and 15 cared for [her] daughter after school.” AR 33. Indeed, Plaintiff testified that she 16 regularly drove between Beaumont and Yorba Linda to visit family. AR 68. She 17 took her daughter to and from school every day and even volunteered at her 18 daughter’s school. AR 68, 72. 19 These activities are inconsistent with the extreme mental limitations posited 20 by Dr. Marciano. Someone with moderate difficulty understanding simple 21 instructions, making simple decisions, sustaining a routine without supervision, and 22 taking precautions against everyday hazards (AR 694) is not someone who could 23 maintain a household, care for a young child independently, do parttime work as a 24 loan processor, and regularly drive long distances unsupervised to visit family. 25 Again, the ALJ’s finding of inconsistency is supported by substantial evidence. 26

B. ISSUE TWO: Plaintiff’s Subjective Symptom Testimony. 27

1. Relevant Law. 28 The ALJ engages in a two-step analysis to evaluate a claimant’s subjective 1 symptom testimony. *Lingenfelter v. Astrue*, 504 F.3d 1028, 1035-36 (9th Cir. 2 2007). “First, the ALJ must determine whether the claimant has presented 3 objective medical evidence of an underlying impairment [that] could reasonably be 4 expected to produce the pain or other symptoms alleged.” *Id.* at 1036. If so, the 5 ALJ may not reject a claimant’s testimony “simply because there is no showing that 6 the impairment can reasonably produce the degree of symptom alleged.” *Smolen v. 7 Chater*, 80 F.3d 1273, 1282 (9th Cir. 1996). 8 Second, if the claimant meets the first test, the ALJ may discredit the 9 claimant’s subjective symptom testimony only by making specific findings that 10 support the conclusion. *Berry v. Astrue*, 622 F.3d 1228, 1234 (9th Cir. 2010); 11 *Burrell v. Colvin*, 775 F.3d 1133, 1137 (9th Cir. 2014). Unless an ALJ finds that a 12 claimant is malingering or has failed to provide objective medical evidence

in 13 support of his or her testimony, an ALJ must provide clear and convincing reasons 14 for rejecting a claimant's subjective testimony about the severity of experienced 15 symptoms. *Brown-Hunter v. Colvin*, 806 F.3d 487, 488-89 (9th Cir. 2015). While 16 an ALJ's findings must be properly supported and sufficiently specific to assure a 17 reviewing court that the ALJ did not "arbitrarily discredit" a claimant's subjective 18 statements, an ALJ is not "required to believe every allegation" of disability. *Fair 19 v. Bowen*, 885 F.2d 597, 603 (9th Cir. 1989). 20 2. Relevant Administrative Proceedings. 21 a. The ALJ's Discussion of Plaintiff's Testimony. 22 The ALJ summarized Plaintiff's testimony. AR 32. Plaintiff testified that 23 she was unable to work due to "anxiety attacks, sometimes on a daily basis or every 24 other day." AR 58. After she stopped working, she only had anxiety attacks twice 25 a week. AR 60-61. She found it "really hard ... to stay focused and to keep on task 26 for each task that a job expects you to do ... for an eight-hour day." AR 58. She 27 found working "very stressful," and she was "not able to deal with the stress of, 28 pretty much, the world." AR 58. She admitted, however, that "normally [she] 1 could stay on task fine." AR 60. Difficulties arose, however, "when there's more 2 high stress and more demands," such as with her jobs in the mortgage industry 3 "because there's so much going on." AR 60. She could not work because "there is 4 pressure at work and when [she felt] pressure, [her] mind shut down" AR 310. 5 The ALJ found that Plaintiff's MDIs "could reasonably be expected to cause 6 the alleged symptoms; however, [her] statements concerning the intensity, 7 persistence and limiting effects of these symptoms are not entirely consistent with 8 the medical evidence and other evidence in the record for the reasons explained in 9 this decision." AR 32. As reasons for discounting Plaintiff's subjective symptom 10 testimony, the ALJ noted (1) inconsistency with the objective evidence; 11 (2) inconsistency with Plaintiff's daily activities, (3) inconsistent symptom 12 reporting, and (4) inconsistent statements. AR 32-34. 13 3. Analysis of Claimed Error. 14 a. Reason One: Inconsistency with Objective Evidence. 15 The ALJ found that Plaintiff's statements about the "intensity, persistence, 16 and limiting effects of [her] mental health symptoms are inconsistent with the 17 objective medical evidence without the substance use disorders." AR 32. The ALJ 18 noted Plaintiff's testimony that mental health symptoms, such as anxiety and 19 difficulty concentrating, prevented her from working. AR 32, referring to AR 55. 20 The ALJ cited the same October and November MSEs by Inland Psychiatric 21 Medical Group as evidence that Plaintiff, when she abstained from drug and alcohol 22 use and took mental health medication as prescribed, had "normal appearance, eye 23 contact, activity, attitude, mood, affect, thought process, perception, thought 24 content, cognition, intelligence, insight, and judgment." AR 32, citing AR 652. 25 Plaintiff contends that her "impairments interfere with her sleep, memory, 26 self-care, ability to concentrate on tasks, ability to get along with others, ability to 27 accept instruction from authority." (PB at 14, citing AR 358, 359, 363, 364.) 28 Similarly, symptoms from her anxiety "impair[] her ability to meet deadlines and 1 goals in work environments." (Id.) She suffers from panic attacks daily, which 2 impact her ability to focus at a job. (Id.) She has fewer attacks when she is not 3 working. (Id.) According to Plaintiff, the ALJ

erred in failing to account for how 4 these symptoms impact Plaintiff's ability to work. (Id. at 19.) She was laid off 5 from previous employment because these symptoms affected her ability to meet the 6 necessary goals and deadlines (id.), although she also testified that she was laid off 7 because there was "not enough work ..." (AR 55). 8 The ALJ's discounting of Plaintiff's subjective symptom testimony because 9 it was inconsistent with the objective medical evidence was a clear and convincing 10 reason supported by substantial evidence. See *Carmickle v. Commissioner*, 533 F.3d 1155, 1161 (9th Cir. 2008) ("Contradiction with the medical record is a 12 sufficient basis for rejecting the claimant's subjective testimony."). As discussed 13 above, the ALJ adequately identified the lack of support for Plaintiff's alleged 14 symptoms from Plaintiff's medical records. The ALJ acknowledged Plaintiff's 15 testimony that her mental health symptoms prevented her from working and 16 handling stressful situations. AR 32, referring to AR 55. "The question facing the 17 ALJ, however, was how severe these symptoms were and how they impacted 18 [Plaintiff's] ability to work during the period of alleged disability." *Michael Don J. 19 v. O'Malley*, 23-cv-00418, 2024 WL 4487020, at *10 (D. Idaho Aug. 12, 2024) 20 (emphasis in original) (citing *Thorne v. Schweiker*, 694 F.2d 170, 171 (8th Cir. 21 1982) and *Fair v. Bowen*, 885 F.2d 597, 603 (9th Cir. 1989)). Here, it was 22 reasonable for the ALJ to conclude that Plaintiff was functioning better than she 23 had claimed after October 2019 and that she was capable of work at all exertional 24 levels with numerous non-exertional limitations aimed at reducing normal 25 workplace stressors. See AR 31. 26 b. Reason Two: Inconsistency with Daily Activities. 27 The ALJ found that Plaintiff's "daily activities are inconsistent with [her] 28 statements about the intensity and persistence of symptoms." AR 33. The ALJ 1 provided the following supporting evidence: 2 [Plaintiff] testified that she took care of her 4-year-old daughter 3 (Hearing Recording: 10:00:59 [AR 63]). [She] also testified that she 4 drove, dressed her daughter, drove her daughter to school, cleaned, 5 looked for work, attended family events, and cared for daughter after 6 school (Hearing Recording: 10:08:32 [AR 69]). In fact, Plaintiff 7 testified that if she were not laid off from a loan processing job, she 8 would still be working there. [AR 72.] Although the undersigned did 9 not find [Plaintiff's] work activity as a mortgage loan processor or 10 data entry clerk to be substantial gainful activity, [Plaintiff] engaged 11 in work activity (at times for 40 hours per week) in 2020, 2021, and 12 2022 (Exhibits 12D; 13D; 21F, page 52; 23F [AR 267, 268-88, 747, 13 852-53]). In fact, the claimant's activities of daily living were within 14 "normal limits" (Exhibit 12F, page 3 [AR 644]). 15 AR 33. Per her Function Report, Plaintiff could cook Korean food, pay 16 bills, walk outside alone, drive sixty miles, and use the Internet. AR 68, 17 312-14. 18 Plaintiff argues that her activities do not" translate to a functional ability to 19 perform work activities." (PB at 19.) But the relevant question is whether her 20 activities are inconsistent with her testimony about the limiting effects of her MDIs. 21 While Plaintiff testified that she could not work because she could not deal with 22 stress, stick to a routine, or stay focused (AR 55, 58), her activities demonstrated 23 that she could deal with some degree of stress (i.e., managing a household and 24 raising a young daughter), stick to a

daily routine (i.e., taking her daughter to school 25 each morning and picking her up), and stay focused for more than short periods of 26 time (i.e., driving long distances and working from home as a loan processor). 27 Again, the ALJ's finding of inconsistency is supported by substantial evidence. 28 1 c. Reason Three: Inconsistent Symptom Reporting. 2 The ALJ found that Plaintiff's "statements regarding the alleged intensity, 3 persistence, and limiting effects of symptoms conflict with other evidence about the 4 duration and frequency of symptoms." AR 33. The ALJ contrasted her testimony 5 with numerous examples of improvement. AR 33, citing AR 655 (November 2019 6 report finding that Plaintiff's mental condition improved when she was compliant 7 with medications), AR 581 (February 2019 report noting that Plaintiff was "doing 8 well"), AR 701 (February 2020 report finding improvement in Plaintiff's mental 9 symptoms), and AR 705 (April 2020 report finding that Plaintiff's symptoms 10 improved while she was working from home). 11 Plaintiff argues that the fact that she "reported some improvement in her 12 symptoms in 2019 does not translate to improvement to a sustained level of 13 functioning" (PB at 18.) But again, the question is whether Plaintiff told her 14 doctors that she was doing better than she told the SSA. The ALJ's conclusion that 15 Plaintiff reported milder symptoms to her doctors than to the SSA is supported by 16 substantial evidence, i.e., the records cited in the ALJ's decision. 17 d. Reason Four: Inconsistent Statements. 18 The ALJ found that Plaintiff's "statements regarding the alleged intensity, 19 persistence, and limiting effects of symptoms are inconsistent with other 20 information in the case record." AR 34. As examples, the ALJ cited that Plaintiff 21 "testified that she has not used or smoked marijuana since her early twenties," but 22 "medical records document an assessment of cannabis use disorder" in August 23 2023, and "laboratory findings were positive for cannabinoids." AR 34, citing AR 24 785, 797, 808; see also AR 805 ("Marijuana and Methamphetamine use recent (last 25 use July 2023"); AR 71 (testifying "I've never done meth" and "I smoked 26 marijuana back with I was like a teenager in my 20s"). The ALJ also noted that in 27 2019, Plaintiff told her therapist, Christine McMahon, Psy.D., that she "left the 28 corporate world preferring to work on her own because, in part, she liked making 1 | her own hours." AR 34, citing AR 645. 2 Plaintiff argues that she testified that she quit working in 2020 and 2021 "due 3 || to a combination diminishing business and an inability to meet the demands of that 4 | work." (PB at 19, citing AR 55-56.) She does not address or try to refute the 5 | ALJ's conclusion that she made inconsistent statements about drug use. ALJs can 6 | rely on "inconsistent statements to [a claimant's] medical providers and in ... 7 | testimony regarding ... substance abuse" to discount the claimant's testimony. 8 | *Ridgley v. Berryhill*, 706 F. App'x 365, 366 (9th Cir. 2017) (citing *Thomas v. 9 | Barnhart*, 278 F.3d 947, 959 (9th Cir. 2002)). 10 VI.

1] CONCLUSION

12 Based on the foregoing, IT IS ORDERED that judgment shall be entered 13 | AFFIRMING the decision of the Commissioner denying benefits. 14 15 DATED: June 27, 2025 6 Traum E. Seat?

17 KAREN E. SCOTT

ig United States Magistrate Judge 19 20 21 22 23 24 25 26 27 28 14

