

**UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF  
WASHINGTON**

**Ashley C. v. Frank Bisignano, Commissioner of Social Security**

Ashley C. · No. No. 4:25-CV-05121-RLP · Decided March 9, 2026

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**OPINION**

1 Mar 09, 2026 2 SEAN F. MCAVOY, CLERK 3 4 UNITED STATES DISTRICT COURT 5  
EASTERN DISTRICT OF WASHINGTON 6 ASHLEY C.,1 No. 4:25-CV-05121-RLP 7 Plaintiff,  
8 v. ORDER REVERSING AND REMANDING THE 9 FRANK BISIGNANO  
COMMISSIONER'S DECISION FOR COMMISSIONER OF SOCIAL FURTHER  
ADMINISTRATIVE 10 SECURITY, PROCEEDINGS 11 Defendant. 12 13 BEFORE THE  
COURT is an appeal from an Administrative Law Judge (ALJ) 14 final decision denying  
supplemental social security income under Title XVI of the 15 Social Security Act.

ECF No. 11. The Court considered the matter without oral 16 argument. For the reasons discussed  
below, the Court concludes the ALJ erred in 17 assessing Ms. C.'s symptom testimony and the  
medical opinion of Dr. Thomas 18 Genthe. Remand is required.

Therefore, Ms. C.'s brief, ECF No. 11, is granted in 19 part and denied in part, and the  
Commissioner's brief, ECF No. 12, is denied. 20 1 Plaintiff's first name and last initial are used to  
protect her privacy. 1 BACKGROUND 2 Ms. C. is 37 years old and holds a GED. She has prior  
employment involving 3 housekeeping and assembly line work. Ms. C. carries several mental  
health 4 diagnoses, including depression, anxiety, and post traumatic stress disorder (PTSD).

5 Ms. C. also struggles with substance abuse and has a history of incarceration and 6 criminal  
justice interventions, including participation in drug court. 7 Ms. C. initially filed for disability on  
May 6, 2020, alleging an onset date of 8 March 1, 2019. Tr. 172-75. This is her second time  
seeking district court review of 9 an adverse disability decision. Tr.

711-16. 10 A hearing was held on June 7, 2022. Tr. 32-54. The ALJ issued an 11 unfavorable  
decision on June 24, 2022 and the Appeals Council denied review. Tr. 12 1. Ms. C. appealed to  
this court and the matter was remanded on stipulation. Tr. 711- 13 16. 14 The hearing on remand  
took place on June 3, 2025. Tr. 665-84.

The ALJ 15 issued a second unfavorable decision on June 18, 2025. Tr. 644-655. Again, the 16  
Appeals Council denied review. The matter is now before this Court pursuant to 42 17 U.S.C. §  
405(g). 18 STANDARD OF REVIEW 19 This Court's review of a final decision of the  
Commissioner of Social Security 20 is governed by 42 U.S.C. § 405(g).

The scope of review is limited; the 1 Commissioner's decision will be disturbed "only if it is not supported by substantial 2 evidence or is based on legal error." *Hill v. Astrue*, 698 F.3d 1153, 1158 (9th Cir. 3 2012). If the evidence in the record "is susceptible to more than one 4 rational interpretation, [the Court] must uphold the ALJ's findings if they are 5 supported by inferences reasonably drawn from the record." *Molina v. Astrue*, 674 6 F.3d 1104, 1111 (9th Cir.

2012), superseded on other grounds by 20 C.F.R. §§ 7 404.1502(a), 416.902(a) (citation omitted). 8 FIVE-STEP EVALUATION PROCESS 9 A claimant must satisfy two conditions to be considered "disabled" within the 10 meaning of the Social Security Act.

First, the claimant must be "unable to engage in 11 any substantial gainful activity by reason of any medically determinable physical or 12 mental impairment which can be expected to result in death or which has lasted or 13 can be expected to last for a continuous period of not less than twelve months." 42 14 U.S.C. §§ 423(d)(1)(A), 1382c(a)(3)(A).

Second, the claimant's impairment must be 15 "of such severity that he is not only unable to do [his or her] previous work[,] but 16 cannot, considering [his or her] age, education, and work experience, engage in any 17 other kind of substantial gainful work which exists in the national economy." 42 18 U.S.C. §§ 423(d)(2)(A), 1382c(a)(3)(B). 19 The Commissioner has established a five-step sequential analysis to determine 20 whether a claimant satisfies the above criteria.

See 20 C.F.R. §§ 404.1520(a)(4)(i)- 1 (v), 416.920(a)(4)(i)-(v). At step one, if the claimant is engaged in "substantial 2 gainful activity," the Commissioner must find the claimant is not disabled. 20 C.F.R. 3 §§ 404.1520(b), 416.920(b). At step two, the Commissioner considers the severity of 4 the claimant's impairment. 20 C.F.R. §§ 404.1520(a)(4)(ii), 416.920(a)(4)(ii).

If the 5 claimant suffers from "any impairment or combination of impairments which 6 significantly limits [his or her] physical or mental ability to do basic work 7 activities," the analysis proceeds to step three. 20 C.F.R. §§ 404.1520(c), 416.920(c). 8 At step three, the Commissioner compares the claimant's impairment to severe 9 impairments recognized by the Commissioner to be so severe as to preclude a person 10 from engaging in substantial gainful activity.

20 C.F.R. §§ 404.1520(a)(4)(iii), 11 416.920(a)(4)(iii). 12 If the severity of the claimant's impairment does not meet or exceed the 13 severity of the enumerated impairments, the Commissioner must assess the 14 claimant's residual functional capacity (RFC), which is the claimant's ability to 15 perform physical and mental work activities on a sustained basis despite his or her 16 limitations.

20 C.F.R. §§ 404.1545(a)(1), 416.945(a)(1). 17 At step four, the Commissioner considers whether, in view of the claimant's 18 RFC, the claimant is capable of performing work he or she has performed in the past 19 (past relevant work). 20 C.F.R. §§ 404.1520(a)(4)(iv), 416.920(a)(4)(iv).

If not, the 20 analysis proceeds to step five and the Commissioner considers whether, in view of 1 the claimant's RFC, the claimant is capable of performing other work in the national 2 economy.

20 C.F.R. §§ 404.1520(a)(4)(v), 416.920(a)(4)(v). 3 The claimant bears the burden of proof at steps one through four above. 4 *Tackett v. Apfel*, 180 F.3d 1094, 1098 (9th Cir. 1999). If the analysis proceeds to 5 step five, the burden shifts to the Commissioner to establish (1) the claimant is 6 capable of performing other work; and (2) such work "exists in significant numbers 7 in the national economy." 20 C.F.R. §§ 404.1560(c)(2), 416.960(c)(2); *Beltran v.* 8 *Astrue*, 700 F.3d 386, 389 (9th Cir.

2012). 9 ALJ'S FINDINGS 10 At step one, the ALJ found Ms. C. has not engaged in substantial gainful 11 activity since the date of application. Tr. 644. At step two, the ALJ found the 12 following severe impairments: depressive disorder, anxiety disorder, PTSD, and 13 substance addiction in remission. *Id.* At step three, the ALJ found Ms. C. does not 14 have an impairment or combination of impairments that meets or medically equals 15 the severity of any listed impairment.

Tr. 645. The ALJ assessed Ms. C. has the 16 RFC to perform a full range of work at all exertional levels but with the following 17 nonexertional limitations: "The claimant can perform simple tasks with occasional 18 interaction with the public and coworkers." Tr. 646. At step four, the ALJ found 19 Ms. C. has no past relevant work. Tr. 653. At step five the ALJ found there are a 20 significant number of jobs in the national economy Ms. C. can perform.

*Id.* 1 ANALYSIS 2 Ms. C. contends the ALJ improperly rejected her symptom testimony along 3 with the medical opinion evidence from Dr. Thomas Genthe. Her arguments appear 4 to pertain to the ALJ's RFC analysis. The Court agrees with Ms. C. that the ALJ's 5 analysis of her symptom testimony and Dr. Genthe's opinion evidence was 6 inadequate, requiring reversal.

However, the Court disagrees with Ms. C.'s claim 7 that the record is sufficiently clear to require an award of benefits. Each issue is 8 addressed in turn. 9 A. Ms. C.'s Symptom Testimony 10 An ALJ must conduct in a two-step analysis to determine whether to discount 11 a claimant's testimony regarding subjective symptoms. SSR 16-3p, 2016 WL 12 1119029, at \*2. "First, the ALJ must determine whether there is objective medical 13 evidence of an underlying impairment which could reasonably be expected to 14 produce the pain or other symptoms alleged." *Molina v. Astrue*, 674 F.3d 1104, 1112 15 (quotation marks and citation omitted).

Second, "[i]f the claimant meets the first test 16 and there is no evidence of malingering, the ALJ can only reject the claimant's 17 testimony about the severity of the symptoms if [the ALJ] gives 'specific, clear and 18 convincing reasons' for the rejection." *Ghanim v. Colvin*, 763 F.3d 1154, 1163 (9th 19 Cir. 2014) (citations omitted). "The clear and convincing [evidence] standard is the

20 most demanding required in Social Security cases.” *Garrison v. Colvin*, 759 F.3d 1 995, 1015 (9th Cir.

2014) (quoting *Moore v. Comm’r of Soc. Sec. Admin.*, 278 F.3d 2 920, 924 (9th Cir. 2002)). 3 At issue here is the ALJ’s assessment at step two of the analysis. The ALJ 4 found there was objective medical evidence of an underlying impairment which 5 could reasonably be expected to produce Ms. C.’s alleged symptoms. Nevertheless, 6 the ALJ ultimately rejected Ms. C.’s claimed symptoms because her “statements 7 concerning the intensity, persistence and limiting effects of these symptoms are not 8 entirely consistent with the medical evidence and other evidence in the record for 9 the reasons explained in this decision.” Tr.

648. 10 Ms. C. argues the ALJ’s analysis was inadequate because it largely consisted 11 of a summary of evidence in the record followed by a conclusory statement 12 regarding credibility. The Court agrees with this assessment.

The ALJ’s analysis 13 lacks a focused discussion of which of Ms. C.’s alleged symptoms are deemed not 14 credible based on which aspects of the record. This is contrary to what is required 15 for meaningful appellate review. *Brown-Hunter v. Colvin*, 806 F.3d 487, 489 (9th 16 Cir. 2015). 17 A review of the shortcomings in the ALJ’s analysis is set forth in detail 18 below, as it may be helpful on remand.

19 On page 6 of the decision, the ALJ summarized the allegations set forth in 20 Ms. C.’s application for benefit. Tr. 647. The decision then includes five 1 paragraphs summarizing various parts of the record. Tr. 647-48.

After this 2 summary, the decision includes a paragraph stating: 3 After careful consideration of the evidence, the undersigned finds that the claimant’s medically determinable impairments could reasonably 4 be expected to cause the alleged symptoms; however, the claimant’s statements concerning the intensity, persistence and limiting effects of 5 these symptoms are not entirely consistent with the medical evidence and other evidence in the record for the reasons explained in this 6 decision.

7 Tr. 648. Nothing thus far in the analysis specifies which of Ms. C.’s symptoms are 8 inconsistent with the record. 9 On page 7 of the decision, the ALJ observed Ms. C.’s “participation in drug 10 court for years and recent incarceration for over a year is inconsistent with the 11 degree of emotional dysfunction alleged, but rather shows greater adaptability than 12 the claimant[’]s statements/testimony suggest.” Tr.

648. This vague assessment of 13 Ms. C.’s involvement in court hearings and incarceration fails to illuminate how 14 the severity of Ms. C.’s condition was undercut by her participation in the criminal 15 justice system. Drug court programs are often adjusted to meet the needs of the 16

disabled and incarceration is a passive intervention. 17 On page 7-8 of the decision, there is a lengthy paragraph documenting Ms. 18 C.'s mental health record.

Tr. 648-49. This paragraph describes times of waxing 19 and waning symptoms. The paragraph does not identify specific ways in which the 20 history undermines Ms. C.'s current symptom testimony. See Garrison, 759 F.3d 1 at 1017 ("it is error to reject a claimant's testimony merely because symptoms wax 2 and wane in the course of treatment"). 3 On page 8-9, the decision identifies various records that "do not fully align" 4 with Ms. C.'s testimony.

Tr. 649-50. Again, the summary in question describes 5 times of waxing and waning symptoms. After summarizing the records, the ALJ 6 concludes Ms. C.'s "statements suggest the intensity and frequency of her 7 symptoms are less limiting than alleged." Tr. 650. This vague assessment does not 8 help the Court's analysis of the record. 9 Towards the bottom of page 9 of the decision, the ALJ appears to identify 10 three inconsistent statements from Ms. C: 11 Furthermore, at her 2022 hearing, she testified she stopped working at her last job because she missed too much work and had panic attacks.

12 At her recent hearing, she stopped work because she could not handle working with a former significant [other] who had raped her with 13 symptoms escalating and never improving since. However, in March 2020, the claimant told a provider that she stopped working her last 14 job because of missed work due to relapse (1F2).

The latter of these appears more reliable since of greater temporal proximity to her 15 termination. 16 Tr. 650. This discussion is largely unhelpful because it fails to clarify what aspect 17 of Ms. C.'s symptoms is contradicted. And it fails to account for the apparent 18 possibility that the three statements were simply different ways of characterizing 19 the same explanation for why Ms. C. left work.

20 The last paragraph discussing Ms. C.'s symptom testimony documents 1 various statements made by Ms. C. to treatment providers. Tr. 650-51. This 2 summary again shows waxing and waning symptoms. At the end of the paragraph, 3 the ALJ describes Ms. C.'s presentation to providers as "benign" and "not 4 consistent with her description of marked/severe social, cognitive, and mental 5 dysfunction." Tr.

651. This conclusory statement is divorced from the summary of 6 Ms. C.'s statements, which appear consistent with the experiences of someone 7 suffering from volatile mental disorders. 8 In the briefing, the parties debate various reasons why the ALJ discounted 9 Ms. C.'s symptom testimony.

As recounted by the parties, it is possible the ALJ 10 made adverse credibility decisions because Ms. C.'s alleged symptoms were 11 inconsistent with her daily activities, including her activities at home, in drug 12 court, or in custody. It could also be the ALJ believed Ms. C.'s symptoms

were 13 adequately addressed by adherence to medications. But the ALJ's decision did not 14 clearly cite any of these justifications.

This Court declines to comb through the 15 record and speculate as to which symptoms the ALJ discredited and why. Ms. C.'s 16 disorders are the type that can be expected to cycle through periods of 17 improvement and debilitation. See Garrison, 759 F.3d at 1018.

The ALJ is 18 required to review Ms. C.'s symptoms holistically, recognizing that periods of 19 improved functioning "does not always mean that a claimant can function 20 effectively in a workplace." Id. at 1017. Without a clear analysis from the ALJ 1 explaining why Ms. C.'s symptom testimony was rejected, this Court cannot 2 properly analyze the ALJ's decision.

Brown-Hunter, 806 F.3d at 489.2 3 B. Dr. Genthe's Medical Opinion 4 Dr. Genthe performed a mental status examination of Ms. C. on March 10, 5 2020. Tr. 299-310. The examination included a clinical interview and a 6 psychometric assessment. Id. Dr. Genthe's examination resulted in an 11-page 7 psychological/psychiatric report, documented on a standard form issued by the 8 Washington State Department of Social and Health Services.

Id. 9 Dr. Genthe opined Ms. C.'s depression and PTSD impacted her ability to 10 work. In rating Ms. C.'s impairments on a scale of none/mild, moderate, marked, 11 severe, or indeterminate, Dr. Genthe found the following marked impairments: 12 ability to communicate and perform effectively in a work setting, ability to 13 maintain appropriate behavior in a work setting, and ability to complete a normal 14 work dan and work week without interruption from psychologically based 15 symptoms.

Tr. 303. Dr. Genthe further opined Ms. C.'s overall severity rating was 16 marked. Id. When asked whether "vocational training or services" would 17 "minimize or eliminate barriers to employment," Dr. Genthe marked "yes." Id. 18 19 2 Given the record could be interpreted as consistent with Ms. C.'s symptom 20 testimony, the ALJ's failure to provide proper analysis is not harmless error.

1 Although the form asked for an accompanying explanation, none was provided. In 2 his narrative summary, Dr. Genthe described Ms. C.'s prognosis was "guarded." 3 Tr. 304. He explained that, "[a]t this time, she is unlikely to function adequately, 4 and/or consistently in a work setting until her psychological symptoms have been 5 managed more effectively." Id. According to Dr. Genthe, Ms. C. would need at 6 least 12 months of treatment.

Id. 7 The ALJ rejected Dr. Genthe's opinion testimony as unpersuasive for three 8 reasons. First, Dr. Genthe's examination did not include review of collateral source 9 records. Second, the marked limitations found by Dr. Genthe were not well 10 explained. And third, Dr. Genthe's marked limitation findings were inconsistent 11 with his examination findings and with the record.

Ms. C. argues the ALJ's reasons 12 for rejecting Dr. Genthe's opinion are not justified by the record. This critique is at 13 least partially persuasive. 14 Federal regulations provide an ALJ must consider and evaluate the 15 persuasiveness of all medical opinions or prior administrative medical findings 16 from medical sources. 20 C.F.R. §§ 404.1520c, 416.920c.

Supportability and 17 consistency are the most important factors in evaluating the persuasiveness of 18 medical opinions and prior administrative findings, and therefore the ALJ is 19 required to explain how both factors were considered. 20 C.F.R. §§ 20 404.1520c(b)(2), 416.920c(b)(2).

The ALJ may, but is not required, to explain how 1 other factors were considered. 20 C.F.R. §§ 404.1520c(b)(2), 416.920c(b)(2); see 2 20 C.F.R. §§ 404.1520c(c)(1)-(5), 416.920c(c)(1)-(5). 3 With respect to the ALJ's first criticism, it is unclear why Dr. Genthe's 4 failure to review collateral records undermines his opinion.

The diagnoses arrived 5 at by Dr. Genthe was generally consistent with that of other providers. This 6 strengthens his credibility, not weakens it. Furthermore, it is unclear which aspects 7 of Ms. C.'s prior medical record were undermined Dr. Genthe's assessment.

As 8 previously noted, Ms. C.'s mental health conditions can be expected to produce 9 cyclical symptoms. Dr. Genthe recognized the symptoms described by Ms. C. had 10 "fluctuating intensity." Tr. 302. Had Dr. Genthe reviewed Ms. C.'s records, which 11 document this cycle, it is unclear how his findings would have been different. 12 Going to the ALJ's second criticism, the evaluation report includes at least 13 some discussion of the reasons for Dr. Genthe's opinions.

Dr. Genthe explained 14 Ms. C.'s symptoms were not being managed. Tr. 303. In discussing her ability to 15 work, Dr. Genthe commented Ms. C.'s suspiciousness and mistrust in relationships 16 with others would probably been "seen by others as being quite hostile" and 17 "strain[ ]" working relationships "despite any efforts by others to demonstrate 18 support and assistance." Tr.

308. Dr. Genthe's evaluation also discusses various 19 ways Ms. C.'s mental health conditions would impact her relationships with others, 20 including rigid thinking (Tr. 307); depressive experiences of "worthlessness, 1 hopelessness, and personal failure" (Tr. 308); and extreme anxiety, impacting her 2 ability to "concentrate and attend" (Tr. 308). 3 Finally, the ALJ's rejection of Dr. Genthe's opinion as internally 4 inconsistent and inconsistent with the medical records suffers from some of the 5 same flaws as ALJ's rejection of Ms. C.'s symptom testimony. "[M]ental 6 impairments are oftentimes cyclical can impair some areas of function significantly 7 without touching others." *Douglas H. v. Comm'r of Soc.*

*Sec.*, 2025 WL 3001816 at 8 \*7 (W.D. Wash. Oct. 27, 2025). Dr. Genthe's findings of marked limitations are 9 social in nature, and that Ms. C. can do laundry for her son or follow terms of her 10 probation does not suggest a higher degree of social functioning. See *Trevizo v. Berryhill*, 871 F.3d 664, 682 (9th Cir. 2017) ("the mere fact that she cares for small 12 children does not

constitute an adequately specific conflict with her reported 13 limitations”); *Vertigan v. Halter*, 260 F.3d 1044, 1050 (9th Cir.

2001) (“This court 14 has repeatedly asserted that the mere fact that a plaintiff has carried on certain 15 daily activities, such as grocery shopping, driving a car, or limited walking for 16 exercise, does not in any way detract from her credibility as to her overall 17 disability. One does not need to be ‘utterly incapacitated’ in order to be disabled.”) 18 (quoting *Fair v. Bowen*, 885 F.2d 597,603 (9th Cir.

1989)). Similarly, that Dr. 19 Genthe found Ms. C.’s memory intact does not discredit his limitations in her 20 social and emotional functioning. Further, Dr. Genthe’s opinion that vocational 1 training or services would help eliminate barriers to employment is consistent with 2 his explanation that Ms. C. may be able to return to full-time work with the 3 assistance of treatment.

Tr. 303-04. 4 Because this matter is subject to remand based on the ALJ’s rejection of Ms. 5 C.’s symptom testimony, remand is also appropriate as to Dr. Genthe’s opinion. 6 On remand, the ALJ must consider and evaluate the persuasiveness of all medical 7 opinions or prior administrative medical findings from medical sources, including 8 Dr. Genthe. 20 C.F.R. §§ 404.1520c, 416.920c.

The ALJ’s analysis of all medical 9 opinion testimony shall include an assessment of consistency and 10 supportability. 20 C.F.R. §§ 404.1520c(b)(2), 416.920c(b)(2). 11 C. Remedy 12 Ms. C. argues this matter should not be remanded for further proceedings. 13 Rather, she claims this Court should remand for an immediate award of benefits. 14 The Court disagrees.

15 Courts apply the three-part credit-as-true standard to determine when to 16 remand to an ALJ with instructions to calculate and award benefits: 17 (1) the record has been fully developed and further administrative proceedings would serve no useful purpose; (2) the ALJ has failed to 18 provide legally sufficient reasons for rejecting evidence, whether claimant testimony or medical opinion; and (3) if the improperly 19 discredited evidence were credited as true, the ALJ would be required to find the claimant disabled on remand.

20 *Garrison*, 759 F.3d at 1020. 1 Where the ALJ makes a legal error, but there is a need to resolve conflicting 2 evidence and ambiguities in the record, remand for an award of benefits is 3 inappropriate. *Treichler v. Comm’r of Soc. Sec. Admin.*, 775 F.3d 1090, 1101 (9th 4 Cir. 2014). Only where there are no outstanding issues requiring resolution can a 5 witness’s testimony be credited as true without further proceedings.

*Id.* at 1105-06. 6 “An automatic award of benefits in a disability benefits case is a rare and 7 prophylactic exception to the well-established ordinary remand rule.” *Leon v. 8 Berryhill*, 880

F.3d 1041, 1045-46 (9th Cir. 2017). 9 This is not a rare case where a remand for benefits is appropriate.

The record 10 shows Ms. C. is amenable to treatment. And Dr. Genthe has opined that Ms. C. 11 may, with treatment, be able to “resume fulltime work related activities.” Tr. 304. 12 Remand for further proceedings is appropriate. 13 CONCLUSION 14 Having reviewed the record and the ALJ’s findings, this Court concludes the 15 ALJ’s decision is not supported by substantial evidence and free of harmful legal 16 error.

17 Accordingly, 18 1. Ms. C.’s Brief, ECF No. 11, is GRANTED in part and DENIED in 19 part. 20 2. Defendant’s Brief, ECF No. 12, is DENIED. 1 3. This case is REVERSED and REMANDED for further 2 || administrative proceedings consistent with this Order pursuant to sentence four of 3 42 U.S.C. § 405(g). 4 IT IS SO ORDERED.

The District Court Clerk is directed to enter this Order 5 || and provide copies to counsel. Judgment shall be entered for Ms. C. and the file shall 6 || be CLOSED. 7 DATED March 9, 2026. 9 REBECCA L. PENNELL United States District Judge 10 11 12 13 14 15 16 17 18 19 20 ORDER REVERSING AND REMANDING THE COMMISSIONER’S DECISION EOP BIIRPTUER ADNMINTOCTR ATIVE DRACERNINIMG \* 17