UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION

Anne A. v. Frank Bisignano, Commissioner of Social Security

Anne A. · No. No. 25 C 5499 · Decided March 30, 2026

SUMMARY

The United States District Court for the Northern District of Illinois reviewed the Commissioner of Social Security's denial of Anne A.'s claim for Disability Insurance Benefits. The court held that the ALJ adequately accounted for Plaintiff's moderate limitation in concentration, persistence, and pace by restricting her to simple, routine tasks, denied the request for reversal, and affirmed the Commissioner's decision.

CASE DETAILS

COURT	United States District Court for the Northern District of Illinois, Eastern Division
WRITING FOR THE COURT	Maria Valdez
JURISDICTION	United States District Court for the Northern District of Illinois, Eastern Division
DECIDED	March 30, 2026
DOCKET	No. 25 C 5499
DISPOSITION	affirmed
PROCEDURAL POSTURE	Plaintiff sought judicial review under 42 U.S.C. § 405(g) of the Commissioner's final decision denying Disability Insurance Benefits. The parties consented to the jurisdiction of a United States Magistrate Judge.
STANDARD OF REVIEW	The court reviews whether the ALJ applied the correct legal standards and whether the decision is supported by substantial evidence. The court may not reweigh evidence, resolve evidentiary conflicts, reassess credibility, or substitute its judgment for the Commissioner's.
PRECEDENTIAL VALUE	unpublished district court memorandum opinion
PARTIES	Anne A. v. Frank Bisignano, Commissioner of Social Security

TOPICS

judicial review of agency action | agency adjudication | administrative law | disability definition

PRACTICE AREAS

Social Security | disability benefits | administrative law | judicial review

QUESTIONS PRESENTED

1. Whether the ALJ's RFC adequately accounted for Plaintiff's moderate limitation in concentration, persistence, and pace by restricting her to simple routine tasks and frequent interaction with others.
2. Whether the ALJ was required to address vocational-expert testimony concerning the amount of time off task an employer would tolerate when the ALJ did not find that Plaintiff would be off task.
3. Whether the ALJ's decision was supported by substantial evidence and applied the correct legal standards.

HOLDINGS

1. The restriction to simple routine work adequately accounted for Plaintiff's moderate limitation in concentration, persistence, and pace, including her ability to sustain focus throughout the workday.
2. The ALJ was not required to discuss vocational-expert testimony concerning tolerated off-task time because the ALJ did not find that Plaintiff would experience time off task.
3. The Commissioner's decision denying Disability Insurance Benefits was supported by substantial evidence and was affirmed.

KEY QUOTATIONS

> *"Judicial review of the ALJ's decision is thus "limited to ensuring that substantial evidence supported the ALJ's decision and that the ALJ applied the correct legal standards.""*

> *"Substantial evidence is "such relevant evidence as a reasonable mind might accept as adequate to support a conclusion.""*

> *"It is not enough to nitpick the ALJ's order."*

FACTUAL BACKGROUND

Anne A. alleged disability beginning January 3, 2016, and was last insured on December 31, 2018. The ALJ found severe impairments including posttraumatic stress disorder, panic disorder, major depressive disorder, and cervical strain, but determined that Plaintiff retained the capacity for sedentary work with physical and mental restrictions, including simple routine tasks and frequent interaction with others. Plaintiff challenged the RFC, arguing that it failed to account for moderate limitations in concentration, persistence, and pace and should have included an off-task limitation.

PROCEDURAL HISTORY

Plaintiff's application for Disability Insurance Benefits was denied initially and on reconsideration. An ALJ denied the claim in 2020; the Appeals Council remanded for further proceedings, and a second ALJ denial in 2021 became final when the Appeals Council denied review. After an agreed remand by the District Court in 2022, a second ALJ again denied benefits on January 16, 2024, and the Appeals Council denied review. On the renewed appeal, the District Court denied Plaintiff's request to reverse and affirmed the Commissioner's decision.

DISPOSITION

affirmed

CASES CITED

- Haynes v. Barnhart, 416 F.3d 621, 626 (7th Cir. 2005)
- Young v. Secretary of Health & Human Services, 957 F.2d 386, 389 (7th Cir. 1992)
- Morales v. O'Malley, 103 F.4th 469, 471-72 (7th Cir. 2024)
- Clifford v. Apfel, 227 F.3d 863, 869 (7th Cir. 2000)
- Stevenson v. Chater, 105 F.3d 1151, 1153 (7th Cir. 1997)
- Richardson v. Perales, 402 U.S. 389, 401 (1971)
- Skinner v. Astrue, 478 F.3d 836, 841 (7th Cir. 2007)
- Biestek v. Berryhill, 139 S. Ct. 1148, 1154 (2019)
- Warnell v. O'Malley, 97 F.4th 1050, 1051, 1053-54 (7th Cir. 2024)
- Herr v. Sullivan, 912 F.2d 178, 181 (7th Cir. 1990)
- Summers v. Berryhill, 864 F.3d 523, 527 (7th Cir. 2017)
- Meuser v. Colvin, 838 F.3d 905, 910 (7th Cir. 2016)
- Murphy v. Astrue, 496 F.3d 630, 634 (7th Cir. 2007)
- Briscoe ex rel. Taylor v. Barnhart, 425 F.3d 345, 351 (7th Cir. 2005)
- Zurawski v. Halter, 245 F.3d 881, 889 (7th Cir. 2001)
- Herron v. Shalala, 19 F.3d 329, 333 (7th Cir. 1994)
- Pavlicek v. Saul, 994 F.3d 777, 783 (7th Cir. 2021)