

UNITED STATES DISTRICT COURT FOR THE CENTRAL DISTRICT OF
CALIFORNIA

Michael H. v. Kilolo Kijakazi

Michael H. · No. 2:21-cv-08758-GJS · Decided March 7, 2023

SUMMARY

The United States District Court for the Central District of California reviewed the denial of Michael H.'s application for Social Security Disability Insurance benefits. The court held that the Administrative Law Judge did not provide legally sufficient reasons for discounting the claimant's subjective symptom testimony, particularly by relying primarily on mild objective findings and characterizing treatment as conservative. The court reversed the Commissioner's decision and remanded the matter for further administrative proceedings under sentence four of 42 U.S.C. § 405(g).

CASE DETAILS

COURT	United States District Court for the Central District of California
WRITING FOR THE COURT	Gail J. Standish
JURISDICTION	United States District Court for the Central District of California
DECIDED	March 7, 2023
DOCKET	2:21-cv-08758-GJS
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. The parties consented to proceed before a United States Magistrate Judge. The court reversed the Commissioner's decision and remanded for further administrative proceedings.
STANDARD OF REVIEW	The court reviews whether the Commissioner's findings are supported by substantial evidence and whether the Commissioner applied the correct legal standards. The court may affirm only on the reasons stated by the ALJ and may disregard an error only if it is harmless.
PRECEDENTIAL VALUE	unpublished
PARTIES	Michael H. v. Kilolo Kijakazi, Acting Commissioner of Social Security

TOPICS

judicial review of agency action

administrative law

remedies

civil procedure

PRACTICE AREAS

Social Security disability benefits

administrative law

federal civil procedure

QUESTIONS PRESENTED

1. Whether the ALJ properly evaluated Plaintiff's subjective symptom testimony.
2. Whether the ALJ properly evaluated the medical opinion evidence.
3. Whether the case should be remanded for further proceedings or for an immediate award of benefits.

HOLDINGS

1. The ALJ improperly discounted Plaintiff's subjective symptom testimony because the ALJ relied on minimal or mild objective findings and characterized treatment as conservative without providing legally sufficient reasons supported by substantial evidence.
2. Remand for further administrative proceedings, rather than an immediate award of benefits, was appropriate because outstanding factual issues remained and the record did not clearly require a finding of disability.

KEY QUOTATIONS

"the ALJ can reject the claimant's testimony about the severity of [his] symptoms only by offering specific, clear and convincing reasons for doing so." (4)

"the lack of corroborating medical evidence cannot provide the sole basis for rejecting subjective symptom testimony." (5)

"A district court cannot proceed directly to credit a claimant's testimony as true and then look to the record to determine whether there are any issues outstanding, as 'this reverses the required order of analysis.'" (8)

FACTUAL BACKGROUND

Plaintiff alleged disability beginning August 31, 2015, based principally on bilateral hand conditions and lower-back pain, with a date last insured of March 31, 2017. He testified that pain limited his gripping, handling, lifting, walking, driving, and daily activities. The ALJ found several severe impairments, assessed an RFC for medium work with additional limitations, and determined that Plaintiff could perform other work. The record reflected recommendations for carpal-tunnel decompression surgery, narcotic pain medication, and steroid injections, although surgery was denied by insurance and the treatment produced at most partial or temporary improvement.

PROCEDURAL HISTORY

Plaintiff's application for Disability Insurance Benefits was denied initially and on reconsideration. After a 2019 administrative hearing and unfavorable decision, the Appeals Council remanded for further proceedings. Following a second hearing, the ALJ again denied benefits on January 27, 2021, and the Appeals Council denied

review on September 22, 2021. The district court reversed and remanded under sentence four of 42 U.S.C. § 405(g).

DISPOSITION

reversed_and_remanded

REMAND INSTRUCTIONS

The Commissioner must conduct further administrative proceedings consistent with the Memorandum Opinion and Order, including reevaluation of Plaintiff's subjective symptom testimony and a proper disability determination.

CASES CITED

- Carmickle v. Commissioner of Social Security Administration, 533 F.3d 1155, 1159
- Brewes v. Commissioner of Social Security Administration, 682 F.3d 1157, 1161
- Biestek v. Berryhill, 139 S. Ct. 1148, 1154
- Gutierrez v. Commissioner of Social Security, 740 F.3d 519, 522
- Burch v. Barnhart, 400 F.3d 676, 681
- Magallanes v. Bowen, 881 F.2d 747, 750
- Orn v. Astrue, 495 F.3d 625, 630
- Brown-Hunter v. Colvin, 806 F.3d 487, 492
- Lingenfelter v. Astrue, 504 F.3d 1028, 1035-36
- Bunnell v. Sullivan, 947 F.2d 341, 344 (en banc)
- Smolen v. Chater, 80 F.3d 1273, 1281, 1284
- Trevizo v. Berryhill, 871 F.3d 664, 679, 682
- Robbins v. Social Security Administration, 466 F.3d 880, 883
- Parra v. Astrue, 481 F.3d 742, 750-51
- Aguilar v. Colvin, No. CV 13-08307-VBK, 2014 WL 3557308, at *8 (C.D. Cal. July 18, 2014)
- Sanchez v. Colvin, No. CV 12-4061-SP, 2013 WL 1319667, at *4 (C.D. Cal. Mar. 29, 2013)
- Christie v. Astrue, 2011 WL 4368189, at *4 (C.D. Cal. Sept. 16, 2011)
- Connett v. Barnhart, 340 F.3d 871, 874
- Smith v. Bowen, 849 F.2d 1222, 1225
- Garrison v. Colvin, 759 F.3d 995, 1017, 1019, 1021
- Ghanim v. Colvin, 763 F.3d 1154, 1162
- Harman v. Apfel, 211 F.3d 1172, 1180-81
- Treichler v. Commissioner of Social Security Administration, 775 F.3d 1090, 1104, 1106
- Leon v. Berryhill, 880 F.3d 1041, 1046
- Dominguez v. Colvin, 808 F.3d 403, 409

- Hiler v. Astrue, 687 F.3d 1208, 1212

OPINION

Michael Wayne Houston v. Kilolo Kijakazi

PER CURIAM.

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8 UNITED STATES DISTRICT COURT

9 CENTRAL DISTRICT OF CALIFORNIA

10

MICHAEL H.,¹

11 Case No. 2:21-cv-08758-GJS Plaintiff 12 v.

13 MEMORANDUM OPINION AND

KILOLO KIJAKAJI, Acting ORDER 14 Commissioner of Social Security, 15 Defendant. 16 17

18 I. PROCEDURAL HISTORY

19 Plaintiff Michael H. (“Plaintiff”) filed a complaint seeking review of the 20 decision of the
Commissioner of Social Security denying his application for 21 Disability Insurance Benefits
 (“DIB”). The parties filed consents to proceed before 22 the undersigned United States Magistrate
 Judge [Dkts. 11 and 12] and briefs [Dkts. 23 21 (“Pl. Br.”), 22 (“Def. Br.”), 23 (“Reply”)]
 addressing disputed issues in the case. 24 The matter is now ready for decision. For the reasons set
 forth below, the Court 25 finds that this matter should be remanded. 26 27 1 In the interest of
 privacy, this Order uses only the first name and the initial of 28 the last name of the non-
 governmental party in this case. Case 2:21-cv-08758-GJS Document 24 Filed 03/07/23 Page 2 of
 9 Page ID #:923

1 II. ADMINISTRATIVE DECISION UNDER REVIEW

2 Plaintiff filed an application for DIB on February 2, 2017. [Dkt. 17, 3 Administrative Record
 (“AR”) 116, 260-61.] Plaintiff alleges a disability onset date 4 of August 31, 2015. [AR 22, 72.]
 Plaintiff’s application was denied at the initial 5 level of review and on reconsideration. [AR 133-
 36, 140-44.] 6 Plaintiff’s first administrative hearing was held on April 12, 2019. [AR 35- 7 66.] A
 decision denying benefits was issued on June 20, 2019. [AR 116-23.] On
 8 August 5, 2020, the Appeals Council remanded the case for further proceedings.
 9 [AR 128-31.] 10 On December 15, 2020, Administrative Law Judge Diana Coburn (“the ALJ”)
 11 presided over a telephone hearing on remand. [AR 22, 67-88.] On January 27, 12 2021, the ALJ
 issued an unfavorable decision applying the five-step sequential 13 evaluation process for
 assessing disability. [AR 20-29.] See 20 C.F.R. § 14 404.1520(b)-(g)(1). At step one, the ALJ
 determined that Plaintiff had not engaged 15 in substantial gainful activity from his alleged onset
 date of August 31, 2015, 16 through his date last insured of March 31, 2017. [AR 22.] At step two,
 the ALJ 17 determined that Plaintiff has the following severe impairments: bilateral carpal 18
 tunnel syndrome; left hand and middle finger sprain/strain; bilateral DeQuervain’s 19

tenosynovitis; lumbar disc bulge; and mild osteoarthritis in the left hand first 20 carpometacarpal joint. [AR 22-23.] At step three, the ALJ determined that Plaintiff 21 did not have an impairment or combination of impairments that meets or medically 22 equals the severity of one of the impairments listed in Appendix I of the 23 Regulations. [AR 18.] See 20 C.F.R. Pt. 404, Subpt. P, App. 1. The ALJ found that 24 Plaintiff has the residual functional capacity (“RFC”) to perform medium work, as 25 defined in 20 C.F.R. § 416.967(c), but Plaintiff is limited to frequent postural 26 activities, fine and gross manipulation bilaterally, and exposure to dangerous and 27 moving machinery and unprotected heights. [AR 23.] At step four, the ALJ 28 determined that Plaintiff was unable to perform any past relevant work. [AR 27.] 2 Case 2:21-cv-08758-GJS Document 24 Filed 03/07/23 Page 3 of 9 Page ID #:924 1 At step five, the ALJ found that Plaintiff could perform other work that exists in 2 significant numbers in the national economy. [AR 28.] Therefore, the ALJ 3 concluded that Plaintiff was not under a disability from the alleged onset date of

4 August 31, 2015, through the date last insured of March 31, 2017. [AR 29.]

5 The Appeals Council denied review of the ALJ’s decision on September 22, 6 2021. [AR 1-6.] This action followed. 7 Plaintiff raises the following issues challenging the ALJ’s findings and 8 determination of non-disability: 9 1. The ALJ failed to properly evaluate medical opinion evidence. [Pl. Br. at 4- 10 10.] 11 2. The ALJ failed to articulate clear and convincing reasons for rejecting 12 Plaintiff’s subjective testimony. [Pl. Br. at 10-13.] 13 The Commissioner asserts that the ALJ’s decision is supported by substantial 14 evidence and should be affirmed. [Def. Br. at 1- 16.] 15

16 III. GOVERNING STANDARD

17 Under 42 U.S.C. § 405(g), the Court reviews the Commissioner’s decision to 18 determine if: (1) the Commissioner’s findings are supported by substantial 19 evidence; and (2) the Commissioner used correct legal standards. See *Carmickle v. 20 Comm’r Soc. Sec. Admin.*, 533 F.3d 1155, 1159 (9th Cir. 2008); *Brewes v. Comm’r 21 Soc. Sec. Admin.*, 682 F.3d 1157, 1161 (9th Cir. 2012). “Substantial evidence ... is 22 ‘more than a mere scintilla’ ... [i]t means – and only means – ‘such relevant 23 evidence as a reasonable mind might accept as adequate to support a conclusion.’” 24 *Biestek v. Berryhill*, 139 S. Ct. 1148, 1154 (2019) (citations omitted); *Gutierrez v. 25 Comm’r of Soc. Sec.*, 740 F.3d 519, 522 (9th Cir. 2014) (“[s]ubstantial evidence is 26 more than a mere scintilla but less than a preponderance”) (internal quotation marks 27 and citation omitted). 28 The Court will uphold the Commissioner’s decision when “‘the evidence is 3 Case 2:21-cv-08758-GJS Document 24 Filed 03/07/23 Page 4 of 9 Page ID #:925 1 susceptible to more than one rational interpretation.’” *Burch v. Barnhart*, 400 F.3d 2 676, 681 (9th Cir. 2005) (quoting *Magallanes v. Bowen*, 881 F.2d 747, 750 (9th Cir. 3 1989)). However, the Court may review only the reasons stated by the ALJ in the 4 decision “and may not affirm the ALJ on a ground upon which he did not rely.” 5 *Orn v. Astrue*, 495 F.3d 625, 630 (9th Cir. 2007). The Court will not reverse the 6 Commissioner’s decision if it is based on harmless error, which exists if the error is 7

“inconsequential to the ultimate nondisability determination, or that, despite the 8 error, the agency’s path may reasonably be discerned.” *Brown-Hunter v. Colvin*, 9 806 F.3d 487, 492 (9th Cir. 2015) (internal quotation marks and citations omitted). 10

11 IV. DISCUSSION

12 Plaintiff contends that the ALJ erred by discounting his subjective symptom 13 testimony without stating legally sufficient reasons for doing so. As discussed 14 below, the Court agrees with Plaintiff and finds that remand is appropriate. 15 In evaluating a claimant’s subjective complaints, an ALJ must engage in a 16 two-step analysis. See *Lingenfelter v. Astrue*, 504 F.3d 1028, 1035-36 (9th Cir. 17 2007); 20 C.F.R. § 416.929. “First, the ALJ must determine whether the claimant 18 has presented objective medical evidence of an underlying impairment, ‘which 19 could reasonably be expected to produce the pain or other symptoms alleged.’” 20 *Lingenfelter*, 504 F.3d at 1036 (quoting *Bunnell v. Sullivan*, 947 F.2d 341, 344 (9th

21 Cir. 1991) (en banc)). Second, if the claimant meets the first step and there is no 22 evidence of malingering, “‘the ALJ can reject the claimant’s testimony about the 23 severity of [his] symptoms only by offering specific, clear and convincing reasons 24 for doing so.’” *Lingenfelter*, 504 F.3d at 1036 (quoting *Smolen v. Chater*, 80 F.3d 25 1273, 1281 (9th Cir. 1996)). The ALJ must specifically identify the symptom 26 testimony that is being rejected and the “facts in the record lead to that conclusion.” 27 *Smolen*, 80 F.3d at 1284; see also Soc. Sec. Ruling 16-3p Titles II & XVI: 28 Evaluation of Symptoms in Disability Claims, SSR 16-3P, 2017 WL 5180304, *4 4 Case 2:21-cv-08758-GJS Document 24 Filed 03/07/23 Page 5 of 9 Page ID #:926 1 (S.S.A. Oct. 25, 2017) (explaining that the ALJ must “evaluate the intensity and 2 persistence of [the] individual’s symptoms ... and determine the extent to which 3 [those] symptoms limit [his] ... ability to perform work-related activities ...”). 4 Here, Plaintiff testified that he has been unable to work due to hand and lower 5 back pain. [AR 75-77.] Plaintiff stated that he has trouble gripping, handling, 6 lifting more than 10 to 15 pounds, walking more than one block, and performing 7 daily activities for more than 10 to 15 minutes. [AR 75-76, 78-79.] In an Exertion 8 Questionnaire, Plaintiff reported that he cannot drive more than 5 miles, as he 9 experiences severe pain from gripping the steering wheel. [AR 342.] 10 The ALJ found that Plaintiff’s subjective complaints were inconsistent with 11 “the unremarkable to mild objective findings” in the medical record. [AR 24-26.] 12 The ALJ summarized the medical evidence as to each of Plaintiff’s severe 13 impairments and repeatedly asserted that the evidence revealed only “minimal,” 14 “mild,” and “normal” findings. [AR 25-26 “minimal disc bulges at L4-5,” “minimal 15 disc bulging,” “mild CTS,” “mild osteoarthritic changes of the first carpometacarpal 16 joint,” “mild osteoarthritis of the left hand,” “mild CTS in his upper extremities,” 17 “mild disc bulging in the lumbar spine,” “normal range of motion throughout the 18 upper extremities,” “normal motor strength,” “EMG findings of the lower 19 extremities were within normal limits,” “grossly normal gait,” “normal EMG and 20 nerve conduction studies of the lower extremities,” “grossly normal range of motion 21 of the upper extremities and fingers,” and “normal motor strength and sensation 22

throughout”).] While objective medical evidence is a useful factor to consider in 23 evaluating the intensity and persistence of symptoms, the lack of corroborating 24 medical evidence cannot provide the sole basis for rejecting subjective symptom 25 testimony. See *Trevizo v. Berryhill*, 871 F.3d 664, 679 (9th Cir. 2017) (“an ALJ 26 ‘may not disregard [a claimant’s testimony] solely because it is not substantiated 27 affirmatively by objective medical evidence’”) (quoting *Robbins v. Soc. Sec. 28 Admin.*, 466 F.3d 880, 883 (9th Cir. 2006)). 5 Case 2:21-cv-08758-GJS Document 24 Filed 03/07/23 Page 6 of 9 Page ID #:927 1 The ALJ further found that Plaintiff’s treatment was conservative and routine, 2 because it consisted of physical therapy, acupuncture and medication management. 3 [AR 24-26.] The conservative nature of a claimant’s treatment may factor into the 4 evaluation of a claimant’s subjective complaints. See *Parra v. Astrue*, 481 F.3d 742, 5 750-51 (9th Cir. 2007). In the present case, however, the record reveals that 6 Plaintiff’s doctors recommended bilateral carpal tunnel decompression surgery, 2 7 narcotic pain medication (tramadol), and steroid injections. [AR 24, 415, 428, 432, 8 440, 444, 510, 527, 539, 563, 573, 699.] Such treatments cannot properly be 9 characterized as “conservative” within the meaning of Ninth Circuit jurisprudence. 10 See, e.g., *Aguilar v. Colvin*, No. CV 13-08307-VBK, 2014 WL 3557308, at *8 (C.D. 11 Cal. July 18, 2014) (“It would be difficult to fault Plaintiff for overly conservative 12 treatment when he has been prescribed strong narcotic pain medications.”); *Sanchez 13 v. Colvin*, No. CV 12-4061-SP, 2013 WL 1319667, at *4 (C.D. Cal. Mar. 29, 2013) 14 (“Surgery is not conservative treatment.”); *Christie v. Astrue*, 2011 WL 4368189, at 15 *4 (C.D. Cal. Sept. 16, 2011) (refusing to characterize as “conservative,” treatment 16 that included narcotic pain medication and steroid injections). 17 Defendant argues that Plaintiff’s treatment was conservative, because he did 18 not undergo any surgical procedures or receive cortisone injections prior to his date 19 last insured of March 31, 2017. [Def. Br. at 6-7.] The ALJ, however, did not cite 20 Plaintiff’s failure to receive treatment prior to the date last insured as a factor in 21 discounting Plaintiff’s subjective complaints. See *Orn*, 495 F.3d at 630; *Connett v. 22 Barnhart*, 340 F.3d 871, 874 (9th Cir. 2003) (error to affirm ALJ’s credibility 23 decision based on reasons not cited by the ALJ). Moreover, the recommendations 24 for surgery and steroid injections were documented in Plaintiff’s medical records 25 well before Plaintiff’s date last insured. [AR 427, 563, 699.] Although surgery was 26 ultimately denied by Plaintiff’s insurance carrier and Plaintiff did not receive his 27 2 The ALJ noted that Plaintiff’s insurance carrier declined to approve bilateral 28 carpal tunnel decompression surgery. [AR 24.] 6 Case 2:21-cv-08758-GJS Document 24 Filed 03/07/23 Page 7 of 9 Page ID #:928 1 first steroid injection until January 2018, evidence post-dating the date last insured 2 is probative of Plaintiff’s pre-date last insured impairments. See *Smith v. Bowen*, 3 849 F.2d 1222, 1225 (9th Cir. 1988) (“[M]edical evaluations made after the 4 expiration of a claimant’s insured status are relevant to an evaluation of the pre- 5 expiration condition.”). 6 The Defendant also asserts that Plaintiff responded favorably to conservative 7 treatment. [Def. Brief at 15; AR 24-25.] Defendant points out that Plaintiff’s 8 acupuncture reports from February and March 2015 reflect improvement in some of 9 his symptoms (i.e., increased

range of motion, strength, endurance, ability to 10 perform activities of daily living, and reduced pain) and Plaintiff indicated in March 11 2016 that physical therapy and acupuncture “arguably helped.” [AR 24, 666, 670, 12 693.] However, the record overall indicates that Plaintiff’s improvement was partial 13 or temporary. [AR 24, 666, 670.] In June 2015, Plaintiff’s doctor, Dr. Katzen, 14 recommended Plaintiff undergo surgical carpal tunnel decompression, as Plaintiff 15 “failed conservative treatment” and had “not improved” following six months of 16 non-surgical treatment. [AR 427-28.] In February and March 2016, Dr. Katzen also 17 reported that Plaintiff’s carpal tunnel syndrome had worsened and was likely to 18 result in permanent impairments without decompression surgery. [AR 456, 464.] 19 Thus, the record shows that despite experiencing temporary periods of improvement 20 from acupuncture treatments, Plaintiff continued to experience pain and symptoms. 21 See *Garrison v. Colvin*, 759 F.3d 995, 1017 (9th Cir. 2014) (ALJ may not simply 22 “pick out a few isolated instances of improvement over a period of months or years 23 and [] treat them as a basis for concluding a claimant is capable of working.”); 24 *Ghanim v. Colvin*, 763 F.3d 1154, 1162 (9th Cir. 2014) (ALJ should take “holistic 25 review of the record” in evaluating medical opinions). 26 Accordingly, the ALJ’s consideration of Plaintiff’s subjective symptom 27 testimony is not supported by substantial evidence. 28 7 Case 2:21-cv-08758-GJS Document 24 Filed 03/07/23 Page 8 of 9 Page ID #:929

1 V. REMAND FOR FURTHER PROCEEDINGS

2 The Court has discretion to remand or reverse and award benefits. See 3 *Trevizo*, 871 F.3d at 682. It may be appropriate to direct an immediate award of 4 benefits when the record has been fully developed, no useful purpose would be 5 served by further proceedings, and the ALJ has failed to provide legally sufficient 6 reasons for rejecting evidence. *Id.* (citing *Garrison*, 759 F.3d at 1019). But when 7 there are outstanding issues that must be resolved before a determination can be 8 made, and it is not clear from the record that the ALJ would be required to find a 9 claimant disabled if all the evidence were properly evaluated, remand for further 10 proceedings is appropriate. See *Garrison*, 759 F.3d at 1021; *Harman v. Apfel*, 211 11 F.3d 1172, 1180-81 (9th Cir. 2000) (remand for further proceedings rather than for 12 the immediate payment of benefits is appropriate where there are “sufficient 13 unanswered questions in the record”). 14 In this case, there are outstanding issues that must be resolved before a proper 15 disability determination can be made. The ALJ made numerous, detailed findings 16 based on the objective medical evidence that raise questions about Plaintiff’s level 17 of functioning. See *Treichler v. Comm’r of Soc. Sec. Admin.*, 775 F.3d 1090, 1104 18 (9th Cir. 2014) (finding that the record was “uncertain and ambiguous” and remand 19 was warranted where there were “significant factual conflicts in the record between 20 [the plaintiff’s] testimony and objective medical evidence”). Therefore, the Court 21 remands this case for further proceedings. See *Leon v. Berryhill*, 880 F.3d 1041, 22 1046 (9th Cir. 2017) (“A district court cannot proceed directly to credit a claimant’s 23 testimony as true and then look to the record to determine whether there are any 24 issues outstanding, as ‘this reverses the required order of analysis.’”) (quoting 25 *Dominguez v. Colvin*, 808 F.3d 403, 409

(9th Cir. 2015)); see also Treichler, 775 26 F.3d at 1106 (“[A] reviewing court is not required to credit claimants’ allegations 27 regarding the extent of their impairments as true merely because the ALJ made a 28 legal error in discrediting their testimony.”). 8 Case 2:21-cv-08758-GJS Document 24 Filed 03/07/23 Page9of9 Page ID #:930 1 Having found that remand is warranted, the Court declines to address 2 || Plaintiffs remaining issue. See Hiler v. Astrue, 687 F.3d 1208, 1212 (9th Cir. 2012) 3 || (“Because we remand the case to the ALJ for the reasons stated, we decline to reach 4 || [plaintiff’s] alternative ground for remand.”).

6 VI. CONCLUSION

7 For all of the foregoing reasons, IT IS ORDERED that: 8 (1) the decision of the Commissioner is REVERSED and this matter is 9 || REMANDED pursuant to sentence four of 42 U.S.C. § 405(g) for further 10 || administrative proceedings consistent with this Memorandum Opinion and Order; 11 || and 12 (2) Judgment be entered in favor of Plaintiff. 13 14 IT IS SO ORDERED. 15 16 || DATED: March 7, 2023

18 GAIL J. STANDISH

UNITED STATES MAGISTRATE JUDGE

19 20 21 22 23 24 25 26 27 28