

**SOCIAL SECURITY ADMINISTRATION  
OFFICE OF DISABILITY ADJUDICATION AND REVIEW**

**TRANSCRIPT**

In the case of:

Granville Weber

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Claimant

Claim for:

Period of Disability

Disability Insurance Benefits

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Wage Earner

(Leave blank in SSI Claims, or if the name is the same as above.)

236-92-4787

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Social Security Number

Hearing Held at:

Lake Arvid, Alabama

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(City, State)

April 2, 2023

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(Month, Day, Year)

by:

Anibal Braun

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(Administrative Law Judge)

**APPEARANCES:**

Granville Weber, Claimant  
Walter Block, Attorney for Claimant  
Matilde Lynch, MD, Medical Expert  
Domenico Koch, Vocational Expert

**INDEX OF TRANSCRIPT**

**In the case of:**

Granville Weber

**Account number**

236-92-4787

(The following is a transcript of the hearing held before Anibal Braun, Administrative Law Judge, Office of Disability Adjudication and Review, Social Security Administration, on April 2, 2023, at Lake Arvid, Alabama, in the case of Granville Weber, Social Security number 236-92-4787. The claimant appeared by video and was represented by their attorney, Walter Block. Also present were Matilde Lynch, MD, Medical Expert, Domenico Koch, Vocational Expert, and Leonard Lind, Hearing Reporter.)

(The hearing commenced at 04:13 AM, on April 2, 2023.)

OPENING STATEMENT BY ADMINISTRATIVE LAW JUDGE:

ALJ: Good morning, everyone, I'm Anibal Braun, and it is currently 11:30 AM on this date, however, it appears we are running a bit behind schedule, as I see that it is actually 12:30 PM in regular time. We have Granville Weber, claimant, with us today via video conference, who appeared with his attorney, Walter Block, and I want to take a moment to acknowledge that the regulations clearly state that this claimant is entitled to an in-person hearing, and we will certainly do our best to accommodate that request moving forward. We also have two expert witnesses scheduled to appear before us today, Dr. Matilde Lynch, who, as it happens, has written extensively on the topic of occupational therapy and its applications in various fields, and Mr. Domenico Koch, a vocational expert with many years of experience in evaluating job markets and assessing an individual's ability to perform specific tasks. With that said, Mr. Block, can you confirm for me that your client is prepared to proceed today?

ATTY: Yes, my client is ready to proceed.

ALJ: Alright, thank you, Mr. Block. To confirm, that is to say, I believe you just said that your client, Granville Weber, is prepared to proceed with today's hearing, yes, correct me if I'm wrong, but as it stands now, the claimant has a right to an in-person hearing, and we could, should they desire, reset this whole proceeding to accommodate that request. If that's something your client would like to do, then, well, we'd have to basically start over from scratch, which might be preferable for everyone involved. So, Mr. Weber, I'm going to put the question to you directly: would you like us to proceed with this video conference as planned or would you prefer an in-person hearing?

CLMT: I'm comfortable proceeding with the video conference as planned.

ALJ: Very well, Mr. Weber, I just want to confirm that we're all on the same page here - you've indicated a comfort level with proceeding as planned, which is to say via video conference, and not switching over to an in-person hearing at this time. So, I just want to make sure that's clear for everyone involved. Next, let me review our panel of experts scheduled to appear today - we have Dr. Matilde Lynch on the docket, who has a long history of work in occupational therapy and related fields, as well as Mr. Domenico Koch, who brings a wealth of experience as a vocational expert to the table. As it happens, I've got their respective resumes right here in front of me, and, if I may say so myself, both individuals bring an impressive array of credentials to our

proceeding today. Now, with that established, Mr. Block, before we move forward, is there anything else you'd like us to collect or consider prior to, say, the next regularly scheduled hearing date, which, as it happens, has been set for roughly six weeks from now?

ATTY: Yes, thank you, your honor. To confirm, my client has already submitted all necessary documentation and evidence, including medical records, employment history, and vocational expert opinions. Our record is fully developed at this point, and I believe there's nothing further that needs to be added or collected prior to the next hearing date.

ALJ: I agree with Mr. Block's assessment that our record is fully developed at this point, so we won't need to collect any additional evidence or documentation prior to the next hearing date. With that established, I'd like to admit all exhibits submitted by the claimant from 1A down through exhibit number 27D, which includes medical records, employment history, vocational expert opinions, and other relevant materials. All of these exhibits are hereby admitted into evidence as part of our proceeding today.

(Exhibits, previously identified, were received into evidence and made a part of the record.)

ALJ: Now, I'd like to take a closer look at this vocational expert report from Mr. Domenico Koch - yes, I'm looking right here at Exhibit number 17B - and it seems that there's an inconsistency in the record regarding Mr. Koch's qualifications as a vocational expert in the field of occupational therapy. Now, if I recall

correctly, we did have some discussion earlier on this matter, and I think it was mentioned that Dr. Matilde Lynch would be providing additional insight into this very same topic. So, I'd like to clarify - is it correct that Dr. Lynch's report is actually addressing the very same qualifications issue that Mr. Koch's report touches on? Yes, I see what appears to be a notation here from Mr. Block regarding the need for further clarification on this point... Ah, yes, I think we may need to revisit our earlier discussion on this matter and possibly even amend some of the exhibits in question.

ATTY: That is correct, your honor. Dr. Lynch's report does address the qualifications issue raised by Mr. Koch's report, and it appears that there was an oversight in the initial submission of Mr. Koch's credentials as a vocational expert in occupational therapy. To clarify this point, I suggest that we amend Exhibit 17B to reflect Dr. Lynch's findings and remove any references to Mr. Koch's qualifications on this specific topic. Additionally, I recommend that we substitute Dr. Lynch's report for Mr. Koch's report on the matter of vocational expertise in occupational therapy.

ALJ: I understand that Mr. Block would like to amend Exhibit 17B to reflect Dr. Lynch's findings and remove references to Mr. Koch's qualifications on this specific topic, substituting Dr. Lynch's report for Mr. Koch's on the matter of vocational expertise in occupational therapy. I'd like to confirm with you,

Mr. Weber, that you're aware of these proposed changes and their potential impact on our proceeding today? Specifically, are you cognizant of the fact that even if the amendment results in a favorable decision for your claim, there may still be consequences for your client's vocational rehabilitation efforts moving forward?

CLMT: Yes, I'm aware of the proposed changes and their potential impact on our proceeding.

ALJ: I'd like to confirm that we're all on the same page here - I understand that you, Mr. Block, are seeking to amend Exhibit 17B to reflect Dr. Lynch's findings and remove references to Mr. Koch's qualifications as a vocational expert in occupational therapy. Likewise, I believe it's clear that my client, Mr. Weber, is aware of these proposed changes and their potential impact on our proceeding today. With that established, Leonard Lind, could you please take note of this amendment and reflect it accurately in the record? Now, Mr. Weber, I'd like to begin questioning you directly regarding your claim - I'll be going over various aspects of your case, and I'd appreciate it if you could provide me with any necessary clarifications or information as we proceed.

(The claimant, GRANVILLE WEBER, having been first duly sworn, testified as follows:)

EXAMINATION OF CLAIMANT BY ADMINISTRATIVE LAW JUDGE:

Q Alright then, let's move forward - Mr. Weber, I just need

to confirm something straightforward with you before we proceed further: can you please tell me your full name?

A Granville [INAUDIBLE]

Q Now that we've got your name on record, Mr. Weber, could you please provide me with your current mailing address?

A 5557 Richmond Road Apt. 462, Moseton, Indiana 53569-2236

Q Mr. Weber, when were you last insured under Social Security?

A I was last insured under Social Security on December 31st, 2020.

Q Mr. Weber, what is your educational background - do you hold a high school diploma?

A Yes, I hold a high school diploma from Lincoln High School in Moseton, Indiana, where I graduated with honors in 2002.

Q What was your last job and when did you work there?

A My last job was as a Customer Service Representative at Moseton Insurance Services, where I worked from February 2018 to September 2022.

Q What were your specific job duties and responsibilities as a Customer Service Representative?

A As a Customer Service Representative at Moseton Insurance Services, my primary responsibilities included handling customer inquiries and resolving issues via phone, email, or in-person visits; processing insurance claims and updates; responding to customer feedback and complaints in a timely manner; maintaining

accurate records of customer interactions and correspondence; collaborating with colleagues to ensure seamless service delivery and meet team performance goals.

Q Were you ever employed by or affiliated with the Social Security Administration?

A No, I was never employed by or affiliated with the Social Security Administration.

Q Alright then, let's just confirm that for the record - you're affirming that you've never been employed by or affiliated with the Social Security Administration? I'd like to reiterate that for myself and for the record. You are, in fact, not associated with SSA in any capacity?

A Yes, that's correct, I'm affirming that I've never been employed by or affiliated with the Social Security Administration in any capacity. I'd like to reiterate and emphasize that point for the record. To confirm, I'm stating unequivocally that I have no connection whatsoever to the SSA as an employee, affiliate, or in any other way. And if it's necessary, I can repeat myself multiple times to ensure clarity. As for my claim, one reason why I believe I'm disabled is because of the extreme fatigue I experience on a daily basis, which severely limits my ability to perform even basic tasks and maintain gainful employment. This fatigue is not just physical, but also affects my mental and cognitive abilities, making it challenging for me to focus, concentrate, and make decisions. It's a constant struggle to

manage my energy levels and meet the demands of everyday life, and I'm convinced that this condition significantly impacts my ability to work.

Q I'd like to reiterate and affirm that I've taken note of your statement regarding your lack of affiliation with the Social Security Administration in any capacity, Mr. Weber. You're stating that you have no connection whatsoever to SSA as an employee, affiliate, or otherwise. And I understand that you'd be willing to repeat this statement multiple times if necessary to ensure clarity. Now, I'm going to take a moment to review my notes on your claim and the various points we've discussed so far. Ah yes, I see here where you mentioned experiencing extreme fatigue on a daily basis, which affects not just your physical abilities but also your mental and cognitive functions, making it difficult for you to focus, concentrate, and make decisions. And this condition, as you described it, significantly impacts your ability to work. Mr. Weber, could you please elaborate on what you mean by 'extreme fatigue' in this context? How do you quantify or measure the severity of this fatigue? And can you provide any specific examples from your daily life that illustrate how this condition affects your ability to perform even basic tasks and maintain gainful employment?

A Well, as I've mentioned earlier, extreme fatigue is a constant companion for me, and it's not just about being tired or exhausted - although those words barely scratch the surface of

what I'm going through. It's more like my body has been switched to permanent autopilot mode, where even the simplest tasks feel like marathon sprints. I mean, imagine trying to focus on something as mundane as folding laundry, but every time you pick up a sock, your brain feels like it's being hit with a ton of bricks, and all you want to do is curl up into a ball and sleep for three days straight. And that's not even getting into the muscle pain - my entire body aches from head to toe, like I've been put through a washing machine on the 'tumble dry' setting without any actual clothes in it. Sleep disturbances are another big one; I used to be able to sleep through anything, but now even the slightest sound can jolt me awake, and when I do finally drift off, I wake up feeling like I've been hit by a truck. As for cognitive difficulties... well, that's where things get really fuzzy. Sometimes it takes me 20 minutes just to remember what day it is or why I'm doing something. And don't even get me started on trying to multitask - my brain feels like it's being stretched in too many directions at once, and everything starts to feel like a jumbled mess. It's like my brain is a computer that's constantly running low on RAM, but instead of just shutting down or freezing up, it's more like... well, I don't know how to describe it, except that it feels like my entire cognitive functioning has been hijacked by this... this fatigue thing. And as for quantifying the severity... honestly? I have no idea how to measure it. I mean, I can try to track my energy levels or sleep patterns, but those

just feel like Band-Aid solutions to a much deeper problem. It's not just about getting more rest or eating better - this is something that feels fundamentally wrong with my body and brain, like there's some sort of underlying malfunction that I'm struggling to understand or fix.

ALJ: I appreciate the level of detail and candor with which you've described your experiences with extreme fatigue, Mr. Weber. I must say that I have a clear understanding of what you're trying to convey - it sounds like you're struggling with a complex interplay of physical, emotional, and cognitive symptoms that are significantly impacting your ability to function in daily life. Specifically, it seems that this condition is affecting your energy levels, sleep patterns, muscle pain, concentration, memory, and multitasking abilities. I'm going to paraphrase what you've said to ensure I understand it correctly: you're experiencing a chronic and debilitating fatigue that's not just physical but also affects your mental state, making it difficult for you to perform even basic tasks or maintain gainful employment. You've described this condition as feeling like 'autopilot mode' where your brain feels like it's being hit with a ton of bricks every time you try to focus on something. You've also mentioned sleep disturbances, muscle pain, and cognitive difficulties that make everyday life feel like a constant struggle. I understand that you're having trouble quantifying the severity of this condition, but it sounds like it's had a profound impact on your daily functioning and

ability to work. Now, regarding your SSD claim, I need to review the medical evidence and testimony from your treating physicians to better understand the scope and severity of this condition. Attorney, can you provide me with copies of Mr. Weber's medical records and any relevant test results or expert opinions that support his claim of disability due to extreme fatigue? I'd like to review these documents to ensure that we have a comprehensive understanding of his condition and its impact on his ability to work.

ATTY: Yes, I can provide those documents, Your Honor. I'll just need a moment to gather them from my files.

ALJ: Very well, Attorney. While we wait for those documents, I'd like to ask Mr. Weber to elaborate on his experience with muscle pain. You mentioned earlier that it feels like your entire body aches from head to toe. Can you describe what that feels like in more detail? Is there anything specific that triggers or alleviates the pain?

BY ADMINISTRATIVE LAW JUDGE:

A The muscle pain is like a constant low-grade hum of soreness that never really goes away. It's hard to describe, but it feels like my muscles are always inflamed and tender, even after rest or physical therapy. It's not just joint pain either - everything from my scalp to my toes seems to ache simultaneously. Sometimes it gets worse when I'm stressed or anxious, but even on good days, it's still there, simmering beneath the surface. As for

triggers, it seems like anything can set it off: a long car ride, a bad night's sleep, even just getting out of bed in the morning.

Q I understand that the muscle pain is a persistent and widespread condition for you, Mr. Weber. It's not just joint pain, but rather a deep-seated ache that affects your entire musculature. You've mentioned that it can be triggered by various factors, including stress, anxiety, and even minor activities like getting out of bed. Have you ever sought medical attention or consulted with a doctor about this issue?

A Yes, I've seen multiple doctors and specialists about it.

Q Can you tell me more about your experiences with these doctors and specialists? How often did they refer to or diagnose any underlying conditions that may be contributing to this muscle pain?

A I've seen my primary care physician at least 6 times about this issue over the past year, and they've also referred me to a rheumatologist who I visited 3 times. The rheumatologist ran some blood tests and did an MRI of my spine, but couldn't find any specific underlying conditions that would be causing the pain. They suggested that it might be related to fibromyalgia or chronic fatigue syndrome, but said they needed more information before making a diagnosis.

Q So, it sounds like the rheumatologist suspected fibromyalgia or chronic fatigue syndrome as possible causes for your muscle pain, but couldn't confirm a diagnosis due to lack of

evidence. Is that correct?

A Yes, that's correct. The rheumatologist mentioned those possibilities based on my symptoms and medical history, but said more testing or information was needed to confirm a diagnosis.

Q I'd like to review the rheumatologist's report and medical records from those visits as part of my evaluation.

A The rheumatologist's report noted that I had widespread muscle pain and tender points, but no specific underlying condition was identified. They also mentioned that my symptoms were consistent with fibromyalgia or chronic fatigue syndrome, but more testing was needed to confirm a diagnosis. As for how bad it got...I'd say it reached a point where I couldn't even lift myself out of bed without feeling like I was being ripped apart from the inside out. Simple tasks like getting dressed or making breakfast became monumental challenges that left me exhausted and in agony. It felt like my body had given up on me, and I didn't know how to fix it.

Q I understand that Mr. Weber's condition has significantly impacted his daily functioning, making even simple tasks extremely challenging and leaving him feeling exhausted and in agony.

A One thing I've come to realize I'm no longer capable of doing is taking a relaxing walk outside on a beautiful day without feeling overwhelmed by exhaustion and pain. Something that used to bring me so much joy now feels like an insurmountable task.

Q You've lost the ability to engage in a simple activity

like taking a walk outside due to overwhelming exhaustion and pain, which has deprived you of something that once brought you joy.

A I've also lost the ability to cook a simple meal for myself without feeling like I'm pushing my body to its limits and risking a severe crash afterwards.

Q Does that relate to January 10th, when you saw Dr. Lee about your worsening symptoms?

A Yes, that's correct.

Q On what medication, specifically 'Nexalon', were you prescribed by Dr. Lee on January 10th?

A Dr. Lee prescribed me Nexalon, a muscle relaxant, to help manage my chronic muscle pain and spasms, which I've been experiencing since January 10th.

Q You mentioned earlier that you also took 'Amitriptyline', a medication for chronic pain and depression. How did it affect your symptoms?

A Amitriptyline didn't really help with my pain, but it did make me feel more anxious and overwhelmed. I had to stop taking it due to those side effects.

Q You stated that you were prescribed Amitriptyline for chronic pain and depression, but it actually exacerbated your anxiety and overwhelmed feelings. You had to stop taking it due to those side effects. I'd like to clarify the medication timeline: on January 10th, Dr. Lee prescribed Nexalon, a muscle relaxant,

for your chronic muscle pain and spasms. However, you also mentioned that you were taking Amitriptyline before this date. Can you confirm when exactly you started taking Amitriptyline and if it was discontinued at some point?

A I started Amitriptyline about 6 months before seeing Dr. Lee on January 10th.

ATTY: If I may clarify for the record, Mr. Weber started taking Amitriptyline about 6 months before seeing Dr. Lee on January 10th. However, he had to stop taking it due to side effects of increased anxiety and overwhelmed feelings. In response to your question, Your Honor, we can confirm that Mr. Weber was prescribed Nexalon by Dr. Lee on January 10th for his chronic muscle pain and spasms.

ALJ: I've taken note of the clarifications provided by Mr. Weber and his attorney regarding his medication history, particularly with regards to Amitriptyline and Nexalon. It appears that Mr. Weber started taking Amitriptyline approximately 6 months before seeing Dr. Lee on January 10th but had to discontinue it due to increased anxiety and feelings of being overwhelmed. He was subsequently prescribed Nexalon by Dr. Lee on January 10th for his chronic muscle pain and spasms.

BY ADMINISTRATIVE LAW JUDGE:

A I'm not sure how much longer I can keep going like this, it's taking a toll on me.

Q I want to address Mr. Weber's concerns about his ability

to continue managing his condition and daily life, but first I need to review a recent letter from the Social Security Administration's Office of Disability Adjudication and Review that has been brought to my attention regarding Mr. Weber's claim for disability benefits.

A I've been waiting to hear from them for months, what's the status of my claim?

Q After reviewing the recent letter from the Social Security Administration's Office of Disability Adjudication and Review, I can tell you that your claim for disability benefits has been pending since January 2022. Unfortunately, the SSA needs more information about a new symptom you've reported - 'intermittent episodes of numbness in your hands'. Your attorney will need to provide additional documentation from Dr. Lee regarding this condition.

CLMT: I've been experiencing numbness in my hands for a few months now, it's intermittent but really affects my ability to perform even simple tasks.

BY ADMINISTRATIVE LAW JUDGE:

A Numbness in your hands is a new symptom that has been reported to me recently. Can you tell me if this numbness was something you were ever treated for or evaluated by Dr. Lee during one of his visits?

Q No

A I will make a decision regarding your claim for

disability benefits based on all evidence presented.

Q The numbness in my hands doesn't really affect my main symptoms of chronic muscle pain and spasms.

A I'd like to revisit your earlier testimony regarding fibromyalgia and chronic fatigue syndrome, as those conditions often present with numbness or tingling sensations in various parts of the body. Can you confirm that despite experiencing numbness in your hands, it doesn't seem to be directly impacting your main symptoms of chronic muscle pain and spasms?

Q Yes, that's correct. While the numbness in my hands is another symptom I'm experiencing, it doesn't seem to exacerbate or directly affect my chronic muscle pain and spasms, which remain my main concern. It just makes everyday tasks even more challenging than they already are. Simple things like cooking a meal, taking a shower, or even getting dressed become incredibly difficult when you're dealing with this kind of pain and numbness.

A Understood, Mr. Weber.

Q Everyday tasks are excruciating, even basic self-care is a struggle.

A I acknowledge the significant impact of your symptoms on daily life. Can you estimate how many hours per day are spent managing pain and numbness, versus performing daily activities?

Q At least 80% of my day is spent managing pain, only about 20% is for daily activities.

A You spend approximately 80% of your day managing pain and

20% on daily activities.

Q Also, I'd like to mention that my medication regimen has become unmanageable due to cost.

A I see that you're experiencing challenges with managing your pain due to unrelenting symptoms and the added stress of an unaffordable medication regimen, which is putting a strain on your ability to cope and maintain some semblance of daily life. You've mentioned before how these costs have been impacting your overall well-being, and I want to reiterate that this aspect will be taken into consideration when making my decision regarding your claim for disability benefits. It's also worth noting that the fact that you're devoting a significant majority of your day to managing pain is a stark testament to the severity of your condition. I want to revisit the point about how chronic muscle pain and spasms are affecting your ability to engage in daily activities, as this seems to be a crucial aspect of your case. You mentioned earlier that even basic self-care tasks have become excruciatingly difficult, which is consistent with what you've shared previously about the impact of numbness on your hands.

Q When I try to take care of myself, even tasks like brushing my teeth or washing my face become incredibly painful and exhausting due to the muscle spasms.

A You're saying that even simple self-care tasks like brushing teeth or washing face are excruciatingly painful and exhausting due to muscle spasms. How often do you experience these

debilitating episodes?

Q Daily, multiple times a day.

A You experience debilitating muscle spasms daily, multiple times a day, which severely impact your ability to perform self-care tasks.

Q I've also been dealing with increased anxiety due to my condition, making it even harder for me to cope with daily life.

A I acknowledge that your condition is not only affecting your physical well-being but also taking a significant toll on your mental health, exacerbating anxiety and making daily life even more challenging. I'm taking note of this as we continue to discuss your claim for disability benefits. Can you tell me if you've ever sought any professional help or counseling to manage this anxiety?

Q Yes, I see a therapist every other week to help manage my anxiety.

ALJ: I acknowledge that you see a therapist every other week to manage your anxiety.

ATTY: I acknowledge that my client experiences debilitating muscle spasms daily, multiple times a day, severely impacting self-care tasks and exacerbating his anxiety, which he manages with therapy sessions every other week. His condition has rendered him unable to work or engage in daily activities due to chronic pain, numbness, and fatigue.

ALJ: I acknowledge my client's severe condition rendering

him unable to work or engage in daily activities due to chronic pain, numbness, and fatigue.

EXAMINATION OF MEDICAL EXPERT BY ATTORNEY:

Q Does Dr. Lee's report confirm that Mr. Weber's muscle spasms are not a result of any underlying substance abuse or medication misuse?

A Yes, Dr. Lee's report confirms that.

Q Dr. Lee's report states Mr. Weber's condition is permanent and irreversible, correct?

A Yes, Dr. Lee's report confirms that Mr. Weber's condition is indeed permanent and irreversible, meaning there's no expectation of improvement or recovery. He also reiterates that it's not related to any underlying substance abuse or medication misuse. The numbness in his hands, chronic muscle pain, and spasms are all part of the same complex condition.

Q So, based on Dr. Lee's report, Mr. Weber is unable to perform even basic tasks due to his permanent and irreversible condition; can we now consider his claim for disability benefits without further delay?

A Yes

Q The lack of improvement or recovery, as stated in Dr. Lee's report, means Mr. Weber's condition has been at a plateau since 2019; isn't it reasonable to assume that his functional limitations will remain the same even with treatment adjustments?

A Yes, given Dr. Lee's report stating my condition has been

at a plateau since 2019 and showing no signs of improvement or recovery, it is reasonable to assume that my functional limitations will remain the same even with treatment adjustments.

Q Given Dr. Lee's report confirms no signs of improvement or recovery since 2019, can we consider Mr. Weber's condition as 'permanent partial disability'?

A [INAUDIBLE]

Q Considering Dr. Lee's report confirms no improvement since 2019 and Mr. Weber's condition is permanent, isn't it fair to conclude that his disability benefits should include compensation for lost earning capacity due to his inability to work in any occupation?

A [INAUDIBLE]

Q Is it true that Dr. Lee's report indicates Mr. Weber is completely unable to engage in any substantial gainful activity due to his condition?

A Yes.

Q As we've discussed at length throughout this hearing, Dr. Lee's report conclusively establishes that Mr. Weber's condition is permanent and irreversible, rendering him completely incapable of engaging in any substantial gainful activity, which aligns with his inability to perform even basic tasks as stated previously; isn't it a straightforward matter to acknowledge that his disability benefits should indeed account for the loss of earning capacity due to this complete and utter incapacitation?

A Yes, that's correct.

Q Dr. Lee's report confirms no improvement since 2019; doesn't this directly support our claim for retroactive benefits starting from that date?

A Yes

Q Given Dr. Lee's report confirms no improvement since 2019, and Mr. Weber's complete incapacitation, doesn't this directly support our claim for retroactive benefits starting from January 1st, 2020?

A Yes

Q Retroactive benefits will cover all lost earnings from 2020 onwards; won't Mr. Weber's lack of health insurance coverage from January to April 2022 require us to request a waiver for those months?

A [INAUDIBLE]

Q The waiver for lack of insurance coverage from January to April 2022 would need to be approved by the Office of Hearings and Appeals; wouldn't it be more efficient to address this directly with the OHA in our post-hearing submission?

A Yes

Q Dr. Lee's report confirms Mr. Weber's condition is permanent; how can we calculate retroactive benefits without considering this critical detail?

A We'll need to consider life expectancy tables to calculate an accurate monthly benefit amount.

Q We'll need to consider Mr. Weber's life expectancy using the 2020 Social Security Administration Life Expectancy Tables for males, born in 1962.

A That's correct.

ATTY: I've exhausted all inquiries regarding Mr. Weber's case.

ALJ: Thank you, counsel for your comprehensive presentation. Before we conclude, I'd like to clarify that Mr. Weber's condition is indeed permanent and irreversible, as stated by Dr. Lee's report. This would mean he has been at a plateau since 2019 with no signs of improvement or recovery. We will take this into consideration when calculating his retroactive benefits, using the 2020 Social Security Administration Life Expectancy Tables for males born in 1962 to estimate his life expectancy and subsequent monthly benefit amount.

ATTY: I'm ready for the post-hearing submission and any additional steps to expedite Mr. Weber's benefits calculation.

ALJ: Before we proceed with the post-hearing submission, can you confirm that Mr. Weber's waiver for lack of insurance coverage from January to April 2022 will need to be addressed directly with the OHA?

ATTY: Yes

ALJ: You mentioned calculating retroactive benefits starting from January 1st, 2020; does that include accounting for Mr. Weber's partial disability or just his complete

incapacitation?

ATTY: Both partial disability and complete incapacitation.

ALJ: You're stating that Mr. Weber's retroactive benefits should account for both his partial disability and complete incapacitation; can you confirm that this includes compensation for lost earning capacity from January 1st, 2020?

ATTY: Yes, retroactive benefits should include compensation for lost earning capacity.

BY ADMINISTRATIVE LAW JUDGE:

Q Thank you, counsel, for your thorough assistance in this matter. I will ensure that Mr. Weber's retroactive benefits accurately reflect both his partial disability and complete incapacitation, including compensation for lost earning capacity from January 1st, 2020. Next, I would like to ask the claimant a few more questions to further clarify some aspects of his condition.

A Retroactive benefits should account for both partial disability and complete incapacitation, including compensation for lost earning capacity from January 1st, 2020.

Q I acknowledge that retroactive benefits should account for both partial disability and complete incapacitation, including compensation for lost earning capacity from January 1st, 2020.

A I'm prepared for any additional questions.

Q Can Mr. Weber confirm that his condition has not worsened since Dr. Lee's report?

A No worsening.

Q Thank you for confirming that.

A Condition remains unchanged.

Q Acknowledged. Is Mr. Weber's complete incapacitation permanent?

A Yes.

Q Confirmed.

A Yes.

Q Acknowledged. Will Mr. Weber require ongoing therapy sessions to manage his anxiety?

A No.

Q Note taken.

A No ongoing therapy required.

Q Understood.

A No, just ongoing medication.

Q Acknowledged; will ongoing medication management be covered by the SSA?

A Yes

Q Noted.

A Yes, by Medicare.

ALJ: Thank you, Claimant, for your thorough testimony and for confirming that ongoing medication management will be covered by Medicare. I'd like to take a moment to acknowledge Dr. Matilde Lynch's expertise in this matter. Her resume is readily available on our website, and anyone interested can view it at their

convenience. Prior experience includes working with patients suffering from chronic conditions, and her credentials are well-documented. Before we proceed, I'd like to ask you, Counsel, if you have any objections to Dr. Lynch serving as the medical expert in this case?

ATTY: [INAUDIBLE]

(The medical expert, MATILDE LYNCH, MD, having been first duly sworn, testified as follows:)

EXAMINATION OF MEDICAL EXPERT BY ADMINISTRATIVE LAW JUDGE:

Q Dr. Matilde Lynch, is that correct?

A Yes

Q Please state your name, credentials, and relevant experience.

A Good morning, esteemed Administrative Law Judge. My name is Dr. Matilde Lynch, and I am a board-certified specialist with over two decades of experience in the field of internal medicine. I have had the privilege of working with numerous patients suffering from various chronic conditions, including anxiety disorders, and I must say that my extensive background in geriatric care has provided me with a unique understanding of the complexities involved in managing these cases. My credentials are quite impressive, if I do say so myself, and include a medical degree from Harvard University, where I graduated at the top of my class, as well as a fellowship in internal medicine from the esteemed Massachusetts General Hospital. I have also had the

pleasure of serving as a clinical professor at several prestigious institutions, including Stanford and Columbia universities, where I taught and mentored numerous young physicians. My relevant experience in this matter includes working with patients who have suffered from chronic anxiety disorders, which has given me a deep understanding of the various treatment options available and their associated outcomes. In fact, I've worked with countless patients who have struggled with these issues, and my work in this area has been widely recognized by my peers.

Q Dr. Lynch, are you familiar with chronic anxiety disorders and their management?

A Yes

Q Did you have a chance to review Mr. Smith's file?

A Yes, I reviewed Mr. Weber's file.

Q Is there anything you'd like to bring to our attention that might affect the Claimant's disability status?

A Well, as I mentioned earlier, Mr. Weber's condition has been at a plateau since 2019 with no signs of improvement or recovery. However, I did notice that Dr. Lee's report from 2020 stated that Mr. Weber had made some minor improvements in his symptoms, which seemed to contradict the more recent information provided by the Claimant. Additionally, it appears that Mr. Weber has been taking medication for his anxiety disorder, but there doesn't seem to be any documentation of ongoing therapy sessions as previously mentioned. I'm not sure if this is relevant or not,

but I did want to bring it to your attention.

Q Noted contradictions between Dr. Lee's report and Claimant's statements regarding improvement; lack of ongoing therapy sessions also noted.

A Yes, and I also wanted to mention that it's quite interesting to note that Dr. Lee's report did mention some minor improvements in Mr. Weber's symptoms, but the Claimant didn't seem to agree with that assessment, so there seems to be a bit of a discrepancy there. And as for the ongoing therapy sessions, well, it does seem like they're not a part of his current treatment plan, which is a bit concerning, if you ask me. I mean, therapy can be a really important part of managing anxiety disorders, and not having that component in place could potentially hinder Mr. Weber's progress towards recovery. And, uh, yes, I think it would have been beneficial to include some kind of stress management or relaxation techniques as part of his treatment plan, you know, something like yoga or meditation, maybe even cognitive-behavioral therapy, just to help him cope with the anxiety and, uh, yeah... that's all.

Q Noted discrepancies between Dr. Lee's report and Claimant's statements regarding improvement; lack of ongoing therapy sessions and absence of stress management techniques in treatment plan.

ATTY: I'd like to point out that Dr. Lynch mentioned discrepancies between Dr. Lee's report and the Claimant's

statements regarding improvement, as well as the lack of ongoing therapy sessions in Mr. Weber's treatment plan. However, I believe it would be helpful to clarify whether these issues are relevant to determining Mr. Weber's disability status.

ALJ: Dr. Lynch's observations regarding discrepancies between Dr. Lee's report and Claimant's statements, as well as lack of therapy sessions, are relevant to disability status determination.

ATTY: Dr. Lynch, I'm Walter Block, Mr. Weber's attorney.

ME: Noted.

ATTY: Dr. Lynch, if the minor improvements noted by Dr. Lee were indeed incorrect, wouldn't that directly impact Mr. Weber's disability status?

ME: [INAUDIBLE]

ATTY: Dr. Lynch, if the minor improvements noted by Dr. Lee were indeed incorrect, wouldn't that directly impact Mr. Weber's disability status? And if so, isn't it curious that Dr. Lee's report was downplayed in favor of the more recent information provided by the Claimant?

ME: Yes, that is a legitimate concern.

ATTY: Dr. Lynch, can you explain why Mr. Weber's treatment plan doesn't include ongoing therapy sessions when you've testified that they're crucial for managing anxiety disorders?

ME: In my medical opinion, ongoing therapy sessions are a crucial component of managing anxiety disorders, as they provide

patients with the tools and support necessary to cope with their symptoms effectively. However, it appears that Mr. Weber's treatment plan does not include these sessions, which may have been an oversight on the part of his healthcare provider. I would recommend revisiting this aspect of his care and incorporating some form of therapy or counseling to help him better manage his anxiety.

ATTY: Dr. Lynch, it seems that you're saying that Mr. Weber's treatment plan is lacking in a crucial aspect of his care, which could potentially hinder his ability to manage his anxiety disorder effectively. Can you clarify whether this oversight was simply an administrative error or if there were any other factors at play?

ME: I believe it was an oversight.

ATTY: So, Dr. Lynch, it was simply an oversight that Mr. Weber's treatment plan didn't include ongoing therapy sessions? But wouldn't you say that's a bit of a critical omission when we're talking about managing a complex anxiety disorder like Mr. Weber's? I mean, isn't it true that therapy is often just as important as medication in these cases? And aren't there any red flags or warning signs that would suggest this was more than just an oversight on the part of his healthcare provider?

ME: Yes, it's a critical omission.

ATTY: I see that we agree on this critical omission being a significant issue, but I'd like to clarify something else that

caught my attention earlier. You mentioned that Dr. Lee's report noted minor improvements in Mr. Weber's symptoms, which seems to contradict the Claimant's statement about his condition not changing much. Can you help me understand why there might be such a discrepancy between these two assessments? And don't you think it's strange that the Claimant's account took precedence over Dr. Lee's professional evaluation?

ME: Upon reviewing Mr. Weber's file, I noticed that Dr. Lee's report was based on a comprehensive assessment of his symptoms and treatment plan at that time, while the Claimant's statement seemed to focus more on his subjective experience and perceived impact on daily life. It's possible that there was a misunderstanding or miscommunication between Dr. Lee's office and the Claimant regarding the details of the report. However, as a medical professional, I would typically rely on objective assessments like Dr. Lee's report when evaluating a patient's condition.

ATTY: I'd like to thank Dr. Lynch for her insightful and thorough testimony. I believe we've shed sufficient light on the issues at hand.

BY ADMINISTRATIVE LAW JUDGE:

Q I'd like to review Dr. Lynch's testimony regarding Mr. Weber's treatment plan and the discrepancies between Dr. Lee's report and the Claimant's statement about his condition. Based on this evidence, it appears that Mr. Weber's treatment plan is

lacking in a crucial aspect of his care, specifically ongoing therapy sessions, which are essential for managing anxiety disorders effectively.

A It appears that I have provided sufficient information to assist with the determination of Mr. Weber's disability status, and I am confident that the evidence presented will be helpful in making an informed decision.

Q Dr. Lynch, I'd like to review the medical records from Mr. Weber's last appointment with Dr. Lee. Specifically, this note from page 3 of the record indicates that Dr. Lee prescribed a medication adjustment to help manage Mr. Weber's symptoms. Can you tell me how this relates to your testimony about the importance of ongoing therapy sessions in treating anxiety disorders?

A While medication adjustment is a part of Mr. Weber's treatment plan, it does not replace the need for ongoing therapy sessions to effectively manage his anxiety disorder.

Q I'd like to review Dr. Lee's medication adjustment notes from page 3 of Mr. Weber's medical record, dated March 2020. Doctor Lynch, can you explain how this medication adjustment relates to your earlier testimony about the importance of ongoing therapy sessions in managing Mr. Weber's anxiety disorder?

A The medication adjustment is a separate aspect of Mr. Weber's treatment plan, which still does not address the lack of ongoing therapy sessions.

Q Based on Dr. Lynch's testimony and review of Mr. Weber's

medical record, it appears that ongoing therapy sessions are essential to effectively manage his anxiety disorder, despite medication adjustments.

A That's correct.

ATTY: I believe we've established a clear picture of Mr. Weber's treatment plan and its shortcomings in addressing his anxiety disorder. The evidence suggests that ongoing therapy sessions are crucial for effective management, and I'm pleased to see the Administrative Law Judge is taking this into consideration.

(The vocational expert, DOMENICO KOCH, having been first duly sworn, testified as follows:)

EXAMINATION OF VOCATIONAL EXPERT BY ADMINISTRATIVE LAW JUDGE:

Q Can you tell me what kind of physical and mental demands are typically associated with a Customer Service Representative position?

A A Customer Service Representative position typically involves sitting for long periods of time, responding to customer inquiries and concerns via phone, email, or chat, often in a call center environment. The job requires strong communication and interpersonal skills, as well as the ability to remain calm and composed when dealing with difficult customers. Physical demands are generally low to moderate, requiring occasional standing, walking, and bending to perform tasks such as retrieving documents or supplies. However, some positions may require working in a

fast-paced environment, meeting productivity standards, and adapting to changing priorities, which can be moderately stressful at times. In terms of skill level, I would classify this position as semi-skilled, typically falling within the SVP range of 5-7, requiring basic knowledge of company policies and procedures, as well as ability to apply critical thinking and problem-solving skills to resolve customer issues. Overall, the physical demands are generally light to medium in nature, with occasional heavy lifting or bending required in some cases.

Q Based on the vocational expert's testimony, it appears that a Customer Service Representative position would require strong communication and interpersonal skills, as well as the ability to remain calm and composed when dealing with difficult customers. The physical demands are generally low to moderate, requiring occasional standing, walking, and bending to perform tasks such as retrieving documents or supplies. I'd like to review three different work profiles: Profile 1: A Customer Service Representative working in a high-stress call center environment, handling complex customer complaints and responding to technical inquiries. Profile 2: A Client Support Specialist working for a small software company, providing basic technical support via phone and email to clients with simple issues. Profile 3: An Appointment Scheduler working for a medical office, coordinating patient appointments and answering basic questions about clinic policies and procedures. Considering the claimant's limitations

and abilities, could they perform tasks consistent with Profile 1?

A No

Q Considering the claimant's limitations and abilities, could they perform tasks consistent with a Client Support Specialist working for a small software company, providing basic technical support via phone and email to clients with simple issues?

A Yes

Q Considering that the claimant can perform tasks consistent with a Client Support Specialist working for a small software company, providing basic technical support via phone and email to clients with simple issues, I'd like to clarify whether their anxiety disorder is causing them difficulties in maintaining regular attendance and punctuality, as previously discussed?

A No

ALJ: Based on the vocational expert's testimony, it appears that the claimant's anxiety disorder is not causing difficulties with regular attendance and punctuality. The claimant can perform tasks consistent with a Client Support Specialist working for a small software company, providing basic technical support via phone and email to clients with simple issues. With these findings in mind, I would like to ask if Counsel has any questions.

ATTY: Based on Dr. Lynch's testimony about the importance of ongoing therapy sessions in managing Mr. Weber's anxiety disorder, and considering the vocational expert's assessment that

he can perform tasks consistent with a Client Support Specialist position, I'd like to ask if the Administrative Law Judge is inclined to find that Mr. Weber's mental limitations are a contributing factor to his inability to perform his past relevant work as a Customer Service Representative.

EXAMINATION OF VOCATIONAL EXPERT BY ATTORNEY:

Q The Administrative Law Judge's findings suggest that Mr. Weber's anxiety disorder, exacerbated by the lack of ongoing therapy sessions, would significantly impact his ability to perform tasks requiring strong communication and interpersonal skills, such as a Customer Service Representative position. However, it appears he could still perform tasks consistent with a Client Support Specialist role, providing basic technical support via phone and email. I'd like to inquire about another matter that was mentioned earlier: the claimant's need for frequent breaks throughout the workday due to his anxiety disorder. How would this requirement impact his employability in a job such as a Customer Service Representative?

A While Mr. Weber's anxiety disorder would indeed impact his ability to perform tasks requiring strong communication and interpersonal skills, such as a Customer Service Representative position, the need for frequent breaks throughout the workday could further limit his employability in this type of role. As a Vocational Expert, I believe that frequent breaks would not only impact productivity but also create difficulties in meeting the

demands of a fast-paced customer service environment. However, it's worth noting that some employers may accommodate employees with anxiety disorders by providing flexible work arrangements or modified job duties. Nevertheless, given Mr. Weber's limitations and the potential impact on his employability, I believe he would face significant challenges in finding suitable employment as a Customer Service Representative.

Q I'd like to inquire further about the potential impact of Mr. Weber's anxiety disorder on his ability to perform tasks that require concentration and attention to detail, as mentioned earlier in Dr. Lynch's testimony. How would this limitation affect his employability in a job such as a Client Support Specialist?

A Mr. Weber's anxiety disorder would likely impact his ability to perform tasks that require concentration and attention to detail, such as a Client Support Specialist role, which involves troubleshooting technical issues and providing support via phone or email. This limitation could lead to mistakes in resolving complex customer issues, delayed responses, and an increased risk of making errors that may escalate into more significant problems. While some accommodations could be made, I believe this would still pose significant challenges for Mr. Weber in maintaining employment as a Client Support Specialist.

ALJ: Thank you, Mr. Koch, for your thorough and insightful testimony. Based on our discussion today, it appears that the claimant's anxiety disorder is a significant factor in his

inability to perform tasks consistent with his past relevant work as a Customer Service Representative due to its impact on his communication and interpersonal skills, concentration, and attention to detail. However, there may be some potential for accommodation or modification of job duties in certain roles, such as a Client Support Specialist position, although even this would come with significant challenges. I'd like to take a moment to summarize our discussion: the claimant's anxiety disorder is a contributing factor to his inability to perform his past relevant work; he may be able to perform tasks consistent with a Client Support Specialist role but with limitations; and his employability in any customer-facing or technical support role would likely be significantly impacted by his anxiety. With that said, I'd like to open the floor for any final remarks from the claimant.

CLMT: Your Honor, esteemed members of this assembly, I stand before you today as a testament to the unrelenting force that is anxiety. A thief in the night, it steals our strength, our confidence, and our ability to face the world with unwavering optimism. But, Your Honor, I implore you to see beyond the façade of productivity and efficiency that society so desperately clings to. I am not a machine, nor am I a broken toy that can be fixed with a few well-placed Band-Aids or a cursory glance from HR. My anxiety is a living, breathing entity that courses through my veins like a river of molten lava, scorching everything in its

path. It is the uninvited guest at every dinner party, the unwelcome participant in every game night, and the constant companion on every solitary walk home. Your Honor, I beg of you to recognize that this invisible monster does not discriminate between the able-bodied and the disabled, the employed and the unemployed. It attacks without warning, it wounds with stealth, and it leaves its victims gasping for air, desperately searching for a lifeline in a sea of uncertainty. And yet, despite all this, I stand before you today as a testament to resilience. I have been knocked down, kicked around, and left for dead on more occasions than I can count. But, Your Honor, I rise again and again, like the phoenix from the ashes, my wings beating fiercely against the winds of adversity. So, I implore you, do not see me as a statistic, a diagnosis, or a mere case file. See me as a human being, broken and battered but still standing tall, refusing to be reduced to a mere footnote in the grand tome of humanity. I am more than my anxiety; I am a soul on fire, burning bright with determination, passion, and an unyielding commitment to life itself.

ALJ: Thank you, Mr. Weber, for sharing your powerful and poignant testimony. Your words have shed light on the complexities of anxiety and its profound impact on individuals. I appreciate the tireless efforts of Dr. Lynch, Mr. Koch, and all experts who have contributed to this hearing. Their expertise has been invaluable in guiding our discussion today. This matter is hereby

adjourned.

VE: Thank you, Your Honor.

ME: I appreciate the opportunity to testify about Mr. Weber's anxiety disorder and its impact on his employability. His condition is a significant limitation that affects various aspects of his life, including communication, concentration, and attention to detail. While some roles may be more accommodating than others, I believe it would still pose significant challenges for him to maintain employment in customer-facing or technical support positions.

CLMT: Thank you, Your Honor.

ATTY: Thank you, Your Honor, for the opportunity to present my client's case. I appreciate the thoughtfulness and thoroughness of the Administrative Law Judge's deliberations. My client is grateful for this forum, and we will respectfully await the decision.

(The hearing closed at 05:29 AM, on April 2, 2023.)

C E R T I F I C A T I O N

I have read the foregoing and hereby certify that it is a true and complete transcription of the testimony recorded at the hearing in the case of Granville Weber, held before Administrative Law Judge Anibal Braun.

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