

APPEALS COUNCIL  
SOCIAL SECURITY ADMINISTRATION

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In the Matter of  
[REDACTED]

Case #:  
[REDACTED]

-----x  
**MEMORANDUM**

**REQUEST FOR REVIEW OF THE ALJ  
DECISION AND ORDER DENYING, EITHER IN  
WHOLE OR IN PART, SOCIAL SECURITY  
DISABILITY BENEFITS.**

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**A. SPECIFIC ISSUES APPEALED:**

The claimant states that the ALJ erred in evaluating the facts and evidence, and erred in the application of legal principles, including the applicable Rules and Regulations. As such, the claimant appeals the ALJ's decision denying benefits for the following specific reasons addressed below.

**1. THE ALJ ERRED FOR THE FOLLOWING REASONS.**

The ALJ failed to evaluate the medical opinion of Dr. James M. Lewis. The doctor opined that the claimant was limited to sedentary level work. He is 50 years of age. The ALJ's failure to consider the opinion was not harmless because under the GRID rules the claimant may have been awarded disability benefits if the ALJ found the doctor credible and persuasive and reduced the claimant to sedentary level work.

The ALJ chose to ignore the opinion of Dr. Lewis because the State Agency opinion did not indicate next to his name whether he was a medical doctor, single decision maker, or another non-accredited individual making a disability determination. (Dec., P. 18).

This was a State Agency opinion. The ALJ failed to develop the record to simply find out whether the person signing the form was a doctor. The ALJ took no action whatsoever to develop the record and, instead, ignored crucial evidence that could have rendered the claimant disabled.

Two cases located on Westlaw, and which are attached hereto, confirm that Dr. James M. Lewis is a medical doctor. See Green v. SSA and Webb v. SSA (attached). Thus, the ALJ failed to evaluate a medical opinion. This ALJ committed reversible error.

**B. BROAD REQUEST FOR REVIEW:**

The Appeals Council has an affirmative duty to review the entire record, including “new and material evidence” before rendering its decision to grant or deny review. See Williams v. Halter, 135 F.Supp.2d 1225, 1231 (M.D.Fla.2001); 20 C.F.R. § 404.970(b).

Although an ALJ's findings of fact may be taken as conclusive, the Appeals Council may review all the evidence of record to decide whether the ALJ's findings are supported by substantial evidence. In Powell v. Heckler, 789 F.2d 176 (3d Cir.1986), the court held that the Appeals Council need not limit its review to the issue appealed, but may review a claimant's entire case. Id. at 179; see also Hale v. Sullivan, 934 F.2d 895, 898 (7th Cir.1991) (once the Appeals Council receives a timely request for review, it is entitled to review the entirety of the case); Gronda v. Secretary of Health & Human Serv., 856 F.2d 36, 38–39 (6th Cir.1988) (Appeals Council had authority to review entire case within 60 days of ALJ's decision even though claimant only requested review of narrow aspect of case), *cert. denied*, 489 U.S. 1052, 109 S.Ct. 1312, 103 L.Ed.2d 581 (1989).

In this case, the claimant is asking the Appeals Council to review specific and narrow issues, which are identified in Section A, above. However, in addition to the specific issues identified above, the claimant is also asking the Appeals Council to review all the evidence of record to determine if the ALJ committed any other errors, beyond those errors that have been specifically identified above.

In this case, the claimant asserts that the ALJ erred in evaluating the facts, evidence, and erred in the application of legal principles, including the applicable Rules and Regulations. As such, it is requested that the Appeals Council vacate the decision denying benefits and remand the case for further consideration.

**C. CONCLUSION:**

The claimant asserts that the ALJ erred in evaluating the facts, evidence, and erred in the application of legal principles, including the applicable Rules and Regulations. Consequently, the claimant asserts that the decision denying benefits is not based upon substantial evidence. The claimant requests that the Appeals Council vacate the decision denying benefits and remand the case for further consideration.

Dated: February 26, 2024

Respectfully submitted:

/s/ [REDACTED]

[REDACTED]