U.S. Department of Labor

Benefits Review Board
200 Constitution Ave. NW
Washington, DC 20210-0001

BRB Nos. 20-0015 BLA
and 20-0016 BLA

RUTH JOAN LILLY (o/b/o and Widow of EARL H. LILLY, JR.)	)	
Claimant-Petitioner	)	
v.	)	
CONSOLIDATION COAL COMPANY	)	DATE ISSUED: 10/29/2020
Employer-Respondent	)	
DIRECTOR, OFFICE OF WORKERS' COMPENSATION PROGRAMS, UNITED STATES DEPARTMENT OF LABOR	)	
Party-in-Interest	)	DECISION and ORDER

Appeal of the Decision and Order Denying Benefits in Miner's and Survivor's Claims of Paul R. Almanza, Administrative Law Judge, United States Department of Labor.

Ruth Joan Lilly, Princeton, West Virginia.[1]

Ashley M. Harman and Lucinda L. Fluharty (Jackson Kelly PLLC), Morgantown, West Virginia.

[1] Vickie Combs, a benefits counselor with Stone Mountain Health Services of Vansant, Virginia, requested on Claimant's behalf that the Benefits Review Board review the administrative law judge's decision, but Ms. Combs is not representing Claimant on appeal. *See Shelton v. Claude V. Keen Trucking Co.*, 19 BLR 1-88 (1995) (Order).

Before: BOGGS, Chief Administrative Appeals Judge, ROLFE and GRESH, Administrative Appeals Judges.

PER CURIAM:

Claimant,[2] without the assistance of counsel, appeals Administrative Law Judge Paul R. Almanza's Decision and Order Denying Benefits in Miner's and Survivor's Claims (2012-BLA-05726, 2015-BLA-05108) filed pursuant to the Black Lung Benefits Act, as amended, 30 U.S.C. §§901-944 (2018) (Act). This case involves a miner's subsequent claim filed on March 2, 2011,[3] and a survivor's claim filed on August 11, 2014.[4]

In considering the Miner's claim, the administrative law judge found the new evidence established clinical pneumoconiosis, 20 C.F.R. §718.202(a), thereby establishing a change in an applicable condition of entitlement. 20 C.F.R. §725.309(c). He therefore considered the merits of the Miner's 2014 claim. The administrative law judge found the Miner did not establish complicated pneumoconiosis and therefore could not invoke the irrebuttable presumption of total disability due to pneumoconiosis at Section 411(c)(3) of the Act. 30 U.S.C. §921(c)(3); 20 C.F.R. §718.304. He also found the evidence did not establish total disability, 20 C.F.R. §718,204(b), and therefore found the Miner could not invoke the presumption of total disability due to pneumoconiosis at Section 411(c)(4) of the Act,[5] 30 U.S.C. §921(c)(4) (2018), or establish entitlement to benefits under 20 C.F.R. Part 718. Accordingly, the administrative law judge denied benefits in the Miner's claim.

[2] Claimant is the widow of the Miner, who died on July 28, 2014. Director's Exhibit S-5. (The evidence in the Miner's claim is identified with an "M" and the evidence in the Survivor's claim is identified with an "S.")

[3] The Miner filed two prior claims on December 28, 1993, and March 13, 2009. Director's Exhibits 1, 2. The district director denied the Miner's most recent prior claim on October 5, 2009, because the Miner did not establish any element of entitlement. Director's Exhibit 2.

[4] Claimant's appeal in the Miner's claim was assigned BRB No. 20-0015 BLA and her appeal in the Survivor's claim was assigned BRB No. 20-0016 BLA. The Board has consolidated these appeals for purposes of decision only.

[5] Section 411(c)(4) provides a rebuttable presumption that a miner's total disability is due to pneumoconiosis if he has at least fifteen years of underground or substantially similar surface coal mine employment and a totally disabling respiratory or pulmonary impairment. 30 U.S.C. §921(c)(4) (2018); *see* 20 C.F.R. §718.305.

In considering the Survivor's claim, the administrative law judge again determined the evidence did not establish the existence of complicated pneumoconiosis or the existence of a totally disabling respiratory or pulmonary impairment. The administrative law judge therefore found Claimant was not entitled to the Section 411(c)(3) and Section 411(c)(4) presumptions.[6] He also found the evidence did not establish that the Miner's death was due to pneumoconiosis. 20 C.F.R. §718.205(b). Accordingly, the administrative law judge denied benefits in the Survivor's claim.

On appeal, Claimant generally challenges the administrative law judge's denial of benefits. Employer responds in support of the denial of benefits. The Director, Office of Workers' Compensation Programs, has not filed a response brief.

In an appeal that a claimant files without the assistance of counsel, the Board addresses whether substantial evidence supports the decision below. *Hodges v. BethEnergy Mines, Inc.*, 18 BLR 1-84, 1-86 (1994). We must affirm the administrative law judge's Decision and Order if it is rational, supported by substantial evidence, and in accordance with applicable law.[7] 33 U.S.C. §921(b)(3), as incorporated by 30 U.S.C. §932(a); *O'Keeffe v. Smith, Hinchman & Grylls Associates, Inc.*, 380 U.S. 359 (1965).

The Miner's Claim

The Miner must establish disease (pneumoconiosis); disease causation (it arose out of coal mine employment); disability (a totally disabling respiratory or pulmonary impairment); and disability causation (pneumoconiosis substantially contributed to the disability). 30 U.S.C. §901; 20 C.F.R. §§718.3, 718.202, 718.203, 718.204. Failure to establish any one of these elements precludes an award of benefits. *Anderson v. Valley Camp of Utah, Inc.*, 12 BLR 1-111, 1-112 (1989); *Trent v. Director, OWCP*, 11 BLR 1-26, 1-27 (1987); *Perry v. Director, OWCP*, 9 BLR 1-1 (1986) (en banc).

[6] Section 411(c)(4) also provides a rebuttable presumption that a miner's death is due to pneumoconiosis if he had at least fifteen years of underground or substantially similar surface coal mine employment and a totally disabling respiratory or pulmonary impairment. 30 U.S.C. §921(c)(4) (2018); *see* 20 C.F.R. §718.305.

[7] The Miner's coal mine employment occurred in Virginia and West Virginia. Director's Exhibit M-5. Accordingly, this case arises within the jurisdiction of the United States Court of Appeals for the Fourth Circuit. *See Shupe v. Director, OWCP*, 12 BLR 1-200, 1-202 (1989) (en banc).

The Section 411(c)(3) Presumption

Section 411(c)(3) of the Act provides an irrebuttable presumption that a miner is totally disabled due to pneumoconiosis if he suffers from a chronic dust disease of the lung which: (a) when diagnosed by x-ray, yields one or more large opacities greater than one centimeter in diameter that would be classified as Category A, B, or C; (b) when diagnosed by biopsy or autopsy, yields massive lesions in the lung; or (c) when diagnosed by other means, is a condition which would yield results equivalent to (a) or (b). 30 U.S.C. §921(c)(3); 20 C.F.R. §718.304. In determining whether a miner has invoked the irrebuttable presumption, the administrative law judge must weigh all evidence relevant to the presence or absence of complicated pneumoconiosis. 30 U.S.C. §923(b); *see Lester v. Director, OWCP*, 993 F.2d 1143, 1145-46 (4th Cir. 1993); *Melnick v. Consolidation Coal Co.*, 16 BLR 1-31, 1-33-34 (1991) (en banc).

The administrative law judge initially considered the x-ray evidence. 20 C.F.R. §718.304(a). Drs. Alexander and Miller, each a B reader and Board-certified radiologist, interpreted an April 27, 2011 x-ray as positive for complicated pneumoconiosis.[8] Director's Exhibits M-23, M-25. They each identified a Category A large opacity, which they commented could also represent a malignancy or cancer. *Id.* Dr. Tarver, an equally qualified physician, interpreted the x-ray as negative for complicated pneumoconiosis, but noted the presence of a 1.5 centimeter mass which he noted could represent pneumonia or cancer. Employer's Exhibit M-6. Dr. Forehand, a B reader, noted a "vague density" in the right upper lung, but like Dr. Tarver, interpreted the x-ray as negative for complicated pneumoconiosis. Director's Exhibit M-14.

Although the administrative law judge noted the interpretations of Drs. Alexander and Miller were "somewhat qualified," he also noted that a majority of the dually qualified physicians interpreted the April 27, 2011 x-ray as positive for complicated pneumoconiosis. Decision and Order at 29-30. He therefore found the x-ray supported a finding of complicated pneumoconiosis. *Id.*

The administrative law judge, however, accurately noted that none of the nine subsequent x-rays, taken between June 14, 2011, and June 20, 2014, were interpreted as positive for complicated pneumoconiosis.[9] Decision and Order at 30. The administrative

[8] Although the record contains earlier x-rays, none of these x-rays were interpreted as positive for complicated pneumoconiosis.

[9] Drs. Miller and Seaman, each a B reader and Board-certified radiologist, interpreted the May 8, 2013 x-ray as negative for complicated pneumoconiosis. Claimant's Exhibit M-11; Employer's Exhibit M-11. Dr. DePonte, a similarly qualified physician,

law judge also noted that Drs. Castle and Fino explained that radiographic changes due to complicated pneumoconiosis are permanent. *Id.* Taking this into consideration, along with the fact that none of the nine x-rays taken after April 27, 2011, were interpreted as positive for complicated pneumoconiosis, the administrative law judge found the weight of the x-ray evidence did not establish complicated pneumoconiosis. *Id.*

The administrative law judge performed a quantitative and qualitative analysis of the x-rays, properly taking into consideration both the number of readings and the relative qualifications of the interpreting physicians. *See* 20 C.F.R. §718.202(a)(1); *See Chaffin v. Peter Cave Coal Co.*, 22 BLR 1-294, 1-300 (2003); *Sterling Smokeless Coal v. Akers*, 131 F.3d 438, 21 BLR 2-269 (4th Cir. 1997); *Underwood v. Elkay Mining, Inc.*, 105 F.3d 946, 21 BLR 2-23 (4th Cir. 1997); Decision and Order at 20-30. Because it is supported by substantial evidence, we affirm the administrative law judge's finding that the x-rays did not support a finding of complicated pneumoconiosis. 20 CF.R. §718.304(a).

Section 718.304(c)

The administrative law judge also considered whether other diagnostic methods established complicated pneumoconiosis.[10] He accurately found neither of the two digital x-rays taken on May 22, 2012, and June 20, 2013, were interpreted as positive for complicated pneumoconiosis.[11] Decision and Order at 30-31 Additionally, the administrative law judge accurately found the computerized tomography (CT) scans taken

interpreted an April 29, 2014 x-ray as negative for complicated pneumoconiosis. Claimant's Exhibit M-1. In addition, Dr. Groten, a B reader, interpreted the June 14, 2011, February 25, 2012 and October 24, 2013 x-rays as negative for complicated pneumoconiosis. Employer's Exhibits M-12, M-13.

[10] The administrative law judge accurately found the record contains no biopsy or autopsy evidence. 20 C.F.R. §718.304(b); Decision and Order at 30.

[11] Dr. Tarver, a B reader and Board-certified radiologist, interpreted the May 22, 2012 digital x-ray as revealing no definitive findings of coal worker's pneumoconiosis. Employer's Exhibit M-7. Although Dr. Tarver interpreted the June 20, 2013 digital x-ray as positive for simple pneumoconiosis, he interpreted the x-ray as negative for complicated pneumoconiosis. Employer's Exhibit M-8.

on April 24, 2011,[12] June 28, 2011,[13] and February 25, 2012,[14] were not interpreted as positive for complicated pneumoconiosis. *Id.* at 31. Because it is supported by substantial evidence, we affirm the administrative law judge's findings that the digital x-rays and CT scans did not support a finding of complicated pneumoconiosis. 20 C.F.R. §718.304(c).

The administrative law judge also considered the medical opinions of Drs. Castle and Fino. Dr. Castle opined that the Miner's April 27, 2011 x-ray revealed residual scarring from pneumonia, not complicated pneumoconiosis. Employer's Exhibit M-4. Dr. Castle explained that because the mass was not permanent, it could not constitute pneumoconiosis. Employer's Exhibit 6 at 21-22. Dr. Fino also found no evidence of complicated pneumoconiosis, noting that none of the CT scans had revealed the disease. Employer's Exhibit M-15 at 23. The administrative law judge therefore found the medical opinions did not establish complicated pneumoconiosis.[15] 20 C.F.R. §718.304(c); Decision and Order at 32.

Because it is supported by substantial evidence, we affirm the administrative law judge's finding that the evidence did not establish complicated pneumoconiosis. Consequently, we affirm the administrative law judge's finding that the Miner failed to invoke the irrebuttable presumption that he is totally disabled due to pneumoconiosis. 20 C.F.R. §718.304.

[12] The administrative law judge accurately found the April 24, 2011 CT scan was not interpreted to show the presence or absence of complicated pneumoconiosis. Decision and Order at 31; Employer's Exhibit M-13.

[13] Drs. Meyer, Aycoth, and Tarver interpreted the June 28, 2011 CT scan. The administrative law judge accurately found that none of these physicians interpreted the CT scan as revealing complicated pneumoconiosis. Decision and Order at 31; Claimant's Exhibit M-6; Employer's Exhibits M-1, M-9.

[14] Drs. Groten and Tarver interpreted the February 25, 2012 CT scan. The administrative law judge noted that Dr. Groten did not address the existence or absence of pneumoconiosis, while Dr. Tarver interpreted the CT scan as negative for complicated pneumoconiosis. Decision and Order at 31; Employer's Exhibits M-10, M-13.

[15] The administrative law judge also accurately found none of the treatment records contain a diagnosis of complicated pneumoconiosis. Decision and Order at 32.

The Section 411(c)(4) Presumption

A miner is totally disabled if his pulmonary or respiratory impairment, standing alone, prevents him from performing his usual coal mine work. *See* 20 C.F.R. §718.204(b)(1). A claimant may establish total disability based on pulmonary function studies, arterial blood gas studies, evidence of cor pulmonale with right-sided congestive heart failure, or medical opinions. 20 C.F.R. §718.204(b)(2)(i)-(iv). The administrative law judge must consider all relevant evidence and weigh the evidence supporting total disability against the contrary evidence. *See Rafferty v. Jones & Laughlin Steel Corp.*, 9 BLR 1-231, 1-232 (1987); *Shedlock v. Bethlehem Mines Corp.*, 9 BLR 1-195, 1-198 (1986), *aff'd on recon.*, 9 BLR 1-236 (1987) (en banc).

The administrative law judge considered three pulmonary studies conducted on April 27, 2011, June 20, 2013, and April 29, 2014. Director's Exhibit M-14; Claimant's Exhibits M-2, M-3. Only the April 29, 2014 pulmonary function study produced qualifying values.[16] Claimant's Exhibit M-3. Although the administering technician indicated the Miner provided good effort during the study, Claimant's Exhibit M-3, the administrative law judge noted that Dr. Fino invalidated the study due to poor effort.[17] Decision and Order at 33; Employer's Exhibit M-15 at 23. The administrative law judge permissibly credited Dr. Fino's opinion over the technician's contrary assessment, based on Dr. Fino's superior pulmonary qualifications.[18] *See Scott v. Mason Coal Co.*, 14 BLR 1-37, 1-40 (1990) (en banc recon.); Decision and Order at 33. Because substantial evidence supports the administrative law judge's determination that the only qualifying pulmonary function study is invalid,[19] we affirm his finding the pulmonary function studies did not establish total disability. 20 C.F.R. §718.204(b)(2)(i).

[16] A "qualifying" pulmonary function study or blood gas study yields values that are equal to or less than the values specified in the tables at 20 C.F.R. Part 718, Appendices B and C. A "non-qualifying" study exceeds those values. *See* 20 C.F.R. §718.204(b)(2)(i), (ii).

[17] Dr. Fino opined that the volume time curves reveal the Miner did not provide good effort. Employer's Exhibit M-15 at 23. Dr. Fino explained that the Miner did not forcibly exhale. *Id.*

[18] Dr. Fino is Board-Certified in Internal Medicine and Pulmonary Disease. Decision and Order at 17; Employer's Exhibit M-15 at 5.

[19] The administrative law judge also found the April 27, 2011 and June 20, 2013 pulmonary function studies were invalid. We need not address the administrative law judge's basis for making these determinations as these studies are non-qualifying and

The administrative law judge next considered three blood gas studies conducted on April 27, 2011, May 22, 2012, and June 20, 2013. Director's Exhibit M-14; Employer's Exhibits M-4, M-5. Only the April 27, 2011 blood gas study produced qualifying values. Director's Exhibit M-14. The administrative law judge, however, noted Dr. Fino invalidated the study, taken three days after the Miner was hospitalized for pneumonia, when the Miner was "acutely ill." Decision and Order at 35; Employer's Exhibit M-15 at 25. The administrative law judge permissibly found it did not comply with the criteria in Appendix C, which state "[t]ests shall not be performed during or soon after an acute respiratory or cardiac illness." *Id.* Because the administrative law judge found the only qualifying blood gas study invalid, we affirm his finding the blood gas studies did not establish total disability. 20 C.F.R. §718.204(b)(2)(ii).

The administrative law judge accurately found the record contains no evidence of cor pulmonale with right-sided congestive heart failure, Decision and Order at 35; we therefore affirm his finding the Miner did not establish total disability at 20 C.F.R. §718.204(b)(2)(iii).

The administrative law judge next considered the medical opinions of Drs. Forehand, Castle, and Fino. In his medical report, Dr. Forehand opined that the Miner had a "significant respiratory impairment" and had insufficient residual ventilatory capacity to perform his last coal mine employment. Director's Exhibit M-14. He therefore concluded the Miner was totally disabled. *Id.* During a subsequent deposition, however, Dr. Forehand opined that, while there was "some abnormality" in the Miner's ventilatory capacity, he should be able to perform his last coal mine job. Employer's Exhibit M-3 at 31-32. In light of the "unexplained change," the administrative law judge permissibly found his opinion not well-reasoned. *See Milburn Colliery Co. v. Hicks*, 138 F.3d 524, 533, 21 BLR 2-323, 2-335 (4th Cir. 1998); *Sterling Smokeless Coal Co. v. Akers*, 131 F.3d 438, 441, 21 BLR 2-269, 2-275-76 (4th Cir. 1997); *Lucostic v. U.S. Steel Corp.*, 8 BLR 1-46, 1-47 (1985); Decision and Order at 36.

Drs. Castle and Fino opined that the Miner was not totally disabled from a pulmonary or respiratory standpoint.[20] Employer's Exhibits M-15, M-16. The

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therefore do not support a finding of total disability. *See Larioni v. Director, OWCP*, 6 BLR 1-1276, 1-1278 (1984).

[20] Dr. Castle opined that the Miner was disabled from other causes, including cardiac failure with congestive heart failure and diabetes. Employer's Exhibit M-16. Dr. Fino opined that the Miner was disabled as a whole man from returning to his previous coal

administrative law judge permissibly found their opinions well-reasoned, noting that their opinions were well explained and supported by the objective evidence.[21] *See Hicks*, 138 F.3d at 533; *Akers*, 131 F.3d at 441; *Lucostic*, 8 BLR at 1-47; Decision and Order at 36-37. Because it is supported by substantial evidence, we affirm the administrative law judge's finding the medical opinions did not establish total disability. 20 C.F.R. §718.204(b)(2)(iv).

Because the Miner did not establish total disability under 20 C.F.R. §718.204(b)(2)(i)-(iv), we affirm the administrative law judge's determinations that the Miner did not invoke the Section 411(c)(4) presumption or establish entitlement under 20 C.F.R. Part 718. *See* 30 U.S.C. §921(c)(4); *Trent*, 11 BLR at 1-27.

The Survivor's Claim

Benefits are payable on survivors' claims when the miner's death is due to pneumoconiosis.[22] See 20 C.F.R. §§718.1, 718.205; *Neeley v. Director, OWCP*, 11 BLR 1-85, 1-86 (1988). A miner's death will be considered due to pneumoconiosis if it was a substantially contributing cause of the miner's death, the presumption relating to complicated pneumoconiosis, set forth at 20 C.F.R. §718.304, is applicable, or the presumption set forth at 20 C.F.R. §718.305 is invoked and not rebutted. 20 C.F.R. §718.205(b)(1)-(4). Pneumoconiosis is a "substantially contributing cause" of a miner's death if it hastens the miner's death. 20 C.F.R. §718.205(b)(6).

The Section 411(c)(3) Presumption

Section 411(c)(3) of the Act provides an irrebuttable presumption that a miner's death was due to pneumoconiosis if the miner suffered from complicated pneumoconiosis. 30 U.S.C. §921(c)(3); 20 C.F.R. §718.304. Because the administrative law judge discredited the same evidence of complicated pneumoconiosis in the Survivor's claim for

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mine employment, but that neither lung disease nor coal mine dust exposure played a role in his disability. Employer's Exhibit M-15.

[21] The administrative law judge noted that Dr. Castle explained the Miner had a mild airway obstruction that is non-disabling and that his blood gas study results remained in the normal range. Decision and Order at 36. He also noted Dr. Fino identified a mild reduction in the Miner's diffusion but explained it did not result in any respiratory impairment or pulmonary disability. *Id.*

[22] Because the Miner's claim was denied, Claimant was not eligible for derivative survivor's benefits pursuant to Section 422(*l*) of the Act, 30 U.S.C. §932(*l*) (2012).

reasons we have affirmed in the Miner's claim, *see* Decision and Order at 46-48, we affirm his determining Claimant did not invoke the Section 411(c)(3) presumption.

The Section 411(c)(4) Presumption

To invoke the Section 411(c)(4) presumption, Claimant must establish the Miner had a totally disabling respiratory or pulmonary impairment "at the time of his death." 20 C.F.R. §718.305(b)(1)(iii).

The administrative law judge considered four pulmonary function studies conducted on April 1, 2009, April 27, 2011, June 20, 2013, and April 29, 2014. Decision and Order at 39. Only the April 29, 2014 study produced qualifying values. Decision and Order at 48-49. In the Miner's claim, the administrative law judge permissibly credited Dr. Fino's invalidation of the study based on his superior pulmonary qualifications. *See* p.7, *supra*. In the Survivor's claim, Employer submitted Dr. Spagnolo's invalidation of the study.[23] The administrative law judge similarly credited Dr. Spagnolo's opinion over the administering technician's contrary assessment based upon Dr. Spagnolo's superior pulmonary qualifications.[24] *See Scott*, 14 BLR at 1-40; Decision and Order at 49. We therefore affirm the administrative law judge's finding the pulmonary function studies did not establish total disability. 20 C.F.R. §718.204(b)(2)(i).

The administrative law judge considered three blood gas studies conducted on April 1, 2009, April 27, 2011, and May 22, 2012. The April 1, 2009 blood gas study produced non-qualifying values at both rest and during exercise. Employer's Exhibit S-4. Although the April 27, 2011 blood gas study produced non-qualifying values at rest, it produced qualifying values during exercise. Director's Exhibit S-14. The May 22, 2012 blood gas study produced non-qualifying values at rest. Employer's Exhibit S-5. Noting that "the great weight of the blood gas study results [were] non-qualifying," the administrative law judge found the preponderance of the blood gas studies did not establish total disability. Decision and Order at 49. Because it is supported by substantial evidence,[25] we affirm the administrative law judge's finding.

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[23] Dr. Spagnolo opined that the April 29, 2014 pulmonary function study was invalid due to "a lot of variation," demonstrating the Miner did not provide good effort. Employer's Exhibit S-12 at 16-17.

[24] Dr. Spagnolo is Board-Certified in Internal Medicine and Pulmonary Disease. Employer's Exhibit S-8.

[25] Although the administrative law judge did not address the validity of the April 27, 2011 blood gas study in his adjudication of the Survivor's claim, he determined this

The administrative law judge accurately found the record contains no evidence of cor pulmonale with right-sided congestive heart failure, Decision and Order at 49; we therefore affirm Claimant did not establish total disability at 20 C.F.R. §718.204(b)(2)(iii).

After finding the Miner's usual coal mine employment required heavy labor, Decision and Order at 6, the administrative law judge considered the medical opinions of Drs. Basheda and Spagnolo. In medical reports dated December 3, 2016, and February 12, 2017, Dr. Basheda diagnosed a class I/II pulmonary impairment that would not prevent the Miner from performing the exertional work required of a coal miner. Employer's Exhibits S-11, S-15. During a December 29, 2016 deposition, Dr. Basheda testified that from a pulmonary standpoint, the Miner could perform heavy manual labor.[26] Employer's Exhibit S-13 at 16.

In an October 30, 2016 medical report, Dr. Spagnolo opined that the Miner retained the respiratory capacity to perform his coal mine employment. Employer's Exhibits S-8, S-14. In a subsequent December 7, 2016 deposition, Dr. Spagnolo testified that the Miner, from a respiratory standpoint, could perform coal mine work requiring heavy labor.[27] Employer's Exhibit S-12 at 10, 18-19.

The administrative law judge permissibly found their opinions well-reasoned and supported by the evidence, noting that both doctors explained that, based on their review of multiple objective test results, the Miner was not precluded from performing heavy labor. *See Hicks*, 138 F.3d at 533; *Akers*, 131 F.3d at 441; *Lucostic*, 8 BLR at 1-47; Decision and Order at 50. Because it is supported by substantial evidence, we affirm the administrative law judge's finding the medical opinions did not establish total disability. 20 C.F.R. §718.204(b)(2)(iv).

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study was invalid in his adjudication of the Miner's claim because it was taken three days after the Miner was hospitalized for pneumonia, during a time when the Miner was "acutely ill." Decision and Order at 35.

[26] Dr. Basheda testified that the Miner was "limited mainly by his cardiovascular disease." Employer's Exhibit S-13 at 16.

[27] Dr. Spagnolo opined that the Miner was likely disabled due to heart failure and other medical conditions, including diabetes and renal disease. Employer's Exhibit S-12 at 19.

Because Claimant did not establish total disability under 20 C.F.R. §718.204(b)(2)(i)-(iv), we affirm the administrative law judge's determination that Claimant did not invoke the Section 411(c)(4) presumption. *See* 30 U.S.C. §921(c)(4).

Death due to Pneumoconiosis

Having found Claimant was not entitled to the Section 411(c)(3) and 411(c)(4) presumptions, the administrative law judge addressed whether the evidence established that the Miner's death was due to pneumoconiosis. A miner's death is considered due to pneumoconiosis if pneumoconiosis or complications of pneumoconiosis are direct causes of death, or if pneumoconiosis was a substantially contributing cause of death. 20 C.F.R. §718.205(b)(1), (2). Pneumoconiosis is a "substantially contributing cause" of a miner's death if it hastens the miner's death. 20 C.F.R. §718.205(b)(6); *see Collins v. Pond Creek Mining Co*., 751 F.3d 180, 184 (4th Cir 2014).

Dr. Glassock completed the Miner's death certificate, indicating the immediate cause of death was cardiac arrest due to cirrhosis, arteriosclerotic heart disease and hypoxia. Although he listed pneumoconiosis as a contributing cause, the administrative law judge found no evidence he had any personal knowledge of the Miner and provided no basis for his conclusion. Decision and Order at 52. He therefore permissibly determined that the Miner's death certificate was not sufficiently reasoned. *See Bill Branch Coal Corp. v. Sparks*, 213 F.3d 186, 192, 22 BLR 2-251, 2-263 (4th Cir. 2000). Because there is no other evidence supportive of a finding that the Miner's death was due to pneumoconiosis,[28] we affirm the administrative law judge's finding the evidence did not establish the Miner's death was due to pneumoconiosis. 20 C.F.R. §718.205(b). We therefore affirm the administrative law judge's denial of the Survivor's claim.

[28] The administrative law judge also considered the opinions of Drs. Basheda and Spagnolo, but accurately found they do not support a finding that the Miner's death was due to pneumoconiosis. Decision and Order at 51-52. Dr. Basheda opined that pneumoconiosis did not contribute to or cause the Miner's death. Employer's Exhibit S-13 at 20-21. Dr. Spagnolo similarly opined that there is no objective evidence that pneumoconiosis contributed to the Miner's death. Employer's Exhibit S-12 at 20.

Accordingly, the administrative law judge's Decision and Order Denying Benefits in Miner's and Survivor's Claims is affirmed.

SO ORDERED.

JUDITH S. BOGGS, Chief
Administrative Appeals Judge

JONATHAN ROLFE
Administrative Appeals Judge

DANIEL T. GRESH
Administrative Appeals Judge