

U.S. Department of Labor

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



BRB No. 23-0454

ROGERS TUTUHUKIRE	)	
	)	
Claimant-Petitioner	)	
	)	
v.	)	
	)	
SOC, LLC	)	
	)	
and	)	
	)	
CONTINENTAL CASUALTY COMPANY	)	DATE ISSUED: 09/30/2024
c/o CNA	)	
	)	
Employer/Carrier-	)	
Respondents	)	DECISION and ORDER

Appeal of the Decision and Order Denying Benefits of Noran J. Camp, Administrative Law Judge, United States Department of Labor.

Jazmira Argueta Wheeler (Jo Ann Hoffman & Associates, P.A.), Lauderdale-By-The-Sea, Florida, for Claimant.

Krystal L. Layher and Sandra S. Lee (Brown Sims), Houston, Texas, for Employer/Carrier.

Before: BOGGS, BUZZARD, and JONES, Administrative Appeals Judges.

PER CURIAM:

Claimant appeals Administrative Law Judge (ALJ) Noran J. Camp’s Decision and Order Denying Benefits (2021-LDA-02311) rendered on a claim filed pursuant to the Longshore and Harbor Workers’ Compensation Act, as amended, 33 U.S.C. §§901-950

(Act), as extended by the Defense Base Act, 42 U.S.C. §§1651-1655 (DBA). We must affirm the ALJ's findings of fact and conclusions of law if they are rational, supported by substantial evidence, and in accordance with applicable law. 33 U.S.C. §921(b)(3); *O'Keeffe v. Smith, Hinchman & Grylls Associates, Inc.*, 380 U.S. 359 (1965).

Claimant, a citizen of Uganda, allegedly sustained psychological injuries as a result of life-threatening exposures while working for Employer as an armed security guard in Iraq from April 2008 to November 2010.<sup>1</sup> Employer's Exhibit (EX) 1 at 22, 29. During this employment, Claimant was routinely exposed to weapons fire, improvised explosive device (IED) detonations, and rocket and mortar attacks.<sup>2</sup> *Id.* at 29; 32-34. He also experienced several specific incidents,<sup>3</sup> each of which he stated were traumatizing to him. *Id.* at 36-41. Claimant testified he began experiencing a lack of sleep and headaches while he worked in Iraq. *Id.* 1 at 41, 44, 46, 49-50.

Upon his return to Uganda from Iraq, Claimant stated his symptoms increased to include constant headaches, "illusions" or hallucinations, "uncoordinated" thoughts, flashbacks, panic attacks, back and shoulder pain, sleep disturbances, nightmares, increased heart rate, anger, and isolation.<sup>4</sup> EX 1 at 42-46, 55. He testified he did not initially associate any of his symptoms with his work in Iraq, *id.* at 44-47, but instead

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<sup>1</sup> This case arises within the jurisdiction of the United States Court of Appeals for the Second Circuit because the district director in New York filed the ALJ's decision. *McDonald v. Aecom Technology Corp.*, 45 BRBS 45 (2011); *see also Global Linguist Solutions, L.L.C. v. Abdelmegeed*, 913 F.3d 921 (9th Cir. 2019).

<sup>2</sup> Claimant stated that the alarms signaling an attack happened "at least four times" a week at Camp Ramadi and "once" every week or two at Camp Taji. EX 1 at 35.

<sup>3</sup> These incidents included: 1) April 2008 incidents when shots were fired at the tower in which he was working, EX 1 at 36; 2) an August 2008 car bomb attack resulting in an explosion occurring within approximately 500 feet from his location, *id.* at 36-37; 3) an October 2008 non-lethal rocket attack near his tower, *id.* at 37-38; 4) a November 2008 lethal rocket attack in which he directly witnessed four personnel die in their tent from the explosion, *id.* at 38; and 5) a September 2009 incident where the vehicle in which he was riding overturned, killing the driver and two other passengers, *id.* at 41.

<sup>4</sup> Once he stopped working for Employer, he returned home to perform occasional light work on his brother's farm. EX 1 at 47-48, 66-67. Claimant stated he mostly "survived because my wife used to take care of me." *Id.* at 47.

attributed them to a general lack of sleep and his being “bedridden or something like that,”<sup>5</sup> *id.* at 45. In 2015, Claimant began treating with traditional healers and herbalists,<sup>6</sup> who, he stated, thought “I had been bewitched or I had evil spirits on me,” *id.* at 49, and as such, applied various “solutions and tactics” in an attempt “to capture these evil spirits,” *id.* at 50. He continued seeing traditional healers “for almost three years,” but stopped because they had not provided a solution and his family decided it would be best to “see a medical person from the hospital.” *Id.* at 52-54.

In July 2019, Claimant began treating with Psychiatric Clinical Officer Buhese Wilson (PCO Wilson) at Mbarara Regional Referral Hospital,<sup>7</sup> where he was admitted for two to three weeks of monitoring and diagnosed with work-related psychological injuries. Claimant’s Exhibit (CX) 3 at 2, 12; *Id.* at 57-58 68-69, 74. Claimant stated, prior to this treatment, he was unfamiliar with post-traumatic stress disorder (PTSD) and generalized anxiety disorder (GAD) and unaware his symptoms were a psychological condition or possibly related to his employment. EX 1 at 45, 56, 74. PCO Wilson noted Claimant’s symptoms of headaches, poor sleep, threatening dreams, nightmares, forgetfulness, irritability, social withdrawal, mood swings, flashbacks, intrusive thoughts and visions. He prescribed medication that enabled Claimant to sleep and decreased the intensity of his nightmares. CX 3 at 2, 4, 9, 11-12; EX 1 at 61-62.

PCO Wilson determined, based on his interview with Claimant, that Claimant suffers from symptoms suggestive of PTSD and GAD, and he prescribed psychotherapy. CXs 1 at 2; 3 at 1-3, 12; EX 1 at 57, 74. He also noted Claimant’s Generalized Anxiety Disorder Questionnaire-7 (GAD-7) and PTSD symptom checklist (PCL-5) scores and determined his constant exposure to traumatic events while in Iraq greatly contributed to

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<sup>5</sup> Claimant stated his constant headaches became “beyond controllable” resulting in his failing “to do anything” but stay at “home for almost four years.” EX 1 at 46.

<sup>6</sup> Claimant testified, “I don’t seek medical assistance first when I came from Iraq. Because at first, I thought it was just simple headache. I would just take some water. Maybe I would take some painkillers for example. But I thought maybe they were also trying to bewitch me. So that’s why I didn’t go to a medical professional at first.” EX 1 at 46.

<sup>7</sup> The ALJ stated that although PCO Wilson does not appear to be a physician within the meaning of the applicable regulations, 20 C.F.R. §702.404, because the record does not contain any medical credentials or reference to a medical degree, “I will give his opinions the weight that is warranted by the evidence supporting them, and the reasoning underlying them.” D&O at 13.

his condition. CXs 1 at 2; 3 at 12. Additionally, PCO Wilson completed a medical questionnaire indicating he diagnosed Claimant with PTSD and GAD. CX 3 at 2. Claimant testified PCO Wilson recommended ongoing treatment and told him he will recover if he keeps taking his medication. EX 1 at 60. Claimant continued seeing PCO Wilson approximately once every three months. CX 3.

On January 10, 2022, Claimant was evaluated over video and with a translator by Employer's psychologist, Dr. Joshua Barras. EXs 1 at 72; 4. Based on Claimant's reported symptoms, his performance on psychological assessments, and his mental health treatment history, Dr. Barras, when asked whether Claimant had any "current psychological and/or psychiatric conditions," responded "no diagnosis." EX 4 at 14. Dr. Barras further opined Claimant has no reliable evidence of a psychiatric or psychological condition that would prevent him from working. *Id.* at 14-15.

On October 22, 2020, Claimant filed his claim seeking benefits for a work-related psychological condition, CX 1, which Employer controverted, EX 3. The case was then referred to the Office of Administrative Law Judges on March 3, 2021, where the parties requested that the claim be "tried on submission of evidence in lieu of a live Formal Hearing." The parties thereafter filed their respective closing briefs, and the matter was submitted to the ALJ for a decision on the paper record on June 8, 2022.

In his decision, the ALJ first determined Claimant's notice of injury and claim for compensation were timely filed. D&O at 19-21. He then found Claimant did not establish the requisite harm element of his prima facie case and, therefore, did not invoke the Section 20(a) presumption, 33 U.S.C. §920(a). D&O at 22. In reaching this determination, he accorded "no weight" to PCO Wilson's questionnaire and report and further found Claimant's testimony regarding his symptoms insufficient to show he has a psychological injury. *Id.* In the alternative, he considered the Section 20(a) presumption invoked and found Employer rebutted it. Then, upon consideration of the record as a whole, he concluded Claimant did not meet his burden of persuasion to establish his psychological symptoms are work-related. *Id.* Accordingly, the ALJ denied the claim.

On appeal, Claimant contends the ALJ erred in finding he did not invoke the Section 20(a) presumption and in alternatively finding Employer rebutted it. Claimant also contends the ALJ erred in finding he did not establish he sustained a work-related psychological condition based on the evidence as a whole. Employer responds urging affirmance.

### **Invoking the Presumption**

Claimant first contends the ALJ applied the wrong standard and improperly weighed the evidence in addressing Section 20(a) invocation. He argues the ALJ erred by requiring

him to establish the harm element of his prima facie case by a preponderance of the evidence and by weighing the conflicting evidence.

To be entitled to the Section 20(a) presumption linking his injuries to his employment, a claimant must sufficiently allege: 1) he has sustained a harm; and 2) an accident occurred or working conditions existed which could have caused or aggravated the harm. *Rose v. Vectrus Sys. Corp.*, 56 BRBS 27, 36 (2022) (Decision on Recon. en banc), *appeal dismissed* (M.D. Fla. Aug. 24, 2023); *see, e.g., American Stevedoring, Ltd. v. Marinelli*, 248 F.3d 54 (2d Cir. 2001); *O’Kelley v. Dep’t of the Army/NAF*, 34 BRBS 39 (2000). The claimant bears an initial burden of production to invoke the Section 20(a) presumption. *Rose*, 56 BRBS at 36. Credibility can play no role in addressing whether a claimant has established a prima facie case. *Rose*, 56 BRBS at 37.

In this regard, the Section 20(a) invocation analysis “does not require examination of the entire record, an independent assessment of witness’ credibility, or weighing of the evidence.” *Id.* Instead, the claimant need only “present some evidence or allegation that if true would state a claim under the Act.” *Id.* Consequently, if the claimant produces some evidence to support his prima facie case, he is entitled to the presumption that his injury is work-related and compensable. *Id.*

The ALJ made several errors in addressing invocation. First, he erred by disregarding Claimant’s testimony about his ongoing symptoms. He also improperly addressed the credibility of PCO Wilson’s opinion.<sup>8</sup> And, finally, perhaps because he was errantly weighing the evidence when invoking the presumption, he incorrectly held Claimant to a burden of persuasion rather than to a burden production in determining Claimant did not establish the requisite harm element. D&O at 21-22. For these reasons, we hold the ALJ erroneously found Claimant did not establish a psychological harm sufficient to invoke the 20(a) presumption.

As Claimant maintains, he produced sufficient evidence and allegations regarding both elements of his prima facie case. He produced evidence of the harm element through a combination of his testimony regarding his symptoms and PCO Wilson’s diagnoses of PTSD and GAD. EX 1 at 42-46, 55; CX 3 at 1. He produced evidence of the working conditions element through his testimony regarding the hazardous conditions he

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<sup>8</sup> In his recitation of the evidence, before getting to invocation, the ALJ concluded: “The Wilson Report’s lack of a diagnosis [and other flaws] lead me to give *no weight* to this report, on the issue of ‘harm.’” D&O at 16 [emphasis in original]. Also, before addressing invocation, the ALJ stated, “Dr. Barras’s report is entitled to *great weight* on the issue of ‘harm.’” *Id.* at 19 [emphasis in original].

encountered in the course of his work with Employer in Iraq.<sup>9</sup> EX 1 at 36-40. This constitutes evidence “that if true would state a claim under the Act,” *Rose*, 56 BRBS at 37, and therefore is sufficient to invoke the Section 20(a) presumption.

We therefore hold Claimant satisfied his initial burden of production as a matter of law. *Rose*, 56 BRBS at 39. Consequently, we reverse the ALJ’s finding to the contrary and hold Claimant invoked the Section 20(a) presumption linking his psychological injury to his work. *Id.*; see also *Marinelli*, 248 F.3d at 65; see *U.S. Industries/Federal Sheet Metal, Inc. v. Director, OWCP*, 455 U.S. 608 (1982).

Having established invocation, we shall address the ALJ’s alternate findings and Claimant’s remaining arguments.

### **Rebutting the Presumption**

Claimant contends the ALJ mischaracterized and misunderstood the evidence in finding Dr. Barras’s report constitutes substantial evidence to rebut the Section 20(a) presumption. He asserts Dr. Barras’s statements instead support his claim of injury.<sup>10</sup> Therefore, he asserts Dr. Barras’s opinion is inadequate to rebut the presumption. Additionally, Claimant argues Dr. Barras’s opinion is flawed as the doctor never reviewed any medical records or explained how the objective tests were administered, what standard was used, how he arrived at his result for each test, or how Claimant’s test results and scores were used in his final diagnosis. See EX 4 at 15-14. Given these flaws, he maintains a reasonable person could not have concluded Dr. Barras’s opinion casts doubt on the work-relatedness of his condition and, therefore, does not rebut the Section 20(a) presumption. We disagree.

Once the Section 20(a) presumption is invoked, the burden shifts to the employer to produce substantial evidence that the claimant’s condition was not caused or aggravated by his employment. *Rainey v. Director, OWCP*, 517 F.3d 632, 634 (2d Cir. 2008); *Marinelli*, 248 F.3d 54, 64-65; *O’Kelley*, 34 BRBS at 41. Substantial evidence is the

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<sup>9</sup> Although the ALJ did not specifically address the working conditions element in his prima facie case analysis, no party disputes Claimant’s working conditions with Employer.

<sup>10</sup> Claimant asserts Dr. Barras acknowledged that he (Claimant) did not “fail” or show overreporting or exaggeration on any test; that is, his scores indicated at least mild depression, mild anxiety, and mild PTSD symptoms. He avers Dr. Barras’s report also acknowledged that Claimant described subclinical symptoms of depression, anxiety, and PTSD, and produced a valid MMPI-2-RF profile. EX 4 at 13-14.

amount of evidence which a reasonable mind could accept as adequate to support a conclusion. *Rainey*, 517 F.3d at 637. The employer’s burden on rebuttal is one of production, not persuasion. *Id.*; *Rose*, 56 BRBS at 30; *Victorian v. Int’l-Matex Tank Terminals*, 52 BRBS 35, 41 (2018), *aff’d sub nom. Int’l-Matex Tank Terminals v. Director, OWCP*, 943 F.3d 278 (5th Cir. 2019); *Suarez v. Serv. Emps. Int’l, Inc.*, 50 BRBS 33, 36 n.4 (2016); *Cline v. Huntington Ingalls, Inc.*, 48 BRBS 5, 7 (2013).

An employer need only submit “such relevant evidence as a reasonable mind might accept as adequate” to support a finding that the claimant’s injury is not work-related. *Rainey*, 517 F.3d at 637. The presumption may be rebutted with evidence disproving the existence of the alleged injury. *See, e.g., Bourgeois v. Director, OWCP*, 946 F.3d 263, 265 (5th Cir. 2020) (affirming that the presumption was rebutted by a medical opinion stating the claimant did not suffer a labral tear to his right shoulder immediately following an accident at work and therefore the accident did not cause the claimant’s later-discovered tear). In addition, it is well settled that a medical opinion of non-causation rendered to a reasonable degree of medical certainty is sufficient to rebut the presumption. *See O’Kelley*, 34 BRBS at 41.

In this case, the ALJ found Employer rebutted the Section 20(a) presumption with the “expert report” of Dr. Barras, which, the ALJ stated, “found that Claimant had no psychological diagnoses.” D&O at 22-23. Claimant’s rebuttal argument on appeal centers solely on the credibility of Dr. Barras’s opinion – an argument we must reject as contrary to the appropriate rebuttal standard wherein the weighing of the credibility of evidence is precluded. *Rose*, 56 BRBS at 32; *see also generally Hawaii Stevedores, Inc. v. Ogawa*, 608 F.3d 642, 651 (9th Cir. 2010) (weighing of the credibility of evidence “has no proper place in determining whether [employer] met its burden of production.”). Dr. Barras stated that his “no diagnosis” conclusion was “based on multiple sources of information” such as Claimant’s “background history as he described it,” as well as “his report of symptoms and consistency or inconsistency with other assessment measures, and his mental health treatment history.” EX 4 at 14. Thus, his opinion, as the ALJ concluded, constitutes substantial evidence that Claimant “had no psychological diagnoses,” D&O at 22-23, and, therefore, his work for Employer did not cause a disabling psychological injury. *See generally Truczinskis v. Director, OWCP*, 699 F.3d 672 (1st Cir. 2012). Consequently, we affirm the ALJ’s finding that Employer rebutted the Section 20(a) presumption. *Rainey*, 517 F.3d at 634; *Marinelli*, 248 F.3d at 64-65; *O’Kelley*, 34 BRBS at 41.

### **Weighing the Evidence**

Lastly, Claimant asserts the ALJ’s weighing of the medical evidence on causation as a whole is flawed as he failed to accord proper weight to his medical evidence and the

opinion of his treating physician, PCO Wilson,<sup>11</sup> and he inappropriately set a higher standard for Ugandan medical documents and facilities than he applied in his evaluation of Employer's expert, Dr. Barras.<sup>12</sup> Claimant contends his sworn deposition testimony and PCO Wilson's records are sufficient to render his medical evidence "reliable and trustworthy for weight consideration."<sup>13</sup>

If the employer rebuts the Section 20(a) presumption, it drops out of the analysis, and the issue of causation must be resolved based on the evidence of record as a whole, with the claimant bearing the burden of persuasion. *Rainey*, 517 F.3d at 634; *Marinelli*, 248 F.3d at 65; *Santoro v. Maher Terminal, Inc.*, 30 BRBS 171 (1996); *see also Greenwich Collieries*, 512 U.S. 267. The ALJ is accorded broad discretion in making credibility determinations, *Sealand Terminals v. Gasparic*, 7 F.3d 321 (2d Cir. 1993); *Volpe v. Northeast Marine Terminals*, 671 F.2d 697 (2d Cir. 1982); *John W. McGrath Corp. v. Hughes*, 289 F.2d 403 (2d Cir. 1961). He has the authority to evaluate the credibility of the witnesses, *Pietrunti v. Director, OWCP*, 119 F.3d 1035, 1042 (2d Cir. 1997); *Hughes*, 289 F.2d at 405, accept parts of a witness's testimony while rejecting others, *Banks v. Chicago Grain Trimmers Ass'n*, 390 U.S. 459, 467 (1968); *Pimpinella v. Universal Mar.*

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<sup>11</sup> Claimant maintains a treating physician's opinion should be given special weight, citing as support *Pietrunti v. Director, OWCP*, 119 F.3d 1035, 1042 (2d Cir. 1997), and *Amos v. Director, OWCP*, 153 F.3d 1051, 1054 (9th Cir. 1998), *amended*, 164 F.3d 480, (9th Cir. 1999), *cert. denied*, 528 U.S. 809 (1999). Courts have held an ALJ is to give a treating physician special deference when there is a choice to make between two equally reasonable methods of treatment, as the decision of how to treat a work injury is left to the claimant and his doctor. *Amos*, 153 F.3d at 1054. However, when there is conflicting medical evidence on the cause of a claimant's injury, as here, the ALJ has a duty and the discretion to weigh the evidence. *Pietrunti*, 119 F.3d at 1042. Therefore, we reject Claimant's contention that the ALJ erred in not giving greatest weight to PCO Wilson's opinions solely due to his treating physician status.

<sup>12</sup> Claimant asserts it was inappropriate for the ALJ to set a higher standard for Ugandan medical documents and Ugandan Government Facilities than the ones he considered when evaluating Employer's expert. He maintains PCO Wilson's credentials and records comply with the requirements set by the Ugandan Ministry of Public Service.

<sup>13</sup> Claimant contends his evidence should be favored in light of the Act's underlying policy that all doubtful questions of fact are to be resolved in his favor. Claimant's position, however, represents an incorrect statement of the law. *Director, OWCP v. Greenwich Collieries*, 512 U.S. 267 (1994) (the "true doubt" rule violates Section 7(c) of the Administrative Procedure Act, 5 U.S.C. §556(d)).



*Serv. Inc.*, 27 BRBS 154, 157 (1993), and draw his own inferences and conclusions from the evidence. *Compton v. Avondale Indus., Inc.*, 33 BRBS 174, 176-177 (1999). The Board will not interfere with credibility determinations unless they are “inherently incredible or patently unreasonable.” *Cordero v. Triple A Mach. Shop*, 580 F.2d 1331, 1335 (9th Cir. 1978), *cert. denied*, 440 U.S. 911 (1979). Nor can the Board re-weigh the evidence; rather, if the ALJ’s conclusion upon weighing the evidence is rational and supported by substantial evidence, it must be affirmed. *Carswell v. E. Pihl & Sons*, 999 F.3d 18 (1st Cir. 2021), *cert. denied*, 142 S.Ct. 1110 (2022).

In weighing the evidence, the ALJ accorded great weight to Dr. Barras’s “no diagnosis” opinion, finding it thorough, well-documented, and well-reasoned.<sup>14</sup> D&O at 19. In contrast, he accorded no weight to PCO Wilson’s October 2021 “report” because it did not specifically diagnose PTSD or GAD, but simply noted Claimant reported symptoms “suggestive” of it; instead, it generally alleged a connection between Claimant’s working

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<sup>14</sup> The ALJ noted that Dr. Barras stated he administered a Mental Status Exam/Clinical Review showing Claimant’s memory and cognition are intact; a Clinician-Administered Scale for DSM-5 (CAP-5) on which Claimant reported intrusion symptoms, avoidance behavior, negative alternations in cognition and mood, and marked alterations in arousal and reactivity; a Generalized Anxiety Questionnaire-7 (GAD-7) on which Claimant obtained a score of 6, indicating mild anxiety; a Patient Health Questionnaire on which Claimant obtained a score of 7, indicating mild depression; a Pain Disability Index on which Claimant obtained a score of 24 and reported significant disability with respect to recreation, social activity, occupational behavior, and sexual behavior; the Minnesota Multiphasic Personality Inventory-2-Restructure Form (MMPI-2-RF) on which Claimant produced a valid profile and as to which Dr. Barras described Claimant’s reported self-perception, level of psychopathology, health and energy levels, problems with irritability and anger, anxious worry and nightmares, distrust of others, and concluded Claimant has limited coping resources; a Modified Somatic Perception Questionnaire on which Claimant obtained a score of 4, which is within normal limits; PTSD Checklist for DSM-5 on which Claimant obtained an overall score of 28, indicating a mild level of severity; Inventory of Problems which detects the credibility of various cognitive and/or psychological symptoms and as to which Dr. Barras found Claimant’s false disorder probability score indicated 54% probability that his responses were feigned. EX 4. Dr. Barras concluded that Claimant has “no diagnosis” because his reported symptoms are “subclinical” and do not “significantly interfere with social and occupational functioning.” *Id.* at 6. He further concluded that Claimant’s reported amnesic gap from 2010 when he returned from his work, until 2018 when he began his psychiatric care, “is not consistent with any known neurocognitive disorder.” EX 4; D&O at 14.

conditions and psychological symptoms without any explanation, reasoning, or analysis.<sup>15</sup> *Id.* at 15-16, 23. Similarly, the ALJ gave no weight to PCO Wilson’s medical questionnaire, which did diagnose PTSD and GAD, finding it not well-reasoned because it lacked objective testing or measurements and failed to explain how Claimant’s alleged traumatic events caused his alleged psychological conditions. *Id.* at 13-14,23. He therefore found “Claimant’s evidence is outweighed by Employer’s.”<sup>16</sup> *Id.* at 23. Consequently, based on Dr. Barras’s credited opinion that Claimant has no psychological condition, the ALJ concluded Claimant did not establish, by a preponderance of the evidence, a work-related psychological condition. *Id.* at 23. We affirm this conclusion as it is rational, supported by substantial evidence, and based on credibility determinations that are neither inherently incredible nor patently unreasonable. *See Pietrunti*, 119 F.3d 1042; *Gasparic*, 7 F.3d at 323.

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<sup>15</sup> The ALJ further found although PCO Wilson’s report references testing scores, it lacked any explanation as to “what these tests are, or what the scores mean.” D&O at 15.

<sup>16</sup> We reject Claimant’s assertion that the ALJ applied disparate standards in examining the parties’ respective causation evidence, as our review reveals the ALJ’s analysis accords with accepted principles of assessing reliability. *See, e.g., Director, OWCP v. Newport News Shipbuilding & Dry Dock Co.*, 138 F.3d 134, 140 (4th Cir. 1998) (The ALJ should “examine the logic” of physicians’ conclusions and “evaluate the evidence upon which their conclusions are based.”); *Pisaturo v. Logistec, Inc.*, 49 BRBS 77, 81 (2015) (ALJ has discretion to discredit a medical opinion where it fails to provide a sufficient explanation for the conclusion reached).

Accordingly, we reverse the ALJ's finding that Claimant did not invoke the Section 20(a) presumption. In all other respects, we affirm the ALJ's Decision and Order Denying Benefits.

SO ORDERED.

JUDITH S. BOGGS  
Administrative Appeals Judge

GREG J. BUZZARD  
Administrative Appeals Judge

MELISSA LIN JONES  
Administrative Appeals Judge