U.S. Department of Labor

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

BRB No. 24-0441 BLA

ROSEMARY BAKER Claimant-Respondent v. BLACK BEAUTY COAL COMPANY and OLD REPUBLIC INSURANCE COMPANY Employer/Carrier-Petitioners DIRECTOR, OFFICE OF WORKERS' COMPENSATION PROGRAMS, UNITED STATES DEPARTMENT OF LABOR Party-in-Interest	)	**NOT-PUBLISHED** DATE ISSUED: 06/16/2025 DECISION and ORDER

Appeal of the Decision and Order Awarding Benefits of Willow Eden Fort, Administrative Law Judge, United States Department of Labor.

Joseph E. Allman (Allman Law LLC), Indianapolis, Indiana, for Claimant.

Michael A. Pusateri (Greenberg Traurig LLP), Washington, D.C., for Employer and its Carrier.

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

Employer and its Carrier (Employer) appeal Administrative Law Judge (ALJ) Willow Eden Fort's Decision and Order Awarding Benefits (2023-BLA-05083) rendered on a claim filed on August 26, 2019, pursuant to the Black Lung Benefits Act, as amended, 30 U.S.C. §§901–944 (2018) (Act).[1]

The ALJ credited Claimant with 14.3 years of coal mine employment and thus found she could not invoke the presumption of total disability due to pneumoconiosis at Section 411(c)(4) of the Act, 30 U.S.C. §921(c)(4) (2018).[2] Considering entitlement under 20 C.F.R. Part 718, the ALJ found Claimant established both clinical and legal pneumoconiosis,[3] as well as a totally disabling respiratory or pulmonary impairment due to legal pneumoconiosis. 20 C.F.R. §§718.202(a), 718.204(b)(2). Thus, she awarded benefits.

On appeal, Employer argues the ALJ erred in finding Claimant established clinical and legal pneumoconiosis, and total disability. Claimant responds in support of the award of benefits. The Acting Director, Office of Workers' Compensation Programs, has not filed a response brief.

The Benefits Review Board's scope of review is defined by statute. We must affirm the ALJ's Decision and Order if it is rational, supported by substantial evidence, and in

[1] Claimant filed a previous claim which she later withdrew. Director's Exhibit 118 at 1. A withdrawn claim is "considered not to have been filed." 20 C.F.R. §725.306(b).

[2] Section 411(c)(4) of the Act provides a rebuttable presumption that a miner is totally disabled 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); 20 C.F.R. §718.305.

[3] "Legal pneumoconiosis" includes any chronic lung disease or impairment and its sequelae arising out of coal mine employment. 20 C.F.R. §718.201(a)(2). The definition includes "any chronic pulmonary disease or respiratory or pulmonary impairment significantly related to, or substantially aggravated by, dust exposure in coal mine employment." 20 C.F.R. §718.201(b). "Clinical pneumoconiosis" consists of "those diseases recognized by the medical community as pneumoconioses, *i.e.*, the conditions characterized by permanent deposition of substantial amounts of particulate matter in the lungs and the fibrotic reaction of the lung tissue to that deposition caused by dust exposure in coal mine employment." 20 C.F.R. §718.201(a)(1).

accordance with applicable law.[4] 33 U.S.C. §921(b)(3), as incorporated by 30 U.S.C. §932(a); *O'Keeffe v. Smith, Hinchman & Grylls Assocs., Inc.*, 380 U.S. 359 (1965).

20 C.F.R. Part 718 Entitlement

To be entitled to benefits under the Act, Claimant 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 element 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).

Legal Pneumoconiosis

To establish legal pneumoconiosis, Claimant must prove she has a "chronic pulmonary disease or respiratory or pulmonary impairment significantly related to, or substantially aggravated by, dust exposure in coal mine employment." 20 C.F.R. §718.201(b).

The ALJ considered the medical opinions of Drs. Go, Broudy, and Selby. Decision and Order at 25-28. Dr. Go diagnosed Claimant with legal pneumoconiosis in the form of a diffusion capacity impairment due to smoking, coal mine dust exposure, and systemic sclerosis. Drs. Broudy and Selby agreed Claimant has the impairment but attributed it entirely to systemic sclerosis that was completely unrelated to coal mine dust. Director's Exhibits 29, 38, 39; Claimant's Exhibits 1, 6; Employer's Exhibits 8, 9, 11. The ALJ found Dr. Go's opinion well-documented and well-reasoned and accorded it probative weight, but she found Drs. Broudy's and Selby's opinions not well-reasoned. Decision and Order at 25-28. Thus, she found Claimant met her burden to establish legal pneumoconiosis. *Id.* at 26.

Employer raises several challenges to the ALJ's weighing of the medical opinions. First, it argues the ALJ erred in finding Dr. Go's opinion adequate to meet Claimant's burden of proof necessary to demonstrate legal pneumoconiosis through a

[4] This case arises within the jurisdiction of the United States Court of Appeals for the Seventh Circuit because Claimant performed her coal mine employment in Illinois. *See Shupe v. Director, OWCP*, 12 BLR 1-200, 1-202 (1989) (en banc); Decision and Order at 4; Director's Exhibit 3 at 2.

causal connection between Claimant's impairment and her coal mine dust exposure.[5] Employer's Brief at 15. It further argues the ALJ erred in discrediting the opinions of Drs. Broudy and Selby. *Id.* at 17-18. Finally, Employer contends the ALJ's findings on legal pneumoconiosis are inconsistent, vague, and unexplained. *Id.* at 18-19. We disagree.

Dr. Go

Dr. Go diagnosed a moderate diffusion capacity impairment caused by coal mine dust exposure, cigarette smoking, and systemic sclerosis. Claimant's Exhibit 1 at 13. He noted the three factors are all contributory to Claimant's impairment. *Id.* Specifically, Dr. Go explained systemic sclerosis is associated with silica exposure. *Id.* He noted Claimant's coal mine employment exposed her to silica-containing rock and that this silica exposure likely contributed to her development of systemic sclerosis. Claimant's Exhibit 1 at 43, 6 at 2. Further, Dr. Go explained systemic sclerosis can cause scarring and fibrosis in the lungs which can reduce diffusion capacity. Claimant's Exhibit 1 at 40. Thus, he opined Claimant's diffusion capacity impairment was related to her systemic sclerosis, which was due in significant part to her coal mine dust exposure and constitutes legal pneumoconiosis. Claimant's Exhibit 6 at 2.

Dr. Broudy

Dr. Broudy acknowledged Claimant's reduced diffusion capacity. Director's Exhibit 38 at 4. He noted Claimant's fourteen years of coal mine employment and history of illnesses, including systemic scleroderma. *Id.* at 3. Specifically, Dr. Broudy opined Claimant's diffusion capacity impairment was due to systemic scleroderma rather than coal mine dust exposure because he was not aware of any evidence that scleroderma is caused

[5] Employer argues the ALJ erred in finding Claimant established clinical pneumoconiosis and that this finding tainted her legal pneumoconiosis analysis. Employer's Brief at 12-15. However, none of the physicians relied upon their finding clinical pneumoconiosis in determining whether Claimant has legal pneumoconiosis, none of the physicians attributed Claimant's totally disabling impairment to clinical pneumoconiosis, nor did the ALJ rely upon her finding of clinical pneumoconiosis to credit or discredit any of the physicians' opinions on legal pneumoconiosis, total disability, or disability causation. Decision and Order at 20-30. Thus, it is not apparent how any error in the ALJ finding Claimant established clinical pneumoconiosis would make a difference in regard to the ALJ's finding legal pneumoconiosis established, and Employer does not provide any explanation. *See Shinseki v. Sanders*, 556 U.S. 396, 413 (2009) (dismissing error as harmless when appellant fails to explain how "error to which he points could have made any difference").

by coal mine dust exposure. *See* Employer's Exhibit 8 at 6-7. Although Dr. Broudy later acknowledged silicosis has been associated with scleroderma and noted silica exposure could worsen scleroderma, he continued to opine Claimant's diffusion capacity impairment was not caused in any significant part by her coal mine dust exposure. Employer's Exhibits 8 at 17, 10 at 3.

Dr. Selby

Dr. Selby noted Claimant's diffusion capacity was slightly decreased as early as 2004. Director's Exhibit 39 at 5. He acknowledged Claimant's diffusion capacity continued to be abnormal but attributed it to her scleroderma due to its presentation with normal spirometry and lung volumes. Employer's Exhibit 9 at 11, 26. Although Dr. Selby acknowledged the research addressing silica exposure's effect on causing autoimmune diseases, including scleroderma, he opined it was far-fetched and highly unlikely Claimant's scleroderma was caused by her coal mine employment. Employer's Exhibit 11 at 11. Thus, Dr. Selby concluded Claimant's diffusion capacity impairment was not related to coal mine dust exposure and opined she did not have legal pneumoconiosis.

The ALJ credited Dr. Go's opinion that Claimant's diffusion capacity impairment constituted legal pneumoconiosis over the contrary opinions of Drs. Broudy and Selby. Decision and Order at 26. The ALJ noted Dr. Go correctly pointed out that Claimant's last coal mine dust exposure was in 2000, the reduction in her diffusion capacity impairment was noted as early as 2004, and the reduction pre-dated her diagnosis of systemic scleroderma by five years. *Id.* The ALJ credited Dr. Go's opinion that Claimant's smoking and coal mine dust exposure significantly contributed to her diffusion capacity impairment, along with contribution from her scleroderma, noting it was consistent with the timeline of the impairment and with the regulations which recognize pneumoconiosis as a latent and progressive disease.[6] *Id*. at 26-27.

The ALJ discredited the opinions of Drs. Broudy and Selby that Claimant's diffusion capacity impairment was caused entirely by systemic scleroderma, considering

[6] Citing *American Energy, LLC v. Director, OWCP* [*Goode*], 106 F.4th 319 (4th Cir. 2024), Employer argues the ALJ erred in crediting Dr. Go's opinion because he based it on mere exposure to coal mine dust. Employer's Brief at 15-16. We disagree. The ALJ credited his opinion because he considered smoking and coal mine employment histories which were similar to those the ALJ found and because Dr. Go's conclusion accounted for Claimant's diffusion impairment pre-dating her systemic sclerosis diagnosis. Decision and Order at 26.

neither physician explained why Claimant had a reduced diffusion capacity in 2004, five years prior to her scleroderma diagnosis. Decision and Order at 26. In addition, the ALJ explained both physicians initially stated there was no causal connection between silica exposure and scleroderma before acknowledging that there was a possible causal connection. Decision and Order at 27. Therefore, the ALJ found the opinions of Drs. Broudy and Selby not sufficiently documented or reasoned, credited Dr. Go's opinion over their contrary opinions, and found Claimant established legal pneumoconiosis. *Id.* at 27-28.

We first reject Employer's argument that Dr. Go's opinion cannot establish legal pneumoconiosis. Dr. Go expressly attributed Claimant's lung disease to coal mine dust exposure. The ALJ accurately noted Dr. Go attributed Claimant's diffusion capacity impairment to the cumulative and contributory effects of smoking, coal mine dust exposure, and scleroderma. Decision and Order at 27. As Dr. Go indicated coal mine dust exposure is significantly contributory to Claimant's lung disease, we see no error in the ALJ's determination that his opinion is sufficient to establish legal pneumoconiosis. *Gross v. Dominion Coal Corp.*, 23 BLR 1-8, 1-18-19 (2003) (physician need not specifically apportion the extent to which various causal factors contribute to a respiratory or pulmonary impairment).

Further, as the ALJ found Dr. Go's opinion supported by Claimant's relevant work and smoking histories,[7] her medical treatment records, his physical findings, and objective test results, we affirm her determination that Dr. Go's opinion is reasoned and documented.[8] *Amax Coal Co. v. Burns*, 855 F.2d 499, 501 (7th Cir. 1988); *Poole v. Freeman United Coal Mining Co.*, 897 F.2d 888, 895 (7th Cir. 1990) (weighing conflicting medical evidence is precisely the function of the ALJ as the fact-finder); *Fields v. Island*

[7] Although raised in Employer's argument regarding the ALJ's finding total disability established, we reject Employer's contention that Dr. Go "relied upon a grossly diminished thirteen pack-year smoking history, one half the history the ALJ found." Employer's Brief at 20. Employer's contention ignores the physician's testimony that even if he were to consider a twenty-six pack-year history, more than the twenty to twenty-five year history the ALJ found, his opinion would not change regarding the nature of the contributors to Claimant's diffusion impairment. Claimant's Exhibit 1 at 30.

[8] We also reject Employer's argument that a diffusion capacity impairment cannot constitute legal pneumoconiosis. Employer's Brief at 18-19. Legal pneumoconiosis is any chronic pulmonary disease or respiratory or pulmonary impairment significantly related to, or substantially aggravated by, dust exposure in coal mine employment. 20 C.F.R. §718.201(a)(2), (b).

Creek Coal Co., 10 BLR 1-19, 1-21-22 (1987) (reasoned opinion is one in which the ALJ finds the underlying documentation adequate to support the physician's conclusions); Decision and Order at 21-28. Thus, we affirm the ALJ's conclusion that Dr. Go's opinion supports a finding that Claimant has legal pneumoconiosis.

The ALJ also permissibly assigned little weight to the opinions of Drs. Broudy and Selby because they failed to provide an explanation as to the timing of the development of Claimant's diffusion impairment. *Burns*, 855 F.2d at 501, *Poole*, 897 F.2d at 895; Decision and Order at 26-28. Moreover, as Drs. Broudy and Selby both eventually conceded silica exposure is a possible cause of scleroderma, the ALJ's finding that their opinions are not well-reasoned or documented is supported by substantial evidence.[9] *See Compton v. Island Creek Coal Co.*, 211 F.3d 203, 207-208 (4th Cir. 2000); *Milburn Colliery Co. v. Hicks*, 138 F.3d 524, 528 (4th Cir. 1998); *Lane v. Union Carbide Corp.*, 105 F.2d 166, 174 (4th Cir 1997) (substantial evidence is more than a scintilla, but only such evidence that a reasonable mind could accept as adequate to support a conclusion). We therefore affirm the ALJ's determination that the opinions of Drs. Broudy and Selby are entitled to little probative weight.[10] Decision and Order at 26-27.

Further, contrary to Employer's arguments, the ALJ thoroughly and accurately summarized the medical evidence and her findings, and those findings are not inconsistent.

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[9] We reject Employer's argument that the ALJ mischaracterized Drs. Broudy's and Selby's opinions as conceding a link between silica exposure and scleroderma. Employer's Brief at 17-18. As the ALJ found, Dr. Selby explicitly conceded there is a causal link between silica exposure and scleroderma. Employer's Exhibit 11 at 11. The fact that Dr. Selby questioned the applicability of the medical studies supporting the causal link to the current case does not invalidate the ALJ's finding that he conceded the existence of a causal link. *See Lane v. Union Carbide Corp*., 105 F.3d 166, 174 (4th Cir 1997) (describing substantial evidence as more than a scintilla, but only such evidence that a reasonable mind could accept as adequate to support a conclusion and holding that an ALJ's findings may not be disregarded on the basis that other inferences could have been drawn from the evidence). Moreover, contrary to Employer's argument, Dr. Broudy did not link scleroderma to just silicosis and not to silica exposure. Employer's Brief at 18. Dr. Broudy noted "anywhere from seven percent to more than 50 percent of individuals with scleroderma hav[e] some history of *silica exposure*." Employer's Exhibit 10 at 3 (emphasis added).

[10] Because the ALJ found Dr. Go's opinion reasoned and documented and those of Drs. Broudy and Selby inadequately explained, we reject Employer's argument that the ALJ shifted the burden of proof to Employer. Employer's Brief at 17.

We consider Employer's arguments to be a request to reweigh the evidence, which we are not empowered to do. *Anderson v. Valley Camp of Utah, Inc.,* 12 BLR 1-111, 1-113 (1989). Because the ALJ sufficiently explained her credibility determinations in accordance with the Administrative Procedure Act (APA),[11] and her findings are supported by substantial evidence, we affirm her conclusion that Claimant established legal pneumoconiosis. 20 C.F.R. §§718.201(a)(2), 718.202(a)(4); *Wolf Creek Collieries v. Director, OWCP* [*Stephens*], 298 F.3d 511, 522 (6th Cir. 2002) (APA is satisfied where the ALJ properly addressed the relevant evidence and provided a sufficient rationale for his findings); Decision and Order at 28.

Total Disability

A miner is totally disabled if she has a pulmonary or respiratory impairment that, standing alone, prevents her from performing her 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 pneumoconiosis and cor pulmonale with right-sided congestive heart failure, or medical opinions. 20 C.F.R. §718.204(b)(2)(i)-(iv). The ALJ must weigh all relevant supporting evidence against all relevant 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 ALJ found Claimant established total disability based on the medical opinion evidence and the evidence as a whole.[12] 20 C.F.R. §718.204(b)(2)(iv); Decision and Order at 17.

The ALJ considered the medical opinions of Drs. Go, Broudy, and Selby. Decision and Order at 12-16. Dr. Go noted Claimant drove a truck during her last coal mine work and "had to climb 10 to 12 rungs to get into [the] truck [and] carried 20 and 30 pound loads 30 feet, at least 4 or 5 times a day." Claimant's Exhibit 1 at 7-8. He further noted Claimant's pulmonary function study yielded normal results but showed a moderate diffusion impairment. *Id*. at 10. Dr. Go also testified that Claimant's cardiopulmonary

[11] The Administrative Procedure Act provides that every adjudicatory decision must include "findings and conclusions, and the reasons or basis therefore, on all the material issues of fact, law, or discretion presented . . . ." 5 U.S.C. §557(c)(3)(A), as incorporated into the Act by 30 U.S.C. §932(a).

[12] The ALJ found the pulmonary function and arterial blood gas studies do not support a finding of total disability and there is no evidence of cor pulmonale with right-sided congestive heart failure. 20 C.F.R. §718.204(b)(2)(i)-(iii); Decision and Order at 8-10.

exercise test was submaximal due to her shortness of breath and evidenced a moderately reduced work capacity. *Id*. at 10-12. He opined Claimant is totally disabled from performing her usual coal mine employment as a truck driver based on her reduced diffusion capacity results, which he interpreted as demonstrating a "class 3" pulmonary impairment under American Medical Association criteria. Director's Exhibit 29 at 10; Claimant's Exhibit 1 at 10-12.

Dr. Broudy initially opined Claimant is totally disabled from a pulmonary perspective due to a severe reduction in diffusing capacity. Director's Exhibit 38 at 3. Nevertheless, he later concluded that based on the other normal spirometry results, Claimant was capable of performing her last coal mine job despite the reduction in diffusing capacity. Employer's Exhibits 8 at 19, 10 at 2.

Dr. Selby noted Claimant had a moderate diffusion capacity impairment but is not totally disabled as he concluded she retains the respiratory capacity to perform her last coal mine job. Employer's Exhibit 9 at 24-26. Crediting the opinion of Dr. Go over those of Drs. Broudy and Selby, the ALJ found the medical opinion evidence establishes Claimant has a totally disabling respiratory or pulmonary impairment. Decision and Order at 14-16.

Employer contends the ALJ erred in crediting Dr. Go because he relied on a reduced diffusion capacity study to diagnose total disability whereas Drs. Broudy and Selby gave more weight to the arterial blood gas studies. Employer's Brief at 21-23. It contends the regulations codify blood gas testing as reliable criteria for assessing total disability but do not provide diffusion capacity as a basis to establish total disability. *Id*. We disagree.

Even if total disability cannot be established by qualifying objective testing,[13] it "may nevertheless be found if a physician exercising reasoned medical judgment, based on medically acceptable clinical and laboratory diagnostic techniques, concludes that a miner's respiratory or pulmonary condition prevents" her from performing her usual coal mine employment. 20 C.F.R. §718.204(b)(2)(iv); *see Killman v. Director, OWCP*, 415 F.3d 716, 721-22 (7th Cir. 2005) (explaining a claimant can establish total disability despite non-qualifying objective tests). In addition, contrary to Employer's contention, a physician's opinion that a claimant is disabled due to a reduced diffusing capacity may constitute a valid basis for an ALJ's finding of total disability under the Act. *See Walker v. Director, OWCP*, 927 F.2d 181, 184-85 (4th Cir. 1991).

[13] A "qualifying" pulmonary function study or blood gas study yields results equal to or less than the applicable table values contained in Appendices B and C of 20 C.F.R. Part 718, respectively. A "non-qualifying" study yields results exceeding those values. *See* 20 C.F.R. §718.204(b)(2)(i), (ii).

As the ALJ found, Dr. Go acknowledged the pulmonary function studies and arterial blood gas studies were non-qualifying. Decision and Order at 11; Claimant's Exhibit 1. He nonetheless concluded Claimant is unable to perform her usual coal mine work, or any coal mining work, given the diffusion capacity study results and explained why the diffusion capacity study reflected an impairment; thus, the ALJ permissibly found Dr. Go's opinion well-reasoned and well-documented. *See Zeigler Coal Co. v. Director, OWCP* [*Villain*], 312 F.3d 332, 336 (7th Cir. 2002); *Poole v. Freeman United Coal Mining Co.*, 897 F.2d 888, 895 (7th Cir. 1990); 20 C.F.R. §718.204(b)(2)(iv); Decision and Order at 10-12; Claimant's Exhibits 1, 4.

Employer further asserts the ALJ substituted his judgment for that of the medical experts when finding Claimant's medical treatment records support a finding of total disability because "no testifying expert connected anything in the treatment notes to a total disability." Employer's Brief at 24. We disagree.

A medical opinion may support a finding of total disability if it provides sufficient information from which the ALJ can reasonably infer that the miner was unable to do her last coal mine job. *See Scott v. Mason Coal Co*., 60 F.3d 1138, 1141 (4th Cir. 1995); *Poole*, 897 F.2d at 894; *McMath v. Director, OWCP*, 12 BLR 1-6, 1-9 (1988); *see also Cornett v. Benham Coal, Inc.*, 227 F.3d 569, 578 (6th Cir. 2000). The ALJ accurately explained Claimant's treatment records contain physicians' opinions noting Claimant's severely impaired diffusion capacity and her respiratory symptoms of shortness of breath, hypoxemia, dyspnea, and dyspnea on exertion. Decision and Order at 12. She also noted the treating physicians opined Claimant could not do housework or grocery shop without assistance. Thus, the ALJ rationally concluded Claimant's treatment records support a finding that Claimant could not perform the duties associated with her last coal mine job, such as climbing ten feet into and out of a truck and operating a truck continuously for an entire shift. *Scott*, 60 F.3d at 1141; Decision and Order at 12.

Employer further argues the ALJ's findings shifted the burden the proof to Employer, mischaracterized the record, *see supra* note 9, and failed to comply with the APA's duty of explanation. Employer's Brief at 19-24. Contrary to Employer's argument, the ALJ maintained the burden of proof on Claimant; she further found Dr. Go's opinion was reasoned and documented and outweighs the contrary evidence. *See Director, OWCP v. Greenwich Collieries* [*Ondecko*], 512 U.S. 267, 281 (1994). Moreover, as the ALJ set forth her findings and conclusions and we are able to discern her bases for crediting them, we reject Employer's argument that her credibility findings do not satisfy the APA. *Harman Mining Co. v. Director, OWCP* [*Looney*], 678 F.3d 305, 316 (4th Cir. 2012) (if a reviewing court can discern what the ALJ did and why she did it, the duty of explanation under the APA is satisfied).

Employer's remaining arguments, that Dr. Go did not adequately explain his findings while Employer's experts better explained their findings, amount to requests to reweigh the evidence, which we are not empowered to do. *Anderson*, 12 BLR at 1-113; Employer's Brief at 21-24.

We therefore affirm the ALJ's finding Dr. Go's opinion establishes total disability. 20 C.F.R. §718.204(b)(2)(iv); Decision and Order at 6. Further, we affirm the ALJ's finding Claimant established total disability in consideration of the evidence as a whole. 20 C.F.R. §718.204(b)(2); *see Rafferty*, 9 BLR at 1-232.

We also affirm, as unchallenged on appeal, the ALJ's finding that Claimant established legal pneumoconiosis substantially contributed to her total disability. 20 C.F.R. §718.204(c)(1); *see Skrack v. Island Creek Coal Co.*, 6 BLR 1-710, 1-711 (1983); Decision and Order at 29-30. Consequently, we affirm the ALJ's finding that Claimant established all the elements of entitlement at Part 718. *See* Decision and Order at 30.

Accordingly, we affirm the ALJ's Decision and Order Awarding Benefits.

SO ORDERED.

DANIEL T. GRESH, Chief
Administrative Appeals Judge

JONATHAN ROLFE
Administrative Appeals Judge

MELISSA LIN JONES
Administrative Appeals Judge