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**United States Department of Energy
Office of Hearings and Appeals**

In the Matter of:	Personnel Security Hearing	)	
		)	
Filing Date:	December 29, 2025	)	Case No.: PSH-26-0032
		)	
		)	

Issued: June 10, 2026

Administrative Judge Decision

Diane L. Miles, Administrative Judge:

This Decision concerns the eligibility of XXXXXXXXXXXXXXXX (the Individual) to hold an access authorization under the United States Department of Energy's (DOE) regulations, set forth at 10 C.F.R. Part 710, "Procedures for Determining Eligibility for Access to Classified Matter and Special Nuclear Material or Eligibility to Hold a Sensitive Position."¹ As discussed below, after carefully considering the record before me in light of the relevant regulations and the *National Security Adjudicative Guidelines for Determining Eligibility for Access to Classified Information or Eligibility to Hold a Sensitive Position* (June 8, 2017) (Adjudicative Guidelines), I conclude that the Individual's access authorization should not be restored.

I. Background

The Individual is employed by a DOE Contractor, in a position that requires that he hold a security clearance. On June 21, 2025, the Individual was arrested and charged with Driving Under the Influence (DUI). Exhibit (Ex.) 8; Ex. 6 at 25–26.² In July 2025, the Local Security Office (LSO) issued a Letter of Interrogatory (LOI) to the Individual requesting additional details about his arrest. Ex. 7. In the LOI, the Individual reported that, before his arrest, he consumed three glasses of wine (approximately four to five ounces each), between approximately 6:30 p.m. and 9:00 p.m. *Id.* at 28–29. Then, while the Individual was driving home, he got a flat tire and stopped his car on the side of the road. *Id.* at 37. While the Individual was stopped on the side of the road, a police officer arrived to conduct a welfare check on the Individual and he detected the smell of alcohol on the Individual's breath. *Id.* at 39. The Individual admitted to the police officer that he had

¹ The regulations define access authorization as "an administrative determination that an individual is eligible for access to classified matter or is eligible for access to, or control over, special nuclear material." 10 C.F.R. § 710.5(a). This Decision will refer to such authorization as access authorization or security clearance.

² The DOE's exhibits were combined and submitted in a single, 183-page PDF workbook. Many of the exhibits are marked with page numbering that is inconsistent with their location in the combined workbook. This Decision will cite to the DOE's exhibits by reference to the exhibit and page number within the combined workbook regardless of any internal pagination.

consumed alcohol before driving and he underwent two breathalyzer tests, the results of which were 0.173% and 0.184%. *Id.* at 29, 39.

Due to the security concerns raised by the Individual's alcohol-related arrest, the LSO referred the Individual for an evaluation by a DOE-contractor psychologist (DOE Psychologist), who conducted a clinical interview of the Individual in August 2025 and issued a report (the Report) of his findings. Ex. 9. Based on his evaluation of the Individual and a medical doctor's interpretation of the Individual's Phosphatidylethanol (PEth)³ test result, the DOE Psychologist opined that the Individual met sufficient diagnostic criteria in the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision (DSM-5-TR)* for a diagnosis of Alcohol Use Disorder (AUD), Moderate, without adequate evidence of rehabilitation or reformation. *Id.* at 48–50.

In November 2025, the LSO informed the Individual, in a Notification Letter, that it possessed reliable information that created substantial doubt regarding his eligibility to hold a security clearance. Ex. 1 at 6–8. In a Summary of Security Concerns (SSC) attached to the Notification Letter, the LSO explained that the derogatory information raised security concerns under Guideline G (Alcohol Consumption) of the Adjudicative Guidelines. *Id.* at 5.

In December 2025, the Individual requested an administrative review hearing, and the LSO forwarded the Individual's request to the Office of Hearings and Appeals (OHA). Ex. 2. The Director of OHA appointed me as the Administrative Judge in this matter. At the hearing I convened pursuant to 10 C.F.R. § 710.25(d), (e), and (g), I took testimony from two witnesses: the Individual and the DOE Psychologist. *See* Transcript of Hearing, OHA Case No. PSH-26-0032 (Tr.). Counsel for the DOE submitted 12 exhibits, marked as Exhibits 1 through 12. The Individual submitted thirteen exhibits, marked as Exhibits A through M.

II. The Summary of Security Concerns

Under Guideline G, “excessive alcohol consumption often leads to the exercise of questionable judgment or the failure to control impulses, and can raise questions about an individual's reliability and trustworthiness.” Adjudicative Guidelines at ¶ 21. Conditions that could raise a security concern under Guideline G include: “alcohol-related incidents away from work, such as driving while under the influence,” and a “diagnosis by a duly qualified medical or mental health professional (e.g., physician, clinical psychologist, psychiatrist, or licensed clinical social worker) of alcohol use disorder.” *Id.* at ¶ 22(a), (d).

In invoking Guideline G, the LSO cited the Individual's June 2025 arrest for DUI. Ex. 1 at 5. The LSO also cited the DOE Psychologist's opinion that the Individual met sufficient *DSM-5-TR* diagnostic criteria for a diagnosis of AUD, Moderate, without adequate evidence of rehabilitation or reformation. *Id.*⁴ The aforementioned information justifies the LSO's invocation of Guideline G.

³ The Report indicates that PEth accumulates in the blood when “ethanol binds to the red blood cell membrane,” and the level of PEth in the blood reflects the “average amount of alcohol consumed over the previous 28–30 days.” Ex. 9 at 65. A PEth test result exceeding 20 ng/mL “indicates [s]ignificant alcohol consumption.” *Id.*

⁴ The LSO also cited the Individual's August 2025 PEth test result of 162 ng/mL, which the DOE Psychologist, based on the interpretation of a medical doctor, opined indicated the Individual had consumed alcohol within the prior 30

III. Regulatory Standards

A DOE administrative review proceeding under Part 710 requires me, as the Administrative Judge, to issue a decision that reflects my comprehensive, common-sense judgment, made after consideration of all the relevant evidence, favorable and unfavorable, as to whether the granting or continuation of a person's access authorization will not endanger the common defense and security and is clearly consistent with the national interest. 10 C.F.R. § 710.7(a). The regulatory standard implies that there is a presumption against granting or restoring a security clearance. *See Department of Navy v. Egan*, 484 U.S. 518, 531 (1988) (“clearly consistent with the national interest” standard for granting security clearances indicates “that security determinations should err, if they must, on the side of denials”); *Dorfmont v. Brown*, 913 F.2d 1399, 1403 (9th Cir. 1990) (strong presumption against the issuance of a security clearance).

The individual must come forward at the hearing with evidence to convince the DOE that granting or restoring access authorization “will not endanger the common defense and security and will be clearly consistent with the national interest.” 10 C.F.R. § 710.27(d). The individual is afforded a full opportunity to present evidence supporting their eligibility for an access authorization. The Part 710 regulations are drafted so as to permit the introduction of a very broad range of evidence at personnel security hearings. Even appropriate hearsay evidence may be admitted. *Id.* § 710.26(h). Hence, an individual is afforded the utmost latitude in the presentation of evidence to mitigate the security concerns at issue.

IV. Findings of Fact and Hearing Testimony

During the August 2025 psychological evaluation, the Individual told the DOE Psychologist that before his June 2025 arrest, he consumed three glasses of wine, but he did not feel intoxicated, and he believed he could drive safely. Ex. 9 at 45. He also told the DOE Psychologist that since his June 2025 arrest for DUI, he had “cut back” on his alcohol consumption. *Id.* at 46. Since his arrest, he claimed that he had consumed alcohol on two occasions: one occasion on which he drank two rum drinks at a bar, and another on which he consumed two beers while sailing with a friend. *Id.* He also told the DOE Psychologist that he never sought treatment for his alcohol use. *Id.* Based on the result of the Individual's August 2025 PEth test, which was 162 ng/mL, a medical doctor opined that the Individual underreported his current level of alcohol consumption to the DOE Psychologist because the Individual's self-reported alcohol consumption “would not trigger a positive PEth [test result].” *Id.* at 46–47, 65–66. The DOE Psychologist concurred with the medical doctor's opinion; he believed the Individual had continued to drink a significant amount of alcohol since his DUI, despite his claim that he had cut back on his drinking. *Id.* at 47. The DOE Psychologist also believed that for the Individual to have produced blood alcohol content (BAC) levels of 0.173% and 0.184% on the night of his arrest, he would have had to consume “between 10 and 11 standard size glasses of wine” during the evening, and that therefore, he believed the Individual underreported his alcohol consumption to the police officer before his arrest. *Id.* at 47–48.

days. Ex. 1 at 5. While this information informed the DOE Psychologist's opinion, it does not appear to raise security concerns in of itself, and therefore I will not consider it as a discrete basis for security concern.

The DOE Psychologist diagnosed the Individual with AUD, Moderate, without adequate evidence of rehabilitation or reformation. Ex. 9 at 48–49. To show adequate evidence of rehabilitation from his AUD, Moderate, the DOE Psychologist recommended that the Individual abstain from alcohol for a minimum of 12 months, complete an intensive outpatient program (IOP), and participate in an aftercare program for no less than 12 months. *Id.* at 49. If the Individual chose not to participate in an IOP, the Individual could demonstrate rehabilitation by actively participating in Alcoholics Anonymous (AA) or a similar recovery program, such as SMART Recovery, attend at least three meetings per week, work with a sponsor, and document his attendance, for a minimum of 12 months. *Id.* Whether the Individual chose to participate in an IOP or a 12-step program, the Individual was told to undergo monthly PEth testing to demonstrate that he had abstained from alcohol. *Id.* In order to demonstrate reformation from his AUD, Moderate, the DOE Psychologist recommended that he provide negative PEth tests results for a period of 18 months. *Id.* at 49–50.

In January 2026, the Individual obtained the opinion of another psychologist as to whether he had an AUD. Ex. E at 1; Ex. F. The Individual submitted a report from his psychologist, to support his testimony that he does not have an AUD and does not need alcohol treatment. Tr. at 25–26; Ex. E. A review of this psychologist’s report indicates that between November and December 2025, the Individual was on a vacation, during which he consumed a beer or a glass of wine each day. Ex. E at 15–16. The Individual’s psychologist reviewed the results of the Individual’s PEth test taken on January 9, 2026, which was positive at a level of 29 ng/mL, a PEth test taken on January 30, 2026, which was negative, and a PEth test taken on March 2, 2026, which was also negative. Ex. E at 19; Ex. J; Ex. K; Ex. L. The Individual reported to the psychologist that he had been attending AA meetings, but he described his participation in AA as “inconsistent.” Ex. E at 16. The report also indicated that the Individual “endorsed” two of the eleven *DSM-5-TR* diagnostic criteria for AUD within the past year. *Id.* at 17. Despite the Individual’s positive January 9, 2026, PEth test and the presence of two of the *DSM-5-TR* diagnostic criteria, the Individual’s psychologist concluded that the Individual had stopped drinking alcohol since December 2025 and did not have an AUD, despite meeting sufficient diagnostic criteria for such a diagnosis, because the Individual’s alcohol-related behaviors did “not align with the clinical intent of the *DSM-5-TR* criteria” due to his perception of their isolated nature. *Id.* at 19–20; *see also* Ex. 9 at 48 (containing the *DSM-5-TR* diagnostic criteria for AUD, which indicate that two criteria are sufficient for a diagnosis of AUD). The Individual’s psychologist also concluded that the Individual did not require alcohol treatment, and his attendance at AA was “not necessary either.” Ex. E at 21. The Individual’s psychologist believed that the Individual would benefit from “targeted” alcohol education, abstinence from alcohol or consumption in moderation, and periodic monitoring of alcohol use such as PEth testing to “support accountability during adjudicative review.” *Id.* at 20–21.

At the hearing, the Individual testified that he did not believe had a problem with alcohol. Tr. at 25–26.⁵ Although he told the DOE Psychologist that he did not feel intoxicated before his arrest for DUI, at the hearing, he admitted that he felt intoxicated the night of his arrest. *Id.* at 28. After his arrest, from June 2025 to December 2025, he claimed that he “cut back” on his alcohol consumption by having three drinks, every other week. *Id.* at 19, 29. When asked why he gave the DOE Psychologist a different account – claiming he had only consumed two ounces of rum and

⁵ The Individual also submitted employment records and letters of recommendation from colleagues, to support his testimony that, besides his June 2025 arrest for DUI, his alcohol consumption had never impacted his work. Tr. at 20–22; Ex. A; Ex. B; Ex. C; Ex. H; Ex. I; Ex. M.

two beers between June 2025 and August 2025 – he said he couldn’t remember why. *Id.* at 29. When he learned that the DOE suspended his security clearance, he stopped drinking alcohol. *Id.* at 19. He also stated that he last consumed alcohol on December 7, 2025, when he consumed “two to three drinks in a night.” *Id.* at 20, 32.

The Individual claimed that since January 2026, he had attended AA meetings, three days a week. *Id.* at 23. However, the only documentation of AA attendance that he submitted was a copy of one email, indicating that he attended an AA meeting, virtually, on April 20, 2026, two weeks before the hearing. Ex. G. When he was asked if he spoke during the AA meetings, the Individual replied, “not very often,” and stated that he may have spoken once per week. Tr. at 23. He stated that he was participating in AA’s 12-step program, but he was not following the steps sequentially, because he took issue with some of the steps. *Id.* at 23–24. He explained that he was “struggling with step one” of the program, which requires that you admit you have a problem with alcohol. *Id.* at 35. He believed he was on step eight or nine of the program, as of the hearing. *Id.* at 24. He did not believe he needed an AA sponsor, so he did not obtain one. *Id.* at 34. He did not believe he needed to continue to attend AA to maintain his abstinence, and the only value he found in continuing to attend AA was to support others. *Id.* at 36. He did not believe he needed any form of alcohol treatment, so he did not enroll in an IOP or any other type of alcohol treatment program. *Id.* at 24, 33, 36. He submitted the results of a PEth test, taken on March 27, 2026, which was negative for alcohol. Ex. D. When asked if he planned to drink alcohol again, the Individual replied, “Do I have a plan, no. Will it happen, possibly.” Tr. at 34.

The DOE Psychologist testified that after listening to the testimony provided during the hearing and reviewing the Individual’s exhibits, the Individual had not yet demonstrated rehabilitation or reformation from his AUD, Moderate. Tr. at 44–46. He stated that since his psychological evaluation, the Individual had “taken some steps[,] but he has not done enough yet” to resolve his AUD, Moderate. *Id.* at 46. As for the Individual’s psychologist’s opinion that the Individual did not have an AUD, the DOE Psychologist believed that after finding that the Individual met two of the *DSM-5-TR* diagnostic criteria, he should have diagnosed the Individual with AUD, Mild, because the presence of two criteria establishes that a disorder is present. *Id.* at 45, 56. As the Individual had not abstained from alcohol for at least one year, as the DOE Psychologist had recommended, he opined that the Individual had not demonstrated rehabilitation or reformation from his AUD, Moderate. *Id.* at 45–46. He gave the Individual a prognosis of “fair” based on the Individual’s failure to comply with his treatment recommendations. *Id.* at 46–47.

V. Analysis

The Adjudicative Guidelines provide that conditions that could mitigate security concerns under Guideline G include:

- (a) So much time has passed, or the behavior was so infrequent, or it happened under such unusual circumstances that it is unlikely to recur or does not cast doubt on the individual’s current reliability, trustworthiness, or judgment;
- (b) The individual acknowledges his or her pattern of maladaptive alcohol use, provides evidence of actions taken to overcome this problem, and has demonstrated a clear and established pattern of modified consumption or abstinence in accordance with treatment recommendations;

- (c) The individual is participating in counseling or a treatment program, has no previous history of treatment and relapse, and is making satisfactory progress in a treatment program; and
- (d) The individual has successfully completed a treatment program along with any required aftercare, and has demonstrated a clear and established pattern of modified consumption or abstinence in accordance with treatment recommendations.

Adjudicative Guidelines at ¶ 23.

As to factor (a), the Individual's June 2025 arrest for DUI occurred one year before the hearing. While the Individual claimed to have "cut back" on his alcohol consumption after his DUI arrest, considering that his accounts of his alcohol consumption prior to the DUI and in the month prior to the evaluation by the DOE Psychologist were contradicted by alcohol testing, I conclude that he was either intentionally misrepresenting his alcohol consumption or his pattern of alcohol consumption was so heavy that he could not reliably recall how much alcohol he was actually drinking. Therefore, I find that the Individual's problematic alcohol consumption continued until January 2026, as supported by his negative January 30, 2026, PEth test, four months before the hearing, which is an insufficient amount of time, for the passage of time alone, to mitigate the security concerns related to the Individual's alcohol consumption. There is also no evidence that the Individual's arrest and problematic alcohol consumption, leading up to his arrest, occurred under unusual circumstances.

Finally, although the Individual submitted a report from his psychologist to support his testimony that he does not have an AUD, his psychologist's opinion relied upon the Individual's self-reporting of his alcohol consumption since his June 2025 arrest, which, for the reasons noted above, were unreliable. Furthermore, his psychologist did not sufficiently explain why the Individual did not have AUD, despite satisfying two of the *DSM-5-TR* diagnostic criteria for the disorder. The Individual's psychologist was not present at the hearing and could not be cross-examined as to his opinion. In contrast, the DOE Psychologist provided detailed testimony as to how he formulated his opinion, including how he relied on the Individual's reporting of his symptoms during his evaluation, as well as information reflected in the Individual's history and the results of his August 2025 PEth test. Therefore, I give more weight to the opinion of the DOE Psychologist than the Individual's psychologist, and there is insufficient evidence upon which I can conclude that the DOE Psychologist's diagnosis of the Individual should not be relied upon.

I am persuaded by the opinion of the DOE Psychologist, that because the Individual has not received sufficient alcohol treatment and had not abstained from alcohol for at least one year, he is not yet rehabilitated or reformed from his AUD, Moderate, and that his prognosis was fair. The Individual also testified that he would, possibly, resume his consumption of alcohol. I cannot conclude that the Individual's problematic alcohol consumption is unlikely to recur, and it continues to cast doubt on his current reliability, trustworthiness, and judgment. Accordingly, I find that the Individual has not mitigated the security concerns related to his alcohol consumption under ¶ 23(a) of the Adjudicative Guidelines.

As to factor (b), the Individual admitted, during his evaluation with the DOE Psychologist, and during the hearing, that he did not believe he had a problem with alcohol and that he did not believe

he needed to obtain alcohol treatment. He testified that he had attended AA meetings, three times a week, since January 2026, but he only produced evidence of having attended one meeting, two weeks before the hearing. He admitted he only attended the AA program because it was recommended by the DOE Psychologist, and that he only continues to attend to support others, rather than to address his problematic alcohol consumption. He further “took issue” with some of the program’s steps, including step one, which required him to admit that he had a problem with alcohol, and did not follow the DOE Psychologist’s recommendation to obtain an AA sponsor because he did not believe that was necessary. The Individual’s own statements establish that he has not acknowledged his pattern of problematic alcohol consumption. Based on this evidence, I am unable to conclude that the Individual made a sincere effort to address his problematic alcohol consumption.

Finally, the Individual’s PEth test results, dated from January 2026 to March 2026, demonstrate only that he has abstained from alcohol for three months, which is not enough time to establish a clear and established pattern abstinence in accordance with the DOE Psychologist’s treatment recommendations, which required abstinence for at least one year. The DOE Psychologist also opined that the Individual was not yet rehabilitated or reformed from his AUD, Moderate, and that his prognosis was fair. Therefore, I find the Individual has not mitigated the security concerns related to his alcohol consumption under ¶ 23(b) of the Adjudicative Guidelines.

As to factors (c) and (d), the Individual submitted evidence of having attended one AA meeting two weeks before the hearing. Although he claimed to have attended AA meetings since January 2026, he did not submit documentary evidence of having done so. The report of his own psychologist indicates that his progress through AA was inconsistent. He also testified that he did not obtain an AA sponsor because he did not believe that was necessary either. The lack of documentary support of his AA attendance, along with his admission that he does not believe he needed AA leaves me unable to conclude that he is actively participating in the program. The Individual has not followed the DOE Psychologist’s recommendation to enroll in an IOP, and the Individual has not demonstrated that he abstained from alcohol for more than four months, so, he has not established a pattern of abstinence in accordance with the DOE Psychologist’s treatment recommendations. Therefore, I find that the Individual has not mitigated the security concerns related to his alcohol consumption under ¶ 23(c) or ¶ 23(d) of the Adjudicative Guidelines.

For the aforementioned reasons, I find that none of the mitigating conditions are applicable. Therefore, the Individual has not resolved the security concerns asserted by the LSO under Guideline G.

VI. Conclusion

For the reasons set forth above, I conclude that the LSO properly invoked Guideline G of the Adjudicative Guidelines. After considering all the evidence, both favorable and unfavorable, in a comprehensive, common-sense manner, including weighing all the testimony and other evidence presented at the hearing, I find that the Individual has not brought forth sufficient evidence to resolve the concerns set forth in the SSC. Accordingly, the Individual has not demonstrated that restoring his security clearance would not endanger the common defense and security and would be clearly consistent with the national interest. Therefore, I find that the Individual’s access authorization should not be restored. This Decision may be appealed in accordance with the procedures set forth at 10 C.F.R. § 710.28.

Diane L. Miles
Administrative Judge
Office of Hearings and Appeals