United States Department of Energy
Office of Hearings and Appeals

In the Matter of: Personnel Security Hearing	)	
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Filing Date: January 20, 2026	)	Case No.: PSH-26-0050
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	)	

Issued: July 31, 2026

Administrative Judge Decision

Kristin L. Martin, Administrative Judge:

This Decision concerns the eligibility of XXXXXXXXXXXXX (hereinafter referred to as "the Individual") for access authorization under the Department of Energy's (DOE) regulations set forth at 10 C.F.R. Part 710, entitled, "Procedures for Determining Eligibility for Access to Classified Matter and Special Nuclear Material or Eligibility to Hold a Sensitive Position."[1] For the reasons set forth below, I conclude that the Individual's security clearance should not be restored.

I. BACKGROUND

The Individual is employed by a DOE Contractor in a position which requires a security clearance. In June 2025, the Individual was arrested and charged with Open Container Alcohol Violation. The Individual was subsequently referred to a DOE-consultant psychologist (Psychologist) for an evaluation related to his alcohol consumption. Thereafter, the Local Security Office (LSO) began the present administrative review proceeding by issuing a Notification Letter to the Individual informing him that he was entitled to a hearing before an Administrative Judge in order to resolve the substantial doubt regarding his eligibility to continue holding a security clearance. *See* 10 C.F.R. § 710.21.

The Individual requested a hearing and the LSO forwarded the Individual's request to the Office of Hearings and Appeals (OHA). 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), the Individual presented the testimony of two witnesses—his former supervisor and his coworker—and testified on his own behalf. The LSO presented the testimony of the Psychologist. *See* Transcript of Hearing, OHA Case No. PSH-26-0050 (hereinafter cited as "Tr."). The LSO

[1] Under the regulations, "'[a]ccess authorization' means 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). Such authorization will also be referred to in this Decision as a security clearance.

submitted fifteen exhibits, marked as Exhibits 1 through 15 (hereinafter cited as "Ex."). The Individual submitted eight exhibits, marked as Exhibits A through H.

II. THE NOTIFICATION LETTER AND THE ASSOCIATED SECURITY CONCERNS

As indicated above, the Notification Letter informed the Individual that information in the possession of the DOE created a substantial doubt concerning his eligibility for a security clearance. That information pertains to Guideline G of the *National Security Adjudicative Guidelines for Determining Eligibility for Access to Classified Information or Eligibility to Hold a Sensitive Position*, effective June 8, 2017 (Adjudicative Guidelines). These guidelines are not inflexible rules of law. Instead, recognizing the complexities of human behavior, these guidelines are applied in conjunction with the factors listed in the adjudicative process. 10 C.F.R. § 710.7.

Guideline G states that "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 include:

> (a) Alcohol-related incidents away from work, such as driving while under the influence, fighting, child or spouse abuse, disturbing the peace, or other incidents of concern, regardless of the frequency of the individual's alcohol use or whether the individual has been diagnosed with alcohol use disorder;
>
> (b) Alcohol-related incidents at work, such as reporting for work or duty in an intoxicated or impaired condition, drinking on the job, or jeopardizing the welfare and safety of others, regardless of whether the individual is diagnosed with alcohol use disorder;
>
> (c) Habitual or binge consumption of alcohol to the point of impaired judgment, regardless of whether the individual is diagnosed with alcohol use disorder;
>
> (d) 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;
>
> (e) The failure to follow treatment advice once diagnosed;
>
> (f) Alcohol consumption, which is not in accordance with treatment recommendations, after a diagnosis of alcohol use disorder; and
>
> (g) Failure to follow any court order regarding alcohol education, evaluation, treatment, or abstinence.

Id. at ¶ 22.

The LSO alleges that:

- On June 2, 2025, the Individual was arrested and charged with Open Container Alcohol Violation;

- In a November 2025 report, the Psychologist concluded that the Individual met sufficient *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision* (DSM-5) criteria for a diagnosis of Alcohol Use Disorder, Moderate, and that he habitually and/or binge consumed alcohol to the point of impaired judgment;

- The Psychologist ordered a Phosphatidylethanol (PEth)[2] test for the Individual, which returned a positive result of 276 ng/ml;[3] and

- On April 8, 2024, the Individual was diagnosed with Alcohol Use Disorder by a different DOE affiliated psychologist.

Ex. 1 at 7.[4]

The allegations fall under concerns (a), (c), and (d) of Guideline G. The Individual's arrest was an alcohol-related incident away from work (concern (a)), and the Psychologist opined that he met sufficient criteria for a diagnosis of Alcohol Use Disorder and that he binge or habitually consumed alcohol to the point of impaired judgment (concerns (d) and (c)). Accordingly, the LSO's security concerns under Guideline G are justified.

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 of 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 entire process is a conscientious scrutiny of a number of variables known as the "whole person concept." Adjudicative Guidelines at ¶ 2(a). The protection of the national security is the paramount consideration. 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).

[2] A PEth test measures a blood sample for levels of an alcohol byproduct. *Direct Ethanol Biomarker Testing: PETH*, Mayo Clinic Laboratories, https://news.mayocliniclabs.com/2022/09/13/direct-ethanol-biomarker-testing-peth-test-in-focus/ (last visited July 31, 2026). The test can detect alcohol consumption in the two to four weeks preceding the test. *Id.*

[3] The fact that the PEth test was positive does not present security concerns under Guideline G in and of itself. Accordingly, I only consider this allegation to the extent that it informed the Psychologist's opinion.

[4] DOE exhibit page numbers will be cited using the Bates stamp in the top right corner of the documents.

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 his 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.* at § 710.26(h). Hence, an individual is afforded the utmost latitude in the presentation of evidence to mitigate the security concerns at issue.

The discussion below reflects my application of these factors to the testimony and exhibits presented by both sides in this case.

IV. FINDINGS OF FACT

The Individual holds access authorization in connection with his employment as a contractor at a DOE facility. Ex. 3 at 16. In February 2024, the Individual's former supervisor encouraged him to obtain alcohol treatment after observing changes in his behavior and attendance, and the Individual entered a hospital for alcohol-withdrawal symptoms before seeking outpatient substance-abuse treatment. Ex. 8 at 50, 54; Tr. at 54, 74–75; *see also* Tr. at 17–24, 44–45 (former supervisor testifying that he confronted the Individual about his alcohol consumption after having observed significant weight gain, changes in the Individual's demeanor, missed work, and attendance problems, and that he drove the Individual to the hospital after the Individual agreed to seek help). Following his release from the hospital, the Individual entered his employer's Recovery and Abstinence Program through its employee assistance program (EAP), pursuant to which he committed to abstain from alcohol, and met periodically with an EAP counselor. Tr. at 54, 75, 87–91. During a March 5, 2024, Intensive Outpatient Program (IOP) initial assessment, the Individual reported a ten-year history of alcohol use and that, during the preceding three years, he had engaged in binge drinking involving approximately a six-pack of high-alcohol-content beer per episode, primarily on weekends around his rotating work schedule. Ex. 8 at 52, 54. The provider who conducted the assessment diagnosed the Individual with Alcohol Dependence and admitted him to the twelve-week IOP, which included group counseling, relapse-prevention education, development of coping skills, and the creation of a sober-support network. *Id.* at 52, 55–56; Tr. at 56; *see also* Tr. at 55–56 (Individual testifying that he learned strategies for addressing stress, triggers, and the underlying causes of his drinking through the IOP). On April 8, 2024, a DOE-consultant psychologist (different than the Psychologist from his 2025 evaluation) evaluated the Individual and diagnosed him with Alcohol Use Disorder, in early remission. Ex. 13 at 190–91. The Individual successfully completed his IOP on April 18, 2024, and the treatment provider recommended that he continue aftercare and regularly attend sober-support meetings. Ex. 8 at 49, 104–06.

On June 2, 2025, law enforcement officers responded to a call about a man sitting in a vehicle for several hours in a hotel parking lot and found the Individual sitting in his vehicle with an open container of beer; they arrested and charged him with an open-container violation. Ex. 6 at 27–30; Tr. at 113. The Individual later reported that he had consumed one beer approximately one or two hours before the incident, spent the night in jail, and appeared in court by teleconference the next

day, when the charge was dismissed. Ex. 6 at 37–38; Ex. 7 at 40–41; *see also* Tr. at 93 (Individual reaffirming his claim to have consumed only one beer). In his September 15, 2025, response to a Letter of Interrogatory, the Individual asserted that he had abstained from alcohol since February 25, 2024, except for the one beer he consumed on June 2, 2025, and stated that he continued to attend aftercare and meet regularly with his employer's EAP. Ex. 7 at 42–44. He also committed to avoiding alcohol in the future. *Id.* at 46.

In October 2025, the Individual and his fiancée took a vacation. Tr. at 57–58, 101–02. The Individual testified at the hearing that he consumed alcohol during the vacation, including drinks at dinners and shows, occasional drinks during the day or at lunch, one or two beers at theme parks, and margaritas at the resort. *Id.* at 139–40. He testified that his fiancée knew he was in recovery but added the caveat that there was a language barrier between him and his fiancée, so "it was hard to say, like, how much she really understood about it all." *Id.* The Individual further testified that he sometimes continued to consume alcohol on weekends after returning from the vacation. *Id.* at 140–41.

The LSO referred the Individual for a substance abuse evaluation. *See* Ex. 10. The Psychologist evaluated the Individual on October 27, 2025. Ex. 11. The Individual told the Psychologist that he had remained sober since February 2024 except for consuming one beer in June 2025. *Id.* at 162. The Psychologist ordered a PEth test as part of the evaluation. *Id.* at 164–65. The test produced a result of 276 ng/mL, which the psychiatrist who interpreted the test said was consistent with heavy alcohol consumption in the previous four weeks. Ex. 11 at 164. The Psychologist relied upon the psychiatrist's interpretation as evidence of recent alcohol consumption inconsistent with the Individual's reported abstinence and accordingly concluded that the Individual was not a reliable reporter of his alcohol use. *Id.* at 165; *see also* Tr. at 105 (Individual admitting at the hearing that he had not disclosed his October 2025 alcohol consumption to the DOE Psychologist and that he was not a reliable narrator of his alcohol consumption). In a November 11, 2025, report, the Psychologist diagnosed the Individual with Alcohol Use Disorder, Moderate, concluded that he habitually or binge consumed alcohol to the point of impaired judgment, and determined that he had not demonstrated adequate rehabilitation or reformation. *Id.* at 165–66. To show rehabilitation, the Psychologist recommended that the Individual complete inpatient alcohol treatment, participate in recommended aftercare and recovery-support meetings such as Alcoholics Anonymous (AA), and document abstinence through monthly negative PEth tests for at least eighteen months. *Id.* at 166–67. If he did not choose to attend treatment or support groups, the Psychologist recommended that he could show reformation by providing documentation of abstinence through monthly negative PEth tests for at least twenty-four months. *Id.*

Prior to the hearing, the Individual submitted the following exhibits into evidence:

- Results of two PEth tests taken on May 6 and June 5, 2026, both negative (Exs. A, B, H);
- A letter confirming the Individual's completion of the 2024 IOP (Ex. C);
- A letter confirming that the Individual attended aftercare weekly for the twelve months following his IOP completion (Ex. D);

- Attendance verification for six SMART Recovery meetings between May 19 and June 23, 2026 (Ex. E as amended);

- Results of twelve random alcohol tests (urine or breath sample) taken between March 6, 2024, and October 29, 2025, all negative (Ex. F); and

- Documentation that the Individual is prescribed Naltrexone and a picture of the prescription bottle (Ex. G).[5]

The former supervisor testified that he knew the Individual was participating in employer-sponsored recovery services between February 2024 and April 2026, at which time he stopped supervising the Individual, that he and the Individual discussed his progress approximately weekly or every other week, and that he observed that the Individual exercised, prioritized his health, appeared better kept, returned to his prior demeanor, and no longer experienced the earlier attendance or performance problems. Tr. at 22–25, 29–30. He testified that he did not know whether the Individual remained completely abstinent between February 2024 and June 2025, but he observed no indication that the Individual was consuming alcohol heavily during that period. *Id.* at 26–30. He testified that the Individual called him after the June 2025 incident and reported that he had consumed a couple of drinks, experienced an issue with his fiancée, and received an open-container charge while sitting in a vehicle. *Id.* at 26, 30–32.

The former supervisor testified that, after the Individual's clearance was suspended in December 2025, he maintained periodic contact with him and observed no signs suggesting problematic alcohol use. Tr. at 34–38. He testified that the Individual later told him that an alcohol-related test had produced a positive result but he did not recall the details of the conversation or the test results. *Id.* at 37–38. He testified that to his knowledge, the last time the Individual consumed alcohol was the June 2025 open-container incident. *Id.* at 43. He testified that he believed relationship difficulties were the Individual's principal alcohol-related trigger. *Id.* at 44.

The Individual's coworker who worked with the Individual weekly until the Individual's clearance was suspended, testified that he became concerned about the Individual in approximately February 2024 after the Individual became more distant and sometimes failed to answer telephone calls, which caused the coworker to believe that something was wrong. Tr. at 152–56. The coworker testified that he knew the Individual had sought treatment. *Id.* at 159. He supported that decision and had heard the Individual discuss recovery meetings positively. *Id.* He testified that the Individual stated that he was sober and intended to remain sober. *Id.* at 160–62.

The coworker testified that the Individual later described the June 2025 open-container incident as a mistake. Tr. at 163. The coworker testified that the Individual said that the container was in the vehicle because he intended to discard it. *Id.* He testified that the Individual did not tell him that he had consumed alcohol that day. *Id.* The coworker testified that he remained in contact with the Individual nearly every day and was certain that the Individual was not currently drinking. *Id.* at 166. He testified that he regarded the Individual as a good person who had been "scared sober"

[5] Naltrexone is a medication that can help reduce alcohol cravings in people with Alcohol Use Disorder. *Naltrexone*, Substance Abuse and Mental Health Services Administration, https://www.samhsa.gov/substance-use/treatment/options/naltrexone (last visited July 29, 2026).

and was following the "straight and narrow," although he acknowledged the Individual's drinking during the vacation and stated that he did not condone it. *Id.* at 166–67.

The Individual testified that he last consumed alcohol in December 2025 and had remained sober since his clearance was suspended. Tr. at 59–60, 78. He testified that he worked on his mental health, exercised, and stayed connected with friends and family. *Id.* He underwent PEth tests in May and June 2026—both of which returned a negative result— and began attending online SMART Recovery meetings in May 2026. *Id.* at 60–61, 122. The Individual had attended six SMART Recovery meetings by the hearing date, and in May 2026 began taking prescribed Naltrexone for his Alcohol Use Disorder. *Id.* at 61, 127, 131–32. The Individual acknowledged that he had not completed the Psychologist's recommendation for rehabilitation because he had not entered inpatient treatment and had attended fewer than the recommended four recovery meetings per week. *Id.* at 121–22. He also acknowledged that he had not completed the Psychologist's alternative recommendation of twenty-four consecutive months of negative PEth testing. *Id.* at 122–23. He testified that he delayed beginning PEth testing because each test cost $173, which he represented he could not afford while he was living on savings. *Id.* at 124. He stated that he intended to continue SMART Recovery meetings, taking Naltrexone, PEth testing, and efforts to establish healthier boundaries in his relationships. *Id.* at 123–24, 131–133, 148–49.

The Psychologist reaffirmed his diagnosis of Alcohol Use Disorder, Moderate, and his opinion that the Individual habitually or binge consumed alcohol to the point of impaired judgment. Tr. at 190–91. He testified that the Individual's two negative PEth tests constituted only a beginning toward completion of his recommendation. *Id.* at 187, 194. He testified that the Individual's 2024 IOP and aftercare did not satisfy the recommendations in his November 2025 report and that the breath and urine tests were not helpful due to the short window of time they measured for traces of alcohol consumption, particularly in light of the concurrent positive PEth result. *Id.* at 188–90. He characterized the Individual's decision to take Naltrexone as a "good move," but concluded that the Individual had not satisfied either his recommendation for rehabilitation or for reformation and that nothing presented at the hearing changed his prior opinions. *Id.* at 189–91. The Psychologist assessed the Individual's prognosis as guarded, one level above poor, because the Individual had begun making an effort and expressed motivation and a desire to change. *Id.* at 192.

V. ANALYSIS

A person who seeks access to classified information enters into a fiduciary relationship with the government predicated upon trust and confidence. This relationship transcends normal duty hours and endures throughout off-duty hours. The government places a high degree of trust and confidence in individuals to whom it grants access authorization. Decisions include, by necessity, consideration of the possible risk that the applicant may deliberately or inadvertently fail to protect or safeguard classified information. Such decisions entail a certain degree of legally permissible extrapolation as to potential, rather than actual, risk of compromise of classified information.

The issue before me is whether the Individual, at the time of the hearing, presents an unacceptable risk to national security and the common defense. I must consider all the evidence, both favorable and unfavorable, in a commonsense manner. "Any doubt concerning personnel being considered for access for national security eligibility will be resolved in favor of the national security."

Adjudicative Guidelines at ¶ 2(b). In reaching this decision, I have drawn only those conclusions that are reasonable, logical, and based on the evidence contained in the record. Because of the strong presumption against granting or restoring security clearances, I must deny access authorization if I am not convinced that the LSO's security concerns have been mitigated such that restoring the Individual's clearance is not an unacceptable risk to national security.

Conditions that may mitigate Guideline G concerns 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; or
>
> (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. None of the mitigating conditions apply here.

The June 2, 2025, incident is the second time in as many calendar years that the Individual has had an alcohol-related event. While his previous event, hospitalization and treatment, was voluntary, the June 2025 event escalated to an arrest. The Individual has not gone long enough without an alcohol-related incident to resolve doubt that this behavior will recur. Nor has he identified any unusual circumstances that would lead me to conclude that his relapse does not present risk of recurrence. Furthermore, doubt still remains about the Individual's judgment, reliability, and trustworthiness because of his dishonesty, inadequate treatment decisions, and dearth of recommended testing. It is also worth noting that the Individual had acknowledged his alcohol issues previously and yet returned to alcohol consumption multiple times. There is little to indicate that this pattern will not repeat. Mitigating condition (a) does not apply.

The Individual acknowledges that his pattern of alcohol use is maladaptive, but he has taken fewer actions to overcome the problem than he did in 2024 before his relapse. Moreover, given his dishonesty with the Psychologist regarding his alcohol consumption and his very brief period of test-verified abstinence, and the fact that his claimed period of abstinence at the time of the hearing was just 6 months beginning in December 2025, I cannot find that he has demonstrated a clear and established pattern of abstinence in accordance with treatment recommendations. Mitigating condition (b) does not apply.

The Individual has a history of treatment and relapse, so mitigating condition (c) does not apply.

The Individual has not completed a treatment program consistent with that recommended by the Psychologist after his June 2, 2025, arrest. I cannot find his 2024 IOP sufficient to mitigate the alcohol-related concerns, since those concerns have resurfaced as a result of the Individual's subsequent behavior. Additionally, as discussed in relation to mitigating condition (b), I cannot find that he has demonstrated a clear and established pattern of abstinence in accordance with treatment recommendations. Mitigating condition (d) does not apply.

For the foregoing reasons, I find that the Individual has not mitigated the Guideline G security concerns.

VI. CONCLUSION

Upon consideration of the entire record in this case, I find that there was evidence that raised concerns regarding the Individual's eligibility for access authorization under Guideline G of the Adjudicative Guidelines. I further find that the Individual has not succeeded in fully resolving those concerns. Therefore, I cannot conclude that restoring DOE access authorization to the Individual "will not endanger the common defense and security and is clearly consistent with the national interest." 10 C.F.R. § 710.7(a). Accordingly, I find that the DOE should not restore access authorization to the Individual.

This Decision may be appealed in accordance with the procedures set forth at 10 C.F.R. § 710.28.

Kristin L. Martin
Administrative Judge
Office of Hearings and Appeals