*The original of this document contains information which is subject to withholding from disclosure under 5 U.S. C. § 552. Such material has been deleted from this copy and replaced with XXXXXX's.

United States Department of Energy
Office of Hearings and Appeals

In the Matter of: Personnel Security Hearing	)		
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Filing Date: March 31, 2026	)	Case No.:	PSH-26-0083
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	)		

Issued: August 26, 2026

Administrative Judge Decision

James P. Thompson III, Administrative Judge:

This Decision concerns the eligibility of XXXXXXXXXX (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 a security clearance. In May 2025, he was arrested and charged with Driving Under the Influence (DUI). As a result, the DOE Local Security Office (LSO) requested that a DOE-consultant psychologist (DOE Psychologist) evaluate the Individual. Exhibit (Ex.) 9 at 62.[2] Based on information gathered by the LSO, including a January 2026 report (Report) produced by the DOE Psychologist, the LSO informed the Individual by letter (Notification Letter) that reliable information created substantial doubt regarding his eligibility to possess a security clearance. Ex. 1 at 6. In an attachment to the Notification Letter, entitled Summary of Security Concerns (SSC), the LSO explained that the derogatory information raised security concerns under Guideline G of the Adjudicative Guidelines. *Id.* at 5.

[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 exhibits submitted by the LSO were Bates numbered in the upper right corner of each page. This Decision will refer to the Bates numbering when citing to exhibits submitted by the LSO.

The Individual exercised his right to request an administrative review hearing pursuant to 10 C.F.R. Part 710. The Director of the Office of Hearings and Appeals (OHA) appointed me as the Administrative Judge in this matter, and I subsequently conducted an administrative review hearing. At the hearing, the Individual provided his own testimony. *See* Transcript of Hearing, OHA Case No. PSH-26-0083 (Tr.). The LSO presented the testimony of the DOE Psychologist. *Id.* The Individual submitted thirteen exhibits, marked Exhibits A through M. The LSO submitted twelve exhibits, marked Exhibits 1 through 12.

II. THE NOTIFICATION LETTER AND THE ASSOCIATED SECURITY CONCERNS

The LSO cited Guideline G (Alcohol Consumption) of the Adjudicative Guidelines as the basis for concern regarding the Individual's eligibility for a security clearance. Ex. 1. Guideline G provides that "[e]xcessive 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 "alcohol-related incidents away from work, such as driving while under the influence . . . or other incidents of concern"; "habitual or binge consumption of alcohol to the point of impaired judgment . . ."; and "[d]iagnosis by a duly qualified medical or mental health professional (e.g., physician, clinical psychologist, psychiatrist . . .) of alcohol use disorder . . . ." *Id.* at ¶ 22(a), (c)–(d). The SSC cites the following information. The DOE Psychologist's January 2026 Report concluded that the Individual met sufficient criteria under the *Diagnostic and Statistical Manual of Mental Disorders*, *Fifth Edition*, *Text Revision (DSM-V-TR)*, for a diagnosis of Alcohol Use Disorder (AUD), Severe, without adequate evidence of rehabilitation or reformation. Ex. 1 at 5. The Individual submitted to a phosphatidylethanol (PEth)[3] test in conjunction with the psychological evaluation which was positive at 1,476 ng/mL, indicating extremely high levels of alcohol consumption in the preceding thirty days.[4] *Id.* Lastly, the Individual was arrested and charged with DUI in May 2025. *Id.* The cited information justifies the LSO's invocation of Guideline G.

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 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

[3] "PEth accumulates when ethanol binds to the red blood cell membrane" and "reflects the average amount of alcohol consumed over the previous [twenty-eight to thirty] days as red blood cells degrade and enzymatic action removes PEth." Ex. 9 at 64.

[4] Ordinarily, a positive PEth test, in and of itself, would not be sufficient to establish the presence of security concerns under Guideline G. *See Personnel Security Hearing*, OHA Case No. PSH-26-0050 at 3 (2026) (indicating that the fact that a PEth test was positive did not in itself present security concerns under Guideline G). However, as discussed *infra* p.4, the extraordinarily high PEth level presented in this case is sufficient to justify the LSO's allegation that the Individual habitually or binge consumed alcohol to the point of impaired judgment.

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 his or her eligibility for an access authorization. The Part 710 regulations are drafted 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.

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

In May 2025, the Individual was arrested and charged with DUI after he consumed alcoholic beverages before deciding to operate a motor vehicle, which resulted in a collision with another vehicle in a parking lot and the Individual's subsequent attempt to leave the scene of the accident. Ex. 3 at 12; Ex. 4 at 15–17; Ex. 8 at 50. A blood draw was completed pursuant to a search warrant, and the result was 0.302%[5] blood alcohol concentration (BAC). Ex. 8 at 59. The Individual did not report his arrest to DOE because he "did not realize reporting such an incident is a requirement per DOE 472.2A." Ex. 6 at 23. He "was under the mistaken belief" that his reporting responsibilities only applied to convictions and not arrests. Ex. 7 at 44. In May 2026, the Individual pled no contest to one count of DUI, was fined $1,900, was given three hundred hours of community service, and was placed on probation for a duration of three years. Tr. at 16–17.

In January 2026, the Department of Motor Vehicles (DMV) restricted the Individual's license to only driving to and from work or DUI classes. Ex. 9 at 64; Tr. at 26–27. To have his license fully reinstated, the Individual stated that he must participate in a nine-month DUI program which began in January 2026 with weekly two-hour educational sessions and transitioned after four months into weekly group sessions led by a counselor. Tr. at 24–25. According to the Individual, the biggest thing he has learned from the DUI program is to "be aware of your surroundings" and that listening to other group members' stories has given him a sense of what alcohol does to people's lives. *Id.* at 24. The Individual was also required to attend two Victim Impact Panels as part of the DUI program, which he completed in May 2026. *Id.* at 27; *see* Ex. B at 5–6.

The DOE Psychologist conducted a psychological evaluation of the Individual in January 2026. Ex. 9 at 60. The DOE Psychologist concluded that the Individual met eight *DSM-V-TR* criteria for AUD, placing him at the "Severe" level. *Id.* at 66–68. First, the DOE Psychologist concluded that the Individual consumed larger amounts of alcohol over a longer period of time than he intended based on the evidence of the amount of alcohol the Individual drank on the evening of his arrest.

[5] The legal limit for DUI is 0.08% BAC. Ex. 8 at 52.

Id. at 67. The Individual reported that "for most of [his] adult life," his pattern of alcohol consumption has been "a couple IPAs on the weekend." Ex. 6 at 24. He also reported that "it is rare [that] [he] become[s] intoxicated" and that the last time he became intoxicated was on May 9, 2025. *Id.* at 25. However, his arrest for DUI took place the following week on May 19, 2025, when he was objectively intoxicated as evidenced by the 0.302% BAC. *Id.*

Turning to the second criterion for the AUD diagnosis, the DOE Psychologist concluded that the Individual's PEth results strongly indicate that he spends a great deal of time in activities necessary to obtain alcohol, use alcohol, or recover from his effects. *Id.* at 67. The result of the PEth test the Individual underwent following the psychological evaluation was 1,476 ng/mL which is significantly above the detection limit of 20 ng/mL. *Id.* at 78. According to a psychiatrist's interpretation of the test result, the Individual "engaged in heavy drinking" with an average daily alcohol use in the range of twelve standard drinks per day and "would likely show withdrawal symptoms if he ceased alcohol consumption for a day." *Id.* at 65, 68. The DOE Psychologist concluded that the Individual's alcohol consumption "can only be made by someone who developed tolerance in order to function." *Id.* at 68.

The DOE Psychologist also relied on the PEth test result to conclude that the Individual meets the third criterion for the AUD diagnosis, which is craving or having a strong desire to use alcohol. *Id.* "Given his pattern of heavy alcohol consumption, acute alcohol withdrawal would have started within 8-24 hours after the final drink and persisted without treatment for 3-7 days . . . [and] he likely would have shown evidence of active alcohol withdrawal during the assessment." *Id.* The DOE Psychologist concluded that cravings are "highly likely." *Id.* at 67.

Fourth, the DOE Psychologist concluded that the Individual had continued alcohol use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of alcohol. *Id.* Other than his arrest, the Individual told the DOE Psychologist that there were a couple of times he said something disrespectful to his wife when he was intoxicated. *Id.* at 65. The DOE Psychologist inferred that this behavior was more frequent than the Individual admitted because "it was something that he would continue to do despite knowing that it was a problem, and something that he did not take steps to control . . . . Tr. at 75.

Regarding the fifth AUD diagnostic criterion, the DOE Psychologist concluded that the Individual had given up an important occupational activity because of alcohol. Ex. 9 at 67. This conclusion was based on the fact that the Individual lost his security clearance due to his decision to drive under the influence. *Id.* The DOE Psychologist concluded that the sixth criterion—recurrent alcohol use in situations in which it is physically hazardous—was also satisfied by the Individual's decision to drive while intoxicated. *Id.* "His decision to drive while intoxicated . . . was hazardous" even though it "may not be recurrent." *Id.*

The DOE Psychologist also concluded that the Individual had a tolerance, which is the seventh AUD diagnostic criterion that is applicable to the Individual. *Id.* at 68. Specifically, the Individual's high PEth test result is indicative of tolerance. *Id.* Only someone who has developed a tolerance in order to function can consume alcohol at a level consistent with the PEth test result. *Id.* Lastly, the DOE Psychologist concluded that the Individual met the withdrawal AUD diagnosis criterion as manifested by alcohol being taken to relieve or avoid withdrawal symptoms. *Id.*

According to the DOE Psychologist, the Individual's PEth test suggests that he would likely show withdrawal symptoms if he ceased alcohol consumption for a day. *Id.* at 69.

The DOE Psychologist recommended that the Individual engage in twelve months of abstinence and complete an intensive outpatient program (IOP) followed by continued participation in aftercare for a period of no less than twelve months total in treatment to demonstrate adequate evidence of rehabilitation or reformation from AUD. *Id.* at 68. If the Individual chose not to participate in an IOP, then he could demonstrate rehabilitation by actively participating in Alcoholics Anonymous (AA) or a similar twelve-step recovery program for a minimum of twelve months for a minimum of three meetings per week and working the twelve-steps with a sponsor. *Id.* Irrespective of the route the Individual decided to take, the DOE Psychologist recommended that he should also demonstrate abstinence from alcohol via "negative PEth test results on a monthly basis." *Id.* If the Individual decided not to seek treatment of any kind and choose "the option of reformation," the DOE Psychologist indicated that he "needs to provide negative PEth test results for a period of [eighteen] months." *Id.*

The Individual was surprised by the Report, especially the high PEth test result. Tr. at 40. The Individual testified at the hearing that he "did consume [alcohol] excessively prior to the test" which he specified as "four or five beers a day over the course of six hours" for "probably twelve, thirteen days." *Id.* at 41. When asked whether the Individual thought he had a problem with alcohol, he contended that he did not routinely have a problem with alcohol "but there were instances, yes." *Id.* at 43. The Individual testified that he did not agree with the DOE Psychologist's AUD diagnosis because he does not think his reported drinking pattern of having two or three beers per weekend "justifies that label" and that excessive drinking is "subject to interpretation." *Id.* at 50–51. When asked why he did not tell the DOE Psychologist that he had recently been drinking more than usual, the Individual responded that he didn't know why he did not. *Id.* at 53. The Individual also disagreed with the DOE Psychologist's conclusion that he had a tolerance to alcohol because "tolerance is subjective" and "a high tolerance isn't necessarily indicative of . . . high alcohol consumption . . . ." *Id.* at 55.

After receiving the Report, the Individual began attending AA meetings. He has been attending AA meetings at least once a week since March 2026, more recently two to three times a week, and obtained a sponsor in June 2026. Ex. F at 10–39; Tr. at 28–29. The Individual speaks with his sponsor twice a week to go through the AA Big Book and discuss how to identify and cope with triggers. Tr. at 29. At the end of June 2026, the Individual enrolled in an outpatient treatment program for AUD, completed an evaluation for medication-assisted treatment, and started prescription medications to suppress cravings for alcohol. Ex. D at 8. His treatment plan is to participate in weekly AUD coaching sessions in addition to medical visits every two to four weeks. *Id.* The Individual also attends group sessions, which cover topics like coping skills and behavioral changes, once a week through the treatment program. Tr. at 32. He testified that the last time he drank alcohol was on June 27, 2026, when he stopped for "health reasons" after recognizing he has a family history of alcohol misuse. *Id.* at 42–43.

At the hearing, the Individual testified that he sought out the outpatient treatment program as another way to aid in his abstinence. *Id.* at 31. He explained that he is not required to participate in alcohol testing as part of the program, but the provider gives participants a handheld BAC device

to track their alcohol consumption. *Id.* at 33. The Individual started using the BAC device on July 5, 2026, and submitted negative BAC results for July 5, 2026, through July 12, 2026. Tr. at 31–34 (the Individual's testimony explaining the BAC device); Ex. K at 51–52 (screenshots of the BAC results). The Individual testified that he stopped taking the mediation to suppress alcohol cravings in mid-July because he "found that [he] did not need it." Tr. at 34. The Individual stated that "recognizing [his] emotions . . . taking a step back . . . and doing a little more self-reflection" has helped him deal with stressful situations without the need for alcohol. *Id.* at 47. His wife and friends are supportive of him and do not consume alcohol around him. *Id.* at 44–47. However, the Individual testified that he does not believe he is an alcoholic. *Id.* at 60. The treatment program has classes specifically addressing relapse, but he has not yet attended those classes. *Id.* at 60–61. He testified that his plan to avoid consuming alcohol is "a mindset" that involves not putting himself in situations where he's tempted to consume, learning to alter his behaviors, understanding his surroundings, improving his health, and doing healthy things. *Id.* at 61.

After hearing the Individual's testimony and reviewing the exhibits, the DOE Psychologist opined that the Individual had not completed his treatment recommendations or demonstrated rehabilitation or reformation. *Id.* at 68. The DOE Psychologist stated he would "most likely still give him an alcohol use disorder diagnosis" but he "might say it is in early remission." *Id.* at 66–67. In reaching this conclusion, the DOE Psychologist cited to the fact that the Individual had not done any PEth testing, that his treatment does not meet the minimum criteria of an IOP which would be meeting at least three times per week for a total of nine hours, and that he is reluctant to "acknowledge the extent of the problems that alcohol use has caused." *Id.* at 67–68. The DOE Psychologist further testified that the Individual's current prognosis is "guarded, because he has taken some steps to show some form of reformation, but these are in the very early stages." *Id.* at 68. He explained that his treatment recommendations were based on the severity of the Individual's AUD and clarified that the recommendation would be the same for both moderate AUD, meeting four to five criteria, and severe AUD, meeting six or more criteria. *Id.* at 77–81.Therefore, even if the AUD criteria the Individual disputed were not present, the Individual would still meet at least four criteria and the DOE Psychologist's conclusions regarding appropriate treatment for the Individual would have been the same. *Id.* at 68, 77–81.

V. ANALYSIS

A. Guideline G Considerations

Conditions that can mitigate security concerns based on alcohol consumption include the following:

(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.

I conclude that the Individual has not put forward sufficient evidence to resolve the Guideline G security concerns. First, I find that ¶ 23(a) does not apply because I do not conclude that the passage of time, frequency of the conduct, or circumstances are such that the concerning alcohol-related conduct is unlikely to recur. Given the Individual's high PEth test result indicating greater alcohol consumption than the Individual self-reported, diagnosis of AUD Severe, and the fact that the Individual did not stop consuming alcohol after he was arrested for DUI until over a year later, I do not conclude that the passage of approximately one month since the Individual's last drink mitigates the concern. Furthermore, the Individual did not present any unusual circumstances for his DUI or alcohol use.

Turning to the factors outlined in ¶ 23(b), the Individual has not acknowledged his pattern of maladaptive alcohol use. The Individual rejected the DOE Psychologist's AUD diagnosis because he thinks it is subjective, but the DOE Psychologist thoroughly explained how he reached his conclusion in both the Report and his testimony. The Individual does not believe he has an alcohol problem and yet he sought out a treatment program to assist him in maintaining abstinence. The Individual has provided evidence of actions taken to overcome his alcohol problem, but he has not demonstrated a clear and established pattern of modified consumption or abstinence because his last drink was only one month prior to the hearing and there are no test results prior to his last drink to demonstrate modified consumption.

Turning to ¶ 23(c), I conclude that it does not apply to resolve the concerns because while the Individual is participating in a treatment program, he has not demonstrated satisfactory progress. The Individual had only completed one month of treatment at the time of the hearing and did not provide any documentation regarding his compliance with the program.

Lastly, ¶ 23(d) does not apply because the Individual has not yet successfully completed a treatment program. Furthermore, the Individual has not demonstrated a clear and established pattern of modified consumption or abstinence.

VI. CONCLUSION

In the above analysis, I found that there was sufficient derogatory information in the possession of

the DOE that raised security concerns under Guideline G of the Adjudicative Guidelines. After considering all of the relevant information, favorable and unfavorable, in a comprehensive, common-sense manner, including weighing all of the testimony and other evidence presented at the hearing, I find that the Individual has not brought forth sufficient evidence to resolve the security concerns. Accordingly, I have determined 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.

James P. Thompson III
Administrative Judge
Office of Hearings and Appeals