*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: July 20, 2026	)	Case No.: PSH-26-0153
	)	
	)	

Issued: November 10, 2026

Administrative Judge Decision

Phillip Harmonick, Administrative Judge:

This Decision concerns the eligibility of XXXXXXXXXXX (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

On July 22, 2025, the local security office (LSO) received a Personnel Security Information Report (PSIR) from a DOE contractor that employs the Individual informing the LSO that the Individual, who was then an applicant for DOE access authorization, had been suspended without pay and issued a "Last Chance Warning" for sleeping on duty. Exhibit (Ex.) 8 at 35.[2] In August or September of 2025, the Individual was granted access authorization. Transcript of Hearing, OHA Case No. PSH-26-0153 (Tr.) at 56. On October 13, 2025, the Individual submitted a PSIR to the LSO in which he disclosed that he had been arrested and charged with Driving Under the Influence (DUI). Ex. 7.

[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 LSO submitted its exhibits in a single PDF. This Decision cites to exhibits by reference to the exhibit number and the pages in the order in which they appear in the PDF without regard to their internal pagination.

The LSO subsequently issued the Individual a letter of interrogatory (LOI) concerning the aforementioned events and the Individual's alcohol consumption practices. Ex. 9. In his response to the LOI, the Individual admitted that at "special events" he typically consumed seven to nine sixteen-ounce beers. *Id.* at 40.

The LSO referred the Individual for a psychological evaluation with a DOE-contracted psychologist (DOE Psychologist) which was conducted in April 2026. Ex. 11 at 54. During a clinical interview with the DOE Psychologist, the Individual admitted that his sleeping on the job which led to his July 2025 suspension from work was due to being hungover. *Id.* at 56. The DOE Psychologist subsequently issued a report of the evaluation (Report) in which she characterized the Individual's self-reported alcohol consumption as "episodic binge-level" and opined that the Individual met sufficient diagnostic criteria under the *Diagnostic and Statistical Manual of Mental Disorders, 5th Edition – Text Revision* (*DSM-5-TR*) for a diagnosis of Alcohol Use Disorder (AUD), Moderate, in Early Remission. *Id.* at 60–61.

The LSO issued the Individual a Notification Letter advising him that it possessed reliable information that created substantial doubt regarding his eligibility for access authorization. Ex. 1 at 6–8. In a Summary of Security Concerns (SSC) attached to the letter, the LSO explained that the derogatory information raised security concerns under Guideline G of the Adjudicative Guidelines. *Id.* at 5.

The Individual exercised his right to request an administrative review hearing pursuant to 10 C.F.R. Part 710. Ex. 2. The Director of the Office of Hearings and Appeals (OHA) appointed me as the Administrative Judge, and I conducted an administrative hearing on October 15, 2026. The LSO submitted fourteen exhibits (Ex. 1–14). The Individual offered ten exhibits (Ex. A–J). The Individual testified on his own behalf and offered the testimony of his foreman (Foreman). Tr. at 3, 10, 21. The LSO offered the testimony of the DOE Psychologist. *Id.* at 3, 64.

II. THE NOTIFICATION LETTER AND THE ASSOCIATED SECURITY CONCERNS

The LSO cited Guideline G (Alcohol Consumption) of the Adjudicative Guidelines as the basis for its substantial doubt regarding the Individual's eligibility for access authorization. Ex. 1 at 5. "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. The SSC cited the Individual having been suspended from work after falling asleep on duty due to being hungover and having been arrested and charged with DUI, alleged that the Individual engaged in binge consumption of alcohol to the point of impaired judgment, and invoked the opinion of the DOE Psychologist that the Individual met sufficient diagnostic criteria for a diagnosis of AUD, Moderate, in Early Remission, under the *DSM-5-TR*. Ex. 1 at 5. The LSO's allegations that the Individual engaged in alcohol-related incidents both away from and at work, binge consumed alcohol to the point of impaired judgment, and was diagnosed with AUD by a duly qualified mental health professional justify its invocation of Guideline G. Adjudicative Guidelines at ¶ 22(a)–(d).

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 Dep't 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).

An 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). An individual is afforded a full opportunity to present evidence supporting his or her 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

A. Individual's History of Excessive Alcohol Consumption

The Individual began regularly binge consuming alcohol at age seventeen, consuming more than fourteen standard alcoholic drinks per sitting on some occasions.[3] Ex. 11 at 56; *see also id.* at 65 (DOE Psychologist defining "binge drinking" as consumption of five or more alcoholic drinks in about two hours based on a definition from the National Institute on Alcohol Abuse and Alcoholism). The Individual later experienced periods of alcohol abstinence and moderate alcohol consumption, but at age twenty-one he resumed consuming alcohol excessively. Ex. 11 at 56. The Individual attributed his excessive alcohol use to an effort to control anxiety. *Id.* From age twenty-one until his 2025 workplace discipline, the Individual experienced financial strain due to alcohol use, sometimes borrowing money to spend on alcohol, decreased time spent on hobbies to attend gatherings where he could obtain alcohol, suffered physical effects of alcohol use (e.g., inflammation), and experienced interpersonal conflict with friends and family due to his efforts to borrow money and visible intoxication when around them. *Id.*

[3] A standard alcoholic drink is a twelve-ounce beer with 5% alcohol by volume (ABV), a five-ounce glass of wine with 12% ABV, or a one and one-half ounce shot of liquor with 40% ABV. NATIONAL INSTITUTE ON ALCOHOL ABUSE & ALCOHOLISM, *What Is A Standard Drink?*, (Dec. 2025), available at www.niaaa.nih.gov/alcohols-effects-health/what-standard-drink (last accessed Oct. 8, 2026); *see also* Ex. 11 at 65 (incorporating the definition by reference into the Report). The Individual reported regularly consuming sixteen-ounce beers. Ex. 11 at 56. Accordingly, although the Individual reported drinking up to eleven beers per sitting, those beers constituted more than fourteen standard drinks because they were sixteen-ounce beverages rather than standard twelve-ounce beverages.

B. Individual's Workplace Discipline, Failure to Reduce His Alcohol Consumption, and DUI

On July 13, 2025, the Individual was found sleeping on three separate occasions while on duty. Ex. 8 at 35. According to the Individual, he fell asleep at work due to being hungover from consuming alcohol the previous night.[4] Ex. 11 at 56. The DOE contractor that employs the Individual suspended him without pay for three days and issued him a "Last Chance Warning" indicating that "any further issues of this or a similar nature will result in termination . . . ." Ex. 8 at 35.

Following his suspension, a supervisor advised him to stop consuming alcohol but the Individual did not do so. Ex. 11 at 56. The Individual attempted to reduce his alcohol consumption after multiple friends raised concerns to him about his behavior, and did moderate his drinking in August 2025, but resumed excessive drinking in September 2025 to cope with negative emotions from the death of a friend. *Id.*

On the night of October 10, 2025, the Individual went to a venue where alcohol is served "for a couple of drinks after a harsh break-up." Ex. 9 at 38. The Individual consumed alcohol, the amount of which he cannot recall, blacked out, and crashed his vehicle into an electrical pole within a short distance of the venue in the early morning hours of October 11, 2025, when attempting to leave. *Id.*; Ex. 10 at 48; Tr. at 22. The Individual failed a field sobriety test administered by officers who responded to the scene, struggling to stand at some points, and was arrested and transported to a law enforcement facility. Ex. 10 at 49–50. At the law enforcement facility, the Individual submitted to a breath test which estimated his blood alcohol content at .23. *Id.* at 50.

The Individual was charged with DUI and pleaded guilty. Ex. 11 at 55. On November 5, 2025, he was court-ordered to abstain from alcohol. *Id.* The Individual was subsequently sentenced to a term of probation beginning in February 2026, pursuant to which he was ordered to pay a fine, complete twenty-four hours of community service, abstain from alcohol, and submit to alcohol testing. *Id.*; *see also* Ex. I at 3 (reflecting that the Individual completed court-ordered community service and paid all required fines). The Individual's employer also placed him in a Fitness For Duty (FFD) program pursuant to which he was required to undergo alcohol testing. Ex. 11 at 56. The first FFD alcohol test – a Phosphatidylethanol (PEth)[5] test conducted on November 3, 2025 – was positive at 419 ng/mL. Ex. A. The Individual underwent FFD PEth tests again on February 25, 2026, and April 22, 2026, both of which were negative for traces of alcohol. Ex. B; Ex. C. At the direction of the FFD program, the Individual enrolled in an alcohol education class through his

[4] Despite having admitted to the DOE Psychologist that these events transpired because he was hungover, the Individual denied at the hearing that he was "aware that it was . . . alcohol related" until "a few months ago" and suggested that a supervisor was "getting [him] in trouble a whole lot for things [he] really didn't tell [the supervisor] or do." Tr. at 56–57. When confronted with the discrepancy between this account and the information in the Report, the Individual admitted that he had told the DOE Psychologist that he was sleeping on the job due to being hungover. *Id.* at 57. The Individual's attempt to minimize his responsibility for this alcohol-related incident reflects poorly on his credibility, and I take this into account in assessing his numerous uncorroborated claims at the hearing concerning treatment. *See infra* p. 5.

[5] PEth is a biomarker for alcohol consumption that can be detected in blood for approximately one month following moderate or greater episodes of alcohol consumption. Ex. 11 at 60, 88.

employer's employee assistance program (EAP) which he completed in March 2026. Ex. I; Tr. at 39–40 (testifying that he was directed to attend the class because the first PEth test conducted in November 2025 was "really high"). The Individual was also directed by the FFD program to receive counseling but did not do so. Tr. at 40.

C. Evaluation by the DOE Psychologist

The Individual met with the DOE Psychologist for the psychological evaluation on April 24, 2026. Ex. 11 at 54. The Individual provided a history of his alcohol consumption and alcohol-related incidents consistent with that recited above. *Id.* at 54–57. The Individual told the DOE Psychologist that he had abstained from alcohol since late October 2025, and the results of a PEth test conducted on the date of the clinical interview, which was negative for traces of alcohol, corroborated the Individual's claimed abstinence from alcohol. *Id.* at 60, 88.

The DOE Psychologist issued the Report on May 6, 2026. *Id.* at 62. Therein, she opined that the Individual met five *DSM-5-TR* diagnostic criteria for AUD based on his admitted inability to moderate his alcohol consumption following his suspension from work, failure to fulfill occupational responsibilities as a result of alcohol consumption, use of alcohol despite interpersonal problems caused by his alcohol use, reduction of time spent in social and recreational activities due to alcohol, and use of alcohol in situations where it was physically hazardous as demonstrated by his DUI. *Id.* at 61. Accordingly, she concluded that he met sufficient criteria for a diagnosis of AUD, Moderate. *Id.*; *see also id.* at 63 (listing the diagnostic criteria from the *DSM-5-TR* and a passage of the *DSM-5-TR* indicating that the presence of four to five criteria corresponds to AUD of "Moderate" severity).

The DOE Psychologist recommended that the Individual could demonstrate rehabilitation from his AUD by demonstrating at least twelve months of abstinence from alcohol through PEth testing, completing an intensive outpatient program (IOP) for alcohol treatment, participating in Alcoholics Anonymous (AA) or another peer support group for at least twelve months, including working the steps with a sponsor, and receiving individual counseling to address his anxiety and develop coping strategies other than the use of alcohol. *Id.* at 61–62.

D. Individual's Recent Efforts to Address His AUD

The Individual did not comply with the DOE Psychologist's treatment recommendations, nor did he pursue counseling as recommended by the FFD program, citing a lack of insurance coverage to pay for treatment and having not read some of the DOE Psychologist's recommendations in the Report. Tr. at 40, 47, 62–63. He testified that he had enrolled in an abstinence support program through his employer's EAP in August 2026 and was participating in the program at the time of the hearing but provided no evidence to corroborate this assertion. *Id.* at 41–42. He also testified that he was participating in counseling provided by an "AI counselor" but provided no evidence to corroborate this claim either. *Id.* at 42–44 (indicating that the service had helped him to achieve "clarity" but that he did not "know how to describe it"). He also claimed to have attended AA meetings from January 2026 to March 2026 but, again, provided no evidence to corroborate his claim. *Id.* at 45–46. In light of evasive testimony from the Individual that called his credibility into doubt, I do not credit his uncorroborated claims as to treatment activities. *See supra* note 4

(reflecting the Individual's attempt to deflect responsibility for alcohol-related infractions in the workplace); *see also infra* note 6 (reflecting inconsistent and dubious testimony from the Individual concerning his last alcohol consumption).

The Individual testified that he had not consumed alcohol since October 2025,[6] and provided negative PEth test results from testing conducted on July 15, 2026, August 27, 2026, and September 21, 2026, in addition to that previously conducted through the FFD program and in connection with the evaluation by the DOE Psychologist.[7] Tr. at 38, 59; Ex. E; Ex. F; Ex. G. The Individual testified that he had been happier, had higher self-esteem, and devoted more time to hobbies since he began abstaining from alcohol. Tr. at 51–52; *see also id.* at 16 (Foreman testifying that that Individual appeared less tired at work than before his arrest for DUI and that the Individual's work ethic had improved). The Individual indicated that he intended to resume consuming alcohol "socially," and in moderation, after completing his employer's FFD program. *Id.* at 53.

The DOE Psychologist testified that the Individual had not fully complied with her recommendations and had not demonstrated rehabilitation. *Id.* at 67–69. She opined that the Individual's prognosis was intermediate[8] considering "the lack of treatment and follow through" which, combined with his intention to return to social drinking, placed him risk of a return to problematic alcohol consumption. *Id.* at 70–72.

V. ANALYSIS

Guideline G

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;

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[6] The Individual initially testified that he last consumed alcohol on October 20, 2025, when he claimed to have had one beer. Tr. at 38. Upon further questioning, he admitted that he "maybe" consumed alcohol at a Halloween party on October 31, 2025. *Id.* at 59. While I do not have the benefit of a medical doctor's interpretation of the Individual's November 2025 PEth test, I find it highly suspect that he would have produced a result of 419 ng/mL, over twenty times the detection level of 20 ng/mL, if he only consumed a small number of drinks on one or two occasions between his October 10, 2025, DUI arrest and the November 3, 2025, PEth test.

[7] The Individual also provided a document dated May 14, 2026, which referenced the Individual having been alcohol-tested on that date, but which contained no test results. Ex. D.

[8] The DOE Psychologist offers prognoses on a scale of poor ("not doing anything that we've asked from them"), good (a "middle ground" in which the individual has "done some things, but there's been a little bit of less commitment to change"), and excellent ("they've kind of done everything"). Tr. at 71. Although she testified that the Individual's prognosis was "good" on her personal scale, she agreed with the characterization of the prognosis as "intermediate" and indicated that she could not confidently opine that the Individual would not return to maladaptive alcohol use. *Id.* at 71–73. Considering the broad nature of potential outcomes encompassed by the DOE Psychologist's definition of a "good" prognosis and endorsement of her prognosis of "good" as an "intermediate" one, I conclude that her prognosis of "good" is less positive, and more indeterminate, than one would infer from the ordinary meaning of the word "good."

(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.

The Individual has a lengthy history of engaging in routine binge consumption of alcohol under ordinary circumstances. While he claimed at the hearing to have abstained from alcohol for nearly one year, I do not credit this claim considering my doubts as to the Individual's credibility and the significant gaps in his alcohol testing. Moreover, even if I credited him with one year of abstinence, I would still find that too short of a period of time to resolve the security concerns on the basis of the passage of time alone considering his history of alcohol misuse. Accordingly, I find the first mitigating condition inapplicable to the facts of this case. *Id.* at ¶ 23(a).

The second mitigating condition is inapplicable because the Individual has not taken sufficient action to address his maladaptive alcohol use and has not brought forth sufficient evidence to corroborate his claimed abstinence from alcohol. He has not complied with the DOE Psychologist's or FFD program's recommendations in full and, considering aspects of his testimony that undermine his credibility, I harbor doubts as to the extent to which he has engaged in all of the uncorroborated activities, such as AA participation, he claimed in his hearing testimony. Moreover, the gaps in his alcohol testing record preclude me from finding that he has demonstrated an established pattern of abstinence. Accordingly, the second mitigating condition is inapplicable. *Id.* at ¶ 23(b).

The third and fourth mitigating conditions are inapplicable because the Individual has not participated in alcohol treatment consistent with that recommended to him, and in any case is not making satisfactory progress considering the DOE Psychologist's less than entirely favorable prognosis, and has not demonstrated a clear and established pattern of abstinence because of the gaps in his PEth testing. *Id.* at ¶ 23(c)–(d).

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

VI. CONCLUSION

In the above analysis, I found that there was sufficient derogatory information in the possession of DOE to raise security concerns under Guideline G of the Adjudicative Guidelines. After considering all relevant information, favorable and unfavorable, in a comprehensive, common-sense manner, including weighing all testimony and other evidence presented at the hearing, I find that the Individual has not brought forth sufficient evidence to resolve the security concerns asserted by the LSO. 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.

Phillip Harmonick
Administrative Judge
Office of Hearings and Appeals