

A photograph of a dense forest with tall, thin trees and lush green undergrowth. A wooden boardwalk made of planks leads from the foreground into the forest, curving slightly to the right. Sunlight filters through the trees, creating a warm, golden glow. The boardwalk has some text engraved on it, including names and dates.

Behavioral Health Resource Networks Handbook: ***A Guide for BHRN Partners***

Table of Contents

Welcome!	4
Purpose and Scope.....	5
BHRN Program Overview.....	5
BHRN Expectations & Support	6
Grant Administrator Support.....	7
BHRN Meetings.....	7
Budget Adjustments.....	8
Recovery of Overpayments.....	8
BHRNs Services	9
Grant Requirements and Milestones	11
Certificate of Insurance (COI)	11
Electronic Fund Transfer (EFT)	11
Policies and Procedures	12
Reporting	12
Real Property Purchase, Renovation, or Improvement	12
Secretary of State (SOS) Business Registration	12
Vehicle Purchases	13
Comment/Complaint Flyers	13
Resources	14
Grant Administrator Contact Information.....	14
BHRN Program and OAC Webpages	14
Oregon Government Ethics Commission (OGEC).....	14
Oregon Administrative Rules (OAR) Chapter 944	15
Oregon Revised Statute (ORS) 430.383-394	15
Save Lives Oregon: Harm Reduction Clearinghouse.....	15
Appendix 1.....	17

Appendix 2.....	19
Terminology.....	19
Service Definitions	20
Roles and Responsibilities	22
Appendix 3.....	23
Frequently Asked Questions (FAQs):.....	23



Welcome!

The Oregon Health Authority (OHA) and the Oversight and Accountability Council (OAC) welcome all new and returning Behavioral Health Resource Network (BHRN) Partners. We are excited to continue this first-in-the-nation health-based approach that expands access to substance use and recovery services in every Oregon county. These services provided to Oregonians by you, our BHRN Partners, have made a huge impact across local communities.

While drug possession is again a crime, the funding M110 established for BHRNs remains intact. The OHA BHRN/BHRN Program staff will continue to support your work and collaboration.

You have unique perspectives, knowledge, and skills to reach our most vulnerable and marginalized populations bringing hope, healing, and better health. OHA and the OAC are here to support your efforts. Your primary point of contact at OHA will be your assigned Grant Administrator (GA).

In partnership,



Abbey Stamp, MSW, LCSW
Executive Director, Measure 110
Behavioral Health Resource Networks
Oregon Health Authority

Purpose and Scope

This handbook has been created to help Behavioral Health Resource Network (BHRN) Partners navigate the grant and answer questions. This four (4) year grant has various requirements. It is the responsibility of each provider to read and understand their grant agreement, if you have questions, you can email us at BHRN.Grants@odhsoha.oregon.gov.

Please note that this handbook is provided for informational purposes only and does not create any contractual or legally binding obligations. In contrast, the grant agreement is a legally binding document that governs the rights and responsibilities of the parties.

In the event of any conflict or inconsistency between this handbook and the grant agreement, the terms of the grant agreement are controlling.

BHRN Program Overview

Congratulations, your organization has made it through the application review and funding process! Your organization is now part of the Behavioral Health Resource Networks (BHRNs) and will be providing one or more services outlined in [Oregon Administrative Rule \(OAR\) Chapter 944](#) and [ORS 430.389](#) and specified in your organization's grant agreement.

BHRNs are community-driven networks and are often the first contact for persons seeking help with substance use issues. Usually, there is more than one organization/partner included and collaboration among BHRN Partners is key. The Oversight and Accountability Council (OAC) encourages a landscape of effective collaborative networks to foster outreach and increased delivery of low barrier services to Oregonians.

The Oregon Health Authority (OHA) assigns Grant Administrators (GA's) to each County's BHRN and unique BHRN Partner(s) to assure all obligations are met. To support your work, Grant Administrators will visit your communities to better understand each community's

strengths and needs. Grant Administrators will also recognize and investigate emerging disputes and/or other risks, unique requirements, unusual situations, or other issues that arise in connection with the grant.

BHRN Expectations & Support

The new 2025-29 grant cycle establishes one BHRN in each county. The grant agreement requires all BHRN Partners to:

- Submit quarterly expenditure and data reports in a timely manner (see grant milestone document),
- Use evidence-based practices or Tribal-based practices (or both) to meet the needs of the community,
- Ensure that underserved populations can access intersectional, culturally, and linguistically specific and responsive services within 48 hours of seeking services.

The OAC and OHA expect all BHRN Partners to maintain good relationships with each other and build a network of mutual support that strengthens the community and amplifies the resources of each BHRN Partner. BHRN Partners in each county are encouraged to meet (at least) quarterly and to develop and implement shared strategies that:

- Establish coordinated referral mechanisms and structures,
- Conduct community needs analysis and set clear goals,
- Develop and implement outreach strategy plans,
- Coordinate events and community engagement activities,
- Create and facilitate prevention education opportunities and discussions,
- Develop time-bound conflict resolution strategies,
- Ensure consistency and cultural responsiveness in provision of services, and/or resource sharing.

Grant Administrator Support

Grant Administrators will offer technical assistance, facilitating network meetings, mobilizing resources, and provide strategic guidance. Support includes:

- **High Touch Support:** Personalized assistance, internal milestone tracking, and outcome analysis. This ensures alignment and addresses issues promptly and proactively.
- **Facilitation:** Support in building agendas and managing regular cadences of meetings, work groups, and peer learning sessions to foster communications, best practices, lessons learned, knowledge sharing, and collaboration between partners. Sharing success stories and celebrating achievements should be standing items of interest on every agenda.
- **Resource Mobilization:** Support leveraging shared resources to meet the objectives of the community and partners – examples include goods, services, workforce, and/or subject matter expertise.
- **Strategic Guidance:** Support Partners to clarify goals, align visions, and develop action plans by providing input and expertise.
- **Technical Assistance:** Supporting Partners as they navigate program requirements, rules, policy, and reporting.
- **Network Opportunities:** Expanding connections, opportunities, and resources through industry specialists, state experts, funders, other statewide partners, and/or similar networks.
- **Advocacy Support:** Encourage and inform Partners on opportunities to influence BHRN policies, practices, or systems to enhance reach, impact, and sustain networks.

BHRN Meetings

BHRN meetings will be supported by the Grant Administrator for the county. The GA's role is to facilitate collaboration, shared problem solving, and to determine the region's overall needs and status.

Here are some sample agenda topics for BHRN meetings:

- Updates from OHA.
- A presentation or update from a Partner about their current projects.
- A discussion of collaboration with other entities within or outside of the BHRN.
- Requests for resources for Partners that are under-staffed or under-resourced.
- Offers of resources available from Partners who have them.
- An open floor for discussion of challenges, opportunities, and successes.
- Announcements of future resource fairs, opportunities for tabling and promotion, etc.
- Development of technical assistance requests, like resources for Medicaid certification.

There will be times when changes are necessary for a BHRN Partner. Through discussion with their assigned Grant Administrator, those changes can be made within specific guidelines. The following is a possible list of changes that can be made:

Budget Adjustments

OHA and OAC understand that things can change over time. It might be necessary for a BHRN Partner(s) to submit budget adjustments to their assigned GA. BHRN Partners can revise their budgets, provided they receive advanced written approval from OHA. Budget adjustments should not alter the scope or intent of the approved activities within any funded service area.

Recovery of Overpayments

Under the grant agreement, Exhibit B, Section 5., BHRN Partners must return any funds disbursed to them under the grant agreement that are expended in violation or contravention of one or more of the provisions of the grant agreement (referred to as "Misexpended Funds" in the grant agreement) or that remain unexpended on

termination or expiration of the grant agreement (referred to as “Unexpended Funds” in the grant agreement).

BHRNs Services

A BHRN is a collection of entities within a county that individually or jointly provide the service areas summarized below and specified in their respective grant agreements. To ensure your organization meets the statutory definition, please contact your Grant Administrator.

- **Screenings** can be the first step in connecting and assisting those with substance use with services. They will determine if a person needs acute care or referral to additional support and services. Having screening services either in office or through a phone line service with trained staff available 24 hours a day, seven (7) days a week, every calendar day of the year, along with weekends and holidays can help those who need it when they are ready. For further information and applicable Oregon Administrative (OAR) rules you can click on this [link](#).
- **Comprehensive behavioral health needs assessments** must include a substance use disorder screening to determine if an individual has been appropriately diagnosed with a substance use disorder or other co-occurring disorders including but not limited to gambling disorders and mental health disorders. Case management services must also be provided to assist individuals to connect to and gain access to needed services and supports outlined in an individual intervention plan. Assessment services must consider the need for mobile or virtual outreach services to clients and increasing public awareness of BHRN services. ([OAR 944-010-0040](#) and ORS 430.398(2)(e)(B), C) and (E))

Ongoing peer counseling and support is the frontline connection to persons with substance use. BHRN Partners connect and offer hope and outreach to marginalized communities that can benefit from this service. Developing clear engagement and outreach strategies is essential to assisting

persons in need of social support. For further information and applicable Oregon Administrative (OAR) rules you can click on this [link](#).

Harm reduction services can include (but are not limited to) providing naloxone, sterile syringes, wound care, along with information and education about services. These services must be low-barrier and must reduce the negative individual and public health outcomes of substance use and substance related harm. For further information and applicable Oregon Administrative (OAR) rules you can click on this [link](#).

Low-barrier Substance Use Treatment is an individualized treatment that is offered free of charge, trauma informed regardless of use, and without stigma. This can be in various forms such as Medication Assisted Treatment (MAT), counseling and education, and interim referrals. It is essential that these services address any barriers an individual might have such as transportation to access treatment and minimize or eliminate travel between providers. Developing an individualized plan and goals can provide a unique trajectory for each person navigate their health. For further information and applicable Oregon Administrative (OAR) rules you can click on this [link](#).

Transitional and supportive housing¹ for individuals with a substance use disorder must participate in an assessment prior to providing housing. The grantee providing transitional and supportive housing must provide at least one of the following types of transitional or supportive housing based on an individual's assessment, to service individuals at all points on the substance use continuum, and across the gender spectrum, for those who are transgender, gender-nonconforming, and intersex: (a) emergency housing; (b) family housing; (c) permanent housing; (d) recovery housing; (e) supportive

¹ Under the 2025-29 grant agreement funding is not available for the purchase, construction, or renovation of real property or for making capital improvements.

housing; and (f) transitional housing. For further information and applicable Oregon Administrative (OAR) rules you can click on this [link](#).

Grant Requirements and Milestones

Throughout the grant cycle, BHRN Partners are required to provide information, including programmatic data and fiscal reporting requirements, on a quarterly basis. Templates, technical assistance, and data capture tools are located on the far-right hand side of the BHRN Resources webpage under the “For BHRNs” header, found [here](#).

The link to the grant milestone timeline [schedule](#) can also be found in Appendix 1 of this handbook.

Certificate of Insurance (COI)

Exhibit C of the grant agreement requires all grantees must maintain a Certificate of Insurance (COI). A COI must be submitted to OHA prior to conducting any activities under the grant agreement. Grantees are required to update their COI prior to the expiration date. If there has been no communication or new COI submitted to OHA, your grant administrator will request information on the status of the insurance.

Electronic Fund Transfer (EFT)

To receive grant funding, grantees must enroll in Electronic Funds Transfer (EFT), also known as direct deposit. To enroll, grantees must submit a completed EFT Direct Deposit Authorization form found at this [link](#). If grantee already has an EFT set up for any type of payment from the Oregon Health Authority (OHA) or OAC, grantees should not send in another form. Grantees may contact the EFT Coordinator at (503) 945-6872 for questions. Due to the confidential nature of the bank account information, grantees should only provide bank information to the EFT Coordinator. There is a disbursement schedule in the grant agreement, Exhibit A, Part 2 (Payment and Financial Reporting).

Policies and Procedures

All BHRN Partners must maintain, implement, and formalize organizational policies and procedures that detail how it will operate and offer services. For more information, see [OAR 944-010-0020\(1\)\(b\)](#).

Reporting

Throughout the four (4) year grant, all BHRN Partners are required to submit quarterly reports on expenditures by service areas. This is the primary method for verifying compliance under the grant agreement.

Beginning on July 1, 2025, all BHRN Partners will enter their expenditure and service area data through Submittable, BHRN Partner grant software. Each BHRN Partner's contact and budget information will be uploaded to Submittable to facilitate your reporting. Training will be provided to all BHRN Partners to learn this new system.

Beginning in October 2025, BHRN Partners will begin to input client data into the Resilience Outcomes Analysis and Data Submission (ROADS). Before October 2025, training will be available to help providers navigate this new data collection system.

All data will be submitted by BHRN Partners within 30 days of the end of a quarter (for example, Quarter 1: July 1 to September 30, 2025 must be reported no later than November 1, 2025).

Real Property Purchase, Renovation, or Improvement

OAC is not currently funding for any capital improvements. This does not include rent or lease payments.

Secretary of State (SOS) Business Registration

All grantees are required to maintain an up-to-date business registration with the Secretary of State (SOS), Corporate Division.

Click this [link](#) for more information. If the business registration has expired, your grant can be considered out of compliance.

Vehicle Purchases

Grantees can budget to purchase a vehicle. Grantees will need to provide the OHA a security interest in all of grantee's rights, title, and interest in the vehicle. Grantee must forward by email a copy of the title application showing the Oregon Health Authority, Behavioral Health Division as the security interest holder to OHA within five (5) calendar days of the acquisition from the seller.

Vehicles purchased using grant funds must be used to provide the services set forth in the grant agreement. Dedicated use must continue for the useful life of the vehicle or five years whichever is less.

Grantee shall submit a copy of the title application to OHA via email at HSD.Contracts@odhsoha.oregon.gov, with a cc to BHRN.Grants@odhsoha.oregon.gov.

File Security Interest Holder information as follows:

Oregon Health Authority
Behavioral Health Division
500 Summer Street NE, E86
Salem, OR 97302

Please see Exhibit A, Part 3, Section 3 of the grant agreement for the steps for removal of the lien.

Comment/Complaint Flyers

OHA and the OAC have developed a way for the public and/or providers can submit feedback. OHA and the OAC would like to help foster feedback. It is important for BHRN Partners to post flyers about the Comment/Complaint form that has an easy access QR code. These flyers come in 12 different languages to assist our BHRN Partners. To access these flyers, please click [here](#).

Comments and/or complaints are kept confidential unless otherwise noted on the submission document. When a comment and/or a complaint is submitted the OHA BHRN Program Team is notified takes necessary action.

Resources

Grant Administrator Contact Information

The following is a list of the Grant Administrators. As the OHA BHRN team grows and changes, please look for updates.

Liz Fernley	(503) 689-4596
Sydney Gilbert	(503) 979-4341
Elizabeth Padilla	(503) 801-5958
Katie Reichard	(503) 979-4219
Tim Scott	(503) 551-5487
Ariana White	(503) 945-5772

Other inquiries should be sent to BHRN.Grants@odhsoha.oregon.gov. inbox.

BHRN Program and OAC Webpages

BHRN Program has a [webpage](#) for further information and meeting dates/times.

Oregon Government Ethics Commission (OGEC)

The Oregon Government Ethics Commission ([OGEC](#)) will impartially and effectively administer and enforce Oregon's Government Ethics Laws for the benefit of Oregon's citizens. The Commission will emphasize education in achieving its mission.

Please visit the [website](#) for further information.

[Oregon Administrative Rules \(OAR\) Chapter 944](#)

These rules govern the implementation of M110 and Senate Bill (SB) 755. As of the date of this handbook, OAR 944 rules are being revised/updated. Please refer to the Oregon Secretary of State [website](#) where administrative rulebooks are maintained.

[Oregon Revised Statute \(ORS\) 430.383-394](#)

The purpose of the Drug Addiction Treatment and Recovery Act of 2020 is to make screening, health assessment, treatment, and recovery services for drug addiction available to all those who need and want access to those services and to adopt a health approach to drug addiction. Here is the [link](#) to the ORS.

[Save Lives Oregon: Harm Reduction Clearinghouse](#)

[Save Lives Oregon](#) began in 2020, when the COVID-19 pandemic heightened the overdose crisis and left many families, neighborhoods and communities struggling. In response, we launched the Harm Reduction Clearinghouse to provide more life-saving supplies such as naloxone to organizations and tribal communities on the front lines of harm reduction.

Save Lives Oregon Harm Reduction Clearinghouse is one project of the Save Lives Oregon initiative, which is focused on increasing equitable access to harm reduction information, education, technical assistance, and supplies to communities experiencing high overdose rates.

The Harm Reduction Clearinghouse provides no-cost supplies such as life-saving naloxone, infection prevention and wound care kits to agencies that directly distribute them to people at risk of overdose and infections related to substance use.

Organizations that receive supplies through the Harm Reduction Clearinghouse directly distribute supplies to people who are at risk of overdose or people currently using drugs. Participating organizations include health clinics, community-based organizations, Tribal service

providers, county public health agencies, EMS, firefighters, sheriffs, police jails, prisons, and parole and probation officers.

BHRN Partners would also qualify as directly distributing supplies to people who are at risk of overdose or people currently using drugs. You do not need to be providing harm reduction services, but any related services under BHRN Program.

How can we have a lower price? Through the State's Division of Administrative Services (DAS) bulk purchasing agreement with a national group purchasing organization for governments, the Harm Reduction Clearinghouse purchases harm reduction supplies, such as naloxone, at a lower price.

Go to the [Save Lives Oregon Harm Reduction Clearinghouse](#) and apply to see if your organization qualifies for these life-saving products at no cost.

Appendix 1



Oregon Health Authority
Behavioral Health Division



Behavioral Health Resource Network (BHRN) Partner Milestone Schedule Program Years 2025-2029

As a recipient of M110 funds, BHRN partners must provide programmatic data and fiscal reporting. There are various required milestones due dates. Grant Administrators are fully committed to helping you with the reporting deadlines and associated reminders throughout the program. Templates, technical assistance, and data capture tools are located on the far right hand side of the BHRN Program Resources webpage under the “For BHRNs” header, found [here](#).

The BHRN Program team is committed to BHRN Partners success, if you have questions or require additional assistance, please contact the BHRN Program Inbox at BHRN.Grants@odhsoha.oregon.gov.

Thank You for Your Hard Work!

BHRN Partner Grant Agreement Milestone Reporting Schedule (2025-29)

Policies and Procedures (to assist our BHRN Partners, [Templates](#) can be found here)

The following Policy & procedure items are to be maintained by the BHRN Partner

Culturally and Linguistically Specific Services Policies & Procedures

Culturally and Linguistically Responsive Services Policies & Procedures

Accessibility for People with Intellectual and Developmental Disabilities Policies & Procedures

Accessibility for People with Physical Disabilities Policies & Procedures

Gender Affirming and Responsive Care Policies & Procedures

LGBTQIA2S+ Affirming and Inclusive Services Policies and Procedures

Youth Friendly and Inclusive Services Policies & Procedures

Patient Centered and Non-Stigmatizing Services, including on use of Person-first, non-stigmatizing language Policies & Procedures

Trauma-Informed Engagement and Care Policies & Procedures

Services for parents with Minor Children Policies & Procedures

Process and procedure for data collection in compliance with OAR 944-001-0040 Policies & Procedures

Services for Pregnant Persons Policies & Procedures (where applicable)

Program Expenditure & Data Reports	Reporting Period	Report Deadline
<p>Expenditure and Data reports will be submitted through Submittable, the grant management software. Each quarter BHRN Partners are to provide required progress metrics.</p> <p>For more information, please click on the links below: Got questions? Email Compass Support Contact Submittable Account Support Find more info about Compass</p>	Q1 (July-Sept 2025)	11/1/2025
	Q2 (Oct-Dec 2025)	2/1/2026
	Q3 (Jan-Mar 2026)	5/1/2026
	Q4 (April-June 2026)	8/1/2026
	Q5 (July-Sept 2026)	11/1/2026
	Q6 (Oct-Dec 2026)	2/1/2027
	Q7 (Jan-Mar 2027)	5/1/2027
	Q8 (Apr-Jun 2027)	8/1/2027
	Q9 (Jul-Sep 2027)	11/1/2027
	Q10 (Oct-Dec 2027)	2/1/2028
	Q11 (Jan-Mar 2028)	5/1/2028
	Q12 (Apr-Jun 2028)	8/1/2028
	Q13 (Jul-Sep 2028)	11/1/2028
	Q14 (Oct-Dec 2028)	2/1/2029
	Q15 (Jan-Mar 2029)	5/1/2029
	Q16 (Apr-Jun 2029)	8/1/2029

Appendix 2

Terminology

Acronym	Definition
ADA	Americans with Disability Act
APANO	Asian Pacific American Network of Oregon
ASAM	American Society of Addiction Medicine
ATC	Access to Care
BHRN	Behavioral Health Resource Network
BIPOC	Black, Indigenous, and People of Color
CADC	Certified Alcohol & Drug Counselor
CCO	Coordinated Care Organizations
COI	Certificate of Insurance
CRM	Certified Recovery Mentor
DSM	Diagnostic and Statistical Manual of Mental Disorders
GA	Grant Administrator
IDD	Intellectual and Developmental Disabilities
LGBTQIA2S+	Lesbian, Gay, Bisexual, Transgender, Queer and/or questioning, Intersex, Asexual, Two-Spirit
MAT	Medication Assisted Treatment
MOTS	Measures and Outcomes Tracking System
MOU	Memorandum of Understanding
OAC	Oversight and Accountability Council
OAR	Oregon Administrative Rules
OC&P	Office of Contracts and Procurement
OHA	Oregon Health Authority
OPA (1, 2, or 3)	Operation Policy Analysts within OHA
ORS	Oregon Revised Statutes
PSS	Peer Support Specialist
PWS	Peer Wellness Specialist
RAC	Rules Advisory Council
REALD	Race/Ethnicity, Language and Disability
ROADS	Resilience Outcomes Analysis and Data Submission

Acronym	Definition
SAMHSA	Substance Abuse and Mental Health Services Administration
SNAP	Supplemental Nutrition Assistance Program
SOGI	Sexual Orientation and Gender Identity
SOS	Secretary of State
SSDI	Social Security Disability Insurance
SSI	Social Security Insurance
SUD	Substance Use Disorder
TANF	Temporary Aid for Needy Families

Service Definitions

Service Area	Definition
Screening	Screening services provided by an entity funded under ORS 430.389(2) must be provided by a Peer Support Specialist (PSS), Certified Recovery Mentor (CRM), Peer Wellness Specialist (PWS), or other addiction professional acting within their scope of practice to determine whether an individual needs a comprehensive behavioral health needs assessment or referrals to additional services and supports. Screening services must be provided 24 hours a day, seven days a week, every calendar day of the year through a telephone line or other means. A BHRN can rely on the statewide telephone hotline established by the OHA under ORS 430.391 for telephone screenings during nonbusiness hours such as evenings, weekends, and holidays. <i>(See OAR 944-010-0030 for details.)</i>
Comprehensive Behavioral Health Needs Assessment	Comprehensive behavioral health needs assessment services provided by an entity funder under ORS 430.389(2) must include a substance use disorder screening to determine if an individual has been appropriately diagnosed with a substance use disorder or other co-occurring disorders including but not limited to gambling disorders and mental health disorders, to

Service Area	Definition
	create a self-identified individual intervention plan. Assessments and/or diagnoses must be conducted by a certified alcohol and drug counselor or other credentialed addiction treatment professional acting within their scope of practice. (See OAR 944-010-0040 for details.)
Low Barrier Substance Use Treatment	Low-barrier substance use disorder treatment cannot have programmatic barriers such a lengthy intake, appointment requirements, assessments, or treatment planning sessions. Must provide treatment services with little or no wait time, but no more than 48-hours after a screening that identifies substance use treatment as a needed service. Provide treatment regardless of an individual's ability to pay or insurance coverage, individual's criminal history, warrant status, state residency or citizenship status(See OAR 944-010-0070 for details.)
Ongoing Peer Counseling and Support	Ongoing peer counseling and support must be provided through implementation of individual intervention plans created in accordance with OAR 944-010-0040, as well as through peer outreach workers engaging directly with marginalized community members who could potentially benefit from the services described in the 944 rules. (See OAR 944-010-0050 for details.)
Harm Reduction Intervention	Harm reduction services provided by an entity funded under ORS 430.389(2) must be low-barrier and must reduce the negative individual and public health outcomes of substance use and substance related harm. (See OAR 944-010-0060 for details.)
Housing Services	Transitional and supportive housing ² for individuals with substance use disorders must, prior to providing housing, conduct an assessment of an individual's needs. An entity must serve individuals at all point on

² Under the 2025-29 grant agreement funding is not available for the purchase, construction, or renovation of real property or for making capital improvements.

Service Area	Definition
	the substance use continuum and across the gender spectrum, for those who are transgender, gender-nonconforming, and intersex. (See OAR 944-010-0080 for details.)

Roles and Responsibilities

Agency/Council	Role	Responsibility
Department of Justice	Legal Authority	Review Grant Agreement
OAC	Advisory	Review/advise on changes in BHRNs
Public Records/Public Records Requests	Disseminates redacted information to the public	Agency Operations
Secretary of State Office	Auditors	Financial and Performance Audits required under ORS 430.392
Government Relations	Direct connection with Legislature/Governor's Office	Legislative compliance
Grant Administrators	Administer and Monitor Grants	Assure Grant compliance
BHRN Program Manager(s)	Oversees Grant Administrators	Team operations
BHRN Program Executive Director	Oversees BHRN Program processes as a whole	Coordination with other officers and interested parties
OHA Business Office	Fiscal responsibility	Ensures timely payment to grantees

Appendix 3

Frequently Asked Questions (FAQs):

What if we have questions not addressed in FAQ?

Please email us at BHRN.Grants@odhsoha.oregon.gov.

When are BHRN Grantees required to submit patient insurance submission plans?

For BHRN Grantees must comply with the terms and conditions of their grant agreements, including the requirements that the Grantees bill insurance where applicable and maintain records that demonstrate that grant recipients are billing insurance where applicable.

Where should Grant Milestone deliverables be sent (e.g., Certificates of Insurance)?

Required documents should be sent to BHRN.Grants@odhsoha.oregon.gov. Please make sure to include your grant number on the subject line.

How will our organization receive our initial disbursement of funds?

Quarterly fund disbursements will be sent to the BHRN Partners within 10 days at the end of the quarter. BHRN Partners do not need to perform any actions to receive the fund disbursement as it will be provided on an automatic schedule provided that the BHRN Partner is in compliance with the grant agreement. To submit a direct deposit form; a download link can be found on the right-hand side of the BHRN Program page [here](#), under BHRN Grants.

Where can we find the Oregon Accounting Manual's requirements for travel costs as required by the grant agreement (Exhibit A, Part 2, 1.b.iii)?

Please find the Oregon Accounting Manual [here](#) which lists the travel cost requirements.

If we are a Medicaid Provider, are we able to use M110 funds as a payer of last resort?

BHRN Partners, who are authorized Medicaid providers, should bill Medicaid for Medicaid eligible services. BHRN Partners should consider a Medicaid claim payment as payment in full for a given service. The BHRN Partner can use M110 funding if the service is ineligible for Medicaid, if you are unable to determine if the client has insurance, or if you do not have access to the client's insurance information.

What if a client has Medicaid through a CCO that does not cover services at our organization, and that CCO will not authorize services from us? Can we use M110 funds for those services?

If the CCO does not cover the service, you will need to contract the CCO for claims assistance. Only after you have a final denial, you can use M110 funding as a payor.

I am a BHRN Grantee and I am entering into contracts with other businesses for administrative services/overhead like accounting, technical assistance, and legal services. Do I need to get that contract approved by OHA?

No, as long as those administrative/overhead services fall within your approved budget for administrative services/overhead. However, if you are contracting with a person/entity to perform all or part of a service that you are contracted to perform, you must get that subcontractor approved by OHA.

As a BHRN Grantee, can I enter into a contract with a business to manage all or most of my M110 funds, and transfer all the grant funds I receive to them? And do I need to have this contract approved by OHA because it is considered a subcontract under the grant agreement?

Only you as the Grantee can receive the M110 funds directly from OHA. If the entity you want to be the fiscal manager is not the named Grantee, then the fiscal manager cannot receive the funds directly from OHA. Instead, as the Grantee you would need to transfer the funds to the fiscal manager. If the contractor will be receiving funds as compensation for fiscal management, those costs must be included within your approved budget. For example, if the fiscal manager assesses a 3% fee on the funds it manages for its services, then that fee must fit within your approved budget. If the fiscal manager is only helping you to management M110 grant funds and is not going to be performing any other function that is required in the grant agreement, then your contract with the fiscal manager would not be considered a subcontract under the grant, and no OHA approval would be required.

We see some services attract individuals from out-of-state (housing). Are there any guidelines to be aware of within the BHRN when it comes to services for those outside of the county/state? For context, we get people calling from out of state to begin to arrange services before they travel here (sometimes as far as Texas).

BHRNs must serve all those in need of services, regardless of their residency or citizenship status.

Are M110 funds only to be used on existing clients?

No. M110 funds must be used to serve any individual who uses substances or who has a substance use disorder and is seeking services, whether that is a new client or an existing client.

Do participants assisted with M110 funds need to be a resident of the funded county? For example, if a resident of Polk County seeks services in Marion County, can a Marion County provider utilize M110 funds to serve that client?

Providers should not turn away clients based on their residency. All clients, regardless of their county of residents, may be served using M110 funds.

What are the requirements for titling vehicles or any other special reporting requirements around vehicle purchases we need to know about?

The full requirements for titling vehicles purchased using M110 funds can be found in Exhibit A of your grant agreement. Within five (5) calendar days of acquiring a vehicle, you must forward by email a copy of the title application showing the OHA, Behavioral Health Division as the security interest holder to the Contracts inbox at HSD.Contracts@odhsoha.oregon.gov and cc the BHRN Program inbox: BHRN.Grants@odhsoha.oregon.gov.

The Security Interest Holder information is as follows:
Oregon Health Authority, Behavioral Health Division
500 Summer Street NE
Salem, OR 97301

Vehicles purchased with M110 funds must be used for M110 funded activities for the useful life of the vehicle or five (5) years, whichever is less.

On what timeline will BHRN Partners submit fiscal data reports?

There is a Grant Milestone timeline schedule available [here](#).

Does housing that is funded by M110 need to be licensed by OHA?

Not all housing must be licensed. It depends on the circumstances of each program. Each housing program must review the features of their program to determine if they need to be licensed. For example, to the extent that a housing program meets the definition of community-based structured housing, that program must be registered with OHA under ORS 443.480 - 443.500 but does not need to be licensed. If there are questions about whether a particular housing program must be licensed or registered, grantees may reach out to BHRN.Grants@odhsoha.oregon.gov for assistance.

What are the specific record retention requirements?

Reporting documents have a required retention period of six (6) years and can be maintained digitally. Please refer to the grant agreement, Exhibit B, Section 9 for more details.



In compliance with the Americans with Disabilities Act, this document is available in alternate formats such as Braille, large print, audio recordings, web-based communications, and other electronic formats. To request an alternate format, please send an e-mail to dhs-OAC.publicationrequest@state.or.us or call 503-378-3486 (voice) or 503-378-3523 (TTY) to arrange for the alternative format.