



BHRN Program Dual Reporting Instructions

Submittable & ROADS

June 2026

Overview:

This document provides instructions and guidelines for the BHRN Program’s dual reporting structure. It defines what data to collect and report in both Submittable and ROADS. Submittable use started in July 2025, and all BHRN Providers are expected to begin using ROADS on (or before) July 1, 2026 (there is a grace period for Electronic Health Record (EHR) configuration until November 1, 2026).

Submittable	ROADS
Implemented at the start of Grant Cycle 2	Deadline to begin use is July 1 st , 2026 (grace period for EDI/EHR users until Nov 1 st , 2026)
Expenditure reporting & summary-level/ de-identified client counts	Client-level data
Prohibits Protected Health Information (PHI)	Requires Protected Health Information (PHI)
Service Areas: All	Service Areas: Screening, Housing, Peer Support, & SUD Treatment
Specific to the BHRN program, for now	Being implemented across OHA
Total aggregate counts (includes encounters in ROADS)	Includes encounters that meet ROADS reporting requirements (does not include all counts in Submittable)

Table above defines the differences between Submittable and ROADS.

The data collected across Submittable and ROADS is required by Oregon Revised Statutes (ORS), Oregon Administrative Rules (OARs), Secretary of State (SOS) Performance Audits, and the Oregon legislature. Detailed BHRN Program reporting is innovative and new because the state wants to better understand the impact of BHRN funding, programs, and services.

Submittable:

Submittable collects aggregate client counts, program data, and expenditure information. There is no change to the expenditure component of your quarterly reporting. While Submittable has been used since July 2025, dual reporting establishes new guidelines for BHRN data collection in Submittable, refined to better complement the data collected in ROADS and decrease the administrative burden of ROADS use.

Previously, BHRN partners were advised to report unique client counts *only* for services directly funded by BHRN. For example, only reporting on naloxone paid for by BHRN funds or only reporting SUD services where the supplies or staffing was directly funded by the BHRN grant.

The new Submittable guidelines fine-tune the definition of a BHRN-supported client or service. The intent of this change is to better capture the wide-ranging impact of BHRN funds. The shift in reporting will begin in Quarter 5 (July 1, 2026) and will be reflected in the Quarter 5 Submittable report that opens for provider use on October 1, 2026.

Under the new guidelines, please report program data and aggregate client counts in Submittable if **the client received one or more of the BHRN services at least meaningfully because of, or enabled by, the BHRN grant**. BHRN services are defined by ORS 430.389 Section 3(2)(e)(A)-(H). Please report aggregate client counts for each Service Area you are funded for, including clients reported in ROADS. Additionally, a new field will be added to Submittable in Quarter 5 to report the total aggregate client count for all Service Areas.

For example, include clients in Submittable if they:

- Were served in a building (lease, rent, utilities, furnishings, etc.) or by a vehicle (purchase, lease, gas, etc.) funded through your current BHRN grant.
- Were served by any staff member funded through your BHRN grant.
- Were served by a staff member with a BHRN-funded supervisor.
- Received naloxone or any other material/supply purchased with BHRN funds.
- Received naloxone or any other material/supply distributed by a BHRN-funded staff.
- Were served at an event where BHRN funding was used to transport staff, pay for table space, or otherwise make the attendance possible.

Please speak with your Grant Administrator if you have questions about what services count as meaningfully enabled by the BHRN grant.

ROADS:

ROADS collects client-level data that helps evaluate the effectiveness of the services provided. ROADS data collection also supports the identification of ongoing service gaps. For example, by collecting data on demographics, wraparound services, and the duration of service/episode of care, OHA will better understand how BHRN investments support clients as they move through Oregon's systems of care.

ROADS reporting is based on encounters, is more time-intensive, and requires more client engagement than Submittable. To reduce administrative burden, the BHRN Program has written guidelines for which encounters rise to the threshold of ROADS entry.

Data **should** be reported in ROADS for:

- Screening, Housing, Peer Services, and SUD Service encounters, and
- Encounters that are **accommodating of and appropriate for** data collection. *This means the encounter goes beyond outreach, is in a setting where it is possible and appropriate to collect the ROADS data, and the encounter is long enough to accommodate capturing all the ROADS data. For more information about what data fields exist in ROADS, please refer to the [ROADS BHRN Reference Manual](#).*

Data **should not** be reported in ROADS if the interaction:

- Is brief, engagement-focused, outreach-based, or
- Does not meet minimum encounter or documentation thresholds for ROADS entry. *For more information on what is documented in ROADS, please see [BHRN ROADS Reference Manual](#).*

Data you will be asked to collect in ROADS includes first and last name, date of birth, last name at birth, living arrangement, marital status, tribal affiliation, race & ethnicity, gender identity, veteran status, county, state, and zip code of residence. Please use your best judgement about whether the encounter is appropriate for collection of these data. If not, it should be reported in Submittable and not included in ROADS.

https://www.oregon.gov/oha/HSD/COMPASS/resources/ROADS_BHRN_Reference_Manual_v0.7.pdf

The tables below show ROADS reporting criteria by Service Area and link provider expenditures to the data reported. Please enter encounters into ROADS even if the visit is also paid for through Medicaid or other sources.

Peer Support, SUD Treatment, and Screening	
Do enter clients in ROADS who: <ul style="list-style-type: none">•Receive a direct service from a BHRN-funded staff member (BHRN-funded includes any portion of FTE, but does not include staff who only receive BHRN-funded training)•Receive BHRN-funded supplies	Do NOT enter clients in ROADS who: <ul style="list-style-type: none">•Are seen by a staff member whose supervisor receives BHRN funding•Are seen in a BHRN-funded building or via a vehicle but not directly served by a BHRN-funded FTE.

Housing	
Do enter clients in ROADS who: <ul style="list-style-type: none">•Are housed in a building currently receiving BHRN-funding•Receive housing services via a BHRN-funded staff member (FTE only)•Receive BHRN-funded vouchers or rental assistance	Do NOT enter clients in ROADS who: <ul style="list-style-type: none">•Are housed in a program with a BHRN-funded supervisor only•Are housed in a facility where BHRN funding only pays for operational costs through administrative/indirect line items

BHRN Episodes of Care should be open for the entire duration of a client’s services. Non-Medicaid Service entries should be used to capture discrete encounters during the BHRN episode duration. See image below for more information.

Please see this [slide deck](#) and webinar [recording](#) for additional support.

Hypothetical BHRN Client *Timeline*

Ex. client is receiving biweekly peer support services while they are housed for four months.

- Peer salary is funded by BHRN in the Peer Service Area
- The building the client is housed in is funded by BHRN in the Housing Service Area

Key

- Episode of Care Creation
- ▲ Episode of Care Update
- Non-Medicaid Service Submission – Peer
- Non-Medicaid Service Submission – Housing
- ▲ Non-Medicaid Service Update - Housing

