

## BHRN ROADS FAQ

June 2026

### Getting Support

1. **For technical support with ROADS, please reach out to the ROADS Team.**

Email: [ROADS@odhsoha.oregon.gov](mailto:ROADS@odhsoha.oregon.gov)

2. **For questions about what to report, please reach out to your grant administrator and/or the BHRN Program Inbox.**

Email: [bhrn.grants@odhsoha.oregon.gov](mailto:bhrn.grants@odhsoha.oregon.gov)

3. **For issues with Multi-Factor Authentication, please reach out to the Office of Information Services Service Desk.**

Phone number: 503-945-5623

4. **If a provider changes their service address/primary contact/facility name, where should they update that with ROADS?**

Email [ROADS@odhsoha.oregon.gov](mailto:ROADS@odhsoha.oregon.gov) so the ROADS team can update the system. Please also cc your BHRN grant administrator so they can update your program files.

5. **Our program uses an EHR, but not all types of encounters are entered into the EHR. How do we report clients who are not entered into the EHR? Can we be registered for both the EHR and the portal? If so, will data from both platforms be stored in the same place?**

Yes, a provider can be registered for both the automated EHR data submission and the portal entry, and the data will all be stored in the ROADS system. For example, a provider may submit SUD encounters via their EHR but need to enter housing encounters via the portal. If you need to submit data using both entry methods, please reach out to ROADS at

[ROADS@odhsoha.oregon.gov](mailto:ROADS@odhsoha.oregon.gov) to determine the logistics for your specific situation.

### Background

1. **Why do we have to report client-level data?**

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.

**2. How will this data be used?**

Data will be used to demonstrate the impact of BHRN services and investment across the state. De-identified data will populate the BHRN program public-facing dashboard.

**3. Are we required to submit REALD SOGI data?**

No, the ROADS system does not require the collection of REALD/SOGI data at this time. BHRN providers are encouraged to collect demographic data when possible but completing that information in ROADS is optional. *REALD and SOGI are sets of standardized questions and data about a person’s Race, Ethnicity, Language, and Disability (REALD) and Sexual Orientation and Gender Identity (SOGI).*

**4. How is compliance being monitored?**

OHA tracks and validates incoming data each quarter to ensure services are delivered as intended per each grantee’s scope of work.

Timing & Data Entry

**1. Since data entry starts mid-year, do ROADS Portal users need to back-report clients from the start of the fiscal year?**

No, you are not required to back-report clients. Grantees are required to enter **all active clients**, including clients receiving services that began prior to July 1, 2026. Clients who became inactive prior to July 1, 2026 do not need to be retroactively entered into ROADS.

**2. Since data entry starts mid-year, do ROADS EHR integrated organizations need to back-report clients from the start of the fiscal year?**

No, you are not required to back-report clients. EHR Partners must enter all *current active clients* as of the date the EHR is configured, plus any new clients or encounters moving forward.

**3. When do we have to add a client profile, BHRN episodes, and/or Non-Medicaid Service encounter into the system? For example, if a BHRN episode occurs on July 1, by what date does it need to be entered into ROADS?**

A BHRN Episode should be entered within 7 days of a client’s admission date and updated at least every 90 days. BHRN Services should be recorded through the Non-Medicaid Services section and reported by the 15<sup>th</sup> of the month following the date of service. BHRN Episode discharge should be completed within 30 days of the discharge date.

Behavioral Health Resource Network (BHRN) Data Submission Cadence(s)	
Type of Data Submission	Data Submission Cadence
BHRN Episode Admission	Within 7 days of admission date
BHRN Episode Updates	At least every 90 days
BHRN Services Provided (NMS submission)	By the 15 <sup>th</sup> of the month following the date of service
BHRN Episode Discharge	Within 30 days of discharge date

## What Data to Report

### **1. What Service Areas are reported in ROADS?**

Peer support, housing, substance use disorder treatment, and screening are included in ROADS.

### **2. Who is considered a BHRN client? What types of encounters should be reported in ROADS? What activities should be counted in Submittable?**

Please consult the [BHRN Program Dual Reporting Instructions](#) at the bottom of the list of questions for a detailed overview of what information goes into ROADS and Submittable.

### **3. What is an "Active" BHRN client? What is an "Inactive" BHRN client?**

In ROADS, an Active BHRN Client has an open BHRN Episode of Care. Open means the BHRN Episode of Care has an admission date listed, but no discharge date yet. This record is, in theory, still being updated. An Inactive BHRN Client in ROADS means that client does NOT have an open BHRN Episode of Care. This record can no longer be updated, and a discharge date has been provided by the organization.

### **4. If we reached out to a new patient but they never replied, do we need to track that in ROADS?**

No, you do not need to track that in ROADS. Only interactions that rise to a threshold of an encounter (meaning there is enough information exchanged that the required fields in ROADS can be completed) should be entered. *However, follow-up attempts to contact a client with an open EOC in ROADS should be tracked in ROADS.*

### **5. If you provide more than one service in one encounter, can you record multiple services on the one entry?**

Multiple Service Areas can be captured within one BHRN Episode of Care. However, users will need to complete a Non-Medicaid Service submission for each separate encounter or type of service provided.

### **6. When should I fill out a Non-Medicaid Services, BHRN episode, or Screening event?**

This is unique to the service being provided, the location of the service, and the staff providing the service.

- A **BHRN Episode of Care** should be opened when a client is admitted for services and closed when they are discharged.
- A **Non-Medicaid Service** should be created and completed for each BHRN Service provided.
- A **Screening Event** should be completed for each screening along with a Non-Medicaid Service submission.

The image at the bottom of this document shows a hypothetical BHRN client timeline for what sections should be submitted and when.

**7. I am confused about a specific field in ROADS. Where do I find details about each field?**

Please refer to the [ROADS BHRN Reference Manual](#) for instructions and definitions of each ROADS field. We recommend using “Ctrl+F” to find specific fields within the reference manual. Additionally, recorded trainings are posted to the [ROADS webpage](#) and live webinars are scheduled at regular intervals – check out the “Learn More” section on the page.

**8. My housing and peer support services are often intertwined. How should I report those in ROADS and under which Service Area(s)? (Ex. If a client is assisted by a peer to get into supportive housing, but the supportive housing isn’t paid for through BHRN funds, how do we record that?)**

Any navigation by BHRN-funded staff should be reported in the Service Area through which the staffer is paid (e.g. if a peer is doing housing navigation paid through the peer Service Area, that should be reported as a peer encounter).

**9. How do we capture housing duration in ROADS?**

Use the service begin date and service end dates in the Non-Medicaid Services section to indicate the housing duration in ROADS. Please refer to the [ROADS BHRN Reference Manual](#) for instructions and definitions of each ROADS field, including dates for housing services and the [ROADS BHRN Housing Training Lab](#) for instructions on how to enter. Recorded trainings are posted to the [ROADS webpage](#) and live webinars are scheduled at regular intervals – check out the “Learn More” section on the webpage.

**10. Should every interaction with a peer be reported in ROADS (such as a series of text messages)?**

It depends. If the interaction meets the thresholds for ROADS entry as described in the [Dual Reporting Instructions](#) provided at the bottom of the list of questions, please complete a Non-Medicaid Service entry to record the peer interaction.

**11. If a BHRN-funded staff member sees a client and the encounter is billed to Medicaid, should it still be reported in ROADS as a BHRN encounter?**

Yes, this encounter should still be reported in ROADS. You should still fill out the BHRN Episode of Care and the Non-Medicaid Services sections.

## Dual Reporting Instructions

### **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).

<b>Submittable</b>	<b>ROADS</b>
Implemented at the start of Grant Cycle 2	Deadline to begin use is July 1 <sup>st</sup> , 2026 (grace period for EDI/EHR users until Nov 1 <sup>st</sup> , 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.

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

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

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.

