

## **Request for Proposals (RFP)**

### **Mobile Mental Health Crisis Response Services**

#### **East Central Crisis Services (ECCS)**

**Issue Date:** February 27<sup>th</sup>, 2026

**Due Date:** April 13<sup>th</sup>, 2026, by 4:30PM

**Contract Period:** 1/1/2027-12/31/2028, with the option to renew

**Submit Proposals To:** [amanda.stevenson@co.isanti.mn.us](mailto:amanda.stevenson@co.isanti.mn.us)

**RFP Contact:** [amanda.stevenson@co.isanti.mn.us](mailto:amanda.stevenson@co.isanti.mn.us)

#### **I. Introduction and Purpose**

The Region 7E Governing Board is soliciting proposals from qualified providers to deliver Mobile Mental Health Crisis Response Services in accordance with state law and Department of Human Services (DHS) requirements. The purpose of these services is to provide timely, community-based, face-to-face crisis intervention to individuals experiencing a mental health crisis, with the goal of de-escalation, stabilization, safety planning, and connection to ongoing supports while avoiding unnecessary hospitalization or law enforcement involvement.

This RFP is issued pursuant to Minnesota Statutes §§ 256B.0624 (Adult Mental Health Crisis Response Services) and 256B.0944 (Children’s Mental Health Crisis Response Services), as applicable, and related DHS policies and guidance.

This RFP is issued in anticipation of continued state funding for mental health crisis response services. Any contract awarded as a result of this RFP is contingent upon the receipt of funding and is subject to funding availability.

#### **II. Background**

The Region 7E Adult Mental Health Initiative Governing Board supports Region 7E and includes the counties of Chisago, Isanti, Kanabec, Mille Lacs, and Pine, as well as the Mille Lacs Band of Ojibwe. The Region 7E Governing Board is soliciting proposals from qualified providers to deliver

Mobile Mental Health Crisis Response Services to adults and children within the five-county area, consistent with Minnesota Statutes and Minnesota Department of Human Services (DHS) requirements for crisis response, stabilization, and coordination of care, as well as coverage of the Region 7E Crisis Line (1-800-523-3333).

Qualified responders will need to work closely with the behavioral health community, including other mental health providers, county and tribal members, the Minnesota Department of Human Services, and Region 7E/Fiscal Host agency representatives.

### **III. Statutory Authority and Regulatory Framework**

Services awarded under this RFP must fully comply with all applicable federal and state laws, rules, and policies, including but not limited to:

- A. Minnesota Statutes § 256B.0624 – Adult Mental Health Crisis Response Services (including crisis screening, crisis assessment, mobile crisis intervention, and crisis stabilization)
- B. Minnesota Statutes § 256B.0944 – Children’s Mental Health Crisis Response Services
- C. DHS Mental Health Crisis Response Services policies and provider standards
- D. Medical Assistance (MA) and Minnesota Health Care Programs (MHCP) billing requirements, including Minnesota Health Information System (MHIS) reporting requirements.
- E. 988 Suicide & Crisis Lifeline coordination requirements, where applicable.

### **IV. Scope of Services**

The selected provider(s) shall deliver the following services:

- A. Crisis Screening
  - i. Provide 24 hours per day, 7 days per week crisis screening to determine whether an individual is experiencing a mental health crisis and the appropriate level of response
  - ii. Accept referrals from individuals, families, schools, hospitals, law enforcement, 988, and other community partners.
- B. Crisis Assessment

- i. Conduct comprehensive crisis assessments when screening indicates a mental health crisis.
- ii. Assess safety risks, immediate needs, and clinical presentation.
- iii. Prioritize face-to-face assessments when required by statute or when clinically indicated.

**C. Mobile Crisis Intervention**

- i. Provide face-to-face, community-based crisis intervention services at the location of the individual in crisis (e.g., home, school, workplace, public setting, emergency department).
- ii. Ensure services are delivered by a mobile crisis team meeting statutory staffing requirements.
- iii. Utilize evidence-informed crisis de-escalation techniques and safety planning.
- iv. Confer between at least two team members regarding assessment findings, treatment planning, and intervention decisions, as required by statute.

**D. Crisis Treatment Planning and Documentation**

- i. Develop a written crisis treatment plan addressing immediate needs, interventions provided and recommended next steps.
- ii. Document services, progress toward stabilization, and determination of when crisis services are no longer required.

**E. Crisis Stabilization and Linkage**

- i. Provide or coordinate crisis stabilization services when indicated.
- ii. Link individuals to ongoing mental health treatment, social services, case management, peer supports, and other community resources.
- iii. Coordinate with counties, hospitals, managed care organizations, and other providers to ensure continuity of care.

**V. Available Funding**

The total amount available to providers serving Region 7E for the provision of mobile crisis response services and crisis phone line

services has not yet been determined. Funding levels are contingent upon final state allocations and may vary over the contract period.

This RFP is intended to identify qualified provider(s) and service models that can be implemented once funding levels are finalized. The Region 7E Governing Board may select one provider, multiple providers, or establish a pool of eligible providers through this RFP.

Respondents must propose a scalable service and budget model that aligns with DHS crisis response billing structures and can be adjusted based on final funding amounts. To ensure consistency across proposals, respondents must base their budget assumptions on the following parameters:

- 24/7/365 availability
- Coverage of the full Region 7E service area, unless otherwise specified
- Staffing models that meet or exceed DHS statutory and policy requirements.
- Billing consistent with MHCP allowable services and rates.

Proposals must include the following budget components:

- Unit-based pricing (for example, cost per mobile response, per crisis screening, per assessment, per call hour, or per FTE)
- A baseline service scenario reflecting a minimum funding level.
- At least one expanded service scenario reflecting increased funding availability.
- Identification of any fixed versus variable costs.

Respondents must not submit a single lump-sum budget without unit costs or assumptions.

Final award amounts, service volumes, and geographic allocations will be negotiated following confirmation of available funding.

## **VI. Service Availability and Response Standards**

Proposals must demonstrate the ability to:

- Provide services 24/7/365, including holidays.

- Respond promptly to requests for mobile crisis intervention within the defined service area.
- Serve both adults and/or children, as specified in the proposal.
- Deliver culturally responsive and trauma-informed services.

## **VII. Provider Qualifications and Staffing Requirements**

Maintain staffing that includes:

- At least one qualified mental health professional available at all times; and
- At least one additional trained crisis team member capable of participating in mobile crisis response.
- Ensure all staff meet DHS qualifications, training, supervision, and credentialing requirements for crisis response services.
- Maintain capacity for clinical supervision, quality assurance, and compliance monitoring.

## **VIII. Coordination and Collaboration**

The selected provider(s) must demonstrate the ability to collaborate with:

- A. County human services and public health agencies
- B. Hospitals and emergency departments
- C. Law enforcement and first responders
- D. Schools and community organizations
- E. 988 Suicide & Crisis Lifeline and regional crisis call centers
- F. Clear protocols for information sharing, referrals, and coordination of response are required.

## **IX. Data Collection, Reporting, and Outcomes**

Provider(s) must collect, and report data as required by DHS and the Region 7E Governing Board, including but not limited to:

- Number and type of crisis screenings, assessments, and mobile responses
- Response times
- Disposition and outcomes of crisis interventions

- Follow-up and linkage to services
- Outreach activities/efforts
- County specific data

**X. Proposal Submission Requirements**

Proposals must include the following sections:

- A. Organizational overview and experience providing crisis services
- B. Description of proposed service model and coverage area
- C. Staffing plan and qualifications
- D. Response time and availability plan
- E. Coordination and collaboration approach
- F. Data collection and reporting capacity
- G. Detailed budget narrative, unit costs, and funding assumptions, including scalability based on variable funding levels and alignment with MHCP billing.
- H. Assurance of compliance with statutory and DHS requirements

**XI. Evaluation Criteria**

Proposals will be evaluated based on, but not limited to:

- A. Demonstrated understanding of Minnesota crisis response statutes and requirements
- B. Experience and capacity to deliver mobile crisis services
- C. Staffing qualifications and availability
- D. Quality of service model and coordination plan
- E. Data reporting and accountability
- F. Cost effectiveness and sustainability

**XII. Contract Term**

The anticipated contract term is 1/1/2027-12/31/2028, with the option to renew based on performance, funding availability, and ongoing compliance with state and Region 7E requirements.

Contracts may be executed as not-to-exceed agreements and amended as funding levels, service volumes, or geographic coverage are finalized.

All contracts will incorporate DHS required assurances, data practices provisions, audit requirements, and compliance language consistent with crisis response service contracts.

**XIII. Reservation of Rights**

The Region 7E Governing Board and Isanti County Health and Human Services as the contracting entity reserves the right to amend this RFP, reject any or all proposals, request additional information, and negotiate contract terms in the best interest of the region and individuals served.