

# Bridging the Gaps

How Illinois and Collaborative Bridges Are  
Protecting Behavioral Health in an Era of  
Federal Cuts

Walking Bridge in Garfield Park



**An Issue Paper  
January 2026**

Summary Report

# A Safety Net Under Threat

Across the country, the foundation of behavioral healthcare is at risk. Federal proposals to reduce Medicaid and related public-benefit programs could strip coverage from millions of Americans and unravel community systems that hold lives together.

For Chicago's West Side neighborhoods, communities long marked by disinvestment and chronic health inequities, the stakes could not be higher.

Medicaid is not just health coverage. It is the bedrock of behavioral health in America. It supports more than 15 million adults living with mental health conditions and provides the most comprehensive safety net for people with severe mental illness or substance use disorders. Yet recent federal budget plans, including the "One Big Beautiful Bill Act," seek to cut more than \$1 trillion over 10 years, threatening essential programs such as Medicaid and SNAP. The Congressional Budget Office estimates that nearly 11 million Americans would lose health insurance by 2034.

In Illinois, where safety-net hospitals, community mental health agencies, and Federally Qualified Health Centers (FQHCs) already operate on razor-thin margins, those cuts could trigger a cascade of service losses. Lower reimbursements mean layoffs, longer wait times, and shuttered programs. The result is predictable: more emergency room visits, untreated illness, and community destabilization.

For neighborhoods on Chicago's West and South Sides, where life expectancy can be 25 years shorter than in affluent areas, the loss of Medicaid dollars would deepen generational inequities in mental health, chronic disease, and access to care.

## Voices

*"We are seeing drastic cuts to base level human services and health care. It's like no one understands that if you take away the support that individuals need, everything gets worse. We always say that an ounce of prevention is worth much more than a pound of cure."*

**- Danny K. Davis, U.S. Congressman**

*"The attempt to dismantle access to care in communities that are most vulnerable is not a best practice that we want to model as a society."*

**- Ayesha Jaco, CEO, West Side United**



## Illinois' Collaborative Response

Several years ago, Illinois chose to face health inequity head-on. Through its Healthcare Transformation Collaboratives (HTCs), the state is rebuilding community health from the ground up.

These initiatives bring hospitals, FQHCs, behavioral health providers, and community organizations into unified systems designed to address root causes of illness (poverty, trauma, housing instability, lack of access). The goal is ambitious: improve outcomes while reducing costs.

At the core of the HTC approach is an insistence on equity, integration, and sustainability. Partners share data, coordinate care, and eliminate duplication. They work toward value-based reimbursement models that reward improved health rather than volume of visits. And they treat behavioral health not as an afterthought, but as a central pillar of community well-being. This reimagined system has become a lifeline for communities across Chicago.

### Voices

*“The community care hub model is a philosophy of care that spans the country and has shown real promise. What Illinois did was galvanize it. It’s taking common-sense wisdom and saying: prove it with outcomes and data.”*

**– Jose Sanchez, President and CEO, Humboldt Park Health**

*“During COVID we saw disproportionate Black and Latino deaths that had everything to do with the social fault lines. It was shocking to many people, and it was shocking to the Black and Latino Caucus. And they decided that we needed to do something different. That’s really how the HTCs began.”*

**– Dr. David Ansell, Rush University Medical Center**



## A West Side Model That Works

One of Illinois' most successful HTC initiatives is Collaborative Bridges, a network of hospitals, behavioral health agencies, and community organizations serving Chicago's West Side.

Launched in 2022, it was built to counter exactly the kind of system fragmentation that now threatens the state's safety net. Collaborative Bridges integrates hospital discharge planning, outpatient therapy, housing support, and primary care coordination so that people in crisis do not fall through the cracks.

Collaborative Bridges' Community Stabilization Teams ensure that individuals leaving psychiatric units receive follow-up within 48 hours, connecting them to care, benefits, and peer support. The Collaborative Bridges Wellness Center, a 17,000-square-foot shared hub on West Lake Street, offers walk-in therapy, case management, and recovery support in a welcoming community setting.

Through partnerships with the Loretto Hospital, Humboldt Park Health, Hartgrove Behavioral Health System, Bobby E. Wright, Community Counseling Centers of Chicago (C4), Habilitative Systems, PCC Community Wellness, and TASC, Collaborative Bridges has created a true continuum of care that extends from the hospital to the neighborhood.

Collaborative Bridges has demonstrated how trust, cultural competence, and local partnership can rebuild confidence in the behavioral health system.

### 65%

Referred patients enrolled in services. (>50% benchmark)

### 3,000

Individuals served and connected to community services.

### \$3M

Estimated annual Medicaid savings per MCO data.

### 9%

Psychiatric readmissions, compared with 33% nationally.

### 63%

Reduction in overall care costs for high-risk individuals.

## Voices

*"Innovation is the key that unlocks health equity, and Collaborative Bridges is what that looks like in real life. We've taken what used to be a fragmented maze of services and turned it into a connected path to care. Collaborative Bridges is showing that when you design with community at the center, the model works — for patients, for providers, and for the system as a whole."*

**- Kerri Brown, CEO, Community Counseling Centers of Chicago**



## Collaboration as a Force Multiplier

The program's success rests on dyad partnerships. These partnerships pair hospitals with community behavioral health providers who are on-site to coordinate warm hand-offs at discharge.

That simple structural change has redefined continuity of care. Patients no longer leave the hospital with a phone number. They leave with a plan, a care team, and a relationship.

Behind the scenes, Collaborative Bridges is also creating the data infrastructure needed for modern healthcare. A shared technology platform integrates claims, health records, and social-needs data. This allows partners to track outcomes and allocate resources in real time, strengthening accountability and enabling smarter investments.

The result is a smoother patient experience and a more efficient, data-driven ecosystem that allocates resources where they have the greatest impact.

### Voices

*“Collaborative Bridges lets partners meet, share information, share resources, share data — all of that makes a big difference in how we serve people. One agency can't meet all the needs — but through the collaboration, we can identify the service needs and provide the services that promote well-being and healthier individuals.”*

- **Velma Williams, CEO, Bobby E. Wright Behavioral Health Center**

*“All of the organizations within Collaborative Bridges have particular strengths. We serve similar populations, but we all bring something unique to the table. That's why the name Collaborative Bridges means so much and is so correct in describing who we are.”*

- **Joel Johnson, President & CEO, TASC**



## Building a Sustainable Model

As federal uncertainty grows, sustainability is the ultimate test. Collaborative Bridges has built a business model aligned with Illinois Medicaid’s value-based reform goals, combining fee-for-service reimbursement, managed care value-based arrangements, and philanthropic funding.

The program’s cost-saving performance has attracted the attention of Medicaid Managed Care Organizations (MCOs), which are now developing contracts that reward measurable outcomes such as engagement rates, stability, and reduced total cost of care.

Collaborative Bridges also works through the Illinois Health Practice Alliance (IHPA), which is a statewide behavioral health network that facilitates shared savings and care coordination across providers. By connecting community organizations to managed care revenue streams, IHPA strengthens both fiscal stability and quality improvement across the system.

Meanwhile, philanthropic partners are helping fill the gaps through investment in housing stabilization, peer-workforce development, and technology infrastructure to make the model scalable.

---

### Voices

*“HFS funding gave us the spark, but it can’t be the entire engine. If Collaborative Bridges is going to last, we have to build a sustainable platform that stands on multiple legs — Medicaid, value-based contracts, and community investment. Our clients deserve a system that won’t disappear when one funding stream dries up.”*

- **Patrick Dombrowski, Executive Director, Collaborative Bridges**



## The Stakes Ahead

The challenge now is not just to sustain progress but to scale it. Federal disinvestment will test every corner of Illinois' behavioral health network, but the HTC framework shows how resilience can be built through partnership and innovation.

Here are five strategies that stand out for the road ahead:

1. **Diversify funding** by braiding Medicaid, philanthropy, and hospital investments.
2. **Increase operational efficiency** through co-location, shared data, and pooled administrative resources.
3. **Leverage community assets** such as trusted local partners, peer specialists, and neighborhood networks.
4. **Integrate health-related social needs**, from housing to employment.
5. **Build community-controlled infrastructure** that endures beyond federal funding cycles.

These aren't abstract recommendations. They are working and proven realities now happening on Chicago's West Side.

## Voices

*"Families are trying to make it. If the support isn't there, everything gets worse — the safety, the schooling, the health, the whole household. We've got to help each other in these difficult times. These families can't do it alone."*

- **Raenette Young, Clinical Director, Collaborative Bridges**



## A Call to Action

Collaborative Bridges has proven that equity-centered, integrated behavioral healthcare is both effective and financially sustainable. But its continued success will depend on three aligned commitments:

- **Payors** must accelerate value-based contracts that reward outcomes and reinvest savings into community care.
- **The State of Illinois** must continue supporting transformation collaboratives that have shown measurable impact and embed them into its long-term 1115 Waiver framework.
- **Philanthropy** must coordinate its investments to preserve behavioral health infrastructure and demonstrate scalable models for equity-driven care.

The Collaborative Bridges Wellness Center at 4223 W. Lake Street stands as proof that even amid federal disinvestment, community-driven systems can thrive. It is a living example of how collaboration, data, and compassion can transform a fragmented safety net into a cohesive network of recovery and stability.

## Voices

*“We can’t sit on the sidelines and hope the safety net holds. We have to strengthen it together. Collaborative Bridges was built on the belief that when we pool our resources, our expertise, and our compassion, we create something stronger than any one agency could ever build alone. Now is the time to step up, speak up, and fight for the people whose lives depend on this work.”*

- **Donald Dew, President and CEO, Habilitative Systems Inc.**

*“This is the moment to stand up for the people who don’t have a voice in the rooms where decisions are being made. Our clients are fighting every day just to survive, and they need us. If we want communities to heal, we have to protect the programs that keep people safe, stable, and seen. We can’t turn away — not now, not ever.”*

- **Tesa Anewishki, CEO, Loretto Hospital**





**Copyright © 2025 Collaborative Bridges Inc.  
All rights reserved.**

**Collaborative Bridges  
4223 W. Lake Street, Chicago, IL 60624  
872 235-0777**

**[referrals@thecollaborativebridges.org](mailto:referrals@thecollaborativebridges.org)  
[www.thecollaborativebridges.org](http://www.thecollaborativebridges.org)**



**HTC**

Healthcare Transformation  
Collaboratives