Access Living Federal Candidates Questionnaire – Disability Policy Issues

Disability voters are an important voting block. In Chicago, there are over 300,000 people with disabilities, with countless friends and families who also consider themselves disability voters. Furthermore, about one in six voters, or 16.4% of the voting electorate nationwide is a person with a disability, according to the American Association of People with Disabilities.

Candidates nationwide have learned that people with disabilities have a historical interest in policymaking that impacts our lives. The following **10 questions** aim to address major policy areas of concern of disabled voters in the Chicagoland area.

Candidate Name: Phil Andrew

Party: Democratic

District: Illinois' District

Disability and Civil Rights:

Context for Question

Over the last fifty years, people with disabilities and our allies have worked tirelessly to create and enforce a critical set of disability rights laws, such as the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973, the Individuals with Disabilities Education Act, and much more. In the past several months, both administrative and legal action have made it clear that federal disability rights and enforcement are at tremendous risk. This is evidenced by the recent dismantling of federal entities tasked with enforcing disability laws, notably the Office for Civil Rights (OCR) and Office of Special Education and Rehabilitative Services (OSERS) within the Department of Education.

Question

What would you do to ensure that current federal disability rights laws and regulations are protected, not dismantled?

Answer

I will work to ensure that federal disability rights laws and their enforcement are fully protected by opposing any effort to weaken the ADA, Section 504, IDEA, or the agencies responsible for upholding them, and by pushing to restore and strengthen the Department of Education's Office for Civil Rights and OSERS. I will support robust oversight to hold agencies accountable, defend and modernize core disability statutes, and fully fund IDEA so schools can meet their obligations. I will also champion policies that expand accessibility, community living, employment opportunities, and transportation and housing options, while ensuring that people with disabilities and their families have a direct voice in shaping federal policy.

Question

Between now and 2028, what is your vision for rebuilding the federal administrative infrastructure that has been gutted in this year's reductions in force (RIFs)?

Answer

Between now and 2028, my vision is to rebuild a federal administrative infrastructure that is not only restored to full strength, but modernized and more accountable to the people it serves. That means reversing harmful reductions in force by rehiring and expanding frontline civil rights, regulatory, and service staff; investing in training, technology, and data systems so agencies can respond quickly and transparently; and setting clear performance, equity, and enforcement benchmarks that Congress actually monitors. I will prioritize rebuilding the capacities that protect civil rights, worker safety, public health, environmental protections, and disability and education enforcement, while elevating career professionals, insulating them from partisan interference, and ensuring that their work is guided by evidence, community input, and the public interest rather than special interests.

Education:

Context for Question

The Individuals with Disabilities Education Act (IDEA) is the federal law the governs special education in the United States. This is the law that ensures that ALL students have the right to a "free and appropriate public education." When the IDEA was passed, the federal government committed to covering 40% of state special education costs. As it currently stands, IDEA is only covering 10% of costs. This shortfall leaves local communities on the hook to make ends meet. teachers and therapists stretched thin, and worse outcomes for students.

Question

What steps would you take to ensure IDEA/Special Education is properly funded going forward?

Answer

To ensure IDEA is properly funded going forward, I would support and help lead efforts to finally fulfill the federal government's long-standing commitment to cover 40% of special education costs—a promise that has never been met, with federal funding currently covering less than 12%. I would co-sponsor and advocate for legislation such as the IDEA Full Funding Act, which creates a structured, mandatory increase in federal appropriations until the 40% threshold is reached. I would also use the appropriations process to push for annual funding increases, require transparent reporting on district-level shortfalls, and ensure that federal dollars reach classrooms rather than being absorbed by administrative gaps. By fully funding IDEA, we can relieve the financial strain on local districts, many of which are facing multimillion-dollar shortfalls due to underfunding, and ensure that teachers, therapists, and students receive the resources and support they are legally entitled to.

Health Care:

Context for Question

When we surveyed disabled Chicagoans about their federal policy concerns, access to healthcare was the number one issue for an overwhelming number of respondents.

Medicaid is integral to the independence of people with disabilities because of home and community-based services (HCBS). H.R.1 will implement drastic cuts to Medicare and Medicaid, leaving many disabled folks without access to health coverage. HCBS is particularly at risk of cuts should their federal funding be lost, because HCBS is not mandatory. Without Medicaid HCBS, many people with disabilities will be forced to leave their communities and live in institutions.

Question

What will you do to protect Illinoisans' access to health care, especially people with disabilities?

Answer

I will make protecting and expanding access to health care, especially for people with disabilities, a core priority of my work in Congress. Medicaid is the backbone of independence for millions, and I will oppose any legislation, including H.R.1, that threatens cuts to Medicaid, Medicare, or the home- and community-based services (HCBS) that allow people to live with dignity in their own homes rather than in institutions. I will fight to make HCBS a mandatory benefit and support legislation that strengthens the direct-care workforce so people can reliably access the services they're entitled to. I will also work to expand affordable coverage options, protect the ACA's essential health benefits, and ensure that people with disabilities have access to the full range of medical, behavioral, and long-term supports they need. Above all, I will stand firmly against any effort to roll back the rights, autonomy, and community integration that disabled Illinoisans have fought for over generations.

Context for Question

In Illinois, thousands of people with disabilities remain institutionalized in state-operated developmental centers or nursing facilities, even though most could live safely and independently with proper support. Illinois operates several HCBS waiver, such as the *Persons with Disabilities Waiver*, to help individuals receive care at home rather than in institutions. Expanding access to these programs is vital because community living promotes autonomy, dignity, and inclusion. It is also more cost-effective than institutional care and aligns with the Olmstead v. L.C. decision, which affirms the right to live in the most integrated setting possible.

Question

What is your plan to reduce the number of people with disabilities on waitlists for home and community-based services (HCBS) while ensuring services are high quality? Do you support making HCBS a mandatory Medicaid service*?*

Answer

I believe Illinoisans with disabilities deserve the freedom to live in their homes and communities, not institutions, and that requires fully investing in home- and community-based services. My plan is to push for major federal reinvestment in HCBS by increasing Medicaid funding to states, expanding waiver capacity, and strengthening the direct-care workforce through better wages, training, and career pathways so services are both available and high quality. I will support legislation that makes HCBS a mandatory Medicaid benefit, ending the inequity of waitlists that force people into institutions simply because community supports are optional. I will also work to enforce the promise of Olmstead by requiring transparent reporting on waitlists, incentivizing states to transition people into integrated settings, and ensuring families have real choices. No one should be denied autonomy or dignity because the federal government has failed to fund the services they need to live independently.

Context for Question

We have seen a rash of laws across Illinois and the country that criminalize homelessness. Homelessness is an issue that disproportionately impacts people with disabilities. People with serious mental illness are more likely to end up homeless and not having a house leads to all kinds of health problems. Some ordinances even go as far as penalizing people sleeping in their own cars.

Question

What will you do to protect people living with mental illness who are also unhoused?

Answer

I will work to ensure that people living with mental illness who are unhoused are treated with dignity, compassion, and real support, not criminalization. That starts with opposing any laws or ordinances that punish people for experiencing homelessness, including bans on sleeping in public spaces or in their own cars. Criminalizing poverty only deepens instability, worsens health outcomes, and makes it harder for people to access the services they need.

I will fight for major federal investments in supportive housing, mobile crisis response, and community-based mental health services so people can get help before they reach a point of crisis. I will support expanding Medicaid funding for housing-related services, strengthening the behavioral health workforce, and increasing resources for programs that integrate housing, treatment, and case management. I will also push for stronger enforcement of civil rights protections under the ADA and Olmstead to ensure people with disabilities are not forced into institutions simply because they lack stable housing.

Transportation:

Context for Question

Systemic underfunding of transit systems, particularly on the operations side, has left the Chicagoland transit system in funding peril. Many disabled people cannot drive and rely on both mainline transit and paratransit systems to be independent and participate in society. Because the availability of paratransit is tied to the availability of mainline transit, fixed route funding cuts directly impact ADA paratransit service as well. Unfortunately, despite the high need for paratransit, it remains insufficiently funded and frequently overlooked, rather than considered a vital part of the transit system overall.

Question

Would you support a more equitable funding system that better funds accessible transit, including paratransit specifically? And, if so, what do you think that system should look like?

Answer

I strongly support a more equitable system that fully recognizes accessible transit, including paratransit, as a core part of our transportation network. Too often, paratransit is treated as an afterthought even though thousands of disabled riders rely on it every day for work, medical care, and community life. A better system would ensure that paratransit is planned, prioritized, and resourced alongside mainline transit, with clear standards for reliability, on-time performance, and service quality. It would also strengthen the workforce that keeps these systems running by improving training, job stability, and retention for drivers and dispatchers. And it would require greater transparency around service gaps, wait times, and denials so riders and advocates can hold agencies accountable. In short, accessible transit should be treated as essential infrastructure, because when transit works for people with disabilities, it works better for everyone.

Economic Justice:

Context for Question

Supplemental Security Income, also known as SSI, serves as a critical safety net to provide some level of income for many people with disabilities. However, the process to obtain benefits can stretch over two years. Recipients of SSI only receive an average of $700 / month, and outdated asset limits of $2,000 per person and $3,000 per couple trap people with disabilities in a vicious cycle of poverty.

Question

What concrete steps would you take to modernize and reform the SSI program so that it benefits and uplifts people with disabilities?

Answer

I would work to modernize SSI so it actually supports independence rather than trapping people in poverty. That starts with raising the outdated asset limits, which haven't been meaningfully updated in decades and prevent people with disabilities from saving for emergencies, education, or long-term stability. I would also push to increase monthly benefit levels so they reflect real living costs, and streamline the application and appeals process so people aren't waiting years for the support they're entitled to. Finally, I would support reforms that eliminate punitive rules like marriage penalties and strict income offsets that discourage work, family formation, and financial security. SSI should be a pathway to stability and dignity, not a barrier to it, and these changes would help ensure the program truly uplifts the people it was designed to serve.

Context for Question

SNAP is a critical lifeline for millions of Americans and is especially important for people with disabilities. However, H.R. 1 will force millions of Americans off critical SNAP benefits, as well as create excessive bureaucratic red tape for people with disabilities. Regardless, the SNAP program in many ways does not account for the unique needs of people with disabilities, particularly with the program's restriction on purchasing ready-made / hot meals.

Question

What concrete steps would you take to protect SNAP benefits AND modernize food access programs to be more accessible to the disability community?

Answer

I would work to both protect SNAP from harmful cuts and modernize the program so it actually meets the needs of people with disabilities. First, I would oppose any legislation like H.R. 1 that threatens to reduce eligibility, add punitive work requirements, or create new bureaucratic barriers that make it harder for disabled people to access food. At the same time, I would push for reforms that make SNAP more responsive to the realities disabled people face, including allowing the purchase of prepared or hot meals for individuals who cannot safely cook at home. I would also support expanding delivery options, simplifying recertification, and improving coordination with programs like WIC, Meals on Wheels, and community-based nutrition services. The goal is simple: no one should lose access to food because of disability-related limitations, and our food assistance programs should be designed to promote independence, dignity, and real choice.

Immigration:

Context for Question

While federal disability rights laws apply to people with disabilities regardless of citizenship status, there are significant unaddressed enforcement gaps in protecting immigrants with disabilities. According to an April 2024 Congressional Research Service report on medical care in immigrant detention facilities, significant gaps remain in ensuring adequate treatment and accommodations for detained individuals with disabilities.

Question

How would you work to hold federal agencies accountable for protecting the rights and dignity of immigrants with disabilities in detention and during the immigration process?

Answer

I would make it a priority to ensure that immigrants with disabilities are fully protected under federal disability rights laws at every stage of the immigration process, including in detention. That begins with strong oversight: pressing DHS, ICE, and CBP to comply with the ADA, Section 504, and federal civil rights standards, and requiring transparent reporting on medical care, accommodations, use of solitary confinement, and disability-related complaints. I would push for mandatory, independent inspections of detention facilities, clear enforcement mechanisms when violations occur, and consequences for contractors or agencies that fail to meet legal obligations. I would also support expanding access to qualified interpreters, mental health services, and disability-competent medical care, and ensure that asylum seekers and detainees with disabilities receive appropriate accommodations during interviews, hearings, and transportation.