



104TH GENERAL ASSEMBLY

State of Illinois

2025 and 2026

HB5202

Introduced 2/10/2026, by Rep. Angelica Guerrero-Cuellar

SYNOPSIS AS INTRODUCED:

320 ILCS 25/4

from Ch. 67 1/2, par. 404

Amends the Senior Citizens and Persons with Disabilities Property Tax Relief Act. Requires the income eligibility levels used to determine eligibility for reduced vehicle registration fees for seniors and persons with disabilities to be adjusted every 3 years by an amount equal to the percentage increase, if any, in the consumer price index-u during the preceding 12-month calendar year. Provides that the new amount resulting from each 3-year adjustment shall be determined by the Comptroller and provided by the Comptroller to the Department on Aging. Requires the Department on Aging to determine the dates upon which the new adjusted amounts take effect and to publish the adjusted amounts.

LRB104 18288 KTG 31728 b

1 AN ACT concerning aging.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The Senior Citizens and Persons with
5 Disabilities Property Tax Relief Act is amended by changing
6 Section 4 as follows:

7 (320 ILCS 25/4) (from Ch. 67 1/2, par. 404)

8 Sec. 4. Amount of Grant.

9 (a) In general. Any individual 65 years or older or any
10 individual who will become 65 years old during the calendar
11 year in which a claim is filed, and any surviving spouse of
12 such a claimant, who at the time of death received or was
13 entitled to receive a grant pursuant to this Section, which
14 surviving spouse will become 65 years of age within the 24
15 months immediately following the death of such claimant and
16 which surviving spouse but for his or her age is otherwise
17 qualified to receive a grant pursuant to this Section, and any
18 person with a disability whose annual household income is less
19 than the income eligibility limitation, as defined in
20 subsection (a-5) and whose household is liable for payment of
21 property taxes accrued or has paid rent constituting property
22 taxes accrued and is domiciled in this State at the time he or
23 she files his or her claim is entitled to claim a grant under

1 this Act. With respect to claims filed by individuals who will
2 become 65 years old during the calendar year in which a claim
3 is filed, the amount of any grant to which that household is
4 entitled shall be an amount equal to 1/12 of the amount to
5 which the claimant would otherwise be entitled as provided in
6 this Section, multiplied by the number of months in which the
7 claimant was 65 in the calendar year in which the claim is
8 filed.

9 (a-5) Income eligibility limitation.

10 (1) For purposes of determining an applicant's
11 eligibility for free transit services administered by a
12 municipality or public transit authority under Sections 51
13 and 52 of the Chicago Transit Authority Act, Sections 8.6
14 and 8.7 of the Local Mass Transit District Act, and
15 Section 2.04 of the Northern Illinois Transit Authority
16 Act, this Section, "income eligibility limitation" means
17 an amount for grant years 2008 through 2019:

18 ~~(1) less than \$22,218 for a household containing one~~
19 ~~person;~~

20 ~~(2) less than \$29,480 for a household containing 2~~
21 ~~persons; or~~

22 ~~(3) less than \$36,740 for a household containing 3 or~~
23 ~~more persons.~~

24 ~~For grant years 2020 and thereafter:~~

25 (A) ~~(1)~~ less than \$33,562 for a household
26 containing one person;

1 (B) ~~(2)~~ less than \$44,533 for a household
2 containing 2 persons; or

3 (C) ~~(3)~~ less than \$55,500 for a household
4 containing 3 or more persons.

5 (2) For purposes of determining an applicant's
6 eligibility for reduced vehicle registration fees provided
7 under Section 3-806.3 of the Illinois Vehicle Code,
8 "income eligibility limitation" means an amount:

9 (A) less than \$33,562 for a household containing
10 one person;

11 (B) less than \$44,533 for a household containing 2
12 persons; or

13 (C) less than \$55,500 for a household containing 3
14 or more persons.

15 The income eligibility limitation amounts listed in
16 paragraph (2) shall be adjusted every 3 years by an amount
17 equal to the percentage increase, if any, in the consumer
18 price index-u during the preceding 12-month calendar year. As
19 used in this subsection, "consumer price index-u" means the
20 index published by the Bureau of Labor Statistics of the
21 United States Department of Labor that measures the average
22 change in prices of goods and services purchased by all urban
23 consumers, United States city average, all items, 1982-84 =
24 100. The new amount resulting from each adjustment shall be
25 determined by the Comptroller and provided by the Comptroller
26 to the Department on Aging. The Department on Aging shall

1 determine the dates upon which the new adjusted amounts take
2 effect and shall publish the adjusted amounts.

3 ~~For 2009 claim year applications submitted during calendar~~
4 ~~year 2010, a household must have annual household income of~~
5 ~~less than \$27,610 for a household containing one person; less~~
6 ~~than \$36,635 for a household containing 2 persons; or less~~
7 ~~than \$45,657 for a household containing 3 or more persons.~~

8 ~~The Department on Aging may adopt rules such that on~~
9 ~~January 1, 2011, and thereafter, the foregoing household~~
10 ~~income eligibility limits may be changed to reflect the annual~~
11 ~~cost of living adjustment in Social Security and Supplemental~~
12 ~~Security Income benefits that are applicable to the year for~~
13 ~~which those benefits are being reported as income on an~~
14 ~~application.~~

15 If a person files as a surviving spouse, then only his or
16 her income shall be counted in determining his or her
17 household income.

18 (b) Limitation. Except as otherwise provided in
19 subsections (a) and (f) of this Section, the maximum amount of
20 grant which a claimant is entitled to claim is the amount by
21 which the property taxes accrued which were paid or payable
22 during the last preceding tax year or rent constituting
23 property taxes accrued upon the claimant's residence for the
24 last preceding taxable year exceeds 3 1/2% of the claimant's
25 household income for that year but in no event is the grant to
26 exceed (i) \$700 less 4.5% of household income for that year for

1 those with a household income of \$14,000 or less or (ii) \$70 if
2 household income for that year is more than \$14,000.

3 (c) Public aid recipients. If household income in one or
4 more months during a year includes cash assistance in excess
5 of \$55 per month from the Department of Healthcare and Family
6 Services or the Department of Human Services (acting as
7 successor to the Department of Public Aid under the Department
8 of Human Services Act) which was determined under regulations
9 of that Department on a measure of need that included an
10 allowance for actual rent or property taxes paid by the
11 recipient of that assistance, the amount of grant to which
12 that household is entitled, except as otherwise provided in
13 subsection (a), shall be the product of (1) the maximum amount
14 computed as specified in subsection (b) of this Section and
15 (2) the ratio of the number of months in which household income
16 did not include such cash assistance over \$55 to the number
17 twelve. If household income did not include such cash
18 assistance over \$55 for any months during the year, the amount
19 of the grant to which the household is entitled shall be the
20 maximum amount computed as specified in subsection (b) of this
21 Section. For purposes of this paragraph (c), "cash assistance"
22 does not include any amount received under the federal
23 Supplemental Security Income (SSI) program.

24 (d) Joint ownership. If title to the residence is held
25 jointly by the claimant with a person who is not a member of
26 his or her household, the amount of property taxes accrued

1 used in computing the amount of grant to which he or she is
2 entitled shall be the same percentage of property taxes
3 accrued as is the percentage of ownership held by the claimant
4 in the residence.

5 (e) More than one residence. If a claimant has occupied
6 more than one residence in the taxable year, he or she may
7 claim only one residence for any part of a month. In the case
8 of property taxes accrued, he or she shall prorate 1/12 of the
9 total property taxes accrued on his or her residence to each
10 month that he or she owned and occupied that residence; and, in
11 the case of rent constituting property taxes accrued, shall
12 prorate each month's rent payments to the residence actually
13 occupied during that month.

14 (f) (Blank).

15 (g) Effective January 1, 2006, there is hereby established
16 a program of pharmaceutical assistance to the aged and to
17 persons with disabilities, entitled the Illinois Seniors and
18 Disabled Drug Coverage Program, which shall be administered by
19 the Department of Healthcare and Family Services and the
20 Department on Aging in accordance with this subsection, to
21 consist of coverage of specified prescription drugs on behalf
22 of beneficiaries of the program as set forth in this
23 subsection. Notwithstanding any provisions of this Act to the
24 contrary, on and after July 1, 2012, pharmaceutical assistance
25 under this Act shall no longer be provided, and on July 1, 2012
26 the Illinois Senior Citizens and Disabled Persons

1 Pharmaceutical Assistance Program shall terminate. The
2 following provisions that concern the Illinois Senior Citizens
3 and Disabled Persons Pharmaceutical Assistance Program shall
4 continue to apply on and after July 1, 2012 to the extent
5 necessary to pursue any actions authorized by subsection (d)
6 of Section 9 of this Act with respect to acts which took place
7 prior to July 1, 2012.

8 To become a beneficiary under the program established
9 under this subsection, a person must:

10 (1) be (i) 65 years of age or older or (ii) a person
11 with a disability; and

12 (2) be domiciled in this State; and

13 (3) enroll with a qualified Medicare Part D
14 Prescription Drug Plan if eligible and apply for all
15 available subsidies under Medicare Part D; and

16 (4) for the 2006 and 2007 claim years, have a maximum
17 household income of (i) less than \$21,218 for a household
18 containing one person, (ii) less than \$28,480 for a
19 household containing 2 persons, or (iii) less than \$35,740
20 for a household containing 3 or more persons; and

21 (5) for the 2008 claim year, have a maximum household
22 income of (i) less than \$22,218 for a household containing
23 one person, (ii) \$29,480 for a household containing 2
24 persons, or (iii) \$36,740 for a household containing 3 or
25 more persons; and

26 (6) for 2009 claim year applications submitted during

1 calendar year 2010, have annual household income of less
2 than (i) \$27,610 for a household containing one person;
3 (ii) less than \$36,635 for a household containing 2
4 persons; or (iii) less than \$45,657 for a household
5 containing 3 or more persons; and

6 (7) as of September 1, 2011, have a maximum household
7 income at or below 200% of the federal poverty level.

8 All individuals enrolled as of December 31, 2005, in the
9 pharmaceutical assistance program operated pursuant to
10 subsection (f) of this Section and all individuals enrolled as
11 of December 31, 2005, in the SeniorCare Medicaid waiver
12 program operated pursuant to Section 5-5.12a of the Illinois
13 Public Aid Code shall be automatically enrolled in the program
14 established by this subsection for the first year of operation
15 without the need for further application, except that they
16 must apply for Medicare Part D and the Low Income Subsidy under
17 Medicare Part D. A person enrolled in the pharmaceutical
18 assistance program operated pursuant to subsection (f) of this
19 Section as of December 31, 2005, shall not lose eligibility in
20 future years due only to the fact that they have not reached
21 the age of 65.

22 To the extent permitted by federal law, the Department may
23 act as an authorized representative of a beneficiary in order
24 to enroll the beneficiary in a Medicare Part D Prescription
25 Drug Plan if the beneficiary has failed to choose a plan and,
26 where possible, to enroll beneficiaries in the low-income

1 subsidy program under Medicare Part D or assist them in
2 enrolling in that program.

3 Beneficiaries under the program established under this
4 subsection shall be divided into the following 4 eligibility
5 groups:

6 (A) Eligibility Group 1 shall consist of beneficiaries
7 who are not eligible for Medicare Part D coverage and who
8 are:

9 (i) a person with a disability and under age 65; or

10 (ii) age 65 or older, with incomes over 200% of the
11 Federal Poverty Level; or

12 (iii) age 65 or older, with incomes at or below
13 200% of the Federal Poverty Level and not eligible for
14 federally funded means-tested benefits due to
15 immigration status.

16 (B) Eligibility Group 2 shall consist of beneficiaries
17 who are eligible for Medicare Part D coverage.

18 (C) Eligibility Group 3 shall consist of beneficiaries
19 age 65 or older, with incomes at or below 200% of the
20 Federal Poverty Level, who are not barred from receiving
21 federally funded means-tested benefits due to immigration
22 status and are not eligible for Medicare Part D coverage.

23 If the State applies and receives federal approval for
24 a waiver under Title XIX of the Social Security Act,
25 persons in Eligibility Group 3 shall continue to receive
26 benefits through the approved waiver, and Eligibility

1 Group 3 may be expanded to include persons with
2 disabilities who are under age 65 with incomes under 200%
3 of the Federal Poverty Level who are not eligible for
4 Medicare and who are not barred from receiving federally
5 funded means-tested benefits due to immigration status.

6 (D) Eligibility Group 4 shall consist of beneficiaries
7 who are otherwise described in Eligibility Group 2 who
8 have a diagnosis of HIV or AIDS.

9 The program established under this subsection shall cover
10 the cost of covered prescription drugs in excess of the
11 beneficiary cost-sharing amounts set forth in this paragraph
12 that are not covered by Medicare. The Department of Healthcare
13 and Family Services may establish by emergency rule changes in
14 cost-sharing necessary to conform the cost of the program to
15 the amounts appropriated for State fiscal year 2012 and future
16 fiscal years except that the 24-month limitation on the
17 adoption of emergency rules and the provisions of Sections
18 5-115 and 5-125 of the Illinois Administrative Procedure Act
19 shall not apply to rules adopted under this subsection (g).
20 The adoption of emergency rules authorized by this subsection
21 (g) shall be deemed to be necessary for the public interest,
22 safety, and welfare.

23 For purposes of the program established under this
24 subsection, the term "covered prescription drug" has the
25 following meanings:

26 For Eligibility Group 1, "covered prescription drug"

1 means: (1) any cardiovascular agent or drug; (2) any
2 insulin or other prescription drug used in the treatment
3 of diabetes, including syringe and needles used to
4 administer the insulin; (3) any prescription drug used in
5 the treatment of arthritis; (4) any prescription drug used
6 in the treatment of cancer; (5) any prescription drug used
7 in the treatment of Alzheimer's disease; (6) any
8 prescription drug used in the treatment of Parkinson's
9 disease; (7) any prescription drug used in the treatment
10 of glaucoma; (8) any prescription drug used in the
11 treatment of lung disease and smoking-related illnesses;
12 (9) any prescription drug used in the treatment of
13 osteoporosis; and (10) any prescription drug used in the
14 treatment of multiple sclerosis. The Department may add
15 additional therapeutic classes by rule. The Department may
16 adopt a preferred drug list within any of the classes of
17 drugs described in items (1) through (10) of this
18 paragraph. The specific drugs or therapeutic classes of
19 covered prescription drugs shall be indicated by rule.

20 For Eligibility Group 2, "covered prescription drug"
21 means those drugs covered by the Medicare Part D
22 Prescription Drug Plan in which the beneficiary is
23 enrolled.

24 For Eligibility Group 3, "covered prescription drug"
25 means those drugs covered by the Medical Assistance
26 Program under Article V of the Illinois Public Aid Code.

1 For Eligibility Group 4, "covered prescription drug"
2 means those drugs covered by the Medicare Part D
3 Prescription Drug Plan in which the beneficiary is
4 enrolled.

5 Any person otherwise eligible for pharmaceutical
6 assistance under this subsection whose covered drugs are
7 covered by any public program is ineligible for assistance
8 under this subsection to the extent that the cost of those
9 drugs is covered by the other program.

10 The Department of Healthcare and Family Services shall
11 establish by rule the methods by which it will provide for the
12 coverage called for in this subsection. Those methods may
13 include direct reimbursement to pharmacies or the payment of a
14 capitated amount to Medicare Part D Prescription Drug Plans.

15 For a pharmacy to be reimbursed under the program
16 established under this subsection, it must comply with rules
17 adopted by the Department of Healthcare and Family Services
18 regarding coordination of benefits with Medicare Part D
19 Prescription Drug Plans. A pharmacy may not charge a
20 Medicare-enrolled beneficiary of the program established under
21 this subsection more for a covered prescription drug than the
22 appropriate Medicare cost-sharing less any payment from or on
23 behalf of the Department of Healthcare and Family Services.

24 The Department of Healthcare and Family Services or the
25 Department on Aging, as appropriate, may adopt rules regarding
26 applications, counting of income, proof of Medicare status,

1 mandatory generic policies, and pharmacy reimbursement rates
2 and any other rules necessary for the cost-efficient operation
3 of the program established under this subsection.

4 (h) A qualified individual is not entitled to duplicate
5 benefits in a coverage period as a result of the changes made
6 by this amendatory Act of the 96th General Assembly.

7 (Source: P.A. 101-10, eff. 6-5-19.)