



Community Health Center Bulletin 125

DATE: December 2025

TO: Community Health Centers Participating in MassHealth

FROM: Mike Levine, Undersecretary for MassHealth

RE: Preventive Behavioral Health Services for Members Younger than 21

Background

Through [Community Health Center Bulletin 113](#), MassHealth established that members younger than age 21 are eligible for preventive behavioral health services if they have a positive behavioral health screen (or, in the case of an infant, a caregiver with a positive postpartum depression screening), even if they do not meet criteria for behavioral health diagnosis and therefore do not meet medical necessity criteria for behavioral health treatment.

Effective January 1, 2026, this bulletin supersedes the billing instructions for preventive behavioral health services within Community Health Center Bulletin 113. All other aspects of Community Health Center Bulletin 113 remain in effect.

Providers and Billing

As specified in Community Health Center Bulletin 113, preventive behavioral health services must be provided by a qualified and credentialed behavioral health clinician or a non-licensed clinician or trainee under supervision.

Beginning January 1, 2026, pursuant to this bulletin, preventive behavioral health services delivered at Community Health Centers (CHCs) should be billed using the following codes.

- T1040: Community Behavioral Health Clinic Service, Per Diem
- T1040-HQ: Group Setting

CHCs continue to be permitted to bill the following codes, as appropriate, for services that do not meet the requirements for billing under T1040 and T1040-HQ. However, it is important to note that CHCs may not submit claims for more than one of these services for the same member on the same date when the services are rendered at the same location. Further, CHCs that bill T1040 or T1040-HQ may not bill any of the following services for the same member on the same date for services rendered at the same location.

- 90832: Psychotherapy with patient and/or family member
- 90834: Psychotherapy with patient and/or family member
- 90846: Family psychotherapy (conjoint psychotherapy) (without patient present)

- 90847: Family psychotherapy (conjoint psychotherapy) (with patient present)
- 90849: Multiple-family group psychotherapy
- 90853: Group psychotherapy (other than multiple-family group)

As specified in Community Health Center Bulletin 113, all claims for preventive behavioral health services must be submitted with modifier EP on the claim. All claims must include the most clinically appropriate ICD diagnosis code, including Z codes that may be used as the primary diagnosis, when clinically appropriate. Preventive behavioral health services provided to the caregiver-child dyad must be billed under the child's MassHealth ID when such services are directly related to the needs of the child and such services are delivered to the infant and caregiver together.

These billing requirements apply to claims for preventive behavioral health services submitted using the T1040 or T1040-HQ, just as they apply to any of the evaluation and management codes listed above.

MassHealth Website

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Questions?

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