

**JOINT COMMITTEE ON FINANCIAL SERVICES  
2025-2026 (194th) BILL SUMMARY**

**Bill No:** H1228

**Title:** AN ACT TO SUPPORT BEHAVIORAL HEALTH PREVENTION FOR CHILDREN

**Sponsor:** Rep. Michael P. Kushmerek (*Fitchburg*)

**Hearing Date:** September 9, 2025

**Reporting Deadline:** November 8, 2025

**Prior History:** None

**Similar Matters:** S802 (O'Connor – Identical)

**CURRENT LAW:**

*M.G.L. c. 32A Contributory Group General or Blanket Insurance for Persons in the Service of the Commonwealth (Group Insurance Commission)*

*M.G.L. c. 175 Insurance*

*M.G.L. c. 176A Non-Profit Hospital Service Corporations (Blue Cross of Massachusetts)*

*M.G.L. c. 176B Medical Service Corporations (Blue Shield of Massachusetts)*

*M.G.L. c. 176G Health Maintenance Organizations (HMOs)*

**SUMMARY:**

This bill would require insurance coverage of preventative behavioral health services for an individual under 21 years old who has a positive behavioral health screening, or, in the case of an infant, a caregiver with a positive post-partum depression screening, even if the individual does not meet criteria for behavioral health diagnosis.

This bill defines “Preventive behavioral health services”, as short-term interventions in supportive group, individual, or family settings that cultivate coping skills and strategies for symptoms of depression, anxiety, and other social and emotional concerns, which may prevent the development of behavioral health conditions for members under 21 years old who have a positive behavioral health screening, or, in the case of an infant, a caregiver with a positive post-partum depression screening, even if the individual does not meet criteria for behavioral health diagnosis.

This bill would require the Group Insurance Commission and commercial health insurers to provide coverage without prior authorization for at least six sessions of preventive behavioral health services provided by a qualified licensed behavioral health clinician, a non-licensed clinician or supervised trainee.

This bill would require coverage of individual, family and group sessions delivered by a behavioral health clinician practicing in an integrated pediatric primary care setting and group sessions when delivered in community-based outpatient and school settings.

Services provided under this bill would be covered without patient cost-sharing, except for plans governed by the Federal Internal Revenue Code that would lose tax-exempt status due to the cost-sharing prohibition.

Carriers would accept an alternative diagnosis code, including a Social Determinants of Health Z-code, as the primary diagnosis code from providers submitting claims.

The division of insurance, in consultation with the office of Medicaid, would develop guidance to implement coverage of these services