2022 Prenatal-to-3 State Policy Roadmap

UTAH

prenatal-to-3 policy IMPACT CENTER
RESEARCH FOR ACTION AND OUTCOMES

VANDERBILT Peabody College

A Roadmap to Strengthen Your State's Prenatal-to-3 System of Care

The Prenatal-to-3 State Policy Roadmap provides guidance to state leaders on the most effective investments states can make to ensure all children thrive from the start. Grounded in the science of the developing child and based on comprehensive reviews of the most rigorous evidence available, the Roadmap provides detailed information on five effective policies and six effective strategies that foster the nurturing environments infants and toddlers need, and that reduce longstanding disparities in access and outcomes among racial and ethnic groups and socioeconomic statuses.

The Roadmap is an annual guide for each state to:

- Assess the wellbeing of its infants and toddlers and prioritize state PN-3 policy goals;
- Identify the evidence-based policy solutions proven to impact PN-3 policy goals;
- Monitor states' adoption and implementation of the 11 effective Roadmap policies and strategies;
- Track the impact that policy changes have on improving the wellbeing of children and families and reducing disparities between racial and ethnic groups.

Adopted and Implemented Policy Count by State

	States	
0 out of 5	GA MS NC SC TX WY	6 States
1 out of 5	AL FL ID NH ND SD TN UT WI	9 States
2 out of 5	AK HI IA KS KY LA MI MT NE NV OH OK PA WV	14 States
3 out of 5	AZ AR CO DE IN MO	6 States
4 out of 5	IL ME MD MN NM NY OR RI VT VA	10 States
5 out of 5	CA CT DC MA NJ WA	6 States

Few States Are Doing It All, But Many Are Moving Forward

Six states have adopted and fully implemented all five effective policies. This year, Connecticut and Washington joined California, the District of Columbia, Massachusetts, and New Jersey in fully implementing all five Roadmap policies.

pn3policy.org/roadmap/ut

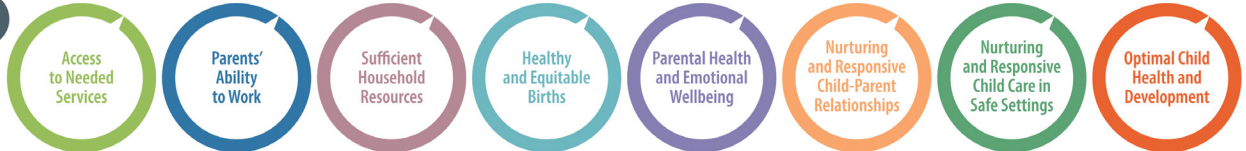## Explore Utah's Roadmap for detailed status, data, and comparisons

Prenatal-to-3 State Policy Roadmap

Effective policies impact PN-3 goals and research provides clear state legislative or regulatory action. **Effective strategies** impact PN-3 goals, but the research does not yet provide precise guidance for state legislative or regulatory action.

● Policy/strategy is aligned with goal in column

▢ Policy/strategy does not align with goal in column (intentionally blank)

GOALS
To achieve a science-driven **PN-3 goal:**

	Access to Needed Services	Parents' Ability to Work	Sufficient Household Resources	Healthy and Equitable Births	Parental Health and Emotional Wellbeing	Nurturing and Responsive Child-Parent Relationships	Nurturing and Responsive Child Care in Safe Settings	Optimal Child Health and Development
POLICIES — Adopt and fully implement the **effective policies** aligned with the goal								
Expanded Income Eligibility for Health Insurance	●		●	●				●
Reduced Administrative Burden for SNAP	●		●					
Paid Family Leave	●	●	●		●	●		●
State Minimum Wage			●	●				●
State Earned Income Tax Credit		●	●	●				
STRATEGIES — Make substantial progress relative to other states toward implementing the **effective strategies** aligned with the goal								
Comprehensive Screening and Connection Programs	●						●	●
Child Care Subsidies	●	●	●					
Group Prenatal Care	●				●			●
Evidence-Based Home Visiting Programs						●		
Early Head Start					●	●	●	●
Early Intervention Services					●			●
OUTCOMES — Measure progress toward achieving the PN-3 goal.	Health Insurance; Adequate Prenatal Care; Access to SNAP; Developmental Screenings	Parental Employment	Child Poverty; Crowded Housing; Food Insecurity	Preterm Births; Infant Mortality	Maternal Mental Health; Parenting Support	Daily Reading; Daily Nurturing Behaviors; Parenting Stress	Child Care Providers Participating in QRIS; Access to EHS	Breastfeeding; Immunizations; Child Maltreatment

To date, states have lacked clear guidance on how to effectively promote the environments in which children can thrive. This Prenatal-to-3 State Policy Roadmap identifies the 11 most effective evidence-based investments that states can make to foster equitable opportunities for infants and toddlers.

Utah Roadmap Summary

Effective Roadmap Policy		2022 Policy Snapshot
✓ Expanded Income Eligibility for Health Insurance	**138%**	Utah is one of 39 states that has expanded Medicaid eligibility under the Affordable Care Act; thus, parents earning up to 138% of the FPL are eligible for Medicaid coverage in UT.
Reduced Administrative Burden for SNAP	**6** months	Utah offers two of the three policies to reduce administrative burden to most families. The state offers simplified reporting and an online application to most families, but only offers 6-month recertification intervals.
Paid Family Leave Program of at Least 6 Weeks	**0** weeks	Utah does not have a statewide paid family leave program, but it does have a paid family leave program for eligible state employees.
State Minimum Wage of $10.00 or Greater	**$7.25**	The current state minimum wage in Utah is $7.25. The state's minimum wage is set by state statute to the federal minimum.
Refundable State Earned Income Tax Credit of at Least 10%	**15%** Nonrefundable	In the last year, Utah enacted a nonrefundable state EITC equal to 15% of the federal credit beginning in tax year 2022.

✓ State has adopted and fully implemented the policy   +1 State has newly adopted and fully implemented the policy since October 1, 2021

Effective Roadmap Strategy		2022 Strategy Snapshot
Comprehensive Screening and Connection Programs	**0**	Families had access to 0 evidence-based comprehensive screening and connection programs in Utah in 2021.
Child Care Subsidies	**75.3%**	Utah's base reimbursement rates cover 75.3% of the true cost of providing base-quality care for infants in center-based care.
Group Prenatal Care	**0**	Utah served pregnant people in 0 group prenatal care sites across the state in 2021.
Evidence-Based Home Visiting Programs	**4.1%**	Utah served an estimated 4.1% of children under age 3 in families with incomes of less than 150% of the FPL in the state's home visiting programs in 2019.
Early Head Start	**8.2%**	Approximately 8.2% of income-eligible infants and toddlers had access to Early Head Start programs in Utah in 2019.
Early Intervention Services	**6.7%**	Utah served 6.7% of its birth-to-3 population in Early Intervention services (Part C) over the course of a year (2020-2021).

⭐ Leading state on effective strategy

Prenatal-to-3 Outcomes to Measure Impact

Policy Goal	Outcome Measure	Worst State		Best State
Access to Needed Services	% Low-Income Women Uninsured	47.8%	25.8% UT	3.8%
	% Births to Women Not Receiving Adequate Prenatal Care	23.3%	10.4% UT	5.1%
	% Eligible Families with Children < 18 Not Receiving SNAP	26.7%	8.7% UT	2.0%
	% Children < 3 Not Receiving Developmental Screening	73.9%	60.5% UT	40.2%
Parents' Ability to Work	% Children < 3 Without Any Full-Time Working Parent	39.0%	16.3% UT	14.8%
Sufficient Household Resources	% Children < 3 in Poverty	33.1%	11.2% UT	8.6%
	% Children < 3 Living in Crowded Households	35.8%	14.6% UT	8.6%
	% Households Reporting Child Food Insecurity	16.7%	6.5% UT	0.8%
Healthy and Equitable Births	% Babies Born Preterm (< 37 Weeks)	14.2%	9.3% UT	7.6%
	# of Infant Deaths per 1,000 Births	8.3	5.3 UT	3.7
Parental Health and Emotional Wellbeing	% Children < 3 Whose Mother Reports Fair/Poor Mental Health	12.6%	12.6% UT	2.3%
	% Children < 3 Whose Parent Lacks Parenting Support	23.5%	14.8% UT	5.4%
Nurturing and Responsive Child-Parent Relationships	% Children < 3 Not Read to Daily	75.4%	70.2% UT	47.7%
	% Children < 3 Not Nurtured Daily	51.7%	43.2% UT	27.6%
	% Children < 3 Whose Parent Reports Not Coping Very Well	45.0%	44.6% UT	20.8%
Nurturing and Responsive Child Care in Safe Settings	% Providers Not Participating in QRIS^	97.6%	7.8% UT	0.0%
	% Children Without Access to EHS	96.2%	91.8% UT	69.0%
Optimal Child Health and Development	% Children Whose Mother Reported Never Breastfeeding	34.0%	11.3% UT	6.0%
	% Children < 3 Not Up to Date on Immunizations	36.0%	21.9% UT	14.2%
	Maltreatment Rate per 1,000 Children < 3	34.7	14.1 UT	1.9