2024 Prenatal-to-3 State Policy Roadmap

SOUTH CAROLINA

prenatal-to-3 policy IMPACT CENTER

VANDERBILT Peabody College

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

Grounded in the science of the developing child and based on comprehensive reviews of the most rigorous evidence available, this Prenatal-to-3 State Policy Roadmap provides 12 evidence-based policy solutions that foster the nurturing environments infants and toddlers need to thrive.

The annual Roadmap includes:

- policy profiles that summarize the research and related impacts on child and family outcomes, and the progress states have made towards full and equitable implementation, and
- state profiles that track implementation of each effective Roadmap policy and strategy, and 18 child and family outcome measures that assess the wellbeing of its infants and toddlers.

Number of Implemented Effective Roadmap Policies by State

4 out of 4	CA, CO, CT, DC, MA, NJ, NY, OR, RI, WA	10 States
3 out of 4	HI, IL, ME, MD, MI, MT, NE, NM, VT, VA	10 States
2 out of 4	AK, AZ, AR, DE, IN, IA, MN, MO, NV, OH, SD	11 States
1 out of 4	FL, ID, KS, KY, LA, NC, NH, ND, OK, PA, UT, WV	12 States
0 out of 4	AL, GA, MS, SC, TN, TX, WI, WY	8 States

State newly implemented at least one effective policy since October 1, 2023.

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

Three states fully implemented four new Roadmap policies and strategies to strengthen their prenatal-to-3 system of care in the last year – Colorado, Montana, and North Carolina.

pn3policy.org/roadmap/sc

Explore South Carolina's Roadmap

We're here to help. Contact us to inquire about our state services at pn3center@vanderbilt.edu or submit a request for our services online at pn3policy.org/state-services.

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

	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
Expanded Income Eligibility for Health Insurance	●		●	●				●
Paid Family and Medical Leave for Families with a New Child	●	●	●	●	●	●		●
State Minimum Wage of $10.00 or Greater		●	●	●	●			●
Refundable State Earned Income Tax Credit of at Least 10%		●	●	●				

STRATEGIES

Make substantial progress relative to other states toward implementing the **effective strategies** aligned with the 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
Reduced Administrative Burden for SNAP	●							
Comprehensive Screening and Connection Programs	●				●			●
Child Care Subsidies	●	●	●					
Group Prenatal Care	●				●			●
Community-Based Doulas	●			●		●		●
Evidence-Based Home Visiting Programs						●		
Early Head Start		●			●	●	●	●
Early Intervention Services					●			●

OUTCOMES

Measure progress toward achieving the 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
Health Insurance Adequate Prenatal Care 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	Access to EHS	Breastfeeding Immunizations Child Maltreatment

Note: More extensive information on each of the eight PN-3 policy goals can be found in the Prenatal-to-3 Policy Clearinghouse.

2024 South Carolina Roadmap Summary

Effective Roadmap Policy		2024 Policy Snapshot
Expanded Income Eligibility for Health Insurance to 138%	67% of the FPL	South Carolina has not expanded Medicaid eligibility under the Affordable Care Act; thus, only parents earning up to 67% of the FPL are eligible for Medicaid coverage in SC.
Paid Family and Medical Leave for Families with a New Child	0 weeks	South Carolina does not have a statewide paid family and medical 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 per hour	The current state minimum wage in South Carolina is $7.25. Because state statutes do not specify a state minimum wage, the minimum wage defaults to the federal minimum.
Refundable State Earned Income Tax Credit of at Least 10%	125% Nonrefundable	South Carolina has a nonrefundable state EITC equal to 125% of the federal EITC. The credit was phased in over 6 years in equal installments of 20.83% until it reached 125% in tax year 2023.

✓ State has adopted and fully implemented the policy +1 State has newly adopted and fully implemented the policy since October 1, 2023

Effective Roadmap Strategy	2024 Strategy Snapshot		
Reduced Administrative Burden for SNAP	○ 12-Month Certification Period	✓ Simplified Income Reporting	✓ Online Case Management
Comprehensive Screening and Connection Programs	○ Statewide Goal	✓ Medicaid Funding	✓ State Funding
★ Child Care Subsidies	✓ Income Eligibility (85% SMI)	✓ Limit Family Copayments	✓ Equitable Reimbursement Rates
Group Prenatal Care	✓ Enhanced Medicaid Reimbursement Rate	○ State Funding	
Community-Based Doulas	○ Medicaid Coverage	○ Fund Training and Credentialing	
Evidence-Based Home Visiting Programs	○ Medicaid Funding		
Early Head Start	○ State Support		
Early Intervention Services	○ Very Low Birthweight Qualification	○ At-Risk Qualification	✓ Eliminate Family Fees

★ State implemented all key policy levers NEW State has met criteria for the lever since October 1, 2023 ✓ State has met the criteria for the lever ○ State has not met the criteria for the lever

Prenatal-to-3 Outcomes to Measure Impact

Policy Goal	Outcome Measure	Worst State		Best State	Rank
Access to Needed Services	% Low-Income Women Uninsured	41.4%	21.9% SC	3.0%	39
	% Births to Women Not Receiving Adequate Prenatal Care	23.8%	17.2% SC	6.4%	38
	% Children < 3 Not Receiving Developmental Screening	72.0%	53.7% SC	40.0%	19
Parents' Ability to Work	% Children < 3 Without Any Full-Time Working Parent	36.7%	28.2% SC	11.9%	44
Sufficient Household Resources	% Children < 3 in Poverty	29.1%	19.9% SC	6.8%	40
	% Children < 3 Living in Crowded Households	33.2%	12.0% SC	6.4%	8
	% Households Reporting Child Food Insecurity	15.0%	8.3%* SC	1.1%	40
Healthy and Equitable Births	% Babies Born Preterm (< 37 Weeks)	14.8%	11.6% SC	8.2%	44
	# of Infant Deaths per 1,000 Births	9.1	6.8 SC	3.3	39
Parental Health and Emotional Wellbeing	% Children < 3 Whose Mother Reports Fair/Poor Mental Health	11.5%	6.5% SC	3.3%	23
	% Children < 3 Whose Parent Lacks Parenting Support	26.4%	14.6% SC	5.7%	25
Nurturing and Responsive Child-Parent Relationships	% Children < 3 Not Read to Daily	71.5%	61.5% SC	42.0%	31
	% Children < 3 Not Nurtured Daily	50.9%	46.7% SC	28.0%	46
	% Children < 3 Whose Parent Reports Not Coping Very Well	45.4%	28.3% SC	26.3%	5
Nurturing and Responsive Child Care in Safe Settings	% Children Without Access to EHS	95.3%	92.5% SC	45.3%	45
Optimal Child Health and Development	% Children Whose Mother Reported Never Breastfeeding	32.1%	22.3% SC	6.1%	45
	% Children < 3 Not Up to Date on Immunizations	38.8%	27.9% SC	12.9%	28
	Maltreatment Rate per 1,000 Children < 3	29.9	23.9 SC	2.2	44

Data marked with a * should be interpreted with caution. For additional information regarding calculation details, data quality, and source data please refer to Methods and Sources.