



# 2025 Prenatal-to-3 State Policy Roadmap



### 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 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 19 child and family outcome measures that assess the wellbeing of its infants and toddlers.

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

Although no states newly implemented effective Roadmap policies in the last year, many states made progress to improve access to effective policies and strategies.

#### Number of Implemented Effective Roadmap Policies by State



State newly implemented at least one effective policy since October 1, 2024.

#### Explore Kansas's Roadmap.

pn3policy.org/roadmap/ks

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

Align Policy Goals with Effective Policy Solutions Proven to Impact Outcomes

GOALS  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  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							
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							
OUTCOMES  Health Insurance Adequate Prenatal Care Developmenta Screenings	Employment	Child Poverty Crowded Housing Homelessness 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

## 2025 Kansas Roadmap Summary

Explore a summary of your state's progress implementing effective policies and strategies.

Effective Roadmap Policy	2025 Policy Snapshot							
Expanded Income Eligibility for Health Insurance to 138%		38% of the FPL	Care Act; thus,	nsas has not expanded Medicaid eligibility under the Affordable re Act; thus, only parents earning up to 38% of the FPL are gible for Medicaid coverage in KS.				
Paid Family and Medical Leave for Families with a New Child		Kansas does not have a statewide paid family and medical le program, but it does have a paid family leave program for eli state employees.						
State Minimum Wage of \$10.00 or Greater		\$7.25 The current state minimum wage in Kansas is \$7.25, as designated by state statute.						
Refundable State Earned Income Tax Credit of at Least 10%  Kansas has a refundable state EITC equal to 17% of the federal credit.								
State has adopted and fully implemented the policy State has newly adopted and fully implemented the policy since October 1, 2024								
Effective Roadmap Strategy			2	025 Strategy Snapsho	t			
Reduced Administrative Burden for SNAP		O 12-moi Certific	nth cation Period	Simplified Income Reporting	Online Case  Management			
Comprehensive Screening and Connection Programs		Statew	ride Goal	Medicaid Funding	State Funding			
Child Care Subsidies		Income (85% S	e Eligibility SMI)	Limit Family Copayments	Equitable Reimbursement Rates			
Group Prenatal Care		( )	ced Medicaid ursement Rate	State Funding				
Community-Based Doulas		Medica Covera		Fund Training and Credentialing				
Evidence-Based Home Visiting Programs		O Medica Fundin						
Early Head Start		State S	Support					
Early Intervention Services		O Very Lo	ow Birthweight cation	At-Risk Qualification	Eliminate Family Fees			
State implemented all key policy levers  State has met criteria for the lever since		bber 1, 2024		has met the criteria for the leven				

Policy Goal	Outcome Measure	Worst State		Best State	Rank
Access to Needed Services	% Low-Income Women Uninsured	40.7%	19.5% KS	5.5%	35
	% Births to Women Not Receiving Adequate Prenatal Care	25.9% •	10.69 KS	6.2%	8
	% Children < 3 Not Receiving Developmental Screening	71.8% •	62.1% KS	41.3%	38
Parents' Ability to Work	% Children < 3 Without Any Full-Time Working Parent	33.0%	20.6% KS	12.3%	12
Sufficient Household Resources	% Children < 3 in Poverty	26.7%	13.2% KS	6.2%	21
	% Children < 3 Living in Crowded Households	35.3% •	15.6% KS	7.6%	22
	% Children < 3 Experiencing Homelessness	9.1%	1.9% KS	1.1%	10
	% Households Reporting Child Food Insecurity	16.2%	5.5% KS	1.6%	21
Healthy and Equitable Births	% Babies Born Preterm (< 37 Weeks)	15.0% •	10.5% KS	7.7%	30
	# of Infant Deaths per 1,000 Births	8.9	5.2 KS	2.9	19
Parental Health and Emotional Wellbeing	% Children < 3 Whose Mother Reports Fair/Poor Mental Health	11.9% •	9.5% KS	2.3%	39
	% Children < 3 Whose Parent Lacks Parenting Support	24.4%	12.9% KS	6.2%	21
Nurturing and Responsive Child- Parent Relationships	% Children < 3 Not Read to Daily	71.2% •	58.0% KS	38.6%	22
	% Children < 3 Not Nurtured Daily	49.9%	40.1% KS	27.7%	28
	% Children < 3 Whose Parent Reports Not Coping Very Well	44.1% •	35.7% KS	27.1%	25
Nurturing and Responsive Child Care in Safe Settings	% Children Without Access to EHS	95.5%	87.9% KS	30.0%	24
Optimal Child Health and Development	% Children Whose Mother Reported Never Breastfeeding	30.3%	16.7% KS	6.9%	27
	% Children < 3 Not Up to Date on Immunizations	39.6%	30.2% KS	9.9%	28
	Maltreatment Rate per 1,000 Children < 3	28.1	•	3.5 2.0	4

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.





