



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 Vermont's Roadmap.

pn3policy.org/roadmap/vt

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 Service	ed Ability	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 Insur Adequat Prenatal C Developme Screening	e Employment are ntal	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 Vermont Roadmap Summary

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

As of September 30, 2025. See Methods and Sources for additional information at https://pn3policy.org/methods-and-sources/

Effective Roadmap Policy		2025 Policy Snapshot					
Expanded Income Eligibility for Health Insurance to 138%	138% of the FPL						
Paid Family and Medical Leave for Families with a New Child	O weeks	Vermont does not have a statewide paid family and medical leave program, but it does have a paid family leave program for eligible state employees and private employees may opt in.					
State Minimum Wage of \$10.00 or Greater	\$14.01 The current state minimum wage in Vermont is \$14.01 and is adjusted annually for inflation.						
Refundable State Earned Income Tax Credit of at Least 10%	Income Tax Credit of at						
State has adopted and fully implemen	ted the policy	State has newly a	dopted and fully implemented t	he policy since October 1, 2024			
Effective Roadmap Strategy		2	025 Strategy Snapsho	t			
Reduced Administrative Burden for SNAP	2 12-mor	nth ation Period	Simplified Income Reporting	Online Case Management			
Comprehensive Screening and Connection Programs	⊘ Statew	ide Goal	Medicaid Funding	State Funding			
Child Care Subsidies	⊘ Income (85% 5	e Eligibility SMI)	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	Medica Fundin						
Early Head Start	State S	Support					
Early Intervention Services	Very Lo Qualific	ow Birthweight cation	At-Risk Qualification	Eliminate Family Fees			
State implemented all key policy levers State has met criteria for the lever since			has met the criteria for the lever has not met the criteria for the le				

Policy Goal	Outcome Measure	Worst State		Best State	Rank
Access to Needed Services	% Low-Income Women Uninsured	40.7%	•	6.4% VT 5.5%	3
	% Births to Women Not Receiving Adequate Prenatal Care	25.9% •	•	6.2% VT 6.2%	1
	% Children < 3 Not Receiving Developmental Screening	71.8%	•	46.9% VT 41.3%	7
Parents' Ability to Work	% Children < 3 Without Any Full-Time Working Parent	33.0%	•	12.9%* VT	2
Sufficient Household Resources	% Children < 3 in Poverty	26.7%	•	9.9%* VT 6.2%	6
	% Children < 3 Living in Crowded Households	35.3%	•	7.6% VT 7.6%	1
	% Children < 3 Experiencing Homelessness	9.1%	2.2% VT	1.1%	17
	% Households Reporting Child Food Insecurity	Uni	reliable		
Healthy and Equitable Births	% Babies Born Preterm (< 37 Weeks)	15.0%	•	7.7% VT 7.7%	1
	# of Infant Deaths per 1,000 Births	8.9	•	3.2 VT 2.9	2
Parental Health and Emotional Wellbeing	% Children < 3 Whose Mother Reports Fair/Poor Mental Health	11.9% • 8.1% VT	•	2.3%	34
	% Children < 3 Whose Parent Lacks Parenting Support	24.4%	•	9.4% VT 6.2%	3
Nurturing and Responsive Child- Parent Relationships	% Children < 3 Not Read to Daily	71.2%	•	38.6% VT	1
	% Children < 3 Not Nurtured Daily	49.9%	•	28.4% VT 27.7%	2
	% Children < 3 Whose Parent Reports Not Coping Very Well	44.1%	34.2% VT	27.1%	19
Nurturing and Responsive Child Care in Safe Settings	% Children Without Access to EHS	95.5% •	•	63.4% •> 30.0% VT	2
Optimal Child Health and Development	% Children Whose Mother Reported Never Breastfeeding	30.3%	•	8.6% VT 6.9%	5
	% Children < 3 Not Up to Date on Immunizations	39.6%	•	20.3% VT 9.9%	4
	Maltreatment Rate per 1,000 Children < 3	28.1	6.8 VT	2.0	12

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.





