

2026 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

Four states fully implemented new Roadmap policies to strengthen their prenatal-to-3 system of care in the last year — Delaware, Maine, Minnesota, and Pennsylvania.

Number of Implemented Effective Roadmap Policies by State

4 out of 4	CA	CO	CT	DC	ME	MA	NJ	NY	OR	RI	WA	11 States
3 out of 4	DE	HI	IL	MD	MI	MN	MT	NE	NM	VT	VA	11 States
2 out of 4	AK	AZ	AR	IN	IA	MO	NV	OH	PA	SD		10 States
1 out of 4	FL	ID	KS	KY	LA	NH	NC	ND	OK	UT	WV	11 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, 2025

Explore New Hampshire's Roadmap.

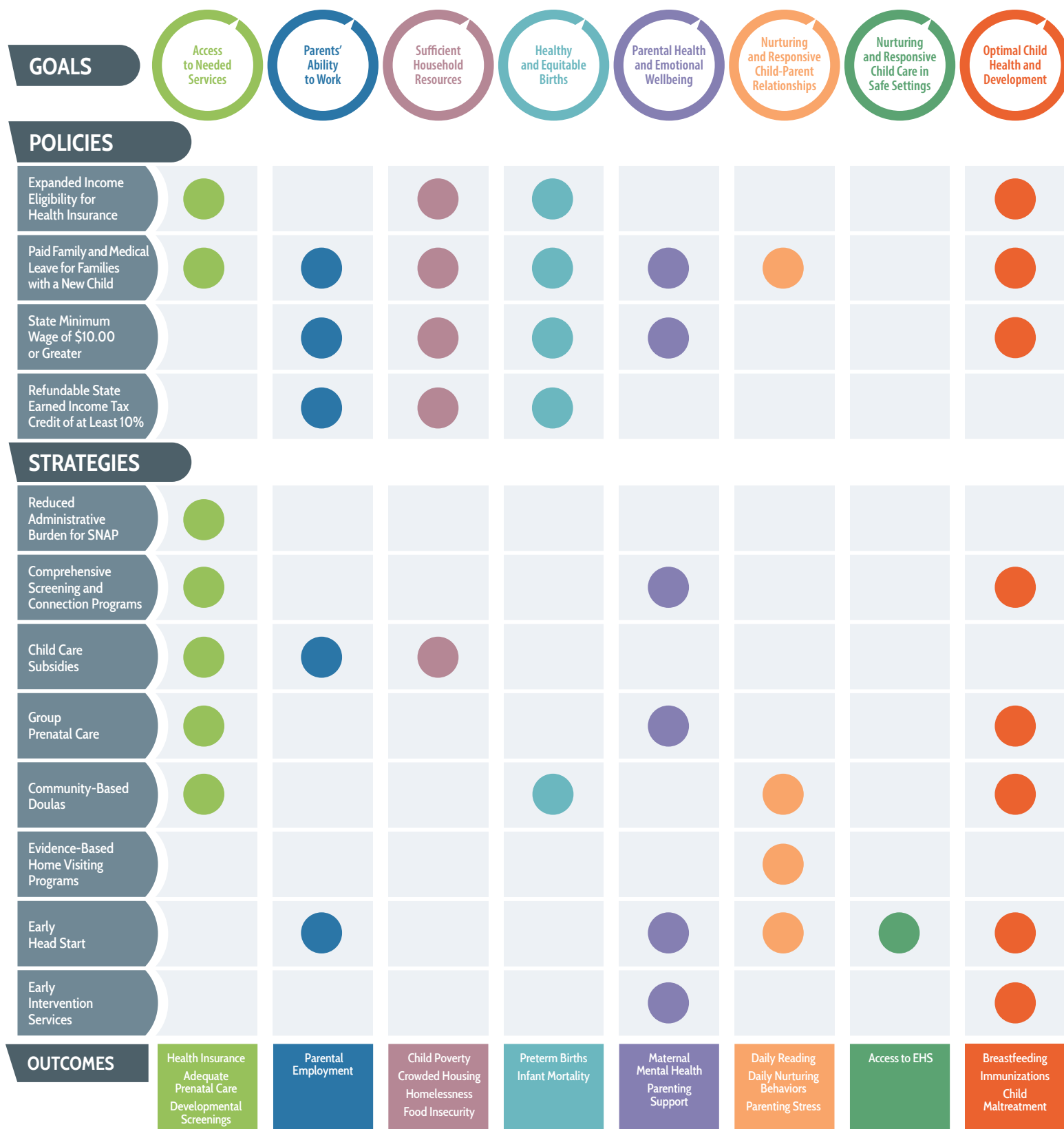
pn3policy.org/roadmap/nh

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



2026 New Hampshire Roadmap Summary

NEW HAMPSHIRE

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

As of September 1, 2026. See Methods and Sources for additional information at <https://pn3policy.org/methods-and-sources/>

Effective Roadmap Policy		2026 Policy Snapshot
 Expanded Income Eligibility for Health Insurance to 138%	138% of the FPL	New Hampshire has expanded Medicaid eligibility under the Affordable Care Act; thus, parents earning up to 138% of the FPL are eligible for Medicaid coverage in NH.
Paid Family and Medical Leave for Families with a New Child	0 weeks	New Hampshire does not have a statewide paid family and medical leave program, but it does have a family leave program for eligible state employees and a voluntary program for other employees.
State Minimum Wage of \$10.00 or Greater	\$7.25 per hour	The current state minimum wage in New Hampshire is \$7.25. The state's minimum wage is set by statute to the federal minimum.
Refundable State Earned Income Tax Credit of at Least 10%	No EITC	New Hampshire does not have a state EITC, and the state does not have an income tax, which is the typical mechanism used to finance and provide administrative structure for a state EITC.
 State has adopted and fully implemented the policy		 State has newly adopted and fully implemented the policy since October 1, 2025
Effective Roadmap Strategy		2026 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	 State has met the criteria for the lever	
 State has met criteria for the lever since October 1, 2025	 State has not met the criteria for the lever	

Policy Goal	Outcome Measure	Worst State		Best State	Rank
Access to Needed Services	% Low-Income Women Uninsured	41.8%	16.0%* NH	1.5%	23
	% Births to Women Not Receiving Adequate Prenatal Care	26.2%	7.8% NH	6.6%	3
	% Children < 3 Not Receiving Developmental Screening	75.2%	49.1% NH	39.1%	14
Parents' Ability to Work	% Children < 3 Without Any Full-Time Working Parent	36.0%	16.5%* NH	14.6%	3
Sufficient Household Resources	% Children < 3 in Poverty	28.8%	8.4% NH	8.4%	1
	% Children < 3 Living in Crowded Households	35.3%	7.0% NH	6.1%	2
	% Children < 3 Experiencing Homelessness	9.1%	2.4% NH	1.1%	25
	% Households Reporting Child Food Insecurity	17.0%	3.8%* NH	2.8%	6
Healthy and Equitable Births	% Babies Born Preterm (< 37 Weeks)	15.0%	7.9% NH	7.9%	1
	# of Infant Deaths per 1,000 Births	9.7	3.0 NH	3.0	1
Parental Health and Emotional Wellbeing	% Children < 3 Whose Mother Reports Fair/Poor Mental Health	12.7%	3.3% NH	3.3%	1
	% Children < 3 Whose Parent Lacks Parenting Support	26.0%	10.4% NH	5.4%	9
Nurturing and Responsive Child-Parent Relationships	% Children < 3 Not Read to Daily	74.1%	51.1% NH	40.2%	9
	% Children < 3 Not Nurtured Daily	50.2%	34.4% NH	24.9%	8
	% Children < 3 Whose Parent Reports Not Coping Very Well	49.3%	34.9% NH	29.6%	19
Nurturing and Responsive Child Care in Safe Settings	% Children Without Access to EHS	95.9%	87.4% NH	59.1%	21
Optimal Child Health and Development	% Children Whose Mother Reported Never Breastfeeding	29.3%	12.7% NH	6.0%	26
	% Children < 3 Not Up to Date on Immunizations	44.6%	17.7% NH	14.9%	3
	Maltreatment Rate per 1,000 Children < 3	27.4	8.4 NH	1.8	15

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.