EDVI | Early Detection of Vision Impairments for Children Act

EDVI Act Congressional Resource Guide

The **Early Detection of Vision Impairments for Children (EDVI) Act (H.R. 2527)** would create the first federal program dedicated to children's vision and eye health. It is bipartisan legislation co-led by the co-chairs of the Congressional Vision Caucus, Rep. Marc Veasey (TX-33) and Rep. Gus Bilirakis (FL-12).

This guide brings together an overview of the legislation, state-level children's vision data, background materials, the bill text and information about organizations supporting the EDVI Act.

Our Request: Please co-sponsor H.R. 2527.

Why It Matters

More than 1 in 4 children in the U.S., roughly 19.6 million, have a vision problem that needs treatment. Yet there is no federal program focused on children's vision, even though we have programs that address other priorities, such as children's hearing and oral health. Untreated vision problems can hold kids back in school and lead to permanent vision loss.

State systems are uneven. As of 2024, only 39 states require vision screening for school-age children, and just 26 require it for preschool-age children. Even where screening happens, many states lack the follow-up to make sure a child who fails a screening actually gets to an eye exam and treatment.

What The EDVI Act Would Do

Once passed and funded, the Health Resources and Services Administration (HRSA) would award grants to states and communities to build coordinated systems of care for children's vision that emphasize the following: early detection such as screening, referral, treatment and assistive services, and follow-up. The Centers for Disease Control and Prevention (CDC) would run a national technical assistance center to support this work, and the bill improves data collection so states can find and close gaps in access.

The EDVI Act is modeled on the Early Hearing Detection and Intervention (EHDI) program, which has sharply increased screening and follow-up care for infants with hearing loss since 1999. By replicating what works for children's hearing, we hope to achieve the same thing for children's vision.

The EDVI Act is endorsed by 115+ organizations representing patients, providers, families, public health, schools, and community groups. See the current list of EDVI Act supporters

Prevent Blindness

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EDVI Early Detection of Vision Impairments for Children Act

H.R. 2527, the **Early Detection of Vision Impairments for Children (EDVI) Act**, introduced in March 2025, is bipartisan legislation, co-sponsored by **Congressional Vision Caucus (CVC)** co-chairs, **U.S. Representative Gus Bilirakis (FL-12)**, and **U.S. Representative Marc Veasey (TX-33)**. The EDVI Act seeks to improve the vision and eye health of children across the United States by providing resources to states and communities to establish or improve systems of care for children's vision and eye health through early detection and intervention models for vision screening, referrals to eye care, and follow-up to eye care treatment.

State-Based Information on Children's Vision and Eye Health

Scan the QR code with your smart phone to learn more about children's vision and eye health in your home state as based on data collected in the National Survey for Children's Health.

Background:

A child's vision develops and changes from birth through childhood. Thus, a child should be screened regularly, referred to eye care, and receive any needed treatment and follow-up to ensure vision problems are caught and treated early. Despite the presence of numerous public health programs that support early childhood development, including children's hearing and oral health, ***there is currently no federally funded program in the United States that specifically addresses children's vision*** or that fosters a cohesive and equitable system of eye health for children—even as early detection and intervention for vision disorders in children are part of national goals and health care standards. According to the Centers for Disease Control and Prevention, **more than one in every four children in America, or roughly 19.6 million**, have a vision problem requiring treatment. If left untreated, common vision disorders in childhood, such as amblyopia (lazy eye), strabismus (crossed eyes), myopia (nearsightedness), or hyperopia (farsightedness), may in the short term, impede academic progress and development and, in the long term, lead to permanent vision impairment or blindness that follows a child into adulthood and affect independence, economic productivity, and quality of life. Passing this important legislation would indicate Congress's commitment to protecting the eyesight of our nation's children and preventing avoidable vision loss and blindness in children.

The State of Children's Vision and Eye Health:

States and communities are best positioned to implement a public health system of care for children's vision and eye health through community, early learning, and school-based health approaches. According to the National Center for Children's Vision and Eye Health, significant disparities exist in children's vision and eye health outcomes and access to eye care across the US. Professional guidelines and state laws can vary widely in approaches and protocols and be outdated. Activities to improve surveillance, vision screening and referral practices, access to professional eye care, and coordination with the child's medical home are critical steps for improving children's vision and eye health. However, many states and communities lack the resources to carry out these activities or conduct surveillance needed to identify and address disparities in eye care access. Thus, many children are not receiving timely and needed eye care to diagnosis and treat vision problems.

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Summary of Legislation:

H.R. 2527, the Early Detection of Vision Impairments in Children Act (EDVI) will establish state and community based EDVI programs across the United States to address children's vision and eye health. The EDVI Act would establish the first national-level program to specifically address children's vision and eye health. The EDVI Act models the bipartisan success of the **Early Hearing Detection and Intervention (EHDI) program** that has **drastically increased** the rates of screening and referral to care for infants with hearing loss since 1999. Like the EHDI program, the EDVI Act will provide states and communities with grant funding to improve, update, and modernize state and community approaches to children's vision and eye health.

Under the EDVI Act, the Health Resources and Services Administration (HRSA) at the U.S. Department of Health and Human Services, will award grants and cooperative agreements for states, communities, and tribes to:

- Implement approaches (such as vision screenings) for the early detection of vision concerns in children, referrals for eye exams, and follow-up mechanisms;
- identify barriers in access to eye care;
- reduce disparities in eye health; and/or
- develop state-based data collection, surveillance, and performance improvement systems.

Resources will also be made available through the Centers for Disease Control and Prevention to establish a national level technical assistance center to provide guidance to any state or community implementing children's vision programs and to advance population health research priorities in children's vision.

To Co-Sponsor the EDVI Act please contact:

Rep. Gus Bilirakis (R)
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Rep. Marc Veasey (D)
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Over **115 organizations** that represent patients, providers, families and children, public health professionals, education and school health professionals, and community-based groups and have endorsed the EDVI Act.

For children, the path to eye care is not always clear.



For more information about the EDVI Act, please contact:

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Prevent Blindness
Our Vision Is Vision.



EDVI | Early Detection of Vision Impairments for Children Act

IN GENERAL.
Amends the Public Health Service Act to improve children's vision and eye health through grants to states, territories, and Tribal organizations and the provision of technical assistance.

SECTION 1. Short Title
Names the legislation as the "Early Detection of Vision Impairments for Children Act of 2025."

SECTION 2. Statewide early vision detection and intervention programs and systems related to children's vision and eye health
Amends Part Q of Title III of the PublicHealth Service Act (42 U.S.C.280 et seq.) with addition of: "Sec. 399Z-3. Statewide early vision detection and intervention programs and systems related to children's vision and eye health."

SECTION 2 (a)(1). Grants or Cooperative Agreements
Authorizes the Secretary of Health and Human Services, acting through the Administrator of the Health Resources and Services Administration, to make available awards of grants or cooperative agreements to eligible entities to develop and implement statewide early detection and intervention programs and systems related to children's vision and eye health.

SECTION 2 (a)(2). Eligibility
Establishes that, to receivea grant or cooperative agreement as authorized under Section 2(a)(1), an entity shall be a state, territory, Indian tribe or Tribal organization, or Urban Indian organization including a state or community department of children and families, health or public health, or a state educational agency and shall apply.

SECTION 2 (a)(3). Use of Awards
Outlines that amount provided through grants or cooperative agreements shall be used for three or more of the following activities:

- Implementing early detection practices (such as vision screening) and intervention initiatives for the purpose of identifying vision concerns in children as they engage in the medical, home, public educational, or early learning setting, promoting referrals to eye care, and promoting the use of evidence-based and age-appropriate standards guided by nationally recognized and uniform guidelines.
- Developing an integrated approach to State-level data collection and management to advance State-based performance improvement systems and uniform children's vision and eye health guidelines across relevant and appropriate State-level jurisdictions.
- Identifying strategies to improve eye health outcomes, expand access to care, and reduce health disparities for the detection, diagnosis, and treatment of ocular disease and eye conditions in children who experience barriers to eye care from rural and underserved populations.

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- Raising awareness by providing the public, including families, guardians (permanent, legal, or temporary), family or community caregivers, and early learning settings with children's vision and eye health information that is accurate, accessible, culturally and linguistically competent, comprehensive, up-to-date, and evidence-based or evidence-informed.
- Establishing a coordinated public health system for vision care and eye health, including early detection, referral to eye care, diagnosis and intervention, and follow-up for children.
- Providing referrals to wrap-around vision services, as necessary, for a future of independent living.

SECTION 2 (a)(4). Collaboration with Necessary Community and State Partners
Provides that an eligible entity that receives amounts shall, for the purpose of program and policy development, collaboration, and improvement, consult necessary community and state partners, including state agencies responsible for the administration of title V of Social Security Act (the Maternal and Child Health Block Grant Program), title XIX of such Act (the Medicaid Early Periodic Screening, Diagnosis, and Treatment Program), title XXI of such Act (the State Children's Health Insurance Program), and parts B and C of the Individuals with Disabilities Education Act, the Indian Health Service, and consumer groups.

SECTION 2 (a)(5). Evaluation and Report
Instructs that the eligible entity having received an award or grant shall submit an annual report to the Secretary describing activities carried out with award during the period of performance including outcomes of such activities, and a demonstration of whether funding recipients have met project goals. These reports shall be publicly available.

SECTION 2 (b)(1) Technical Assistance
Technical assistance shall be provided to states, territories, and Tribal organizations.

SECTION 2 (b)(2) Grants
The Secretary, acting through the Centers for Disease Control and Prevention, shall award grants or cooperative agreements to provide technical assistance to eligible entities to:

- Develop, maintain, and improve data collection systems related to children's vision screening, evaluation, diagnosis, and intervention services,
- Disseminate information for stakeholders, including States and local governments, Indian Tribes, Tribal organizations, Urban Indian organizations, public health departments, and nonprofit organizations, to launch effective strategies and interventions in preventing and treating childhood vision disorders,
- Conduct applied research related to early vision screening and intervention programs and outcomes,
- Ensure quality monitoring of vision screening, evaluation, and intervention programs and systems; and
- Assist eligible entities in coordinating best practices and maintaining national goals related to vision and eye health.

SECTION 2 (b)(3) Evaluation
An entity, having received an award or contract, shall within 4 years after enactment of the Act evaluate activities conducted and submit a report to the Secretary on outcomes, costs, and program effectiveness and other information as requested by the Secretary. This report will also be submitted to Congress.

SECTION 2 (b)(4) Eligibility
Establishes the eligibility criteria for an entity to receive a grant or cooperative agreement to carry out technical assistance activities to be a public or nonprofit private organization or institution with expertise, or demonstrated proficiency, in developing systems-based approaches to children's vision and eye health.

SECTION 2 (c) Coordination and Consultation
Establishes that the Secretary of HHS shall coordinate with the Health Resources and Services Administration, the Centers for Disease Control and Prevention, the Centers for Medicare & Medicaid Services, the Administration for Communities and Families, the Indian Health Service, and the Department of Education and including stakeholder engagement at federal, state, and tribal levels, the private sector including consumer groups, medical, and other health or education or child-serving nonprofit organizations.

SECTION 2 (d) Definitions
Provides definitions for purposes of the Act for Indian Tribe, State educational agency, tribal organization, and urban Indian organization.

SECTION 2 (e) Authorization of Appropriations
Authorizes $5,000,000foreach fiscal years 2026 –2030 related to grants and cooperative agreements and $5,000,000 for each fiscal years 2026 – 2030 for activities related to technical assistance.

For the most comprehensive overview and additional information on the EDVI Act, please visit congress.gov