
VIRGINIA STATE BUDGET

1996 Session

Budget Bill - SB30 (Introduced)

Bill Order » Office of Education » Item 169

University of Virginia

Item 169	First Year - FY1997	Second Year - FY1998
Educational and General Programs (10000)	\$249,184,764	\$255,212,564
Higher Education Instruction (100101)	\$131,583,763	\$137,452,811
Higher Education Research (100102)	\$5,702,617	\$5,702,617
Higher Education Public Services (100103)	\$455,070	\$455,070
Higher Education Academic Support (100104)	\$55,979,392	\$55,979,392
Higher Education Student Services (100105)	\$9,637,110	\$9,637,110
Higher Education Institutional Support (100106)	\$18,079,248	\$18,079,248
Operation and Maintenance of Plant (100107)	\$27,747,564	\$27,906,316
Fund Sources:		
General	\$107,615,205	\$111,491,372
Higher Education Operating	\$141,569,559	\$143,721,192

Authority: §§ [23-62](#) through [23-85](#), Code of Virginia.

A.1. This appropriation includes an amount not to exceed \$2,502,102 the first year and \$2,559,460 the second year from the general fund for the operation of the Family Practice Residency Program and Family Practice medical student programs. General Internal Medicine and General Pediatrics Residency Programs and related undergraduate medical student programs are considered low-revenue producing because of their location in underserved and rural locations. Consistent with the recommendation of the Council on Graduate Medical Education, Family Practice residencies shall represent 50 percent of the low-revenue residencies and general internal medicine and general pediatrics shall represent 50 percent. Further, it is the intent of the General Assembly that Medicare, Medicaid and Indigent Care funding, in combination with other revenues, should ultimately fund 75 percent of these programs. This objective should be implemented over a six-year period. This appropriation for Family Practice Programs, whether ultimately implemented by contract, agreement or other means, is considered to be a grant.

2. The University shall report by July 1 annually to the Department of Planning and Budget an operating plan for the Family Practice Residency Program.

3. The University of Virginia, in cooperation with the Virginia Commonwealth University/Medical College of Virginia, shall establish elective Family Practice Medicine experiences in Southwest Virginia for both students and residents.

B. This appropriation includes \$359,800 the first year and \$359,800 the second year from the general fund for the

Virginia Foundation for Humanities and Public Policy.

C. Out of this appropriation shall be expended an amount estimated at \$906,083 from the general fund and \$460,398 from nongeneral funds the first year and \$906,083 from the general fund and \$460,398 from nongeneral funds the second year for the educational telecommunications project to provide graduate engineering education, subject to a plan approved by the State Council of Higher Education for Virginia. From these funds, the institution shall pay the Department of Information Technology for transponder and telecommunications services.

D. This appropriation includes \$350,000 the first year and \$350,000 the second year from the general fund, and \$350,000 the first year and \$350,000 the second year from nongeneral funds, are provided for the independent Virginia Institute of Government at the University of Virginia Center for Public Service.

E. Out of the general fund amounts appropriated, \$113,000 the first year and \$113,000 the second year from the general fund are provided for the Virginia State Climatologist Office.

F. 1. This appropriation includes \$153,606 the first year and \$153,606 the second year from the general fund and at least \$142,929 the first year and at least \$142,929 the second year in nongeneral funds for the Virginia Statewide Center for the Advancement of Generalist Medicine's portion of the "generalist initiative" to increase the number of medical school graduates entering generalist medical fields. Of these appropriations, \$100,000 the first year and \$100,000 the second year from the general fund are contingent upon the receipt of matching grants of like amounts.

2. The Virginia Statewide Center for the Advancement of Generalist Medicine shall oversee the expansion of generalist residency programs in Southwest Virginia.

G.1. This appropriation includes \$713,616 from the general fund and at least \$612,418 in nongeneral funds the first year and \$713,616 from the general fund and at least \$612,418 in nongeneral funds the second year for the medical school's portion of the "generalist initiative" to increase the number of medical school graduates entering generalist medical fields. Of these appropriations from the general fund, \$300,000 the first year and \$300,000 the second year are contingent upon the receipt of matching grants of like amounts.

2. The amounts appropriated shall be used for recruitment and admissions, curriculum enhancement and graduate medical education.

3. It is the intent of the General Assembly that the goals of the Virginia Generalist Initiative shall be as follows:

a. By the year 2000, at least 50 percent of Virginia medical school graduates shall enter generalist practice;

b. By the year 2000, at least 50 percent of Virginia medical school graduates entering generalist practice shall enter practice in Virginia upon completion of residency training;

c. Output of Virginia graduate medical education programs will be consistent with the 50 percent goal;

d. Virginia academic health centers, in cooperation with Virginia's "Practice Sights Initiative," will actively contribute to strategies for eliminating generalist physician shortages in medically underserved areas of Virginia.

4. Further, it is the intent of the General Assembly that:

a. Generalist initiative recruitment and admissions programs shall be designed to increase the number of Virginia medical students with an interest in generalist medicine from medically underserved areas of the Commonwealth; and,

b. Generalist initiative education programs shall be designed to increase educational experiences in community settings in general, and in medically underserved communities in particular, for both medical students and generalists.