

The impact of nurse practitioner-led primary care on quality and cost for Medicaid-enrolled patients in states with pay parity: Article review

Anisha Khadka Karki

DeWitt School of Nursing, Stephen F. Austin State University

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Dr. Sheree Barrios

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Article Review

Advanced practice nurses face daily economic challenges related to reimbursement, as well as the need for precise documentation and coding. Harrison et al. (2023) examined the quality and cost of primary care provided by nurse practitioners compared to that of physicians. This study took place in 14 states where nurse practitioners receive the same payment rates as doctors under Medicaid, a policy called pay parity. The study focuses on Medicaid data from 2012 to 2013, examining adults with diabetes and children with asthma treated by either primary care nurse practitioners or physicians. The study assesses the impact of nurse practitioner-led care on quality, costs, hospitalization rates, overall treatment costs, and referral rates. For adults with diabetes, nurse practitioner-led care demonstrated equivalent quality and incurred similar costs compared to physician-led care. The outcomes for children with asthma were mixed. However, nurse practitioner-led care was associated with lower utilization of appropriate medications and higher rates of asthma-related emergency department visits; hospitalization rates remained comparable. The costs for children receiving nurse practitioner-led care were lower, suggesting potential economic benefits in this area. Overall, the study's findings highlighted the effectiveness of nurse practitioner-led care in various patient populations when the pay equity rate is equal to that of physicians. The overall findings suggest that increasing nurse practitioner-led primary care could be cost-neutral or even cost-saving, even with pay parity (Harrison et al., 2023).

The study emphasizes that pay parity is essential for ensuring equitable and high-quality healthcare delivery by nurse practitioners. The findings suggest that when financial barriers, such as unequal pay, are removed, nurse practitioners can deliver care of comparable quality to that offered by physicians while also potentially achieving cost savings (Harrison et al., 2023).

In states without pay parity, lower reimbursement rates for nurse practitioners can lead practices to underinvest in necessary resources, choose cheaper alternatives, and struggle to attract and retain qualified nurse practitioners. This financial pressure may indirectly affect the quality of patient care by affecting diagnostic choices, treatment options, and overall access to care. This emphasizes the importance of achieving pay parity for nurse practitioners to address the issue of reimbursement among advanced nurse practitioners, ensuring equitable and high-quality healthcare delivery across all states. Lawmakers, the public, and various organizations should work towards the common goal of providing quality care and equitable care to the entire population.

References

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