Influence of Nurse Practitioner Practice Restrictions on Chronic Disease Disparities

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T F T C G R
U P S N
C H O P R

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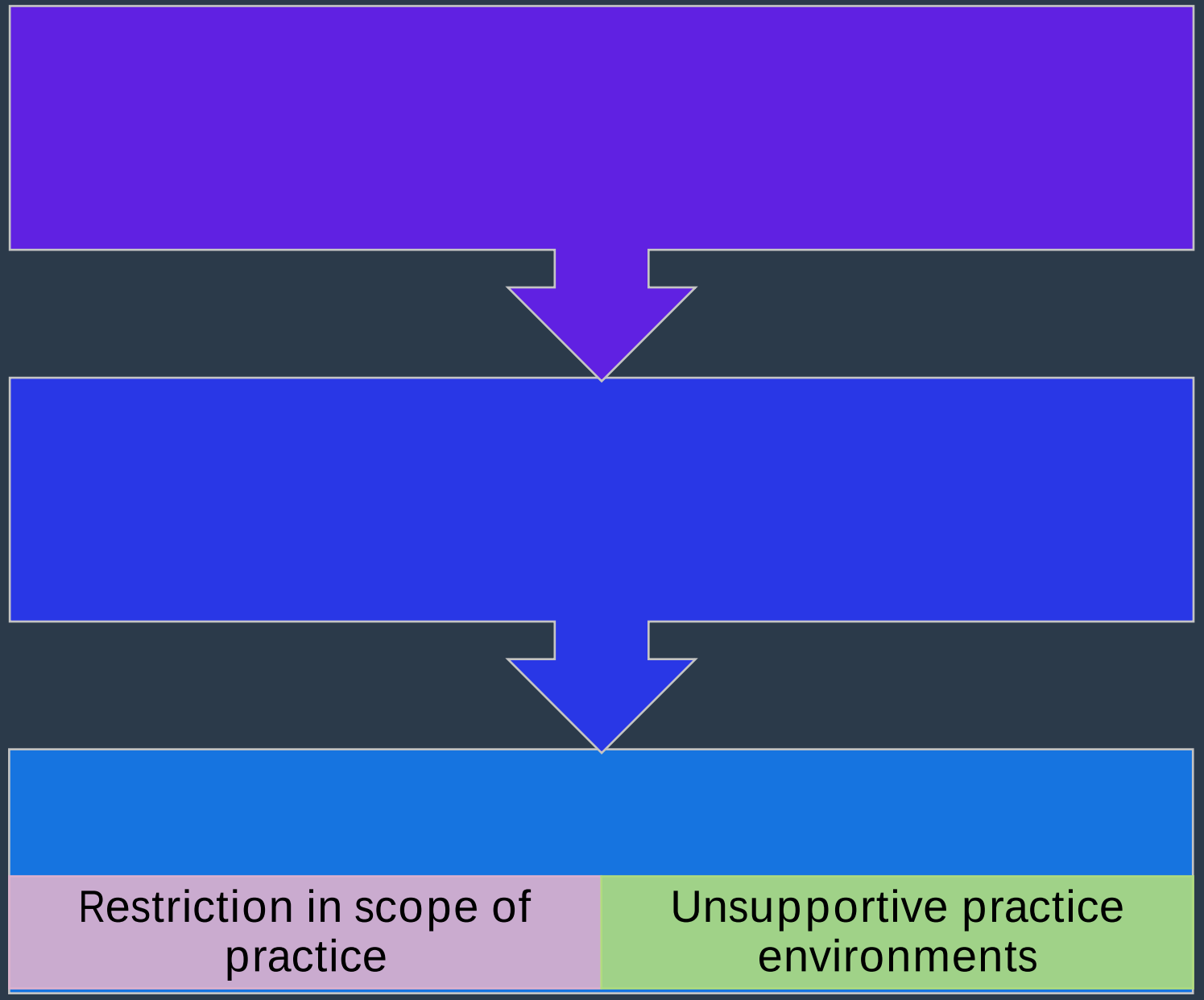
  - *Influence of Nurse Practitioner Practice Restrictions on Chronic Disease Health Disparities*
- A

Nurse practitioner-delivered care



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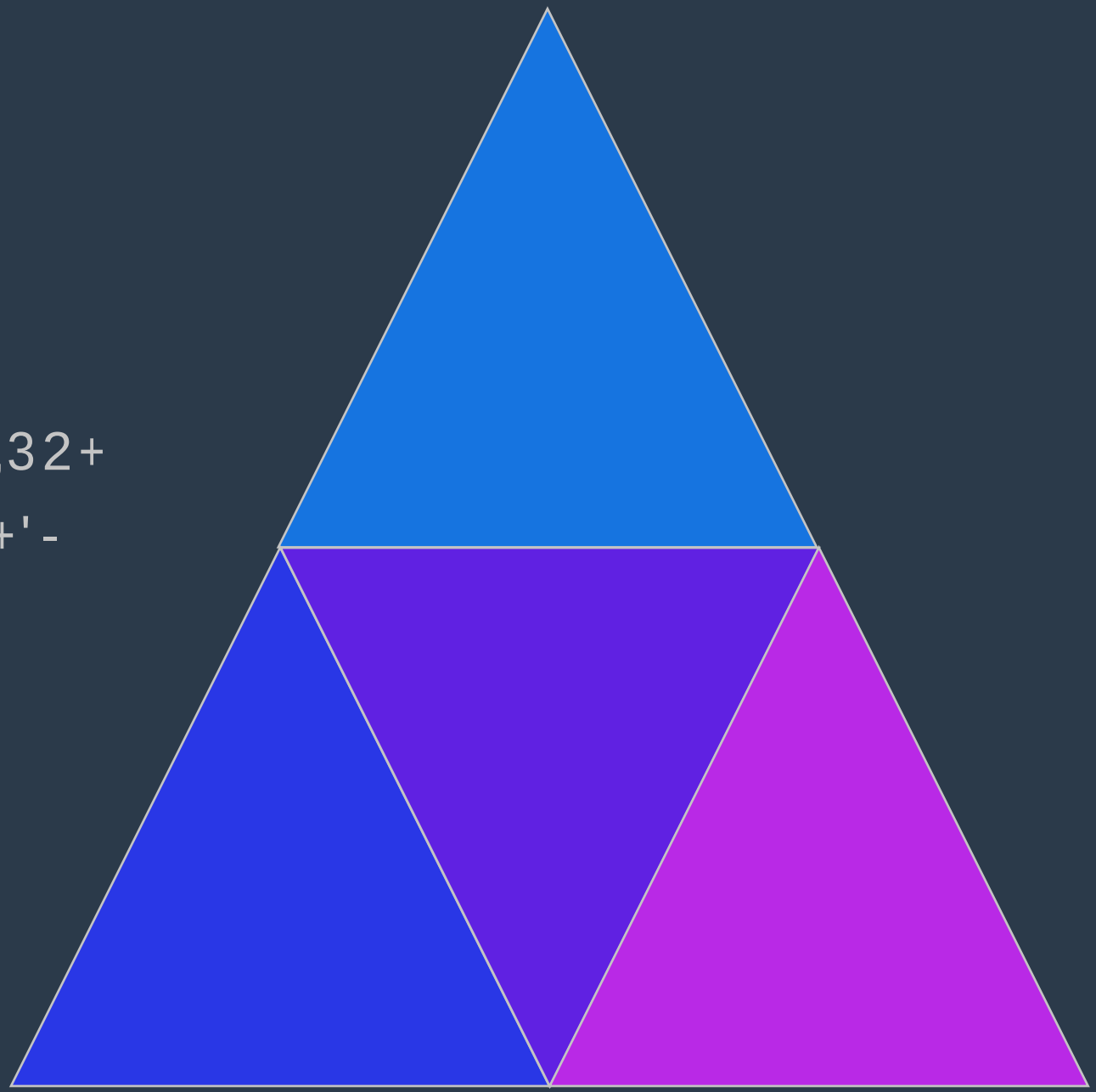
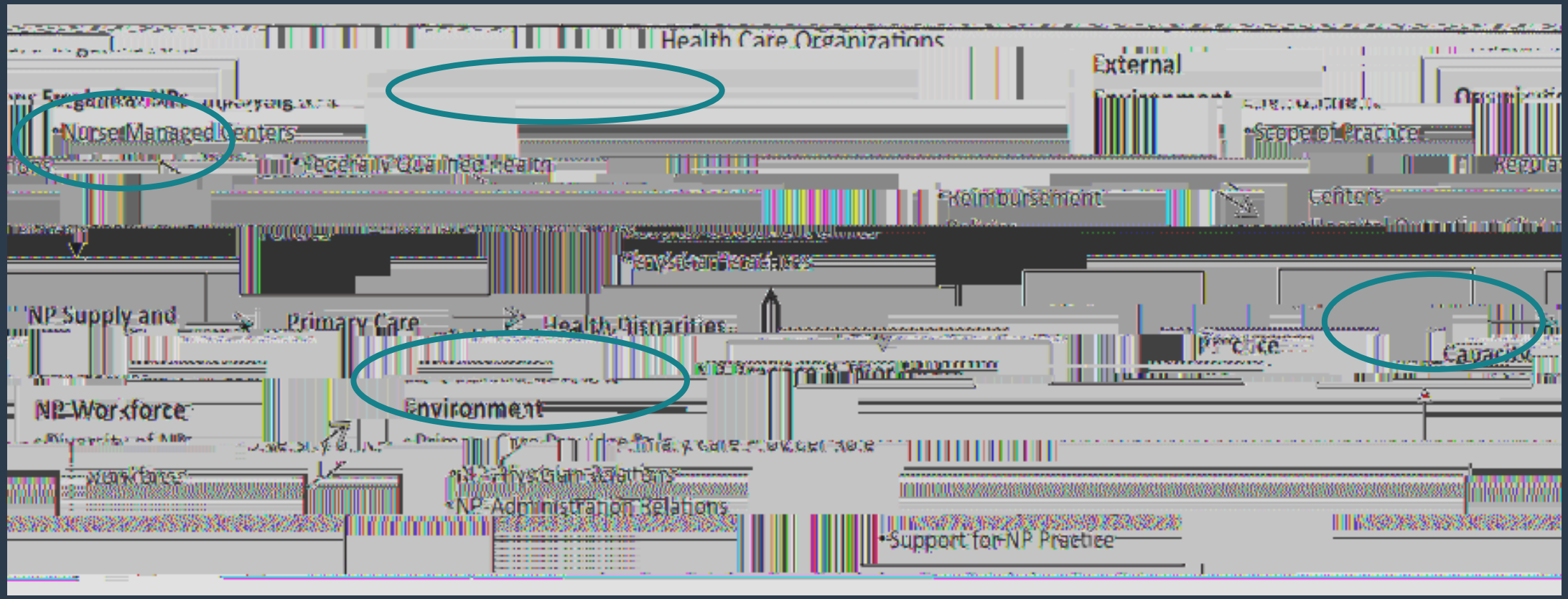


N e P ac e P a Ca e O ga a a C a e
Q e a e NP PCOCQ P gh a e a



P a B Ca

Research question: *Does the NP practice environment reduce racial disparities in LDL cholesterol screening between Black and White CAD patients?*

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RN CAST US NP e
SK A c a da aba e
Med ca e c a

a ca e ac ce NP
ac a e CA FL NJ PA
CAD a e
B ac a d W e

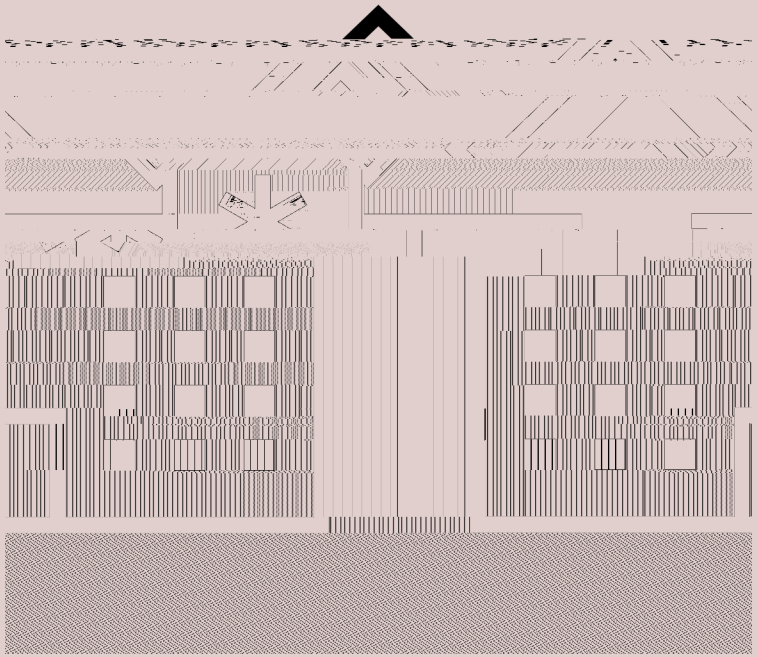
M a ab e e e de
I e ac e ace a d ac ce
e e

Outcome: Lipid screening	
Primary explanatory variable: NP practice environment	
Confounding variables	

Results - patients

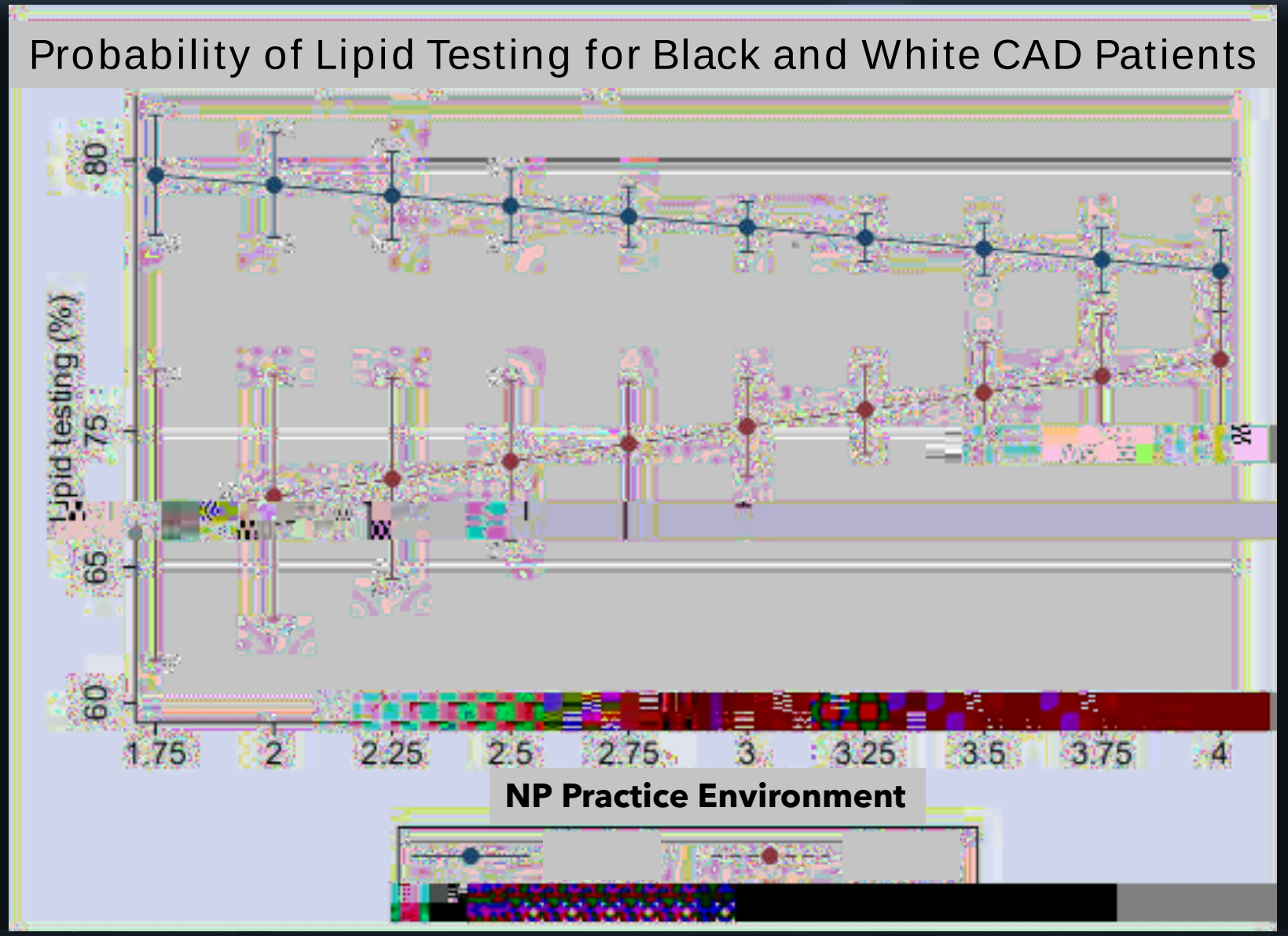
- CAD
  B W
- B CAD
  - Y *p*
  -

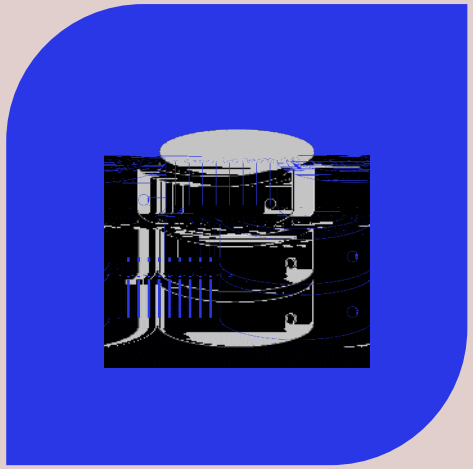
- Practices where Black CAD patients received care…
  - Accepted Medicaid (73% vs. 59%, $p<.001$)
  - Smaller daily patient volume (166 vs. 193 patients/day, $p<.001$)
  - Less favorable practice environments (3.25 vs. 3.27, $p<.001$)



Odds of LDL screening 19% lower for Black vs. to White CAD patients

Significant interaction found between race and the practice environment





Conclusions

The first study to examine the relationship between NP practice environments and health disparities.

Disparities in CAD management between Black and White patients may be influenced by where they receive care.

Investing in the NP practice environment, including supports for NP independent practice and strengthening NPs' relationships with physicians and administrators, may narrow these disparities.

Thank you!