Thank you to the authors for being introduced many of the changes suggested by the reviewers.

After the first review, some key issues continue being unclear to me.

Major Compulsory

A clarification: in the method section authors understand the PCATool as an outcome measure, and it is not. The questionnaire only measures if the services in the community have an orientation to the primary care principals according the views of the service’s users. It can be used to evaluate the two different sorts of services provided (PHC and BHU), but it, its relation with the chronic conditions and why you measure it is less clear to me. May be it can be clarified by the authors in the text. It might be clearer if authors present their hypothesis related to PHC orientation and chronic diseases and to quality of live. What they expected to find? It is very clear for the FHS, which are expected to score higher than the BHU.

The objective in the abstract and in the text must me re-writted. In the objective you must state what you measure, with which instrument and in which population. The PCATool is a measure, only a method. The important is what it measures.

I am wandering if your objective is the following:

1) “we compare the PHC orientation of the primary care services provided in Brasil by FHS and BHU using the PCAToll in elderly patients.
2) “the PHC orientation in the treatment of main chronic conditions in Brasil was assessed using the PCAToll in elderly patients

3) if there is an association between the PHC orientation of the services and the elderly patient’s quality of life

The lack of association between the chronic conditions and the PHC orientation might be due to the reduced number of patients in some groups (cardiovascular diseases and mental health) or to other confounding variables., and also to the fact that such health problems are treated in the same way in both sort of services. Authors must include this limitation and discuss it in the discussion section.

How the authors explain the association of higher scores in PCATool and the metal component of quality of life and the lower scores with the physical component? What was the hypothesis?

The study design can only establish association, not causality. It can’t be a conclusion that the PHC orientation “increases” the mental component and “reduces” the physical one. This is not proved by the study

English is good.

Level of interest: An article of limited interest

Quality of written English: published

Statistical review: no.

Declaration of competing interests:

I declare that I have no competing interests

Level of interest: An article of limited interest

Quality of written English: Acceptable

Statistical review: Yes, and I have assessed the statistics in my report.

Declaration of competing interests:

Declaration of competing interests:

I declare that I have no competing interests