Reviewer's report

**Title:** Provider performance in treating poor patients - Factors influencing prescribing practices in Lao PDR: a cross-sectional study

**Version:** 1  **Date:** 30 September 2010

**Reviewer:** Jan Klavus

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**Major Compulsory Revisions**

1. It was not very clearly stated what other costs were included. It says in the text that costs for equipment, transportation, accommodation and food are included in the analysis. Some more information is needed about inclusion of treatment costs from e.g. possible surgery and personnel costs, which make up the majority of hospital costs.

2. Add a short description of the characteristics of the principal insurance schemes. How do they differ in structure, who is eligible, etc. In the concluding section add a more detailed analysis of the performance of the insurance experiments, and were any differences in treatment identified with respect to the belonging to various insurance scheme.

3. Mention how was the number of those with insurance (116 individuals) divided across the various tracer conditions?

4. Table 2: explain the number in parenthesis and what the p-value stands for (difference btw. the ins. unins. categories?)

5. It could be that differences in income, insured, informal payments are due to different treatment practices/cultures in different types of hospital and provinces. How to tell apart differences in patient characteristics from differences that are due to the patients being treated in different hospitals. In the regression model this is ok, as the hospital variable will be constant/standardized.

6. In the section on statistical analysis the authors claim that patients with high income paid about three times more fees than the other income groups. However, in reporting the regression results it is mentioned that patients in the lower income group had higher total costs for medicines and diagnosis tests (fees?). Isn't this a contradiction?

7. Is the magnitude of informal payments known? Is it included in the total fees paid by these patients?

**Minor Essential Revisions**

1. Introduction... "about 60% of health care costs come from individuals’ own pockets. Increasing out-of-pocket costs..." To be consistent wouldn't it be better
to replace the word costs by expenditures/payments?

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

'I declare that I have no competing interests'