Reviewer’s report

Title: Something Is Amiss In Denmark: A Comparison Of Preventable Hospitalisations And Readmissions For Chronic Medical Conditions In The Danish Healthcare System And Kaiser Permanente

Version: 1 Date: 13 September 2011

Reviewer: Claudia Fischer

Reviewer’s report:

Compulsory Revision
COMMENT 1

As the management sector has taught us, benchmarking can be regarded as an important tool to compare and in a second step be able to improve performance outcome. The health care sector took over this method and it can be definitely be regarded as worthwhile to use this tool to investigate potential improvement for fields such as chronic care. The topic is of relevance for quality improvement efforts in Europe. However, as international health system comparison showed, many country specific factors do influence a countries outcome on health care performance. The authors choose KP, as a comparison with best practise. Still, it can be questioned how a comparison of two systems, different on such a large scale, can provide meaningful results. Are differences in outcome mainly reflecting population and health care systems characteristics or can they really tell something about difference in quality of care or in other words is something really amiss in Denmark?

This point should be considered in the discussion section of the manuscript.

Compulsory Revision
COMMENT 2

Is the literature on the validity of the readmission rate for chronic conditions as concordant as it seems from your manuscript? As the literature on the validity on the readmission rate in general not that coherent. The indicator is used a lot, however research on its validity is scare. First, there is no consent on the indicators term; authors use the terms avoidable/not avoidable, planned/unplanned, emergency/ non emergency, related/ unrelated etc. A second reason for that is that especially data in Europe is not sensitive enough to be able to distinguish readmission as a part of the treatment plan from readmission due to quality of care issues. Further not enough secondary diagnoses get registered to do proper case-mix adjustment.

The author should report a more comprehensive overview of studies on the validity of this indicator. There is amount of literature stating that the readmission rate can not be regarded as a valid indicator for quality of care (in general/for specific disease)see literature of e.g. Ashton CM. , Clarke A 2004, Leng GC
Concerning the data used: The authors mention a very important point in their method section. They well define their outcome measure used, further they refer to research on the indicators' validity. Still, a few questions arise concerning the data used. Has this definition consistently been used for both the Danish and American Data? As research has shown that coding differences play an important role in outcome differences, it is of great importance to get more information on the data used in the study. The author should also report on results of reliability tests in the results section.

In the last sentence in the discussion section the authors state, that the manuscripts conclusion may apply to European health care systems. In regards to the great diversity in health cares systems in Europe, this statement is an over-generalized. This statement should be changed. It would be worthwhile to mention to which European countries and healthcare system the authors are referring to.

The paper is well structured which makes it easy to follow. However, the entire manuscript needs editing. The sentence compositions have errors, and there are many run-on sentences/ reiterations of words.

E.g.:
• 2nd page of the method section, 2nd paragraph: The author is referring to a study which he is not mentioning before
• 2nd page of discussion, of 2nd paragraph, delete one of the two full stops.
• 5th page of discussion. 1st paragraph, line 14: “Our results suggest that close attention……is warranted.”
• Same page, last sentence: “….have been hospitalised had the DHS……”, a comma or word is missing.
• 6th page of discussion, 2nd paragraph, full stop missing.
• Same page, 3rd paragraph: an I is missing in “implementng”

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

Quality of written English: Needs some language corrections before being published
**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