Reviewer's report

Title: Health information technology capacity at federally qualified health centers: a mechanism for improving quality of care

Version: 5 Date: 9 November 2012

Reviewer: Joshua Vest

Reviewer's report:

Major compulsory revisions.

Introduction
The introduction still has some features that do not help move the read to the authors' goals. For example, paragraph 3 contains at least 5 different topics: the rate of HIT adoption, the rate of HIT use in FQHCs (no citation), what FQHCs do, lagging of HIT in FQHCs, and the lagging of HIT in hospitals that serve the indigent. The authors have added more about FQHCs, but they have not really put in an order that is logical or helps the reader. The focus of the intro should be FQHCs. The other settings are a distraction unless directly compared to the experiences of FQHCs.

The inconsistent use of abbreviations (and misspellings) is quite pronounced.

Methods
Outcome measures.
The first sentence should be plural for the list of measures.
The information requested in the first review is present, but not in an easy to read format. They almost read like bullet points and the actual collapsing of the categories for analysis purposes is separated into the following paragraph.
Additionally, the importance of the measures should really not be in the methods section. They should be in the background as justification for the study.

Primary explanatory variable
The authors state as their goal (in the introduction) "Therefore, this study examined the HIT capacity of FQHCs to determine associations with improved quality of care." Consistent with that goal, the outcomes listed are the process measures. Consistent with that goal, the primary explanatory variable is the HIT capacity level. But the first analysis uses the IV as the DV. The prior view noted: Examining the structural factors doesn't add a lot to the paper. If the authors really want that analysis in, they need to set the reader up better and clearly say they are undertaking 2 different analyses. Their goal (which could be better formulated) does not reflect the analyses they undertake. Stating to goals would work or an additional first paragraph under the methods stating, we undertook two analyses....
I am also still confused by the IV construction. There seem to be two different criteria. The extent of EHR functions and then the HIT list. So if a site had 15 HIT functions but had fewer than 4 of the EHR ones they would be low? As would a site that had 0 HIT functions and 0 EHR functions? That seems to be a strange grouping.

This goes to the broader issue of the authors bouncing back and forth between EHRs and HIT. Think if they picked one and stuck with it throughout the entire paper it would be useful.

Minor
Limitations
There is a sentence now about selection bias, but it is opaque.

Tables. The authors include footnotes for p value flags in Table 3 but don't use them.

Spelling, capitalization, and hanging colon issues.

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

**Quality of written English:** Not suitable for publication unless extensively edited

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

**Declaration of competing interests:**

I declare that I have no competing interests