Reviewer's report

Title: Costs of medicines and health care: a concern for Australian women across the ages

Version: 1 Date: 23 June 2013

Reviewer: Ian Stewart McRae

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This paper makes a useful contribution to understanding those aspects of the costs of healthcare which are most important to women in Australia. The paper could be improved by reflecting on the nature of the sample which has been explored and the environment in which it is placed.

Major compulsory revisions

1. The paper is not clear when the surveys were conducted – it is necessary to specify this as factors like increasing/decreasing bulk billing rates and various policy decisions frame the interpretation of the respondent comments.

2. The actual sample explored is 357 responses of 150,000 or 0.24% of all responses. The authors do not discuss whether the same people report financial problems in more than one survey, which would further reduce the real response rate.
   a. The paper should mention whether there is repetition by respondents over time
   b. The paper needs to acknowledge that the responding sample is tiny, and biased towards those with problems
   c. This means broad statements like that on p17 that “others continue to struggle – the “working poor”, whose resources are strained trying to meet out of pocket medical and prescription costs” should be qualified. The data shows that this is true of some working poor, but it is not reasonable to generalise to all working poor. Similar statements throughout the paper need to be qualified.

3. The paper notes (p19) that some specific issues raised by respondents are no longer a concern due to policy changes. One contextual factor not mentioned is that while GP bulk billing rates fell rapidly in the early 2000’s they have been rising overall ever since. While respondents will be concerned about their access to bulk billing at all times, the concerns about declining bulk billing levels should be framed in the context of the time of survey response. If such comments were from the period pre 2003 they fit with the known patterns, if they were post 2003 they are more surprising and in some ways more of a problem to be highlighted.

Discretionary revisions

4. With respect to medical costs, it is remarkable that almost all comments
quoted relate to access to general practice rather than specialists or hospital costs which while less common are much higher costs. The authors may wish to comment on this pattern.

**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