Reviewer’s report

Title: Adequate Access to Healthcare and Added Life Expectancy among Older Adults in China

Version: 0 Date: 21 Dec 2018

Reviewer: Reviewer 2

Reviewer's report:

PEER REVIEWER ASSESSMENTS:

OBJECTIVE - Full research articles: is there a clear objective that addresses a testable research question(s) (brief or other article types: is there a clear objective)?

Yes - there is a clear objective

DESIGN - Is the current approach (including controls and analysis protocols) appropriate for the objective?

No - there are major issues

EXECUTION - Are the experiments and analyses performed with technical rigor to allow confidence in the results?

No - there are major issues

Statistics - Is the use of statistics in the manuscript appropriate?

No - there are issues with the statistics in the study

INTERPRETATION - Is the current interpretation/discussion of the results reasonable and not overstated?

No - there are minor issues

OVERALL MANUSCRIPT POTENTIAL - Is the current version of this work technically sound? If not, can revisions be made to make the work technically sound?

Maybe - with major revisions
GENERAL COMMENTS: This paper addresses an important question in China, the magnitude of the life expectancy increased with better access to health care among seniors. The authors used a nationally representative longitudinal data with a large sample size. The life expectancy calculation is well validated with other national statistics. However, the main limitation lies on the self-reported access to health care in the CLHLS data. It is not clear how validity is the self-reported measurement compared with other objective measurement. For example, it is surprising that only 6% of respondents indicated inadequate access to health care although there are significant problems in the health care systems to provide adequate services to Chinese patients. Therefore, more refined analyses are needed to address this limitation.

REQUESTED REVISIONS:

The authors need to validate the self-reported access to health care in some ways. This will be central in the revision to address why only 6% of respondents reporting not to have adequate access to health care. The authors may need to compare the characteristics of these people with the respondents claiming to have adequate access to health care and see whether the non-access-to-care population may be more fragile, which leads to a shorter life expectancy. In another word, the reported gain in life expectancy is likely to be overestimated.

The paper does not have detailed descriptive statistics about the analytical sample and their access to care statistics, health care utilization, or health insurance statistics.

Self-reported access to care is also endogenous regards to respondents' socio-demographics. It's difficult to claim the independent contributions of the self-claimed access to care to life expectancy.

Note: This reviewer report can be downloaded - see attached pdf file.

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

No

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

No

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

No
Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

I am able to assess the statistics

Quality of written English
Please indicate the quality of language in the manuscript:

Acceptable

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