Title: Inpatient and Emergency Department Health Care Utilization among Patients Who Require Interpreter Services

Version: 2

Date: 14 February 2015

Reviewer: Danielle Rose

Reviewer's report:

Major compulsory revisions.

The authors have a lot of measures information mixed in the data collection section. You need to describe data collection in one section, then how you defined dependent and independent variables in a measures section. It's a bit confusing now.

Page 7, line 103, the definition of high utilizers should be in measures not data collection. But I guess the bigger question is why do you define high utilizers when you don't use the measure in your analyses.

How was language spoken by patient identified? Authors don't specify.

Minor revision.

Another limitation is lack of data on patients' mental health status. Some of the patients' may be refugees, if this is the case they may have trauma exposures and if undetected/untreated could have negative impacts on health. It also could impact patient trust of government and providers, although I acknowledge that's beyond the scope of your study.

Another limitation is lack of information on implementation of interpreter services. From the text it appears that all doctors and nurses use the interpreter services in a relatively uniform fashion. But is that really the case? Are providers and nurses and staff trained on how to use interpreter services? Just something to consider for future work.

On page 8, line 156 -- why do you report borderline significant results? You have a lot of power, I would not report borderline significant results.

There are typos in the figures, also it might be clearer to read if you use one decimal place in all the tables.

Level of interest: An article of importance in its field

Quality of written English: Acceptable
Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:

'I declare that I have no competing interests'