Reviewer's report

Title: Equity impact of a choice reform and change in reimbursement system in primary care in Stockholm County Council

Version: 2
Date: 1 May 2015
Reviewer: Valeria Glorioso

Reviewer's report:

Major Compulsory revisions

(1) This study has a big strength in the type of data utilized, but based on what authors have written, I could only gather that the novel component of this study is the finding of an increase in the number of visits comparing SES groups "pre" and "post" the reform. Authors should state the novelty of the study more efficacely.

(2) The design of the study it is not appropriate for a causal interpretation of the results. It seems the authors are aware of this, but more attention is needed in the use of causal terms in the interpretation.

(3) The interpretation of the results, in general, is formally correct, but sometimes it is subject to over-interpretation. Reading the results it seems that, between 2007 and 2011 there was a general increase in the use of GP visits and the number of GP visits in the entire population of interest, but other than that I do not see any other relevant data to report and comment. The authors, however, emphasize every minimum statistically significant difference between groups, neglecting the fact that, some quantities of interest may appear statistically significant for pure effect of chance. Moreover, putting together all the differences that are statistically significant between the two periods lets emerge a picture that is not always consistent. In short, the only major difference to report should be the overall difference in access to GPs among socioeconomic groups between 2007 and 2011.

(4) The Statistical Methods paragraph is too short and not well explained, especially in the regression session. Specifically, (a) the authors do not clarify why they decided to use negative binomial regression for their analysis; (b) the description of the analytic strategy and of the calculation of the quantities of interest is obscure, the authors must be more explicit to let the reader deeply understand.

(5) In the discussion, at page 14, there is a mistake in the interpretation: “When looking at individual socio-economic characteristics there seems to be no differences between groups are ever some signs of a small increase in equity, as we found that men with low levels of education had a grater increase in the number of visits compared with men - with, r.n. - lower levels of education”. Why is this interpreted as a small increase in equity? The increase in the number of
visits among the less well-off, controlling for need, is a sign of a pro-poor inequity, so in this case seems that it is the opposite: a change from an initial condition of equity in access to GPs to a condition of inequity. If this is not the case, please rewrite the paragraph because it is misleading.

(6) How do people access private providers? Does your analysis explore the difference between access through the SSN versus access through private insurance or private providers? Could you consider comparing private versus public access?

Minor Essential Revisions

(1) Do you have the ability to control for whether or not individuals have a usual source of care or whether or not they have private insurance? Do some individuals have some kind of exemption from co-payment?

(2) Why did you choose to make a cut point and restrict the analysis to individuals who were 25-84 years of age?

(3) In the variables section, when "Income" is described, it is stated that "is relevant as co-payment may act as a financial barrier for some people in regard to seeking care". Is there any exemption from co-payment for any particular group in the Swedish system? If so, you must consider it in your design, if not you should be more explicit about it.

(4) Page 14, line 14 – There is a missing "with" in the sentence: "as we found that men with low levels of education had a greater increase in the number of visits compared with men WITH lower levels of education".

(5) Page 18, line 9 – There is a type error: "a negative impact" instead of "an negative impact".

Discretionary Revisions

(1) The tables are not very communicative, consider using graphs to present the results.

Level of interest: An article of limited interest

Quality of written English: Acceptable

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

Declaration of competing interests:

I declare that I have no competing interests