Methods

Comment 1: -   Was eHLQ assessed at baseline or only at 6 and 12 months? If it was not assessed at baseline, why not?

Reply 2: Due to an error, the eHLQ was not included in the assessment package at baseline, therefore, we do not have these data available.

Changes in the text: in the methods sections focusing on outcomes, we have elaborated on this issue accordingly (see page 8, lines 9-11) "*In the current project, we planned to include the eHLQ at 0, 6, and 12 months, however, due to an unfortunate error, the eHLQ was not included at 0 months, but only distributed to all participants via e-mail at 6 and 12 months. Consequently, we have no data for eHLQ at 0 months.*

Comment 2: "The recruitment of participants was performed by a project nurse, contacted four cardiology wards at public hospitals in Randers, Silkeborg, Skive, and Viborg, all located in the central region of Jutland, Denmark." – This sentence is not grammatically correct.

Reply 3: Thank you for identifying this error, the sentence has now been revised, so that it reads correctly, both in content and grammar.

Changes in the text: the sentence now reads as follows: (page 6, lines 6-8) "*The recruitment of participants was performed by a project nurse, who contacted patients at four cardiology wards at public hospitals in Randers, Silkeborg, Skive, and Viborg, all located in the central region of Jutland, Denmark.*"

Comment 3: -   Can you please elaborate on why revascularization and open-heart surgery was excluded?

Reply 4: We excluded patients who had recent (within 3 months) coronary revascularization and/or open-heart surgery, because they are offered a nationally standardized rehabilitation program, which may interfere with the current telerehabilitation program.

Changes in the text: We have tried to clarify this by rewriting the sentence as follows: (page 6, lines 15-17) "*Exclusion criteria were not being able to understand Danish, an active psychiatric condition other than depression or anxiety related to cardiac or other chronic illness, and coronary revascularization and/or open-heart surgery within the previous three months.*"

Statistical analysis

Comment 4: "Four participants with more than 50% missing values on a specific subscale of the eHLQ were excluded from analysis. Excluded participants tended to over 50 years of age, male, and with an educational status as skilled worker (see table 2). "

o   The process of exclusion is part of the methods section, but the amount of patients that were excluded and the age of these patients should be in the results section. Please rewrite accordingly.

o   Also spelling mistake: "…tended to be over 50 years of age…"

Reply 5: The specified sections have been relocated as proposed and spelling mistakes corrected.

Changes in the text: these sections now read as follows

In the methods section (page 6, lines 15-24):

"*Exclusion criteria were not being able to understand Danish, an active psychiatric condition other than depression or anxiety related to cardiac or other chronic illness, and coronary revascularization and/or open-heart surgery within the previous three months. Also excluded were patients whose medical records indicated previous neurological, musculoskeletal or cognitive disabilities.*

In addition, four participants with more than 50% missing values on a specific subscale of the eHLQ were excluded from analysis.

After inclusion, all patients were randomly allocated to either the TR or the CT group. This process is illustrated in the CONSORT diagram below (figure 1), including reasons for dropouts at each step."

In the results section (page 10, lines 5-7):

"*Of 353 patients assessed for eligibility, 140 were enrolled in the Future Patient Telerehabilitation Project, of which 137 were included in this sub-study. Excluded participants tended to be <50 years of age, male, and more likely to have an educational status as skilled worker (see table 2).*"

Results
Table 2:

Comment 5a: -   Please report BMI as it is more relevant than weight.

Reply 5a: While we acknowledge the reviewers suggestion, we did not include BMI in the data collection, hence weight is the only measure available for the current manuscript.

Comment 5b -   Also: what time is the blood pressure and heart rate measured: at inclusion, and measured only once or is it mean self-measured blood pressure? A single blood pressure measurement might not be relevant to report, but indicating a mean blood pressure measurement can be relevant to know who suffers from hypertension.

Reply 5b: Blood pressure was measured at inclusion in the study for both the intervention and control group at the heart failure clinic

Comment 5c-   Very low ejection fractions: do you have a division of how many patients fall in category HFrEF, HFmrEF and HFpEF? Were mostly HFrEF patients included?

General reply 5a-c: Although recognizing the reviewers point of view, we have chosen not to elaborate further on these baseline measures in the current manuscript, as we consider their relevance in relation to the outcome measure in focus to be minimal. In addition, the information requested in comment 5b and 5c, has already been reported in another publication from this study (Gade et al., 2020).

Table 3:

Comment 6:-   Please clarify very clearly what each p-value means:

o   The first is the comparison of TR vs CT at 6 months

o   The second is evolution of TR from 6 to 12 months?

o   The third is evolution of CT from 6 to 12 months?

o   Is there also a comparison between TR and CT at 12 months?

-      => this is at this moment not clear from reading the table.

Reply: An explanation for each p-value, ie. what comparison does this represent, has now been added to the new table 3, which combines the previous Table 3 and 4.

Changes in the text: Below the new table 3, the following has been added (page 13, lines 2-3).

"[1] *comparison of group scores in the TR group at 6 and 12 months.* [2] *comparison of group scores in the CT group at 6 and 12 months.* [3] *comparison of 6 months scores across the TR and CT group* [4] *comparison of change scores (6-12 months) across the TR and CT group.*"

Comment 7: Can Table 3 and Table 4 not be merged into one Table? If everything is labelled well I believe this will improve how readers can understand it.

Reply: The two tables have now been merged into a new table 3 (pages12-13) and all results etc. has been labelled to enhance interpretation. This als required that the layout for the table page is

Discussion

Comment 8:-   Nice and well-written discussion. However, I do believe it is rather long. It would be even better if it can be shorter and more to-the-point: please consider to pick out one or two major points that are very relevant to this study and leave the others out.

o   For example: the paragraph that starts with "Of note, we found no changes in ehealth literacy…" => this is to me not really of added value, and it also does not directly follow from the results. There is a difference at 6 months, and no increasing difference at 12 months. Does this really mean that "all future digital health services must be incorporated early on in any form of rehabilitation programme"?

o   => I believe this is too strong a conclusion for the results you found and I would leave it out.

o   Also please focus on the results of this study and not on the results of the Future Patient Telerehabiliation study, as this will be addressed in another manuscript.

o   Please look like this at the other parts of the discussion and pick out the strongest

parts, leave the rest out.

Reply 8: The discussion has been revised, and in some instances rewritten and shortened, in accordance with the reviewers suggestions above. (page 14, line 16 – page 18, line 2)

Comment 9- Please be careful with only emphasizing the success while only two aspects of the eHLS were significantly different.

Reply 9: The text has been revised in order to balance the results better as suggested by the reviewer. (page 14, line 16 – page 18, line 2)

Comment 10:   Make sure that to emphasize that when analysing 7 parameters, some coincidence might always be at play and that results need to be confirmed in future studies.

Reply 10: this limitation has now been added to the limitation section   (page 17, lines 23-25)

Comment 11-   As stated above: please explain very clearly why there was no baseline assessment. The results are still interesting and it is good that the study happened, but it should be explained clearly in a limitations section.

Reply 11: This issue has now been elaborated and explained in further details in the limitation section (page 17, lines 18-20)*, while also mentioned in the method (page 8, lines 9-11), results (page 11, lines 9-10) and general discussion section . (page 14, line 16 – page 18, line 2)*.