Peer Review File

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Reviewer A

Exploring the effect of PHM on positive health outcomes in current literature could benefit the body of literature in this field. However, this clinical practice review in this form doesn't bring new insights. This research seems to be executed as a literature review, maybe because the clinical practice review methodology doesn't really befit the posed question. If the approach under study is regarded a management concept, how do you expect to find this in clinical practice, in a doctor-patient relationship?

More specifically, I have the following questions/recommendations:

Comment 1: Method: For a clinical practice review it makes sense to search in PubMed, but why not also use different data sources such as interviews with practice leaders or look into how it is used in clinical guidelines? There is sought for current opinions and perspectives (line 104), but in the inclusion criteria is only peer-reviewed manuscripts or editorials. Why not include perspective papers?

Reply 1: Thank you for your comments. Being able to gain access to resources in full text was fundamental. Peer-reviewed manuscripts or editorials that had perspectives on the presented topic were sought and required for this clinical practice review.

Comment 2: Search strategy: A very broad search was performed with very generic search terms. As could be expected, a very high number of manuscripts came up. The next steps are missing in the article. How did the authors narrow the 42463 title and abstracts down to six? How did they make sure they didn't miss an essential article? Did just one author screen everything? Did they discuss why some articles didn't fit the research question? And why not make the search more specific to retrieve less than 1000 articles in the first place? One would expect more studies to be included out of this broad search.

Reply 2: As stated in our search method, we searched for manuscripts dated within the last 12 months to examine the most current opinions and perspectives on population health as a management concept and promoting positive health outcomes.

Changes in the text:

To further clarify your questions/ comments the following has been added from lines 70 to 76:

The abstracts and titles were screened for relevance and appropriateness of this clinical practice review. Although there were an extensive number of manuscripts that appeared from the search, and despite the use of key words and Boolean operators, the authors continued to manually review abstracts and titles, accordingly, to ensure the inclusion of manuscripts that had a focus on the topic and questions being explored. It was evident

through the review of the titles and abstracts which manuscripts were suited for this clinical practice review. An extensive review of the selected manuscripts was further conducted to ensure each of the selected manuscripts met the objectives of the clinical practice review.

Comment 3: Terminology: Throughout the manuscript different terms are used interchangeably. F.e. the introduction starts on 'population health management', but in the aim (line 83) it is described as 'population health as a management concept'. It is unclear for me what the authors mean by that. Furthermore, in the research question it is formulated as 'population health management concept', in the results 'population health concept' (143) and the discussion finishes on 'collaborative and integrative care'. I would suggest to choose one formulation and explain how you have perceived and used it in this research. The fact that other authors use it differently in the current body of literature could then be a finding and/or limitation of your search strategy.

Reply 3: Thank you for your comments. The terminology has been revised to remain consistent throughout the manuscript. This can be found on lines 38 to 41 and also the title of the manuscript.

Changes in the text:

On line 38 to 41 we clarify this with the following: Population health management are integrative and collaborative initiatives, that have emerged to close the gap between health and community services (5), with the intention of improving population health in communities and neighborhoods that may be disadvantaged or marginalized (6).

Comment 4: Results: Another concept that asks for more explanation is effectiveness (used in research question) and positive health outcomes. What is considered effective is not described and no answer is formulated in the results. The main body of the text where the results of the research should be described is only 10 lines (133-143). It does not answer the question posed in the method how effective the population health management concept is and if it promotes positive health outcomes. Connecting this to the method, if you want proof of effectiveness and promotion of health outcomes, should you not look for quantitative data on this? How are opinions and perspectives showing if the concept is effective?

Reply 4: Thank you for your comments. Please may I confirm, this is not a research project, this is a clinical practice review. According to the JHMHP guidance for clinical practice reviews, it is often shorter than a systematic review, a scoping review, or a narrative review. It mainly provides a summary of clinical issues involving clinical manifestations, diagnosis, treatment, prognosis, etc. It often requires perspective and expert opinion along with evidence-based review and may include early or unpublished observations, approach, and so forth.

In response to your comment: the main body of the text where the results of the research

should be described is only 10 lines (133-143). It does not answer the question posed in the method how effective the population health management concept is and if it promotes positive health outcomes. This has been discussed from lines 118 to 168.

Comment 5: Discussion: The first three paragraphs of the discussion are a good summary of literature that relate to the question. However, the literature is not connected to the results. Did the authors expected to find these results? How do the results relate to what is already established? In the research strategy there was focused on the most current opinions and perspectives by only including literature from the last year. Is there change comparing it to older literature?

Reply 5: Thank you for your comments. This was a clinical practice review and not a research project, therefore we did not have a research strategy or mention research strategy. We clarify this on lines 55 to 62.

Changes in the text:

Lines 55 to 62 now reads: We gathered evidence-based opinions and perspectives from published literature that had explored population health management for promoting positive health outcomes for people diagnosed with a chronic disease. We also included evidence-based perspectives from published literature including countries that utilized the population health management approach as a collaborative interprofessional management strategy. This clinical practice review was guided by the following questions: How effective is population health management? Does it promote positive health outcomes for patients/ clients diagnosed with a chronic disease?

Comment 6: Conclusion: The conclusion (line 221/222) is very strongly formulated based on six manuscripts with mixed scientific quality.

Reply 6: Thank you for your comments.

Reviewer B

The study provides practical implications for healthcare service providers, emphasizing the importance of an integrative and collaborative approach to population health management. This guidance can be valuable for practitioners in the field. While the study provides valuable insights into population health management and its potential positive outcomes, several weaknesses should be considered:

Comment 7: Limited Scope of Literature Review:

The study relies heavily on a literature review from the National Library of Medicine database from manuscripts dated between August 2022 and August 2023. This restricted period may limit the comprehensiveness of the literature review.

Reply 7: Thank you for your comments. We searched for manuscripts dated within the

last 12 months to examine the most current opinions and perspectives on population health management and promoting positive health outcomes.

Comment 8: Publication Bias:

The study appears to have a potential for publication bias since it only includes peerreviewed manuscripts or editorials with full-text access. This could result in a skewed representation of the available evidence, as positive findings are more likely to be published than negative or inconclusive ones.

Reply 8: Thank you for your comments. This was addressed under limitations on lines 183 to 189.

Comment 9: Narrow Search Strategy:

The search strategy is focused on an interprofessional approach to population health management, using specific terms like "population," "health," "management," and "outcomes." This narrow search strategy might overlook relevant studies that use different terminology or approaches.

Reply 9: Thank you for the valid point raised.

Comment 10: Limited Data Extraction and Evaluation:

The study mentions the use of Table 1 for data extraction but does not provide detailed information about the criteria used for data extraction and the specific outcomes assessed. Without this information, it is challenging to evaluate the rigor of the data extraction process.

Reply 10: Thank you for this comment. This information has been revised for clarity on lines 78 to 81.

Changes in the text

Lines 78 to 81 now reads: Table 1 was developed to facilitate the review of the selected manuscripts and to evaluate each publication for its outcome data. The criteria used for reviewing each of the selected manuscripts were the study outcomes and the strengths and limitations of population health management identified by each of the reviewed studies.

Comment 11: Eligibility Criteria Ambiguity:

The inclusion criteria for selecting articles are mentioned briefly, but there is a lack of clarity on how the decision-making process was conducted. This lack of transparency raises questions about the reliability and reproducibility of the study's selection process.

Reply 11: Thank you for this comment. This information has been revised for clarity on lines 87 to 94.

Changes in the text

Lines 87 to 94 now reads: The decision-making process for selecting appropriate manuscripts for this clinical practice review, was determined by revisiting the titles and abstracts of the selected studies and publications to ensure that each of them was selected according to the clinical practice review objectives. It was essential that there was an agreed census among the authors regarding the appropriateness of each manuscript prior to them being included in the clinical practice review. It was also important that the selected manuscripts were relevant to help answer the questions that guided the clinical practice review.

Comment 12: Small Sample Size of Reviewed Studies:

The study reviews only six manuscripts, which may not be representative of the entire body of literature on population health management. A larger sample size would provide a more robust foundation for drawing conclusions.

Reply 12: Thank you for your comments. This was addressed under limitations on lines 183 to 189.

Comment 13: Lack of Methodological Detail.

The methodology section lacks detailed information on how evidence-based opinions and perspectives were gathered from clinicians and researchers. A clear methodology would enhance the study's credibility.

Reply 13: Thank you for this comment. This information has been revised for clarity on lines 70 to 81.

Changes in the text

Lines 70 to 81 now reads: The abstracts and titles were screened for relevance and appropriateness of this clinical practice review. Although there were an extensive number of manuscripts that appeared from the search, and despite the use of key words and Boolean operators, the authors continued to manually review abstracts and titles, accordingly, to ensure the inclusion of manuscripts that had a focus on the topic and questions being explored. It was evident through the review of the titles and abstracts which manuscripts were suited for this clinical practice review. An extensive review of the selected manuscripts was further conducted to ensure each of the selected manuscripts met the objectives of the clinical practice review. Table 1 was developed to facilitate the review of the selected manuscripts and to evaluate each publication for its outcome data. The criteria used for reviewing each of the selected manuscripts were the study outcomes and the strengths and limitations of population health management identified in each of the reviewed studies.

Comment 14: Overreliance on Specific Studies.

The study heavily relies on specific studies and authors throughout the discussion,

which may introduce a bias towards the perspectives presented in those studies. Including a more diverse set of studies and viewpoints would strengthen the study's overall validity.

Reply 14: Thank you for this comment. This clinical practice review incorporates perspectives and viewpoints from other supporting literature as evidenced by the reference list of an additional 18 citations that accompany the 6 reviewed manuscripts.

Comment 15: Limited Generalizability.

The study discusses the findings in a way that suggests generalizability, but the limited number of reviewed studies and the specific inclusion criteria may limit the generalizability of the results to a broader population.

Reply 15: Thank you for your comments. This was addressed under limitations on lines 183 to 189.

Comment 16: Implications for Practice Lack Specificity.

The implications for practice section provide broad recommendations, but lacks specific guidance on how healthcare service providers can implement an integrative and collaborative approach to population health management.

Addressing these weaknesses through a more comprehensive literature review, a transparent and detailed methodology, and a broader range of perspectives would enhance the overall quality and reliability of the study.

Comment 16: Thank you for your comments. This is a clinical practice review and according to the JHMHP guidelines for a clinical practice review. It states: A clinical practice review is often shorter than a systematic review, a scoping review, or a narrative review. It mainly provides a summary of clinical issues involving clinical manifestations, diagnosis, treatment, prognosis, etc. It often requires perspective and expert opinion along with evidence-based review and may include early or unpublished observations. Therefore, addressing the points raised would be much suited for a different type of exploration according to the JHMHP guidelines.

Reviewer C

Overall, there is not enough detail to review this paper.

Comment 17: Inclusion criteria need to be more clearly defined. This is a broad concept and since the authors went from more than 40,000 titles to 6 included articles, there were clearly very strict inclusion criteria.

Reply 17: This information has been revised for clarity on lines 83 to 94.

Changes in the text:

Lines 83 to 94 now reads: Manuscripts were included if they were peer-reviewed with full-text access, related to population health management and advocated for integrative and collaborative initiatives that promote positive health outcomes as defined by Steenkamer et al. (5). The manuscripts that did not directly relate to population health management and promoting positive health outcomes for people diagnosed with a chronic disease were excluded. The decision-making process for selecting appropriate manuscripts for this clinical practice review, was determined by revisiting the titles and abstracts of the selected studies and publications to ensure that each of them was selected according to the clinical practice review objectives. It was essential that there was an agreed census among the authors regarding the appropriateness of each manuscript prior to them being included in the clinical practice review. It was also important that the selected manuscripts were relevant to help answer the questions that guided the clinical practice review.

Comment 18: What definition of "population health management" did you use? There are many different definitions of this term, so knowing how the authors defined this concept is key to understanding the review.

Reply 18: The definition of Population health management was taken from Steenkamer et al. which is described by an integrative and collaborative initiative, that has emerged to close the gap between health and community services. This can be found on lines 38 to 41.

Comment 19: Did multiple people review each titles/abstract? How were discrepancies resolved? The authors should also provide the exact search terms used as an appendix.

Reply 19: Thank you for this comment. This information has been revised for clarity on lines 70 to 94.

Changes in the text

Lines 70 to 94 now reads: The abstracts and titles were screened for relevance and appropriateness of this clinical practice review. Although there were an extensive number of manuscripts that appeared from the search, and despite the use of key words and Boolean operators, the authors continued to manually review abstracts and titles, accordingly, to ensure the inclusion of manuscripts that had a focus on the topic and questions being explored. It was evident through the review of the titles and abstracts which manuscripts were suited for this clinical practice review. An extensive review of the selected manuscripts was further conducted to ensure each of the selected manuscripts met the objectives of the clinical practice review. Table 1 was developed to facilitate the review of the selected manuscripts and to evaluate each publication for its outcome data. The criteria used for reviewing each of the selected manuscripts were the study outcomes and the strengths and limitations of population health management identified in each of the reviewed studies.

Eligibility criteria

Manuscripts were included if they were peer-reviewed with full-text access, related to population health management and advocated for integrative and collaborative initiatives that promote positive health outcomes as defined by Steenkamer et al. (5). The manuscripts that did not directly relate to population health management and promoting positive health outcomes for people diagnosed with a chronic disease were excluded. The decision-making process for selecting appropriate manuscripts for this clinical practice review, was determined by revisiting the titles and abstracts of the selected studies and publications to ensure that each of them was selected according to the clinical practice review objectives. It was essential that there was an agreed census among the authors regarding the appropriateness of each manuscript prior to them being included in the clinical practice review. It was also important that the selected manuscripts were relevant to help answer the questions that guided the clinical practice review.

Comment 20: The conclusions are too broad to be useful. Authors should think about specific action steps that practitioners could take, research gaps that the review identified, and potential policy options for state/federal policymakers.

Reply 20: Thank you for your comments. This information has been revised with additional information on lines 170 to 182.

Changes in the text

Lines 170 to 182 now reads: Healthcare service providers should continue developing an integrative and collaborative approach to population health management to promote positive health outcomes. Cianciara, Lewtak et al. has provided evidence on the importance of patient/client engagement with population health management programs, which has been welcomed by various populations diagnosed with chronic illnesses (24). Evidence shows that telehealth has successfully managed population groups in diverse community settings (16). Healthcare professionals could promote awareness of population health management by delivering educational seminars from an interprofessional approach focusing on the benefits of managing chronic disease through collaboration, intervention and promoting positive health outcomes. Regional funded educational programs that support population health management, are also initiatives that would help overcome health disparities and help to promote positive health outcomes for identified population groups who are living with various diagnosed chronic conditions.