## Reviewer 1:

- **Abstract:** Consider adding a brief mention of the methodological approach (i.e., systematic review of 31 studies). (Updated).
- There is some repetition across the first two paragraphs of the introduction (e.g., MAT as the gold standard, mention of the opioid crisis). Consider tightening the introduction to avoid duplication and improve flow. (Revised to avoid repetition)
- Consider integrating **summary comparison tables** that consolidate outcomes across the three MAT modalities to enhance accessibility for the reader. (included a summary of the tables)
- **Figures/Tables:** Consider adding visual summaries (e.g., bar graphs or heatmaps) to illustrate treatment outcomes across MAT types more dynamically. (2 tables included)
- The review presents findings across studies but doesn't fully **differentiate the quality or weight of evidence** (e.g., RCT vs. observational studies). A brief section or paragraph highlighting the most methodologically rigorous studies and their implications would strengthen the analysis. (updated)
- The issue of **selection bias** in XR-NTX studies is mentioned but could be explored in more depth earlier in the "Results" or "Discussion" section to contextualize the outcomes. (updated)
- The conclusion synthesizes findings well but could be made more actionable by clearly outlining **clinical or policy recommendations**, particularly for treatment providers in residential settings. (included & updated)
- Consider briefly discussing implications for **program design**, such as staffing models, medication induction protocols, and discharge planning. (included & updated)
- Some paragraphs (e.g., in the "Buprenorphine" and "XR-NTX" sections) contain repeated information or slightly fragmented structure. These should be edited for better coherence and readability. (included)

## Reviewer 2

- The value to the scientific community would increase with clearer theoretical grounding or meta-analytic synthesis. (introduction, method and conclusion sections updated with clinical recommendations for programs).
- Report the number of studies included. (updated in the method section)
- Clarify that results are based on secondary literature, not new data. (introduction states this is a review of the current data)
- Temper claims about long-term outcomes given the methodological heterogeneity in the reviewed studies. (updated in the conclusion)
- Generally, yes, but too much redundancy and repetition. Several sections, especially "Results" and "Discussion," restate the same findings with slight rewording. The manuscript would benefit from a tighter edit. (Edited to remove redundancy/repetition).
- **Introduction:** The first two pages repeat the same background points without adding depth. Introduce the research gap sooner. (Updated)
- **Methodology:** Describes a systematic search but lacks a PRISMA diagram or details about the quality assessment of included studies beyond a vague mention. No table of included studies. (updated with details)

- **Results:** Descriptive summaries dominate. Comparative insights are surface-level. There's no assessment of effect sizes, population differences, or limitations of individual studies. (section updated)
- **Discussion:** Largely reiterates Results. Needs to highlight contradictions in the literature and address heterogeneity in outcomes more directly. (section updated)
- **Conclusion:** Clear but overstated. The evidence base doesn't fully support the strength of recommendations made here. (updated and recommendations made)