

## **Reviewer -1**

I am unsure of what type of “study”, appears to be a review/summary article.

A methodology is not included in abstract or within article.

Document lacks clear methodology and results sections.

In the current form the document needs some considerable revisions. The article leaps from the Introduction into a summary of the various “findings” of work completed by the healthcare systems based on the author’s review. However, there isn’t any information related to study design, methodology of review, etc. This article appears to be a “book report” not an actual study. Author needs to report the methodology with a clearly stated study design and analysis. Is the “analysis” mentioned by the author, simply a review of documentation and selection by the author based on opinion? Many statements of work of the healthcare systems are generic without data or other substantiated data. This article is not research in my opinion, it is a subjective review of documentation.

### **Reviewer-Response Paragraph (addressing Reviewer 1)**

We appreciate the reviewer’s concern regarding the manuscript’s study classification and the need for an explicit methodology. We agree that, in its prior form, the manuscript did not sufficiently describe the research design, data sources, and analytic approach, which may have created the impression of a narrative “book report.” In response, we have substantially revised the manuscript to clearly define the work as a structured qualitative document analysis and cross-case evidence synthesis of publicly available award documentation, government reports, and healthcare management literature (2005–2025). We added a dedicated Methods section detailing the sampling frame, eligibility criteria, standardized data extraction procedures, and a directed content analysis approach with cross-case synthesis (Bowen 2009; Hsieh and Shannon 2005; Krippendorff 2018; Yin 2018). We also revised the Abstract to include methodology and strengthened the Results section to report the outputs of the analytic process, including thematic domains and the nature of supporting evidence. These revisions clarify that findings are derived from systematic documentary analysis rather than the author's opinion, thereby improving transparency and interpretability for readers.

## **Reviewer -2**

I have mixed feelings about this manuscript.

On one hand, this manuscript does a nice job outlining the key characteristics of successful healthcare systems and organizations. Certainly, this information will be of use to similar organizations and health care professionals.

On the other hand, there is not a description of how the data was collected (survey tool, qualitative document analysis etc), the criteria used for the systematic review, and if they included all organizations that met the criteria or selectively chose the one's the deemed that were most important. It seems that made some themes/categories to describe the characteristics of a successful program. Did use a content analysis approach to develop these themes? Without some description of the methods used your left to guess about the generalizability/transferability of the results. It would be helpful if the authors could tell us more about their process.

The sections are fine. If they choose to include information about their method of data collection. It should have its own section.

I think a description of their data collection and analysis would strengthen this manuscript.

We appreciate Reviewer 2's thoughtful and balanced assessment of the manuscript's contribution and limitations. In direct response to the concern that the original submission lacked clarity regarding data collection, inclusion criteria, and analytic approach, we substantially revised the manuscript to explicitly define the study as a structured qualitative document analysis and cross-case evidence synthesis rather than a primary empirical study (e.g., survey or interviews). A standalone Methods section was added to describe the sampling frame, the case identification approach, the data sources (award documentation, government reports, and healthcare management literature), the eligibility criteria, and the standardized extraction procedures, to reduce selective emphasis and improve transparency. We also clarified that the thematic domains reported in the Results were developed using a directed content analysis approach, followed by cross-case synthesis to identify convergent patterns across organizations and time periods, and we strengthened the manuscript's discussion of rigor, credibility, and transferability to help readers interpret generalizability appropriately for a documentary evidence base. Collectively, these revisions make the study process explicit, clarify how organizations and themes were selected, and improve the manuscript's utility for both scholarly and applied audiences.