

## Supplemental Table 1. Semi-Structured Interview Guide Organized by Topic Area

### General clinic workflow:

- In general, how do staff organize their work? (e.g., weekly staff meetings, daily huddle, email communications)
- What electronic health record/paper tools do you use to guide the workflow?
- Describe, in general, workflow of a patient coming into the clinic
  - Probes:
  - Any prior prep or review of patient's chart before they are seen? To determine if due for any cancer screening services or other preventative med needs?
  - Who checks-in, who rooms, who sees?
  - Any differences for annual wellness/preventive care versus acute/chronic care visits?
- Where do you refer patients for cancer treatment? Or ask when talking about CRC, BCA, etc.?

### Annual wellness visit/other well visits:

- Tell me about the types of population health management approaches you used to identify patients in need of an annual wellness visit/other well visits.
  - Probes:
  - Who performs care gap analysis in electronic record—if in addition to the ACO?
  - What is the metric that gets someone on the list?
    - What is limitation of data?
  - How often is data reviewed/pulled?
  - Who is responsible for working list/contacting patient/what is process?

### Colorectal cancer screening:

- Tell me about the types of population health management approaches you used to identify patients in need of colorectal cancer screening.
  - Probes:
  - Who performs care gap analysis in electronic record—if in addition to the ACO?
  - What is the metric that gets someone on the list?
    - What is limitation of data?
  - How often is data reviewed/pulled?
  - Who is responsible for working list/contacting patient/what is process?
- Tell me about screening for colorectal cancer during clinic visits.
  - Probes:
  - How is patient flagged for screening?
  - Who recommends screening to patient?
- Next, I want to talk about the screening process. Is it the same for patients identified via care gap list and in-clinic?
  - What is recommended? Colonoscopy/Cologuard?
  - Do you capture if patient accepts/refuses screening? Where?

- If accepts, how is colonoscopy ordered?
- Where are colonoscopies performed (e.g., in-house or some other facility)?
- Who schedules?
- How do you confirm colonoscopy completed?
- Do you get the results?
- Any follow-up with patient after colonoscopy completed or not completed?
  - Where documented?
- Where do you refer patients for colorectal cancer treatment?

### **Breast cancer screening:**

- Tell me about the types of population health management approaches you used to identify patients in need of breast cancer screening?
  - Probes:
  - Who performs care gap analysis in electronic record—if in addition to the ACO?
  - What is the metric that gets someone on the list?
    - What is limitation of data?
  - How often is data reviewed/pulled?
  - Who is responsible for working list/contacting patient/what is process?
- Tell me about screening for breast cancer during clinic visits.
  - Probes:
  - How is patient flagged for screening?
  - Who recommends screening to patient?
- Next, I want to talk about the screening process. Is it the same for patients identified via care gap list and in-clinic?
  - What is recommended? Mammogram?
  - Do you capture if patient accepts/refuses screening? Where?
  - If accepts, how is mammogram ordered?
  - Where are mammograms performed (e.g., in-house or some other facility)?
  - Who schedules?
  - How do you confirm screening completed?
  - Do you get the results?
  - Any follow-up with patient after mammogram completed or not completed?
    - Where documented?
- Where do you refer patients for breast cancer treatment?

### **General practice information and population health management:**

- Tell me a bit about your practice's history.
- How many providers, how many staff, roles of staff?
- What is catchment area—where do you draw patients from?
- What is the average distance patients travel to your clinic for care?
- Do you have any summary info compiled/written up about practice you would be willing to share?
- What electronic health record are you using?
- Any other additional data collection and reporting required?

### **Practice experience with change initiatives and quality improvement**

- What programs/special projects have you been involved in?

- What specifically has the ACO motivated or assisted with?
- What barriers to change in general do you see at your practice?
- What facilitators to change in general do you see at your practice?
- What are some examples of prior successes or failures with cancer control activity or change processes in general that your practice has experienced?
- How are data reports on cancer control quality shared with clinic staff and clinicians?