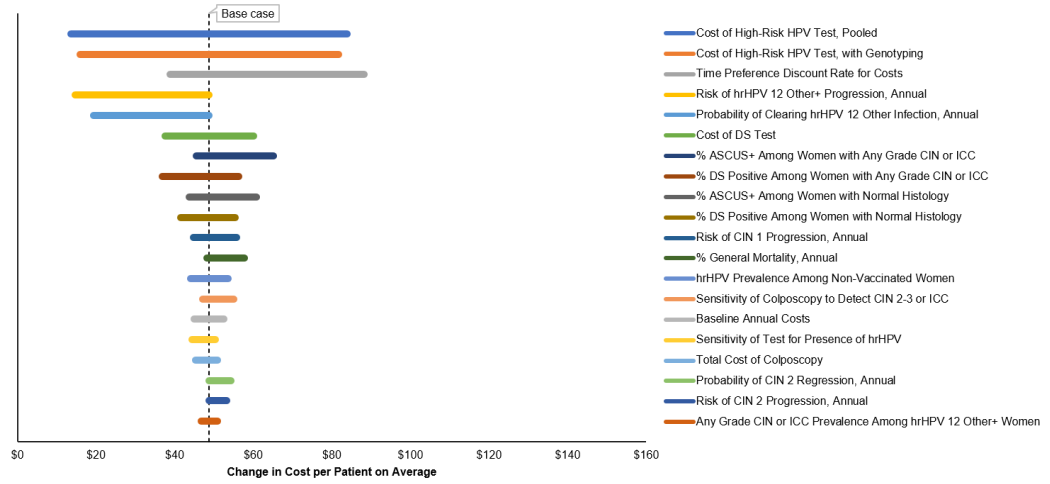


*Supplemental Figure S1. Tornado Diagrams*

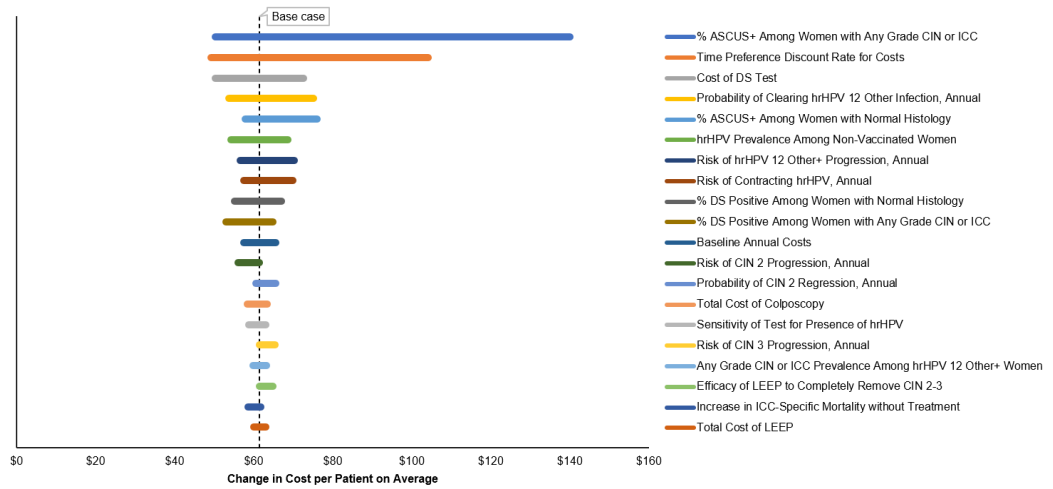
*Each tornado diagram ranks the input variables by the magnitude of their influence on the mean change in outcome with reflex DS testing from most to least influential (top to bottom). All inputs were tested in the one-way sensitivity analysis, and these tornado diagrams show the top 20 most influential inputs to each outcome: (A) Mean change in costs with DS reflex following co-testing compared to (i) SOC 1 and (ii) SOC 2; (B) Mean change in QALYs with DS reflex following co-testing compared to (i) SOC 1 and (ii) SOC 2; (C) Mean change in life-years with DS reflex following co-testing compared to (i) SOC 1 and (ii) SOC 2. The width of each horizontal line illustrates the range of results observed when varying each input individually across its range (Table 2). In all one-way sensitivity analyses, varying the input value did not cause the change in outcomes to cross zero, which is illustrated by the horizontal lines not crossing the y-axis.*

A. Mean Change in Costs

i. vs SOC 1

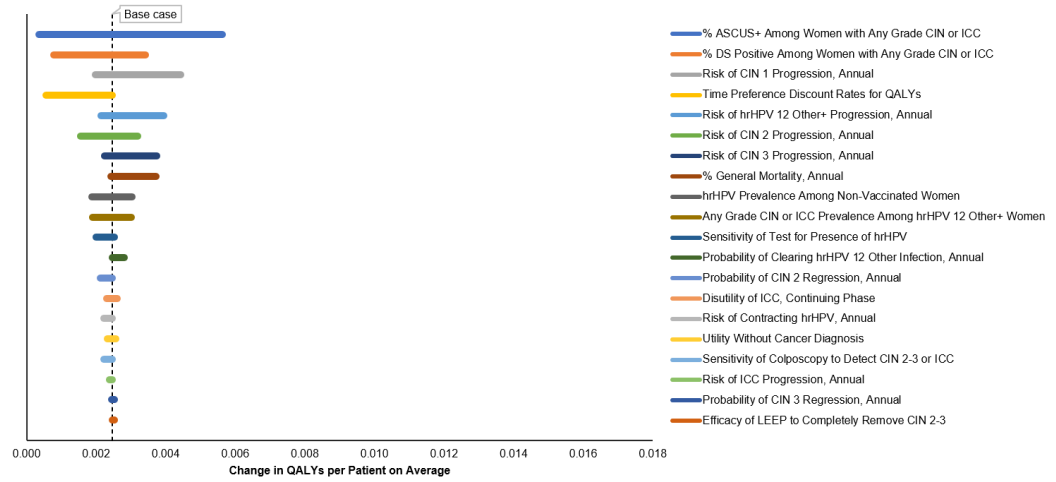


ii. vs SOC 2

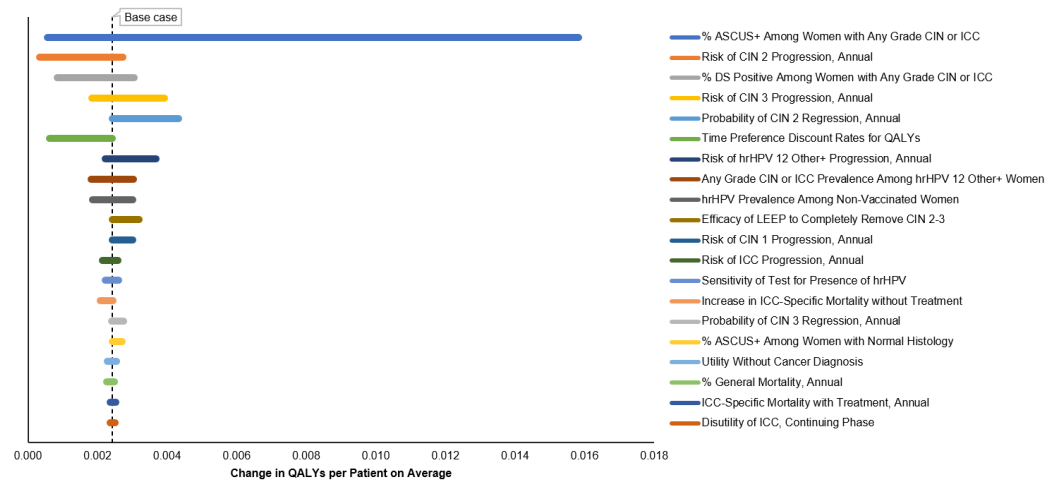


B. Mean Change in QALYs

i. vs SOC 1

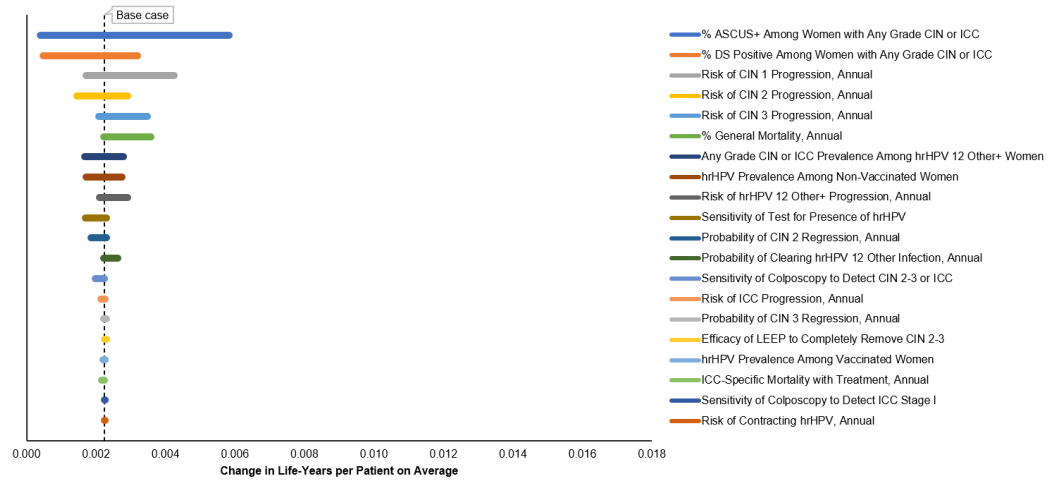


ii. vs SOC 2

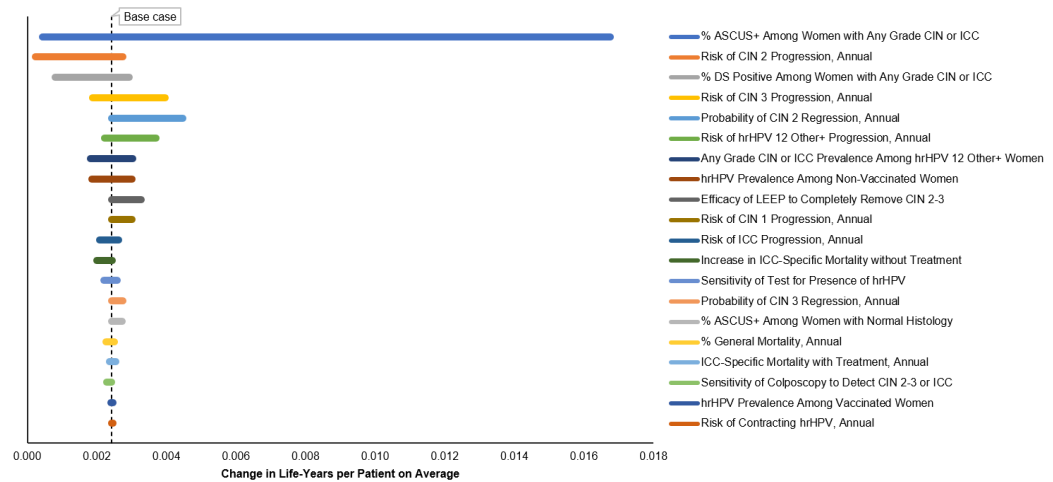


C. Mean Change in Life-Years

i. vs SOC 1



ii. vs SOC 2



*Abbreviations: ASCUS, atypical squamous cells of undetermined significance; ASCUS+, ASCUS or LSIL or HSIL; CIN, cervical intraepithelial neoplasia; DS, p16/Ki-67 dual-stained cytology; hrHPV, high-risk human papillomavirus; HSIL, high grade squamous intraepithelial lesion; ICC, invasive cervical cancer; LEEP, loop electrosurgical excision procedure; LSIL, low grade squamous intraepithelial lesion; SOC 1, primary hrHPV pooled and cervical cytology co-testing with reflex to hrHPV genotyping; SOC 2, primary hrHPV genotyping and cervical cytology co-testing with no reflex; QALY, quality-adjusted life-year.*