Summary Table: Treatment considerations and Choice of Regimen for HCV-Monoinfected and HIV/HCV Coinfected Patients

HCV Genotype	Treatment history	Liver disease status	IFN eligibility	Preferred regimen	Alternative regimen
1,2,3,4	Either	Mild without extra-hepatic manifestations (see Section 5.5 of DHCS policy)	Either	Wait	
1	Naïve	Mild with extra-hepatic manifestations or advanced fibrosis/ compensated cirrhosis	Eligible	Sofosbuvir +PEG-IFN/RBV x 12 weeks	simeprevir x 12 weeks + PEG-IFN/RBV x 24 weeks (Do not use in GT1a with Q80K polymorphism)
		Mild with extra-hepatic manifestations	Ineligible	Sofosbuvir + RBV x 24 weeks OR sofosbuvir + simeprevir +/- RBV x 12 weeks; (NOT FDA approved, must undergo DHCS investigational criteria)	
		Advanced fibrosis/ compensated cirr	Ineligible	Sofosbuvir + simeprevir +/- RBV x 12 weeks; (NOT FDA approved, must undergo DHCS investigational criteria)	
	Experienced	Mild with extra-hepatic manifestations	Eligible	Sofosbuvir + PEG-IFN/RBV x 12 weeks	simeprevir x 12 weeks + PEG-IFN/RBV x 24 weeks (relapsers) or 48 weeks (prior partial or null responders) (Do not use in GT1a with Q80K polymorphism or previous failure of boceprivir- or telaprevir based-therapy)
		Advanced fibrosis/ compensated cirrhosis	Eligible	Sofosbuvir + PEG-IFN/RBV x 12 weeks	PEG-IFN/RBV null responders: Sofosbuvir +/- RBV x 12 weeks; (**NOT FDA approved, must undergo DHCS investigational criteria)**
		Mild liver disease with extra-hepatic manifestations or advanced fibrosis/cirrhosis	Ineligible	Sofosbuvir + simeprevir +/- RBV x 12 weeks; (NOT FDA approved, must undergo DHCS investigational criteria)	
2	Naïve	Mild liver disease with extra-hepatic manifestations or advanced fibrosis/ compensated cirrhosis	Either	Sofosbuvir + RBV x 12 weeks	

	Experienced	Mild liver disease with extra-hepatic manifestations or advanced fibrosis/ compensated cirrhosis	Eligible	Sofosbuvir + RBV x 12-16 weeks OR sofosbuvir + PEG-IFN/RBV x 12 weeks; (**NOT FDA approved, must undergo DHCS investigational criteria**)	
			Ineligible	Sofosbuvir + RBV x 12-16 weeks	
3	Naïve	Mild liver disease with extra-hepatic manifestations or advanced fibrosis/ compensated cirrhosis	Eligible	Sofosbuvir + RBV x 24 weeks	Sofosbuvir + PEG-IFN/RBV x 12 weeks; (**NOT FDA approved, must undergo DHCS investigational criteria**)
		Mild liver disease with extra-hepatic manifestations or advanced fibrosis/ compensated cirrhosis	Ineligible	Sofosbuvir + RBV x 24 weeks	
	Experienced	Mild liver disease with extra-hepatic manifestations	Either	Sofosbuvir + RBV x 24 weeks	Sofosbuvir + PEG-IFN/RBV x 12 weeks; (**NOT FDA approved, must undergo DHCS investigational criteria)**
		Advanced fibrosis/ compensated cirrhosis	Eligible	Sofosbuvir + PEG-IFN/RBV x 12 weeks; (**NOT FDA approved, must undergo DHCS investigational criteria**)	
			Ineligible	Sofosbuvir + RBV x 24 weeks	
1,2,3,4	Either	Hepatocellular carcinoma	Either	Sofosbuvir + RBV x 24-48 weeks or until liver transplant, whichever occurs first	

Abbreviations: PEG-IFN = peginterferon; RBV = ribavirin