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Section:	Prescription Drugs	**Effective Date:**	January 1, 2026
Subsection:	Antineoplastic Agents	**Original Policy Date:**	January 10, 2025
Subject:	Unloxcyt	**Page:**	1 of 4

Last Review Date: December 12, 2025

Unloxcyt

Description

Unloxcyt (cosibelimab-ipdl)

Background
Unloxcyt (cosibelimab-ipdl) binds to programmed death ligand-1 (PD-L1) and blocks the interaction between PD-L1 and its receptors PD-1 and B7.1 found on T cells and antigen presenting cells, suppressing cytotoxic T-cell activity, T-cell proliferation, and cytokine production. This interaction releases the inhibitory effects of PD-L1 on the anti-tumor immune response. Unloxcyt has also been shown to induce antibody-dependent cell-mediated cytotoxicity (ADCC) in vitro (1).

Regulatory Status
FDA-approved indications: Unloxcyt is a programmed death ligand-1 (PD-L1) blocking antibody indicated for the treatment of adults with metastatic cutaneous squamous cell carcinoma (mCSCC) or locally advanced CSCC (laCSCC) who are not candidates for curative surgery or curative radiation (1).

Unloxcyt carries warnings for immune-mediated adverse reactions, infusion-related reactions, complications of allogeneic hematopoietic stem cell transplantation (HSCT) and embryo-fetal toxicity. Immune-mediated adverse reactions may occur with Unloxcyt therapy including pneumonitis, colitis, hepatitis, endocrinopathies, dermatologic adverse reactions, nephritis and renal dysfunction, and solid organ transplant rejection. Patients should be monitored for signs and symptoms of adverse reactions and based on the severity, Unloxcyt should be withheld or discontinued, and corticosteroids administered. Unloxcyt may cause fetal harm when administered to a pregnant woman. Female patients of reproductive potential should be advised

of the potential hazard to a fetus and to use effective contraception during treatment with Unloxcyt and for 4 months after the last dose (1).

The safety and effectiveness of Unloxcyt in pediatric patients less than 18 years of age have not been established (1).

Related Policies
Keytruda, Opdivo

Policy

This policy statement applies to clinical review performed for pre-service (Prior Approval, Precertification, Advanced Benefit Determination, etc.) and/or post-service claims.

Unloxcyt may be considered **medically necessary** if the conditions indicated below are met.

Unloxcyt may be considered **investigational** for all other indications.

Prior-Approval Requirements

Age 18 years of age or older

Diagnosis

Patient must have the following:

Locally advanced or metastatic cutaneous squamous cell carcinoma (CSCC)

AND ALL of the following:

1. **NOT** a candidate for curative surgery or curative radiation
2. Females of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Unloxcyt and for 4 months after the last dose

Prior – Approval *Renewal* Requirements

Age 18 years of age or older

Diagnosis

Patient must have the following:

Locally advanced or metastatic cutaneous squamous cell carcinoma

AND ALL of the following:

1. **NO** disease progression or unacceptable toxicity
2. Females of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Unloxcyt and for 4 months after the last dose

Policy Guidelines

Pre - PA Allowance

None

Prior - Approval Limits

Quantity 16 vials every 84 days

Duration 12 months

Prior – Approval *Renewal* Limits

Same as above

Rationale

Summary

Unloxcyt (cosibelimab-ipdl) is a PD-L1 blocking antibody indicated for the treatment of adults with metastatic and locally advanced cutaneous squamous cell carcinoma. Treatment may cause immune-mediated adverse reactions, infusion-related reactions, complications of HSCT, and embryo-fetal toxicity. The safety and effectiveness of Unloxcyt in pediatric patients less than 18 years of age have not been established (1).

Prior authorization is required to ensure the safe, clinically appropriate, and cost-effective use of Unloxcyt while maintaining optimal therapeutic outcomes.

References

1. Unloxcyt [package insert]. Waltham, MA: Checkpoint Therapeutics, Inc.; December 2024.
2. NCCN Drugs & Biologics Compendium® Cosibelimab-ipdl 2025. National Comprehensive Cancer Network, Inc. Accessed on October 16, 2025.

Policy History

Date	Action
January 2025	Addition to PA
December 2025	Annual review and reference update

Keywords

This policy was approved by the FEP® Pharmacy and Medical Policy Committee on December 12, 2025 and is effective on January 1, 2026.