

Turn innovation into access and reimbursement

A two-day Master Class designed to help cell therapy programs navigate the financial and operational complexities shaping real-world patient access and reimbursement.

October 28-29, 2026

WASHINGTON, D.C.

\$1,875 Registration

Includes all workshop materials, tools, breakfast and lunch, and a networking cocktail reception. Please contact us at events@nimitt.com for multi-attendee discounts.

Transforming breakthrough science into real-world patient access requires more than clinical innovation; it demands mastery of financial clearance, coding, billing, reimbursement, and Managed Care strategy. This Master Class will help cell therapy programs rise to this challenge.

[Register now!](#)

What it takes to get reimbursed

In two days, you'll build the expertise required to navigate complexity, expand patient access, and ensure your program gets paid appropriately.

What you'll be able to do:

- Approach financial clearance and prior authorization with confidence
- Accurately code, bill, and submit claims (without the costly errors and headaches)
- Prevent denials and avoid \$0 payments on expensive therapies
- Understand Medicare reimbursement mechanics and payment drivers
- Develop and execute effective Managed Care strategies
- Model financial performance for new and emerging therapies
- Prepare for the continued wave of clinical innovation



The Nimitt Master Class experience:

- Real-world case-based learning
- Interactive problem-solving exercises
- Small-group discussions with peers
- Practical tools and templates



THE NIMITT ACCESS &
REIMBURSEMENT PLAYBOOK

The Nimitt Access & Reimbursement Playbook—a practical roadmap to support patient access, strengthen financial performance, and confidently navigate the evolving cell therapy landscape.

[Register now!](#)

OCTOBER 28, 2026

Day 1: How innovation gets paid

Financial clearance | Charge capture | Coding & billing | Medicare IPPS, OPPS, MPFS | Pricing strategy

Master the systems, workflows, and reimbursement mechanics that determine whether and how your program gets paid.



APPLY & ACTIVATE

- Work through real-world financial clearance scenarios
- Resolve common claim denials
- Calculate Medicare reimbursement



TAKE-HOME TOOLS

- Financial clearance checklist
- Pre-billing checklist
- CCR-based mark-up guidance

Morning, 8:00am - 12:00pm

Navigate coverage and revenue cycle workflows with precision

Understand how financial clearance and clinical workflows impact patient access and revenue.

- Unpack the regulations that drive daily operations
- Navigate payer coverage policies and prior authorization
- Implement workflows so patients are treated faster
- Streamline documentation and charge capture processes
- Strengthen coding and billing accuracy
- Prevent \$0 payments on high-value claims

Afternoon, 1:00 - 4:30pm

Understand how Medicare payment really works

Demystify how inpatient, outpatient and physician payment systems actually work.

- Understand how the math works for Medicare IPPS and what it means for your program
- Discover the drivers that impact IPPS payment and learn how to navigate what's in your control
- Master OPPS and MPFS dynamics
- Unpack why hospitals don't truly get paid ASP+6% in practice
- Avoid reimbursement surprises due to Medicare's payment window rule

Connect and network

Unwind after a day of learning at a hosted rooftop reception with cocktails and appetizers, designed to foster connection and collaboration.

[Register now!](#)

October 28-29, 2026 | Washington, D.C. | Space is limited

OCTOBER 29, 2026

Day 2: Future-proof your program

Single case agreements | Negotiation strategies | Financial modeling | Denials prevention | Onboarding new therapies

Align payer strategy, contracting, financial modeling, and onboarding to ensure your program is reimbursed as you grow.



APPLY & ACTIVATE

- Evaluate real contract language
- Model reimbursement scenarios
- Build a roadmap for new therapy launches



TAKE-HOME TOOLS

- Contracting support tools
- SCA request templates
- New therapy onboarding worksheet

Morning, 8:00am - 12:00pm

Strengthen commercial payer contracts & performance

Build the skills required to negotiate, structure, and execute stronger payer agreements.

- Improve Managed Care contracting strategy
- Learn how to secure stronger terms
- Avoid common pitfalls during the SCA process
- Translate contract terms into operational and financial success
- Ensure you get paid what you actually negotiated

Afternoon, 1:00 - 4:00pm

Prepare for future innovation

Prepare your organization to successfully introduce new and emerging CGTs.

- Bridge the gap between FDA approval and real-world patient access
- Break down barriers during onboarding
- Expertly model costs and reimbursement
- Learn what's working well for others and what's not
- Help shape future policies through advocacy

Continue the conversation

For those who can stay, join us for informal networking at the Stuart Stein Lounge.

[**Register now!**](#)

October 28-29, 2026 | Washington, D.C. | Space is limited

Meet your speakers

Our team brings decades of combined experience to help cell therapy programs navigate the financial and operational complexities shaping real-world patient access and reimbursement.



Jugna Shah, MPH, CHRI

President & Founder

The Reimbursement Whisperer

Jugna founded Nimitt more than 25 years ago and has spent her career translating complex Medicare payment policy into practical strategies for providers and successfully advocating for improved reimbursement and more streamlined coverage, coding, and billing rules. She is a nationally recognized expert who is known for making complex reimbursement concepts understandable and actionable, and has guided organizations through every major Medicare payment evolution impacting cell and gene therapy. During the Master Class, Jugna will lead sessions to demystify how Medicare reimbursement across IPPS, OPPI, and MPFS works, and co-lead discussions on coding and billing connecting policy to the operational and financial realities providers face every day.



Kristen Muncy, MHA

Principal

The Deal Maker

Before joining Nimitt, Kristen gained wide-ranging, transplant-specific, experience at Vanderbilt University Medical Center (VUMC) in revenue cycle, provider operations, and managed care contracting. As a Lead Contract Manager, she successfully negotiated for the entire VUMC system, contracting with several governmental payers, and for all transplant programs, contracting with all payers. Her unique and comprehensive perspective helps clients take their programs to the next level, ensure patient access, and generate optimal and appropriate reimbursement.



Claire White, MSN, RN

Advisor, Health Policy and Patient Access

The Coverage Detective

Claire specializes in payer coverage, prior authorization, patient financial clearance, and translating evolving payer requirements into workflows that shape access to cellular therapies. She is an expert in providing practical solutions to access challenges while limiting administrative burden, protecting organizational financial viability, and improving the patient experience. During the Master Class, Claire will lead sessions on navigating the coverage landscape, unpacking increasingly complex prior authorization requirements, and implementing bullet-proof financial clearance processes.