

Specialists In Reproductive Medicine & Surgery, P.A.

www.DreamABaby.com • Fertility@DreamABaby.com

Excellence, Experience & Ethics



Egg Recipient *Price List (2012)*

General

The following are the charges incurred during an Egg Donation cycle. We have done our very best to estimate the charges accurately, although patient variance will often occur.

If we participate with your insurance company, we will verify benefits prior to Egg Donation. If Egg Donation is a covered service, we will bill your insurance company and collect any co-payments due at the time of service. If Egg Donation is not a covered service or we do not participate with your insurance plan, no charges will be billed to your insurance company and all fees will be as listed below:

Egg Recipient Evaluation Fees

<u>Egg Recipient Evaluations:</u>	<u>Probable</u>	<u>Possible</u>
Comprehensive New Female Patient Visit	\$397.00	
Intermediate New Male Patient Visit		\$246.00
Psychological Evaluation**		250.00
Subtotal:	\$397.00	\$893.00

** Mandatory for recipients without partners.

<u>Egg Recipient Studies:</u>	<u>Probable</u>	<u>Possible</u>
HIV (Human Immunodeficiency Virus)	\$82.00	
HBsAg (Hepatitis B)	60.00	
HCsAb (Hepatitis C)	85.00	
RPR (Syphilis)	27.00	
Cervical Screen GC/Chlamydia	106.00	
CMV (Cytomegalovirus)	72.00	
ABO RH (Blood Type)	43.00	
Antibody Screen	33.00	
Rubella Ab IGG	67.00	
Progesterone	111.00	
CBC w/ Diff	36.00	
PAP	94.00	
Electrolytes	32.00	
Varicella		\$85.00
Venipuncture (x3)	66.00	

Egg Recipient-Oral Replacement Price List (cont.)

GYN Ultrasound	498.00	
HSG		995.00
Diagnostic Hysteroscopy or Trial Transfer (If uterine cavity known normal)	995.00	128.00

If > 45 Years Old *

Screening Mammogram		127.00
Fasting Glucose Level		34.00
Fasting Lipid Profile		80.00
Venipuncture (1)		22.00

Subtotal: \$2,407.00 \$2,883.00

* This does not include a consult with high-risk obstetrics. This is offered but not necessarily required. If the cardiac status is uncertain, a cardiology consult with an EKG and/or MUGA Scan/Stress Tests may be required and these fees are not calculated here.

Male Studies:

	<u>Probable</u>	<u>Possible</u>
Semen Analysis/Anti-Sperm Anti-body Test	\$183.00	
Semen Analysis	168.00	
Semen Culture	27.00	
HIV (Human Immunodeficiency Virus)	82.00	
ABO RH (Blood Type)		\$43.00
HTLV I&II	135.00	
CMV IgG	72.00	
Venipuncture (x1)	22.00	
SA/Cryopreservation Sperm *		407.00

Subtotal: \$689.00 \$1,139.00

*Some men may request that their semen be cryopreserved prior to the procedure. This will be discussed in your case management.

[All **Egg Recipient Evaluation Fees** (\$3,493 – 4,915.00) will be due at the time of service.]

Egg Donor Evaluation Fees

Egg Donation Cycle Fee:

(Paid at time of cycle registration) \$512.00

Initial Intake of the Egg Donor:

	<u>Probable</u>	<u>Possible</u>
Comprehensive New Female Patient Visit	\$338.00	
Vaginal Ultrasound for Ovarian Placement	146.00	
Psychological Evaluation	250.00	

Subtotal \$1,246.00

Egg Donor Laboratory Studies:

	<u>Probable</u>	<u>Possible *</u>
HIV (I & II)	\$82.00	
HBsAg (Hepatitis B)	60.00	
HCAbs (Hepatitis C)	85.00	
RPR (Syphilis)	27.00	
DNA Gene Probe (Gonorrhea & Chlamydia)	106.00	

Egg Recipient-Oral Replacement Price List (cont.)

CMV (Cytomegalovirus)	72.00
ABO RH (Blood Type)	43.00
Urine Drug Screen	67.00
CBC w/Diff	36.00
FSH (Follicle Stimulating Hormone)	111.00
Electrolytes	32.00
PAP Smear	94.00
Progesterone	111.00
Venipuncture (x3)	66.00

Subtotal: \$992.00

* Depending upon the ancestry of the donor, additional screening studies for inheritable diseases will be requested. As an example, an Afro-American egg donor may be screened for Sickle Cell Trait. Whenever possible, these tests will be discussed with the recipient couple before being requested. See chart below:

Genetic Testing With Regards to Race and Ancestry:

Ancestry	Disease	Fee**
Caucasian:	<input type="checkbox"/> CF Carrier?	\$351
Jewish:	<input type="checkbox"/> Tay-Sachs	\$270
	<input type="checkbox"/> Canavan	\$298
	<input type="checkbox"/> Gaucher	\$351
French-Canadian	<input type="checkbox"/> Tay-Sachs	\$270
Cajun	<input type="checkbox"/> Tay-Sachs	\$270
Asian, Middle Eastern and Mediterranean	<input type="checkbox"/> Thalassemia (β and α)	\$108
African:	<input type="checkbox"/> Sickle Cell Anemia –panel	\$642
	<input type="checkbox"/> Sickle Cell Anemia –screen	\$16

** The above lab fees for genetic testing are estimated & subject to change

Mandatory FDA Testing

	<u>Probable</u>	<u>Possible</u>
HIV (I & II)	\$221.00	
HIV/HCN/HBV NAT	(packaged)	
RPR (Syphilis)**	(packaged)	
HBsAg (Hepatitis B)**	(packaged)	
Anti-HBc IGG (Core Hep B)**	(packaged)	
HCsAb (Hepatitis C)**	(packaged)	
GC/Chlamydia	(packaged)	
Venipuncture	22.00	
FDA Lab Shipping Fee	75.00	
Subtotal:	\$318.00**	

**The FDA is now requiring additional testing prior to retrieval. Our current negotiated price is \$275.00. This is a direct cost from the out-sourced lab and is subject to change without notice.

[All **Cycle Fee & Egg Donor Evaluation Fees** (\$2,556) and any **Genetic Testing Fees** will be due prior to the initiation of the donor evaluation.]

Egg Recipient Cycle Fees

Egg Recipient Medications:

	<u>Probable</u>	<u>Possible **</u>
Estradiol Valerate	\$498.00	\$747.00
Progesterone / Vaginal	425.00	

Egg Recipient-Oral Replacement Price List (cont.)

Lupron *	398.00	597.00
Antibiotics	22.00	
Corticosteroids	11.00	
Subtotal:		\$1,802.00

* Lupron will not be needed if the patient is in menopause.

** If additional medications are required, these will be paid to the pharmacy as needed

<u>Egg Recipient Monitoring:</u>	<u>Probable</u>	
Estradiol Levels (x9)	999.00	
Ultrasounds (x3)	438.00	
Venipuncture (x11)	242.00	
Subtotal:		\$1,697.00

<u>Egg Recipient Post –Transfer Fees**:</u>	<u>Probable</u>	<u>Possible</u>
Embryo Cryopreservation Fee		\$907.00
Embryo Storage Fee		\$397.00
Pregnancy Test	100.00	
Venipuncture	22.00	
Subtotal:		\$1,426.00

** These fees are not pre-collected with the initial deposit amount. A current credit card must available on file for these fees to be paid for on the day of service if applicable.

The Egg Recipient medications (**\$1354 - \$1802**) will be purchased at the pharmacy and will be due upon time of service. All other **Egg Recipient Cycle Fees** (**\$1697**) must be paid by cycle start date.

Egg Donor Cycle Fees

<u>Egg Donor Compensation:</u>	<u>Probable</u>	<u>Possible</u>
Initiation of Ovarian Stimulation	\$1,000.00	
Day of Egg Retrieval	3,000.00	
Subtotal:		\$4,000.00

<u>Egg Donor Medications:</u>	<u>Probable</u>	<u>Possible *</u>
Ovarian Stimulation Medications	\$1,750.00	\$3,700.00
Ovidrel or HCG	80.00	80.00
Lupron	199.00	398.00
Antibiotics	11.00	
Subtotal:		\$4,189.00

* These prices may vary with respect to the amount of medication needed by an individual Egg Donor. At times, individual patients may require even more medications than listed. Excess medication fees in the “Possible Column” may be requested as the cycle progresses. **Fees for medications are paid directly to the pharmacy.**

<u>Egg Donor Follicular Monitoring:</u>	<u>Probable</u>	<u>Possible</u>
Progesterone	\$111.00	
Ultrasounds (x4) *	584.00	
Estradiol Blood Tests (x4) **	444.00	

Egg Recipient-Oral Replacement Price List (cont.)

Venipuncture (x5) ***	110.00
Subtotal:	\$1,249.00

- * If more than 4 ultrasounds are performed, a charge of \$146 per visit will be charged.
- ** If more than four estradiols are run, there will be an additional charge of \$111 per test.
- *** If more than five venipunctures are needed, there will be an additional charge of \$22 per visit.

<u>Egg Retrieval & Laboratory Fees:</u>	<u>Probable</u>	<u>Possible</u>
Anesthesia	\$663.00	
Egg Retrieval	1,671.00	
Ultrasound Guidance	320.00	
Semen Wash	303.00	
Culture & Fertilization	4,950.00	
*ICSI	740.00	
Preparation of Embryos for Transfer	169.00	
Embryo Transfer	1,671.00	
Subtotal:	\$10,487.00	

*If ICSI (Intracytoplasmic Sperm Injection) is not performed, a refund will be issued or can be used towards other services.

[All **Donor Compensation, Follicular Monitoring & Lab Fees**, (\$17,637.00) must be paid by the cycle start date.]

Summary Estimates

Total ART Fees:	Probable	Possible
Total:	\$26,980.00	\$32,303.00
	+ Genetic Testing	+ Genetic Testing

Once Pregnancy Is Achieved

<u>Once Pregnancy Is Achieved: *</u>	<u>Probable</u>	<u>Possible</u>
Blood Pregnancy Test (x2)	\$200.00	
Venipuncture (x2)	44.00	
Progesterone (Paid to Pharmacy)	1643.00	
Estradiol Oral (Paid to Pharmacy)	96.00	
Progesterone Level	111.00	
Pregnancy Ultrasounds (x2)	816.00	
Subtotal:	\$2112.00	

[*Charges that occur **Once Pregnancy is Achieved** will be due at the time the services are rendered unless otherwise noted.]

If pregnancy is not achieved, a follow-up visit is encouraged and will be charged in the usual and customary fashion. Long-term frozen embryo storage fees are separate issues, which will be discussed with all those patients who desire long-term storage of their embryos.

Summary of Financial Responsibilities

<u>Fee Category</u>	<u>Estimated Fees</u>	<u>Payment Timing</u>
<u>Egg Recipient Evaluation Fees</u>	\$3,493 - \$4,915	At Time of Service
<u>Case Management Fee</u>	\$512	Prepayment
<u>Egg Donor Evaluation Fees</u>	\$2,556 + Genetic Testing	Prepayment
<u>Egg Recipient Medications</u>	\$1354 - \$1,802	Time of Purchase
<u>Egg Donor Medications</u>	\$2,040 - \$4,189	
<u>Egg Recipient Cycle Fees</u>	\$1697	Prepayment
<u>All Egg Donor Cycle Fees</u>	\$15,736	Prepayment
<u>Egg Recipient Post Transfer</u>	\$122 - \$1,426	At Time of Service
<u>Once Pregnancy is Achieved</u>	\$2,112	At Time of Service

Changes In Fees:

The incurred costs estimated here are not guaranteed. Individual variability often results in an unpredictable number of ultrasounds, blood tests and medication vials administered. All fees listed here are subject to change without notice.

For your convenience, Visa, Discover & MasterCard are accepted.

Any funds that were collected for procedures that **were not performed** (i.e., the cycle was canceled) will be refunded upon request within seven days of the conclusion of your cycle. Any funds **not pre-collected** for procedures performed **that exceeded our original estimates**, or for **possible or post transfer fees**, will be billed at the time of service with all monies owing to be paid within thirty days of embryo transfer. Prices may vary for those with insurance coverage.

I have read the information above and our questions have been answered to our satisfaction. We agree to be responsible for the payment of charges as stated:

Woman's Signature	Woman's Name (print)	Date
Partner's Signature	Partner's Name (print)	Date
Office Personnel Signature	Office Personnel Name (print)	Date
Practitioner's Signature	Practitioner's Name (print)	Date

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