



Summary of Self Pay Fee Schedule

Effective 4/4/17

Welcome to IVF New England!

The staff at IVF New England understands the challenges patients undergoing infertility treatment are experiencing, especially patients without insurance coverage for treatment. We realize you are dealing with multiple issues and questions surrounding infertility diagnosis and treatment and also have the added worry of "Can we afford this?"

IVF New England would like to help you alleviate the costs of treatment. While infertility treatment is costly, we have developed two options for patients who have no infertility insurance coverage to assist in managing their costs. Enclosed please find an outline of both our traditional fee-for-service IVF program.

By addressing the financial issues upfront with an outline of the expected costs and a payment schedule, we hope that you will be free to concentrate on your treatment plan. The dedicated staff at IVF New England is happy to work with you and hopes to make your treatment cycle as stress free as possible! If you have any questions or concerns, feel free to call your financial team directly at (781) 674-1585.

With warmest wishes,

The Financial Services Department
IVF New England

IVF New England's IUI Program

For patients paying out of pocket for their cycles, IVFNE has established set rates for an IUI cycle.

1. IUI **with** monitoring includes:

- Physician treatment plan and oversight
- IUI
- Nursing support
- Post operative care
- Blood and ultrasound monitoring that takes place within the cycle.
(Patients who have their blood and ultrasound monitoring at our Lexington center or another Massachusetts satellite office would fall into this rate category).

Costs **excluded** from each of this programs include:

- Initial consultation with one of our physicians
- All preliminary blood work and testing prior to the IUI cycle
- History and Physical
- Medications
- Services not related to the IUI cycle (i.e. office hysteroscopy or other surgical procedures unrelated to the IUI).
- Semen analysis.
- Cryopreservation of sperm.
- Donor sperm and associated shipping / storage fees (if used)
- Office visits for the male partner, should they be recommended.
- Storage fees associated with cryopreserved sperm.
- Pregnancy monitoring.

Storage Fees of Cryopreserved Sperm

If cryopreservation of sperm is done, an additional fee will be charged for the cryopreservation service and the first **ninety days** of storage. If the embryos/sperm remain in storage after the initial ninety days a fee of \$85 per month will be charged for as long as the embryos/semen remain in cryostorage.

Payment for most of the excluded services listed above is due on the day of service.

IUI Self Pay Price Sheet

Timed Intercourse cycles

Clomid without Monitoring	\$0
Clomid with Monitoring	\$650
FSH without Monitoring	\$450
FSH with Monitoring	\$1,700

IUI cycles with Monitoring

Natural IUI	\$1,050
Clomid IUI cycle	\$1,050
Cancelled CC/IUI w/Monitoring	\$600
FSH/IUI	\$2,200
Cancelled FSH/IUI with Monitoring	\$1,000
2 nd IUI in a cycle	\$200

*Please note that most cycles will include 3-5 days worth of monitoring.

IUI cycles without Monitoring

Natural IUI cycle	\$450
Clomid IUI cycle	\$450
FSH/IUI cycle	\$850
2 nd IUI in a cycle	\$200

*If using Donor Sperm there may be a \$35.00 Acquisition charge. This charge will include 90 days of storage.

***Fees subject to change. Please contact our Financial Coordinators for current fees.**

Self Pay Rates for Standard Testing and Services

<u>Description</u>	<u>Procedure Code</u>	<u>Cost</u>
New Patient consult		\$395
Follow – up	99214 – 99215	\$200-\$270
HSG *	58340	\$1000.00
Hysteroscopy	58555	\$2500.00
D&C	59820	\$1200.00
SHG	58340 & 76831	\$600.00
Baseline Ultrasound	76830	\$275.00
Follicle Ultrasound	76857	\$275.00
OB Ultrasound	76801	\$400.00
OB US follow up	99215	\$395
Semen Analysis	89322	\$250.00
SA Cryo (includes 90 days of storage)	89259	\$350.00
Acquisition of Donor Sperm	Cryoaq	\$35.00
Monthly Storage for Sperm or Embryo	89343 or S4027	\$85.00

* If services are done at a hospital, there will be additional charges from the hospital.

***Fees subject to change. Please contact our Financial Coordinators for current fees.**

Blood Tests

<u>Description</u>	<u>Procedure Code</u>	<u>Cost</u>
Estradiol (E2)	82670	\$150.00
Follicle Stimulating Hormone (FSH)	83001	\$150.00
Prolactin (PRL)	84146	\$150.00
Progesterone (P4)	84144	\$150.00
Rubella	86762	\$150.00
Thyroid Stimulated Hormone (TSH)	84443	\$150.00
Pregnancy Test (HCG/Beta)	84702	\$150.00
Total Testosterone	82627	\$150.00
Luteinizing Hormone	83002	\$150.00
Insulin	83525	\$150.00
Syphilis (RPR)	86780	\$150.00
Free T4	84439	\$150.00
DHEA Sulfate	84403	\$150.00

Please Note- The prices above reflect the cost when the services are performed at IVF New England. If you have testing done at another facility, you will be charged their rates.

***Fees subject to change. Please contact our Financial Coordinators for current fees.**

IVF New England's IVF Program

For patients paying out of pocket for their cycles, IVFNE has established set rates for an IVF cycle. To accommodate our patient population we have established 2 categories of rates.

1. IVF **with** monitoring includes:

- Physician treatment plan and oversight
- Egg retrieval
- Operating room time and supplies
- Anesthesia
- Embryo transfer
- Nursing support
- Post operative care
- Blood and ultrasound monitoring that takes place within the cycle.
(Patients who have their blood and ultrasound monitoring at our Lexington center or another Massachusetts satellite office would fall into this rate category).

2. IVF **without** monitoring includes everything noted above except for the blood and ultrasound monitoring that takes place within the cycle. IVFNE has made this package available to those patients who do not live in Massachusetts and/or do not wish to travel to one of our established satellite locations for the daily monitoring that takes place in the beginning phases of each cycle.

Costs excluded from each of these programs include:

- Initial consultation with one of our physicians
- All preliminary blood work and testing prior to the IVF cycle
- History and Physical
- Medications (you will be given prescriptions to purchase medications and syringes elsewhere. Estimated cost is \$3000 - \$7000 per cycle.)
- Services not related to the IVF/ICSI/GIFT/FET cycle (i.e. office hysteroscopy or other surgical procedures unrelated to egg retrieval).
- Semen analysis.
- Cryopreservation of sperm or embryos.
- Donor sperm and associated shipping / storage fees (if used)
- Office visits for the male partner, should they be recommended.
- Storage fees associated with cryopreserved embryos and/or sperm.
- Pregnancy monitoring.

Storage Fees of Cryopreserved Embryo / Sperm

If cryopreservation of embryos or sperm is done, an additional fee will be charged for the cryopreservation service and the first **ninety days** of storage. If the embryos/sperm remain in storage after the initial ninety days a fee of \$85 per month will be charged for as long as the embryos/semen remain in cryostorage.

Payment for most of the excluded services listed above is due on the day of service.

**Self Pay IVF Rates
Effective January 9, 2015**

IVF with Monitoring

Complete IVF Cycle	\$8,900	Cancelled Pre Stimulation	\$ 750
Assisted Hatching	\$1,000	Cancelled Pre Retrieval	\$2,500
Day 5 Monitoring	included in above	Cancelled Pre Transfer	\$6,000**
ICSI	\$2,500	<i>** If ICSI is performed an additional \$2,500 fee will be charged.</i>	
Embryo Cryopreservation	\$1,000		
 PGD Biopsy and Management Services	 \$2,300		

IVF without Monitoring

(monitoring fees are paid to the facility that performs the services and are the patients responsibility)

Complete IVF Cycle	\$7,900	Cancelled Pre Retrieval	\$2,500
Assisted Hatching	\$1,000	Cancelled Pre Transfer	\$5,000**
Day 5 Monitoring	included in above	<i>** If ICSI is performed an additional \$2,500 fee will be charged.</i>	
ICSI	\$2,500		
Embryo Cryopreservation	\$1,000		
 PGD Biopsy and Management Services	 \$2,300		

Frozen Embryo Transfer with Monitoring \$4,000
Cancelled failed thaw with monitoring \$1,250

Frozen Embryo Transfer without Monitoring \$3,250
Cancelled failed thaw without monitoring \$1,000

Fertility Preservation – Oocyte Freezing \$6,500
Includes blood and ultrasound monitoring, retrieval, anesthesia, OR PACU fees, oocyte freezing and 1 year of storage.
If the oocytes remain in storage after the initial year a fee of \$70 per month will be charged for as long as the oocytes remain in cryostorage.

Frozen Oocyte Transfer \$5,000
Includes blood and ultrasound monitoring, thawing, OR PACU fees, ICSI, assisted hatching and transfer.

***Fees subject to change. Please contact our Financial Coordinators for current fees.**

Additional Fees associated with PGD Cycles

IVF New England

PGD cycle with embryo biopsy	\$2300
ICSI	\$2500
Embryo Cryopreservation	\$1000

PGD Analysis by third party laboratory Determined by lab performing the testing.

You will need to set up an account with the lab to cover these fees.

Aneuploidy Screening	\$2000 - \$4000
Single Gene	\$3500 - \$5500

PGD Lab Contacts

IviGen	(310) 618 – 0618
Genesis Genetics	(313) 579 – 9650

Payment must be made to both IVFNE and the lab performing the testing before you will be cleared to cycle.

***Fees subject to change. Please contact our Financial Coordinators for current fees.**

IVF New England's Third Party Reproduction

For patients paying out of pocket for their cycles involving 3rd party reproduction, IVFNE has established set rates for an IVF cycle.

1. Donor Egg **with** monitoring includes:

- Physician treatment plan and oversight for both Donor and Recipient
- Egg retrieval
- Operating room time and supplies
- Anesthesia
- Embryo transfer
- Nursing support
- Post operative care
- Blood and ultrasound monitoring that takes place within the cycle.
(Patients who have their blood and ultrasound monitoring at our Lexington center or another Massachusetts satellite office would fall into this rate category).

Costs excluded from each of these programs include:

- Initial consultation with one of our physicians
 - The donor's consult which is covered under the Administration Fee
- All preliminary blood work and testing prior to the IVF cycle
 - The donor's preliminary blood work and testing which are covered under the Administration fee.
- History and Physical
- Medications (you will be given prescriptions to purchase medications and syringes elsewhere. Estimated cost is \$3000 - \$7000 per cycle.)
- Services not related to the IVF/ICSI/GIFT/FET cycle (i.e. office hysteroscopy or other surgical procedures unrelated to egg retrieval).
- Semen analysis.
- Cryopreservation of sperm or embryos.
- Donor sperm and associated shipping / storage fees (if used)
- Office visits for the male partner, should they be recommended.
- Storage fees associated with cryopreserved embryos and/or sperm.
- Pregnancy monitoring.

Storage Fees of Cryopreserved Embryo / Sperm

If cryopreservation of embryos or sperm is done, an additional fee will be charged for the cryopreservation service and the first **ninety days** of storage. If the embryos/sperm remain in storage after the initial ninety days a fee of \$85 per month will be charged for as long as the embryos/semens remain in cryostorage.

Payment for most of the excluded services listed above is due on the day of service.

**PROGRAM ADMINISTRATION FEES
DONOR EGG or GESTATIONAL CARRIERS**

We would like to thank you for your interest in the IVF New England's Donor Egg/ Gestational Carrier Program. This letter is to inform you of our program administration fees and how they apply to you.

IVF New England will require all patients who will be using an egg donor or gestational carrier to pay an administration fee of \$4,300.00 *per cycle*.

This administration fee will cover such costs as consultation, testing, and psychological screening for your donor or gestational carrier. It will cover all services provided by the Donor Egg team up to and including the consult for the egg donor or carrier as well as a catastrophic coverage insurance policy while undergoing egg retrieval or transfer. The administration fee is due *prior* to your donor or carrier's records being reviewed. Typically, insurance does not cover this fee.

**This fee does not cover any screening costs for the recipient couple. **

This fee is non-refundable if your egg donor or your gestational carrier decides not to proceed with treatment. This fee is also non-refundable if your egg donor or your gestational carrier is deemed to be medically or emotionally inappropriate for egg donation or gestational carrier treatment by the medical or psychological staff at IVF New England, or if the cycle needs to be cancelled for any other reason. Please consult the Donor Egg / Gestational carrier coordinator for details.

Again, thank you for your interest in our program. If you have questions regarding the administration fees and how they will apply to your particular cycle, please contact the Financial Services Department at 781-674-1585.

Discounted Administrative Fee

If you have an unsuccessful egg donor or gestational carrier IVF cycle at IVF NE and immediately cycle again using the *same* egg donor or carrier, we will discount your administrative fee for that cycle. The discounted administration fee is \$2,000.00 and it will cover the cost of testing and other services required for the donor or carrier during a repeat cycle. This is a per donor fee and is non-refundable.

***Fees subject to change. Please contact our Financial Coordinators for current fees.**

Donor Egg Cycles with Monitoring

Complete IVF Cycle	\$12,000	Cancelled Pre Stimulation	\$1,000
Assisted Hatching	\$1,000	Cancelled Pre Retrieval	\$3,000
Day 5 Monitoring	included in above	Cancelled Pre Transfer	\$9,000**
ICSI	\$2,500	<i>** If ICSI is performed an additional \$2,500 fee will be charged.</i>	
Embryo Cryopreservation	\$1,000		
PGD Biopsy and	\$2,000	Cancelled PGD Biopsy	\$300

Gestational Carrier Cycles with Monitoring

Complete IVF Cycle	\$14,000	Cancelled Pre Stimulation	\$1,500
Assisted Hatching	\$1,000	Cancelled Pre Retrieval	\$4,000
Day 5 Monitoring	included in above	Cancelled Pre Transfer	\$10,000**
ICSI	\$2,500	<i>** If ICSI is performed an additional \$2,500 fee will be charged.</i>	
Embryo Cryopreservation	\$1,000		
FET	\$4500	Cancelled Pre Transfer	\$1000
PGD Biopsy and	\$2,000	Cancelled PGD Biopsy	\$300

Gestational Carrier Cycles without Monitoring

Complete IVF Cycle	\$13,000	Cancelled Pre Stimulation	\$750
Assisted Hatching	\$1,000	Cancelled Pre Retrieval	\$4,000
Day 5 Monitoring	included in above	Cancelled Pre Transfer	\$8,000**
ICSI	\$2,500	<i>** If ICSI is performed an additional \$2,500 fee will be charged.</i>	
Embryo Cryopreservation	\$1,000		
FET	\$4000	Cancelled Pre Transfer	\$750
PGD Biopsy and	\$2,000	Cancelled PGD Biopsy	\$300

Gestational Carrier Cycles with and Egg Donor and Monitoring

Complete IVF Cycle	\$15,000	Cancelled Pre Stimulation	\$750
Assisted Hatching	\$1,000	Cancelled Pre Retrieval	\$4,000
Day 5 Monitoring	included in above	Cancelled Pre Transfer	\$11,000**
ICSI	\$2,500	<i>** If ICSI is performed an additional \$2,500 fee will be charged.</i>	
Embryo Cryopreservation	\$1,000		
PGD Biopsy and	\$2,300		

- **First FET for Gestational Carrier cycle with embryos derived prior to decision to use GC or with embryos not frozen at IVFNE. - \$7000**

*Fees subject to change. Please contact our Financial Coordinators for current fees.

Payment Requirements

IVF Cycle Fee

Payment of the IVF cycle fee will be required **in full prior to initiation of the IVF cycle**. When you call the nursing department with your period to initiate the cycle you will receive a letter from the financial department requesting payment of global cycle fee. Your cycle will not be initiated until payment in full is received.

Embryo Cryopreservation

If embryo cryopreservation is done, the fee for this service will be expected on or before the first pregnancy testing – which takes place approximately 2 weeks after embryo transfer.

Embryo / Sperm Storage fees

IVFNE includes 90 days of storage in the initial fee to cryopreserve embryos or sperm. After the initial 90 day period a storage fee of \$85 per month will accrue and will be billed monthly.

To discard cryopreserved specimens you will need to contact the embryology department to obtain the appropriate consent forms.

Please refer to the list of excluded services on page 3 of this document. Payment for these services will be required the day of the service.

Financing Options

IVFNE is excited to offer financing options to qualified patients. We have begun working with CapexMD to provide another option for patients paying out of pocket for infertility treatment and drugs. If you are interested in exploring this option you can apply online at www.ivfne.com.

In Closing

Financial Coordinators are available Monday through Friday between the hours of 8:30am and 4:00pm to answer any additional questions you may have. Please call (781) 674-1585 and speak to a Financial Coordinator.

Best wishes with your treatment at IVF New England!