	ooper Institute for eproductive Hormonal Disorders, PC	IVF and Related Procedures Fee Sc	hedule
	Service Type	Exclusions	Fee
IVF/FET PROCEDURES	IVF Procedure; Complete A complete IVF procedure including: egg retrieval, sperm preparation, embryo creation and development, and transfer.	Cycle Monitoring, Anesthesia, Cryopreservation, Embryo storage, ICSI, Extended Culture, Medications	\$4,525.00
	IVF/Embryo Freezing; no transfer  IVF procedure limited to: egg retrieval, embryo creation and development,  and cryopreservation. No embryo transfer.	Cycle Monitoring, Anesthesia, Embryo storage, ICSI, Extended Culture, Medications	\$3,250.00
	Oocyte Preservation/Egg Freezing  Procedure includes: egg retrieval, egg culture, cryopreservation.	Cycle Monitoring, Anesthesia, Embryo Storage, Extended Culture, Medications (Note: additional cryo fee applies for >10 oocytes frozen)	\$3,050.00
	Frozen Embryo Transfer  Procedure includes: embryo thaw, culture, and transfer.	Cycle Monitoring, Extended culture, re-cryopreservation, Medications	\$3,350.00
	Embryo Creation + Transfer (using previously frozen oocytes) Procedure includes: oocyte thaw, sperm preparation, ICSI, embryo creation and development, and transfer.	Cycle Monitoring, Cryopreservation, Embryo storage, Extended Culture, Medications	\$4,400.00
PGD/PGS PROCEDURES	IVF with Biopsy for PGS/PGD; no transfer  IVF procedure limited to: egg retrieval, embryo creation and development, biopsy, and cryopreservation. No embryo transfer.	Cycle Monitoring, Anesthesia, Embryo storage, ICSI, Embryo Transfer, Reference Lab Fees, Medications (Note: additional cryopreservation fee applies for >10 embryos frozen)	\$6,470.00
	PGD/PGS; Frozen (Non-Biopsied) Embryos; no transfer  Procedure includes: embryo thaw, culture, assisted hatching, biopsy, cryopreservation.	Embryo storage, Embryo Transfer, Reference Lab Fees	\$4,020.00
	PGD/PGS; Frozen (Non-Biopsied) Oocytes; no transfer  Procedure includes: embryo thaw, culture, assisted hatching, ICSI, biopsy, cryopreservation.	Embryo storage, Embryo Transfer, Reference Lab Fees	\$6,745.00
	Frozen Embryo Transfer; first FET following PGD/PGS cycle (subsequent FET cycles at standard pricing)  Procedure includes: embryo thaw, culture, and transfer.	Cycle Monitoring, Medications, re-cryopreservation	\$1,925.00

DISCONTINUED PROCEDURES	IVF Procedure Cancelled Immediately After Aspiration (usually inability to retrieve oocytes)  Procedure includes: attempted egg retrieval.	Cycle Monitoring, Medications	\$1,400.00
	IVF Procedure Cancelled Due to No Fertilization;  (no fertilization of oocytes)  Procedure includes: egg retrieval, attempted fertilization.	Cycle Monitoring, ICSI, Medications	\$2,150.00
	IVF Procedure Cancelled Due to No/Abnormal Growth;  (no or abnormal growth of embryo(s))  Procedure includes: egg retrieval, embryo creation and development.	Cycle Monitoring, ICSI, Medications	\$2,700.00

Additional IVF-Related Services and Fees		
Description of Service	<u>CPT</u>	<u>Fee</u>
Anesthesia for Oocyte Retrieval - Separate payment to DelVal Anesthesia	N/A	\$450
ICSI (Intracytoplasmic Sperm Injection)	8928 <b>X</b> (0,1)	\$1100
Extended Culture	89272	\$400
GM-CSF (per use)	N/A	\$250
Sperm Aspiration Fee	N/A	\$540
Cryopreservation / Semen - Includes first year of storage	89259	\$200
Embryo Thaw (when done with fresh transfer)	89352	\$500

Embryo / Egg (Oocyte) Storage Fee Schedule		
<u>Description of Service</u>	CPT	<u>Fee</u>
Embryo or Oocyte Cryopreservation - Fee for the freezing process - <u>Storage is a separate fee</u>	89258	\$420
Cryopreservation >10 oocytes (egg freezing)	89337	\$420
Cryopreservation >10 embryos (PGD/PGS)	89258	\$420
Embryo Re-Freezing (Post-FET)	89258	\$300
Embryo/Oocyte Storage, Recurring Quarterly - requires card to be kept on file for quarterly charges (every three months)	N/A	\$150
Embryo/Oocyte Storage, Annual Pre-Payment	8934 <b>X</b> (2,6)	\$500

Cycle Monitoring and Management Fees			
Description of Service	<u>CPT</u>	<u>Fee</u>	
IVF Cycle Out-of-Town Monitoring  - Applies to only to those patients not having performed in-house (fee is per cycle)	N/A bloodwork and	\$240 ultrasound	
Pregnancy Out-of-Town Monitoring	N/A	\$375	
Blood and Ultrasound Package (FULL)	N/A	\$1600 \$800	
Ultrasound-Only Package Blood-Only Package	N/A N/A	\$800	

## CONTACTING US

## Cooper Institute is here to help

The Cooper Institute billing department is always available to answer your questions, help determine your insurance coverage and out-of-pocket expenses, or discuss financing options.

Appointments: (856) 751-5575
Billing: (856) 810-7740
Billing Email: billing@ccivf.com
General Information: info@ccivf.com

NOTE: Cooper Institute has made a good faith effort to offer this fee schedule as an accurate representation of the most common IVF procedures performed at our office. This list is not exhaustive and does not include all services, fees, and exclusions. Fees will vary based on individual medical needs as determined by your physician. This fee schedule is subject to change at any time and at the sole discretion of Cooper Institute. This fee schedule should not be interpreted as medical advice and is not meant to diagnose or treat any condition.