



# Duke Fertility Center

## Recipient Pricing Guide Donor Charges

	CPT Code	IVF	IVF w/ICSI
<b>DONOR SCREENING</b> (\$1,300. labs, \$500. psychological evaluation)	WO341	1,800.00	1,800.00
<b>ADMINISTRATIVE FEE</b>	WO340	1,000.00	1,000.00
<b>DONOR COMPENSATION</b>		3,500.00	3,500.00

### MONITORING PHASE of the PROGRAM

The actual number of visits may vary according to your specific needs and includes the following:  
1 baseline ultrasound, 4 or more monitoring ultrasounds, and up to 5 estradiols.

*Ultrasounds & bloodwork are usually covered by insurance*

	CPT Code	IVF	IVF w/ICSI
<i>up to 6 ultrasounds @ 354.00 each</i>	76857	2,124.00	2,124.00
<i>up to 6 estradiols @ 237.00 each</i>	82670	1,422.00	1,422.00

### OOCYTE (EGG) RETRIEVAL

*This fee includes the physician's fee,  
conscious sedation, recovery unit and OR medication.*

	58970	3,100.00	3,100.00
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### Recipient Charges

#### OOCYTE CULTURE

*Oocyte Culture*  
*Extended culture of oocytes*  
*ICSI*

	89250	2,014.00	2,014.00
	89272	1,818.00	1,818.00
	89280	N/A	1,791.00

#### EMBRYO TRANSFER

*Physician's fee*  
*Gamete Transfer*

	58974	700.00	700.00
	89255	770.00	770.00

#### MISCELLANEOUS \*These fees are not covered by insurance

*Cryopreservation\**  
*Sperm Prep\**

	89258	794.00	794.00
	W0331	130.00	130.00

#### TOTAL

19,172.00 20,963.00

#### PACKAGE PRICE *required @ first ultrasound visit*

**16,500.00 17,900.00**

*This is an estimate of charges and does not include the cost of medications for the donor or recipient.  
These charges are ESTIMATES and are subject to change without prior notice.  
CHARGES MAY EXCEED ESTIMATED AMOUNT.*