

## **Infertility Pricing Information**

Thank you for trusting in ObGyn West for your medical needs. Due to the variable and sometimes lack of coverage for infertility treatment, we would like to make you aware of our fees prior to initiating care.

Benefits quoted by insurance are not a guarantee of coverage. It is important that you are informed regarding the possible cost of your medical care.

The lab prices listed are an estimate; the cost will be dependent on your type of insurance. Some insurance companies require our reference laboratory, M Health Fairview, to bill for your labs. If this is applies to you, your cost may differ from those listed below.

Labs	CPT Code	Cost
A1C	83036	\$40.00
ABO	86900	\$12.00
Anti-Mullerian Hormone*	83520	\$117.00
Beta HCG	84702	\$61.00
Chlamydia	87491	\$117.00
DHEA	82627	\$91.00
Estradiol (E2)	82670	\$114.00
FSH	83001	\$76.00
Glucose	82947	\$30.00
Gonorrhea	87591	\$117.00
Hepatitis B	87340	\$42.00
Hepatitis C	86803	\$58.00
HIV	86703	\$56.00
Insulin	83525	\$47.00
LH	83002	\$76.00
Lipid Profile	80061	\$40.00
Progesterone	84144	\$85.00
Prolactin	84146	\$79.00
RH	86901	\$18.00
Rubella	86762	\$59.00
Testosterone, Free	84402	\$104.00
Testosterone, Total	84403	\$105.00
TSH	84443	\$69.00
Urea/Mycoplasma	87798	\$117.00
Venipuncture (Blood Draw Fee)	36415	\$12.00
Vitamin D	82306	\$121.00

<sup>\*</sup>This lab is always billed by M Health Fairview, price is subject to change

Saline Infusion Sonohysterogram (all 3 codes will be billed)	CPT Code	Cost
Saline infusion sonohysterography (SIS), including color flow	76831	\$387.00
Doppler, when performed		
Catheterization and introduction of saline or contrast material for	58340	\$510.00
saline infusion sonohysterography (SIS) or hysterosalpingography		
3D rendering with interpretation and reporting of computed	76376	\$147.00
tomography, magnetic resonance imaging, ultrasound, or other		
tomographic modality with image postprocessing under concurrent		
supervision; not requiring image postprocessing on an independent		
workstation		

Ovulation Induction	CPT Code	Cost
AI/IUI (Artificial Insemination/Inter-Uterine Insemination)	58322	\$261.00
Baseline Ultrasound (Cycle Day 1-5)	76830	\$395.00
Follicle Ultrasound (~Cycle Day 11)	76857	\$296.00
Ultrasound Review**	99212	\$145.00
Ultrasound Review**	99213	\$239.00
Ultrasound Review**	99214	\$349.00

 $st^*$ Ultrasound review is dependent on the level of visit based on the documentation from the physician during your visit

## **Global Infertility Package Pricing Information**

- If insurance denies your baseline ultrasound, follicle ultrasound(s), <u>and</u> reviews, you will qualify for our global infertility package pricing.
  - The current cost per global infertility cycle is \$725.00
    - This amount is due at your baseline ultrasound appointment.
    - This includes: a baseline ultrasound and review, required follicle ultrasounds and reviews.
    - This does <u>not</u> include: labs, medications, artificial insemination/inter-uterine insemination.
    - All package pricing patients are manually tracked. Discounts are manually applied once per week.
    - Your cycle will be discounted after your entire cycle has processed with insurance.
      - In the meantime, you may receive statements for visits within your cycle that have already processed.
        - O Due to the way the discounts are manually applied, we must wait for your entire cycle to process with insurance prior to applying any discounts.
        - o Please contact the billing office with any questions.
- If insurance **covers any portion** of your cycle (baseline ultrasound, follicle ultrasound, review), you **do not qualify** the global infertility package pricing.
- 4 You will be required to make payment on any deductibles, co-payments, or co-insurance amounts as determined by your insurance company.