# How to Pay for IVF-20260810_223006UTC-Meeting Recording

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**BETO PEREZ**

Well, thank you so much for joining this webinar. We've got this exciting series that we are doing, and this is right in the middle of it. So I want to just go over the audience tips before we get started with our presentation today. Please use the Q&A function at any time to ask your questions.

You can also put them in the chat if you're live. If you're on TikTok, please just let us know and we will get them answered. And as we turn it over now to Mr. Beto Perez, who's going to talk to us about how to pay for IVF. Can you please tell us a little bit about yourself? Oh my God.

All right. So what about me? I'm one of the partners here at Positive Fertility in San Antonio, Texas, but I'm in charge of all of the marketing and sales for Positive, either here in San Antonio or any of our great locations in Houston and very soon in Austin. and El Paso. And we even have a satellite office in the Rio Grande Valley. So anything related to how to pay for IVF and how to get lined up with all of our fabulous services, that's where you come in here. And I have a wonderful staff of folks in Mexico, that's a car call center that speak English and Spanish.

and can take care of all of your needs. We're going to be constantly referencing phone numbers and websites and everything else. So without further ado, welcome and let's get going. So this is our agenda.

Pretty like, it's going to be really super simple. We have the presentation here in back. There's the folks in in the webinar land that are seeing it live in their own like computers or on their phones. But I'm going to be for here for TikTok. I'm going to be showing you the presentation right here. So really quickly, it's we're going to. was over here. How much do does IVF really cost here in Texas? Remember, we're a Texas-based company. So we have offices in San Antonio, Houston, really soon in Austin, very soon in El Paso, and a satellite office in the Rio Grande Valley. So what does it cost really here in Texas? What's included in an IVF cycle?

We're going to talk a little bit about that. How to pay for it with cash, ACH, financing, all of that stuff. And what if you want to go out of state or you're from out of state and you want to come over here? Or there's a lot of folks that go like, oh my God, I

get all these advertising of doing IVF in Mexico. Like what are the implications of that?
And over here, like why IBM cost them what it costs? Using insurance. A lot of folks, we get that question all the time. It's like, oh, I have insurance. How can I use insurance? We're going to talk all about that. And financing, what to ask for, and finally, the importance of speed and simplicity.
And we'll talk a little bit more about that. So without further ado, and just remember here in both in TikTok and in webinar land, just ask the questions. There's going to be folks taking care of your questions either directly or they're going to raise their hand and stop me in my end during the presentation and I'm going to be able to answer them. So
Don't be shy. Ask your questions. We want you to feel empowered. You want to feel, we want you to know what you're getting into when you're going into any type of fertility care. Okay, so here we go. Now, quick intro for anybody who's in TikTok. Father Fertility runs IVF clinics in San Antonio and Houston. I've already talked about that.
But the three things that we are the most proud of is how we are efficient. That means fewer visits, less cost for you.
we're going to be talking about over and over again. If we publish all of our prices, we know exactly what you get. We'll know, you know exactly what you're paying for. Instead of like paying, playing this, hide the ball, you really don't know until you go up to the clinic. And then lastly is advocacy. We believe that having a baby of your own is a fundamental human right. So what does that really mean? Does that, a lot of the times folks have felt that IVF is not for them. They felt either priced out. They felt like that they've been left behind, but not here at positive. Our core mission is to make IVF affordable and safe for as many people as possible.
So let's go. So how much does IVF actually cost here in Texas? So if you've got to go over here, number one, it typically, whenever you can even get the data, sometimes you can't. IVF costs anywhere between 15 and $28,000. It's really hard to nail them down. Really, really hard.
So it's just an estimate. And so, but positive, we actually publish our prices and our prices range from $49.95, which is something called positive one, which is a low stimulation IVF, to $12,995, which is IVF with medication, what we call IVF.
Plus, and we even have a discount that's going on right now. And finally, what do most patients actually end up spending in IVF here in Texas? It's more like $26,000

once all of the add-ons are lined up. And we'll talk a little bit more about that. So What drives the cost of IVF? Everybody asks us, like, why is IVF so expensive? What are the components of what an IVF costs? So this is what it is. Check it out. So first, We're a lab, not just an office. The majority of the fertility clinics, what everybody refers to as the lab. What is the lab? That's the place where all of the eggs and the sperm, we get them together, these like super interesting microscopes and everything else, and also referred to as the lab is the OR, is where all the retrievals and the transfers occur. So it's not just like the front desk and a couple of exam rooms. There's a lot of stuff that needs to be paid for that happens in the back. So #2, it's the expertise that you're paying for. Quick, just a little quick question. Do you know how many, we're in a country of 365 million people.
million people in this country. An IVF Dr. is called an REI, a reproductive endocrine knowledge and infertility Dr. We're really super lucky here in positive Fertility. We're managed by two REIs. But you know how many REIs there are in the whole country of 365 million people?
There's only 1400, just 1400. Versus OBGYNs, there's closer to 25,000 OBGYNs. And out of those, only 1400 REIs. And most of them, most of those REIs are like in New York, in Boston, in Connecticut.
some of it, a lot of them in Florida, a lot of them in California. There's just not a lot of them in Texas. And we're lucky enough to have two of them. So it's simple economics. It's a law of supply and demand. When there's not a lot of REIs, that means not a lot of offering of this service. So it's going to be expensive.
But not with us. Not with us. I'll explain it to you a little bit later. The other is magic medication. Medication can genuinely be unpredictable in general.
There's all of these people that go like, oh, we give you a protocol just for you. And they start modifying the protocol every time that maybe you have a failed cycle. There's all of this science and we can share all the articles with you is that changing the protocol does not affect the outcome. So here at Positive, we don't have dozens and dozens of protocols. We have two, sometimes three, just three. And by simplifying it, we make it more streamlined. We end up making it more affordable. but prices go up and down because of that issue of medication. And lastly...
This is the painful truth here. Sorry, guys. This is the painful truth.
Some of the prices that the clinic charges have nothing to do with what it actually has to do with running a clinic.
Over 64% of all IVF clinics in the United States are managed by something called

private equity. And those are folks that put a bunch of money into fertility clinics and they want their money back and they want their return as high as possible. So what are they going to do? They're going to charge as much as the market will bear. And unfortunately, that leaves a bunch of folks behind. And that's what here we're trying to fight against here at positive Fertility. So it's, so again, what's actually included in IVF? There's two big chunks that are included in IVF. One is the retrieval, like everything that happens in the retrieval, that is
So we get the eggs. Let's do a quick anatomy check. In order for somebody to be able to get pregnant, you only need three things. Three things, that's it. You need eggs, you need sperm, and you need a place for them to get together. So that's really simple. So you need eggs that comes from the ovaries.
We need sperm that comes from the men and the swimmers. And then you have the place for them to get together. So what ends up happening, if you have a problem with any of those three, you're going to have a problem getting pregnant. So what happens during IVF is we take eggs from the women and swimmers from the men, and we take one.
one swimmer, one egg, and we put them together through a process called ICSI. OK, so it's called ICSI, and it's really cool. That's what happens in the lab. And that's what we, that's the retrieval. That's the retrieval stage over here. And then you have the transfer, what happens after.
You create the embryos, and then you transfer them to the woman. That's over here. Medication monitoring, the embryos transferred procedures, and then you also have everything that happens after you do all the pregnancy tests to make sure that the embryos created pregnancy. That's another thing for us to really
take into account. A lot of people say, oh, an embryo is a baby. That's not true. An embryo is not a baby. An embryo is a potential pregnancy. The potential pregnancy. And it's really, really simple. So imagine we transfer one embryo and there are multiples in your family, especially on the woman's side. But can we work with both? mainly is from the woman's side. It's that single embryo can split and all of a sudden you have a pregnancy with multiples, with two babies. So one embryo, two babies. So that's, and also an embryo,
might be no baby, might not be a pregnancy. So an embryo is a potential pregnancy. So those are the two big components of any IVF cycle. It's the retrieval,
and the transfer. Okay, we'll talk a little bit more about that, but it was really important for us to just get on the same page, what all that means. Now, most clinics

bill for these things separately. Okay, and we're going to go through an example of that. So you got to be really careful when you go in and you're doing your research because you're considering IVF to expand your family.
And all of a sudden you see, oh, a price like this, and you go and you think it's really inexpensive. And then they go, oh, but ICSI is extra. Oh, but the medication's extra. Oh, but the egg freezing is extra. Oh, but the egg storage is extra. Oh, but if you want to do, there are all of these extras that they start charging you. And then all of a sudden you thought they were going to pay one price, you end up paying a lot more. So you've got to be careful with all that.
And so.
Positive bundles these things together. That's super important. So there is, instead of having you guess what's going to be good or what price you're going to pay, we put all of it together. The only exception, actually there's two exceptions that we do, is medication. We charge that separately.
But separately meaning sometimes we put it in the package and sometimes we don't. Why? Because some folks can get medication by themselves. We're so close to Mexico, some folks can go into Mexico and buy the same medication that we use here. You get it for about a half or a third of the price.
You can do it in Mexico. It's super easy for that to happen. The other is Trump, the Trump RX. Trump RX, you've probably heard of it. They actually have pretty decent prices in, it's actually pretty comparable to what we charge anyway. But some folks can go in there and get some discounts and coupons and like all that stuff that we don't have access to.
and can buy medication and Trump RX, and it's going to reduce their cost. So that's another, that's an important one to figure out. Questions so far. I just want to make a quick check. I'm going really fast. Yeah. How long is freezing included for in the package price? Okay, so we're going to go over that. When we do our pricing,
All of our packages include a one year freezing, one year of freezing. So you, and that year doesn't start counting until after the pregnancy is declared. Okay, or after the either declared that it worked or that it didn't work. Make sense? Can I get an IBF with fibroids?
Can you what? Get IVF with fibroids. Okay, so remember, I'm gonna, I don't, I'm not a doctor, but I play one on TV. I'm kidding. So I've been in IVF for a long, long time. So I can give you the perspective of somebody that has heard a lot of doctors talk about a lot of stuff, but I am not a doctor.

I am not a doctor. I can only give you like guidance, so...
Like always in medicine, it depends. If there are simple fibroids that are in, that are attached to your uterus, that's relatively simple to clean out with a hysteroscopy. If not, then we can do here. If they're attached to your ovaries or it can create a hydrosalpin in one of the tubes,
That means like really a big blockage that's weighing them down. It's a whole other thing that still needs to be addressed, but probably by OBGYN. So the short answer is yes, but the longer answer is depends. Okay. Do we accept progeny? Do we accept progeny? That's a really good. So we're going to, we have a whole other section just on insurance.
and we're going to touch on progeny, like yes, positive fertility does not work for the insurance. We'll talk a little bit more about that. But what we do accept is a type of insurance called fertility benefits. And that and progeny is one of the really, really great fertility benefits, especially here in Texas. They have the UT Health
I'm sorry, the University of Texas system. So if you work for UT, you have progeny. We accept progeny. If you work for HEB, HEB is also a progeny. If you work for HEB and you qualify for progeny benefits, you can come to us and we'll be glad to see. Okay? Okay, moving on. So now, this is a real quote, okay? This is a real quote. Remember, there's not a lot of things out there on the internet, either in Texas or anywhere else, where they actually give you a quote for what things, how much things cost. I'm not going to tell you where we went.
but we went to more than like a half dozen places and we secret shopped them and got quotes. And these are like kind of like exactly what what what you're going to be looking at out there if you actually went through. OK, so so it's you always start with the advertised price. I mean, give me a second, because I...
Now the camera's moving a lot, like like this.
So.
This, I'm sorry, I'm I'm oh, go the other way.
Hi, I can't see it. Oh, I'm sorry. It's because the camera for the for the folks in the webinar land, I think I think I'm going to move over here a little bit, a little bit more, a little bit more. Give me a second.
I like that. There you go. All right. I use like these fancy hand gestures to move the camera. It's for people in the webinar. But anyway, so keep going. So the advertised price over here, like that you see out there, is very, very common, is $99.95. Oh, you can go, you can get IBM for 99.95. Oh, that's great.

And then you go in there, it does include everything. Remember, there's a bunch of other stuff, for example, medications.
Medications are not included. So all of a sudden you're over there paying anywhere between $2,500, $3,000, $5,000. They never tell you until you're right there. INSI does not include INSI. That 995 is for just like IVF that you put eggs in a sperm in a Petri dish and hopefully they'll create embryos.
So ICSI is extra. So they charge you $1,500 for ICSI. And then anesthesia. They don't tell you that the retrievals are really uncomfortable. So they go like, oh, you know what? We're going to, we have this fancy anesthesiologist that we're going to, that you're going to be able to come in, we're going to do your
your procedure with them, and then all of a sudden you're like $900 in. Okay, and then embryo freezing. Okay, we then, oh, you know what? That was a fresh transfer. You know, like, no, you're fine. You're okay. You're okay. Someone wants to zoom in. Oh, really? Yeah. All right, well, it's, you've got to see me in that close. So it's
then embryo freezing. So, oh, well, this is for a fresh transfer. That means that if you had extra embryos, we're going to charge you for that. Okay, so that's a problem. So that's another $1,200. And then the first year of embryo storage, when you're lucky, it's $600.
when you're lucky. Most of the time it's close to $1,000. So all in, when you started thinking that you were going to pay 995 and then you go in and they give you all of this stuff, you end up paying $19,000 versus same thing
But for us...
Here, here a positive is 10,995. Everything, one price. Like all of this stuff that we were talking about, everything over here, I feel like a weatherman. Like every, like all of this stuff that you're talking over here, it's included for one single price of 10,995. Okay? Now, you want PGTA as well? We charge extra for it. Remember, there were a couple of things that we that that that we don't do all in, because some folks don't need it. OK, so give me a second, because this I've made-up some some hand gesture that was weird, and now it's looking for something else. So, it's remember that that that that was that was something that was the second thing.
One was medication. Some posts can get it on the side or with another sources, or you can get the medication through us. And the PGTA, same thing. Some people need it. Some people require it, especially if like, if you're like in your 40s or close to your 40s, we actually recommend
doing it. PGTA. PGTA means pre-implantation genetic testing. That's a PGT, pre-

implantation genetic testing, and then A for abnormalities. Okay. So what they're looking for is they're looking for chromosomal abnormalities. What does that mean? Chromosomes comes in pairs, in pairs. So you have all of these chromosomes like that make up your DNA, okay, to be, some of them have an extra little like A or or or an or X or a Y. Sorry, it's not an extra. It's XY.
Somebody just said Espanol. Espanol. I is the security. I mean no presentation. Espanol Tamil la Pueda said is the pre implantation is pre implantation, but I is abnormalidades in hence.
That means three in one. So that's typically when folks got 21, trisomy 21 is Down syndrome.
Like, so you want to be able to make sure that if there is an abnormality like that, that you're able to detect it, and then just transfer the embryos that don't carry the abnormality, as you can get because you can produce both. An extra benefit of PGTA is that you can detect the sex of the embryo. Okay, you can take which which gives you a 97.999 effectiveness of what the sex of the baby is going to be if it comes to term. So
Some folks use PGTA for something called family balancing, meaning you already have three girls and you want a boy. You want to make sure that the one that the embryo that you transfer is a boy.
Esque pueden pues detectar el sexo del embryon. Cha el sexo que de el bebeque bara suntar del embryon. I hope that that makes sense. Question. Yes.
PGTA offered with IVF1? No, because IVF1 is a fresh transfer. So in a fresh transfer, we do not do, it's only to produce one. And also the idea behind PGTA, doing one testing of 1 embryo for PGTA,
is a little bit of overkill. What you want is to have as many embryos to test as possible, especially if you're testing for an abnormality and you do PGTA and it's abnormal, you would want to have others that are not abnormal, that are normal, that you'll be able to transfer. Same thing.
If you're doing for family balancing, if you do PGTA on one embryo, which is that, that's the whole idea behind positive one, just to do low stimulation to produce one embryo. And then you just do test on one embryo. And it's kind of a coin flip, you know, like it's going to be either a boy or a girl. And if you want it the opposite, then you're better off just having more, like more embryos. That's why we don't do it. Besides, you need to freeze them and to do the sampling. Question. We have a bunch of questions. How much is PGTA? $6,000. Oh, okay. The question was, how

much is PGTA? The answer is $6,000. What if my first transfer did not work? Do I have to pay $10,995 again? If your transfer did not work.
and you have extra embryos to transfer. That's why like normal IVF or classic IVF, if you want to call it that way, is the whole idea is to produce as many embryos as possible. So if your first transfer did not occur and you still have embryos left, the old, I'm sorry,
If your transfer happened and you didn't get pregnant and you still have embryos left, the only thing you pay, again, is for another transfer. You already have the embryos made. The only thing that you're doing is paying for a transfer. And that's $29.95. Right? How long is the IVF process? How long is the IVF process? Okay.
We are, we at IVF and anybody that does IVF is dependent on a woman's cycle, okay? Depending on a woman's cycle. So we're depending on that 28, sometimes 29 day window. Meaning if the person is in the right, if the woman is in the right time of their cycle,
IVF can last, I don't know, like, no, I don't know, I do know. It can last about 45 days, okay? Like between retrieval and transfer and everything. Now, positive one can be as little as 15 days, okay? Like if you're in your right time of your cycle, if not just add 30 days, that's 45.
In a normal IVF is about, not normal, just like traditional IVF, it's from beginning to end is about 60 days. So if you're in the wrong time of your cycle, meaning the long part of it, it can be up to 90 days.
Anybody else? How much is the transfer? Transfer is $29.95. And if you go to positive.com or press your button down here, we'll send you a link where you can see where all of our prices are. Okay? Does age matter? Any risk?
Yes, it always does. So what we do is, for example, for PGTA, we recommend, or the American Society of Reproductive Medicine, ASRM, recommends PGTA testing for women that are in their latter 30s, the latter 30s to 45. Okay, now,
I had promised myself that I wasn't getting into too much biology, but here we go. So it's just imagine there's male factors and women factors, you know, egg related to egg and uterus factors and related to semen factors on the side or swimmer factors in the side from men.
So on the woman's side, the biggest factor is the age and quality of the eggs. Women are born with all of the eggs that they're going to have for the rest of their life in the moment that they're born. And they start losing eggs from their fur when they're in the womb.

They start losing eggs all the way till they get to to their to menopause. OK, so that that's you don't produce more.
On the opposite side, men produce swimmers all the time. I say I'm saying swimmers instead of the technical part, but apparently, like TikTok doesn't like it. Anyway, so you produce swimmers all the time. As you get older, the swimmers get less quality, but that doesn't really happen until you're in your 60s, depending on how you lived, if you smoked or drank or anything else.
But on the woman's side, the quality and quantity of their eggs peak when they're right before puberty, like around 14, 15, and then start going down. So their peak fertility goes up to about when they're 25, and then it starts going down. So as they're going down,
the quantity of like how many diminishes, but also the quality. And that way, that reason, that's one of the big reasons. If you're 45 years young or beyond, we don't qualify for positive fertility. We send you
To another clinic, it will then transfer those embryonics.
La pregunta es que se puebos transferir doce embryone so mas la espuesta corta is no aye situation es que si pero la espuesta corta es no porque. El nosoto se gimo las giances el ASRM la societa americana de medicina reproditio de my ASRM.
Ellos recommend that que unicamente se transfiera un embryon or que lo que estas tanto de ser es evitar multiples. I'm going to say it in English. So what you're trying, we only transfer one following ASRM guidelines. Why? Because we want to avoid multiple.
Pregnancies. Why do we only transfer one embryo at a time? Because it's a risk for the babies. Multiple pregnancies, like 2 twins, triplets, etc.
They are a risk for the mum and they are a risk for the babies in the.
The Fertility rate right now in the United States for IVF sits at around 60 percent, 60 percent. Natural fertility, when you're up there top, top, top in your 20s, is in the mid 20s. So it's almost three times as much
effective IVF that you'll get pregnant versus in your top, top peak. Like if you're already in your mid 30s, it's already about 12% your fertility rate. And IVF is still in the 60s. So if it's a possibility of 60s per the 60s, because we're so good at ICSI, because we're so good at transferring. Imagine, you transfer 2 embryos, chances are you're going to get pregnant with both of them. And let's just say you're one of the lucky ones. You're born with two healthy babies. You made it through okay. The indices of divorce

of people with multiple with multiples in their pregnancy is almost four times as the normal as like if they were but just born with one. It is super stressful. It's stressful to couple, not just for the mom. All right, we're going to keep going. Does low AMH levels make you ineligible for IVF with positive?
Not necessarily. Okay. So, in the, I always, I hate it because I always end up like using these qualifiers. So, positive one, positive one, remember, we're trying to produce just one good embryo. That one we do have a limit of 1.5, AMH 1.5 or higher. But for the like traditional or normal IVF,
We we don't. We actually specialize in people with with with low age. All right, we got to keep going, because because we're we're arguing with time. All right, we're half an hour. We're still pretty good. All right, we're going to keep going. Insurance. OK, we get that question all the time. Like, does like, do you take insurance?
The short answer is no. Like, we don't take insurance. A quick show of hands, quick show of hands. Who likes to, who out there likes to deal with insurance companies? Who? Wherever it is, you're lying. You're lying. Nobody likes to deal with insurance companies. So guess what? We don't either. They're difficult to deal with. They don't pay you a lot. And you have to have a staff dedicated, like at least three or four people in a clinic like our size and a lot more.
in clinics that are bigger or networks just to deal with insurance. So what we do is we don't take insurance and we save a bunch of money and we pass that savings on to you. Now, that said, we get that question all the time. And I think it's fair to talk about why we really don't take insurance. I gave you the really high up answer.
But you're going to see that how much we charge by the time you end up like taking all that money out, it's almost the same and you'll see why. So many plans make you fail at lower intervention treatments first. Remember, insurance companies are made for money.
Okay, they're made to make money. So if they can get you pregnant by not spending a lot of money, okay, they're all going to try and do that first. Because you already paid for it. So right now, let's just say, let's talk about this. This is a real journey, a real journey of somebody
In insurance, let me let me see if I can lock myself in here.
Okay, so this is a real journey of somebody that when that is taking insurance. So Yeah, we have fertility coverage for insurance. But really, remember, they make you do all of these low intervention things first that you have to pay for. So it requires first a step therapy called Clomid and a couple of Clomid or Retisol rounds.

plus monitoring is around $900. You're already $900 in. And then they require two IUI attempts. IUIs, the fertility rate for an IUI, you know what it is? It's barely natural fertility. It's a great option if you don't have a lot of money because they're typically around $2,000.
But the fertility rate is around 18%. 18% versus 60, like 2% or 65% in the case of positive fertility. So you're already two or three rounds in of IUIs, that's $4,500. That's money out of your pocket, okay? That's before your insurance even starts hitting.
And then finally,
Is you can reach your out-of-pocket meds that you still haven't reached it because you did all of this, and that's...
another $1,600. And it depends on the type of insurance that people have, like really high deductibles, like a $10,000, you're not even there yet. So let's just say you're really lucky and you have a deductible of $8,000. Okay. So that means that you already paid $7,000 out of your pocket and you still haven't even hit.
Now.
There are, let's just say it's a $7,000 deductible. Okay, so you hit, you're lucky, you're great, right? Not so fast. Because typically an insurance covered IVF does not include a bunch of things. For example, ICSI. ICSI is not included.
So you're already out of your 7 grand deductible. You need to pay an extra $1,500 to do ICSI. If not, you're just going to do that old school IVF, put a bunch of eggs and a bunch of sperm in one little petri dish and hope for the best. Then, so that's ICSI. So let's just say like lower end ICSI is like 1500 bucks.
So injectable medications, a lot of the times your IVF cycle in insurance does not include medication.
So if you don't have the drug benefit, you're not going to be able to get, you're going to have to put them out of pocket. So that's another $5,000. So where's your, where's your, where's your coverage? Like really, like then that's another $5,000. And then we don't include embryo storage for those little extra little embryos that you did. So
If you're lucky, remember, it's more like $1000, but let's just do it nice. Be nice. Let's say 600.
That's $14,000. $14,000 with your insurance.
Question. Yeah. If you have frozen swimmers, but need embryos. If you already have the swimmers and it's your, you want to use, can you ask? So the question, the question is, if you, if they have frozen swimmers and they need embryos,

How much would it be? So now, God, I hate, I remember, I hate doing dip pets. So if you were going to do your own embryos, we would need to do a retrieval round. It would be like a full idea. If you would need donated embryos,
You would need to go to Embryo Bank USA or any of the other embryo donation facilities and get them there. I hope that I hope that that answer. About frozen. Frozen embryos. They were the three of them are donated. So.
It is, it is. So the answer, the short answer is depends on which lab and from where, because there are some really good labs out there and there's also some not very good labs out there. So we're going to be taking embryos that were proud, that were not done with good vitrification, that we take responsibility for them.
So, it's like we'd rather we'd rather we do, but but it's just going to depend on on where do the embryos and sperm action come. Bienen banco de esperma y ovulos. Nuestros que usamos para tanto para embryones como para esperma condonadores is the if it was a lot of very most difficult.
reciprocal IVF. The problem the question is if we do reciprocal IVF. The short answer is no.
OK, and we la espuesta corta is no no acemos reciprocal avia porque porque no sotro no tomamos este acemos ciclos donando.
Esta que la mujer esta do nando obles porque porque no la sems terequere mu muchos travito legales travitas tasico loji cos de lo que significa do nad un oble en eso en ya de mu chisimos costos y esaigo que simplees en nuemos en contrado de mania de es a low cost efficiente.
So doing it quickly in English, we do, we don't do donated psycho because there is all of these legal and psychological requirements of managing somebody donating their eggs, even if it's a female to female committed partnership.
It's still considered a donated egg. Like if somebody is like, is donating the egg and the other person's going to carry, that is still considered a donated egg. And we haven't been able to figure out a way to do it in a cost efficient manner. So hopefully in the future, yes, if we're able to figure it out, but we haven't been able to. What is the cost for IVF with donor eggs? Do you all provide that service?
So we do not, we refer people where you can get, where you can get your donated eggs. Typically Egg Bank USA, they're our preferred partner. There's others out there, but we really like working with them. We really like their lab. And we've never had issues with their, with the donated eggs.
And I don't remember, I'm not recalling right now the name of the donor of the

sperm bank. So we typically just refer you to them. You get the eggs and sperm over here, and then we'll, it's a different type of cycle because you have somebody's eggs, somebody else's sperm, and we're just doing the ICSI.
So give us a call or text down here. I'm interested in a donated egg. I have already donated eggs, sort of secure donated eggs, and how much the cycle is going to be. I think it's around like $9,000. So let's just let's just do a quick wrap up.
In a I have insurance sort of scenario, what you end up paying out of pocket is about $14,000. But you have to go through all of this hassle. It's A tremendous amount of hassle. All of this part here, if you're lucky, it takes a year, if you're lucky.
So you already lost a year of all of this. OK, a lot of mental anguish and everything else versus coming with us.
You're positive, it's 1095. Same thing, same thing, but 10995. Now, with an extra little twist that here in the state of Texas, there's this law called 1301, Law 1301. What does that mean? That means that requires many PPOs, many, not all of them,
to credit direct out of network payments. So that means that this, if you're in a qualifying PPO, this amount of money goes towards your deductible, towards your deductible. So if you already have the $7,000 deductible that you needed to meet anyway, all of a sudden,
If you do end up having your baby within that period, within that year period of all of this, you got a free baby at the end because you already went through yearly like out of pocket max it up.
All right. Now, this is really simple. This is the simple part of it. Paying with cash, ACH, or a card, super simple. So it's
Cash or ACH, no interest. You already have the money you've been saving. It's really easy. You just pay them. Not a big deal. But then credit card, if you have the space and some people want the miles, why not? You know, they have a 0 interest credit card.
They could do it. Why not? You can use that. But careful, because if it's not going to go beyond that, that 0%, you're going to start paying a lot of interest. Finally, we have, oh shoot, here so you can follow me a little bit. Okay. So, and finally, we have the trade-off. You know, there's trade-offs in everything.
Simple doesn't mean cheap.
It just means that it's super convenient. And if you get caught in a high interest credit card that you thought you were going to use, all of a sudden, you're not going to be able to do anything. So it just means that nobody's underwriting your fertility. So I'm

going to go back here. There's a question. Yes, go ahead. Can you confirm the prices shown today for positive or the +1?
No. The positive one package is 49.95. What I, what the prices that I shared with you is the IVF with medication, with medication price, with medication included. Okay. So it's called plus.
So, IVF Plus is what we call it, because IVF Plus medication, OK?
Any other questions?
I don't know REFERI.
REFIE. No.
No, that is question no.
Then this person said, yo ya tengo 2 barones dosa barones y quiero tener una nina for que natural no puede se for que me an salido barones.
La pregunta es yatine unos baroncitos de la mio segiri intentano de manera natural porque este no quiere tener este mas baronis.
So PGTA question in English is this nice lady wanted to know that if she already had boys and is afraid of keeping going and trying naturally because she's afraid of having another boy, is IVF the right thing for her if she wants a girl? So the short answer is yes.
It with PGTA. So if there's a la pro escape, it's $6,000 for however many embryos you get. So let's just say you get 20 that you're super lucky because you have a really high AMH and you get 20 embryos.
Same price versus if you get like the typical 10.
Another question here. What is the role of the Fertility Clinic financial counselor?
Okay, so what we have at the after you meet with the provider, with like a doctor or a nurse practitioner, and they present you your treatment recommendation, the next step is to meet with a financial counselor.
And what they do is present your options, okay? Like, which is a very structured, really good presentation that is tailored specifically to your, or to the recommendation that was done by the doctor. And they help you along the process. They can talk you through what each option means. There's some discounts that apply. There's also something called PatientFi, which is our preferred financing partner, and they walk you through how to apply with them. I hope that that answered your question. One more question here. What is the extra amount of contingency I should add to my fertility budget?
Oh God. Okay. Amazing question. What extra should I have more than just the 10-

995? The short answer is yes. And typically 10% is good to have. Why? Let's just say that you're going through your normal round of IVF.
And as they're doing their retrieval, they find some sort of abnormality, a light abnormality, some extra mucus that accumulated in the past, like 2 cycles that they did not detect before in your uterus. So that would require something called a hysteroscopy. And A hysteroscopy, we could do it here.
Like, and it's not that expensive to run $1000. So those are the like the little curve balls that you need to, that you really need to think about. The other, give me a second.
Sorry, I was getting, I was either going to start coffee or drink a little bit of water. The other is genetic, genetic compatibility testing. So say that is not included in the price, that's different than PGTA. So that means that it's just if you're if you're genetically compatible with your with your other
with your significant other, meaning you have the same blood type. There's all these risks. If there, if you have a passive, if you have a passive, my phone, no, it's fine. If you have a passive genetic disease that you didn't know of and you're unlucky enough
let's say sickle cell, that you're a passive carrier or sickle cell. And you were lucky enough to get married with another passive carrier. You guys didn't know. There's never any in your family. But between those two passive carriers of sickle cell or multiple sclerosis or a bunch of other things, you can actually, there's a 60% chance that you're going to pass it along to your children.
So, that is with the genetic compatibility test, and that's something that that it just costs like $300.00. So, so $1000 typically like is a is a good is a good cushion to have, and if anything between 1000 and $1500. I'm going to keep going. So, financing, we kept talking about that.
Like, what to check before you sign on to any finance? Ohh, let me go over here.
so you can see a little bit better. There you go.
All right. Sounds good. So make sure that that it's either to know if it's a soft pull or a hard pull. Like when when you when they do with pull is when they pull in your credit score. Okay. A soft pull, it means that it's not going to affect your credit. A hard pull is more precise, but it ends up affecting your credit.
So make sure you ask if you're going to apply for financing, if they do a soft pull or a hard pull. The other is watch that deferred interest rate. You know, they say, oh, I'll give you 0% for 12 months, but then it goes up to like 30%. You got to be really

careful if you want to extend that out.
Like, is there a fixed rate? A lot of really good, reputable places that offer financing offer fixed rates. Be really careful with ones that do variable rates because you're at the whims of the market. And then look at the total cost, not just the monthly payment, because sometimes
There's all these finance charges and all these add-ons that happen that you need to be really, really careful with. Just make sure that you know what that one number is. And that's one of the reasons why we like to work with PatientFi, our preferred financing partner, because they don't do a lot of this nonsense stuff.
Doing IVF out of state. Get up. Remember that we talked about that a lot? There's folks that come from other states. There are folks considering going to another state to look for a deal. Also, Mexico. A lot of folks are considering going to Mexico to go and do that. Now, what is the real cost of that?
But let's talk about it, because it might look cheaper, but if you do everything, if you take all of it into account, might not be as cheap as you think. So imagine going abroad. Got a lot of advertising, like, I want to go abroad, I want to go to Mexico. So think about the advertising goal, like $6,000 for an IVF site.
Pretty good, right? And, but then you have flights for you and your partner. That's $1,800. And I was really nice because it could be a lot more because you have to go twice. Okay. So it's 18, let's just say once, $1,800 because you were able to go on Spirit or something super cheap.
But this is probably going to be high, plus your logic.
Yeah, you stay there for three days at least every time that you go. So you have to take that into account. I was really nice and I said $1,500. Then your time away for work, that actually costs money, like to being away from work. So I just calculated another $1,300. But you have to have monitored.
Yeah, tend to do monitoring. It's in Mexico. You're not going to have to do your, you can't do your monitoring over there. They make arrangements for you to do monitoring over here in the United States, and that costs you at least $800. Again, I was being nice. Now that actually can go up to a couple grand, depending on how many times you need to go for your monitor.
And then finally, local logistics support, travel, food, anything else where you end up. On the nice end is around $12,000, but you thought it was gonna be 6000, so cheap. Well, you end up is this other here. And then the other thing is they're not obliged to file a low ASRM. So a lot of the times they say, oh, and we'll guarantee for you to

have a baby. They transfer 2 embryos. You didn't even know.
Or they convince you that transferring to embryos is the best thing. And all of a sudden you end up in multiples with all of those problems. You got to be really careful. Now, if we go over here, travel to another state, same exercise, same thing, just different variables. The advertised price is a little bit more.
So $7,200. But then the flights for you and your partner, you got to go in twice, $1,200, lodging, a little bit more expensive, $1,000, time away for work. It's going to be maybe because it's a shorter trip that you're able to cut that in half, $950, monitoring, anything you're going to do, but it's going to be maybe a little more expensive.
So you actually end up with about the same. George had something happened with the tip.
What are the qualifications for positive one? Qualification for positive one. Okay, here we go. To qualify for positive one, there's three things. First is how young you are. Okay, so you have to be 38 years or younger. So that's the first. The second is AMH, remember, AMH is, it's a number. AMH means anti-Mullerian hormone, which is a hormone that gives us a hormonal score that gives you how many eggs you have left. Okay, so an AMH needs to be 1.5 or higher. And lastly, the swimmers. Remember, we need three things, right? So the last is the swimmers. There needs to be a mobile count, like how many individual little swimmers of 1 million or higher. Those are the three things that you need to qualify for positive one.
Right. So lastly, it's like here you have the positive way, you know, like it is like versus you have, sorry, all of these things here versus us one price. You stay in Houston, you stay in San Antonio, you stay in Austin, you stay in the Rio Grande Valley.
And all of this is already included. Okay. One price, no flights, no lodging, 10995. Now, if you come from another state and you want to go into Houston, remember, ours requires less visits, less visits. So some of these prices over here,
are actually going to go down. So if you're coming from another state or interested in coming to Houston, because it's a big hub, give us a call and we'll talk a little bit more about doing a travel program for you. Okay? So the other thing that we talked about, last one, is speed and simplicity. Okay?
In a...
Over here.
In the traditional fertility clinics, sorry, the traditional fertility clinics, it takes about 6 visits for you to start your IVF cycle. It takes about 6. And there's a bunch of time in

the middle. Because first you have to wait to see the doctor.
Then the doctor is going to order you some tests. So then you have to come back to the clinic for your tests. Then they're probably going to find something to order you another round of tests, that's typically. And then they're going to make you do a histogram. And so that's four. And then you come in to do your
your consultation, final consultation with the doctor. So that's fine. Until finally you get to the 6th visit is in when you will be able to start. Not with us. With us, you can do it as little as two. And if you already have your tests, we don't make you take extra tests. Like if you've had your AMH done,
before, like within a year, we'll accept those tests. If questions. Would you consider for a woman between 37 to 40 years of age to do a genetic test and try for Viva?
So would I consider for a woman from 37 to 40 to do genetic testing for PGTA for IVF? The short answer is yes. We typically require it, like or highly recommend it after 38, like after 38. So the short answer.
Right. Anything else over there from TikTok link? Somebody said price for IVF plus with PGTA, is that the package to go with 38 year old female?
Again, I hate doing this, but it depends. So, okay, if everything else is good, if his swimmers are good, if your AMH is good, if there's no hydrocell things, if there's no problems with anything else, that is the price. That is the package you should go for. Especially if you want to have more than one. Does IEHP cover IBF?
IEHP. Whoever asked that, does IEHP cover IVF? Can whoever asked that tell us what those those that acronym is about? I've got.
So another question. Yeah, there's another one. Hi, does patient file only last for three months if not used by then, can we reapply?
I think it's six months. Like they'll hold the quote for six months. And if it's more than six months, I think you have to reapply. I'm pretty sure because of the variations in your credit.
So we got a minute to wrap up. Okay, we got a minute to wrap up. Thank you so much. So this is just a really great recap. This is a lot of real talk, okay? This is like, I love these types of conversations because it just gives you super real talk with real talk. No fluff, no mumbo jumbo.
So you got to know the real cost, not just the quote they give you. You got to know what insurance actually covers. Ask those questions. Ask those questions. Give us a call, send it to the local, and you say, I want, or go to our website. Inside of our website, there's a resource where you can watch this video again.

Okay, you want it if you really want to do that. So know what questions to ask when you're dealing with your insurance. And the other, know what speed is worth. Getting, getting, going fast is actually gains you a lot more possibilities of you actually being able to get what you want, which is a baby, okay, to grow your family. And we have a few more webinars coming up. If you could just put the. So we believe having a baby is a universal human right. This is
There's always what we believe in. That's our guiding light. And then finally, also this is our Q&A. We have another one of our wonderful REIs, Dr. Jay Adams, and we're going to talk, we're going to be talking about healthy habits, you know, getting getting IVF ready. So we just, that's in.
So in the chat as well as the following one and the one after that. So then we have another male factor. Talk about male factor and that is sperm analysis and sperm health.
And then finally, IBM Success Blueprint. It's a success for better outcomes with two of our awesome audience. So it was a pleasure. Thank you so much for your questions. I hope you had fun and I hope it was informative. So take care out there and just remember, think positive.
Okay, think positive. You go to the next slide, you have all your locations. Yay. Take a take a screen grab of this. Yeah, put it in the chat. Very quick screen grab, just put it in the chat. This is exactly where we all of our locations. And we have a special right now, Fertility work up.
or 49 or $500, $499 for Fertility workup special, right?
See you next time. Bye, bye.