

INTENDED PARENTS COST ESTIMATE

Agency Fees*	
Agency Fee – 1st Installment (due upon Match Acceptance)	\$17,000
Agency Fee – 2nd Installment (due upon GC contract signature)	\$17,000
Surrogate Rematch Fee (if first surrogate does not deliver a live baby)	\$8,500
International Surcharge	\$5,000
Concierge Services	VARIES
*Bright Futures Families is proud to offer a 20% discount to active duty m	ilitary members.
Total Agency Fees	\$
Estimated Third Party Fees	
Surrogate Fees	
Surrogate Fee (add \$10,000 per additional fetus) startin	g at \$50,000
Surrogate Expense Allowance (\$250 per month, est. 14 months)	~\$3,500
Housekeeping Allowance (\$200 per month, est. 10 months)	~\$2,000
Maternity Clothing Allowance (\$1,250 for multiples pregnancy)	\$1000
Psych./Social Worker Support	~\$1250
Medication Start Fee	\$500
Embryo Transfer Fee	\$1,500
Additional Procedure Fees (e.g. in utero testing, mock or dropped cycle)	~2,000-\$7,000+
Total Surrogate fees	\$
Screening and IVF Costs	
Mental Health Screening for IP's and Surrogate	INCLUDED
Background Checks on IP's, Surrogate and Surrogate Partner	INCLUDED
Medical Screening, IVF Fees, Medication Costs	VARIES BY CLINIC
Embryo Creation	VARIES
Donor Egg or Sperm Acquisition (if applicable)	VARIES
Total Screening and IVF fees	\$
Attorneys'/Escrow Fees	
Surrogacy Contract/Pre-Birth Order Filing	~\$4,000-\$10,000
Surrogate Independent Attorney	~\$2,000-\$4,000
Escrow Account Fee	~\$1,850
Total Attorneys'/Escrow fees	\$



COLORADO SURROGACY MONTANA SURROGACY NEW ENGLAND SURROGACY PACIFIC CASCADE SURROGACY SOUTHWEST SURROGACY TEXAS SURROGACY

INTENDED PARENTS COST ESTIMATE CONT.

Health Insurance/Healthcare Fees Surrogate Scenario 1 – Surrogate/Spouse Employer Health Plan w/no Exclusion Scenario 2 – Individual Plan – Affordable Care Act (ACA) Scenario 3 – Fee-for-service Cash Pay	~\$4,000-\$9,000 ~\$12,000-\$20,000 ~\$29,000-\$50,000
Total Health Insurance/Healthcare Fees Surrogate	\$
Life Insurance Fees	
Life Insurance for Surrogate	~\$900+
Total Life Insurance Fees	\$
Travel Costs	
Airfare/Train/Bus/Car	\$
Hotels	\$
Per Diem Taxis/Rental Car/Parking	\$ \$
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Total Travel Costs	\$
Restriction of Activities/Lost Wages	
Lost Wages (e.g. travel to IVF clinic, bed rest/maternity leave)	\$
Childcare (may not be necessary or may be capped)	\$
Total Restriction of Activities/Lost Wage	\$
International Newborn Health Insurance*	
Newborn Cash Pay Fee-for-Service (no upper limit)	~\$3,000-\$125,000
*Necessary only if IP's do not have health insurance for a newborn born in the local documents of the second of the could be much more in the event of premature birth or other significant newborn.	-
Total International Newborn Health Insurance	\$
Grand Total	\$