



New York Surrogacy Center Compensation Schedule

- a. Compensation: \$60,000.00+
 - i. Medical & Psychological Clearance Fee: \$1,500.00 payable upon receiving medical and psychological clearance (paid in addition to base compensation; travel expenses, lost wages and/or childcare, if applicable, shall be paid in addition to this fee)
 - ii. Legal Clearance Fee: \$1,500.00 payable upon issuance of legal clearance to the fertility clinic (paid in addition to base compensation)
 - iii. Medication Start Fee: \$500.00 payable upon start of cycle medications other than birth control (paid in addition to base compensation)
 - iv. Embryo Transfer Fee: \$1,500.00 payable upon completion of each embryo transfer procedure (paid in addition to base compensation; travel expenses, lost wages and/or childcare, if applicable, shall be paid in addition to this fee)
 - v. Base Compensation to Surrogate: \$55,000.00+
 - 1. \$5,000.00 payable within 3 business days of confirmation of pregnancy by fetal heartbeat detected by ultrasound
 - 2. Remainder paid in 8 equal monthly installments commencing 1 month after confirmation of pregnancy
- b. Maternity Clothes: The Surrogate to receive \$1,000.00 for the cost of maternity clothes at the 12th week of pregnancy.
- c. Surrogate Pamper Package: Third trimester prenatal massage, surrogate gift package and other treats throughout the pregnancy (paid for by NYSC).





- d. Monthly Stipend: The Surrogate to receive \$250.00 per month, commencing upon legal clearance and continuing for two months after delivery. This is intended to cover the costs of travel and parking associated with all local prenatal and pregnancy-related medical appointments, as well the cost of prenatal vitamins, at-home pregnancy tests, hygiene products, and/or other pregnancy-related supplements. (paid in addition to base compensation)
- e. Travel, Lodging and Dining Expenses (Screenings and Embryo Transfer): The Surrogate to be reimbursed for her mileage from her home to the Fertility Center at the IRS standard business mileage reimbursement rate, and for all meals, lodging, parking and other transportation expenses to effectuate the embryo transfer as well as any screenings which occur at such clinic. The Agency to make all travel and lodging accommodations (including flight and hotel accommodations, if necessary) directly. The travel and dining expenses for the Surrogate's adult travel companion will also be covered, if applicable.
- f. Health Insurance: The cost of premiums for a health insurance policy for the Surrogate, if required. This amount will vary.
- g. Medical Expenses and Co-Pays: The Surrogate to be reimbursed for any and all uncovered medical expenses (including co-pays and deductibles) incurred in connection with the pregnancy.
- h. Counseling Services: The cost of individual and/or joint (with Intended Parents) counseling services, if requested. This amount will vary (minimum of \$1,000 covered).
- i. Complimentary Virtual Surrogate Support Group: Offered monthly throughout surrogacy journey and after (paid for by NYSC).
- j. Life Insurance: The cost of premiums for a \$750,000.00 term life insurance (or accidental death) policy on the life of the Surrogate.





- k. Disability insurance: The cost of premiums for a disability insurance policy for the Surrogate, if requested.
- l. Hold Fee: Commencing after the parties have been matched, the Surrogate to receive a monthly hold fee of \$500.00 per month in the event that the surrogacy process is delayed for a month or more due to the action or inaction of the Intended Parent(s).
- m. Childcare Expenses: The Surrogate to be reimbursed for any and all reasonable and necessary childcare expenses she incurs during periods of bed rest directed by her Obstetrician or for carrying out her obligations pursuant to the Surrogacy Agreement, that are above and beyond childcare expense she would ordinarily incur.
- n. Pet Care: The Surrogate to be reimbursed for any necessary pet care or boarding expenses required as a result of any overnight travel related to the surrogacy process.
- o. Housekeeping & Meal Preparation Expenses: The Surrogate to be reimbursed \$150.00 every 2 weeks for housekeeping and meal preparation services she incurs due to being on bed rest or having her physical activity limited to a degree that prevents her from performing her housekeeping and meal preparation duties.
- p. Lost Wages: The Surrogate and the Surrogate's Spouse/Partner, if applicable, to be reimbursed for their actual net lost wages as a result of their obligations pursuant to the Surrogacy Agreement and after delivery. Postpartum lost wages for the Surrogate to be reimbursed for a minimum of 6 weeks following a vaginal delivery or 8 weeks for a C-Section. No doctor's note is required for postpartum lost wages. If the Surrogate uses a support person that is not a Spouse/Partner, their support person to be reimbursed for their actual net lost wages for accompanying the Surrogate to medical screening, embryo transfer and delivery.





- q. Breast Milk: The Surrogate to receive \$300.00 per week for pumping breast milk. The Intended Parent(s) to pay for all shipping and storage costs and the costs of renting or purchasing a breast pump and all other necessary equipment.
- r. Multiples: The Surrogate to receive an additional \$10,000.00 per multiple fetus beyond a singleton (i.e. twins, triplets).
- s. Complications: The Surrogate to receive the following amounts if she experiences or undergoes any of the following procedures or medical events:
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| 1. Mock Cycle | \$750.00 |
| 2. Cancelled Cycle (not fault of Surrogate) | \$500.00 |
| 3. Amniocentesis (per incident) | \$500.00 |
| 4. Chorionic Villus Sampling (per incident) | \$500.00 |
| 5. Cervical Cerclage | \$500.00 |
| 6. Chemical Ectopic Pregnancy | \$250.00 |
| 7. Surgical Ectopic Pregnancy | \$1,000.00 |
| 8. Dilation and Curettage (resulting from miscarriage) | \$500.00 |
| 9. Selective Reduction (in compliance with Agreement) | \$1,000.00 |
| 10. Abortion (in compliance with Agreement) | \$2,000.00 |
| 11. C-section | \$3,000.00 |
| 12. Partial Hysterectomy | \$5,000.00 |
| 13. Total Hysterectomy | \$10,000.00 |

