



NYFS GRANT APPLICATION

Here at New York Fertility Services we work in partnership with our patients to realize their dreams of parenthood. Providing compassionate, considerate and cost effective care in a tranquil setting through state of the art integrated treatments designed to achieve optimal pregnancy rates.

The NYFS Grant is designed to assist patients with the costs of IVF treatment through a dollar discount amount or grant medication to help absorb some of the out of pocket costs when coverage is not available through insurance. Approval is based on you and your partner's **combined income**.

If approved, your grant will be valid towards **IN CYCLE IVF** services only. Services rendered before IVF monitoring or after the transfer of your embryo(s) are not covered. If a dollar amount is granted towards your IVF treatment payment for the remaining balance must be by cash or check or you will incur a 5% administrative fee on all credit cards transactions.

The following are NOT services covered through the NYFS Grant:

- ✓ Pre cycle testing
- ✓ Uterine evaluations (Fluid ultrasound, Hysteroscopy)
- ✓ Non cycle monitoring
- ✓ Cyst aspirations
- ✓ IVIG treatment
- ✓ PGD
- ✓ Donor Sperm/ Shipping and handling of sperm
- ✓ Sperm Freezing and storage
- ✓ Thawing of sperm and/or embryos
- ✓ Anesthesia
- ✓ Cryopreservation and Storage of Embryos
- ✓ Pregnancy Monitoring
- ✓ Treatment for an unsuccessful pregnancy
- ✓ Medication- *unless donated by NYFS through the grant*
- ✓ Services rendered at an outside facility

Please complete and attach the below required documentation:

- Valid government issued ID or Passport
- Insurance Card(s), front and back, for Patient and Partner
- Last two pay stubs from employer
- Previous year tax return for patient and partner

Patient Name: _____ Date of Birth: _____ SSN: _____

Partner Name: _____ Date of Birth: _____ SSN: _____

Desired Cycle Month: _____