

## **Home Magnesium Infusion F.A.Q.s**

### **Why do I need to have Magnesium infusions at home after transplant?**

As part of your treatment after an Allogeneic transplant, you will likely be prescribed Tacrolimus to prevent rejection of your graft. Unfortunately, a common side effect of the Tacrolimus is a loss of magnesium, an essential mineral in your body which must be replaced. Blood tests measure how much you're losing and determine how much replacement you need.

Just after transplant, you may not be able to tolerate oral magnesium because it can be upsetting to your digestive system. Your clinic team will work with you to transition from the IV form of magnesium to the oral magnesium solution as your gastrointestinal (GI) system heals. As your ability to eat a more varied and healthy diet improves, this will also help increase your magnesium levels.

### **How long does the Magnesium Infusion take to run?**

Essentially 1 gram of I.V. Magnesium = 1 hour of infusion time

We can usually subtract an hour, so:

2 grams = 1-2 hours

4 grams = 3-4 hours

6 grams = 5-6 hours

8 grams = 7-8 hours

10 grams = 9-10 hours

Rarely someone may even require 12 grams of supplemental IV magnesium. If the Magnesium cannot be given at home, then we have to get creative to find a solution because infusion centers aren't open long enough to infuse longer than 9 hours. For example, we'll try to give some Magnesium orally with the IV. Sometimes there is not a choice to give the magnesium out-patient. In that case it must be given at home, with a caregiver available to administer it daily. This

may mean it has to be paid for out of pocket if the patient's insurance does not cover the cost.

### **How long will I need to have IV Magnesium after discharge?**

This will depend on how much magnesium you need to replace and how quickly you're able to eat well without having problems with your stomach or bowels. Some people can discharge on as little as 2 grams of Magnesium and others as much as 12 grams. The smaller the amount of magnesium that is needed, the quicker you will likely be able to wean off the IV form and start the oral supplement.

Your clinic team will be monitoring your progress to help determine when it's safe to begin weaning and how quickly you can transition to oral magnesium.

### **Is the Magnesium infusion covered by my insurance?**

Our Patient Financial Counselors check your insurance coverage before transplant and notify you if your insurance does not have home infusion coverage.

Normally the Visiting Nurse home visits are covered by insurance, however the nurse's role is to *teach caregivers* the infusion and dressing changes so that caregivers become independent. The home nurse will then end the temporary home visits.

### **I have Medicare coverage. Doesn't it cover home infusions, like Magnesium?**

Unfortunately, at this time, Medicare does not cover home infusion costs. If you have a Medicare *supplement*, it follows Medicare guidelines and normally does *not* cover home infusions. If you have a *separate* insurance health insurance policy, such as health insurance from your spouse's work, it would most likely

cover the home infusion costs. The clinic's financial counselors will check your insurance coverage and notify you if you do not have coverage.

### **If I don't have home infusion coverage, what are my options?**

You can arrange for private-pay arrangements with a Home Infusion Provider. The RN Case Manager (RN CM), also known as "Discharge Planner" will facilitate this. The cost to you is around \$22.05 per day and the magnesium & supplies would be delivered to your discharge address on a weekly basis. The Visiting Nurse services are normally covered by insurance and your RN Case Manager can confirm these costs and coverages for you before discharge.

### **Home Infusion (IV) Insurance Information**

Allogeneic Bone Marrow Transplant (BMT) candidates receiving donor cells will need home infusions or infusion (IV) supplies to continue their care for **approximately 100 days** after being discharged from the hospital after transplant.

**If your insurance provider does not cover home infusion (IV) supplies, please read below.**

Upon hospital discharge after transplant, you will require daily magnesium at a *minimum* average of 2 grams and a *maximum* of 12 grams. Once you are able to tolerate the minimum daily dose via magnesium pill or solution, you will be weaned off the IV.

As stated on the Caregiver Responsibilities Agreement they signed before transplant, your caregivers are required to attend hospital discharge training to learn intravenous (IV) care. Insurance will not pay for a visiting nurse to provide daily IV magnesium infusions.

**\* Attention veterans \***

If you have care established with a hematology or oncology doctor at the VA hospital, you may be eligible for home infusion coverage.

Please contact the VA nurse coordinator below to discuss.

- **Ann Arbor:** Nicole Hosler (734) 845-5800
- **Battle Creek:** Ask for the hematology/oncology nurse coordinator (269) 966-5600
- **Saginaw:** Tami Fox (989) 497-2500, Extension: 15257

**Below are your options for receiving infusion (IV) or supplies at the time of your hospital discharge:**

1. Return to a Michigan Medicine infusion center daily for infusion and line care, typically covered by most insurances under the “Outpatient Services” portion of the policy. Please note that, although more affordable, this option requires caregivers to provide daily transportation to and from clinic and can be physically taxing on the patient’s recovery.
  - Infusions can initially last from 2-12 hours daily, decreasing over time
  - Clinics can typically only accommodate infusions of 2-6 grams
  - Infusion Hours:
    - **Monday – Friday:**
      - BMT clinic (7:30am-5:30pm)
      - Brighton (7:30am-7pm)
      - Cancer Center (7:30am-8pm)
      - Canton (8am-4pm)
      - Chelsea (see West Ann Arbor)
      - East Ann Arbor (M/W 8am-6:30pm, Tu/Th/F 8am-4:30pm)
      - Northville (7:30am-5:30pm)
      - West Ann Arbor (M-Th 8:30am-5:30pm, F 8:30am-4:30pm)

- **Saturday:**
    - Brighton (8:30am-4pm)
    - Cancer Center (7:30am-5:30pm)
    - East Ann Arbor (7:30am-11:30am)
  - **Sundays and holidays:**
    - BMT clinic (8am-4pm, with Taubman Center infusion staff)
2. Pay out of pocket for at home infusion supplies. HomeMed charges **\$22.05 per day** for the magnesium, IV tubing and necessary supplies. These charges can be placed on a charge card or covered by setting up a monthly payment plan with HomeMed.
3. Arrange a combination of the above by receiving infusions both at a Michigan Medicine infusion center and at home/local lodging (i.e. weekdays at Michigan Medicine, weekends at home/local lodging)

**If you have further questions regarding the above, please contact Sheryl Bennett, RN Case Manager, at (734) 647-9019 (M-F, 7:30am-3:30pm).**

**Are there any other options for the I.V. Magnesium infusions, other than getting it at home?**

You can arrange for appointments to receive IV Magnesium infusions in the BMT Infusion Center on the 7<sup>th</sup> floor of Mott Hospital, Sunday-Friday 8:00am-4:30pm and in the Cancer Center on Saturdays when an appointment is scheduled.

Occasionally, infusions can be scheduled at other infusion centers but the rules at each center vary. Some infusion centers require that the person be established with a doctor who has admitting privileges to the hospital that they're associated with. Many are not open on Sundays or holidays. Your RN Case Manager will look into other possible options for you if you would like to

have your infusion in an outpatient infusion center instead of at home. There may be limitations that don't make this option possible but we will investigate what is available for your needs.

### **Are there foods that are high in Magnesium that I should try to include in my diet?**

Our inpatient Dietitian has a handout that lists the magnesium content of various foods and can help you select foods that are higher in magnesium—just ask for that handout some time during your stay.

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