

Compliant Collaboration: LMN Navigator Steps for Success

The LMN Navigator is a digital platform designed to improve the clinical documentation process by simplifying data entry and form completion. It uses information entered into the system to automatically fill and complete the WMSE form. This tool also facilitates collaboration between clinicians and ATP/suppliers, ensuring that all necessary information is accurately documented and shared efficiently. This streamlined approach helps maintain compliance while supporting a more coordinated workflow.

Pre-Evaluation: Planning

Identify Who will Complete Sections on LMN Navigator

There are several sections in the LMN Navigator that may be deferred to the ATP/Supplier to complete on their own forms or documented in the LMN Navigator. If the ATP/Supplier will be completing any of these sections, unlock or defer those sections at the beginning of the evaluation to allow for point of service and collaborative documentation.

Evaluation

Clearly Define and Communicate Roles:

At the start of the evaluation, both the LCMP and ATP should verbally state their roles and responsibilities to the client.

Conduct a Thorough Clinical Evaluation:

The LCMP should perform a comprehensive clinical evaluation, assessing the client's functional abilities, mobility limitations, and seating/positioning needs. The LCMP should document these findings in detail to establish the medical necessity for specific equipment features.

Set Goals Specific to Clinical Presentation and Client Specific Need:

The LCMP should select or write goals for the mobility base, seating & positioning components, and all requested options/accessories in accordance to the clinical evaluation and client interview. Clinical documentation should support the documented goals.

Collaborate for Equipment Selection:

The ATP should work closely with the LCMP to provide technical input on equipment options based on the clinical findings and documented goals. This collaboration should focus on selecting equipment that best meets the client's documented medical and functional needs.

Document Justifications Accurately:

The LCMP should ensure that all clinical justifications for equipment and features are documented clearly and accurately in the LMN Navigator and/or review the completed document if this section has been deferred to the ATP/Supplier prior to signing.

Post Evaluation: Review and Signatures

Review and Sign Off on Documentation:

After the evaluation, the LCMP should review all documentation for accuracy and completeness. Both the LCMP and ATP should verify that the recorded information reflects their respective roles and contributions before signing off on the completed WMSE form.



CRT Terminology, Abbreviations & Best Practices

Clinician Resource Guide for LMN Navigator

Navigating the world of CRT requires a strong understanding of key terminology, abbreviations, and best practices to ensure accurate documentation and successful equipment justification.

Abbreviations

ATP: Assistive Technology Professional
LCMP: Licensed/Certified Medical Professional (PT, OT, etc.)
CRT: Complex Rehab Technology
MAE: Mobility Assistive Equipment
MRADL: Mobility Related Activity of Daily Living
MWC: Manual Wheelchair
POV: Power Operated Vehicle (a.k.a. scooter)
PWC: Power Wheelchair
W/C: Wheelchair

Terminology

MRADL: ADLs that require the client to move within their home to complete (toileting, bathing, dressing, grooming, feeding, etc.)

Non-Reducible: A postural deviation or musculoskeletal abnormality that cannot be corrected through manual adjustments, therapeutic interventions, or seating modifications. May sometimes be referred to as “fixed.”

Partly Reducible: A postural deviation that exhibits some flexibility, meaning it can be partially corrected with manual adjustments or therapeutic interventions, but full correction is not possible due to structural or muscular limitations.

Reducible: A postural deviation or musculoskeletal abnormality that can be corrected or improved through therapeutic interventions, manual adjustments, or appropriate seating and positioning strategies. May sometimes be referred to as “flexible.”



Documentation Check

To ensure a comprehensive and justifiable evaluation, use the following documentation check list:

- Did you select goals that align with the client/caregiver and clinical presentation?
- Do you have objective clinical documentation (limitations and impairments) to support the functional goals selected?
- Have you documented current equipment limitations and how they fail to meet the client's needs?
- Does your documentation support the selection of the recommended equipment based on the client's medical and functional needs?
- Did you rule out lesser equipment for the mobility base, seating and drive controls (if applicable)?
- If power tilt/recline is recommended, have you justified why these features are necessary and why one alone is not sufficient? And did you support that justification with clinical documentation?
- Does your documentation show how the recommended equipment will improve the client's ability to complete MRADLs in customary locations in the home?
- Do you have the appropriate medical diagnoses (from the practitioners medical record) that align with diagnosis driven equipment (Complex Power Wheelchair bases and Seating & Positioning Components)?
- Did you utilize extra spaces to describe the client's presentation and impairments?

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This guide is not all-inclusive; please reach out to Numotion_Clinical_Education@Numotion.com if you would like additional education on completing a Mat Evaluation.