Frequently Asked Questions: MiHIN’s Integrated Technology Platform (VIPR/INBOX/SOLUTION CENTER)

1. General Transition Information:

- **Q:** What is the specific date for VIPR’s discontinuation?  
  - **A:** VIPR, accessed via Solution Center, SSO from EMR and/or as a module within MIGateway, will be discontinued after 4/31/24.  
  - Inbox, accessed through Solution Center and through MI Gateway will be discontinued early summer 2024.

2. Transition Process:

- **Q:** What are the next steps for the transition from VIPR to MI Gateway’s Longitudinal Record  
  - **A:** Identify all end users requiring access, confirm legality, and initiate ACRS and MI Gateway onboarding and implementation processes.

- **Q:** Does MiHIN anticipate any interruption in current MI Gateway services?  
  - **A:** No, we do not anticipate any interruption of current MI Gateway Services. Current MI Gateway Users will have to do a password and Multi-Factor Authentication reset as we upgrade.

- **Q:** For those users that currently access VIPR via a link on MI Gateway, do they need to re-onboard, or will these users automatically be switched over to new longitudinal record?  
  - **A:** Current MI Gateway users will not need to re-onboard; They will only need to do a password and Multi-Factor Authentication reset as we upgrade.

3. SSO (Single Sign-On) and Access:

- **Q:** Will SSO open directly to a specific MI Gateway module?  
  - **A:** Yes, users will have options to launch with patient context to the patient viewer for the new Longitudinal Record

- **Q:** What EMRs will have the ability to utilize SSO?  
  - **A:** EMRs meeting the implementation standard outlined in the guide can be onboarded.

4. Active Care Relationship Service (ACRS):

- **Q:** Can users manually search and declare an ACRS with a patient via MI Gateway?  
  - **A:** Yes, users can manually declare an ACRS through Manage ACRS in MI Gateway.

- **Q:** How can organizations declare Active Care Relationships?  
  - **A:** There are multiple ways to declare an Active Care Relationships. One is by sending MiHIN an ADT for the patient (which creates a Real Time Active Care Relationship). Another way is to send MiHIN a batch file of all patients for whom a provider or plan is attesting to have an active care
relationship. The other is by manually entering the patients base 4 demographics and other information into Manage ACRS module in MIGateway (patient viewer user authorization in MIGateway is happening behind the scenes based on login credentials.)

5. Data Contribution and Viewing:

- **Q: Will there be a "break the glass" feature?** Break glass (which draws its name from breaking the glass to pull a fire alarm) refers to a quick means for a person who does not have access privileges to certain information to gain access when necessary.
  - A: Not part of the initial implementation, and its inclusion will be evaluated in the future. A user may access patient information by declaring an Active Care Relationship within the Manage ACRS module of MIGateway.

6. Test Environment:

- **Q: Will there be a test environment available for clients?**
  - A: Yes, there will be a test environment where clients can send test messages.
  - A: Demo environments will also be provided for understanding and training in MIGateway functionalities, including the new longitudinal record and Inbox.

7. Account Privileges:

- **Q: Is two-factor authentication still going to be used?**
  - A: Yes, it is a requirement under HITRUST.
- **Q: Will MIGateway (non-SSO) organizations be able to self-manage their own user accounts?**
  - A: No, accounts will be administered by MiHIN initially.

8. Communication, Outreach and Training:

- **Q: What is our rollout plan for the new LR viewer?**
  - A: Train-the-trainer activities are being planned to begin in March/April 2024, along with group demonstrations and MiHIN Help Office Hours.

9. Reporting:

- **Q: Will reports show active users, modules accessed, and organization contributions?**
  - A: Default reports align with current HIE Platform reports; data contribution details may require additional inquiries.

**Note:** The information provided is based on the current status of the transition as of 3/1/2024, and updates will be communicated as the process evolves.