

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 MIGateway will be discontinued early summer 2024.

2. Transition Process:

- **Q: What are the next steps for the transition from VIPR to MIGateway's Longitudinal Record**
 - A: Identify all end users requiring access, confirm legality, and initiate ACRS and MIGateway onboarding and implementation processes.
- **Q: Does MiHIN anticipate any interruption in current MIGateway services?**
 - No, we do not anticipate any interruption of current MIGateway Services. Current MIGateway 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 MIGateway, do they need to re-onboard, or will these users automatically be switched over to new longitudinal record?**
 - Current MIGateway 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 MIGateway 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 MIGateway?**
 - A: Yes, users can manually declare an ACRS through Manage ACRS in MIGateway.
- **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.
 - 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.