**The Commonwealth of Massachusetts**
**House of Representatives**
**State House, Boston 02133-1054**

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Chairman
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Dr. Stuart Altman, Chair
Massachusetts Health Policy Commission
50 Milk Street, 8th Floor
Boston, MA 02109

March 31, 2015

Dear Chairman Altman:

As the Health Policy Commission looks to promulgate regulations governing the implementation of Chapter 155 of the Acts of 2014, *An Act relative to patient limits in all hospital intensive care units* (MGL c. 111, sec. 231), I want to be sure that the legislative intent of the law is reflected in these regulations. In reviewing the proposed regulations, I have some concerns with what appears to be a departure from the intent of the legislation, which was a one patient to one nurse assignment with the ability to move to a two patient to one nurse assignment based on the stability of the patients as assessed by the direct care nurses in the Intensive Care Unit (ICU), with the assistance of an acuity tool. The acuity tool was intended to supplement, not replace, the clinical judgment of the staff nurses who would also be involved in both the development- and approval- of the acuity tool. Also, please note that no exemptions were included in the law; therefore under no circumstances should an ICU nurse be caring for more than two patients at one time.

My colleagues and I unanimously approved this legislation to protect our state's most vulnerable patients. Any regulations derived from this legislation should not deviate from the clear legislative intent of the law.

Sincerely,

Harold P. Naughton, Jr.
*State Representative, 12ᵗʰ Worcester District*
*House Chairman, Joint Committee on Public Safety and Homeland Security*