



Fact Sheet for Home and Community-Based Services (HCBS) and Settings: Doors Lockable by the Individual

Updated: March 18, 2026

Authority: [42 CFR 441.530\(a\)\(1\)\(vi\)\(B\)\(1\)](#), [42 CFR 441.710\(a\)\(1\)\(vi\)\(B\)\(1\)](#) and [42 CFR 441.301\(c\)\(4\)\(vi\)\(B\)\(1\)](#)

In a provider-owned, controlled, or operated residential setting:

There are new Federal Medicaid rules. These rules are about Home and Community-Based Services (HCBS) and settings. Under the new rules, you can have privacy in your bedroom or living unit. Providers need to supply a lock for your bedroom or living unit. Only staff that need to will have keys. Your person-centered plan will help you and your team decide who has keys.

In Oregon this means:

If you live in a provider-owned, -controlled, or -operated residential setting, your bedroom or living unit should have a door that you can lock. However, you may choose not to have a lock. You can also choose not to use the lock on your bedroom or living unit door.

Door locks must:

- Be single action

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- Be in compliance with current codes
- Meet all applicable state rules
- Meet safety standards
- Allow for easy exit from your unit

Providers must supply your lock. The lock must be single action. This means that the door must unlock when you turn the handle or move the lever to leave.

There may be times that your assessed needs provide reasons to consider some limits to locks on doors. Limits will not be used without your (or your legal representative's) informed consent. Limits will only be used when there is a health or safety risk.

The federal rules allow for a transition period for states to fully comply with the new rules. For additional fact sheets or more information regarding the Oregon HCBS Transition Plan, please visit the link below.

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