

**PROVIDER COMPLIANCE REQUIREMENTS FOR PAYMENT FROM DFS**

THE PROVIDER:	DFS REGISTRATION	DFS HEALTH AND SAFETY CERTIFICATION	SHP-159	FAMILY CARE SAFETY REGISTRY	LICENSE-EXEMPT STATUS GRANTED BY DOH
Cares for four or less unrelated children	YES	YES	YES	YES	NO
Cares for related children	YES	YES	YES	YES	NO
Is an Out of state licensed provider	YES	YES	YES	YES	NO
Is an Out of state unlicensed provider	YES	YES	YES	YES	NO
Has Household Members age 18 and over	NO	NO	YES	YES	NO
Is School based child care	YES	YES	NO	YES	YES
Is Summer Camp based care	YES	YES	NO	YES	YES
Is a Business based child care	YES	YES	NO	YES	YES
Is State, County, or City Government child care	YES	YES	NO	YES	YES
Is Military based child care	YES	NO	NO	NO	NO
Is Licensed by Missouri Department of Health→	ONLY WHEN PARENT IS REIMBURSED, OTHERWISE COMPLETE DFS CONTRACT	NO	NO	NO	NO