§ 364. Responsibility for standards. To assure that the medical care and services rendered pursuant to this title are of the highest quality and are available to all who are in need, the responsibility for establishing and maintaining standards for medical care and eligibility shall be as follows:

1. The department of social services shall be responsible for

(a) determining eligibility for care and services pursuant to this title and consistent with standards established by the commissioner of the department of health and, as authorized by such commissioner, for hearing appeals and making findings and recommendations relating thereto;

(b) auditing payments to providers of care, services and supplies under the medical assistance program; and

(c) publishing and distributing to the public, from time to time and in consultation with the department of health, information relating to the medical assistance program, to promote maximum public awareness of the availability of, and the procedure for obtaining, such assistance.

2. The department of health shall be responsible for

(a) establishing and maintaining standards for all hospital and related services pursuant to article twenty-eight of the public health law, and for all medical care and services furnished in an institution operated by the department of health pursuant to other provisions of the public health law;

(b) establishing and maintaining standards for all non-institutional health care and services rendered pursuant to this title, including but not limited to procedural standards relating to the revocation, suspension, limitation or annulment of qualification for participation as a provider of care and services, on a determination that the provider is an incompetent provider of specific services or has exhibited a course of conduct which is either inconsistent with program standards and regulations or which exhibits an unwillingness to meet such standards and regulations, or is a potential threat to the public health or safety pursuant to section two hundred six of the public health law;

(c) reviewing and approving local social services medical plans;

(d) establishing by regulation requirements for a uniform system of

reports relating to the quality of medical care and services furnished pursuant to this title;

(e) reviewing the quality and availability of medical care and services furnished under local social services medical plans, to assure that the quality of medical care and services is in the best interest of the recipients;

(f) providing consultative services to hospitals, nursing homes, home health agencies, clinics, laboratories, and such other institutions as the secretary of the federal department of health and human services may specify in order to assist them: to qualify for payments under the provisions of this title and title XIX of the federal social security act; in providing information needed to determine such payments; in establishing and maintaining such fiscal records as may be necessary for the proper and efficient administration of medical assistance;

(g) establishing standards of eligibility for medical assistance, consistent with the provisions of this title; and

(h) making policy, rules and regulations for maintaining a system of hearings for applicants and recipients of medical assistance adversely affected by the actions of the department or social service districts and for making final administrative determinations and issuing final decisions concerning such matters.

3. Each office within the department of mental hygiene shall be responsible for establishing and maintaining standards for medical care and services received in institutions operated by it or subject to its supervision pursuant to the mental hygiene law.

4. The public health and health planning council shall be responsible for establishing and maintaining qualifications for persons employed by social services districts as professional directors.