§ 365-k. Provision of prenatal care services. 1. (a) The commissioner shall establish standards and guidelines for the provision of prenatal care services under the medical assistance program. In establishing such standards and guidelines, the commissioner shall consider generally accepted standards of professional practice, including, but not limited to, standards issued by the American College of Obstetricians and Gynecologists and the American Academy of Pediatrics, and shall consult with prenatal care providers and other interested parties.

(b) The standards and guidelines established under this section for providing non-invasive prenatal testing shall not limit availability and coverage for a test based on the age of the pregnant patient, unless the limit is explicitly called for by the generally accepted standards of professional practice or is otherwise recommended by safety communications or guidance issued by the United States food and drug administration, the centers for Medicare and medicaid services, or the United States department of health and human services.

2. For purposes of this title, "prenatal care provider" means a medical care facility or public or private not-for-profit agency or organization, physician, licensed nurse practitioner, or licensed midwife practicing on an individual or group basis that provides prenatal care or managed care plan that contracts with prenatal providers.