

BlueCross BlueShield of Oklahoma

If a conflict arises between a Clinical Payment and Coding Policy ("CPCP") and any plan document under which a member is entitled to Covered Services, the plan document will govern. If a conflict arises between a CPCP and any provider contract pursuant to which a provider participates in and/or provides Covered Services to eligible member(s) and/or plans, the provider contract will govern. "Plan documents" include, but are not limited to, Certificates of Health Care Benefits, benefit booklets, Summary Plan Descriptions, and other coverage documents. BCBSOK may use reasonable discretion interpreting and applying this policy to services being delivered in a particular case. BCBSOK has full and final discretionary authority for their interpretation and application to the extent provided under any applicable plan documents.

Providers are responsible for submission of accurate documentation of services performed. Providers are expected to submit claims for services rendered using valid code combinations from Health Insurance Portability and Accountability Act ("HIPAA") approved code sets. Claims should be coded appropriately according to industry standard coding guidelines including, but not limited to: Uniform Billing ("UB") Editor, American Medical Association ("AMA"), Current Procedural Terminology ("CPT®"), CPT® Assistant, Healthcare Common Procedure Coding System ("HCPCS"), ICD-10 CM and PCS, National Drug Codes ("NDC"), Diagnosis Related Group ("DRG") guidelines, Centers for Medicare and Medicaid Services ("CMS") National Correct Coding Initiative ("NCCI") Policy Manual, CCI table edits and other CMS guidelines.

Claims are subject to the code edit protocols for services/procedures billed. Claim submissions are subject to claim review including but not limited to, any terms of benefit coverage, provider contract language, medical policies, clinical payment and coding policies as well as coding software logic. Upon request, the provider is urged to submit any additional documentation.

Urine Culture Testing for Bacteria

Policy Number: CPCPLAB050

Version 1.0

Enterprise Clinical Payment and Coding Policy Committee Approval Date: July 17, 2023

Plan Effective Date: November 1, 2023

Description

BCBSOK has implemented certain lab management reimbursement criteria. Not all requirements apply to each product. Providers are urged to review Plan documents for eligible coverage for services rendered.

Reimbursement Information:

For guidance on pathogen panel testing from urine samples, please see CPCPLAB045 Pathogen Panel Testing.

- 1. For pregnant individuals, , urine culture testing (with isolate identification and antibiotic susceptibilities if applicable) for a urinary tract infection (UTI), **may be reimbursable**.
- 2. For asymptomatic individuals undergoing urological interventions which breach the mucosa, urine culture testing (with isolate identification and antibiotic susceptibilities if applicable) **may be reimbursable** prior to the procedure.
- 3. For individuals exhibiting at least one sign or symptom of possible UTI or bacteriuria (See **Note 1**), urine culture testing (with isolate identification and antibiotic susceptibilities if applicable) **may be** reimbursable.
- 4. To assess pyelonephritis, urine culture testing (with isolate identification and antibiotic susceptibilities if applicable) **may be reimbursable**.
- 5. For all other instances of asymptomatic urinary tract infection or asymptomatic bacteriuria not described above, urine culture testing (with isolate identification and antibiotic susceptibilities if applicable) is not reimbursable.
- 6. For individuals that show evidence of clinical resolution of infection, follow-up urine culture testing for an uncomplicated urinary tract infection **is not reimbursable.**
- 7. Urine culture testing (with isolate identification and antibiotic susceptibilities if applicable) is not reimbursable in any of the following situations:
 - a. As a part of initial screening for asymptomatic prostatitis;
 - b. As a part of assessment or prognosis of prostate biopsy.

NOTE 1: Signs and symptoms of UTI/bacteriuria include (CDC, 2021)

- Fever
- Urgency to urinate
- Feeling the need to urinate despite having an empty bladder
- Increased frequency of urination
- Dysuria
- Suprapubic tenderness
- Pyuria
- Hematuria
- Cloudy urine
- Lower Back and Side (flank) pain
- Nausea
- Vomiting
- Chills
- Night sweats
- Pelvic pressure
- Change in urine smell
- Abnormal urinalysis findings

Procedure Codes

The following is not an all-encompassing code list. The inclusion of a code does not guarantee it is a covered service or eligible for reimbursement.

Codes
87077, 87086, 87088, 87140, 87147, 87149, 87181, 87186

References:

AAP. (2016, July 13). Avoid the use of surveillance cultures for the screening and treatment of asymptomatic bacteriuria. ABIM. Retrieved 06/20/2018 from http://www.choosingwisely.org/clinician-lists/american-academy-pediatrics-surveillance-cultures-to-screen-and-treat-asymptomatic-bacteruria/

AAP, & ASPN. (2018, July 16). Avoid ordering follow-up urine cultures after treatment for an uncomplicated urinary tract infection (UTI) in patients that show evidence of clinical resolution of infection. ABIM. Retrieved 04/19/2019 from http://www.choosingwisely.org/clinician-lists/aap-aspn-follow-up-urine-cultures-after-treatment-for-uncomplicated-uti/

AMDA. (2019). *Don't obtain urine tests until clinical criteria are met*. ABIM. http://www.choosingwisely.org/clinician-lists/amda-urine-cultures/

Anger, J., Lee, U., Ackerman, L., Chou, R., Chughtai, B., Quentin Clemens, J., Hickling, D., Kapoor, A., Kenton, K. S., Kaufman, M. R., Rondanina, M. A., Stapleton, A., Stothers, L., & Chai, T. C. (2019, April). *Recurrent Uncomplicated Urinary Tract Infections in Women: AUA/CUA/SUFU Guideline*. American Urological Association. Retrieved 04/03 from https://www.cua.org/system/files/Guidelines/rUTI-guideline.pdf

Aroutcheva, A., Gariti, D., Simon, M., Shott, S., Faro, J., Simoes, J. A., Gurguis, A., & Faro, S. (2001). Defense factors of vaginal lactobacilli. *Am J Obstet Gynecol*, *185*(2), 375-379. https://doi.org/10.1067/mob.2001.115867

Association of Medical Microbiology and Infectious Diseases Canada. (2021). Five Tests and Treatments to Question in Medical Microbiology and Infectious Diseases. https://choosingwiselycanada.org/recommendation/medical-microbiology/

AUA. (2017). *Management and Screening of Primary Vesicoureteral Reflux in Children*. https://www.auanet.org/guidelines-and-quality/guidelines/vesicoureteral-reflux-guideline

Averch, T. D., Stoffel, J., Goldman, H. B., Griebling, T. L., Lerner, L., Newman, D. K., Peterson, A. C., Bertsch, J., Hoogland, M., Hubbard, H., Pope, S., Shertz Wall, C., & Yoffe, M. (2014, 2014). *Catheter-Associated Urinary Tract Infections: Definitions and Significance in the Urologic Patient*. American Urological Association. Retrieved 06/21/2018 from https://www.auanet.org/guidelines-andquality/quality-and-measurement/quality-improvement/clinical-consensus-statement-and-qualityimprovement-issue-brief-(ccs-and-qiib)/catheter-associated-urinary-tract-infections

Birnie, K., Hay, A. D., Wootton, M., Howe, R., MacGowan, A., Whiting, P., Lawton, M., Delaney, B., Downing, H., Dudley, J., Hollingworth, W., Lisles, C., Little, P., O'Brien, K., Pickles, T., Rumsby, K., ThomasJones, E., Van der Voort, J., Waldron, C. A., . . . Sterne, J. A. (2017). Comparison of microbiological diagnosis of urinary tract infection in young children by routine health service laboratories and a research laboratory: Diagnostic cohort study. (1932-6203 (Electronic)).

Bonkat, G., Bartoletti, R., Bruyère, R., Cai, T., Geerlings, S. E., Koves, B., Schubert, S., Pilatz, A., Veeratterapillay, R., & Wagenlehner, F. M. E. (2023, 2018). *European Association of Urology (EAU) Guidelines on Urological Infections* Uroweb. Retrieved 06/20/2018 from https://uroweb.org/guidelines/urological-infections

Brubaker, L., & Wolfe, A. (2016). The urinary microbiota: a paradigm shift for bladder disorders? *Curr Opin Obstet Gynecol*, *28*(5), 407-412. https://doi.org/10.1097/gco.000000000000298

Bruyere, F., d'Arcier, B. F., Boutin, J. M., & Haillot, O. (2010). Is urine culture routinely necessary before prostate biopsy? *Prostate Cancer Prostatic Dis*, *13*(3), 260-262. https://doi.org/10.1038/pcan.2010.8

Cantey, J. B., Gaviria-Agudelo, C., McElvania TeKippe, E., & Doern, C. D. (2015). Lack of clinical utility of urine gram stain for suspected urinary tract infection in pediatric patients. *Journal of Clinical Microbiology*, *53*(4), 1282-1285. https://doi.org/10.1128/JCM.00045-15

CDC. (2021). *Urinary Tract Infection*. https://www.cdc.gov/antibiotic-use/community/for-patients/common-illnesses/uti.html

Cooper, J., Raeburn, A., Hamilton-Miller, J. M., & Brumfitt, W. (1992). Nitrite test for bacteriuria detection. *Br J Gen Pract*, *42*.

Cope, M., Cevallos, M. E., Cadle, R. M., Darouiche, R. O., Musher, D. M., & Trautner, B. W. (2009). Inappropriate treatment of catheter-associated asymptomatic bacteriuria in a tertiary care hospital. *Clin Infect Dis*, 48(9), 1182-1188. https://doi.org/10.1086/597403

Coussement, J., Scemla, A., Hougardy, J. M., Sberro-Soussan, R., Amrouche, L., Catalano, C., Johnson, J. R., & Abramowicz, D. (2019). Prevalence of asymptomatic bacteriuria among kidney transplant recipients beyond two months post-transplant: A multicenter, prospective, cross-sectional study. *PLoS One*, *14*(9), e0221820. https://doi.org/10.1371/journal.pone.0221820

Dason, S., Dason, J. T., & Kapoor, A. (2011). Guidelines for the diagnosis and management of recurrent urinary tract infection in women. *Can Urol Assoc J*, *5*(5), 316-322. https://doi.org/10.5489/cuaj.11214

Devillé, W. L. J. M., Yzermans, J. C., van Duijn, N. P., Bezemer, P. D., van der Windt, D. A. W. M., & Bouter, L. M. (2004). The urine dipstick test useful to rule out infections. A meta-analysis of the accuracy. *BMC Urology*, *4*(1), 4. https://doi.org/10.1186/1471-2490-4-4

Ducharme, J., Neilson, S., & Ginn, J. L. (2007). Can urine cultures and reagent test strips be used to diagnose urinary tract infection in elderly emergency department patients without focal urinary symptoms? *Cjem*, *9*(2), 87-92.

Eliacik, K., Kanik, A., Yavascan, O., Alparslan, C., Kocyigit, C., Aksu, N., & Bakiler, A. R. (2016). A Comparison of Bladder Catheterization and Suprapubic Aspiration Methods for Urine Sample Collection From Infants With a Suspected Urinary Tract Infection. *Clin Pediatr (Phila)*, *55*(9), 819-824. Fontserè, S., Infante-Domínguez, C., Suárez-Benjumea, A., Suñer-Poblet, M., González-Corvillo, C., Martín-Gutiérrez, G., Bernal, G., Pachón, J., Pachón-Ibáñez, M. E., & Cordero, E. (2021). Impact of Treating Asymptomatic Bacteriuria in Kidney Transplant Recipients: A Prospective Cohort Study. *Antibiotics (Basel, Switzerland)*, *10*(2), 218. https://doi.org/10.3390/antibiotics10020218

Goldman, J. D., & Julian, K. (2019). Urinary tract infections in solid organ transplant recipients: Guidelines from the American Society of Transplantation Infectious Diseases Community of Practice. *Clin Transplant*, *33*(9), e13507. https://doi.org/10.1111/ctr.13507

Graham, J., & Galloway, A. (2001). ACP Best Practice No 167. *Journal of Clinical Pathology*, *54*(12), 911-919. http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1731340/

Harding, G. K., Zhanel, G. G., Nicolle, L. E., & Cheang, M. (2002). Antimicrobial treatment in diabetic women with asymptomatic bacteriuria. *N Engl J Med*, *347*(20), 1576-1583. https://doi.org/10.1056/NEJMoa021042

Hooton, T. M., & Gupta, K. (2023, March 19). *Acute complicated urinary tract infection (including pyelonephritis) in adults*. Wolters Kluwer. https://www.uptodate.com/contents/acute-complicated-urinary-tract-infection-including-pyelonephritis-in-adults

Lightner, D. J., Wymer, K., Sanchez, J., & Kavoussi, L. (2020). Best Practice Statement on Urologic Procedures and Antimicrobial Prophylaxis. *J Urol, 203*(2), 351-356. https://doi.org/10.1097/ju.000000000000509

Meyrier, A. (2023, July 12). Sampling and evaluation of voided urine in the diagnosis of urinary tract infection in adults. Wolters Kluwer. https://www.uptodate.com/contents/sampling-and-evaluation-of-voided-urine-in-the-diagnosis-of-urinary-tract-infection-in-adults

NICE. (2018, October 31). Urinary tract infection in under 16s: diagnosis and management. https://www.nice.org.uk/guidance/cg54/resources/urinary-tract-infection-in-under-16s-diagnosis-and-management-pdf-975507490501

NICE. (2023, June 11). Urinary tract infections in adults. https://www.nice.org.uk/guidance/qs90

Nicolle, L. E., Gupta, K., Bradley, S. F., Colgan, R., DeMuri, G. P., Drekonja, D., Eckert, L. O., Geerlings, S. E., Koves, B., Hooton, T. M., Juthani-Mehta, M., Knight, S. L., Saint, S., Schaeffer, A. J., Trautner, B., Wullt, B., & Siemieniuk, R. (2019). Clinical Practice Guideline for the Management of Asymptomatic Bacteriuria: 2019 Update by the Infectious Diseases Society of America. *Clin Infect Dis*, *68*(10), e83-e110. https://doi.org/10.1093/cid/ciy1121

Petty, L. A., Vaughn, V. M., Flanders, S. A., Malani, A. N., Conlon, A., Kaye, K. S., Thyagarajan, R., Osterholzer, D., Nielsen, D., Eschenauer, G. A., Bloemers, S., McLaughlin, E., & Gandhi, T. N. (2019). Risk Factors and Outcomes Associated With Treatment of Asymptomatic Bacteriuria in Hospitalized Patients. *JAMA Intern Med*. https://doi.org/10.1001/jamainternmed.2019.2871

Price, T. K., Dune, T., Hilt, E. E., Thomas-White, K. J., Kliethermes, S., Brincat, C., Brubaker, L., Wolfe, A. J., Mueller, E. R., & Schreckenberger, P. C. (2016). The Clinical Urine Culture: Enhanced Techniques Improve Detection of Clinically Relevant Microorganisms. *Journal of Clinical Microbiology*, *54*(5), 1216-1222. https://doi.org/10.1128/JCM.00044-16 Roberts, K. B. (2011). Urinary tract infection: clinical practice guideline for the diagnosis and management of the initial UTI in febrile infants and children 2 to 24 months. *Pediatrics*, *128*(3), 595-610. https://doi.org/10.1542/peds.2011-1330

Robinson, J. L., Finlay, J. C., Lang, M. E., Bortolussi, R., CPS, CPC, & IDIC. (2020). *Urinary tract infections in infants and children: Diagnosis and management*. Canadian Paediatric Society. https://www.cps.ca/en/documents/position/urinary-tract-infections-in-children

Schito, G. C., Naber Kg Fau - Botto, H., Botto H Fau - Palou, J., Palou J Fau - Mazzei, T., Mazzei T Fau - Gualco, L., Gualco L Fau - Marchese, A., & Marchese, A. (2009). The ARESC study: an international survey on the antimicrobial resistance of pathogens involved in uncomplicated urinary tract infections. *Int J Antimicrob Agents*, *34*(5), 407-413.

Schmiemann, G., Kniehl, E., Gebhardt, K., Matejczyk, M. M., & Hummers-Pradier, E. (2010). The Diagnosis of Urinary Tract Infection: A Systematic Review. *Deutsches Ärzteblatt International*, *107*(21), 361-367. https://doi.org/10.3238/arztebl.2010.0361

SHEA. (2019, December 2). *Don't perform urinalysis, urine culture, blood culture or C. difficile testing unless patients have signs or symptoms of infection*. ABIM. http://www.choosingwisely.org/clinician-lists/shea-urinalysis-urine-culture-blood-culture-or-c-difficile-testing/

USPSTF. (2019). Screening for Asymptomatic Bacteriuria in Adults: US Preventive Services Task Force Recommendation Statement. *JAMA*, *322*(12), 1188-1194. https://doi.org/10.1001/jama.2019.13069

WHO. (2016). WHO Guidelines Approved by the Guidelines Review Committee. In *WHO Recommendations on Antenatal Care for a Positive Pregnancy Experience*. World Health Organization Copyright (c) World Health Organization 2016.

https://apps.who.int/iris/bitstream/handle/10665/250796/9789241549912-eng.pdf?sequence=1

Wojno, K. J., Baunoch, D., Luke, N., Opel, M., Korman, H., Kelly, C., Jafri, S. M. A., Keating, P., Hazelton, D., Hindu, S., Makhloouf, B., Wenzler, D., Sabry, M., Burks, F., Penaranda, M., Smith, D. E., Korman, A., & Sirls, L. (2020). Multiplex PCR Based Urinary Tract Infection (UTI) Analysis Compared to Traditional Urine Culture in Identifying Significant Pathogens in Symptomatic Patients. *Urology*, *136*, 119-126. https://doi.org/10.1016/j.urology.2019.10.018

Policy Update History:

7/17/2023	Document updated with literature review. Reimbursement Information revised for clarity; "women" or "patients" changed to "individuals" throughout. References revised.
11/1/2022	New policy