If a conflict arises between a Clinical Payment and Coding Policy 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. Blue Cross and Blue Shield of Illinois may use reasonable discretion interpreting and applying this policy to services being delivered in a particular case. BCBSIL 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 approved code sets. Claims should be coded appropriately according to industry standard coding guidelines including, but not limited to: Uniform Billing Editor, American Medical Association, Current Procedural Terminology, CPT® Assistant, Healthcare Common Procedure Coding System, ICD-10 CM and PCS, National Drug Codes, Diagnosis Related Group guidelines, Centers for Medicare and Medicaid Services National Correct Coding Initiative 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

Approval Date: September 25, 2025

Plan Effective Date: January 1, 2026

Description

The Plan 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

- Symptoms of a bladder infection include pain or burning while urinating, frequent urination, feeling the need to urinate despite having an empty bladder, bloody urine, and/or pressure or cramping in the groin or lower abdomen. (4)
- Symptoms of a kidney infection include fever, chills, lower back pain or pain in the side of the back, and/or nausea or vomiting. (4)

- Symptoms of a UTI in infants, babies and toddlers include fever, belly pain or fullness, strong, foul-smelling urine, weight loss, irritability, vomiting, poor feeding, fatigue, yellowish skin or eyes, and/or diarrhea. (5)
- Symptoms of a UTI in older children include daytime accidents or bedwetting after being fully potty trained, painful or difficult urination, pain or discomfort in the lower belly, back or side, urine that smells bad, is cloudy or has blood in it, nausea and/or vomiting, fever and chills, fatigue, and/or a frequent, urgent need to urinate, especially if only a small amount comes out when urinating. (5)
- Symptoms of a UTI in older, frail individuals or individuals with a urinary catheter include leaking urine (wetting themselves or incontinence) that is worse than usual, new shivering or shaking (rigors), and/or changes in behavior, such as acting agitated or confused (delirium). (6)

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:

1. Hooton TM, Gupta K. Acute complicated urinary tract infection (including pyelonephritis) in adults. Wolters Kluwer. Updated June 5, 2025. https://www.uptodate.com/contents/acute-complicated-urinary-tract-infection-including-pyelonephritis-in-adults

2. Bonkat G, Bartoletti R, Bruyère R, et al. European Association of Urology (EAU) Guidelines on Urological Infections Uroweb. https://d56bochluxqnz.cloudfront.net/documents/full-guideline/EAU-Guidelines-on-Urological-Infections-2024.pdf

3. Meyrier A. Sampling and evaluation of voided urine in the diagnosis of urinary tract infection in adults. Updated Feb 28, 2025. https://www.uptodate.com/contents/sampling-and-evaluation-of-voided-urine-in-the-diagnosis-of-urinary-tract-infection-in-adults

4. CDC. Urinary Tract Infection Basics. Updated January 22, 2024. https://www.cdc.gov/uti/about/

5. Cleveland Clinic. Urinary Tract Infection (UTI) in Kids. Updated June 2, 2025. https://my.clevelandclinic.org/health/diseases/12415-urinary-tract-infection-childrens

6. NHS. Urinary tract infections (UTIs). Updated July 11, 2025. https://www.nhs.uk/conditions/urinary-tract-infections-utis/

7. Brubaker L, Wolfe A. The urinary microbiota: a paradigm shift for bladder disorders? *Current opinion in obstetrics & gynecology*. Oct 2016;28(5):407-12. doi:10.1097/gco.0000000000000298

8. Aroutcheva A, Gariti D, Simon M, et al. Defense factors of vaginal lactobacilli. *American journal of obstetrics and gynecology*. Aug 2001;185(2):375-9. doi:10.1067/mob.2001.115867

9. Harding GK, Zhanel GG, Nicolle LE, Cheang M. Antimicrobial treatment in diabetic women with asymptomatic bacteriuria. *The New England journal of medicine*. Nov 14 2002;347(20):1576-83. doi:10.1056/NEJMoa021042

10. AAFP. Don't perform urinalysis, urine culture, blood culture or C. difficile testing unless patients have signs or symptoms of infection. https://www.aafp.org/pubs/afp/collections/choosing-wisely/291.html

11. Cope M, Cevallos ME, Cadle RM, Darouiche RO, Musher DM, Trautner BW. Inappropriate treatment of catheter-associated asymptomatic bacteriuria in a tertiary care hospital. *Clinical infectious diseases : an official publication of the Infectious Diseases Society of America*. May 1 2009;48(9):1182-8. doi:10.1086/597403

12. Schito GC, Naber Kg Fau - Botto H, Botto H Fau - Palou J, et al. The ARESC study: an international survey on the antimicrobial resistance of pathogens involved in uncomplicated urinary tract infections. *Int J Antimicrob Agents*. 2009;34(5):407-13.

13. Sabih A, Leslie SW. Complicated Urinary Tract Infections. *StatPearls*. StatPearls Publishing; 2024. https://www.ncbi.nlm.nih.gov/books/NBK436013/

14. Cooper J, Raeburn A, Hamilton-Miller JM, Brumfitt W. Nitrite test for bacteriuria detection. *Br J Gen Pract*. 1992// 1992;42

15. Devillé WLJM, Yzermans JC, van Duijn NP, Bezemer PD, van der Windt DAWM, Bouter LM. The urine dipstick test useful to rule out infections. A meta-analysis of the accuracy. *BMC Urology*. 2004/06/02 2004;4(1):4. doi:10.1186/1471-2490-4-4

16. Graham J, Galloway A. ACP Best Practice No 167. *Journal of Clinical Pathology*. 2001;54(12):911-919.

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

18. Wojno KJ, Baunoch D, Luke N, et al. Multiplex PCR Based Urinary Tract Infection (UTI) Analysis Compared to Traditional Urine Culture in Identifying Significant Pathogens in Symptomatic Patients. *Urology*. Feb 2020;136:119-126. doi:10.1016/j.urology.2019.10.018

19. Bruyere F, d'Arcier BF, Boutin JM, Haillot O. Is urine culture routinely necessary before prostate biopsy? *Prostate cancer and prostatic diseases*. Sep 2010;13(3):260-2. doi:10.1038/pcan.2010.8

20. Birnie K, Hay AD, Wootton M, et al. Comparison of microbiological diagnosis of urinary tract infection in young children by routine health service laboratories and a research laboratory: Diagnostic cohort study. 2017;(1932-6203 (Electronic))

21. Eliacik K, Kanik A, Yavascan O, et al. A Comparison of Bladder Catheterization and Suprapubic Aspiration Methods for Urine Sample Collection From Infants With a Suspected Urinary Tract Infection. *Clin Pediatr (Phila)*. 2016;55(9):819-24.

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

23. Price TK, Dune T, Hilt EE, et al. The Clinical Urine Culture: Enhanced Techniques Improve Detection of Clinically Relevant Microorganisms. *Journal of Clinical Microbiology*. 2016;54(5):1216-1222. doi:10.1128/JCM.00044-16

24. Cantey JB, Gaviria-Agudelo C, McElvania TeKippe E, Doern CD. Lack of clinical utility of urine gram stain for suspected urinary tract infection in pediatric patients. *Journal of clinical microbiology*. 2015;53(4):1282-1285. doi:10.1128/JCM.00045-15

25. Petty LA, Vaughn VM, Flanders SA, et al. Risk Factors and Outcomes Associated With Treatment of Asymptomatic Bacteriuria in Hospitalized Patients. *JAMA Intern Med*. Aug 26 2019;doi:10.1001/jamainternmed.2019.2871

26. Coussement J, Scemla A, Hougardy JM, et al. Prevalence of asymptomatic bacteriuria among kidney transplant recipients beyond two months post-transplant: A multicenter, prospective, cross-sectional study. *PLoS One*. 2019;14(9):e0221820. doi:10.1371/journal.pone.0221820

27. Fontserè S, Infante-Domínguez C, Suárez-Benjumea A, et al. Impact of Treating Asymptomatic Bacteriuria in Kidney Transplant Recipients: A Prospective Cohort Study. *Antibiotics (Basel)*. 2021;10(2):218. doi:10.3390/antibiotics10020218

28. AMDA. Don't obtain urine tests until clinical criteria are met. https://paltc.org/programs/choosing-wisely

29. AAFP. 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. https://www.aafp.org/pubs/afp/collections/choosing-wisely/361.html

30. AAFP. Avoid the use of surveillance cultures for the screening and treatment of asymptomatic bacteriuria. https://www.aafp.org/pubs/afp/collections/choosing-wisely/198.html

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

32. Robinson JL, Finlay JC, Lang ME, et al. 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

33. Roberts KB. 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*. Sep 2011;128(3):595-610. doi:10.1542/peds.2011-1330

34. Dason S, Dason JT, Kapoor A. Guidelines for the diagnosis and management of recurrent urinary tract infection in women. *Canadian Urological Association journal = Journal de l'Association des urologues du Canada*. Oct 2011;5(5):316-22.

35. Averch TD, Stoffel J, Goldman HB, et al. Catheter-Associated Urinary Tract Infections: Definitions and Significance in the Urologic Patient. *White Papers*. 2014 2015;2018(06/21/2018)doi:10.1016/j.urpr.2015.01.005

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

37. Lightner DJ, Wymer K, Sanchez J, Kavoussi L. Best Practice Statement on Urologic Procedures and Antimicrobial Prophylaxis. *J Urol*. Feb 2020;203(2):351-356. doi:10.1097/ju.0000000000000509

38. NICE. Urinary tract infections in adults. Updated February 15, 2023. https://www.nice.org.uk/guidance/qs90

39. NICE. Urinary tract infection in under 16s: diagnosis and management. Updated July 27, 2022. https://www.nice.org.uk/guidance/ng224/chapter/Recommendations#diagnosis

40. Anger J, Lee U, Ackerman L, et al. Recurrent Uncomplicated Urinary Tract Infections in Women: AUA/CUA/SUFU Guideline. American Urological Association. https://www.auanet.org/guidelines-and-quality/guidelines/recurrent-uti

41. Nicolle LE, Gupta K, Bradley SF, et al. Clinical Practice Guideline for the Management of Asymptomatic Bacteriuria: 2019 Update by the Infectious Diseases Society of America. *Clinical infectious diseases: an official publication of the Infectious Diseases Society of America*. May 2 2019;68(10):e83-e110. doi:10.1093/cid/ciy1121

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

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

44. Association of Medical Microbiology and Infectious Diseases Canada. Five Tests and Treatments to Question in Medical Microbiology and Infectious Diseases. Updated July 2022. https://choosingwiselycanada.org/recommendation/medical-microbiology/

Policy Update History:

Approval Date	Effective Date; Summary of Changes
09/25/2025	01/01/2026: New policy.