



## 190.12 - Urine Culture, Bacterial

### Other Names/Abbreviations

Urine culture

### Description

A bacterial urine culture is a laboratory procedure performed on a urine specimen to establish the probable etiology of a presumed urinary tract infection. It is common practice to do a urinalysis prior to a urine culture. A urine culture may also be used as part of the evaluation and management of another related condition. The procedure includes aerobic agar-based isolation of bacteria or other cultivable organisms present, and quantitation of types present based on morphologic criteria. Isolates deemed significant may be subjected to additional identification and susceptibility procedures as requested by the ordering physician. The physician's request may be through clearly documented and communicated laboratory protocols.

### HCPCS Codes (Alphanumeric, CPT<sup>®</sup> AMA)

Code	Description
87086	Culture, bacterial; quantitative, colony count, urine.
87088	Culture, bacterial; with isolation and presumptive identification of each isolates, urine.

### ICD-9-CM Codes Covered by Medicare Program

The individual ICD-9-CM codes included in code ranges in the table below can be viewed on CMS' website under Downloads: Lab Code List. The link is: <http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD9.html>

Code	Description
003.1	Salmonella septicemia
038.0, 038.10-038.11, 038.12, 038.19, 038.2, 038.3, 038.40-038.44, 038.49, 038.8, 038.9	Septicemia
276.2	Acidosis
276.4	Metabolic acidosis/alkalosis
286.6	Defibrination syndrome/disseminated intravascular coagulation
288.00	Neutropenia, unspecified
288.01	Congenital neutropenia
288.02	Cyclic neutropenia
288.03	Drug induced neutropenia
288.04	Neutropenia due to infection
288.09	Other neutropenia
288.8	Other specified disease of white blood cells including leukemoid reaction/leukocytosis
306.53	Psychogenic dysuria
306.59	Other psychogenic genitourinary malfunction

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Code	Description
518.82	Other pulmonary insufficiency, not elsewhere classified
570	Acute and subacute necrosis of liver
580.0-580.9	Acute glomerulonephritis
583.0-583.9	Nephritis and Nephropathy, not specified as acute or chronic
585.6	End stage renal disease
590.00-590.9	Infections of kidney/pyelonephritis acute and chronic
592.0-592.9	Calculus of kidney and ureter
593.0-593.9	Other disorders of kidney & ureter (cyst, stricture, obstruction, reflux)
594.0-594.9	Calculus of lower urinary tract
595.0-595.9	Cystitis
597.0	Urethritis, not sexually transmitted and urethral syndrome
597.80-597.89	Other urethritis
598.00-598.01	Urethral stricture due to infection
599.0	Urinary tract infection, site not specified
599.70	Hematuria, unspecified
599.71	Gross hematuria
599.72	Microscopic hematuria
600.00-600.91	Hyperplasia of prostate
601.0-601.9	Inflammatory diseases of prostate
602.0-602.9	Other disorders of prostate (calculus, congestion, atrophy, etc.)
604.0-604.99	Orchitis and epididymitis
608.0 - 608.1, 608.20-608.24, 608.3-608.9	Other disorders of male genital organs (seminal vesiculitis, spermatocele, etc.)
614.0-614.9	Inflammatory disease of ovary, fallopian tube, pelvic cellular tissue, and peritoneum
615.0-615.9	Inflammatory disease of uterus, except cervix
616.0	Cervicitis and endocervicitis
616.10-616.11	Vaginitis and vulvovaginitis
616.2–616.4, 616.50, 616.51, 616.81, 616.89, 616.9	Other inflammatory conditions of cervix, vagina and vulva
619.0-619.9	Fistula involving female genital tract
625.6	Stress incontinence, female
639.0	Genital tract and pelvic infection complicating abortion, ectopic or molar pregnancies
639.5	Shock complicating abortion, ectopic or molar pregnancies
646.60-646.64	Infections of genitourinary tract in pregnancy
670.00	Major puerperal infection, unspecified, unspecified as to episode of care or not applicable
670.02	Major puerperal infection, unspecified, delivered, with mention of postpartum complication
670.04	Major puerperal infection, unspecified, postpartum condition or complication

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Code	Description
670.10	Puerperal endometritis, unspecified as to episode of care or not applicable
670.12	Puerperal endometritis, delivered, with mention of postpartum complication
670.14	Puerperal endometritis, postpartum condition or complication
670.20	Puerperal sepsis, unspecified as to episode of care or not applicable
670.22	Puerperal sepsis, delivered, with mention of postpartum complication
670.24	Puerperal sepsis, postpartum condition or complication
670.30	Puerperal septic thrombophlebitis, unspecified as to episode of care or not applicable
670.32	Puerperal septic thrombophlebitis, delivered, with mention of postpartum complication
670.34	Puerperal septic thrombophlebitis, postpartum condition or complication
670.80	Other major puerperal infection, unspecified as to episode of care or not applicable
670.82	Other major puerperal infection, delivered, with mention of postpartum complication
670.84	Other major puerperal infection, postpartum condition or complication
672.00-672.04	Pyrexia of unknown origin during the puerperium
724.5	Backache, unspecified
771.81	Septicemia (sepsis) of newborn
771.82	Urinary tract infection of newborn
771.83	Bacteremia of newborn
780.02	General symptoms, transient alteration of awareness
780.60	Fever, unspecified
780.61	Fever presenting with conditions classified elsewhere
780.62	Postprocedural fever
780.63	Postvaccination fever
780.64	Chills (without fever)
780.65	Hypothermia not associated with low environmental temperature
780.66	Febrile nonhemolytic transfusion reaction
780.79	Other malaise and fatigue
780.93	Memory loss
780.94	Early satiety
780.96	Generalized pain
780.97	Altered mental status
780.99	Other general symptoms
785.0	Tachycardia, unspecified
785.50-785.59	Shock without mention of trauma
788.0-788.63, 788.64, 788.65, 788.69, 788.7-788.8	Symptoms involving urinary system (renal colic, dysuria, retention of urine, incontinence of urine, frequency, polyuria, nocturia, oliguria, anuria, other abnormality of urination, urethral discharge, extravasation of urine.)

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Code	Description
788.91	Functional urinary incontinence
788.99	Other symptoms involving urinary system
789.00-789.09	Abdominal pain
789.60-789.69	Abdominal tenderness
789.7	Colic
790.7	Bacteremia
791.0-791.9	Nonspecific findings on examination of urine (proteinuria, chyluria, hemoglobinuria, myoglobinuria, biliuria, glycosuria, acetonuria, other cells & casts in urine, other nonspecific findings on urine examination)
799.3	Debility, unspecified (only for declining functional status)
939.0	Foreign body in genitourinary tract, bladder and urethra
939.3	Foreign body in genitourinary tract, penis
V44.50-V44.6	Artificial cystostomy or other artificial opening of urinary tract status
V55.5-V55.6	Attention to cystostomy or other artificial opening of urinary tract
V58.69	Long-term (current) use of other medications

**Indications**

1. A patient's urinalysis is abnormal suggesting urinary tract infection, for example, abnormal microscopic (hematuria, pyuria, bacteriuria); abnormal biochemical urinalysis (positive leukocyte esterase, nitrite, protein, blood); a Gram's stain positive for microorganisms; positive bacteriuria screen by a non-culture technique; or other significant abnormality of a urinalysis. While it is not essential to evaluate a urine specimen by one of these methods before a urine culture is performed, certain clinical presentations with highly suggestive signs and symptoms may lend themselves to an antecedent urinalysis procedure where follow-up culture depends upon an initial positive or abnormal test result.
2. A patient has clinical signs and symptoms indicative of a possible urinary tract infection (UTI). Acute lower UTI may present with urgency, frequency, nocturia, dysuria, discharge or incontinence. These findings may also be noted in upper UTI with additional systemic symptoms (for example, fever, chills, lethargy); or pain in the costovertebral, abdominal, or pelvic areas. Signs and symptoms may overlap considerably with other inflammatory conditions of the genitourinary tract (for example, prostatitis, urethritis, vaginitis, or cervicitis). Elderly or immunocompromised patients, or patients with neurologic disorders may present atypically (for example, general debility, acute mental status changes, declining functional status).
3. The patient is being evaluated for suspected urosepsis, fever of unknown origin, or other systemic manifestations of infection but without a known source. Signs and symptoms used to define sepsis have been well established.
4. A test-of cure is generally not indicated in an uncomplicated infection. However, it may be indicated if the patient is being evaluated for response to therapy and there is a complicating co-existing urinary abnormality including structural or functional abnormalities, calculi, foreign bodies, or ureteral/renal stents or there is clinical or laboratory evidence of failure to respond as described in Indications 1 and 2.

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5. In surgical procedures involving major manipulations of the genitourinary tract, preoperative examination to detect occult infection may be indicated in selected cases (for example, prior to renal transplantation, manipulation or removal of kidney stones, or transurethral surgery of the bladder or prostate).
6. Urine culture may be indicated to detect occult infection in renal transplant recipients on immunosuppressive therapy.

### **Limitations**

1. CPT 87086 may be used one time per encounter.
2. Colony count restrictions on coverage of CPT 87088 do not apply as they may be highly variable according to syndrome or other clinical circumstances (for example, antecedent therapy, collection time, and degree of hydration).
3. CPT 87088 may be used multiple times in association with or independent of 87086, as urinary tract infections may be polymicrobial.
4. Testing for asymptomatic bacteriuria as part of a prenatal evaluation may be medically appropriate but is considered screening and therefore not covered by Medicare. The U.S. Preventive Services Task Force has concluded that screening for asymptomatic bacteriuria outside of the narrow indication for pregnant women is generally not indicated. There are insufficient data to recommend screening in ambulatory elderly patients including those with diabetes. Testing may be clinically indicated on other grounds including likelihood of recurrence or potential adverse effects of antibiotics, but is considered screening in the absence of clinical or laboratory evidence of infection.

### **ICD-9-CM Codes That Do Not Support Medical Necessity**

Any ICD-9-CM code not listed in either of the ICD-9-CM covered or non-covered sections.

### **Documentation Requirements**

Appropriate HCPCS/CPT code(s) must be used as described.

### **Sources of Information**

Bone, RC, RA Bal, FB Cerra, & ACCP/SCCM Consensus Conference Committee. 1992. Definitions for sepsis & organ failure & guidelines for the use of innovative therapies in sepsis. Chest 101:1644-1655.

Clarridge, JE, JR Johnson, and MT Pezzlo. 1998 (in press). Cumitech 2B: Laboratory Diagnosis of Urinary Tract Infections. AS Weissfeld (coor. ed.); ASM Press, Washington, DC.

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Sodeman, TM. 1995. A practical strategy for diagnosis of urinary tract infections. Clin. Lab. Med. 15:235-250.

Stamm WE, and TM Hooton. 1993. Management of urinary tract infections in adults. N. Engl. J. Med. 329:1328-1334.

United States Preventive Services Task Force (1996). Guidelines for screening for asymptomatic bacteriuria.

Lachs MS, Nachamkin I, Edelstein PH et al. 1992. Spectrum bias in the evaluation of diagnostic tests: lessons from the rapid dipstick test for urinary tract infection. Ann. Int. Med. 117:135-140.