

## **Oral Surgery Coding & Reimbursement Alert**

## You Be the Coder: Get Clarity on Reporting Wilke Procedure With Submandibular Excision

**Question:** Our surgeon recently performed Wilke's type of surgical correction for a patient who was suffering from sialorrhea. He performed diversion of the parotid gland duct along with excision of one of the submandibular glands. When I am looking at the codes available for the procedure, I am seeing that there is no option that states "Wilke procedure with excision of one submandibular gland." So, what code should I report for this procedure that our surgeon performed?

New York Subscriber

**Answer:** Sialorrhea is a condition where the patient will have excessive production of saliva leading to drooling. This condition is known to occur in patients with cerebral palsy or with damage to certain nerves. Your clinician will undertake surgical correction (Wilke procedure) to help the patient to overcome the problem of drooling.

In this procedure, your surgeon will divert the parotid duct bilaterally. Their relocation is through a submucosal tunnel into the tonsillar pillar using autologous vein grafts. Along with diversion of the parotid gland duct, your clinician might also opt to ligate the submandibular gland ducts. Alternatively, your clinician might choose to excise one or both of the submandibular glands.

Based on whether your clinician only performed the diversion of the parotid gland duct or simultaneously performed ligation of the submandibular gland ducts or excision of the submandibular glands, you have three code choices to report the Wilke's procedure. These three CPT® codes that you can choose from to report this procedure includes:

- 42507 (Parotid duct diversion, bilateral [Wilke type procedure])
- 42509 (...with excision of both submandibular glands)
- 42510 (...with ligation of both submandibular [Wharton's] ducts)

As you have mentioned, there is no CPT® code for reporting a Wilke procedure with excision of only one of the submandibular glands. Earlier to 2015, there was a CPT® code that you could report when your clinician performed a Wilke procedure with excision of only one of the submandibular glands. But, this code has been now deleted.

In such a scenario where your clinician performed diversion of the parotid gland ducts and excision of only one of the submandibular glands, you will now have to report it with the CPT® code 42507. If both the submandibular glands are excised by your surgeon during the procedure, then you will report 42509.