



Press Release
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Hospital Encourages Seniors to Carefully Weigh Medicare vs. Medicare Advantage

Hospital leaders highlight key differences that impact access to care, choice of providers, and long-term health needs

Knox City, Texas (Nov 28, 2025)— As Medicare open enrollment continues through December 7, Knox County Hospital District (KCHD) is encouraging seniors and their families to take the time to fully understand their options before making a decision that will affect every doctor’s visit, hospital stay, and referral over the next year.

Each fall, thousands of Medicare beneficiaries across rural Texas are inundated with advertisements, mailers, and television campaigns urging them to consider private Medicare Advantage plans. But while these plans may appear attractive on the surface, hospital leaders say the real differences become clear only when a patient needs consistent, local, and reliable access to care.

“People work their entire lives contributing to the traditional Medicare program through their Social Security withholdings,” said Stephen Kuehler, CEO. “Traditional Medicare is built on that foundation of reliability and patient choice. It allows individuals to receive care from the providers they know and trust, without having to navigate a maze of network restrictions or waiting for insurance approval.”

Unlike traditional Medicare—which is federally administered and widely accepted—Medicare Advantage plans are run by private insurance companies. These companies determine what services are covered, which providers are considered “in-network,” and when prior authorization is required. In a rural setting like Knox County, those differences can create barriers when patients need timely care close to home.

Kuehler noted that these barriers often appear when patients need specialized treatment or ongoing management of chronic conditions. “What matters most to people here is having access to the providers they rely on,” Kuehler said. “Traditional Medicare protects that access. It doesn’t force patients to switch doctors or travel long distances simply because their insurance company uses a narrow network.”

While Medicare Advantage plans frequently advertise added perks such as gym memberships or limited dental benefits, KCHD encourages residents not to let these extras overshadow the essential issues of access, continuity, and clinical decision-making.

“Those perks sometimes sound appealing, but they should never outweigh the importance of having unrestricted access to the care you need,” Kuehler explained. “Traditional Medicare keeps medical

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decisions between the patient and the provider. With Medicare Advantage, those decisions often require another level of approval from the insurance company—and that can delay treatment.”

KCHD providers routinely see how insurance limitations can complicate care for local families. In many cases, patients with Medicare Advantage plans face additional steps to secure referrals, obtain imaging, or receive specialty care. Traditional Medicare, by comparison, follows a straightforward structure that allows the hospital and its clinics to base decisions on clinical needs rather than network rules.

“At Knox County Hospital District, our commitment is to patient-centered care,” Kuehler said.

“Traditional Medicare gives us the ability to provide services when they are needed—not when an insurance administrator decides it’s appropriate.”

The hospital district also emphasizes that rural communities have unique challenges that do not always align with how Medicare Advantage plans are structured. Limited provider networks, distance to specialists, and the lack of flexibility in choosing a doctor can create significant hurdles that patients do not always anticipate when enrolling.

“With traditional Medicare, you have the freedom to work with providers who understand you, your health history, and your long-term needs,” Kuehler said. “That relationship is central to better health outcomes. It’s something we work hard every day to protect.”

Open enrollment, which ends Dec., 7, is the one time each year when Medicare beneficiaries can make changes to their coverage. KCHD encourages individuals to review both options carefully, ask questions, and consider how each plan will affect daily healthcare decisions—not just what is advertised during enrollment season.

“Selecting the right Medicare coverage is one of the most important healthcare decisions people make,” Kuehler added. “We want our community to be informed, confident, and equipped to choose what truly gives them the best access to care.”

Kuehler urges residents to review reputable sources when comparing plans. For clear, unbiased information, individuals may visit www.choosingmedicare.org or call Knox County Hospital District at 940-657-3535, Ext 247 and speak with Kelley Scott.

About Knox County Hospital District

Founded in 1926, Knox County Hospital District provides healthcare for residents of Knox County and surrounding areas. The district offers a wealth of medical services, including 24-hour emergency care, advanced radiology services, a clinical laboratory, home health, physical therapy, long-term care, patient education, and more. For additional information, please call 940-657-3535 or visit www.knoxhospital.org.

Knox County Hospital District

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