



Press Release
FOR IMMEDIATE RELEASE

Media Contact
Stephen Kuehler | stephen.kuehler@knoxfhospital.org
940-657-3535

Know Your Medicare Options

Local Access Matters When Choosing Coverage

KNOX CITY, Texas (October 16, 2026) –Medicare open enrollment brings a steady stream of advertisements, mailers and promises of additional benefits. Knox County Hospital District encourages residents to look closely at what those offers mean for their healthcare before selecting coverage for 2027.

The annual enrollment period runs October 15 through December 7. During this time, people with Medicare can review their coverage, switch between Original Medicare and Medicare Advantage, or change Medicare prescription drug plans. Changes generally take effect January 1.

“Choosing Medicare coverage deserves more attention than a television commercial or a sales brochure can provide,” said Stephen Kuehler, CEO. “We encourage residents to consider Original Medicare and understand how their choice could affect access to the hospital, medical providers and services they depend on.”

Original Medicare, also called Traditional Medicare, is the federally administered program that includes Part A hospital insurance and Part B medical insurance. It allows patients to receive covered care from any hospital or medical provider that accepts Medicare, anywhere in the United States.

Medicare Advantage is an alternative offered by private insurance companies approved by Medicare. These plans must cover medically necessary services covered by Original Medicare, but access to those services may involve provider networks, specialist referrals and prior authorization requirements.

Understanding that distinction is especially important in rural communities, where the number of nearby providers may be limited and specialty appointments may already require travel.

“For our community, access to care is a practical concern,” Kuehler said. “People want to know whether they can continue seeing their local medical provider, use their local hospital and receive follow-up care without unnecessary complications. Those questions belong at the beginning of the enrollment decision.”

Before selecting a Medicare Advantage plan, residents should confirm that Knox County Hospital District, their clinic and any specialists they use participate in the specific plan being considered.



Participation in one plan offered by an insurance company does not necessarily mean participation in all of that company's plans.

Patients should also ask about coverage outside the plan's network, including whether nonemergency services would cost more or might not be covered. A plan's service area and provider directory deserve careful review, particularly for people who travel or spend part of the year away from home.

Original Medicare generally does not require referrals to see specialists and, in most cases, does not require prior authorization for covered services. Medicare Advantage plans may require one or both, depending on the plan and the care involved.

"An extra benefit may be useful, but it should be weighed alongside the services someone relies on throughout the year," Kuehler said. "Hospital care, specialist appointments, therapy and prescription medications can have a much greater effect on a family's health and budget."

Costs also require a complete comparison. Original Medicare has deductibles and coinsurance and does not have an annual out-of-pocket limit unless a person has supplemental coverage or other insurance. Medicare Supplement Insurance, known as Medigap, can help with certain costs, but eligibility and enrollment protections vary.

Medicare Advantage plans have annual limits on out-of-pocket spending for covered Medicare services, although premiums, copayments, network rules and other costs differ by plan. A plan advertised with a \$0 premium does not mean all care is free, and beneficiaries generally must continue paying their Part B premium.

Prescription coverage is another consideration. People with Original Medicare can enroll in a separate Part D drug plan, while most Medicare Advantage plans include drug coverage. Residents should check their medications, preferred pharmacy and expected prescription costs.

Those already enrolled in Original Medicare do not need to enroll in Parts A and B again each fall to keep that coverage. However, reviewing separate prescription coverage and any supplemental insurance remains important.

Family members and caregivers can help by gathering a list of medications, medical providers and anticipated healthcare needs before comparing options. Written plan information can help clarify details that may be overlooked in advertising.



“Our goal is for people to make an informed decision before they need to use their coverage,” Kuehler said. “Take the time to ask questions, understand the costs and protect your access to the care that matters to you.”

Explore your options at [Medicare.gov](https://www.Medicare.gov) or call Kelley Scott, LBSW at Knox County Hospital at 940.657.3535.

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.

###