

Business Name: BeeHive Homes of Collierville

Address: 1368 Wolf River Blvd, Collierville, TN 38017

Phone: (901) 286-3455

BeeHive Homes of Collierville

At BeeHive Homes of Collierville, Tennessee, we offer the finest assisted living and memory care experience available in a cozy, comfortable homelike 21 bedroom setting. Each of our residents has their own spacious room with an ADA approved bathroom and shower. We prepare and serve delicious home-cooked meals three times a day every day. We maintain a small, friendly elderly care community. We provide regular activities that our residents find fun and contribute to their health and well-being. Our staff is attentive and caring and provides assistance with daily activities to our senior living residents in a loving and respectful manner. We invite you to tour and experience our assisted living home and feel the difference.

[View on Google Maps](#)

1368 Wolf River Blvd, Collierville, TN 38017

Business Hours

- Monday thru Sunday: Open 24 hours

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Families seldom plan for memory care in a neat arc. Needs shift, signs flare, and budgets stress in manner ins which feel both immediate and open ended. I have actually sat at many kitchen area tables doing the very same math with various households, trying to square security, dignity, and dollars. The bright side is that expenses are easy to understand, advantages are accessible with some foundation, and there are ways to align care quality with a reasonable budget.



What drives the cost of memory care

Memory care is specialized senior care developed for people living with Alzheimer's illness and other kinds of dementia. It costs more than basic assisted living, mainly because of staffing ratios, security features, training requirements, and structured programs. Nationally, a personal memory care apartment or condo often runs between 6,000 and 8,500 dollars each month, with some markets as low as 4,500 and others above 12,000. The very same neighborhood might have really different rates for comparable units since rates is connected to the level of care.

Expect two parts to the expense. Initially, a base lease that covers the house, meals, activities, and basic assistance. Second, tiered care fees that show just how much hands-on help is required. Facilities generally examine levels on move-in and once again as capabilities change. Each dive can add 500 to 2,500 dollars month-to-month. Medication management can be a different charge, often 300 to 800 dollars depending upon the intricacy and number of administrations. Care requires tend to increase with time, so a budget plan that works in January might require revision by summer.

Regional wages affect the cost. Neighborhoods in states with greater minimum earnings or unionized staff usually charge more. Building style also matters. More recent store settings with small home designs feel pleasant and calm, however those additional include a premium. By contrast, bigger communities can spread expenses and might provide more flexible pricing or promotions.

What you are in fact paying for

It helps to look beyond the monthly figure and break down the value. Well run memory care provides three things that are hard to reproduce in the house as dementia advances.

- Predictable safety. Secured boundaries, delayed egress, and personnel trained to avoid exit seeking lower threat of roaming and injury. The ideal environment also decreases medication use by minimizing triggers for agitation.
- Care connection. A good group recognizes subtle modifications in behavior, hydration, or gait, then changes routines. Early adjustments mean less crises and unexpected healthcare facility stays, which helps both health and budget.
- Meaningful days. Structured activity is not just home entertainment. Familiar songs, handwork, and short strolls can protect sleep and appetite, which in turn supports overall health. A steady day is cheaper than a cycle of ER visits and overnight caregivers.

When a family compares the expense of memory care to at home assistance, the math must consist of indirect costs. That suggests sleep for a partner, missed work days for adult kids, and the ripple effect of caregiver burnout. The most inexpensive intend on paper can be the costliest if it breaks a caregiver's health.

A fast vignette from practice

A retired instructor with moderate Alzheimer's disease lived at home with her hubby, who was losing weight and oversleeping 2 hour stretches. They had a pension, Social Security, and modest savings. They tried weekday home take care of 8 hours a day, which ran about 7,200 dollars monthly in their city. Nights and weekends still fell to him. After a hospitalization for dehydration, they moved to a memory care neighborhood with a base rent of 6,800, plus a midlevel care cost of 1,100 and 450 for medications. Their regular monthly cost was 8,350, which initially glimpse appeared higher. Three things altered the equation. He slept through the night, she stopped bouncing in and out of the healthcare facility, and he returned to part-time work he enjoyed. They likewise received a veterans benefit as a making it through spouse, which offset 1,400 dollars monthly. With great tuning and benefits, the memory care strategy ended up being both safer and more sustainable.

Map your budget before you tour

You will make much better options with a composed baseline. Collect monthly income sources and repaired expenditures, then layer potential care costs on top. If you are assisting a parent, file who pays what, since uncertain functions trigger friction later on. I often counsel families to prepare for a 24 to 36 month runway for personal pay if Medicaid is part of the long video game. Waitlists for Medicaid-willing memory care systems exist, and some neighborhoods need a minimum personal pay duration before converting to Medicaid.

Keep in mind that rates normally increase 4 to 8 percent each year. If a community will cap increases for a time, or lock the base rate at move-in, that defense has genuine value.

Five numbers to gather before touring

- Monthly income from Social Security, pension, annuities, and dividends
- Liquid cost savings offered without penalties in the next 24 months
- Long-term care insurance coverage everyday or monthly benefit, removal period, and life time cap
- Current in-home care spending, consisting of nights and weekends if needed
- Outstanding debts, plus property taxes and insurance coverage if a home will be kept

Hidden costs and agreement fine print

Community charges prevail, normally 2,000 to 7,500 dollars, and sometimes flexible or prorated. Ask whether that charge is refundable on a brief stay. Some locations charge a move-in or assessment charge of a couple of hundred dollars. There may likewise be charges for incontinence materials, escorts to meals, or diabetic care. You need to know if the estimated rate consists of throughout the day guidance, or if care beyond a set number of minutes per day sets off à la carte billing.

Medication management is simple to gloss over during a tour, however pharmacy related costs add up. Will the community use your preferred pharmacy, or are you needed to use theirs with a packaging charge. Who spends for med modifications mid cycle. If insulin is involved, ask whether they charge per injection or per day.

Contracts can include a 30 day notice provision, which impacts refunds if a health center stay causes a fast transition to experienced nursing or hospice. Some neighborhoods charge a 2nd person cost if a spouse resides in the very same unit. If a couple plans to remain together as one partner's dementia advances, design both scenarios on paper.

What Medicare will and will not cover

Medicare pays for medical care, not space and board in memory care. It covers physician visits, laboratories, resilient medical devices, and hospice. It can pay for as much as 100 days in a skilled nursing facility after a certifying hospital stay, although couple of people utilize the complete benefit. After that, it does not cover residential memory care.

Medicare Benefit strategies in some cases include extra benefits like short-term individual care, transport, or caregiver support services. These can minimize the load at home or throughout shifts, however they do not change the monthly cost of dementia care in a home. If someone is eligible for hospice, the hospice team can bring nursing, aides, and materials into the memory care setting, which can decrease some add-on charges.

How Medicaid suits memory care

Medicaid is jointly funded by state and federal governments, and rules vary by state. Some states fund memory care in assisted living through Home and Community Based Provider waivers. Others do not, or they cap the variety of slots. States that do cover it usually pay less than private rates, so neighborhoods restrict the number of Medicaid beds or require a duration of private pay initially. This is why the 24 to 36 month runway matters.

Financial eligibility is rigorous and consists of a 5 year look-back for asset transfers. Gifting cash or selling properties below market value throughout that window can cause a charge period. Work with an elder law lawyer for invest down methods that comply with guidelines, such as allowable home modifications, dental work, hearing help, or prepaid funeral plans. An appropriately drafted caregiver arrangement can permit a parent to pay an adult child for care in the house before a relocation, which can be part of a compliant invest down.

If the person with dementia is wed, protections exist for the partner in your home. States allow a Community Spouse Resource Allowance and a Minimum Regular Monthly Upkeep Requirements Allowance so the well partner is not impoverished. The quantities adjust every year and vary by state, so verify with your regional aging office or an elder law professional.

Veterans advantages that can bridge the gap

Veterans and making it through partners might get approved for a pension supplement called Aid and Participation. It is not limited to service-connected impairments. To qualify, the veteran must have served throughout a wartime duration, meet possession and income tests, and need assistance with everyday activities or need a protective environment due to dementia.

Monthly advantage amounts alter every year. As a rough guide, a single veteran may get around 2,000 to 2,300 dollars, a married veteran around 2,300 to 2,700, and a making it through partner around 1,200 to 1,500. These are ballpark figures. The Department of Veterans Affairs sets official Optimum Yearly Pension Rates each year.

Two useful notes: first, medical costs decrease countable earnings for eligibility, and memory care costs typically qualify. Second, the pension can take months to approve, however retroactive payments are common back to the application date. Families often utilize savings for a couple of months, then fold in the retroactive deposit to restore reserves.

Long-term care insurance coverage, deciphered in plain English

These policies help most when you understand the levers. Triggers activate benefits when the insured needs help with a minimum of two activities of daily living or has a cognitive impairment that requires substantial guidance. Memory care residents generally fulfill the cognitive criterion once a doctor documents it.

Elimination periods are waiting periods, frequently 30 to 90 days, before benefits pay. Some policies count calendar days, others only days when you get paid care. If it is the latter, a short term strategy that includes respite care nights or day-to-day adult day participation can move you through the removal duration faster.

Daily or month-to-month caps matter. A 200 dollar daily cap is 6,000 dollars per month on an one month calendar, but some months have 31 days. Policies with regular monthly caps manage variable month lengths better. Inflation riders assist older policies equal today's rates. See life time maximums. If a policy has a 200,000 dollar lifetime pool and you utilize 8,000 dollars monthly, the pool runs for about two years and one month.



Finally, reimbursement policies require evidence of paid care and issue checks after the truth. Indemnity policies pay the full everyday benefit once you certify, despite the billing. That difference figures out cash flow in the very first months after a move.

Tax methods that are frequently overlooked

If a doctor licenses that a person with dementia needs significant guidance and a plan of care exists, many or all of memory care costs can qualify as medical expenditures. If you make a list of deductions, medical costs above 7.5 percent of adjusted gross income can be deductible. Households typically miss this due to the fact that they presume space and board do not count. In memory care, they often do, supplied the main reason for residence is medical.

Adult kids who supply more than half of a parent's assistance might be able to declare the parent as a reliant, which can open other tax considerations. The Kid and Dependent Care Credit can apply to adult day services that permit a caretaker to work, though residential room and board is not eligible. Tax rules shift, so a brief speak with a certified public accountant pays for itself.

Home equity, life insurance, and other assets

A settled home is a significant reservoir of care dollars. Offering is uncomplicated, but not constantly the best call if a spouse remains there. A reverse mortgage offers month-to-month income or a credit line protected by the home. It can cover in-home dementia care or bridge a number of years of memory care without forcing an instant sale. Fees and interest are real costs, so model the numbers, including what happens when the debtor moves completely to a facility.

Some life insurance policies can be converted to pay for senior care. Accelerated death benefits or life settlements turn a policy's worth into regular monthly payments. These are specialized and frequently pricey transactions. Always compare the net proceeds to simpler choices, and take care about tax effects and Medicaid implications.

Annuities can turn a swelling amount into a foreseeable earnings stream. If using annuities as part of Medicaid planning, structure matters. Work with an expert who comprehends your state's rules so you do not accidentally develop a countable asset.

Respite care and adult day programs as budget plan tools

Respite care is a short stay in a memory care neighborhood, usually from a week to a month. It is practical when a caretaker requires surgical treatment, a break, or to check drive a neighborhood. The day-to-day rate is typically higher than the pro rata month-to-month rate, but it consists of the very same services. A well timed respite can avoid a crisis that would otherwise cause a more expensive, rushed placement.

Adult day programs work on weekdays, with some offering extended hours or weekends. Daily rates typically vary from 70 to 150 dollars, with transport in some areas. For early to mid phase dementia, adult day coupled with targeted home care can postpone a move by months or more. It keeps the person engaged and offers caregivers reliable time for work or rest. When a move becomes necessary, the shift is calmer because the person is already utilized to structured days and brand-new faces.

Negotiating the right fit, not just the best price

Rates are more versatile than they seem. Communities run promos when tenancy dips, particularly in larger structures with several neighborhoods. Inquire about move-in specials, waived neighborhood [BeeHive Homes of Collierville memory care](#) costs, or base rate locks. Timing matters. End of the month can be better, and late fall sometimes brings incentives.



Here are settlement points that are worthy of airtime throughout tours

- Will you waive or prorate the neighborhood charge, and is it refundable within 30 days
- Can you cap yearly increases for the first two years
- If the care level changes within 60 days, will you hold the initial level or change gradually
- Can we utilize our drug store, and will you match their product packaging fee if you require bubble packs
- If we include hospice, which current care charges will decrease

A facility that avoids these questions or buries answers in the agreement is telling you something about future interactions.

Protect quality while watching the bottom line

There are methods to manage costs without damaging care. Smaller sized spaces lower lease, and lots of residents spend most of their time in common areas anyway. Shared suites can save 1,000 to 3,000 dollars monthly, however they work best for people who are friendly and not quickly distressed by another person's rhythms. If wandering or nighttime agitation is prominent, a personal system may prevent disputes that lead to add-on staffing fees.

Transportation charges accumulate when families depend on the community for each medical visit. Telehealth for routine appointments and bundling specialty visits on one day can cut expenses. On the medical side, periodic medication reviews prevent polypharmacy, which assists both health and the regular monthly med management fee.

When home remains the best value

Home can be best for longer than people anticipate when 3 conditions hold. Initially, the physical environment is safe, with fall hazards lowered, doors protected, and regimens supported. Second, caretakers have reputable relief through respite care, adult day, or worked with assistance. Third, agitation, incontinence, or night wandering are workable without continuous conflict. The spending plan must consist of replacement labor for family care if that member of the family gets ill or requires to travel. I press households to price the real strategy, not the idealized one.

One care. When dementia advances to habits that put others at danger, such as duplicated range use, aggressive outbursts, or roaming toward traffic, the tipping point gets here quickly. A rushed move tends to be more pricey and less informed. Visiting early, even if you do not sign, makes later on choices calmer.

Build a basic capital plan

Turn the preparation into a one page tool that you can upgrade every 6 months. List regular monthly earnings on one side and fixed care expenditures on the other. Keep in mind the date when a personal policy begins paying, the end of any elimination period, and the status of benefit applications like Aid and Participation. Create a column for anticipated yearly increases. If cost savings are being drawn down, show the move path month by month. This makes family conversations concrete and goal oriented.

If numerous siblings are included, settle on a single point individual for costs and advantages. Too many hands lead to missed due dates and duplicate payments. The exact same chooses paperwork. Keep the power of attorney, advance regulation, insurance coverage, and the current care strategy in one shared folder, paper and digital.

Red flags that can cost you later

A bargain rate is not a bargain if turnover is constant, agency staffing is the norm, or nurses are thin on the ground. I focus on the energy in the dining room, not just the menu. Are individuals in fact eating, and does personnel remain to help. Look for constant faces over a number of visits at various times of day. If sales pledges do not match what you see at 7 p.m. On a Sunday, be careful.

Take a minute with the activity calendar. A complete page implies little if the space is quiet. You want to see residents engaged in ways that match various phases of dementia care. That might indicate a little group folding laundry, two individuals singing with an employee, and someone else strolling a circuit with mild cueing. Engagement reduces the requirement for pricey one to one staffing.

The function of respite care in evaluating a community

If you are torn between two locations, organize a brief respite remain in your top choice. Pay attention to how the team discovers your person. Do they ask about routines, preferred foods, and triggers. How do they communicate with you during the stay. If you entrust to clear notes and a settled sensation, that is worth as much as a small cost distinction. If concerns go unanswered, reconsider.

Bringing it all together

Affording high quality memory care is part arithmetic, part timing, and part advocacy. The arithmetic side benefits from early, truthful math and from comprehending how advantages like Medicaid waivers, veterans pensions, and long-term care insurance actually work. The timing side favors families who tour before a crisis and who use respite care or adult day programs to bridge changes. The advocacy side reveals up in concerns you ask during tours and in the contracts you negotiate.

When you do the work up front, you buy options later. Families who know their numbers, line up benefits, and push for rate protections tend to keep care stable even as requirements grow. That steadiness is what matters. Memory care succeeded is not just a place. It is an orderly method to deal with dementia that keeps an individual safe, recognized, and engaged, while keeping the household's finances undamaged for the long haul.

BeeHive Homes of Collierville provides assisted living care

BeeHive Homes of Collierville provides memory care services

BeeHive Homes of Collierville provides respite care services

BeeHive Homes of Collierville supports assistance with bathing and grooming

BeeHive Homes of Collierville offers private bedrooms with private bathrooms

BeeHive Homes of Collierville provides medication monitoring and documentation

BeeHive Homes of Collierville serves dietitian-approved meals

BeeHive Homes of Collierville provides housekeeping services

BeeHive Homes of Collierville provides laundry services

BeeHive Homes of Collierville offers community dining and social engagement activities

BeeHive Homes of Collierville features life enrichment activities

BeeHive Homes of Collierville supports personal care assistance during meals and daily routines

BeeHive Homes of Collierville promotes frequent physical and mental exercise opportunities

BeeHive Homes of Collierville provides a home-like residential environment

BeeHive Homes of Collierville creates customized care plans as residents' needs change

BeeHive Homes of Collierville assesses individual resident care needs

BeeHive Homes of Collierville accepts private pay and long-term care insurance

BeeHive Homes of Collierville assists qualified veterans with Aid and Attendance benefits

BeeHive Homes of Collierville encourages meaningful resident-to-staff relationships

BeeHive Homes of Collierville delivers compassionate, attentive senior care focused on dignity and comfort

BeeHive Homes of Collierville has a phone number of (901) 286-3455

BeeHive Homes of Collierville has an address of 1368 Wolf River Blvd, Collierville, TN 38017

BeeHive Homes of Collierville has a website <https://beehivehomes.com/locations/collierville/>

BeeHive Homes of Collierville has Google Maps listing <https://maps.app.goo.gl/F1PuQmWyGT6PTGmY6>

BeeHive Homes of Collierville has Facebook page <https://www.facebook.com/BeeHiveCollierville>

BeeHive Homes of Collierville has Instagram page <https://www.instagram.com/beehivecollierville/>

BeeHive Homes of Collierville won Top Assisted Living Homes 2025

BeeHive Homes of Collierville earned Best Customer Service Award 2024

BeeHive Homes of Collierville placed 1st for New Mexico Senior Living Communities 2025

People Also Ask about BeeHive Homes of Collierville

What is BeeHive Homes of Collierville Living monthly room rate?

The rate depends on the level of care that is needed. We do an initial evaluation for each potential resident to determine the level of care needed. The monthly rate is based on this evaluation. There are no hidden costs or fees

Can residents stay in BeeHive Homes of Collierville until the end of their life?

Usually yes. There are exceptions, such as when there are safety issues with the resident, or they need 24 hour skilled nursing services

Do we have a nurse on staff?

Yes, we have a part-time nurse with an on-call nurse if needed for after hours. We also have a Med Tech on staff that can administer medications

What are BeeHive Homes of Collierville's visiting hours?

Visiting hours are adjusted to accommodate the families and the resident's needs... just not too early or too late

Do we have couple's rooms available?

Yes, each home has rooms designed to accommodate couples. Please ask about the availability of these rooms

Where is BeeHive Homes of Collierville located?

BeeHive Homes of Collierville is conveniently located at 1368 Wolf River Blvd, Collierville, TN 38017. You can easily find directions on [Google Maps](#) or call at [\(901\) 286-3455](#) Monday through Sunday Open 24 hours

How can I contact BeeHive Homes of Collierville?

You can contact BeeHive Homes of Collierville by phone at: [\(901\) 286-3455](tel:(901)286-3455), visit their website at <https://beehivehomes.com/locations/collierville/> or connect on social media via [Facebook](#) or [Instagram](#)

Take a drive to [Firebirds Wood Fired Grill](#). Firebirds Wood Fired Grill offers a comfortable dining experience ideal for Assisted Living, Memory Care, Senior Care, Elderly Care, and Respite Care outings.