

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 do not comparison purchase senior care in a vacuum. They are typically doing it after a scare, or at the end of a long stretch of overdue caregiving. The seriousness is genuine, but the pricing is opaque. Memory care and assisted living appearance comparable from the outside, yet they are constructed and staffed differently, which difference appears on the bill. The right setting can support a person who is declining from dementia. The incorrect fit can drain cost savings without solving the issue that activated the move.

I have explored numerous communities with households, worked out rates, combed through service strategies, and saw seniors do much better or worse depending upon the match. Costs differ commonly by market and company, however the patterns are consistent enough to build a working design. The objective here is not to crown a winner. It is to help you understand what you are paying for, when the premium for memory care makes sense, and how to expect the true month-to-month cost once all line products are added.

What you are comparing, really

Assisted living and memory care frequently share a roofing, a cooking area, and an activities director. Below, they run two various operating models.

Assisted living is created for older grownups who require help with activities of daily living like bathing, dressing, and medication reminders, but who can follow instructions, make standard choices, and remain fairly safe with periodic supervision. Care is scheduled and foreseeable. Cueing works.

Memory care is developed around cognitive disability, specifically Alzheimer's and related dementias. It includes protected boundaries, customized environments and dining, more frequent staff contact, trained dementia care methods, and programs that minimizes distress behaviors. Care is anticipatory and frequent. Cueing might not work, so staff step in earlier and more often.

That shift from periodic aid to constant guidance drives staffing expenses, and staffing is the biggest expenditure in any care setting. The rate space streams from there.

Typical month-to-month cost, with sincere ranges

National datasets put assisted living month-to-month averages in the \$4,000 to \$6,000 variety, with huge city markets and seaside states pushing higher. In the same markets, memory care normally runs 20 to 40 percent more, frequently landing in between \$5,000 and \$9,000 monthly. In high-cost cities, I routinely see assisted living beginning around \$6,000 to \$7,500, and memory care from \$7,500 to \$11,000. In smaller Midwestern towns, it is not unusual to discover assisted living around \$3,800 to \$4,800 and memory care from \$5,000 to \$6,500.

These are base rates. The last costs is built on top of them, and this is where households get amazed. Most neighborhoods price quote a beginning home price that includes rent, meals, basic house cleaning, and utilities. Then they layer on care charges that depend on an evaluation. Memory care frequently bundles more into its base to streamline billing, but not always.

What produces the gap

Memory care expenses more because it provides a various level of control and supervision. Here is what generally drives the premium, beyond marketing language.

- Staffing intensity. In assisted living, daytime staffing often looks like one caretaker for 12 to 18 citizens, with med techs and nurses floating. Overnight ratios extend even more. In memory care, daytime ratios of one caregiver for 6 to 10 homeowners prevail, sometimes tighter in smaller wings, and nights may be 1 to 10 or 1 to 12. Those extra hands show up in payroll.
- Training and program design. Dementia care staff receive specialized training on de escalation, redirection, and non pharmacologic techniques. Programs schedule short, structured activities that match attention periods, with purposeful repeating. That preparation time becomes part of the operating cost.
- Environmental controls. Protected doors, wander management systems, enclosed courtyards, visual cues, decreased glare lighting, and streamlined layout minimize threat and agitation. Building and maintaining those functions is capital intensive.
- Dining and medication methods. Modified menus, high calorie finger foods, hydration rounds, smaller dining rooms, and co dining with staff minimize weight loss and choking threat. More regular med passes and crushed or liquid kinds increase staff time.
- Behavior support. When exit seeking, sleep inversion, or sundowning exists, care strategies add check ins and interventions that an assisted living wing can not reliably staff.

Providers do not all execute these components with the same rigor. A real memory care home feels various the moment you enter. If it does not, you may be paying a premium for a label instead of a model.

How rates designs work under the hood

Communities earn money and cover staffing in numerous methods. Understanding their model helps you forecast the bill.

A la carte assisted living rates begins with a base rent and adds care levels, typically tied to a point system. Each task, such as aid with bathing or insulin administration, brings points. The total maps to a level that includes a month-to-month cost. Medication management is typically a different charge, with cost jumps based upon the number of meds or passes daily. Incontinence care fees can be flat or per episode, and products may be billed separately. You may likewise see charges for escorting to meals, transfer assistance, or extra housekeeping if clutter and spills are frequent.

All inclusive memory care, typical but not universal, wraps most everyday care into a single rate. Even then, some services sit outside the bundle, like injections, complex wound care, one to one guidance for high fall threat, or transport to frequent consultations. When memory care utilizes levels, the increments in between tiers are typically steeper than in assisted living because staffing modifications drive the delta.

Across both settings, anticipate a one time community charge at move in, typically \$2,000 to \$6,000. Some communities discount rate or waive this for fast move ins or during slow seasons. Second person costs for couples can add \$800 to \$1,500 regular monthly in assisted living and are less common in memory care, where apartment or condos are typically personal studios. Annual rent increases of 3 to 8 percent are common. Request for the historic average at that residential or commercial property, not the business wide talking point.

The neglected costs at home, and why they matter to the comparison

Families frequently measure assisted living versus lease and groceries, then decide to wait. A much better contrast consists of the worth of unsettled caregiving, the money cost of hired aid, and the threats of a home that is no longer safe.

Non medical home care averages \$28 to \$40 per hour in numerous markets, higher in big cities. Even 12 hours a day of coverage runs \$10,000 to \$14,000 per month, and 24 hr coverage, if you can staff it, can go beyond \$20,000. Add medication setup by a nurse, incontinence supplies, fall sensing units, and a couple of thousand dollars in home adjustments for grab bars, lighting, and door alarms. For couples, care at home can make psychological and financial sense longer, however the math shifts quick when dementia progresses.

I have viewed spouses attempt to anchor overnight care on their own, only to drop off to sleep throughout the critical 1 a.m. To 4 a.m. Window when a partner with sundowning wanders or rummages. A single injury or hospitalization removes the savings from delaying a move.

When memory care deserves the premium

A resident with early phase cognitive problems might grow in assisted living if the group can hint efficiently, the environment is calm, and the individual participates in programs. The month-to-month savings can be meaningful. However specific patterns inform me memory care will be the better buy even if it looks costlier on paper.

Exit looking for. If someone attempts doors, follows personnel into service passages, or repairs on leaving, a safe memory care environment spares you the expense of personal sitters layered on top of assisted living.

Unpredictable nights. Sleep inversion disrupts whole buildings. Memory care personnel anticipate it, schedule for it, and have safe spaces for pacing.

Disinhibited or aggressive behaviors. A memory care home with trained personnel reads the habits as interaction and reacts without shame or punishment. Assisted living typically intensifies to 911 or discharge.

Meal refusal or weight loss. Memory care dining-room are smaller sized and calmer, with staff who will sit and eat with residents to cue bites, offer finger foods, and attempt again an hour later on. Those touches stabilize weights and minimize medical facility trips for dehydration.

Repetitive calls and alarms. In assisted living, a resident who presses the call pendant every 10 minutes will either be labeled challenging or will need a personal caretaker. Memory care develops the day to get rid of the trigger.

I keep in mind a retired engineer who moved into assisted living after a fall. He had moderate amnesia and did fine for 6 months. Then he began taking tools off the upkeep cart and "repairing" the door hardware. The neighborhood responded with pointers and cautions, then a notice that he would need to employ a 1 to 1 companion. We moved him to the memory care wing next door. The group gave him a safe workbench with disassembled radios and assigned him as an "consultant." His costs increased by \$1,200 a month, but we got rid of \$8,000 in caretaker costs and the continuous friction disappeared.

What you get for your money in a strong memory care program

Look for nuts and bolts that do not show up in glossy brochures. Ask to stroll the unit at shift change and at supper, not just at 10 a.m. When everything is quiet. You must see staff utilizing names, crouching to eye level, and using two clear options rather of open ended questions. The schedule must duplicate breakfast, activity, rest, and outside time in a predictable rhythm, not random crafts. Back of home storage should be locked or monitored so citizens do not rummage in chemicals or linens. The nurse must bring a basic, existing lineup of recognized behaviors and comfort routines.

Good memory care reduces hospitalizations by discovering urinary system infections early, maintaining hydration, and preventing falls frequent check ins and proper shoes. It also secures the self-respect of citizens who can no longer self supporter. That is the value proposition beyond square video footage and chandeliers.

How community type affects price

Standalone memory care neighborhoods run only dementia care, frequently in smaller sized, function built structures. They tend to have tighter staffing ratios and more constant shows. Prices is usually all inclusive or has fewer levels. They can be leaner on amenities like swimming pool tables and hair salons since their value beings in care, not in resort features. Rates are often mid to high for the marketplace, but worth per dollar is strong when dementia is moderate to advanced.

Memory care neighborhoods within a bigger assisted living let couples remain on one campus, which can preserve regimens and lower household travel time. The staffing model can be excellent, but often the memory care wing acquires practices from the assisted living side that are not dementia specific. Prices follow the brand and structure, in some cases 5 to 10 percent above standalone competitors for comparable care.

Small residential options, frequently licensed as board and care homes, serve 6 to 12 homeowners in a home. Staffing is intimate and versatile, meals are home prepared, and families like the individual feel. Expenses are often lower than large buildings, especially in suburban areas, but the variety is broad. You may trade big activity calendars for quieter days. For late phase disease or when mobility is limited, these homes can be both cost effective and humane.

Skilled nursing with a memory care unit is a different tier. It runs more pricey than assisted living or memory care due to the fact that it consists of certified nursing all the time and deals with medical complexity like feeding

tubes and advanced wound care. If an individual requires that level, the contrast shifts from assisted living to nursing care, and different payers come into play.

Who pays, and how to extend dollars lawfully and safely

Most families spend for assisted living or memory care privately. Medicare does not cover room and board in these settings. It may fund health services like treatment episodes or hospice, however not the day-to-day rent and care fees.

Long term care insurance coverage can be a powerful lever. Policies typically pay a daily or monthly benefit once the insured needs assist with 2 or more activities of daily living or has a severe cognitive disability. Benefits typically run from \$100 to \$250 per day, often more, and can balance out a large share of the monthly costs. You will require a strategy of care signed by a licensed clinician and cooperative documents from the community to start claims and maintain them.

Veterans Aid and Attendance adds a month-to-month stipend to qualifying veterans or surviving spouses who need assist with activities of daily living. Advantage amounts vary by status and alter yearly, however they can include over a thousand dollars each month and often more than two thousand for a veteran with a reliant spouse. Eligibility depends upon service history, possessions, income relative to expenditures, and medical need. Work with an accredited VA claims agent, not a provider salesperson, to prevent missteps.

Medicaid waivers in numerous states subsidize assisted living or memory care for those with minimal properties. The coverage and rates differ by state, and memory care might receive the same rate as assisted living although expenses are greater. Slots are limited, waitlists prevail, and some neighborhoods accept only a small percentage of Medicaid residents. Families often plan a spend down, paying independently up until properties reach the limit, then obtaining Medicaid. It is important to track all expenses and seek counsel before making presents or transfers, given look back rules.

Tax preparation matters too. If a resident is chronically ill and getting services under a strategy of care, a considerable part, in some cases all, of assisted living or memory care costs can qualify as a deductible medical cost, based on IRS thresholds. Households miss this and leave cash on the table. An accounting professional who knows senior care can equate invoices into deductible amounts.

Negotiating and timing without playing games

Communities are businesses with tenancy targets. Prices are firm in hot markets, but there is typically space to adjust fees at the margins. The most uncomplicated wins I see are credits versus the community charge, reduced charges for the very first care level for 60 to 90 days, or holding the current year's rate increase for a new resident. Discounts tend to be bigger in summertime and around major vacations when relocation ins sluggish, and smaller in spring.

Do not negotiate so difficult that you sour the relationship you will depend upon. A fair cost and a responsive director of nursing beats an additional \$300 off the base lease. Bring a tidy evaluation from a recent medical visit, have actually medications pre packaged by a partnering pharmacy if possible, and be transparent about habits. Surprises after move in result in mid month level increases and damaged trust.

A number of real world comparisons

Case one, assisted living makes good sense. A retired teacher with mild Alzheimer's lives alone. She requires aid bathing two times a week, takes seven medications twice daily, and forgets meals unless cued. She enjoys group

activities and follows directions. Assisted living quotes \$4,800 base lease for a one bedroom, \$450 for medication management, and \$350 for care level one. Incontinence is uncommon. Her all in is about \$5,600 month-to-month. Memory care next door prices estimate \$6,900 all inclusive. She visits both, prefers the bigger activity calendar in assisted living, and the team feels confident they can cue meals. She relocates to assisted living, succeeds for 18 months, and invests the cost savings on a part time personal companion throughout the late afternoon, 3 days a week.

Case 2, memory care prevents crisis costs. A previous professional in his late seventies has vascular dementia with fluctuating insight. He roams during the night and has triggered the neighborhood emergency alarm two times while trying to find a cigarette. Assisted living quotes \$5,900 base, \$600 for medication management, and level three care at \$1,200 due to transfers and regular cueing. The director silently discusses that he will need a personal over night sitter at \$28 per hour up until he "stabilizes." That is another \$8,400 monthly. Memory care a few miles away offers a private studio at \$7,800 all inclusive, with secure patio areas for monitored smoking and structured late night activities. He moves to memory care, the alarms stop, and the all in expense is thousands less than assisted living plus sitters.



Edge cases and judgment calls

Couples make complex the mathematics. If one partner is cognitively well and the other requires memory care, cohabiting in assisted living can preserve connection and reduce total lease, however just if the caregiving partner is not pulled into 24 hr responsibility once again. I have seen partners insist on keeping their partner with dementia in assisted living for love, then stress out and require hospitalization. Splitting homes across assisted living and memory care on the exact same campus can cost more, but [BeeHive Homes of Collierville memory care collierville tn](#) it can save the well partner's health.

Early beginning dementia brings greater activity levels and more powerful bodies, which can worry both settings. The right memory care home will transport energy into safe projects and repetitive tasks. An assisted living wing is less most likely to prosper without continuous companions.

Cultural fit matters. In some households, a little residential memory care home with home design cooking and personnel who speak the resident's first language produces better outcomes at a lower rate than a streamlined structure with a theater. Outcomes affect costs. Fewer hospitalizations and calmer days minimize include on charges and private caretaker hours.

What to ask throughout tours, with an eye on cost

Use a short script whenever so you can compare answers later. Keep it conversational. The goal is to discover how the building runs, not to capture anybody out.

- How do you determine care levels, and when are they reassessed? Can I see a blank assessment tool?



- What is included in the base rate, and what, particularly, is not? Please reveal me the exemptions in writing.
- What are your existing medication management charges and thresholds? How do you deal with crushed medications and more than two passes a day?
- What is your historical yearly increase at this residential or commercial property for the previous 3 years?



- If my parent's requirements increase quickly, what occurs mid month? Do you prorate, or does the brand-new level begin the following month?

If a salesperson hurries these answers or glosses over care level mechanics, keep looking. You want a group that is comfortable talking about the unglamorous details, because that is what drives your bill.

Practical ways to make either option more affordable

Move in size and timing matter. Studios are frequently 10 to 20 percent less than one bed rooms, and most locals invest waking hours outside the apartment or condo. Corner systems and views are nice, however they do not alter care results. If a community is 80 percent occupied, ask about cost security if you can dedicate to a date within 30 days.

Right size services. If your parent eats gently and prefers breakfast in their room, a community with required restaurant style dining three times a day might not be an excellent fit. You will be spending for a service they will

not utilize. In memory care, aim for programs your parent will participate in. Spending for an abundant calendar they ignore is squandered money.

Align pharmacy setups. Communities that partner with a specific pharmacy often waive med pass additional charges for complex packaging. If you stick to an outdoors pharmacy, you may sustain handling fees or more frequent deliveries.

Check the billing code for incontinence. Some communities waive the incontinence care fee if the resident uses bring up only in the evening and manages changing individually. Little changes in plan language can save you \$100 to \$300 a month.

Keep the length of remain in mind. If you believe a healthcare facility transfer is most likely within months, a large community cost amortizes badly. A provider ready to lower or credit that cost represents genuine cost savings if the stay is short.

Final perspective

Comparing a memory care home to assisted living is not just a spreadsheet exercise. It is an effort to match an individual's pattern of requirements to a structure's pattern of staffing and guidance. The most inexpensive line item in some cases carries the greatest concealed expense, specifically when dementia brings exit looking for, disrupted nights, or behaviors that an assisted living wing can not support without layering private caregivers.

If you build a careful apples to apples budget, test how each setting handles your parent's specific issues, and look beyond chandeliers to personnel practice, you can invest in what changes results rather than on what pictures well. That is where real value lives, and it is the best way to secure both your parent's dignity and their savings.

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](#), visit their website at <https://beehivehomes.com/locations/collierville/> or connect on social media via [Facebook](#) or [Instagram](#)

[Town Square Park](#) offers a beautiful community gathering space where residents receiving Assisted Living, Memory Care, Senior Care, Elderly Care, and Respite Care can enjoy relaxing outdoor visits with family.