

Business Name: BeeHive Homes of Plainview

Address: 1435 Lometa Dr, Plainview, TX 79072

Phone: (806) 452-5883

BeeHive Homes of Plainview

Beehive Homes of Plainview assisted living care is ideal for those who value their independence but require help with some of the activities of daily living. Residents enjoy 24-hour support, private bedrooms with baths, medication monitoring, home-cooked meals, housekeeping and laundry services, social activities and outings, and daily physical and mental exercise opportunities. Beehive Homes memory care services accommodates the growing number of seniors affected by memory loss and dementia. Beehive Homes offers respite (short-term) care for your loved one should the need arise. Whether help is needed after a surgery or illness, for vacation coverage, or just a break from the routine, respite care provides you peace of mind for any length of stay.

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1435 Lometa Dr, Plainview, TX 79072

Business Hours

- Monday thru Sunday: 9:00am to 5:00pm

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Families seldom plan for memory care in a cool arc. Needs shift, symptoms flare, and budget plans pressure in ways that feel both immediate and open ended. I have actually sat at lots of kitchen area tables doing the same mathematics with different households, trying to square safety, self-respect, and dollars. The bright side is that costs are understandable, benefits are navigable with some foundation, and there are ways to line up care quality with a sensible budget.

What drives the price of memory care

Memory care is specialized senior care created for individuals living with Alzheimer's illness and other kinds of dementia. It costs more than standard assisted living, mostly since of staffing ratios, security features, training requirements, and structured programs. Nationally, a private memory care apartment or condo often runs between 6,000 and 8,500 dollars per month, with some markets as low as 4,500 and others above 12,000. The exact same community may have extremely different rates for comparable systems due to the fact that pricing is connected to the level of care.

Expect 2 parts to the bill. First, a base lease that covers the home, meals, activities, and standard assistance. Second, tiered care charges that reflect just how much hands-on assistance is required. Facilities typically examine levels on move-in and once again as abilities change. Each jump can add 500 to 2,500 dollars monthly. Medication management can be a different charge, frequently 300 to 800 dollars depending upon the complexity

and variety of administrations. Care requires tend to increase over time, so a budget plan that operates in January might need revision by summer.

Regional earnings affect the cost. Communities in states with higher minimum earnings or unionized personnel usually charge more. Building design likewise matters. Newer shop settings with little household designs feel pleasant and calm, however those bonus feature a premium. By contrast, bigger neighborhoods can spread out expenses and might provide more flexible prices or promotions.

What you are in fact paying for

It helps to look beyond the month-to-month figure and break down the value. Well run memory care provides 3 things that are difficult to duplicate in the house as dementia advances.

- Predictable safety. Guaranteed borders, delayed egress, and staff trained to prevent exit seeking minimize danger of wandering and injury. The best environment likewise decreases medication usage by reducing triggers for agitation.
- Care connection. A great team acknowledges subtle modifications in behavior, hydration, or gait, then changes regimens. Early modifications imply fewer crises and unintended health center stays, which helps both health and budget.
- Meaningful days. Structured activity is not simply entertainment. Familiar tunes, handwork, and short walks can protect sleep and appetite, which in turn supports overall health. A steady day is less expensive than a cycle of ER visits and over night caregivers.

When a household compares the expense of memory care to in-home support, the math needs to include indirect costs. That implies sleep for a spouse, missed work days for adult kids, and the ripple effect of caretaker burnout. The most inexpensive intend on paper can be the costliest if it breaks a caretaker's health.

A fast vignette from practice

A retired instructor with moderate Alzheimer's illness lived at home with her partner, who was losing weight and oversleeping 2 hour stretches. They had a pension, Social Security, and modest savings. They attempted weekday home care for 8 hours a day, which ran about 7,200 dollars each month in their city. Nights and weekends still fell to him. After a hospitalization for dehydration, they moved to a memory care community with a base rent of 6,800, plus a midlevel care cost of 1,100 and 450 for medications. Their monthly cost was 8,350, which initially glance appeared greater. 3 things altered the equation. He slept through the night, she stopped bouncing in and out of the health center, and he went back to part-time work he enjoyed. They likewise got approved for a veterans benefit as an enduring partner, which balance out 1,400 dollars monthly. With fine tuning and benefits, the memory care strategy became both safer and more sustainable.

Map your spending plan before you tour

You will make better choices with a composed baseline. Gather month-to-month earnings sources and fixed expenditures, then layer possible care expenses on top. If you are assisting a parent, document who pays what, due to the fact that unclear functions cause friction later on. I typically counsel households 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 units exist, and some neighborhoods need a minimum private pay duration before converting to Medicaid.

Keep in mind that prices usually increase 4 to 8 percent each year. If a neighborhood will cap boosts for a time, or lock the base rate at move-in, that security has real value.

Five numbers to gather before touring

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

Hidden costs and agreement fine print

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

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

Contracts can consist of a thirty days notification provision, which impacts refunds if a hospital stay results in a quick transition to experienced nursing or hospice. Some neighborhoods charge a 2nd person cost if a spouse resides in the very same system. If a couple plans to remain together as one partner's dementia advances, model both situations on paper.

What Medicare will and will not cover

Medicare spends for healthcare, not room and board in memory care. It covers physician visits, labs, durable medical equipment, and hospice. It can pay for approximately 100 days in an experienced nursing facility after a qualifying health center stay, although few individuals use the complete benefit. After that, it does not cover residential memory care.

Medicare Benefit plans often consist of additional benefits like short-term personal care, transportation, or caretaker assistance services. These can decrease the load in the house or during transitions, but they do not change the regular monthly cost of dementia care in a residence. If somebody is qualified for hospice, the hospice team can bring nursing, aides, and products into the memory care setting, which can reduce some add-on charges.

How Medicaid fits into 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 top the number of slots. States that do cover it normally pay less than private rates, so communities restrict the variety of Medicaid beds or need a duration of personal pay initially. This is why the 24 to 36 month runway matters.

Financial eligibility is strict and consists of a five year look-back for possession transfers. Gifting cash or selling possessions listed below market price throughout that window can cause a charge duration. Deal with an elder law lawyer for spend down techniques that abide by rules, such as acceptable home modifications, oral work, hearing help, or pre-paid funeral plans. An effectively drafted caregiver contract can permit a parent to pay an adult child for care in the house before a relocation, which can be part of a compliant spend down.

If the person with dementia is wed, securities exist for the partner in the house. States enable a Neighborhood Spouse Resource Allowance and a Minimum Regular Monthly Maintenance Needs Allowance so the well spouse is not impoverished. The quantities adjust annually and vary by state, so confirm with your regional aging workplace or an elder law professional.

Veterans advantages that can bridge the gap

Veterans and surviving partners may qualify for a pension supplement called Help and Participation. It is not restricted to service-connected disabilities. To qualify, the veteran should have served during a wartime duration, fulfill property and earnings tests, and need help with day-to-day activities or need a protective environment due to dementia.

Monthly advantage quantities change 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 an enduring partner around 1,200 to 1,500. These are estimate. The Department of Veterans Affairs sets main Maximum Annual Pension Rates each year.

Two practical notes: initially, medical expenses lower countable income for eligibility, and memory care costs normally certify. Second, the pension can take months to authorize, but retroactive payments are common back to the application date. Families often use savings for a couple of months, then fold in the retroactive deposit to reconstruct reserves.

Long-term care insurance coverage, decoded in plain English

These policies help most when you understand the levers. Triggers trigger benefits when the insured needs aid with a minimum of two activities of daily living or has a cognitive disability that needs substantial supervision. Memory care citizens almost always fulfill the cognitive criterion once a doctor files it.

Elimination periods are waiting durations, often 30 to 90 days, before benefits pay. Some policies count calendar days, others just days when you receive paid care. If it is the latter, a short term plan that includes respite care nights or day-to-day adult day presence can move you through the removal period faster.

Daily or regular monthly caps matter. A 200 dollar daily cap is 6,000 dollars monthly on an one month calendar, but some months have 31 days. Policies with monthly caps handle variable month lengths much better. Inflation riders help older policies keep pace with today's prices. See life time maximums. If a policy has a 200,000 dollar life time swimming pool and you utilize 8,000 dollars monthly, the pool runs for about 2 years and one month.

Finally, reimbursement policies require proof of paid care and issue checks after the fact. Indemnity policies pay the complete day-to-day advantage once you certify, despite the invoice. That distinction identifies capital in the first months after a move.

Tax techniques that are typically overlooked

If a doctor licenses that an individual with dementia requires significant supervision and a plan of care exists, most or all of memory care costs can certify as medical expenses. If you itemize deductions, medical expenditures

above 7.5 percent of adjusted gross income can be deductible. Households often miss this since they presume space and board do not count. In memory care, they often do, provided the main reason for home is medical.



Adult kids who provide over half of a parent's support might have the ability to declare the parent as a dependent, which can open other tax factors to consider. The Kid and Dependent Care Credit can use to adult day services that enable a caregiver to work, though residential space and board is not qualified. Tax rules shift, so a brief talk to a CPA pays for itself.

Home equity, life insurance, and other assets

A paid off home is a significant tank of care dollars. Offering is uncomplicated, but not constantly the ideal call if a partner remains there. A reverse mortgage offers monthly earnings or a credit line protected by the home. It can cover in-home dementia care or bridge several years of memory care without forcing an immediate sale. Fees and interest are real costs, so model the numbers, including what occurs when the customer moves permanently to a facility.

Some life insurance coverage policies can be transformed to spend for senior care. Accelerated death benefits or life settlements turn a policy's worth into monthly payments. These are specialized and often pricey deals. Always compare the net proceeds to simpler alternatives, and take care about tax effects and Medicaid implications.

Annuities can turn a swelling sum into a predictable earnings stream. If using annuities as part of Medicaid preparation, structure matters. Work with an expert who understands your state's rules so you do not accidentally produce a countable asset.

Respite care and adult day programs as spending plan tools

Respite care is a short stay in a memory care neighborhood, normally from a week to a month. It is practical when a caretaker needs surgery, a break, or to test drive a neighborhood. The daily rate is frequently greater than the pro rata month-to-month rate, but it includes the exact same services. A well timed respite can prevent a crisis that would [BeeHive Homes of Plainview assisted living](#) otherwise lead to a costlier, 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 locations. For early to mid phase dementia, adult day coupled with targeted home care can hold off a move by months or more. It keeps the individual engaged and offers caregivers trustworthy time for work or rest. When a relocation ends up being required, the shift is calmer since the individual is already used to structured days and new faces.

Negotiating the right fit, not simply the right price

Rates are more flexible than they seem. Communities run promos when tenancy dips, especially in larger structures with a number of communities. Inquire about move-in specials, waived neighborhood costs, or base rate locks. Timing matters. End of the month can be better, and late fall often brings incentives.

Here are negotiation points that deserve airtime throughout tours

- Will you waive or prorate the neighborhood fee, and is it refundable within 30 days
- Can you cap annual boosts for the very first two years
- If the care level changes within 60 days, will you hold the initial level or adjust gradually
- Can we utilize our pharmacy, and will you match their packaging cost if you need bubble packs
- If we add hospice, which existing care charges will decrease

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

Protect quality while seeing the bottom line

There are methods to control expenses without damaging care. Smaller spaces lower lease, and numerous homeowners invest the majority 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 easily distressed by another person's rhythms. If wandering or nighttime agitation is prominent, a personal system may avoid conflicts that lead to add-on staffing fees.

Transportation charges build up when families depend on the neighborhood for every single medical visit. Telehealth for regular appointments and bundling specialized visits on one day can trim costs. On the medical side, periodic medication reviews prevent polypharmacy, which helps both health and the monthly med management fee.



When home remains the very best value

Home can be ideal for longer than people anticipate when 3 conditions hold. Initially, the physical environment is safe, with fall risks minimized, doors secured, and routines supported. Second, caregivers have trustworthy relief through respite care, adult day, or worked with aid. Third, agitation, incontinence, or night roaming are manageable without constant dispute. The budget needs to consist of replacement labor for family care if that relative gets sick or needs to take a trip. I press households to price the genuine plan, not the idealized one.

One caution. When dementia advances to behaviors that put others at danger, such as duplicated range use, aggressive outbursts, or wandering toward traffic, the tipping point shows up rapidly. A hurried move tends to be more costly and less notified. Exploring early, even if you do not sign, makes later on choices calmer.

Build a simple cash flow plan

Turn the planning into a one page tool that you can upgrade every six months. List month-to-month earnings on one side and repaired care costs on the other. Note the date when a personal policy begins paying, the end of any elimination duration, and the status of benefit applications like Help and Presence. Develop a column for anticipated annual increases. If cost savings are being drawn down, reveal the move course month by month. This makes household conversations concrete and goal oriented.

If a number of siblings are involved, settle on a single point individual for bills and benefits. Too many hands cause missed out on due dates and replicate payments. The very same opts for documents. Keep the power of lawyer, advance regulation, insurance plan, and the most recent care plan in one shared folder, paper and digital.

Red flags that can cost you later

A bargain rate is not a bargain if turnover is continuous, company staffing is the norm, or nurses are thin on the ground. I take notice of the energy in the dining-room, not just the menu. Are people actually consuming, and does personnel remain to help. Look for constant faces over a number of visits at different times of day. If sales promises do not match what you see at 7 p.m. On a Sunday, be careful.



Take a moment with the activity calendar. A complete page implies little if the space is quiet. You wish to see residents participated in ways that match various phases of dementia care. That might indicate a small group folding laundry, two people singing with a staff member, and another person strolling a circuit with mild cueing. Engagement lowers the requirement for expensive one to one staffing.

The role of respite care in testing a community

If you are torn between 2 locations, arrange a short respite stay in your leading choice. Take note of how the team discovers your person. Do they ask about regimens, favorite foods, and activities. How do they interact with you throughout the stay. If you entrust to clear notes and a settled feeling, that deserves as much as a little 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 mathematics and from understanding how advantages like Medicaid waivers, veterans pensions, and long-term care insurance really work. The timing side favors households who tour before a crisis and who utilize respite care or adult day programs to bridge modifications. The advocacy side shows up in concerns you ask during trips and in the agreements you negotiate.

When you do the work up front, you buy choices later. Families who understand their numbers, line up benefits, and push for rate protections tend to keep care stable even as needs grow. That steadiness is what matters. Memory care done well is not just a location. It is an organized way to deal with dementia that keeps a person safe, recognized, and engaged, while keeping the family's financial resources undamaged for the long haul.

BeeHive Homes of Plainview provides assisted living care

BeeHive Homes of Plainview provides memory care services

BeeHive Homes of Plainview provides respite care services

BeeHive Homes of Plainview supports assistance with bathing and grooming

BeeHive Homes of Plainview offers private bedrooms with private bathrooms

BeeHive Homes of Plainview provides medication monitoring and documentation

BeeHive Homes of Plainview serves dietitian-approved meals

BeeHive Homes of Plainview provides housekeeping services

BeeHive Homes of Plainview provides laundry services

BeeHive Homes of Plainview offers community dining and social engagement activities

BeeHive Homes of Plainview features life enrichment activities

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

BeeHive Homes of Plainview promotes frequent physical and mental exercise opportunities

BeeHive Homes of Plainview provides a home-like residential environment

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

BeeHive Homes of Plainview assesses individual resident care needs

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

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

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

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

BeeHive Homes of Plainview has a phone number of (806) 452-5883

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BeeHive Homes of Plainview has a website <https://beehivehomes.com/locations/plainview/>

BeeHive Homes of Plainview has Google Maps listing <https://maps.app.goo.gl/UibVhBNmSuAjkgst5>

BeeHive Homes of Plainview has Facebook page <https://www.facebook.com/BeeHivePV>

BeeHive Homes of Plainview has an YouTube page <https://www.youtube.com/@WelcomeHomeBeeHiveHomes>

BeeHive Homes of Plainview won Top Assisted Living Homes 2025

BeeHive Homes of Plainview earned Best Customer Service Award 2024

BeeHive Homes of Plainview placed 1st for Senior Living Communities 2025

What is BeeHive Homes of Plainview 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 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?

No, but each BeeHive Home has a consulting Nurse available 24 – 7. if nursing services are needed, a doctor can order home health to come into the home

What are BeeHive Homes' 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 Plainview located?

BeeHive Homes of Plainview is conveniently located at 1435 Lometa Dr, Plainview, TX 79072. You can easily find directions on [Google Maps](#) or call at [\(806\) 452-5883](tel:(806)452-5883) Monday through Sunday 9:00am to 5:00pm

How can I contact BeeHive Homes of Plainview?

You can contact BeeHive Homes of Plainview by phone at: [\(806\) 452-5883](tel:(806)452-5883), visit their website at <https://beehivehomes.com/locations/plainview/>, or connect on social media via [Facebook](#) or [YouTube](#)

You might take a short drive to the [Jimmy Dean Museum](#). Jimmy Dean Museum offers a low-impact cultural experience appropriate for assisted living, senior care, elderly care, and respite care visits.