

**Business Name:** BeeHive Homes of Crownridge Assisted Living & Memory Care

**Address:** 6919 Camp Bullis Rd, San Antonio, TX 78256

**Phone:** (210) 874-5996

## BeeHive Homes of Crownridge Assisted Living & Memory Care

We are a small, 16 bed, assisted living home. We are committed to helping our residents thrive in a caring, happy environment.

[View on Google Maps](#)

6919 Camp Bullis Rd, San Antonio, TX 78256

### Business Hours

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

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Deciding where an older grownup should live when independence begins to subside is one of the hardest choices families deal with. The choice is rarely almost bricks and mortar. It touches identity, security, money, family dynamics, and a lifetime of routines. When memory problems get in the image, the stakes rise even further.

Assisted living and memory care both sit under the broad umbrella of senior care, yet they serve different requirements and presume various levels of risk. As somebody who has actually walked households through these conversations, I have seen exceptional outcomes and some uncomfortable errors. The difference frequently comes down to timing, clear-eyed assessment, and honest conversations.

This guide unloads how assisted living and memory care differ in practice, who prospers where, and how to decide you can deal with, even if it is not perfect.



## How Assisted Living Suits the Senior Care Landscape

Assisted living was originally designed for older grownups who do not require a nursing home, but can not or ought to not live completely by themselves. The model concentrates on housing plus aid with everyday activities, layered with social chances and some basic health monitoring.

Residents normally have their own home or suite, with a private restroom and a little kitchen space. Personnel support typically includes assist with bathing, dressing, grooming, medication tips or administration, and often escorts to meals or activities. Meals, housekeeping, and transportation are frequently bundled into the monthly fee.

In lots of neighborhoods, assisted living works well for older grownups who:

- Can communicate their requirements, choices, and discomfort reliably
- Are mainly stable on their feet, with or without a walker
- Can follow basic safety guidelines, like using a call button or awaiting help to transfer
- Have mild lapse of memory however no major behavioral changes or wandering

Assisted living can be an excellent alternative to staying at home with an overstretched household or undependable outside aid. It can also extend self-reliance. A resident might use a walker safely, consume regular meals with peers, and receive timely medication, which can prevent falls and hospitalizations.

The obstacle occurs when memory modifications outmatch the environment. Assisted living structures are typically not locked. Doors may have alarms, but residents can still go out. Activities are not constantly tailored to cognitive disability. Personnel ratios are developed around locals who can generally manage themselves between arranged tasks. That is where memory care comes in.

## What Makes Memory Care Different

Memory care is a customized kind of elderly take care of people living with dementia, including Alzheimer's illness, vascular dementia, Lewy body dementia, and other cognitive conditions. Some neighborhoods are standalone memory care centers, while others are separate, secured wings within a larger assisted living building.

What identifies memory care is not only locked doors, however a different viewpoint of care. The goal shifts from supporting partial independence to actively managing risk, structure, and sensory input for someone whose brain can no longer dependably analyze the world.

In well run memory care systems, you generally see:

- Secured doors and confined outdoor spaces to prevent unsafe roaming
- Higher personnel to resident ratios compared to basic assisted living
- Staff trained in dementia interaction, redirection, and behavioral methods
- Simplified physical layouts to minimize confusion, with clear hints and landmarks

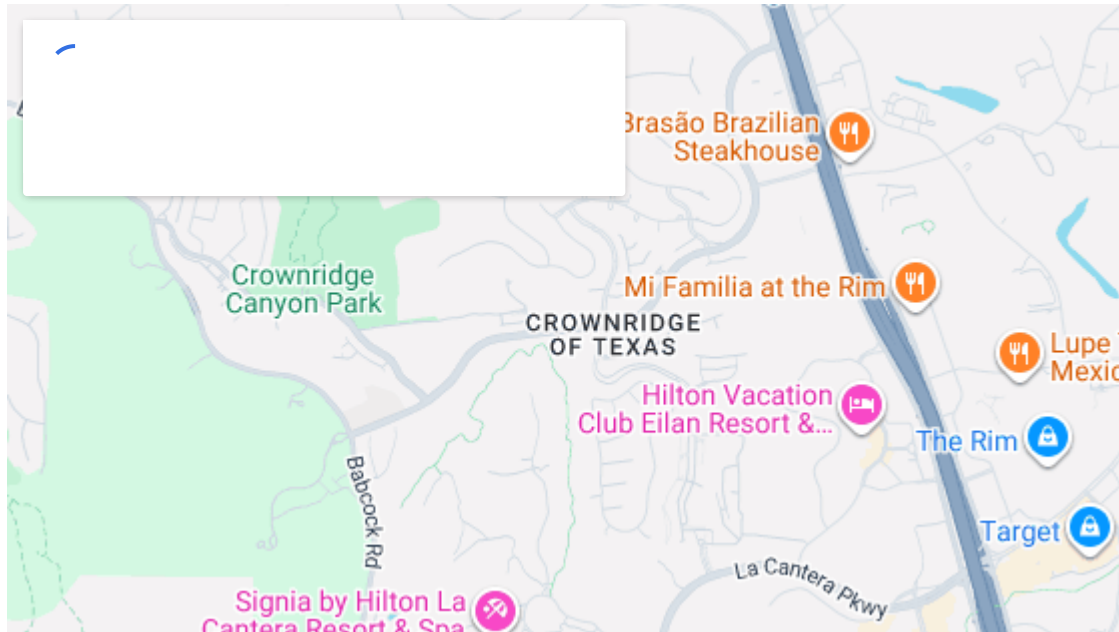
Schedules tend to be more structured. Meals take place at the same time, in the same place, with constant staff. Activities are much shorter, repeated, and built around maintained abilities instead of brand-new knowing. Lighting, sound levels, and visual clutter receive more attention due to the fact that sensory overload can set off anxiety or aggressiveness in dementia.

A person who consistently leaves the range on in the house, gets [senior care](#) lost on familiar routes, mishandles medications, or misinterprets basic directions is generally much safer in memory care than in a standard assisted living setting. The environment is not just safer for the resident, however also for other homeowners and staff, particularly when behaviors like nighttime wandering, exit looking for, or hostility appear.

# Assisted Living vs Memory Care: The Practical Differences

On paper, the distinctions in between assisted living and memory care can look nearly abstract. In practice, they appear in little daily minutes: who notifications that dad did not eat lunch, who redirects mom when she is trying to go "home" at midnight, who manages medications when there is suspicion or paranoia.

Here is a focused contrast of common functions households inquire about:



Aspect	Assisted Living	Memory Care
Primary purpose	Assistance with everyday tasks and socialization for fairly independent senior citizens	Secure, structured environment and specialized assistance for individuals with dementia
Safety features	Opened primary doors, call systems, some alarms	Protected doors, confined outside areas, alarmed exits, roam management
Personnel training	General senior care, basic dementia exposure	Focused dementia training, communication and behavior management skills
Personnel to resident ratio	Lower, based upon locals needing periodic help	Greater, recognizing regular cueing, monitoring, and behavior assistance
Daily structure	More versatile, option driven	More regular driven, predictable, and simplified
Cost	Normally lower	Typically greater due to staffing and security requires

These are broad patterns, not rigid rules. Some high end assisted living communities have strong dementia shows and staffing, while some budget plan memory care units run closer to fundamental custodial care. Touring specific structures, observing, and asking tough questions exposes more than any label.

## Behavioral and Cognitive Clues That Memory Care Might Be Safer

Families typically wait too long to move a loved one from assisted living to memory care, sometimes out of love, sometimes out of rejection. Homeowners may state, "I'm not insane, I'm not going behind locked doors." Adult kids do not want to be the bad guy. The result can be a dangerous "middle zone" where needs have actually grown out of the current setting.

Certain patterns must trigger a severe take a look at memory care, even if the person has not received a formal dementia medical diagnosis yet.

Repeated roaming or exit seeking is a major warning sign. In one case I remember, a gentleman in assisted living left the structure three times in a month, looking for his youth home. Staff discovered him rapidly each time, but the community was not protected. The family intended to delay memory care since "he has good days." Great days do not cancel out the danger on bad days. Memory care considerably reduced his elopement threat and his anxiety.

Escalating habits around sundown, in some cases called "sundowning," can likewise extend assisted living beyond its capacity. Homeowners might rate, shout, refuse care, or implicate personnel of taking. Assisted living personnel might not have sufficient time or dementia-specific training to step in early and successfully, particularly during hectic night hours.

Care rejections or misconstruing basic care tasks can likewise indicate that the individual no longer fits a primarily independent model. If staff must persuade, re-approach, and artistically reframe every shower or dressing effort, that work is much more in line with memory care staffing models.

Finally, reoccurring falls and bad security awareness are serious, even if injuries are small. A person who stands without locking their wheelchair, leans on an unsteady surface area, or forgets to use assistive gadgets might do much better where staff expect, and proactively address, such habits all day long.

## **When Assisted Living Is Still the Right Tier of Support**

Not everyone with a memory medical diagnosis should relocate to memory care right away. Moderate cognitive impairment, and even early dementia, can be workable in assisted living if the environment and supports are right.

Assisted living might still be appropriate when:

The individual can dependably use a call button and accept wait times of several minutes for staff action. Somebody who impulsively gets up alone every time they need the bathroom, even after teaching and reminders, may be better protected in memory care.



They keep in mind and browse familiar areas. Getting a little turned around in a brand-new hallway is one thing. Consistently getting lost in between their own house and the dining room, or going into other locals' rooms, suggests a greater level of guidance is warranted.

They can safely participate in group activities without ending up being overloaded or distressed. If a resident takes pleasure in bingo, exercise class, or chapel, even with some prompts, assisted living can nurture that engagement. If groups activate fear, agitation, or roaming, tailored memory care activities may work better.

Their habits do not regularly hinder others' safety or well-being. Occasional confusion is normal. Routine shouting, striking, sexually disinhibited behavior, or loudly accusing others can make a shared living environment untenable without the structure of memory care.

One essential subtlety: some assisted living communities now provide "improved assisted living" or "early memory support" programs. These can bridge the gap, delaying or preventing a relocate to a totally secured system. The quality of such programs differs commonly, so visit, talk with present families, and observe both day and evening shifts before counting on them.

## Costs, Agreements, and Hidden Financial Pressures

Money rarely drives the discussion at the very start, however it typically ends up shaping what is possible. Assisted living is generally less costly than memory care, however the space can narrow when you add on higher care levels inside assisted living.

Many assisted living communities utilize a tiered prices system. The base rate covers room, board, and minimal support. Additional costs make an application for medication management, incontinence care, escorts to meals, frequent transfers, and so on. As needs increase, monthly expenses creep up, often going beyond entry level memory care in the very same building.

Memory care, by contrast, often utilizes more bundled rates. The base rate includes a higher staffing level, secured environment, and detailed support with a lot of everyday activities. Families may experience less surprise add-ons, though there can still be additional charges for one-to-one supervision, medical products, or specialized equipment.

It is smart to study the admission agreement carefully. Pay specific attention to:

1. How the community specifies "too expensive a care requirement" for assisted living and what activates a mandatory transfer to memory care or discharge.
2. How rate boosts are managed, both yearly changes and modifications when the care level bumps up.
3. What happens if a resident's cash goes out. Some not-for-profit communities enable homeowners to stay after private funds diminish, using internal altruism funds or Medicaid. Others require discharge.

Families often prepare based on finest case scenarios: "If mom stays in assisted living at this rate, her cost savings will last 8 years." That works till she requires two person help for transfers, incontinence care, and constant cueing. Then the rate structure can alter dramatically.



Working with a financial planner who understands long term senior care expenses can assist line up expectations with truth. Long term care insurance coverage, if offered, might compensate differently for assisted living versus memory care, so accurate documents and center licensing status both matter.

# Using Respite Care to "Test Drive" a Setting

Respite care is a brief stay in a senior living community, typically ranging from a few days to a few weeks. Some households use respite when a main caretaker needs surgery or travel. Others utilize it tactically, as a method to see how a parent carries out in assisted living or memory care before dedicating to a permanent move.

For someone with moderate dementia, a respite stay in memory care can address a number of practical concerns:

Do they settle better with a structured regular than at home? If nighttime roaming, repetitive call, and skipped meals alleviate during respite, that is useful information.

How do they respond to group activities and a new environment? Some individuals flourish with peers and purposeful tasks like folding towels, watering plants, or singing familiar songs. Others become more upset. Staff observations throughout a 2 to 4 week stay can offer richer data than a one hour tour.

What level of hands-on assistance do they really need? Households often ignore or overestimate the concern they have actually been carrying. During respite, personnel track how many hints, prompts, and physical assists are required for toileting, bathing, dressing, and medications. This details assists identify whether assisted living can reasonably satisfy those needs.

Respite care can likewise lower the emotional shock of a relocation. The story becomes, "You are opting for a short stay while we repair the house/ while I recover," instead of, "You are leaving home forever today." Even if the respite shifts into a permanent relocation, lots of homeowners adjust better after that steady introduction.

## Key Concerns To Ask When Exploring Communities

A polished structure and warm sales pitch do not ensure strong dementia care. When you tour assisted living or memory care units, you find out more by concentrating on staffing, routines, and how personnel engage with locals than by appreciating the décor.

Here is a succinct checklist to bring in your pocket:

1. How lots of citizens does each direct care team member cover on days, evenings, and nights, and what is the normal mix of requirements?
2. How are staff experienced and refreshed on dementia interaction, de-escalation, and non-drug behavior management?
3. When a resident becomes upset or tries to leave, what is the basic process from the very first minute to resolution?
4. How does the community handle locals who are awake and roaming during the night? Is there purposeful engagement or simply redirection to bed?
5. Can the community look after citizens who require two individual support, are incontinent, or establish swallowing problems, and where is the line that activates discharge?

Ask to visit during mealtime and early night, not just mid-morning when most tours take place. Watch whether personnel speak with locals respectfully, utilize names, and make eye contact. Notice whether locals look groomed and relaxed or anxious and idle. Listen for alarms that ring constantly without reaction. These little observations often inform the truest story.

## Balancing Security, Self-respect, and Identity

Families in some cases frame the choice as independence versus safety. That is too narrow. A better lens considers security, self-respect, and identity together.

An older adult with significant memory disability might firmly insist, "I am fine alone." That statement reflects their identity: qualified, independent, experienced. Yet their real working may involve unpaid next-door neighbors, adult children, and emergency situation responders continuously covering holes in a system that no longer works.

In my experience, an excellent assisted living or memory care setting can protect dignity much better than a precarious home setup that collapses into crisis. Being found by police roaming numerous miles from home, dehydrated and frightened, wounds self-respect much more than residing in a neighborhood where doors lock for everyone's protection.

Still, environment matters. Memory care systems that treat grownups like young children, with infantilizing design and sing-song voices, strip identity. Strong programs look for who the resident utilized to be. They incorporate old pastimes into the day. They use life story boards, old photographs, and familiar music. They discover methods for homeowners to contribute, not just get care.

As you choose between assisted living and memory care, keep asking: In which environment is this individual most likely to feel like themselves, within the limits of the disease? The answer might change over time. What suits January might not fit next year as dementia progresses. Planning for that advancement decreases future panic.

## **Timing the Move: Earlier Than You Think**

Families frequently want to preserve a loved one at home or in basic assisted living "as long as possible." The expression sounds thoughtful, yet it frequently conceals 2 unmentioned presumptions: that staying put equates to joy, which a move equals failure. Neither is always true.

People with dementia tend to adapt much better to brand-new environments earlier in the disease, when they can still form some new associations and recognize patterns. They can find out which face belongs to which aide, which hallway results in the dining-room, which chair is "theirs." Waiting up until confusion is extensive can make every modification seem like a fresh threat.

Caregivers likewise stress out quietly. A partner in their late 70s may report that things are "manageable" while covertly monitoring their partner every night, cueing every task, and never leaving the house for more than an hour. Adult children might handle tasks and kids while fielding dozens of everyday call, false alarms, and crises. Moving earlier to assisted living or memory care can preserve the caretaker's health, not just the person with dementia.

As a rule of thumb, when security concerns, caregiver fatigue, or unmanaged behaviors exist most days of the week, it is time to plan a transition. This does not imply roughly uprooting someone overnight, but it does imply moving from "maybe someday" to particular trips, monetary planning, and potentially respite care as a bridge.

## **Pulling It Together: Making a Decision You Can Live With**

No senior care alternative is best. Assisted living and memory care both involve trade-offs in privacy, control, cash, and emotional convenience. Households in some cases wait on a mythical minute when everyone concurs, the resident is smiling, and the financial resources align perfectly. That moment hardly ever arrives.

What you can go for is a choice that is thoughtful, informed, and truthful about limitations. Clarify what you are focusing on. If avoiding roaming and nighttime emergency situations is vital, memory care may deserve the greater expense and the psychological difficulty of protected doors. If socialization, light assistance, and versatility matter most, assisted living might be the much better primary step, with an eye towards ultimate memory care.

Keep revisiting the decision over time. Dementia is not fixed, and neither are the capacities of family caretakers. A setting that fits at age 82 might not be safe at 86. Permitting yourself to change the strategy is not a betrayal. It is responsive, responsible elderly care.

Above all, remember that the move itself is not the amount overall of your relationship with your loved one. Your role modifications, but it does not disappear. You are still the historian, supporter, and emotional anchor. Whether they live in assisted living or memory care, your existence, perseverance, and desire to see the individual below the disease remain the most crucial constants in their senior care journey.

BeeHive Homes of Crownridge Assisted Living has license number of 307787

BeeHive Homes of Crownridge Assisted Living is located at 6919 Camp Bullis Road, San Antonio, TX 78256

BeeHive Homes of Crownridge Assisted Living has capacity of 16 residents

BeeHive Homes of Crownridge Assisted Living offers private rooms

BeeHive Homes of Crownridge Assisted Living includes private bathrooms with ADA-compliant showers

BeeHive Homes of Crownridge Assisted Living provides 24/7 caregiver support

BeeHive Homes of Crownridge Assisted Living provides medication management

BeeHive Homes of Crownridge Assisted Living serves home-cooked meals daily

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BeeHive Homes of Crownridge Assisted Living accommodates residents with early memory-loss needs

BeeHive Homes of Crownridge Assisted Living does not use a locked-facility memory-care model

BeeHive Homes of Crownridge Assisted Living partners with Senior Care Associates for veteran benefit assistance

BeeHive Homes of Crownridge Assisted Living provides a calming and consistent environment

BeeHive Homes of Crownridge Assisted Living serves the communities of Crownridge, Leon Springs, Fair Oaks Ranch, Dominion, Boerne, Helotes, Shavano Park, and Stone Oak

BeeHive Homes of Crownridge Assisted Living is described by families as feeling like home

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BeeHive Homes of Crownridge Assisted Living won Top Assisted Living Homes 2025

BeeHive Homes of Crownridge Assisted Living earned Best Customer Service Award 2024

BeeHive Homes of Crownridge Assisted Living placed 1st for Senior Living Communities 2025

### What is BeeHive Homes of Crownridge Assisted Living monthly room rate?

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Our monthly rate depends on the level of care your loved one needs. We begin by meeting with each prospective resident and their family to ensure we're a good fit. If we believe we can meet their needs, our nurse completes a full head-to-toe assessment and develops a personalized care plan. The current monthly rate for room, meals, and basic care is \$5,900. For those needing a higher level of care, including memory support, the monthly rate is \$6,500. There are no hidden costs or surprise fees. What you see is what you pay.

### Can residents stay in BeeHive Homes of Crownridge Assisted Living until the end of their life?

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

### Does BeeHive Homes of Crownridge Assisted Living have a nurse on staff?

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## People Also Ask about BeeHive Homes of Crownridge Assisted Living & Memory Care

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# **What are BeeHive Homes of Crownridge Assisted Living & Memory Care visiting hours?**

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Normal visiting hours are from 10am to 7pm. These hours can be adjusted to accommodate the needs of our residents and their immediate families.

# **Do we have couple's rooms available?**

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At BeeHive Homes of Crownridge Assisted Living & Memory Care, all of our rooms are only licensed for single occupancy but we are able to offer adjacent rooms for couples when available. Please call to inquire about availability.

# **What is the State Long-term Care Ombudsman Program?**

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A long-term care ombudsman helps residents of a nursing facility and residents of an assisted living facility resolve complaints. Help provided by an ombudsman is confidential and free of charge. To speak with an ombudsman, a person may call the local Area Agency on Aging of Bexar County at 1-210-362-5236 or Statewide at the toll-free number 1-800-252-2412. You can also visit online at [https://apps.hhs.texas.gov/news\\_info/ombudsman](https://apps.hhs.texas.gov/news_info/ombudsman).

# Are all residents from San Antonio?

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BeeHive Homes of Crownridge Assisted Living & Memory Care provides options for aging seniors and peace of mind for their families in the San Antonio area and its neighboring cities and towns. Our senior care home is located in the beautiful Texas Hill Country community of Crownridge in Northwest San Antonio, offering caring, comfortable and convenient assisted living solutions for the area. Residents come from a variety of locales in and around San Antonio, including those interested in Leon Springs Assisted Living, Fair Oaks Ranch Assisted Living, Helotes Assisted Living, Shavano Park Assisted Living, The Dominion Assisted Living, Boerne Assisted Living, and Stone Oaks Assisted Living.

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## How can I contact BeeHive Homes of Crownridge Assisted Living & Memory Care?

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Take a scenic drive to [Historic Market Square El Mercado](#) only about 29 minutes away from our BeeHive Homes of Crownridge Assisted Living & Memory Care