



Home Log Off Help

Jos [input field]

BWE Links

- Home
- Get Enrollment Form
- Get Disenrollment Form
- Contact TRICARE

Related Sites

- TRICARE Online
- US Family Health Plan

Name	Relation	Enrolled	Selected Plan	Primary Care Manager	Plan Start	Plan End	
Jos [redacted]	Sponsor	Yes	TRICARE Prime	[redacted]	12-21-2004	No End Date	[+][-]
[redacted]	Spouse	Yes	TRICARE Prime	[redacted]	01-01-2005	No End Date	[+][-]

Legend

- + Create New Enrollment
- Request Enrollment Card
- X Disenroll
- PC Change Primary Care Manager
- ⊗ Cancel Pending Enrollment
- ⊗ Cancel Pending Pcm Changes
- ✎ Edit/Update Address

ADSM can't disenroll through BWE. Icon is disabled

BWE Home | Logoff | Help | BWE Faq | TRICARE Online

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# Beneficiary Web Enrollment Online



Home Log Off Help

## Disenroll

### Select Reason for Disenrollment

Please select your reason for disenrollment.

*Beneficiaries will be covered under default medical benefits (Tricare Standard or Direct Care) after d*

\*Required

8]

Current Enrollment

**TRICARE Plan:**

TRICARE Prime

**Enrollment Period:**

01-01-2005-no end date

**\* Reason for Disenrollment:**

-- Select --  
-- Select --  
Dissatisfied  
Voluntary disenrollment  
Disenrollment because person has other health insurance

**Disenrollment Date:**

Continue

Cancel

Disenrollment date is set to last day of the month (hidden under drop down)

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Home

Get Enrollment Form

Get Disenrollment Form

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## Beneficiary Web Enrollment



[Home](#) [Log Off](#) [Help](#)

### Confirm Disenrollment

#### Confirm Disenrollment

Please confirm your TriCare disenrollment selections

r, Spouse

#### Current Enrollment

<b>TRICARE Plan:</b>	TRICARE Prime
<b>Enrollment Period:</b>	01-01-2005-no end date
<b>Reason for Disenrollment:</b>	Dissatisfied
<b>Disenrollment Date:</b>	12-31-2006

[Previous](#)

[Submit](#)

[Cancel](#)

#### BWE Links

[Home](#)  
[Get Enrollment Form](#)  
[Get Disenrollment Form](#)  
[Contact TRICARE](#)

#### Related Sites

[TRICARE Online](#)  
[US Family Health Plan](#)



## Confirmation

### Transaction Successful!

You have successfully submitted your request to disenroll.

[Home](#)

- BWE Links**
- [Home](#)
- [Get Enrollment Form](#)
- [Get Disenrollment Form](#)
- [Contact TRICARE](#)
- Related Sites**
- [TRICARE Online](#)
- [US Family Health Plan](#)