

Log in to Gallagher Student Health to check your information before creating your HealthSafe ID.



Let's get you registered

Create your [HealthSafe ID](#)® to help protect the security of your personal health information.

All fields are required unless marked as optional.

First Name

Last Name

Date of Birth (mm/dd/yyyy)

Identification Type [? Help](#)

Member ID **Check the member ID box**
 Caregiver
 Social Security Number

► Where can I find this information?

ZIP Code

Member ID

[Continue](#)

Enter your first and last name (as it appears in Gallagher Student Health) and your date of birth.

Make sure your date of birth is entered in the correct format: mm/dd/yyyy.

- Enter the 5-digit zip code for your address in Gallagher Student Health.
- If your address is international in Gallagher Student Health, you should enter 5 zeros.
Example: 00000

Enter your member ID from your Aetna member card.

This is W plus 9 numbers.
Example: W123456789