## Attachment 4.c. Recruitment Flyer Template (English)

<INSERT STATE RELEVANT PHOTO>

**MEDICAID PARTICIPANTS WANTED**

**FOR A PAID RESEARCH STUDY**

**WHAT:**  We are talking to small groups of adults to learn their likes and dislikes with <INSERT PROGRAM NAME>.

**PAYMENT:** You will receive $75 for your time and travel expenses.

**WHERE:** The discussion groups will last about 1 ½ hours and will take place at <INSERT LOCATION>.

**WHEN:** <INSERT AVAILABLE DAYS>

**WHO:** To participate, you must be:

* An adult 18 years or older
* Currently enrolled in Medicaid
* Participating in <INSERT PROGRAM NAME>

**CALL:**  If you are interested, call **[INSERT CONTACT INFORMATION]**. We will ask you a few questions to make sure you are eligible.

Travel vouchers may be available.

Sponsored by Centers for Medicare & Medicaid Services (CMS).