

**Background:** Medically tailored groceries (MTG) support the management of chronic, diet-related illnesses by providing healthy foods at no cost to low-income patients. Currently, the design of these innovative programs varies widely. Little is known about patient preferences for MTG program design that may increase uptake and adherence.

**Objective:** Present patient preferences regarding program design of an innovative MTG program to improve blood sugar control.

**Methods:** The Evaluating NutRitional Interventions in food-inseCure High-risk adults(ENRICH) randomized clinical trial (1 control:1 intervention) is enrolling 1100 Kaiser Permanente Medicaid patients with uncontrolled type 2 diabetes across California. The intervention provided a \$100/month voucher for purchase of healthy foods through an online grocery shopping platform for six months. We conducted in-depth qualitative interviews among participants of the intervention group. Interviews were conducted until thematic saturation was reached (n=22), and a structured rapid group analysis (Rap-GAP) was used.

**Results:** Patients genuinely appreciated the program for the food and convenience it provided. Some faced challenges related to the technical novelty of the program, including required credit card use, navigating the online platform and weaving multiple payment methods. Suggestions for enhancing the program included, covering more food items, such as healthy proteins; offering personalized diet guidance to inform shopping choices; and offering prepared meals. While grateful for the \$100 stipend, many patients suggested determining the amount/dose by household size to truly make an impact.

Patients further shared a desire for additional health education and whole person care, that included services such as culturally appropriate nutrition and cooking education, exercise groups, mental health and motivational support to continue long-term healthy habits.

**Conclusion:** Qualitative interviews regarding a novel MTG program design revealed patient appreciation and a desire for whole person care. Opportunities and limitations of MTG in the context of CalAIM budget and regulatory constraints will be explored.