Health insurers and pharmacy benefit managers are powerful purchasers who use their leverage to negotiate steep discounts. Multiple sources confirm medicine spending growth was between just 3 and 5 percent in 2016, the slowest rate in years. Unfortunately, it doesn’t feel that way for patients because out-of-pocket costs for brand medicines have increased 48 percent since 2013. In fact, more than half of commercially insured patients’ out-of-pocket spending is based on the list price, even if their insurer receives a steep discount.

So why doesn’t it feel that way?