Dr. John Bruno from the University of North Carolina said that the loss of the Great Barrier Reef's corals is "like clear-cutting a redwood forest." He went on:

In 10 years, you're going to have a lot of stuff on the ground, but you're not going to have the old-growth forest back. Some of these corals were 10, 30 years old, but a lot of them were centuries old. In 100 years—if there is no more warming—they could return

In 100 years, they could return.

Dr. Hughes and his colleagues, however, were less optimistic in their nature paper. They wrote: "The most likely scenario, therefore, is that coral reefs throughout the tropics will continue to degrade over the current century until climate change stabilizes, allowing remnant populations to reorganize into novel, heat-tolerant reef assemblages." Remnant populations are all they expect to survive.

Researchers are trying to understand the consequences of losing so much coral in our seas. Obviously, if you harm the corals, you harm the reef; if you harm the reef, you destabilize life throughout the reef, and that is bad for oceans.

A recent paper in Global Change Biology found severe declines in the populations of the fish most connected with the corals hit hardest by the bleaching. So the cascade effect is already observed.

The Great Barrier Reef even sounds different. A study published last week in the Proceedings of the National Academy of Sciences compared the lively underwater cacophony of a vibrant Great Barrier Reef in 2012 with the quiet of bleached locations in 2016. The life that teems around a healthy reef decreased with the loss of the corals.

There are actually some open-ocean species, like juvenile clownfish—or the Nemos—that actually rely on sound coming off these reefs from all the life and all the feeding and all the activity and that actually use that sound to find reefs to go settle on. So this quiet of dying reefs makes their job of finding new homes harder.

Climate change makes the heat waves that spur coral bleaching more intense and also more frequent, leaving corals less time to recover before the next heat wave hits, and we may see the more vulnerable corals fail to recover at all as the waters warm too much for them to survive.

A study published earlier this year in Science looked at 100 tropical reefs and found that only 6 had avoided bleaching. Bleaching events that occurred in the past, once in a generation, now occur around every 6 years. As the Guardian summarized it, "Repeated large-scale coral bleaching events are the new normal thanks to global warming."

So what can we do about it? Scientists are working to better understand what makes certain corals more resilient and to try to use these lessons

to protect more vulnerable species. But that research nibbles at the fringes of this global die-off. There is some localized work on things like sun shields to help protect shallow corals during peak heat. Senator McCain and I visited efforts to rebuild shattered coral reefs in Indonesia, but these tiny efforts can't offset the global onslaught of climate change unless we move fast to address the real problem.

Australia announced last week that it would invest around \$400 million in a patchwork of efforts to protect the Great Barrier Reef: increasing monitoring and enforcement, for instance; limiting pollution runoff from shore: trying to keep out certain invasive starfish; and trying to help restore lost corals. But the plan does not address the main culprit behind coral bleaching, and that culprit is climate change. Scientists noticed that omission, including the Australian Academy of Science, which pointed out the problem that the reef is "highly vulnerable to climate change," and "urge[d] the government to address the cause of the problem."

The call of those scientists is a call that we, too, ought to heed. One of the great wonders of God's Earth is on its way to turning into a sandy relic because we are unwilling to say no to the fossil fuel industry. It is that simple.

This coral die-off is one of innumerable consequences that our Earth is already warning us with. It is not the only signal; it is one of many. But nothing that can't be monetized for an industry seems to get our attention around here. Instead, it appears we will have to look future generations in the eye and tell them that there was once a Great Barrier Reef, that it was one of the wonders of the world, and that we let it die to keep the fossil fuel industry happy.

It is time we woke up.

I yield the floor.

The PRESIDING OFFICER. The Senator from Tennessee.

## HEALTHCARE

Mr. ALEXANDER. Mr. President, for the sixth consecutive year, ObamaCare insurance rates are going up, and Democrats are already running around pointing fingers, trying to find someone else to blame.

About 10 days ago, the distinguished Democratic leader came to the floor and warned that, very soon, health insurance companies will be announcing rates for 2019 in each State across the country. He said that many health insurance companies will propose rate increases.

Today, several Democratic Senators held a press conference saying that insurance rates are going to go up in 2019. Well, they are exactly right. Insurance premiums are going to go up in 2019, just as they have for the 5 previous years of ObamaCare. But they are exactly wrong about who to blame.

The Democrats wrote the bill. They wrote ObamaCare, and they voted for ObamaCare—every single one of them.

Not a single one of us voted for ObamaCare. They wrote the bill. If they are looking for someone to blame, they should look in the mirror.

Running around, pointing fingers, and trying to find someone else to blame is a little like selling somebody a house with a leaky roof and then blaming the new owner for the leaky roof. Democrats built the house with the leaky roof. They built these insurance markets—the individual markets. where no one can find insurance. They wrote the sloppy law. They failed to make the markets competitive, and they erased the ability of consumers to have choices. They didn't follow the law when they paid out cost-sharing payments that were designed to help low-income Americans pay for their out-of-pocket expenses, and—this is the very worst-when Republicans were prepared 1 month ago to stabilize these markets and, according to the Oliver Wyman healthcare experts, to lower rates by up to 40 percent over 3 years, the Democrats said no.

President Trump asked Speaker RYAN and he asked Senator McConnell to put that bipartisan proposal in the omnibus spending bill that passed. The Republicans said yes, and the Democrats said no. So the rates are going up because Democrats wrote the law, and they said no to lowering the rates.

What Democrats don't say—but every American should know very well—is that health insurance rates didn't start increasing when President Trump took office 15 or 16 months ago. Insurance rates have been increasing since ObamaCare took effect more than 5 years ago.

In 2010, there was a big discussion at the Blair House. I was invited to make the Republican case for President Obama, who stayed there all day and listened.

I said: Respectfully, Mr. President, the Affordable Care Act will not work. I said directly to him that ObamaCare would send an unfunded Medicaid mandate to States. It did.

I said: It will cut Medicare by one-half trillion dollars. It did.

I said: There will be new taxes in it. There were.

I said: It will mean that for millions of Americans, premiums will go up because when people pay those new taxes, premiums go up, and they will also go up because of the government mandates—and they have, for 5 years. Now the Democrats are pointing out that their law, which they passed, will cause rates to go up for the sixth consecutive

year.

Back in 2010, I said: Our country is too big, too complicated, too decentralized for Washington, DC—just a few of us here—to write a few rules about remaking 17 percent of the economy all at once. That is the size of the healthcare economy. That sort of thinking works in the classroom, but it doesn't work very well in the big, complicated country which is the United States of America. Since the

ObamaCare exchanges opened in 2014, history has proved this—what I said—to be right.

The Affordable Care Act has not worked the way Democrats promised. It certainly hasn't worked that way for Marty, a farmer in Tennessee who stopped me at a Chick-fil-A last December. She wanted to tell me that before ObamaCare her rates were \$300 a month. She is in the individual market. She doesn't get a subsidy. She pays these rates herself. This year, it is \$1,300. Next year, it will be more.

Rates in Tennessee for people like Marty went up 58 percent this past year. That is a lot of money. People can't afford it. She is one of thousands of others in Tennessee who have seen their premiums increase 176 percent since 2013, the year before the ObamaCare marketplaces opened.

The Affordable Care Act hasn't worked for the 9 million Americans, like Marty, who purchased their health insurance in the individual market and received no government subsidy. They have been hammered by skyrocketing insurance premiums, and Democrats come to the floor and say: Well, they are going up for the sixth straight year.

If I were them, I would want to keep it quiet. But, no, they are looking for somebody to blame. They don't want to look in the mirror. They wrote the bill. They are the reason the rates are going up. They have rejected any reasonable attempt to change the law. They will not even support changes that they are for—that they know aren't working.

The Affordable Care Act does not work because it is too Washington, DC, focused. It has made insurance too expensive, and it is hurting the American people. So last year, Republicans tried to repeal the law to help make health insurance work again for people like Marty, the farmer I met at Chick-fil-A. We came up short.

While I hope that Senators Graham and Cassidy can build a coalition to try again, there is still the urgent problem of skyrocketing ObamaCare premiums. It did not have to be this way. The Senator from Washington, Mrs. Murray—the lead Democrat on the Senate HELP Committee—and I last year announced that we would hold hearings to see if there were steps Congress could take to stabilize and strengthen the individual health insurance markets so that Americans could buy insurance at affordable prices in 2019.

President Trump called me in August of last year, and he asked me to work with Senator MURRAY to try to come up with a temporary solution so people who were hurt by the skyrocketing ObamaCare prices would not be hurt while Congress concluded what to do in the long term. In September, our committee hosted four bipartisan hearings. We invited all of the Senators to come to meetings before the hearings. We had about half of the Members of the Senate involved in those meetings and

hearings. Out of those meetings and hearings, we came up with three proposals that Congress could pass that would temporarily lower rates over the next 3 years, according to Oliver Wyman, one of the most well-respected healthcare experts in the country, by up to 40 percent over those 3 years.

No. 1, our proposal had 3 years of reinsurance grants at \$10 billion a year so States could create funds to insure the needs of the very sick. You take the very sick out of the pool, care for them, and then you can lower the rates for everyone in the individual market. That is 3 years and \$10 billion a year. That was the first proposal.

No. 2 is 3 years of cost-sharing reduction subsidies to help low-income Americans pay out-of-pocket expenses. It is counterintuitive, but when you pay those expenses, you actually lower the deficit. You lower the cost to taxpayers because it lowers the premiums, and that lowers the subsidies. You actually save taxpayer money when you pay those 3 years of cost-sharing subsidies.

No. 3, we took a provision that is in the Affordable Care Act called the innovation waiver—it was already there, and it wasn't working—and we agreed to streamline it so that it would work and the State might make an application and say we have a better idea.

We said: You can't change the essential health benefits and you can't change the prohibition on lifetime limits. You still have to give people an offer of insurance if they have a preexisting condition. All of those provisions and protections were still in our bill, but that new flexibility would have allowed Iowa and other States to increase their choices and lower premiums. It would have allowed New York, Minnesota, and New Hampshire to do things their Democratic Senators said they badly wanted to do and their Governors said they badly wanted to

There was new authority for a catastrophic insurance policy with lower premiums and higher deductibles that people could choose. That was in there too. This is the package that the Oliver Wyman expert said if you are a contractor and you are making \$60,000 and your insurance is \$20,000, it could reduce your premium from \$20,000 to \$12,000 over 3 years. That was the package

Almost all Democrats liked those three ideas. The truth is, a lot of Republicans and conservative groups were skeptical about them because they said it would "shore up ObamaCare." But the Congressional Budget Office said that if the scoring reflects the costsharing payments being paid, our proposal would actually save taxpayer dollars by lowering premiums and, therefore, lowering subsidies.

So this would sound like a very good proposal; wouldn't it? It is something that at one point Democratic leaders said every Democrat could vote for, something that more than half of the Senate participated in—reinsurance, cost-sharing subsidies, and more flexibility without changing the basic guarantees of the Affordable Care Act. That sounds very much like a proposal that might come from the other side of the aisle, not the Republican side of the aisle. Yet, on the Saturday before we passed the omnibus spending bill, President Trump called Speaker RYAN and Senator McConnell and said: Will you please put that provision in the omnibus spending bill?

They said yes. The Democrats said no.

The Democrats have written this ObamaCare bill, which for 6 years has raised rates. Then, we come up with a proposal that every Democrat should like, and they say no. They will not even support changing one sentence of a law, even if it changes parts that don't work and that they are for.

What was their reason? Here is their reason. They would not apply to our proposal the traditional Hyde compromise language regarding Federal funding for elective abortions. What that basically says is that there may be no Federal funding for elective abortions, but States may do what they want. That has been the compromise since 1976. Since 1976, in every omnibus appropriations bill, Democrats have voted for that. In fact, all those weren't omnibus bills. Some of them were different appropriations bills. Since 1976, in every appropriations bill, Democrats have voted for the Hyde amendment. In the omnibus appropriations bill that we passed a month ago, Democrats voted for the Hyde amendment more than 100 times in other proposals, but they would not vote to lower health insurance rates by 40 percent over 3 years.

I will say that again. Even though they voted for the Hyde language every year since 1976 and voted for it 100 times in the omnibus bill, they would not vote for it. They would not vote for our proposal to lower rates even though it was bipartisan because they didn't want to apply that same compromise Hyde amendment to health insurance.

Howard Baker, the Senate majority leader, once said that the essence of Senate leadership is becoming an eloquent listener. That means hearing and understanding what people have to say because what they are saying is not always what they mean.

My conclusion is that, by their words and by their actions, what Democrats really were saying is this: We will not change one sentence of ObamaCare, even the parts that obviously are not working and even when most of the Democrats would support the policy and the changes.

Given the Democrats' attitude, I know of nothing that Republicans and Democrats can agree on to stabilize the individual health insurance market. I know of nothing.

No one regrets Congress's failure to reach an agreement on this more than

I do. I ran for the U.S. Senate because I wanted to achieve bipartisan results on important issues. I have often been able to do that, but I literally struck out here.

When Democrats blocked these proposals from being included in the omnibus in March, I said: "Now let's look down the road . . . insurance companies will announce their rates for 2019 . . . and rates will continue going up instead of going down."

They are right about that. Already in the last few days, it has been announced that rates will go up in 2019. Millions of Americans will be hearing more about that. The Democrats could have worked with us to lower premiums by up to 40 percent. They instead chose to cling to an unworkable law, to skyrocketing rates, and to reject any change that would have temporarily reduced rates, even though the President and the Republican leaders were willing to support ideas that the Democrats, as a matter of policy, almost unanimously support.

For relief, we will have to turn to the Trump administration and to the States. I am encouraged by Labor Secretary Acosta's proposed rule on association health plans. It would help some self-employed Americans, like Marty, the farmer, and employees of small companies to buy the same kind of insurance with the same lower cost and the same protections that roughly 160 million Americans who work for large employers have today. In other words, if you work for IBM, you in effect get about a \$5,000 average tax break because of the way the tax law applies to employer insurance. We would like to give the same opportunity to the self-employed and to people in small businesses.

The Trump administration has also proposed a rule that would reaffirm the role of States in regulating short-term health insurance and that could provide a coverage option for Americans who are uninsured because plans in the Affordable Care Act markets are too expensive. Neither of these changes require the approval of Congress.

I am talking with Secretary Azar and Seema Verma, the Administrator of the Centers for Medicare and Medicaid Services, about other administrative actions they can take to give States more flexibility within the current law to help lower health insurance premiums, especially for the 9 million working Americans who do not receive a Federal subsidy in the individual market.

Those are the ones who are getting hammered. Those are the one whose rates we could have reduced by up to 40 percent over the next 3 years, but the Democrats said no

I will be encouraging Governors and State insurance commissioners to do everything they can to repair the damage caused by the Affordable Care Act, but my own efforts as chairman of the HELP Committee will turn to other pressing healthcare issues, including

the opioid crisis, overall healthcare costs, electronic healthcare records, prescription drug prices, and the 340B program.

Contrary to the Democratic leader's speech, this is not a crisis of Republicans' making. Democrats should look in the mirror. The last 5 years and the upcoming 6 years of premium increases are the fault of a law designed, drafted, and voted on exclusively by Democrats.

Last year, Republicans freed Americans from the individual mandate requirement, which was a tax on the poor that forced many Americans to buy insurance they couldn't afford or didn't meet their needs. We tried to provide even more freedom from this unworkable law, but, as I have detailed, Democrats said no.

If you have an insurance premium that is going up 40 percent next year, on top of the more than 105 percent increases since 2013, you can thank the Democrats. If you would like greater choice and an opportunity for lower premiums, you should support Republicans.

I yield the floor.

The PRESIDING OFFICER. The Senator from Wisconsin.

NOMINATION OF MICHAEL BRENNAN

Ms. BALDWIN. Mr. President, I rise this afternoon to urge my colleagues to oppose the confirmation of Michael Brennan to the U.S. Court of Appeals for the Seventh Circuit. By bringing Mr. Brennan's nomination forward without my support, Chairman GRASSLEY and Leader McConnell are breaking with a longstanding Senate tradition that has guaranteed a voice for home State Senators, regardless of party, in the consideration of judicial nominees.

The blue slip is an important part of this institution and its historic respect for the rights of each Senator, as well as the rights of the minority party. As the chairman of the Judiciary Committee, Mr. Grassley himself wrote in 2015:

This tradition is designed to encourage outstanding nominees and consensus between the White House and home State Senators. Over the years, Judiciary Committee chairs of both parties have upheld a blue-slip process, including [most recently] Senator Patrick Leahy of Vermont . . . who steadfastly honored the tradition even as some in his own party called for its demise. I appreciate the value of the blue-slip process and also intend to honor it.

Today, respect for that time-honored blue slip comes to an end. Not only is Michael Brennan being considered on the Senate floor, but tomorrow the Senate Judiciary Committee will hold a hearing on a nominee for a traditional Oregon seat on the Ninth Circuit for whom neither Oregon Senator has returned a blue slip. I urge my colleagues to recognize that while today's action disrespects my role as the junior Senator from Wisconsin, tomorrow it may well be you. With the majority's choice to end this tradition, each of us is diminished in our own ability to represent the constituents who chose to send us here.

I did not return a blue slip for Michael Brennan because his nomination does not reflect the consensus between the White House and home State Senators that the chairman of Judiciary Committee, Mr. GRASSLEY, praised in 2015. Mr. Brennan did not receive the requisite support from Wisconsin's bipartisan judicial nominating commission, which has been used in some form for nearly four decades to identify candidates for Federal judgeships in my home State. Senator JOHNSON and I have worked to continue this longstanding process during my tenure in the Senate, and it has actually produced consensus nominees who have been confirmed to two vacancies on our district courts and for two U.S. attorney positions.

More troubling still is a fact made clear in Mr. Brennan's answers to the Judiciary Committee's questionnaire; namely, that President Trump never intended to respect that commission's work for this vacancy. The White House interviewed Michael Brennan for the job on the very day our bipartisan nominating commission began to solicit candidates for its consideration.

Chairman Grassley has made an argument that the White House engaged me in meaningful consultation regarding this vacancy. It is true that White House Counsel Don McGahn called me to inform me that Mr. Brennan was the President's choice. I urged him, instead, to consider consensus nominees who could garner bipartisan support, including Donald Schott, who earned the requisite support of Wisconsin's nominating commission. He also garnered Senator Johnson's and my blue slips in the last Congress as well as the support of a bipartisan majority of the Senate Judiciary Committee. Sadly, he didn't come up for a confirmation vote due to obstruction in setting the calendar—a choice by the majority leader. Unfortunately, instead of nominating a consensus candidate, President Trump chose to move forward in a partisan manner on this vacancy.

Seven years ago, the U.S. Senate respected the prerogative of my colleague and my senior Senator, Mr. JOHNSON—then a newly elected Senator from Wisconsin-when he objected to a nominee for this very vacancy whose selection he had not had a role in. Mr. Brennan himself, at the time, coauthored an op-ed in our State's largest newspaper that praised Senator JOHN-SON's refusal to return a blue slip for that nominee, Victoria Nourse. When President Obama made a second nomination for this position in 2016, I am confident Senator LEAHY would not have allowed that nominee, Donald Schott, to have advanced in the Judiciary Committee without my senior Senator's blue slip.

Today, I am not being accorded the same respect. Today, we send the message that neither this nor a future President needs to respect the role of home State Senators in the selection of judicial nominees. I urge my colleagues