- (3) notwithstanding the reason for cancellation or nonrenewal, a statement that:
- (i) identifies the category of risk, the total number of risks written by the insurer in that line of business, and the number of risks intended to be canceled or not renewed;
- (ii) explains how the cancellation or nonrenewals, if approved, will be implemented with respect to individual risks and the steps that will be taken to ensure that the cancellation or nonrenewal decisions will not be applied in an arbitrary, capricious, or unfairly discriminatory manner or in violation of § 27–501 of this title; and
- (iii) includes any other information that the Commissioner reasonably requires.
- (c) If a plan of withdrawal filed with the Commissioner is not accompanied by the information required by this section, the Commissioner may so inform the insurer and the plan of withdrawal will be deemed filed when the information is provided to the Commissioner.
- (d) After an insurer has filed a plan of withdrawal with the Commissioner, the insurer shall notify in writing each of its insurance producers in the State that the insurer has filed a plan of withdrawal.
- (e) The Commissioner shall review each plan of withdrawal to determine its compliance with this section and § 27–501 of this title.
- (f) (1) (i) The Commissioner shall disapprove each plan of withdrawal that does not comply with this section.
- (ii) If the Commissioner disapproves a plan, the Commissioner shall issue an order of disapproval that includes specific reasons for the disapproval.
- (2) (i) Subject to paragraph (3) of this subsection, a plan filed under this section is deemed approved if the Commissioner fails to approve or disapprove the plan within 60 days after the date of filing by the insurer.
- (ii) If a filing is deemed approved under this paragraph, the filing becomes effective on the 60th day after the date of filing.
- (3) If the Commissioner does not have sufficient information to determine whether a filing or amended filing meets the requirements of this section, the Commissioner:
- (i) shall require the insurer to provide the necessary information; and
- (ii) may extend the period for approval until the information is provided.
- (4) A plan may be withdrawn or amended by the insurer at any time before approval.