

2. THE LOSS OF OR SUBSTANTIAL CHANGES IN APPLICABLE REINSURANCE; OR

3. SIGNIFICANT FINANCIAL LOSSES TO THE INSURER.

(2) The plan of withdrawal shall contain a statement by an elected officer of the insurer that the cancellation or nonrenewal action is necessary as a result of:

- (i) The loss of or substantial changes in applicable reinsurance;
- (ii) Financial losses of the insurer; or
- (iii) Any other business or economic reason of the insurer.

(3) If the reason for the cancellation or nonrenewal is loss of or substantial changes in reinsurance, the plan of withdrawal shall contain a statement:

(i) That the insurer has made a good faith effort to obtain replacement reinsurance, but was unable to do so due to either the unavailability or unaffordability of replacement reinsurance;

(ii) Explaining how the loss of, or reduction in, reinsurance affects the company's risks throughout the entire line or category of insurance proposed for cancellation or nonrenewal; and

(iii) Explaining why cancellation or nonrenewal is necessary to cure the loss of or reduction in available reinsurance.

(4) Notwithstanding the reason for cancellation or nonrenewal, the plan of withdrawal shall also contain a statement:

(i) Identifying 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 cancelled or not renewed;

(ii) Explaining 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 § 234A of this article; and

(iii) Including any other information the Commissioner reasonably requires.

(5) [The Commissioner shall review the plan of withdrawal to determine its compliance with § 234A of this article.

(6)] If a plan is not accompanied by the information required by this subsection, the Commissioner may so inform the insurer, and the plan shall be deemed filed when the information is furnished to the Commissioner.

(6) ONCE A PLAN IS FILED, THE INSURER SHALL: