



WILLIAM TODD OVERCASH

License Number: ME56492

Data As Of 5/10/2025

Profession	Medical Doctor
License	ME56492
License Status	NULL AND VOID/
License Expiration Date	1/31/2015
License Original Issue Date	10/17/1989
Address of Record	If further information is needed, please contact the Department of Health at (850) 488-0595.
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	Yes
Public Complaint	Yes

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
OVERCASH, WILLIAM TODD	56492	MEDICAL DOCTOR	OCALA	FL	200816618	RESTRICTED FROM PRACTICE
OVERCASH, WILLIAM TODD	56492	MEDICAL DOCTOR	OCALA	FL	200816629	RESTRICTED FROM PRACTICE
OVERCASH, WILLIAM TODD	56492	MEDICAL DOCTOR	OCALA	FL	201024224	OBLIGATIONS IMPOSED
OVERCASH, WILLIAM TODD	56492	MEDICAL DOCTOR	OCALA	FL	201314896	SUSPENSION

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
OVERCASH, WILLIAM TODD	56492	MEDICAL DOCTOR	OCALA	FL	201314896	AC FILED
OVERCASH, WILLIAM TODD	56492	MEDICAL DOCTOR	OCALA	FL	200816618	AC FILED
OVERCASH, WILLIAM TODD	56492	MEDICAL DOCTOR	OCALA	FL	200816629	AC FILED
OVERCASH, WILLIAM TODD	56492	MEDICAL DOCTOR	OCALA	FL	201024224	AC FILED

If a link does not appear for the case number, we do not have a scanned copy of the final order available in our database. To obtain a paper copy, please contact Public Records by clicking the link below:

[Discipline Public Records Request](#)

You may also contact Public Records by telephone at (850) 245-4252, option 4 or by written correspondence at:
Division of Medical Quality Assurance
Public Records
4052 Bald Cypress Way, Bin C01
Tallahassee, FL 32399-3251

Please include the following:

1. Full name and license number of the practitioner;
2. Name and address where documents are to be sent; and
3. If you require certification of the documents, a \$25 fee will be charged, in addition to the duplicating charges. Certification of the requested records will not be done unless specifically requested. An invoice will be sent to you and payment will be expected within thirty days. Upon receipt of payment, material will be sent to you.

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